

| 2024 NAEC Accreditation Criteria for  | Level 3 Centers   |  |
|---|---|--|
| Epilepsy Center Criteria  | Verification Method/Notes -<br>Center Does NOT Perform Surgery  | Verification Method/Notes –<br>Center Does Perform Surgery   |
| EPILEPSY MONITORING UNIT – Core Criterion   |   |  |
| All NAEC Centers are required to have an EMU that includes:   |   |  |
| 1) Designated hospital beds where video and EEG data is captured and sent to a central location   | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy   |  |
| 2) Remote-control video cameras with 24/7 recording available (not a fixed camera)  | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy   |  |
| <ol> <li>Trained personnel dedicated 24/7 to monitoring video and EEG – someone trained in<br/>seizure recognition and recording integrity, not necessarily a traditional EEG<br/>technologist</li> </ol> | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy   |  |
| 4) EMU safety-trained inpatient nurses  | with appropriate details  | oort Response "Yes"<br>s in uploaded EMU policy  |
| 5) Epilepsy-specific staff training and protocols for seizure safety  | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy   |  |
| 6) Clinical decision-making by an epileptologist  | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy   |  |
| EPILEPSY CENTER SERVICES  |   |  |
| 1) Electrodiagnostic Services   |   |  |
| a) 24-hour video-EEG with scalp electrodes  | Adequate volume of 50+ EMU admissions reported on Annual Report Upload 2 EMU reports from patients admitted in a single month in 2023. Pediatric and Adult/Pediatric centers must upload a report for a patient younger than 2 years old. |  |
| b) 24-hour video-EEG recording with intracranial electrodes (subdural, epidural, or depth electrodes)   | Not required  | Adequate volume of at least 6 cases from 2021 to 2023. Upload 6 reports from 2021 through 2023, including at least one report from 2023. |
| c) Access to Wada testing or functional neuroimaging  | Not required  |  |
| d) Functional cortical mapping by stimulation of intracranial electrodes  | Not red   | quired   |
| 2) Imaging Services   |   |  |
| a) Magnetic resonance imaging (at least 1.5T)   | Upload 1 report from 2023 reflecting expertise in epilepsy signed/approved by the neuroradiologist listed in Center Annual Report   |  |
| b) Computerized axial tomography  | Center Annual Report Response "Yes"   |  |
| c) Cerebral Angiography   | Not required  |  |

| 2024 NAEC Accreditation Criteria for Level 3 Centers   |  |   |
|--|--|---|
| Epilepsy Center Criteria   | Verification Method/Notes - Center<br>Does NOT Perform Surgery | Verification Method/Notes –<br>Center Does Perform Surgery                                    |
| c) Access to interictal PET or ictal/interictal SPECT by established arrangement or on site  | Not required   |   |
| 3) Pharmacological Services: Quality-assured anticonvulsant serum drug levels  | Center Annual Report Response "Yes"                            |   |
| <b>4) Neuropsychological/psychosocial services</b> : Comprehensive neuropsychological test batteries   | Upload 1 report from 2023                                      |   |
| 5) Surgical Services   |  |   |
| a) Any resective or ablative epilepsy surgery with goal of controlling seizures  | Not required   | Upload 1 operative report from 2023 signed by the neurosurgeon listed in Center Annual Report |
| b) Placement of intracranial electrodes  | Not required   | Center Annual Report Response "Yes" if center performs service                                |
| c) Implantation of the vagus nerve stimulator  | Not required   | Upload 1 report from 2023 if center performs service  |
| d) Management of the vagus nerve stimulator  | Center Annual Report Response "Yes"                            |   |
| e) Access to implantation of intracranial neuromodulatory devices (DBS, RNS)   | Center Annual Report Response "Yes" (adult centers only)       |   |
| f) Access to management of intracranial neuromodulatory devices (DBS, RNS)   | Center Annual Report Response "Yes" (adult centers only)       |   |
| <b>6) Rehabilitation Services (inpatient and outpatient):</b> Sufficient physical, occupational, and speech therapy  | Center Annual Report Response "Yes"                            |   |
| PERSONNEL (Full or part-time individual accessible to center patients)   |  |   |
| 1) Physicians – Core Criterion   |  |   |
| a) Medical Director with ABPN epilepsy board certification and/or the ABPN or ABCN clinical neurophysiology or ABCN epilepsy monitoring board certifications. <i>Epilepsy specialists who have trained in another country and are not board-eligible in the US may qualify on a case-by-case basis based on equivalent experience</i>  | Uplo   | ad CV   |
| b) Second epileptologist who is board-certified or board-eligible for ABPN epilepsy board certification and/or the ABPN or ABCN clinical neurophysiology or ABCN epilepsy monitoring board certifications. Epilepsy specialists who have trained in another country and are not board-eligible in the US may qualify on a case-by-case basis based on equivalent experience. | Not Required for Level 3 Centers                               |   |
| c) Pediatric and adult/pediatric centers must have a board-certified pediatric epileptologist, who has ABPN Child Neurology in addition to the other certifications mentioned above.  Epilepsy specialists who have trained in another country and are not board-eligible in the US may qualify on a case-by-case basis based on equivalent experience                       | Upload CV  |   |
| d) At least one neurosurgeon who is ABNS board-certified or board-eligible and tracking toward certification   | Not required   | Upload CV   |

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| PERSONNEL (Full or part-time individual accessible to center patients) (Continued)   |  |   |  |
| 2) Neuropsychologist   | Upload CV  |   |  |
| 3) Psychosocial: Social Worker   | Required   |   |  |
| 4) Nursing, Nurse Practitioner/Physician Assistant   |  |   |  |
| a) Outpatient clinic nurse/nurse practitioner/physician assistant with expertise in epilepsy   | Name and info listed in Center Annual Report   |   |  |
| b) Inpatient EMU nurse/nurse practitioner/physician assistant with expertise in epilepsy   | Name and info listed in Center Annual Report   |   |  |
| 5) EEG Technologist(s): At least one technologist board-certified by ABRET   | Name and info listed in Center Annual Report   |   |  |
| 6) Trained personnel dedicated 24/7 to monitoring video and EEG  | Name and info listed in Center Annual Report Upload certificate (if completed ASET'S LTM 100 course)                           |   |  |
| 7) Neuroradiologist  | Name and info listed in Center Annual Report   |   |  |
| SAFETY AND TREATMENT PROTOCOLS   |  |   |  |
| 1) Examination of speech, memory, level of consciousness, and motor function during and following a seizure  | Upload   |   |  |
| 2) Measures to be taken if number, duration, or severity of seizures is excessive, including number or duration of seizures requiring physician notification*  | Upload   |   |  |
| 3) Medication reduction to increase seizure yield  | Upload   |   |  |
| 4) Care of head dressings and measures to prevent postoperative infections or other complications in patients studied with intracranial electrodes   | Not required   | Upload if center performs service                     |  |
| 5) Management of status epilepticus and seizures in hospitalized patients*   | Upload   |   |  |
| 6) Admission order set for EMU patients  | Upload   |   |  |
| 7) Layout and furnishings should allow easy access to and continuous observation of patients and minimize risk of injury due to falls and other safety concerns  | Center Annual Report Response "Yes"  |   |  |
| 8) EMU Caring - one physician and one nurse or tech must complete  | Enter name and emails in Center Annual Report. Upload certificates (if received).  |   |  |
| 9) NAEC/AANN Training Program – one nurse must complete until 51% of core nurses have completed the course   | Enter name and email in Center Annual Report.<br>Upload certificate.   |   |  |
| 10) Written referral arrangement with Level 4 Center**   | Upload: Options include written MOU between the two centers or letters/emails with evidence of an established referral pattern |   |  |
| *Adult/Pediatric centers must provide a pediatric-specific protocol in addition to an adult-specific protocol.  **Adult/pediatric centers must provide proof of referrals for both adult and pediatric patients. |  |   |  |
| CONTINUAL COMPLIANCE   |  |   |  |
| Centers are required to maintain continual compliance with accreditation criteria throughout their accreditation period.   | Attestation in Center Annual Report substantial chan   | and interim notification of NAEC of ges, if necessary |  |



| 2024 NAEC Accreditation Criteria for Level 4 Centers   |  |  |  |
|--|--|--|--|
| Epilepsy Center Criteria   | Verification Method/Notes  |  |  |
| EPILEPSY MONITORING UNIT- Core Criterion   |  |  |  |
| All NAEC Centers are required to have an EMU that includes:  |  |  |  |
| Designated hospital beds where video and EEG data is captured and sent to a central location   | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy  |  |  |
| 2) Remote-control video cameras with 24/7 recording available (not a fixed camera)   | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy  |  |  |
| 3) Trained personnel dedicated 24/7 to monitoring video and EEG – someone trained in seizure recognition and recording integrity, not necessarily a traditional EEG technologist | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy  |  |  |
| 4) EMU safety-trained inpatient nurses   | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy  |  |  |
| 5) Epilepsy-specific staff training and protocols for seizure safety   | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy  |  |  |
| 6) Clinical decision-making by an epileptologist   | Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy  |  |  |
| EPILEPSY CENTER SERVICES   |  |  |  |
| 1) Electrodiagnostic Services  |  |  |  |
| a) 24-hour video-EEG with scalp electrodes   | Adequate volume of 100+ EMU admissions reported on Center Annual Report. Upload 5 EMU reports from patients admitted in a single month in 2023. Pediatric and Adult/Pediatric centers must upload a report for a patient younger than 2 years old. |  |  |
| b) 24-hour video-EEG recording with intracranial electrodes (subdural, epidural or depth electrodes)   | Adequate volume of at least 6 cases from 2021 to 2023. Upload 6 reports from 2021 through 2023, including at least one report from 2023.   |  |  |
| c) Access to Wada testing or functional neuroimaging   | Center Annual Report Response "Yes"  |  |  |
| d) Functional cortical mapping by stimulation of intracranial electrodes   | Center Annual Report Response "Yes"  |  |  |
| 2) Imaging Services  |  |  |  |
| a) Magnetic resonance imaging (at least 1.5T)  | Upload 1 report from 2023 reflecting expertise in epilepsy signed/approved by the neuroradiologist listed on Center Annual Report  |  |  |
| b) Computerized axial tomography   | Center Annual Report Response "Yes"  |  |  |
| c) Cerebral angiography  | Center Annual Report Response "Yes"  |  |  |
| d) Access to interictal PET or ictal/interictal SPECT by established arrangement or on site  | Upload 1 report from 2023  |  |  |
| 3) Pharmacological Services: Quality-assured anticonvulsant serum drug levels  | Center Annual Report Response "Yes"  |  |  |
| 4) Neuropsychological/psychosocial services: Comprehensive neuropsychological test batteries   | Upload 1 report from 2023  |  |  |



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|---|---|--|
| Epilepsy Center Criteria  | Verification Method/Notes   |  |
| 5) Surgical Services  |   |  |
| a) Any resective or ablative epilepsy surgery with goal of controlling seizures   | Upload 1 operative report from 2023 signed by the neurosurgeon listed in Center Annual Report           |  |
| b) Placement of intracranial electrodes   | Center Annual Report Response "Yes"   |  |
| c) Implantation of the vagus nerve stimulator   | Upload 1 operative report from 2023   |  |
| d) Management of the vagus nerve stimulator   | Center Annual Report Response "Yes"   |  |
| e) Access to implantation of intracranial neuromodulatory devices (DBS, RNS)  | Center Annual Report Response "Yes" (adult centers only)  |  |
| f) Access to management of intracranial neuromodulatory devices (DBS, RNS)  | Center Annual Report Response "Yes" (adult centers only)  |  |
| <b>6) Rehabilitation Services (inpatient and outpatient):</b> Sufficient physical, occupational, and speech therapy   | Center Annual Report Response "Yes"   |  |
| PERSONNEL (Full or part-time individual accessible to center patients)  |   |  |
| 1) Physicians - Core Criterion  |   |  |
| a) Medical Director with ABPN epilepsy board certification and/or the ABPN or ABCN clinical neurophysiology or ABCN epilepsy monitoring board certifications. <i>Epilepsy specialists who have trained in another country and are not board-eligible in the US may qualify on a case-by-case basis based on equivalent experience</i>                                       | Upload CV   |  |
| b) Second epileptologist who is board-certified or board-eligible for ABPN epilepsy board certification and/or the ABPN or ABCN clinical neurophysiology or ABCN epilepsy monitoring board certifications. Epilepsy specialists who have trained in another country and are not board-eligible in the US may qualify on a case-by-case basis based on equivalent experience | Upload CV   |  |
| c) Pediatric and adult/pediatric centers must have a board-certified pediatric epileptologist, who has ABPN Child Neurology in addition to the other certifications mentioned above. <i>Epilepsy specialists who have trained in another country and are not board-eligible in the US may qualify on a case-by-case basis based on equivalent experience</i>                | Upload CV   |  |
| d) At least one neurosurgeon who is ABNS board-certified or board-eligible tracking toward certification  | Upload CV   |  |
| 2) Neuropsychologist  | Upload CV   |  |
| 3) Psychosocial: Social worker  | Required  |  |
| 4) Nursing/Nurse Practitioner/Physician Assistants  |   |  |
| a) Outpatient clinic nurse/nurse practitioner/physician assistant with expertise in epilepsy  | Name and info listed in Center Annual Report  |  |
| b) Inpatient EMU nurse/nurse practitioner/physician assistant with expertise in epilepsy  | Name and info listed in Center Annual Report  |  |
| 5) EEG Technologist(s): At least one technologist board-certified by ABRET  | Name and info listed in Center Annual Report  |  |
| 6) Trained personnel dedicated 24/7 to monitoring video and EEG   | Name and info listed in Center Annual Report<br>Upload certificate (if completed ASET'S LTM 100 course) |  |



| 2024 NAEC Accreditation Criteria for Level 4 Centers  |   |  |
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| Epilepsy Center Criteria  | Verification Method/Notes   |  |
| 7) Neuroradiologist   | Name and info listed in Center Annual Report  |  |
| SAFETY AND TREATMENT PROTOCOLS  |   |  |
| 1) Examination of speech, memory, level of consciousness, and motor function during and following a seizure   | Upload  |  |
| 2) Measures to be taken if number, duration, or severity of seizures is excessive, including number or duration of seizures requiring physician notification*   | Upload  |  |
| 3) Medication reduction to increase seizure yield   | Upload  |  |
| 4) Care of head dressings and measures to prevent postoperative infections or other complications in patients studied with intracranial electrodes              | Upload  |  |
| 5) Management of status epilepticus and seizures in hospitalized patients*  | Upload  |  |
| 6) Admission order set for EMU patients   | Upload  |  |
| 7) Layout and furnishings should allow easy access to and continuous observation of patients and minimize risk of injury due to falls and other safety concerns | Center Annual Report Response "Yes"   |  |
| 8) EMU Caring - one physician and one nurse or tech must complete   | Enter name and emails in Center Annual Report. Upload certificates (if received)                          |  |
| 9) NAEC/AANN Training Program – one nurse must complete until 51% of core nurses have completed the course  | Enter name and email in Center Annual Report. Upload certificate.   |  |
| 10) Training for personnel dedicated 24/7 to monitoring video and EEG   | Enter name and email in Center Annual Report. Upload ASET LTM certificate or center training materials.   |  |
| *Adult/Pediatric centers must provide a pediatric-specific protocol in addition to an adult-specific protocol.  |   |  |
| CONTINUAL COMPLIANCE  |   |  |
| Centers are required to maintain continual compliance with accreditation criteria throughout their accreditation period.  | Attestation in Center Annual Report and interim notification of NAEC of substantial changes, if necessary |  |