“New” Equipment for Improving Facial Nerve Monitoring

By Emily Murphy, R. EEG T.

One of the riskiest times in intraoperative facial nerve monitoring for losing facial nerve function occurs when the surgeon is using a bipolar or bovie to cauterize tissue near the nerve. Unfortunately this is the exact time when the monitoring technologist is unable to get waveform or auditory input from the equipment, which becomes saturated by the cautery signal. Therefore, the technologist should be able to observe the face during this period in order to report any facial movement from facial nerve stimulation.

Again, the technologist frequently runs into problems. Some surgeons like to cover the face with drapes. Sometimes the technologist has his/her view obscured by either the microscope or by a surgical assistant. Even if there is a clear drape over the patient’s face, the plastic may obscure small but important facial movement, and the technologist finds himself constantly jumping up and down to observe the face.

At Baylor College of Medicine’s Center for Balance Disorders, we use infrared video-oculography for recording eye movements during ENG testing. When we received the equipment, it came with an extra camera. It occurred to me that we could use this in the operating room under the drapes, since it provides its own infrared lighting. This camera can be mounted in the notch of a spongy headrest close to the level of the face. Care should be taken that the camera does not touch the skin, as it does get warm with usage.

The camera is then plugged into a TV monitor, which is placed next to the monitoring equipment. Voila! The technician has a very close-up view of the mouth, so that even fairly small twitches can be observed. He can report if there is face movement with stimulation, etc., because he doesn’t have to jump up, look under the drapes, or try to see around persons standing at the table. Several times, facial movement has been observed even when the surgeon did not appear to be anywhere close to the nerve with the bipolar. Even the best surgeon doesn’t always know what the “path of least resistance” for the cautery is going to be. This seems to be the best of both worlds.

This does entail yet another piece of equipment in the OR, and requires a couple of extra electrical outlets and a few more minutes of set-up time. I think the results are well worth it! What surgeon wouldn’t want the best of all possible outcomes?

Request for 2006 Theda Sannit Outstanding Educator Award Recommendations

This award is presented each year to an individual whose contribution to the education of END technologists is worthy of special recognition. It is time for ASET to select the recipient of this award for 2006. We would appreciate recommendations from members to aid us in the selection process. Please keep in mind that this educator must have made contributions on a national level, rather than just locally. ASET staff members are not eligible for the award, and this award may be bestowed on an individual only once.

Eligibility and Selection Criteria for the Outstanding Educator

The educator may be a technologist or physician with the following:

- A minimum of five years experience in END
- Professional contributions in the areas of publications, teaching/training, and/or educational development
- Demonstration of educational expertise in both national and regional society involvement, such as directing programs, providing instruction, and creating training materials
- Teaching experience in a formal END program is desirable.

To recommend a candidate, please send the Award Committee the name of the person with a brief note stating the reason for your recommendation. The deadline for submitting recommendations is May 1, 2006. Please send your recommendation to Jie Zhang, committee chair, at jie.zhang@cchmc.org, with a copy to faye@aset.org.

The committee will review those recommended and present a list of names to the ASET Board of Trustees for a vote. The award is given to the chosen recipient at the annual conference.

Theda Sannit was the first recipient of this award in 1990. ASET has presented the award to the following educators in the subsequent years:

1992 \ \ Margaret Gordon, R. EEG T.
1993 \ \ Larry Head, R. EEG/EP T., CNIM, RPSGT
1995 \ \ Kathleen Mears, R. EEG/EP T. (posthumously)
1996 \ \ Lewis Kull, R. EEG/EP T.
1997 \ \ Andrea Erwin, R. EP T., CNIM
1998 \ \ Patti Baumgartner, R. EEG/EP T., CNIM
1999 \ \ Lucy Sullivan, R. EEG T.
2000 \ \ Clay Pollert, R. EEG T.
2001 \ \ Jean Wilkins Farley, MA, R. EEG T.
2002 \ \ Walt Banoczi, R. EEG/EP T., CNIM, RPSGT
2003 \ \ Margaret Walcoff, MEd, R. EEG/EP T., CNIM
2004 \ \ Ernst Niedermeyer, MD
2005 \ \ Becky Meng, R.EEG/EP T.