ASET Position Statement

Unattended Patients during Standard Electroencephalogram (EEG) Procedures*

The American Clinical Neurophysiology Society (ACNS) Guidelines One, "Minimum Technical Requirements for Performing Clinical EEG," and Five, "Minimum Technical Standards for Pediatric EEG," delineate the importance of producing and maintaining the integrity and technical quality of electroencephalographic data acquired during a standard EEG procedure. Annotations made by the Neurodiagnostic Technologist regarding changes in a patient's level of consciousness/alertness as well as artifact recognition, efforts to eliminate or monitor, and changes in parameter settings while acquiring patient data are essential in ensuring a readable and interpretable EEG tracing for the Electroencephalographer.

Furthermore, activation procedures, such as hyperventilation, photic stimulation, and sleep are carried out during standard EEG procedures, all with the purpose of eliciting abnormalities, such as a seizure, that may not otherwise be seen. If a seizure is provoked, immediate response, assistance from the technologist, and ictal and post ictal cognitive assessments are of utmost importance both for diagnosis and patient safety purposes.

It is therefore ASET's position that patients not be left unattended while EEG data are being acquired during standard EEG procedures. Neurodiagnostic laboratories are encouraged to maintain adequate staffing to ensure that all patients are attended by a Neurodiagnostic Technologist during the preparation for and recording of standard EEG procedures, and to reflect this recommendation in the policies and procedures manual.

*The "Standard EEG Procedure," as addressed in this position statement, does not include ambulatory, long term/epilepsy, or ICU/critical care EEG monitoring.

Please refer to the ASET website for additional information: www.aset.org (Best Practices tab).

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