


<b>Name of Policy: STAT (Emergent) Electroencephalogram (EEG)</b>			
<b>Policy Number:</b> 3364-138-21			
<b>Approving Officer:</b> Chief Operating Officer			
<b>Responsible Agent:</b> Manager, Neurodiagnostic Services			
<b>Scope:</b> The University of Toledo Medical Center Neurodiagnostic Services		<b>Effective date:</b> 7/2025  <b>Original effective date:</b> New Policy	
Key words: STAT, electroencephalogram, status epilepticus, Indications, Orders			
<input checked="" type="checkbox"/>	New policy proposal	<input type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input type="checkbox"/>	Reaffirmation of existing policy

(A) Policy statement

Establish guidelines for ordering STAT EEGs including Long Term Monitoring Epilepsy (LTME).

(B) Purpose of policy

To clarify the process for identifying the priority of an EEG/LTME.

Main indications for STAT studies are:

1. Evaluation for suspected non-convulsive status epilepticus
2. Acute repetitive seizures defined as multiple seizures per hour
3. As part of the status epilepticus protocol

(C) Scope

STAT procedures can only be ordered by a Neurology or Neurosurgery provider.

If a STAT procedure is requested, a neurology consult must be ordered. The neurology provider must determine the priority of the procedure (STAT, or routine).

If a procedure is determined to be STAT (outside of regularly scheduled department hours), the EEG technologist on call will be notified according to policy 3364-138-19 On Call Procedure.

The EEG technologist will notify neurology of the need for a STAT interpretation once the study has been initiated.

The Neurologist must interpret the study within 30 minutes and communicate the finding to the patients care team.

<p>Approved by:</p> <p>/s/</p> <hr/> <p>Melissa Kukiela Director, Pulmonary</p> <p>6/30/2025</p> <hr/> <p>Date</p> <p>/s/</p> <hr/> <p>Ajaz Sheikh MD Medical Director</p> <p>7/7/2025</p> <hr/> <p>Date</p> <p>/s/</p> <hr/> <p>Russell Smith Chief Operating Officer</p> <p>6/26/2025</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by: Manager, Neurodiagnostics</i></p>	<p><b>Policies Superseded by This Policy: N/A</b></p> <p>Initial effective date: 7/2025</p> <p>Review/Revision Date: 7/2025</p> <p>Next review date: 7/2028</p>
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