NAEC ACCREDITATION CRITERIA FOR 2025

	LEVEL 4 CENTERS	LEVEL 3 CENTERS
EPILEPSY CENTER CRITERIA		
EPILEPSY MONITORING UNIT- Core Criterion	VERIFICATION METHOD/NOTES	
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 "Ves" with a	npropriate details in unloaded EMIL policy
	Center Annual Report Response "Yes" with appropriate details in uploaded EMU policy 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 ENU policy	
 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	
7) EMU Policy must be signed by the center medical director, EMU administrative nurse manager or equivalent, and lab EEG manager	Upload policy dated in 2025	
8) NAEC/AANN Training Program	This criterion is on hold for 2025 as NAEC and AANN develop a new way for centers to be able to access the training program.	
9) Training for personnel dedicated 24/7 to monitoring video and EEG	Enter name and email in Center Annual Report. Uploa	d ASET LTM certificate or center training materials.
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 2024. Pediatric centers must upload a report for a patient younger than 2 years old.	Adequate volume of 50+ EMU admissions reported on Center Annual Report. Upload 2 EMU reports from patients admitted in a single month in 2024. 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 2022 to 2024 in Center Annual Report. Upload 6 reports from 2022 through 2024, including at least one report from 2024.	NOT REQUIRED
c) Access to Wada testing or functional neuroimaging	Center Annual Report Response "Yes"	NOT REQUIRED
d) Functional cortical mapping by stimulation of intracranial electrodes	Center Annual Report Response "Yes"	NOT REQUIRED
2) IMAGING SERVICES		•
a) Magnetic resonance imaging (at least 1.5T)	Upload 1 report from 2024 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"	NOT REQUIRED
d) Access to interictal PET or ictal/interictal SPECT by established arrangement or on site	Require upload of 1 PET or SPECT report from 2024	NOT REQUIRED
3) PHARMACOLOGICAL SERVICES		
a) Quality-assured anticonvulsant serum drug levels	Center Annual Report Response "Yes"	
4) NEUROPSYCHOLOGICAL SERVICES		
a) Comprehensive neuropsychological test batteries	Upload 1 report from 2024;	
5) SURGICAL SERVICES		
a) Any resective or ablative epilepsy surgery with goal of controlling seizures	Upload 1 operative report from 2024 signed by the neurosurgeon listed in Center Annual Report; At least one operative case in 2024 listed in the Center Annual Report	NOT REQUIRED
b) Placement of intracranial electrodes	Center Annual Report Response "Yes"	NOT REQUIRED
c) Implantation of neuromodulatory devices (VNS, DBS, or RNS)	Upload 1 operative report of a VNS, DBS or RNS implantation from 2024	NOT REQUIRED
d) Management of neuromodulatory devices (VNS, DBS, or RNS)	Center Annual Report Response "Yes"	
6) REHABILITATION SERVICES (inpatient and outpatient): Sufficient physical, occupational, and speech therapy	Center Annual Report Response "Yes"	
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NAEC ACCREDITATION CRITERIA FOR 2025

	LEVEL 4 CENTERS	LEVEL 3 CENTERS	
EPILEPSY CENTER CRITERIA	VERIFICATION METHOD/NOTES		
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. NAEC will only accept board eligibility for 7 years after completion of training. <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	NOT REQUIRED	
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</i> <i>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	NOT REQUIRED	
2) Neuropsychologist	Upload CV		
3) Psychosocial: Social Worker	Name and info listed in Center Annual Report		
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. Upload certificate (if completed ASET's LTM 100 course)		
7) Neuroradiologists	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		
 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		
 Care of head dressings and measures to prevent postoperative infections or other complications in patients studied with intracranial electrodes 	Upload	NOT REQUIRED	
5) Management of status epilepticus and seizures in hospitalized patients*	Upla	ad	
6) Letter indicating that protocols have been reviewed, are current, and are being followed by the center must be signed by the center medical director, EMU administrative nurse manager or equivalent, and lab EEG manager	Upload letter dated in 2025		
7) Admission order set for EMU patients	Upload		
8) 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"		
9) EMU Caring - one physician and one nurse or tech must complete	Enter name and emails in Center Annual Report. Upload certificates (if received)		
LEVEL 3 AND LEVEL 4 CENTER REFERRAL AGREEMENT	Agreement not required but must answer questions in the Center Annual Report if relevant.	Upload and answer relevant questions in the Center Annual Report.	
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		