NAEC ACCREDITATION CRITERIA FOR 2026

EPILEPSY CENTER CRITERIA	LEVEL 4 CENTERS VERIFICATION METHOD/NOTES	LEVEL 3 CENTERS
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	
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	
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	Center Annual Report must list names and emails of the inpatient nurse and outpatient nurse who have completed the **NAEC Comprehensive Epilepsy Centers for Seizure and Epilepsy Certificate Program: 2 Modules**. If these nurses have completed the **Seizure and Epilepsy Healthcare Professional in a Comprehensive Epilepsy Center Certificate Program: 8 Modules**, which includes the 2 required modules, then the accreditation criterion has been met.	
9) Training for personnel dedicated 24/7 to monitoring video and EEG	All personnel who serve as monitor watchers must be trained. NAEC will require all monitor watchers to complete the ASET Neurodiagnostic Assistant Course (LTM100) **except for** registered EEG technologists (R.EEG.Ts) and nurses that have taken the AANN/NAEC 2-module curriculum. For 2026, centers should provide NAEC with the number of monitor watchers that have completed LTM100 and the total number of monitor watchers in the EMU. Centers that cannot meet this requirement due to hospital or union rules must provide NAEC with a letter explaining why they could not meet this requirement, and the Accreditation Committee will assess if it will impact the center's accreditation.	
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 2025. 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 2025. 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 2023 to 2025 in Center Annual Report. Upload 1 comprehensive intracranial VEEG report and 6 implantation reports for extraoperative monitoring. from 2023 through 2025, including at least one report from 2025.	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 2025 reflecting expertise in epilepsy signed/approved by the neuroradiologist listed on Center Annual Report. MRI report must include include a statement and/or technical description of the epilepsy-specific protocol followed. If the MRI report does not include this information, centers must upload a separate document outlining their technical process.	
b) Computerized axial tomography	Center Annual Report Response "Yes"	
c) Cerebral angiography	Center Annual Report Response "Yes"	NOT REQUIRED
d) Access to interictal PET, ictal/interictal MEG, or ictal/interictal SPECT by established arrangement or on site	Require upload of 1 PET, MEG, or SPECT report from 2025	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 2025;	
5) SURGICAL SERVICES		
a) Any resective or ablative epilepsy surgery with goal of controlling seizures	Upload 1 operative report from 2025 signed by the neurosurgeon listed in Center Annual Report; At least one operative case in 2025 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 2025	NOT REQUIRED

NAEC ACCREDITATION CRITERIA FOR 2026		
	LEVEL 4 CENTERS	**LEVEL 3 CENTERS**
EPILEPSY CENTER CRITERIA	**VERIFICATION METHOD/NOTES**	
d) Management of neuromodulatory devices (VNS, DBS, or RNS)	Center Annual Report Response "Yes"	
e) Epilepsy Surgical Patient Management Conference	Upload summary of 1 Epilepsy Surgical Patient Management Conference	NOT REQUIRED
6) REHABILITATION SERVICES (inpatient and outpatient): 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. *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	
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. *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	NOT REQUIRED
c) 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 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; person must have completed the two-module AANN training program	
b) Inpatient EMU nurse/nurse practitioner/physician assistant with expertise in epilepsy	Name and info listed in Center Annual Report; person must have completed the two-module AANN training program	
5) EEG Technologist(s): At least one registered EEG technologist board-certified by ABRET	Name and info listed in Center Annual Report	
6) Neuroradiologists: At least one neuroradiologist board-certified with subspecialty certificate in Neuroradiology by American Board of Radiology	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	NOT REQUIRED
5) Management of status epilepticus and seizures in hospitalized patients*	Upload	
6) Verbal and written patient and caregiver education in preparation for EMU admission	Upload	
7) Genetic testing	Upload	
8) Procedure for patient communication utilizing telephone and virtual healthcare	Upload	
9) Management of patients with PNEE/functional seizures	Upload	
10) 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	
11) Admission order set for EMU patients	Upload	
12) 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"	
13) 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 LETTER	Agreement not required but must answer questions in the Center Annual Report if relevant.	Upload agreement letter with signatures of the level 3 and level 4 center medical directors
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	