

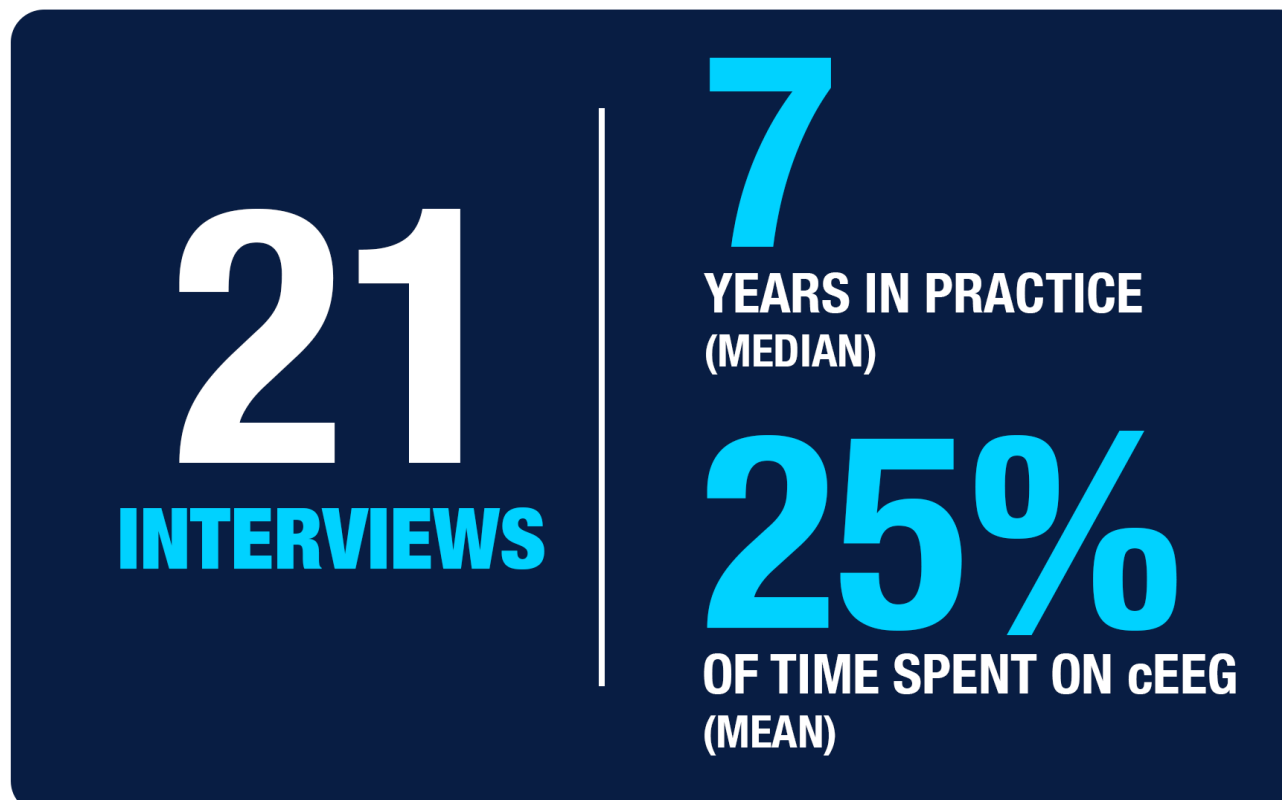
INTRODUCTION

- Use of **cEEG** in the care of critically ill patients is increasing
- A 2014 survey of neurophysiologists described cEEG practices ¹, but further characterization has been lacking
- This study explores the structure of cEEG programs in the adult critical care setting

METHODS

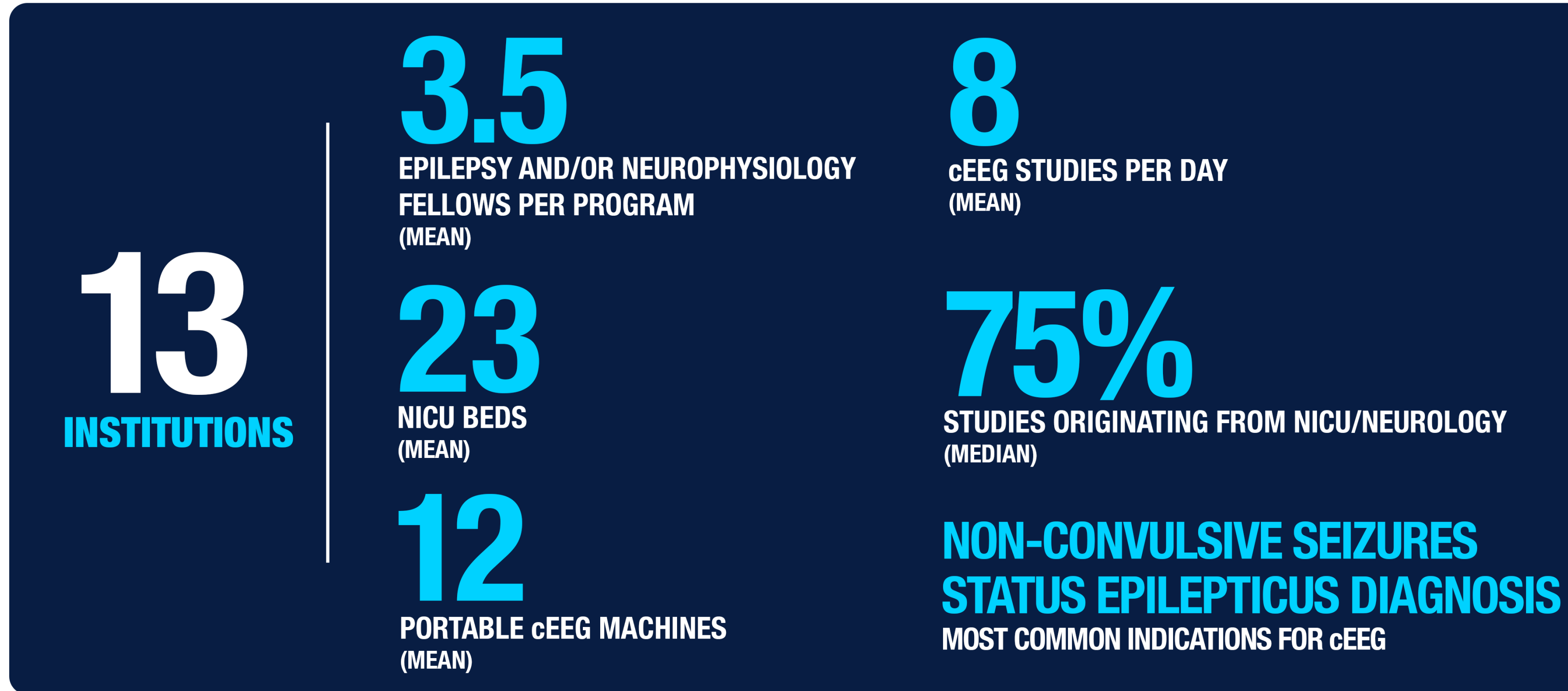
- 21 in-depth interviews from 13 institutions
- Interviews addressed cEEG program structure and processes
- Interviews were recorded, transcribed, and coded (by two independent coders), then analyzed using a directed content analysis approach
- NVivo12 software facilitated analysis and intercoder reliability (ICR) assessments and coding audits using the kappa statistic

RESULTS



ICR Audit

Mean kappa = 0.98 (range .85-1.0)
consistent with near perfect agreement
between coders (AZ, EM) and auditor (RF)



ACNS Nomenclature Use

- The majority use the ACNS nomenclature with variable consistency
- More recent training was perceived to increase the use of the nomenclature

"I think, this is where the ACNS nomenclature training file becomes very important. I have them go through it, preferably, before they start ... I think they have a generally good idea what I'm expecting ...the way that I think that they should think about EEG and cEEG. And that makes things a lot easier. ...we can talk about patterns that we see, how we classify it and what the clinical correlations are and how we record it."

Communication of EEG Findings

- The majority verbally communicate results to primary teams in person or over the phone
- Some institutions have set times for dedicated EEG discussion with the primary teams

Quantitative EEG (QEEG)

- Almost all interviewed report using QEEG in at least some capacity
- Some interviewees reported using QEEG only in specific scenarios or without formal reporting

CONCLUSION

- Despite the growing demand for cEEG, program structure and practices varied between institutions
- There remains a need for defining parameters for cEEG program structures between institutions with different characteristics.

ACKNOWLEDGEMENTS

This work is supported by an American Board of Psychiatry and Neurology (ABPN) Faculty Innovation in Education award (Recipient: Andres Fernandez)

REFERENCE

1. Gavvala J, Abend N, LaRoche S, Hahn C, Herman ST, Claassen J, et al. Continuous EEG monitoring: a survey of neurophysiologists and neurointensivists. *Epilepsia*. 2014;55(11):1864-1871.