Neurology:
EEG - Electroencephalography

Electroencephalography (EEG) is the recording of electrical activity along the scalp. In clinical contexts, EEG refers to the recording of the brain’s spontaneous electrical activity over a short period of time, usually 20-40 minutes, as recorded from multiple electrodes placed on the scalp.

**EEG Red Flags:**

- In order for U of U schedulers to set EEG appointments, the orders **MUST** be a routine EEG **in conjunction** with a Neurology visit, or requested by one of our providers for.
  - For fast track EEGs, unless there is an EEG order in Help 2, we will **not** schedule the EEG
  - *Inform patient the provider they will be seeing will order the EEG after seeing the patient, if its needed.
  - **Extended. VEEG (Video EEG), and EEGs ordered by outside providers** all need to go to Melisa Herrera: Phone: 801-662-1606, Fax: 801-662-6276
    - **Do not cold transfer to Melisa you are welcome to give guardians her direct line**

- A **current** order **must** be on file prior to scheduling for every EEG
  - EEG orders are only good for 6 months

- EEGs need to be at **minimum 1 hour prior**; Providers **prefer 2 hours prior.**
  - Please call Melisa to register **same-day** add-on, if requested by the EEG techs

- If an **Ambulatory EEG** is in a summary report send a ML to the nurses 'UOFUPEDS, NEURONURSE'

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**EEG Instructions:**

**Age 0-1 years**: Put to bed 1 hour later, wake up 2 hours earlier.
**Age 2-4 years**: Put to bed 2 hours later, wake up 2 hours earlier.
**Age 5-9 years**: No more than 6 hours of sleep - wake up at 4:00am.
**Age 10+ years**: No more than 4 hours of sleep - wake up at 4:00am.

1. The patient needs to have clean, dry hair, shampoo only. *Do not* use conditioner or styling products in the hair.
2. **No** caffeine or high sugar foods after waking up, however patients can eat anything else they would like for breakfast or lunch. ***(If the patient is an infant/baby that needs to breastfeed or bottle feed, you may bring your bottle & formula as well)**
3. Patients should **eat**. *(The no sugar/caffeine suggestion is to keep them from being hyper/stimulated - we want them to sleep during their EEG.)*
4. **No** napping after waking.
5. Families may bring anything that will help the child to sleep (blanket, toy, music, etc.)
6. Families should check with their insurance to verify coverage **and** bring $50 deposits **unless** their insurance indicates otherwise.
7. Patients should take any prescribed medication as normal. *Note: If the parent is unsure, you can check with Kim Orton/Triage.
8. ADHD meds are fine, **unless** the requesting physician indicates otherwise.

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**EEGs in Eccles:**

- **Department**: PCOS PED EEG [11358]
- **Visit type**: EEG VISIT [815] (30 Mins)
- **Provider**: ECCLES PEDIATRIC EEG [11358]

**EEGs in Riverton:**

- **Department**: RIVERTON PED EEG [10832]
- **Visit type**: EEG VISIT [815] (30 Mins)
- **Provider**: RVTN PEDIATRIC EEG [10832]

*FYI: The referring and Ordering for an EEG are the **same**. If the Ordering MD is the one performing the EEG they are to be listed on the procedure under ‘Attending’ and ‘Referring’

Do **not** list the PCP as the referring for an EEG.

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**Provider Information**

- **Attending**: Ordering MD, or Dr. Francis Filloux
- **Treatment Provider**: ECCLES PEDIATRIC EEG [2002292]
- RVTN PEDIATRIC EEG [66356]
- **Relationship**: Technician

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**Epic Appointment notes Format:**

- **Line 1**: PROCEDURE TYPE AND TIME, DX;
- **Line 2**: NURO APPT TIME
- **Line 3**: WHO SET APPT;
- **Line 4**: GAVE EEG INSTRUCTIONS & SDI

**EXAMPLE:**

EEG @ 09:00, HEADACHES;
NEURO APPT @ 1000
MJ(JANET) SET APPT;
GAVE M (JANET) EEG/SDI INFO