**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.

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**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, 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.