AANEM
Electrodiagnostic Laboratory Accreditation Program

ACCREDITATION APPLICATION CHECKLIST

Use this document to gather the required information needed to complete the application. The Reaccreditation Application will display all of the information you input during the Initial Accreditation Application and ask that you update any outdated information. For reaccreditation, you will also upload new patient reports for all physicians.

Step 1 – Main Laboratory Information

Laboratory Name	This name will appear on your Certificate of Accreditation.
Address	Provide the Main Laboratory's address.
Phone	Provide the Main Laboratory's phone number.
Email	State the email address for the laboratory's primary contact.
Website	State the laboratory's website URL (used for posting on AANEM's "Find an Accredited Lab" along with the rest of the information listed in Step 1).
Facility type	Choose one of the following: ◯ Independent Diagnostic Testing Facility ◯ Clinic ◯ Hospital ◯ Academic Institution ◯ Other

Step 2 – Satellite Laboratory Information

This section is for laboratories applying for accreditation that have more than one location where EDX studies are being performed. Please read information below if your application will have more than just the Main Laboratory. If not, please disregard step and move to Step 3.

In order for an electrodiagnostic laboratory to qualify as a satellite, all of the following must be met:

1. The same organizational policies, including medical record retention, human resources, and laboratory procedures must be used by the Main Laboratory and the Satellite Laboratory; and
2. The individual designated as the Laboratory Medical Director at the Main Laboratory must also manage the Satellite Laboratory.

Laboratory Name	State the name of the Satellite Laboratory. This name will appear on your Certificate of Accreditation.
Address	Provide the Satellite Laboratory's address.
Phone	Provide the Satellite Laboratory's phone number.
Email	State the email address for the laboratory's primary contact.
Website	State the laboratory's website URL (used for posting on AANEM's "Find an Accredited Lab" along with the rest of the information listed in step 1).
Facility type	Choose one of the following: ◯ Independent Diagnostic Testing Facility ◯ Clinic ◯ Hospital ◯ Academic Institution ◯ Other

Step 3 – Laboratory Employee(s) Information

The first step is looking up to see if staff members are already in AANEM's contact database. If they are, you may have a few questions to answer. If they are not, you will need to have the information below for each staff member. At least one staff member will need the employee role of "Lab Medical Director".

Name	Identify the staff member's name.
Employee Role	Choose from a drop down menu (Laboratory Medical Director, Physician, Technologist, Physical Therapist, or Other Staff. (Please note: if you add a Lab Medical Director or a Physician, you will need to answer a questions in this step about their residency, training, primary board certification, and subspecialty board certification)
Phone	State the phone number for the staff member.
Email	State the email address for the staff member.
City/State/Country	State the staff member's city, state, and country.

Step 4 – Employee Information (continued)

Lab Medical Director

The Laboratory Medical Director (LMD) serves as the leader and manager of the electrodiagnostic laboratory. For purposes of accreditation there are 2 categories of LMDs – LMD and LMD-Advanced Training. The chart below identifies the difference between the two terms. All references in this form to LMD, unless otherwise specified, refers to both LMD and LMD-Advanced Training.

	Laboratory Medical Director	**Laboratory Medical Director Advance Trained**
Completed an ACGME or RCPSC approved residency in neurology or physical medicine and rehabilitation.	✓	✓
Completed primary board certification in neurology or physical medicine and rehabilitation.	✓	✓
Completed 3 months of training in electrodiagnostic medicine during an ACGME or RCPSC approved residency and/or a fellowship.	✓	✓
Completed subspecialty certification by one of the following: • American Board of Electrodiagnostic Medicine; • American Board of Psychiatry and Neurology in Clinical Neurophysiology or Neuromuscular Medicine; or • American Board of Physical Medicine and Rehabilitation in Neuromuscular Medicine	✗	✓

The following includes all the information you will need to enter regarding the Laboratory Medical Director.

Primary Specialty

Primary Specialty	Choose one: ◯ Neurology ◯ Physical Medicine and Rehabilitation
Residency Completion Date	Enter the date when the LMD completed residency. **Note:** *The LMD must have completed residency at least 2 years prior to application submission.*
ACGME/RCPSC approved program	Indicate whether the residency program was approved by the ACGME/RCPSC. **Note:** *The LMD must have completed an ACGME/RCPSC approved residency in neurology or PMR.*
Training Program	Provide the name of the institution where the LMD's training was completed.

Physician information continued on next page.

Primary Board Certification

Primary Board Certification	Choose one: ◯ ABPMR ◯ ABPN ◯ AOBNP ◯ AOBPMR
Certificate Number	List the certificate number issued to the LMD for his/her primary board certification.
Expiration Date	Provide the primary board certification expiration date or indicate if non-expiring.

Subspecialty Fellowship Training – if the LMD completed fellowship training you will need the following information.

Subspecialty Fellowship	If the LMD completed a subspecialty fellowship, indicate the fellowship type. **Note:** *The LMD is not required to have completed a fellowship to serve in that capacity.*
Training Program	Provide the name of the institution where the fellowship was completed.
Start Date	List the start date of fellowship training.
End Date	List the date upon which the fellowship training was completed.
Fellowship Completion	Indicate whether the fellowship was successfully completed.
ACGME/RCPSC approved program	Indicate whether the fellowship training was an ACGME/RCPSC approved program.

Subspecialty Certification

Subspecialty Certification	Choose one: ◯ ABEM ◯ ABPN/ABPMR Neuromuscular Medicine ◯ ABPN Clinical Neurophysiology
Certificate Number	List the certificate number issued to the LMD for his/her subspecialty board certification.
Expiration Date	Provide the primary board certification expiration date or indicate if non-expiring.

State Licensure

State	Indicate the state in which the LMD holds a medical license.
License Number	Provide the license number issued to the LMD.
Expiration Date	Provide the medical license expiration date
Restrictions	Indicate if the license is restricted. If restricted, provide details
Document	Upload documentation of the LMD's medical license by including a copy of the licensure information from the state board of medicine. **Note:** *Adobe PDFs preferred*.*

During this step, the LMD must agree to ensure that all physicians practicing in the laboratory complete the required continuing medical education and proficiency standards of accreditation. You will need to enter the LMDs name and agree to the following requirements.

- The **LMD** will complete 25 Category 1 continuing medical education (CME) credits in EDX medicine in a 5-year period (on average approximately 5 CME credits per year).
- The **LMD** will perform a minimum of 100 EDX medicine consultations in each calendar year.
- The **LMD** will ensure that all Laboratory Physicians, Board Certified Laboratory Physicians, and Board Certified Laboratory Physicians-Advanced Training complete 25 Category 1 CME credits in EDX medicine in a 5-year period (on average approximately 5 CME credits per year).
- The **LMD** will ensure that all Laboratory Physicians, Board Certified Laboratory Physicians, and Board Certified Laboratory Physicians-Advanced Training perform a minimum of 100 EDX consultations in each calendar year.
- The **LMD** will ensure that all Limited Scope Specialty Physicians complete 10 Category 1 CME credits in EDX medicine every 5 years (on average approximately 2 CME credits per year).
- The **LMD** will ensure that all Limited Scope Specialty Physicians perform a minimum of 10 EDX consultations in each calendar year.

Lab Physician

For each Laboratory Physician performing EDX studies within the laboratory, you will need the same information you provided for the Laboratory Medical Director (minus the continuing medical education/proficiency standard information). The number of reports submitted will depend on the type of Laboratory Physician. The types are:

- Laboratory Physicians – Physicians not holding a primary board certificate in neurology or physical medicine and rehabilitation, but have completed a residency in neurology or physical medicine and rehabilitation and have completed 3 months of training in EDX medicine.
- Board Certified Laboratory Physicians – Physicians who hold a primary board certificate in neurology or physical medicine and rehabilitation and have completed 3 months of EDX medicine.
- Board Certified Laboratory Physicians - Advanced Training – Physicians who hold a primary board certificate in neurology or physical medicine and rehabilitation, have completed 3 months of EDX medicine training, and are certified by ABEM, ABPN in Clinical Neurophysiology, or ABPN/ABPMR in Neuromuscular Medicine.
- Limited Scope Specialty Physicians – Physicians that hold board certification in a specialty other than neurology or physical medicine and rehabilitation and have completed electrodiagnostic training focused on a limited anatomical area related to their primary specialty. Limited Scope Specialty Physicians may only perform EDX studies in a limited anatomical area.

Key Criteria

Ensuring that your application meets the following criteria will reduce the chances that your application is denied or sent to Provisional Status:

- All physicians must successfully complete an ACGME/RCPSC approved neurology or PMR residency.
  - Limited Scope Specialty Physicians must complete an ACGME/RCPSC approved residency in their selected specialty.
- All physicians must complete a minimum of 3 months of EDX medicine training.
  - Limited Scope Specialty Physicians must receive appropriate training in EDX medicine in a limited anatomical area
- All physicians must hold a valid, US medical license.

Technologist

All technologists must have appropriate education and/or training according to the AANEM's position statement titled *Job Descriptions for Electrodiagnostic Technologists.* You will need to provide the following information for all technologists working in the laboratory:

Training/Certification Received

Check all that apply:

- ◯ 1 year of higher education with emphasis on physical or biological sciences
- ◯ Completion of a traineeship with a minimum of 6 months duration
- ◯ High school diploma
- ◯ CNCT (ABEM)
- ◯ R.NCS.T (AAET)
- ◯ Other

Experience

- Describe the technologist's EDX training experience. This should include where the training was completed and the institution or physician responsible for providing the training.
- Number of years' experience in NCS.
- Number of years working with the LMD.

Physical Therapists

All physical therapists must have appropriate education and/or training according to the AANEM's position statement titled *Job Descriptions for Electrodiagnostic Technologists.*

- Describe the technologist's EDX training experience. This should include where the training was completed and the institution or physician responsible for providing the training.
- Number of years' experience in NCS.
- Number of years working with the LMD.
- ABPT Clinical Electrophysiology certificate #.

Other Staff

All physical therapists must have appropriate education and/or training according to the AANEM's position statement titled *Job Descriptions for Electrodiagnostic Technologists.*

- Describe the technologist's EDX training experience. This should include where the training was completed and the institution or physician responsible for providing the training.
- Number of years' experience in NCS.

Number of years working with the LMD.

Step 5 – Employees in Laboratory

All laboratories must have a physician that performs electrodiagnostic studies. You will need to indicate each laboratory – Main Laboratory and Satellite Laboratories – in which each physician performs EDX studies.

Step 6 – Nerve Conduction Study (NCS) Technologists

Technologists must be appropriately supervised, i.e., certified technologists must be generally supervised and uncertified technologists must be directly supervised. You will need to provide the following information during this step:

- The percentage of NCSs performed by NCS technologists in the laboratory that were performed under the following levels of supervision:
  - **General supervision:** The procedure is furnished under the physician's overall direction and control, but the physician is not present throughout the performance of the procedure. The physician is not immediately available.
  - **Direct supervision:** The physician is present in the office suite (not in the room) and immediately available to furnish assistance and direction throughout the performance of the procedure.
  - **Personal supervision:** The physician is in the room throughout the performance of the procedure.
- A description of how the LMD assesses the skills and level of competence of new NCS technologists performing NCS studies in the laboratory for the first time. Include the type of supervision and frequency of supervision.

  NOTE: *The LMD should indicate some reasonable level of personal supervision and relative frequent contact when first working with a technologist.*
- A description of how the LMD ensures the continued knowledge and skills of the NCS technologist(s) working in the laboratory.
- A description of how a physician responds to an NCS technologist who has a question during a technologist-performed NCS.

  NOTE: *The LMD should assist the technologist or correct performance of NCS by a technologist. The LMD should be willing to respond to questions, assist the technologist when necessary, or advise the technologist on the correct performance of the study.*
- A statement whether technologists perform needle electromyography (EMG) in the laboratory.
- A statement whether technologists interpret EDX studies (needle EMG and/or nerve conduction studies).

Step 7 – Physical Therapists

Physical therapists must be appropriately supervised – i.e., at a minimum must be generally supervised.

Step 8 – Other Staff

All other staff performing NCS within the laboratory must be appropriately supervised – i.e., at a minimum must be directly supervised.

Step 9 – Distribution of Studies by Laboratory

For all laboratory locations – Main Laboratory and Satellite Laboratories – you will need to indicate the following:

- The number of studies performed at the laboratory in the previous 12 months.
- Whether all studies are interpreted at the laboratory location.

Step 10 – Laboratory Facility

Concerning the Main Laboratory's facilities and medical records storage systems, you will need to indicate the following:

- Whether the laboratory is compliant with the Americans with Disabilities Act.
- Whether the laboratory has a waiting room.
- Whether the laboratory restrooms are available to laboratory patients.
- The number of examination rooms in the laboratory.

Step 11 – Medical Records

- What type of medical records storage system is used by the laboratory? Check all that apply:
  ◯ Paper ◯ Electronic ◯ No system

The laboratory must have a medical records retention policy and HIPAA compliance policy that is in compliance with applicable local, state, and federal law.

- You will be required to upload a copy of your HIPAA compliance policy in step 16.

Step 12 – Performance Standards

You will need to provide the following:

- The percentage of technologist-performed NCSs interpreted by the physician responsible for supervision of the NCS technologist.
- Whether the Main Laboratory is capable of providing both nerve conduction and needle EMG studies during all patient consultations.
- Whether all Satellite Laboratories are capable of providing both nerve conduction and needle EMG studies during all patient consultations.
- The percentage of nerve conduction studies performed without needle EMG studies in a 1-year time frame in this laboratory.
- Whether the main laboratory uses published normal values or has established its own values.

  - If using published normal values, you will be required to list the reference in which the normal values are published.

  - If the laboratory has established its own values, you will be required to attach a file listing the normal values for median, ulnar, and radial motor and sensory; peroneal motor and sensory; tibial motor; H-reflex and F-wave latencies (upload on step 17). You also will be required to provide a narrative describing the process used to establish the laboratory's normal values.

Step 13 – Quality Improvement

You will be asked about the LMD approving policies and procedures. The laboratory must have a quality improvement plan or program. The plan/program may include a satisfaction surveyor peer review.

- You will be required to upload a copy of your Quality Improvement plan (upload on Step 16).

  - If no plan is in place, you must describe how the LMD monitors and improves the quality of care patients receive and provide 1-2 examples from the previous 2 years.

- You will be required to describe how the laboratory physicians, NCS technologists, physical therapists, or office staff participate in improving the quality of care a laboratory patient receives and provide 1-2 examples from the previous 2 years.

Practice Tip

The AANEM Lab Accreditation application asks for examples of quality improvement activities my laboratory has engaged in over the last two years. What types of activities can demonstrate quality improvement?
Quality improvement generally describes a process designed to raise the quality of electrodiagnostic medical services within the laboratory in order to improve the health outcomes of the laboratory's patients. There are a number of ways a laboratory can demonstrate quality improvement, and a few examples include:

- Distributing patient satisfaction surveys, reviewing the responses, and modifying or implementing laboratory procedures or policies based upon the feedback received;
- Conducting periodic peer review sessions to ensure accuracy of the diagnosis; and
- Meeting with colleagues to discuss difficult studies.

Step 14 – Laboratory Equipment

A list of EDX equipment used in the Main Laboratory and any Satellite Laboratories must be provided, which must include:

- Manufacturer
- Model number
- Serial number
- Date that the equipment was purchased by the laboratory

Step 15 – Laboratory Equipment Details

You will be required to detail the following:

- The type of needle electrodes used at all Laboratories – Reusable or Single Use Disposable needles.
  - If reusable needle electrodes, you must indicate if the electrodes are inspected under magnification and by impedance measurements to ensure structural integrity and describe the sterilization procedures.
- Indicate if electrical checks are performed annually by a biomedical engineer or electrician that evaluates the machine's leakage current and certifies the electrical safety of the machine. All accredited laboratories will be required to provide documentation of annual electrical checks upon reaccreditation and during Annual Compliance Reports.

Step 16 – Lab Manuals

You will be required to upload a number of Laboratory Procedure Manuals, Human Resources Manuals, and Safety Manuals. In order to complete the application in a timely manner, it is recommended you have all of the documents saved to your computer prior to starting this step. Additionally, all required documents must be saved as separate files, i.e., if you have all Laboratory Procedure Manuals saved in one document, you must break it up into separate files containing only the requested document. Uploading all the documents together will delay review of your application.

*The preferred file type for Lab Manuals is .PDF, however .DOC, .DOCX, and .JPG files will also be accepted.

Laboratory Procedure Manuals

Laboratory Procedure Manuals must be uploaded for all of the following techniques:

- Sensory NCS
- Motor NCS
- EMG examination
- F wave
- H reflexes

Optional

Optional Laboratory Procedure manuals include:

- Blink reflexes
- Repetitive stimulation
- Evoked potentials
- Single Fiber EMG
- Nerve root stimulation
- Autonomic studies

Practice Tip

To assist laboratories in meeting this standard, the AANEM has developed a model procedure manual that you may wish to review. The model procedure manual can be found on the AANEM's website at: *https://www.aanem.org/getmedia/1d932265-9133-42d3-83ae-59b30b78c0cf/Sample-Lab-proc.pdf*. This document is merely an example to help applicants create their own manuals. Laboratories should create manuals based upon their own personnel and equipment within the laboratory setting.

Human Resource Manual

Applicants must include a Human Resource Manual or an Organizational Policy Manual. An Organizational Chart is optional.

Practice Tip

Laboratories seeking accreditation in the AANEM's Electrodiagnostic Laboratory Accreditation Program are required to submit a Human Resource Manual. The Human Resources Manual (a.k.a., Employee Handbook) assists in the efficient conduct of human resource business throughout the laboratory. It serves as a reliable employee policy reference and as a guide for management.

The Human Resource Manual should have sufficient content to provide guidance and clarity on almost every key aspect of the employer/employee relationship, and therefore, incorporates key policies, practices, procedures, and laboratory rules. It ensures that each employee

gets the same information regarding company rules and regulations and helps prevent misunderstanding and dissatisfaction by ensuring consistency in dealing with employee issues in a fair and equitable manner.

Because each laboratory has specific situations it must manage and a host of local, state, and federal laws that affect the makeup of its Human Resource Manual, the AANEM has not set forth any particular elements that must be found in the applicant's manual. However, Human Resource Manuals may include any of the following:

- Health and safety
- Grievance procedures
- Hours of work
- Code of ethics
- Probationary period provisions
- Policy about the reimbursement of expenses
- Annual performance review requirements
- Workers Compensation benefits for staff
- Reporting relationship for the position
- Harassment policy
- Employee benefits
- Conflict of interest guidelines
- Maintenance of personnel files
- Recruitment, hiring, disciplinary, termination policies
- Screening mechanisms (i.e., checks, references, interviews)
- Liability insurance coverage for staff
- Job description for each position
- Leave provisions (holidays, sick, bereavement/compassionate, other leaves)
- Personnel file policies (i.e., access to files, changes to files, content of files)

Office Manuals

If you answered "yes" to having any of the following documents in previous questions, this is where you will upload said documents.

- HIPAA Compliance Policy- The laboratory must have a HIPAA compliance policy that is in compliance with applicable local, state, and federal law.
- Normal Values - If you indicated in step 12 that your lab has its own Normal Values, you will upload the document here.
- Quality Improvement Policy – If you indicated in Step 14 that your lab has a QI policy, you will upload the document here.

Laboratory Procedure Manuals

Applicants must submit the following Safety Manuals:

- Fire Safety and Evacuation Policy/Plan
- Fire Extinguisher Maintenance Policy/Plan
- Power Outage and Surge Protection Policy (Electrical Storm Plan)
- Medical Emergency Plan
- Universal Precaution and/or Blood Borne Pathogen Policy

Practice Tip

Fire Safety and Evacuation Policy/Plan

Laboratories seeking accreditation in the AANEM's EDX Laboratory Accreditation Program are required to have a Fire Safety and Evacuation Policy/Plan. At a minimum, the policy must include:

- Means of reporting fires and other emergencies.
- Evacuation procedures and emergency escape route assignments.
- Procedures to be followed by employees who remain to operate critical laboratory operations before they evacuate, if applicable.
- Procedures to account for all employees and patients after an emergency evacuation has been completed.
- Rescue and medical duties for those employees who are to perform them.
- Names or job titles of persons who can be contacted for further information or explanation of duties under the plan.

The Occupational Safety & Health Administration (OSHA) has developed an online Emergency Action Plan Expert System that helps users draft a simple Emergency Action Plan. Submitting a plan created under OSHA's online system will satisfy the AANEM's emergency action and evacuation plan requirement. However, the AANEM does not warrant that any emergency action and evacuation plan created by using OSHA's Emergency Action Plan Expert System will be suitable for a laboratory's particular purposes or comply with any local, state, and/or federal law. All laboratories should consider the special characteristics of their workplaces and create a plan to address any situations that require special attention.

Fire Extinguisher and Maintenance Policy

Laboratories seeking accreditation in the AANEM's Electrodiagnostic Laboratory Accreditation Program are required to have a Fire Extinguisher and Maintenance Policy in place.

The purpose of the Fire Extinguisher and Maintenance Policy is to ensure the proper operation of fire extinguishers during a fire emergency; to provide a mechanism for rapid identification and replacement of missing, damaged, or undercharged fire extinguishers; and to provide for routine maintenance of fire extinguishers as required by local, state, and federal rules and regulations.

As with any office policy and procedure, the Fire Extinguisher and Maintenance Policy is important in order to provide the highest quality of care and protection to patients and laboratory personnel.

Power Outage and Surge Protection Policy (Electrical Storm Plan)

Laboratories seeking accreditation in the AANEM's Electrodiagnostic Laboratory Accreditation Program are required to adopt one of the 4 policies approved by the AANEM or submit documentation stating why one of the 4 approved policies cannot be implemented by the applicant laboratory. To assist laboratories in meeting this standard, the AANEM has developed model policies appropriate to all applicant laboratories.

To determine the policy appropriate for your laboratory, use the resources available on the AANEM's website (*http://www.aanem.org/Practice/EDX-Laboratory-Accreditation/Process-Overview-Resources/Model-Policies*). First, determine whether your laboratory has an uninterrupted power supply; then determine if your laboratory has surge protection for each NCS/EMG machine used to perform studies on patients. You will be able to identify the model policy that is most appropriate for your laboratory.

Medical Emergencies Policies and Procedures

Laboratories seeking accreditation in the AANEM's Electrodiagnostic Laboratory Accreditation Program are required to have a Medical Emergencies Policies and Procedures. It is important to develop a written policy and procedure addressing medical emergencies that is readily available to all staff. The policy and procedure should detail specific responsibilities of each person within the office during a medical emergency, including:

- Who will call for help within the office?
- Who will attend to the patient?
- Who will initiate CPR, if necessary?
- Who will document the emergency response?
- Who will dial 9-1-1?
- Who will take vital signs?
- Who will perform any other emergency procedures?

Staff members should receive training on the medical emergency policy and procedure (as well as other office policies and procedures) upon hire and periodically thereafter. Additionally, drills should be held so that staff members become familiar with medical emergency procedures. A staff that is knowledgeable with emergency procedures and that can carry out the procedures calmly, quickly, and efficiently greatly reduces the risk of an unfavorable outcome for the patient.

As with any office policy and procedure, the medical emergency policy and procedure is important in order to provide the highest quality of care to your patients.

Universal Precaution and/or Blood Borne Pathogen Policy

Laboratories seeking accreditation in the AANEM's Electrodiagnostic Laboratory Accreditation Program are required to have a Universal Precaution and/or Blood Borne Pathogen Policy. To assist laboratories in meeting this standard, the AANEM has developed a model policy, which applicant laboratories can modify to meet their needs.

The CDC defines universal precautions as "a set of precautions designed to prevent transmission of HIV, hepatitis B virus (HBV), and other blood-borne pathogens when providing first aid or health care. Under universal precautions, blood and certain body fluids of all patients are considered potentially infectious for HIV, HBV and other blood-borne pathogens."
Universal precautions apply to:

- Blood
- Semen
- Vaginal fluid
- Cerebrospinal Synovial, pleural, peritoneal, pericardial, and amniotic fluids
- Needles, scalpels and other sharp instruments
- Bodily fluids containing visible blood

Universal precautions are achieved by using protective barriers that include:

- Gloves
- Protective eyewear
- Gowns
- Aprons

As with any office policy and procedure, the Universal Precaution and/or Blood Borne Pathogen Policy is important in order to provide the highest quality of care to patients and protection to laboratory personnel.

General Safety

A few questions are then asked to ensure the labs are following safe practices within the laboratory.

Step 17 – Electrodiagnostic Patient Reports

Applicants are required to submit sample patient reports for each physician performing studies within the Main Laboratory and all Satellite Laboratories. The number of reports submitted will depend upon the level of training and certification each physician has completed:

Physician Category	Number of Required Reports			
	Simple Diagnosis	Complex Diagnosis	Normal Diagnosis	Abnormal Diagnosis
Laboratory Physicians	2	2	0	0
Laboratory Medical Directors and Board Certified Laboratory Physicians	2	2	0	0
Laboratory Medical Director and Board Certified Laboratory Physician- Advanced Training	1	1	0	0
Limited Scope Specialty Physician	0	0	1	2

Report Definitions

The following table applies to ALL physicians EXCEPT Limited Scope Specialty Physicians. See the table below for the Limited Scope Specialty Physicians definitions.

Simple diagnosis	A simple diagnosis is defined as any common entrapment neuropathy or radiculopathy.
Complex diagnosis	A complex diagnosis is defined as motor neuron disease, plexopathy, myopathy, polyneuropathy, or a disease of neuromuscular transmission disorders.

Limited Scope Specialty Physicians	
Normal	A normal report is one in which the muscles and nerves tested showed no electrophysiologic abnormalities AND is related to the physician's limited anatomical area of practice (i.e. pelvic floor, laryngeal, facial). This report must be completed in the year preceding the date of application submission.
Abnormal	An abnormal report is one in which the muscles and nerves tested showed electrical abnormalities AND is related to the physician's limited anatomical area of practice (i.e., pelvic floor, laryngeal, facial). These reports must be completed in the year preceding the date of application submission.

Report Criteria

- All submitted reports must be less than 6 months old at the time of submission.
  - **EXCEPTION** – Reports submitted for Limited Scope Specialty Physicians should be completed in the year preceding the date of application submission.

- All reports should include a nerve conduction study AND a needle electromyography examination. Although exclusion of a study may be medically appropriate (i.e., the patient could not tolerate an EMG examination), a report submitted without a NCS or EMG examination will be rejected and result in accreditation denial.
- For all physicians, one of the complex diagnosis or simple diagnosis reports must include a repetitive nerve stimulation OR an H-reflex OR an F-wave study.

- Redact all Personal Healthcare Information – HIPAA "Safe Harbor" De-Identification of Medical Record Information requires that each of the following identifiers of the individual or of relatives, employers, or household members of the individual must be removed from medical record information in order for the records to be considered de- identified:
  1. Names
  2. All geographic subdivisions smaller than a State, including street address, city, county, precinct, zip code, and their equivalent geocodes.
  3. All elements of dates (except year) for dates directly related to an individual, including birth date, admission date, discharge date, date of death; and all ages over 89 and all elements of dates (including year) indicative of such age, except that such ages and elements may be aggregated into a single category of age 90 or older.
  4. Telephone numbers
  5. FAX numbers
  6. Electronic mail addresses
  7. Social security numbers
  8. Medical record numbers
  9. Health plan beneficiary numbers
  10. Account numbers
  11. Certificate/license numbers
  12. Vehicle identifiers and serial numbers; license plate numbers
  13. Device identifiers and serial numbers
  14. Web Universal Resource Locators (URLs)
  15. Internet Protocol (IP) address numbers
  16. Biometric identifiers
  17. Full face photographic images and any comparable images
  18. Any other unique identifying number, characteristic, or code, except a code to permit re-identification of the de-identified data.

Key Report Elements

The accreditation standards upon which each patient report is reviewed were adopted from the AANEM's educational paper, *Reporting the Results of Needle EMG and Nerve Conduction Studies*, which identifies key elements of a quality electrodiagnostic patient report. In order to help physicians improve the quality of their reports and meet the accreditation standards for report writing, the AANEM developed a Report Template and Key Report Checklist. Both the Template and the Checklist are based upon the report writing educational paper. By following the guidelines set forth in these documents, applicants should have no problem meeting the AANEM Accreditation Standards. Applicants are strongly encouraged to review the educational paper and utilize the Template and Checklist to improve their patient reports.

Key Report Elements for Needle EMG and NCSs

- Patient demographic data – i.e. name, age, birthdate
- Reasons for the referral
- Description of history and physical examination
- Reference values
  - If not provided, abnormal results must be clearly identified
- Limb temperature – hands should be > 32°C and feet > 30°C
- Identify the name of the muscles and nerves tested and the side (left or right)
- Description of the findings in the muscles or nerves examined including normal or abnormal - if abnormal provide details of the abnormality

For Needle EMG include:

  - Insertional and spontaneous activity – note the presence or absence of positive waves, fibrillation potentials, or fasciculation potentials
  - Voluntary activity – note the recruitment, amplitude, duration, and polyphasicity

For NCS include:

  - Site of stimulation
  - Conduction velocity
  - SNAP amplitude and peak latency
  - CMAP amplitude (baseline to negative peak)

- Probable diagnosis
- Note the location of the nerve, neuromuscular junction, or muscle pathology
- Report EMG and NCS data in a table format
- Limitations to completing the study (if any)
- Report on change from previous study (if any)

Key Report Elements for F-Waves, H-Reflexes, and Repetitive Nerve Stimulation

- Indicate the nerve studied
- The site of nerve stimulation and muscle recording

For F-waves and H-Reflexes

  - Minimum F-wave or H-wave latency
  - Include waveforms

For Repetitive Stimulation

  - Number of stimulations and the rate of stimulation.

- The physiological state of the muscles at the time of nerve stimulation
- If after exercise, the duration of the exercise and time interval after exercise
- The initial amplitude and/or area, and the method of calculation of the increment or decrement

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Accreditation Contact Information:

- Email accreditation@aanem.org
- Telephone: 507.288.0100

Steps to saving web pages to PDF

1. While on the page you wish to save as a PDF (i.e., medical license), from your browser's main menu (usually the top left corner) select "File"→"Print".
2. Where you choose your printer in the print menu, choose the PDF printer. This will typically be labeled "Adobe PDF" or CutePDF Writer if you downloaded the free program listed above.
3. Click "OK" or "Print."
4. A dialog will pop up asking you to verify the name of the file and the location to store the file.

*If you do not have a PDF printer installed on your computer, you can download free software at http://www.cutepdf.com/. Follow the steps below to create PDF versions of your documents.