If you are considering applying for accreditation, review the AANEM’s educational paper, *Reporting the Results of Needle EMG and Nerve Conduction Studies*. The report identifies key elements of a quality EDX report. Below is a checklist to help you verify your reports have all the key elements.

**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
  - 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