

Adult Neurology

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Instructions For EEG Patients

An **Electroencephalogram (EEG)** is a safe and pain free test which records the electrical activity of the brain. During the test, the technician will measure your head and make small marks on your scalp with a washable marker. Then, each area will be rubbed gently with a gritty lotion and the electrodes will be applied on the scalp with paste. When all 24 electrodes are applied, the recording will begin. At this point you will be asked to close your eyes and relax until the recording is performed.

The EEG test is recorded on a computer by a technologist and interpreted by a neurologist.

The test is one hour long. Please arrive on time for your appointment. If you have any questions or are unable to keep your appointment, please call the office at 201-444-0868.

- Wash your hair the night before the test. The hair should be clean, dry and free of any oils, gel or hairspray. Please let us know if you have hair extensions or wigs.
- Take your medications as usual.
- If you are given any instructions about changing your sleep schedule on the day of the EEG, please follow the instructions.
- Please avoid any drinks that contain caffeine on the day of the test, such as, soda, coffee, tea and chocolate.
- At the end of the recording, the electrodes will be removed and the paste will be washed off. However, you will need to wash your hair at home with regular shampoo to remove any paste residue.

Interpretation of your EEG will be rendered by your physician. If your study is abnormal, additional digital analysis will be performed and a separate bill will be submitted to your insurance for this analysis. Please contact Janet at extension 286 if you have any questions regarding your claim.

Appointment Date: _____ **Appointment Time:** _____

DISCLAIMER

OUR OFFICE WILL OBTAIN AUTHORIZATION FOR YOUR TEST; HOWEVER, THIS IS NOT A GUARANTEE OF PAYMENT. IT IS IMPORTANT THAT YOU UNDERSTAND YOUR INSURANCE PLAN'S CURRENT BENEFIT AND COVERAGE RULES. SOME INSURANCE PLANS PAY DIFFERENTLY DEPENDING ON THE PLACE OF SERVICE, FOR EXAMPLE; OUT-PATIENT HOSPITAL VERSUS A DOCTOR'S OFFICE. YOU MAY BE AT RISK FOR A GREATER OUT-OF-POCKET FINANCIAL RESPONSIBILITY; THEREFORE, YOU SHOULD CALL THE MEMBER SERVICES OR BENEFITS TELEPHONE NUMBER LISTED ON YOUR INSURANCE CARD TO FIND OUT WHAT YOUR FINANCIAL OBLIGATION MAY BE PRIOR TO ANY APPOINTMENT.

A CANCELLATION / NO-SHOW FEE OF \$100.00 WILL BE BILLED TO YOU IF YOU DO NOT GIVE AT LEAST 24 BUSINESS HOURS NOTICE PRIOR TO CANCELLATION OF YOUR APPOINTMENT.