

A Member Board of the American Board of Medical Specialties (ABMS)

CERTIFCATION EXAMINATION IN EPILEPSY

The American Board of Psychiatry and Neurology, Inc. (ABPN) is a not-for-profit corporation dedicated to serving the public interest and the professions of psychiatry and neurology by promoting excellence in practice through certification and continuing certification processes.

The ABPN designs and develops the initial epilepsy certification examination to assess the knowledge and reasoning skills needed to provide high quality patient care in the broad domain of the subspecialty. It utilizes two-dimensional content specifications. Within the two- dimensional format, one dimension is comprised of disorders and topics while the other is comprised of competencies and mechanisms that cut across the various disorders of the first dimension. By design, the two dimensions are interrelated and not independent of each other. All of the questions on the examination will fall into one of the disorders/topics and will be aligned with a competency/mechanism. For example, an item on focal seizures could focus on treatment, or it could focus on systems-based practice.

Candidates should use the detailed content outline as a guide to prepare for a certification examination. Please note that no single examination tests everything on the content outline.

For more information, please contact us at <u>questions@abpn.org</u> or visit our website at <u>www.abpn.org</u>.



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CERTIFCATION EXAMINATION IN EPILEPSY Content Blueprint

Number of questions: 220						
	Dimension 1					
	Neurologic Disorders and Topics					
01.	Epilepsy and episodic disorders	74-86%				
02.	Genetic and developmental disorders	3-5%				
03.	Vascular neurology	1-2%				
04.	Neuroinfectious diseases	1-2%				
05.	Metabolic diseases, nutritional deficiency states, and disorders due to	1-2%				
	toxins, drugs, and physical agents					
06.	Neuro-oncologic disorders	1-2%				
07.	Behavioral neurology and neurocognitive disorders	1-2%				
08.	Psychiatric disorders	1-2%				
09.	Questions not associated with a specific neurologic disorder	6-10%				
10.	Neuroimmunologic and paraneoplastic CNS disorders	1-3%				

	Dimension 2	
	Physician Competencies and Mechanisms	
А.	Neuroscience and mechanism of disease	4-6%
В.	Clinical aspects of neurologic disease	17-23%
С.	Diagnostic procedures	31-39%
D.	Treatment/Management	31-39%
E.	Interpersonal and communication skills	1-3%
F.	Professionalism	1-2%
G.	Practice-based learning and improvement	1-2%
H.	Systems-based practice	1-2%



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CERTIFCATION EXAMINATION IN EPILEPSY Content Outline

lumber of items:	
	Dimension 1
	Neurologic Disorders and Topics
	episodic disorders
	alized seizures
01.	Tonic-clonic (in any combination)
02.	Absence
	a. Typical
	b. Atypical
	c. Absence with special features
	i. Myoclonic absence
	ii. Eyelid myoclonia
03.	Myoclonic
	a. Myoclonic
	b. Myoclonic-atonic
	c. Myoclonic tonic d. Myoclonic tonic-clonic
04.	Clonic
04.	Tonic
05.	Atonic
	Epileptic spasms
	seizures
	Aware
	Impaired awareness
03.	•
	Other
	oclinical syndromes
	Neonatal period
	a. Self-limited neonatal seizures
	b. Early myoclonic encephalopathy
	c. Early infantile epileptic encephalopathy (Ohtahara syndrome)
	d. Symptomatic neonatal seizures
	xx. Other early infantile epileptic encephalopathy
02.	Infancy
	a. West syndrome (infantile spasms)
	b. Myoclonic epilepsy in infancy
	c. Self-limited nonfamilial infantile epilepsy
	d. Self-limited familial infantile epilepsy
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03	a. b. c. d. e. f. g. h. i.	Severe myoclonic epilepsy of infancy (Dravet syndrome) Myoclonic encephalopathy in nonprogressive disorders Epilepsy of infancy with migrating focal seizures Hemiconvulsion-hemiplegia-epilepsy syndrome Other developmental epileptic encephalopathies with onset in infancy hood Febrile seizures plus Self-limited epilepsy with autonomic seizures (Panayiotopoulos syndrome) Epilepsy with myoclonic-atonic seizures (Doose syndrome) Childhood epilepsy with centrotemporal spikes Autosomal dominant sleep-related hypermotor epilepsy Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome Epileptic encephalopathy with continuous spike-and-wave during sleep
03	g. h. xx. 3. Child a. b. c. d. c. d. e. f. g. h. i. j.	Epilepsy of infancy with migrating focal seizures Hemiconvulsion-hemiplegia-epilepsy syndrome Other developmental epileptic encephalopathies with onset in infancy hood Febrile seizures plus Self-limited epilepsy with autonomic seizures (Panayiotopoulos syndrome) Epilepsy with myoclonic-atonic seizures (Doose syndrome) Childhood epilepsy with centrotemporal spikes Autosomal dominant sleep-related hypermotor epilepsy Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome
	h. xx. 3. Child a. b. c. d. e. f. g. f. g. h. i. j.	Hemiconvulsion-hemiplegia-epilepsy syndrome Other developmental epileptic encephalopathies with onset in infancy hood Febrile seizures plus Self-limited epilepsy with autonomic seizures (Panayiotopoulos syndrome) Epilepsy with myoclonic-atonic seizures (Doose syndrome) Childhood epilepsy with centrotemporal spikes Autosomal dominant sleep-related hypermotor epilepsy Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome
03	xx. 3. Child a. b. c. d. e. f. g. h. i. j.	Other developmental epileptic encephalopathies with onset in infancy hood Febrile seizures plus Self-limited epilepsy with autonomic seizures (Panayiotopoulos syndrome) Epilepsy with myoclonic-atonic seizures (Doose syndrome) Childhood epilepsy with centrotemporal spikes Autosomal dominant sleep-related hypermotor epilepsy Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome
03	3. Child a. b. c. d. e. f. g. h. i. j.	hood Febrile seizures plus Self-limited epilepsy with autonomic seizures (Panayiotopoulos syndrome) Epilepsy with myoclonic-atonic seizures (Doose syndrome) Childhood epilepsy with centrotemporal spikes Autosomal dominant sleep-related hypermotor epilepsy Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome
03	a. b. c. d. e. f. g. h. i. j.	Febrile seizures plusSelf-limited epilepsy with autonomic seizures (Panayiotopoulos syndrome)Epilepsy with myoclonic-atonic seizures (Doose syndrome)Childhood epilepsy with centrotemporal spikesAutosomal dominant sleep-related hypermotor epilepsyChildhood occipital epilepsy (Gastaut type)Epilepsy with myoclonic absencesLennox-Gastaut syndrome
	b. c. d. e. f. g. h. i. j.	Self-limited epilepsy with autonomic seizures (Panayiotopoulos syndrome) Epilepsy with myoclonic-atonic seizures (Doose syndrome) Childhood epilepsy with centrotemporal spikes Autosomal dominant sleep-related hypermotor epilepsy Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome
	c. d. e. f. g. h. i. j.	Epilepsy with myoclonic-atonic seizures (Doose syndrome) Childhood epilepsy with centrotemporal spikes Autosomal dominant sleep-related hypermotor epilepsy Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome
	d. e. f. g. h. i. j.	Childhood epilepsy with centrotemporal spikes Autosomal dominant sleep-related hypermotor epilepsy Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome
	e. f. g. h. i. j.	Childhood epilepsy with centrotemporal spikes Autosomal dominant sleep-related hypermotor epilepsy Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome
	f. g. h. i. j.	Autosomal dominant sleep-related hypermotor epilepsy Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome
	g. h. i. j.	Childhood occipital epilepsy (Gastaut type) Epilepsy with myoclonic absences Lennox-Gastaut syndrome
	h. i. j.	Epilepsy with myoclonic absences Lennox-Gastaut syndrome
	h. i. j.	Lennox-Gastaut syndrome
	j.	
	j.	
	,	Childhood absence epilepsy
	k.	Acquired epileptic aphasia, including Landau-Kleffner syndrome
	XX.	Other developmental epileptic encephalopathies with onset in childhood
04	1. Adole	escence through adult
	a.	Juvenile absence epilepsy
	b.	Juvenile myoclonic epilepsy
	C.	Epilepsy with generalized tonic-clonic seizures alone
	d.	Autosomal dominant epilepsy with auditory features
	XX.	Other familial temporal lobe epilepsies
05		r benign
06		ridiopathic
07		r generalized/multifocal
		age relationship
01		lial focal epilepsy with variable foci
02		x epilepsies
03		essive myoclonus epilepsies
04	0	Il temporal lobe epilepsy with hippocampal sclerosis
05		ussen syndrome
06		emotional (gelastic) seizures with hypothalamic hamartoma
		ributed to and organized by structural-metabolic causes
01	-	tural (including tumors, vascular malformations)
02		
03		
02		atal insults
05		rmations of cortical development (including neurocutaneous syndromes)
00		chondrial and metabolic disorders
07		
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	AND NEC	
	08.	Genetic epilepsies
F.	Epilep	sies of unknown cause
G.	Condit	ions with epileptic seizures traditionally not diagnosed as a form of epilepsy
	01.	Benign neonatal seizures
	02.	Febrile seizures
	03.	Provoked seizures
Н.	Nonep	ileptic paroxysmal disorders
	01.	Syncope and anoxic seizures
		a. Vasovagal syncope
		b. Reflex anoxic seizures
		c. Breath-holding attacks
		d. Hyperventilation syncope
		e. Compulsive Valsalva
		f. Neurological syncope
		g. Imposed upper airways obstructions
		h. Orthostatic intolerance
		i. Long QT and cardiac syncope
		j. Hyper-cyanotic spells
	02.	Functional neurologic nonepileptic seizures and other behavioral, psychological, and
		psychiatric disorders
		a. Daydreaming /inattention
		b. Self-gratification
		c. Tantrums and rage reactions
		d. Panic attacks
		e. Dissociative states
		f. Nonepileptic seizures
		g. Hallucinations in psychiatric disorders
		h. Fabricated/factitious illness
	03.	Sleep-related conditions
		a. Sleep-related rhythmic movement disorders
		b. Hypnogogic jerks
		c. Parasomnias
		d. REM sleep disorders
		e. Benign neonatal sleep myoclonus
		f. Periodic leg movements
		g. Narcolepsy-cataplexy
	04.	Paroxysmal movement disorders
		a. Tics
		b. Stereotypies
		c. Paroxysmal kinesigenic dyskinesia
		d. Paroxysmal nonkinesigenic dyskinesia
		e. Paroxysmal exercise induced dyskinesia



AT AND NEO		
	f.	Benign paroxysmal tonic upgaze
	g.	Episodic ataxias
	h.	Alternating hemiplegia
	i.	Hyperekplexia
	j.	Opsoclonus-myoclonus syndrome
05.	Migra	aine-associated disorders
	a.	Migraine with visual aura
	b.	Familial hemiplegic migraine
	с.	Benign paroxysmal torticollis
	d.	Benign paroxysmal vertigo
	e.	Cyclical vomiting
	f.	Migraine with speech disorder
06.	Misce	ellaneous events
	a.	Benign myoclonus of infancy and shuddering attacks
	b.	Jitteriness
	с.	Sandifer syndrome
	d.	Nonepileptic head drops
	e.	Spasmus nutans
	f.	Raised intracranial pressure
	g.	Paroxysmal extreme pain disorder
XX.	Othe	r
I. Status	epilep	ticus
01.	Conv	ulsive
02.	Nonc	convulsive
03.	Foca	l motor
04.	Tonio	c status
05.	Febri	le
06.	Refra	actory and super-refractory
02. Genetic and	develo	pmental disorders
A. Inherit	ted me	tabolic disorders
01.	Disor	ders of amino acid metabolism
02.	Disor	rders of urea cycle metabolism
03.	Disor	rders of sulfur amino acids
04.	Disor	rders of amino acid transport
05.	Disor	ders of carbohydrate metabolism and transport
	a.	Glucose transporter deficiency
06.	Orga	nic acidurias
07.	Disor	rders of fatty acid oxidation
08.	Disor	rders of purine metabolism
09.	Porp	hyria
10.	Disor	rders of iron metabolism (including pantothenate kinase-associated
		odegeneration (PKAN))
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	AND		
	XX.	Other	
В.	Lysoso	mal disorders	
	01.	Glycogen storage diseases	
	02.	Gangliosidoses	
	03.	Gaucher disease	
	04.	Fabry disease	
	05.	Niemann-Pick disease	
	06.	Neuronal ceroid lipofuscinosis	
		Other	
C.	Leukoo	lystrophies	
		nal disorders	
		Rett syndrome	
	02.	Mitochondrial disorders	
	03.	Peroxisomal disorders	
	XX.	Other	
Ε.		osomal disorders	
		Autosomal abnormalities	
	•=•	a. Down syndrome (trisomy 21)	
		b. Trisomy 13	
		c. Cri du chat syndrome	
		d. Duplication/deletion	
		i. Angelman syndrome	
		ii. Prader-Willi	
		iii. Other	
		e. Williams syndrome	
		xx. Other	
	02	X-chromosomal disorders	
	02.	a. Fragile X syndrome	
		b. Other	
	03.	Other	
F.		ers of brain and spine development	
	01.	Anencephaly	
	02.	Myelomeningocele and encephalocele	
	03.	Chiari malformations	
	04.	Cerebellar malformations	
	05.	Skull malformations, including craniosynostosis	
	05.	a. Joubert syndrome	
		b. Dandy Walker and variants	
		c. Other	
	06.	Brain malformations	
	00.		
		a. Holoprosencephaly b. Septo-optic dysplasia	
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		AND NEO
		c. Schizencephaly
		d. Lissencephaly and other migrational abnormalities
		e. Agenesis of the corpus callosum
		f. Hemimegalencephaly
		07. Microencephaly and micrencephaly
		08. Macrencephaly, megalencephaly, and other overgrowth syndromes
		09. Hydrocephalus
		10. Cystic malformations (arachnoid, colloid, pineal, dermoid)
	G.	Neurocutaneous syndromes
		01. Neurofibromatosis 1 and 2
		02. Tuberous sclerosis
		03. Sturge-Weber syndrome
		04. Ataxia-telangiectasia
		05. Von Hippel-Lindau disease
		06. Incontinentia pigmenti
		XX. Other
	Η.	Cerebral palsy
		01. Spastic
		02. Dyskinetic/dystonic
		03. Ataxic
		XX. Other
03.	Vascu	ılar neurology
	Α.	Ischemic stroke (cerebral infarction and transient ischemic attack)
	В.	Intracerebral hemorrhage
	С.	Subarachnoid hemorrhage
	D.	Cerebral venous thrombosis
	Ε.	Reversible cerebrovascular constriction syndrome (RCVS) and posterior reversible
		encephalopathy syndrome (PRES)
	XX.	Other
04.		pinfectious diseases
	<u>A.</u>	Bacterial infections
	B.	Fungal infections
	<u> </u>	Mycobacteria, including tuberculosis
	D.	Viral infections
	<u> </u>	Protozoan infections
	F.	Parasitic infections
05	G.	Prion infections (e.g., Creutzfeldt-Jakob disease (CJD), others)
05.		bolic diseases, nutritional deficiency states, and disorders due to toxins, drugs, and
	pnysi A.	cal agents Metabolic diseases
	А.	01. Hypoxic-ischemic encephalopathy



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		02.	Disorders of glucose metabolism, including hypoglycemia, diabetic ketoacidosis, and nonketotic hyperglycemia
		03.	Hepatic encephalopathy
			Uremic encephalopathy, including dialysis dementia and dialysis dysequilibrium
		04.	syndrome
		05.	Disorders of sodium, potassium, and water metabolism, including hyponatremia,
			hypernatremia, hypokalemia, and hyperkalemia
		06.	Disorders of calcium and magnesium metabolism, including hypocalcemia,
			hypercalcemia, hypomagnesemia, and hypermagnesemia
		07.	Endocrine diseases, including those of thyroid, parathyroid, adrenal, and pituitary
			glands (including pituitary apoplexy)
		08.	Drug overdose
	В.		onal deficiency states
	С.	Toxins,	drugs, and physical agents
		01.	Effects of drug abuse
		02.	
			Effects of ionizing radiation
	D.		nic/therapeutic drugs
06.	Neuro		ogic disorders
	Α.	Neopla	sms
		01.	Primary
		02.	Secondary
07.	Behavioral neurology and neurocognitive disorders		
	Α.		m, dementia, and other cognitive disorders
		01.	Amnestic disorders (including transient global amnesia)
	В.	Neuroc	levelopmental disorders
	С.	Alterati	ion of mental status/encephalopathy/coma/brain death
		01.	Cerebral death criteria
	D.	Pseudo	obulbar affect/pseudobulbar palsy
	XX.	Other	
08.	Psych		isorders
	Α.		sive disorders
	В.	2	<i>i</i> disorders
	XX.		osychiatric disorders
09.	Quest		t associated with a specific neurologic disorder
	Α.	Norma	l anatomy, process, neurophysiology
	В.		acology
	С.	Medica	l-legal, public policy/regulatory factors, professional practice
	••	Medica	
	D.		pment through the life cycle: developmental processes, tasks, crises, transitions
			pment through the life cycle: developmental processes, tasks, crises, transitions Childhood (school entry, peer relations, individuation)
		Develo	





lumber of items: 220				
			Dimension 2	
			Physician Competencies and Mechanisms	
A. Neuroscience and mechanism of disease				
	01.	Neuroa	inatomy	
		a.	Cerebral cortex	
		b.	Connecting systems	
		с.	Basal ganglia/thalamus	
		d.	Brainstem	
		e.	Cerebellum	
		f.	Cranial nerves	
		g.	Spinal cord	
		h.	Spinal roots/peripheral nerves	
		i.	Ventricular system, CSF	
		j.	Vascular	
		k.	Autonomic nervous system	
		l.	Radiologic anatomy, cerebral blood vessels (angiography or MRA)	
		xx.	Other	
	02.	Neurop	pathology	
		a.	Basic patterns of reaction	
		b.	Cerebrovascular disease	
		с.	Trauma (cranial and spinal)	
		d.	Metabolic/toxic/nutritional diseases	
		e.	Infections	
		f.	Demyelinating diseases/leukodystrophies	
		g.	Neoplasms	
		h.	Congenital/developmental anomalies	
			i. Malformations of cortical development	
		i.	Degenerative/heredodegenerative disorders	
		j.	Myopathies	
		k.	Peripheral nerve	
		l.	Neuromuscular junction disorders	
		m.	Radiologic pathology pertinent to assigned pathology sections	
		n.	Medium and large-vessel vasculitis	
		xx.	Other	
	03.	Neuroc	hemistry	
		a.	Carbohydrate metabolism	
		b.	Lipid metabolism	
		с.	Protein metabolism	
		d.	Neurotransmitters	
		e.	Axonal transport	



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f.	Energy metabolism
g.	Blood-brain barrier
h.	Biochemistry of membranes/receptors/ion channels
i.	Neuronal excitation
ј.	Vitamins (general aspects)
k.	Inborn errors of metabolism
l.	Electrolytes and minerals
m.	Neurotoxins
n.	Free radical scavengers
0.	Excitotoxicity
р.	Normal CSF constituents and volume
XX.	Other
04. Neurop	hysiology
a.	Membrane physiology
b.	Synaptic transmission
С.	Sensory receptors and perception
d.	Special senses
e.	Reflexes
f.	Segmental and suprasegmental control of movement
g.	Cerebellar function
h.	Reticular system: mechanisms of sleep and arousal, consciousness, circadian
	rhythms
i.	Rhinencephalon, limbic system, visceral brain
j.	Learning and memory
k.	Cortical organization and function
l.	Cerebral blood flow
XX.	Other
05. Neuroin	nmunology/neuroinfectious disease
06. Neuroge	enetics/molecular neurology, and neuroepidemiology
a.	Mendelian-inherited diseases
b.	Other modes of inheritance
С.	Mitochondrial disorders
d.	Nucleotide repeat disorders
e.	Channelopathies
f.	Genetics of epilepsy
g.	Risk factors in neurologic disease
h.	Demographics of neurologic disease
07. Neuroei	ndocrinology
a.	Thyroid gland
b.	Cushing syndrome
С.	Corticosteroids
d.	Growth hormones



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е.	Hypothalamic function
f.	Adrenal gland
g.	Pituitary gland
h.	Prolactin
i.	Androgen
j.	Estrogen
k.	Progesterone
08. Pathop	hysiology
a.	Epilepsy
b.	Vascular
B. Clinical aspec	cts of neurologic disease
01. Epidem	iology
02. Risk fac	tors
a.	Risk factors for epilepsy
03. Signs ar	nd symptoms
04. Comort	pidities
a.	Psychiatric issues
b.	Cognitive issues
C.	Mortality
d.	Migraine
e.	Medical complications
f.	Sleep
g.	SUDEP
05. Course	of illness
a.	First-time seizure
06. Prognos	sis
07. Localiza	ation
08. Pregnar	ncy/peripartum
09. Complie	cations of illness
a.	Complications of stroke
b.	Complications of epilepsy
10. Quality	of life
a.	Dating
b.	Marriage
С.	Stigma
C. Diagnostic pr	ocedures
01. Neuroir	naging
a.	Structural imaging (computed tomography, magnetic resonance imaging)
	i. Head CT
	ii. MRI of the brain
	(a) MRI sequences—T1, T2, FLAIR, DWI, PWI, gradient echo, SWI, DTI
	iii. Specific protocols
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b. Vascular imaging (conventional angiography, computed tomographic
angiography, magnetic resonance angiography, ultrasound)
c. Functional neuroimaging, including fMRI, SPECT, PET
i. SPECT
ii. PET
iii. MRS
iv. fMRI
v. Diffusion tensor imaging
02. EEG (routine EEG, LTME, subdural and cortical EEGs)
a. Methods
i. Techniques and activation
(a) Hyperventilation
(b) Photic stimulation
(c) Sleep deprivation
(d) Supplementary electrodes
(e) Video use
(f) Response testing/interviewing
(g) Reactivity
(h) Cerebral death criteria
(i) Electrode placement
(j) Trendline/quantification
(k) Montage selection
(I) MEGs
(m) Electrocorticography/cortico-mapping
(n) Scalp EEG
(i) Routine
(ii) Ambulatory
(iii) Video
(o) Instrumentation, polarity, volume conduction, and other electrical
properties
(p) Intracranial recording
(i) Subdural grid electrodes
(ii) Intraoperative electrocorticography
(iii) Functional mapping
(iv) Stereo EEG and other depth electrodes
(xx) Other
ii. Artifacts
(a) Electrode pop
(b) Photoelectric
(c) Salt bridge
(d) Movement
(e) Muscle



TAND NE	
(f)	Eye movements/eye flutter
(g)	Rectus muscle spikes
(h)	Interelectrode distance errors
(i)	Glossopharyngeal
(j)	Machine/ventilator
(k)	60 Hz
(l)	Dissimilar metals
(m)	Bruxism
(n)	Fluid collection
(o)	Breach rhythm/skull defect
(p)	Sweat artifact
(q)	Suck artifact
(r)	Pulse artifact
(s)	ECG
(xx)	Other (e.g., bed motion, patting, IV drip, ICU artifacts)
b. Basic patterr	IS
i. Matur	ational, state, and age-related changes
(a)	Premature neonate
	(i) Trace discontinue
	(ii) Positive temporal theta bursts
	(iii) Delta brush
	(iv) Synchrony
	(v) Inter burst interval duration
(b)	Term neonate
	(i) Trace alternant/quiet sleep
	(ii) Activitè moyenne/wakefulness
	(iii) Multifocal sharps/quiet sleep
	(iv) High voltage slow/quiet sleep
	(v) Central apnea
	(vi) Active sleep
	(vii) Wakefulness
	(viii) Encoches frontales
(c)	Infant patterns
	(i) Sleep spindles
	(ii) Non-REM sleep: other
	(iii) REM sleep
	(iv) Waking posterior rhythm
(d)	Childhood
	(i) Waking posterior rhythm
	(ii) Central theta
	(iii) Non-REM sleep: hypnogogic
	(iv) Non-REM sleep: arousals



TAND NC	
(v)	Posterior slow waves of youth
(e) Adult	
(i)	Posterior waking rhythm
(ii)	Mu
(iii)	Beta
(iv)	Non-REM
(v)	REM
(vi)	Lambda
(vii)	POSTs
(viii)	Normal sleep findings
(f) Elderly	
(i)	Temporal theta
(ii)	Slowing of alpha rhythm
(iii)	Diminished amplitude
ii. Variants—norn	nal and uncommon
(a) Benign	epileptiform sharp transients
(i)	Rhythmic midtemporal theta burst of
	drowsiness/psychomotor variant
(ii)	Small sharp spikes/ Benign epileptiform transients of
	sleep
(iii)	Wicket spikes
(iv)	6 and 14 Hz
(v)	Subclinical rhythmic electrographic discharges in adults
(vi)	Midline theta rhythm
(b) Alpha rl	nythm variants
(i)	Slow and fast
(ii)	Squeak
(iii)	Asymmetry
c. Clinical correlations	
i. Seizures and o	ther paroxysmal events
(a) Focal	· · ·
(i)	By EEG findings
	aa. Ictal discharges
	bb. Interictal discharges
	xa. Focal spikes
	xb. Temporal intermittent rhythmic delta
	activity
	xc. Occipital intermittent rhythmic delta activity
<u> </u>	cc. Neonatal seizures
(b) General	
(i)	By EEG findings
	aa. Photoparoxysmal responses



IT AND NO	
	bb. Polyspike and wave
	cc. Generalized fast activities/tonic seizures
	dd. Electrodecremental seizures
	ee. 3-Hz spike-and-wave
	ff. Hypsarrhythmia
	gg. Slow spike-and-wave
	hh. Continuous spike-and-wave during sleep
ii. Focal lesions	
	nt rhythmic delta activity
	c delta activity
	heta/delta
(d) Focal supp	
	opathies: coma, death
· · · · · · · · · · · · · · · · · · ·	hm slowing
(b) Reactive t	
(c) Triphasic	•
	nt rhythmic delta activity
	c delta activity
(f) Alpha/the	
(g) Spindle co	
(h) Burst-sup	
(i) Cerebral d	
	termittent rhythmic delta activity
	elta brushes
	encephalopathies. including periventricular hemorrhage
iv. Drugs and treatm	· · ·
(a) Enhanced	
(b) Slowing	
	rm/seizure activation
	nic therapy effects
v. Periodic and unce	
	teralized periodic
	erpes simplex virus
	troke
(iii) G	lioblastoma
(xx) O	ther
(b) Generalize	ed or bilateral periodic
	ypoxia/anoxia (adult/neonate)
	rion
	eonatal brief electroencephalography rhythmic
	ischarges
	ther (e.g., subacute sclerosing panencephalitis)
	••••••••••••••••••••••••••••••••••••••



(c) Status epilepticus
(d) ICU-EEG terminology/ictal-interictal continuum
03. Magnetoencephalography
04. CSF examination/lumbar puncture
05. Laboratory studies
a. Hematologic studies
i. Blood count
ii. Platelet count
iii. Special coagulation studies
iv. Antiplatelet (aspirin, clopidogrel) resistance studies
b. Immunological studies
i. Inflammatory markers
ii. Other autoimmune studies (multisystem)
iii. Serologic studies
c. Biochemical studies
i. Glucose
ii. Cholesterol
iii. Blood gases
iv. Hepatic and renal tests
v. Toxicology screen
d. Infectious studies
i. Cultures
ii. PCR or other molecular studies
iii. Other
e. Urine tests
06. Neuropsychological and cognitive testing
a. Memory testing
b. Language
c. Executive function
d. Attention
e. Visuospatial
07. Cardiac testing
a. Electrocardiography
i. Monitoring
ii. Holter and event monitors
b. Transthoracic and transesophageal echocardiography (TTE and TEE)
08. Skin/nerve/muscle biopsy
09. Genetic testing
XX. Other
D. Treatment
01. General principles of neuropharmacology
a. Neuropharmacokinetics/neuropharmacodynamics



PRY AND NEU	
b.	Drug toxicity/side effects/idiosyncratic reactions/medication
	withdrawal/contraindications
С.	Drug interactions
d.	Pregnancy
	i. Teratogenicity/neurodevelopmental effects in offspring
	ii. Drug level fluctuations
	iii. Breastfeeding
e.	Age, gender, and ethnicity issues
f.	Pharmacogenomics
g.	Mechanisms of action
h.	Drug management decisions (initiation, continuation, discontinuation)
02. Pharma	acotherapy
a.	Drugs for migraine and other headache syndromes
b.	Analgesics (nonnarcotic, narcotic, etc.)
С.	Antiseizure medications
	i. Acetazolamide
	ii. Carbamazepine
	iii. Clonazepam
	iv. Clorazepate
	v. Diazepam (oral and rectal gel)
	vi. Divalproex sodium
	vii. Ethosuximide
	viii. Felbamate
	ix. Gabapentin
	x. Lacosamide
	xi. Lamotrigine
	xii. Levetiracetam
	xiii. Lorazepam
	xiv. Oxcarbazepine
	xv. Phenobarbital
	xvi. Phenytoin
	xvii. Pregabalin
	xviii. Primidone
	xix. Rufinamide
	xx. Tiagabine
	xxi. Topiramate
	xxii. Valproate
	xxiii. Vigabatrin
	xxiv. Zonisamide
	xxv. Clobazam
	xxvi. Eslicarbazepine
	xxvii. Midazolam



AV AND NEC	
	xxviii. Perampanel
	xxix. Cannabidiol
	xxx. Brivaracetam
	xxxi. Stiripentol
	xxxii. Cenobamate
	xxxiii. Other
d.	Drugs for sleep disorders
e.	Drugs for psychiatric disorders (sedative-hypnotics, antianxiety agents,
	antidepressants, antipsychotics)
f.	Vitamins/minerals/nutrients
g.	Immunomodulatory agents, including oral medications, prednisone, IV Ig, and
	plasma exchange
h.	Antimicrobial agents
i.	Drugs used for increased intracranial pressure and for brain/spinal cord edema
j.	Drugs for autonomic dysfunctions
k.	Drugs for dementia/cognition/alertness
l.	Spasticity treatments
	i. Botulinum toxin
m.	Antineoplastic agents
n.	Monotherapy vs polytherapy
	i. New onset seizure
	ii. Acute seizure
0.	Hormonal therapies
	i. ACTH
	ii. Other steroidal therapies
	iii. Progesterone therapies
xx.	Other
03. Neuror	nodulation
a.	Vagus nerve stimulation (VNS)
b.	Deep brain stimulation (DBS)
С.	Transcranial magnetic stimulation (TMS)
d.	Electroconvulsive therapy (ECT)
e.	Responsive neurostimulation (RNS)
XX.	Other
04. Critical	care
05. Surgica	al treatment/interventions
a.	Epilepsy surgery
	i. Indications for referral
	(a) Definition of intractable epilepsies
	(b) Duration of epilepsy and failure of response to medication
	ii. Evaluation for possible surgery
	(a) Wada testing and special neuropsychological evaluation



TAND NO
iii. Types of surgical procedure
(a) Focal resections
(i) Temporal lobe
(ii) Frontal lobe
(iii) Parieto-occipital
(b) Hemispherectomies
(c) Laser ablation
(d) Corpus callosotomies
(e) Repeat surgical procedures
(f) Other (including multiple subpial transections)
iv. Complications
v. Outcomes
b. Other
06. Rehabilitation
07. Psychotherapy, biofeedback etc.
08. Reassurance, observation, lifestyle modification, etc.
09. Specific dietary treatment
10. Genetic counseling
11. Complications of management
12. Gene therapy/enzyme replacement therapy/stem cell replacement
13. Non-surgical/non-pharmacological
XX. Other
E. Interpersonal and communications skills
01. Communication with patients
a. Communication of progress
02. Communication with patients' families
03. Communication with other professionals
04. Communication with the healthcare team
05. Communication with the public
06. Management of conflict
07. Common errors in communication
08. Patient and family education
a. Drug information
b. Compliance
c. Safety issues
i. Sleep deprivation
ii. Sports participation
iii. Drug and alcohol risks
iv. Driving regulations
v. Piloting regulations
vi. Bathing
d. School and work situations



i. IEPs ii. ADA iii. Disability iv. School/work action plans F. Professionalism
iii. Disability iv. School/work action plans
iv. School/work action plans
F. Professionalism
01. Professional behavior
02. Adherence to ethical principles (e.g., informed consent, research issues, clinical care)
03. Participation in the professional community
04. Sensitivity to diverse patient populations
05. End-of-life issues and brain death
06. Fatigue management/burnout
G. Practice-based learning and improvement
01. Development and execution of lifelong learning
a. Self-assessment and self-improvement
b. Use of evidence-based guidelines
c. Critical review of scientific literature
02. Formal practice-based quality improvement
H. Systems-based practice
01. Patient safety and the healthcare team
a. Medical errors and their prevention
b. Communication in patient safety
c. Regulatory and educational activities related to patient safety
i. General electrical
ii. EMG morbidity/complications
iii. EEG/monitoring morbidity and complications
iv. Electrode/neuroimaging safety
v. Driving
(a) Personal
(b) Business (e.g. truck driving, piloting)
vi. Employment
(a) Armed forces
02. Resource management
a. Parity
b. Access to care
c. Negotiation with payers
03. Community-based care
a. Community-based programs
b. Prevention
c. Recovery and rehabilitation
d. Knowledge of the legal aspects of neurological practice
04. Referral for appropriate consultation/decision making
05. Working with local and national disease-based and advocacy groups