Text

Description automatically generated with medium confidence

Medical Conditions – Clinical Electrophysiology

For Renewal of Accreditation and ACIR

Please complete the chart below by filling in the medical conditions seen by the resident over the course of the program. Patients evaluated, treated, or managed by the resident as part of the resident’s education throughout the course of the program should be included within the template.

The patient’s medical condition is only counted during the first patient encounter. **Patient encounters beyond the initial visit should not be included in the frequency count.**

|  |  |
| --- | --- |
| **Name of Graduate:** | |
| Medical Conditions **Clinical Electrophysiology** | **Number of Patients Evaluated, Treated, or Managed by the Resident as Part of the Program’s Curriculum** |
| **Nervous System** | |
| Entrapment Neuropathy (carpal tunnel syndrome, cubital tunnel syndrome) |  |
| Motor neuron disease |  |
| Neuromuscular junction defect (myasthenia gravis, botulism) |  |
| Polyneuropathy (demyelinating, axonal, hereditary) |  |
| Radiculopathy |  |
| **Musculoskeletal System** | |
| Myopathy (muscular dystrophy, myositis) |  |
| **Other** | |
| Insert additional conditions not reflected above |  |