



## American Board of Psychiatry and Neurology, Inc.

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

### CERTIFICATION EXAMINATION IN CLINICAL NEUROPHYSIOLOGY

#### 2019 Content Blueprint

(January 3, 2019)

<b>Number of questions: 220</b>	<b>Percent</b>
01. EEG	32-38%
02. NCS/EMG	32-38%
03. Other CNP	14-18%
04. Basic Science	12-16%
TOTAL	100%



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### CERTIFICATION EXAMINATION IN CLINICAL NEUROPHYSIOLOGY 2019 Content Outline

<b>01. EEG</b>
A. Methods
1. Techniques—activation
a. Hyperventilation
b. Photic stimulation
c. Sleep deprivation
d. Sedation
e. Supplementary electrodes
f. Video use
g. Response testing/interviewing
h. Reactivity
i. Cerebral death criteria
j. Electrode placement
k. Trendline/quantification
l. Montage selection
m. MEGs
n. Electrocorticography/cortico-mapping
o. Other (applications/indications and limitations of ambulatory EEG, scalp video EEG, and intracranial EEG monitoring)
2. Artifacts
a. Electrode pop
b. Photoelectric
c. Salt bridge
d. Movement
e. Muscle
f. Eye movements/eye flutter
g. Rectus muscle spicules
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



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	p.	Sweat artifact
	q.	Suck artifact
	r.	Pulse artifact
	s.	ECG
	t.	Other artifacts (e.g., bed motion, patting, IV drip, ICU artifacts)
B.		Basic patterns
	1.	Maturational, 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. NREM sleep: other
		iii. REM sleep
		iv. Waking posterior rhythm
	d.	Childhood
		i. Waking posterior rhythm
		ii. Central theta
		iii. NREM sleep: hypnagogic
		iv. NREM sleep: arousals
		v. Posterior slow waves of youth
	e.	Adult
		i. Posterior waking rhythm
		ii. Mu
		iii. Beta
		iv. NREM



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	v.	REM	
	vi.	Lambda	
	vii.	POSTs	
f.		Elderly	
	i.	Temporal theta	
	ii.	Slowing of alpha rhythm	
	iii.	Diminished amplitude	
2.		Variants—normal and uncommon	
	a.	Benign epileptiform sharp transients	
		i. RMTD/psychomotor variant	
		ii. SSS/BETS	
		iii. Wicket spikes	
		iv. 6-14	
		v. SREDA	
		vi. Midline theta rhythm	
	b.	Alpha rhythm variants	
		i. Slow and fast	
		ii. Squeak	
		iii. Asymmetry	
C.		Clinical correlations	
	1.	Seizures and other paroxysmal events	
		a. Focal	
		i. By EEG findings	
			aa. Ictal discharges
			bb. Interictal discharges
			xa. Focal spikes
			xb. TIRDA
			xc. OIRDA
			cc. Neonatal seizures
		ii. By specific epilepsy syndrome	
			aa. Rolandic/BECTS
			bb. Panayiotopoulos/BOEC
			cc. Other benign
			dd. MTLE
			ee. Rasmussen
			ff. Other focal
			gg. Focal NCSE/EPC



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	hh.	Landau-Kleffner syndrome/electrical status epilepticus in sleep
b.		Generalized
	i.	By EEG findings
	aa.	Photoparoxysmal responses
	bb.	Polyspike and wave
	cc.	Generalized fast activities/tonic seizures
	dd.	Electrodecremental seizures
	ee.	3-cps spike-wave
	ii.	By specific epilepsy syndrome
	aa.	Epileptic encephalopathies
	xa.	Ohtahara/burst suppression
	xb.	West/hypsarrhythmia
	xc.	LGS/slow spike-wave
	xd.	Doose syndrome
	xe.	Angelman syndrome
	xf.	Dravet syndrome
	bb.	Idiopathic generalized
	xa.	Childhood absence
	xb.	JME
	xc.	Other idiopathic
	cc.	Other generalized/multifocal
	dd.	NCSE/ictal stupor/spike wave stupor
c.		Nonepileptic events
	i.	Syncope/cardiac
	ii.	Psychogenic nonepileptic
	iii.	Other
2.		Focal lesions
	a.	IRDA
	b.	ADA
	c.	Sporadic theta/delta
	d.	Focal suppression
3.		Diffuse encephalopathies: coma, death
	a.	Alpha rhythm slowing
	b.	Reactive theta/delta
	c.	Triphasic waves
	d.	IRDA
	e.	ADA



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f.	Alpha/theta coma
g.	Spindle coma
h.	Burst-suppression
i.	Cerebral death
j.	FIRDA
k.	Extreme delta brushes
l.	Neonatal encephalopathies (incl. periventricular hemorrhage)
4.	Drugs and treatment effects
a.	Enhanced beta
b.	Slowing
c.	Epileptiform/seizure activation
d.	Hypothermic therapy effects
5.	Periodic and uncertain patterns
a.	Focal or lateralized periodic
i.	HSV
ii.	Stroke
iii.	GBM
iv.	other focal
b.	Generalized or bilateral periodic
i.	Hypoxia/anoxia (adult/neonate)
ii.	Prion
iii.	Neonatal BERDs
iv.	Other generalized periodic (e.g., SSPE)
c.	Status epilepticus
d.	ICU-EEG terminology/ictal-interictal continuum

<b>02. NCS/EMG</b>
A. Methods
1. Anatomy
2. Techniques
a. NCS
b. EMG
c. Repetitive stimulation
d. SFEMG
B. Basic patterns
1. NCS
a. Normal



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	i.	Pediatric normal patterns
	b.	Abnormal
	i.	Neuropathic
	ii.	Myopathic
	iii.	Other
2.	EMG	
	a.	Normal
	i.	Pediatric normal patterns
	b.	Abnormal
	i.	Neuropathic
	ii.	Myopathic
	iii.	Other
3.	Repetitive stimulation	
4.	Artifacts/Technical problems	
	a.	NCS (stimulation/recording)
	b.	Physiologic (e.g., temperature)
	c.	Needle examination technique
	d.	EMG waveform artifacts (e.g., pacemaker)
	e.	Artifacts in the ICU
C.	Clinical correlations	
1.	Peripheral nerve disease	
	a.	Diffuse axon loss
	i.	Sensorimotor
	ii.	Motor neuropathy
	iii.	Sensory neuropathy/ganglionopathy
	iv.	Pediatric axonal (e.g., Friedreich ataxia)
	b.	Diffuse demyelinating
	i.	Inherited (e.g., CMT, HNPP), adult
	ii.	Acquired (e.g., AIDP, CIDP, MAG, multifocal motor neuropathy with conduction block)
	iii.	Pediatric (e.g., CMT1A, CMT3, metachromatic leukodystrophy, adrenoleukodystrophy)
	c.	Focal
	i.	Mononeuropathy
	aa.	Median neuropathy at wrist (CTS)
	bb.	Ulnar neuropathy at elbow
	cc.	Ulnar neuropathy at wrist
	dd.	Radial neuropathy



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	ee.	Other upper limb mononeuropathy (e.g., musculocutaneous, suprascapular, axillary, proximal median)
	ff.	Fibular/peroneal
	gg.	Tibial
	hh.	Femoral
	ii.	Sciatic
	ii.	Plexopathy
	aa.	Brachial
	bb.	Lumbosacral
	cc.	Pediatric plexopathy (e.g., obstetric)
	iii.	Root/radiculopathy
	aa.	Lumbosacral
	bb.	Cervical
	cc.	Thoracic
	d.	Multifocal
	i.	Mononeuropathy multiplex
	ii.	Polyradiculopathy (cauda equina, infectious, inflammatory, infiltrative)
	iii.	Polyradiculoneuropathy (amyloid, diabetes, etc.)
	e.	Cranial
	i.	Trigeminal
	ii.	Facial
	iii.	Spinal accessory
	iv.	Other cranial neuropathy
	f.	Hyperexcitability states (Isaacs, other myokymias, fasciculation/cramp, etc.)
2.		Central disease—motor neuron, cord, stem
	a.	ALS/PLS
	b.	Inherited motor neuron diseases, adult (e.g., SMA, Kennedy)
	c.	Inherited motor neuron disease, pediatric (e.g., SMA, Hirayama, hexosaminidase deficiency)
	d.	Polio, West Nile virus, other infectious etiologies
	e.	Post-polio syndrome
	f.	Other (e.g., syring, AV fistula)
3.		Neuromuscular junction disease
	a.	Myasthenia gravis
	b.	LEMS
	c.	Botulism





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	d.	Other (congenital myasthenic syndromes; repetitive CMAPs with single stimuli, etc.)
4.		Muscle disease
	a.	Inflammatory
	b.	Dystrophy (pediatric) (e.g., Duchenne, Becker, congenital myotonic)
	c.	Dystrophy (adult) (e.g., myotonic, FSH, OPMD)
	d.	Metabolic/toxic (storage diseases, endocrine, mitochondrial, critical illness, steroid, etc.)
	e.	Channelopathies (periodic paralyses, myotonia/paramyotonia congenita, etc.)
	f.	Medications/toxin (e.g., steroid, chloroquine, statin)
5.		Prognosis, evolution of disease
	a.	NCS features
	b.	Needle EMG features
<b>03.</b>		<b>Other CNP</b>
	A.	Sleep
	1.	Normal (stages and morphology of sleep)
	2.	Apnea
		a. Obstructive
		b. Central
		c. Mixed
	3.	Narcolepsy
	4.	Polysomnography
	5.	Multiple sleep latency test
	6.	Periodic limb movements
	7.	Parasomnias
	B.	Evoked potentials
	1.	Technical
		a. Signal averaging
		b. Stimuli parameters
		c. Other
	2.	SSEP lower
		a. Normal pattern (e.g., poor cervical response)
		b. Peripheral neuropathy pattern
		c. Myelopathy pattern
	3.	SSEP upper
		a. Brain death/coma prognosis
		b. Focal lesion



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	4.	BAEP
	5.	VEP
	6.	Other
C.		Autonomic
	1.	Tilt table testing
	2.	Valsalva testing
	3.	Heart rate variability
	4.	QSART/TST
	5.	Sympathetic pathways
	6.	Parasympathetic pathways
	7.	Cardiovagal
	8.	Other
D.		Ethics
E.		Safety
	1.	General electrical
	2.	EMG morbidity/complications
	3.	EEG/monitoring morbidity and complications
	4.	Electrode/neuroimaging safety
F.		Central EMG, movement disorders
G.		Intraoperative monitoring and ICU
	1.	NCS
	2.	EMG
	3.	EEG (CEA, TAA, other carotid endarterectomy)
	4.	EP (SSEP, PAEP, MEP)
	5.	Mapping
	6.	Anesthetic events
<b>04.</b>		<b>Basic Science</b>
A.		Physiology
	1.	Potentials—resting, action, conduction
	2.	Synaptic transmission—NMJ, central
	3.	Generators—anatomy, mechanisms
	4.	Temperature effects
	5.	Volume conduction—polarity, far-/near-field
B.		Instrumentation