

## **ADULT EPILEPSY RESIDENT ROTATION**

**Background:** Epilepsy is a common neurological disease. The lifetime risk of a single seizure approaches 10% and approximately 1% of the population has recurrent seizures or epilepsy. For many people, antiepileptic medications completely control their seizures. However, approximately one-third of the people with epilepsy are not completely controlled by medication. For some of these people, epilepsy surgery may provide a cure. Unfortunately, people with refractory seizures suffer for an average of 20 years before undergoing epilepsy surgery.

**Overall Goal:** Provide a focused experience in the inpatient and outpatient evaluation and treatment of epilepsy in adults including an introduction to the interpretation of routine, extended and video EEG recording.

### **Specific Objectives:**

1. Participate in the daily review of Video/EEG studies
2. Participate in the daily review of Routine EEG studies
3. Attend adult epilepsy clinic
4. Attend Wednesday Epilepsy didactic session
5. Attend Thursday epilepsy conference or journal club
6. Attend monthly resident EEG conference

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# Washington University Adult Epilepsy Rotation Resident Core Curriculum

## I. Purpose

The purpose of this document is to broadly define the content of the core knowledge and principles to be mastered during the resident rotation in Adult Epilepsy.

## II. Definition of Subspecialty

Adult epilepsy is a subspecialty of Neurology that involves the diagnosis and treatment of adults with epilepsy. This subspecialty includes expertise in the interpretation and use of EEG studies in the diagnosis and management of epilepsy and other conditions which may mimic epilepsy. This specialty also includes expertise in the evaluation of patients with refractory epilepsy for surgical treatments.

## III. Core Curriculum

Residents should gain a basic knowledge which may include but not necessarily be limited to the following:

### A. EEG

- Understand how EEG data is displayed including the polarity convention, the difference between bipolar and referential montages and familiarity with commonly used montages
- Identify the patterns in normal EEG including awake background activity, drowsiness and sleep
- Identify artifacts and be able to distinguish from abnormal patterns
- Identify normal variants and be able to distinguish from abnormal patterns
- Identify and lateralize/localize abnormal patterns
- Distinguish epileptiform from non-epileptiform abnormalities
- Identify EEG patterns associated with common epilepsy syndromes

### B. Epilepsy

- Be familiar with the basic epidemiology of epilepsy
- Be able to obtain a focused history including the presence or absence of common risk factors for epilepsy and precipitants of seizures
- Be able to obtain a clear description of all of the patient's clinical events
- Identification and treatment of common epilepsy syndromes in adults
- Be familiar with the clinical semiology of common seizure types
- Be familiar with the clinical pharmacology and pharmacokinetics of Antiepileptic drugs (AEDs)
- Be familiar with the uses and limitations of ancillary testing including outpatient EEG and MRI.

- Be familiar with the identification and evaluation of potential epilepsy surgery candidates

**C. Emergencies**

- Be familiar with the identification and treatment of convulsive and non-convulsive status epilepticus

**Weekly Schedule (when not scheduled to be in the Adult Epilepsy Clinic)  
Neurodiagnostic Reading Room – 3<sup>rd</sup> floor Peters Bldg (EEG)  
Epilepsy Monitoring Unit – 11<sup>th</sup> floor BJH (bedside rounds)**

**Monday\*:**

8:00 AM – Midafternoon**	Video/EEG review (screening, EEG rounds, bedside rounds)
Midafternoon - ~6:00 PM	Routine EEG review (screening, report writing, daily read)

**Tuesday\*:**

8:00 AM – Midafternoon**	Video/EEG review
Midafternoon - ~6:00 PM	Routine EEG review

**Wednesday:**

8:00 AM - 12:00 PM	Video/EEG review
12:00 PM - 1:00 PM**	Clinical Neuroscience Lecture
1:00 PM - 3:00 PM	Video/EEG and/or Routine EEG review
3:00 PM – 4:00 PM	Weekly Epilepsy Didactic Session (O’Leary)
4:00 PM- ~6:00 PM	Routine EEG review

**Thursday:**

7:30/8:30 AM – 9:00/10:00 AM	Epilepsy Conference or Journal Club
9:00/10:00 AM – Midafternoon**	Video/EEG review
Midafternoon - ~6:00 PM	Routine EEG review

**Friday\*\*\*:**

7:30 AM - 8:30 AM	Neurology Grand Rounds
8:30 AM – Midafternoon**	Video/EEG review
Midafternoon - ~6:00 PM	Routine EEG review

\*Note that residents may be scheduled for variable afternoons in the Resident Clinic (COH 4<sup>th</sup> floor). On Monday and Tuesday afternoons that the resident is not scheduled to be in Resident Clinic, they may be assigned to be in the Adult Epilepsy Clinic (CAM 6<sup>th</sup> floor, Suite C).

\*\*Residents are excused for their noon/afternoon didactics.

\*\*\*On the 2<sup>nd</sup> Friday of the month, residents EEG conference at noon (Schwartz)