

Evaluation of Epilepsy Surgery Education in Epilepsy and Clinical Neurophysiology Fellowship Programs

The following survey contains a series of 10 questions to capture the scope of surgical epilepsy exposure and involvement of Epilepsy and Clinical Neurophysiology Fellows. Please select the responses that best represent your training program in a typical year. Your survey responses are anonymous, and the results will be used for research purposes only.

* Required

1. Email *

2. 1. Select which fellowship program type your Fellows complete:

Mark only one oval.

- Epilepsy
- Clinical Neurophysiology
- Both

3. 2. Select the NAEC Epilepsy Center Level where you serve as a Fellowship Program Director:

Mark only one oval.

- Level 3
- Level 4
- I do not work in a Level 3 or Level 4 Epilepsy Center

4. 3. Select the US region where your institution is located:

Mark only one oval.

- Northeast
- West
- Midwest
- South

5. 4. How many ACGME-accredited Epilepsy and Clinical Neurophysiology fellows are trained per year at your institution?

Mark only one oval.

- 1-2
- 3-4
- 5-6
- 7-8
- 9 or more

6. 5. Which of the following procedures are routinely performed at your institution?

Check all that apply.

- Stereoelectroencephalography (SEEG)
- Subdural electrode implantation
- Resective Surgery
- Hemispherectomy/Hemispherotomy
- Corpus callosotomy
- Radiofrequency ablation
- Laser Interstitial Thermal Therapy (LITT)
- Vagus Nerve Stimulation (VNS)
- Responsive Neurostimulation (RNS)
- Deep Brain Stimulation (DBS)
- None of the above

7. 6. How many epilepsy surgery procedures are performed per year at your institution?

Mark only one oval.

- 1-10
- 11-30
- 31-50
- More than 50
- None, these procedures are not performed

8. 7. Select the level of involvement of Fellows in surgical management at your institution (choose all that apply):

Check all that apply.

- Case presentation at surgical conference
- Decision making regarding type of surgical procedure to be performed
- Determination of electrode/lead placement
- Performing multimodal imaging coregistration for intracranial EEG
- Interpretation of intracranial EEG recording
- Performing electrical stimulation mapping
- Physical presence in the operating room
- Performing post-operative patient care
- Interrogation and programming of neurostimulators
- Determination of epilepsy surgery outcomes
- None of the above

9. 8. Approximately how many epilepsy surgery procedures is each Fellow personally involved with per year?

Mark only one oval.

- 1-10
- 11-30
- 31-50
- More than 50
- None, these procedures are not performed

10. 9. Which of the following didactic resources are routinely utilized by Fellows for formal epilepsy surgery training at your institution?

Check all that apply.

- Faculty lectures
- Textbooks
- Selected journal articles
- Online modules
- Other
- None of the above

11. 10. How are the Fellows' competency in the surgical management of epilepsy evaluated at your institution?

Check all that apply.

- Written assessment
- Oral assessment
- Faculty evaluations
- Other
- There are no specific assessments of epilepsy surgery competence

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