

## Fellowship FAQs

### Subspecialty field: Epilepsy

**What accreditation is available for fellowships (ACGME, UCNS, other) in this subspecialty field?** Epilepsy fellowships are accredited through the ACGME.

**Is board certification available in this subspecialty? If so, through which agency (ABPN, UCNS, other)?** The ABPN offers an Added Qualification in Epilepsy. This exam is available every other year.

**Does completion of this fellowship typically expand the scope of the subspecialist's hospital credentials (added credentials for performing procedures, interpreting studies, etc)?** Not all hospital credentialing boards require subspecialty training to allow individuals to interpret EEGs; however, many academic centers require subspecialty training in order to approve credentialing of an individual in the interpretation of VideoEEG or intracranial EEG. The National Association of Epilepsy Centers requires that all Medical Directors have ABPN certification in Epilepsy or Clinical Neurophysiology.

**Is completion of a fellowship typically necessary in order to achieve a subspecialty-focused practice in an academic practice or a large neurology group practice?** Most academic practices require fellowship training for an individual to conduct subspecialty focused practice and be considered for an academic appointment. There is greater variability in private group practices. The ACGME requires that Epilepsy Fellowship Program Directors be board certified in epilepsy.

**What type of cases do you see?** A wide range of people with epilepsy, including new-onset, medically refractory epilepsy, psychogenic nonepileptic seizures, epilepsy in special populations (the elderly, women, patients with co-morbidities). Presurgical evaluation is an important part of many fellowships. Pediatric epilepsy fellowships often are separate, but some programs overlap.

**What is the typical minimum duration of a fellowship in this field? Can it be completed on a part-time basis?** The generally accepted duration is 1 or 2 years for both pediatric and adult epilepsy fellows. Many institutions combine a year of dedicated ACGME accredited epilepsy fellowship with a second year in research, Sleep Medicine, or Clinical Neurophysiology. It is generally preferred if pediatric epilepsy fellows consider 2-year fellowships for additional experience in intracranial long term recordings and electrocorticography. A two-year fellowship is important when considering an academic career.

**How are fellowship positions obtained- match or hospital based? How far in advance should inquiries be sent to the program to ensure a candidate's consideration? Are there prerequisites beyond completion of a Neurology residency?** There is a formal match beginning with the 2024-25 fellowship appointments, administered under sponsorship of the American Epilepsy Society through ERAS and NRMP. Applicants should begin inquiring 18 months prior to the projected start date. There are no prerequisites aside from completion of a Neurology residency in good standing. Almost all fellowships require state licensure.

**What are the principal clinical exposures and clinical responsibilities that would be common to fellowships in this discipline?** Video/EEG monitoring, ICU monitoring, Electrocorticography, Long term intracranial monitoring, Ambulatory epilepsy practice, including antiepileptic drug management. The degree of direct patient care responsibility varies among programs. Most academic programs offer the opportunity to participate in ongoing clinical trials related to epilepsy.

Clinical fellows will evaluate and care for epilepsy patients in both in-patient and outpatient settings. The seizure monitoring unit and our active epilepsy surgical program provide a means for fellows to learn how to evaluate and refer patients for epilepsy surgery and device implantation. The Fellow will participate and rotate through all clinical aspects of the Epilepsy Program. Fellows will gain experience in interpretation of outpatient and inpatient EEG as well as long-term EEG monitoring of intensive care unit patients and intracranial and intraoperative EEG monitoring. The Fellows will participate in Wada testing, performing in-house epilepsy consults, conference presentation and interpretation of data, along with developing an understanding of the basic tenets of neurophysiology.

**Does faculty from outside Neurology typically participate in training? From which other specialties?** Sleep specialists (pulmonary medicine); neuroradiologists, neuropsychology, psychiatry, neurosurgery, and pathology

**Please provide a brief overview of the rotations a typical fellowship involves. Are there rotations required by accrediting bodies?** Video/EEG monitoring, ICU monitoring, Electrocorticography, Long term intracranial monitoring, Ambulatory epilepsy practice, Pediatric Epilepsy. The rotations are in EEG reading, epilepsy clinics and seizure monitoring unit. There is no accrediting body but the CSCN requires the EEG Laboratory Director to approve that the fellow is eligible to take EEG examination

**In your opinion, what are important qualities to look for in selecting a fellowship program in this field?** Adequate case variety and volume. Adequate supervision. Appropriate balance between service and education. Quality of faculty. Career trajectories of past graduates. Well trained and sufficient faculty members to train fellows. Adequate case variety and volume. Adequate supervision. Appropriate balance between service and education. Quality of faculty. Career trajectories of past graduates. Active faculty research in EEG and Epilepsy is essential.

**What are the most important words of advice you have for a neurology resident considering a fellowship in the subspecialty field?** Discuss with the epileptologists in your department your interest in the subspecialty field and ask for their recommendations as to where they would consider fellowship training.

Epilepsy is a multidisciplinary field and includes interaction of epileptologists, epilepsy surgeons, neuropsychologists and neuroradiologists and allied disciplines like nursing and psychologists in comprehensive patient care. A potential trainee should assess the availability of a well-integrated multidisciplinary team

**Is there a professional society specific to this subspecialty? Website:** American Epilepsy Society ([www.aesnet.org](http://www.aesnet.org)) or American Clinical Neurophysiology Society ([www.acns.org](http://www.acns.org))

**Recommended web-based resources for further information and searching for fellowship positions:**

<https://www.aesnet.org/education/epilepsy-fellowship-match>

<https://services.aamc.org/eras/erasstats/par/index.cfm>

<https://www.nrmp.org/fellowship/epilepsy-and-clinical-neurophysiology/>