CLTM® DOCUMENTATION FORM

Complete the form to log your required Long Term Cases (50), have supervisor sign, and upload to ABRET Credential Manager. ABRET will accept **up to three** LTM cases per day. A patient may only be counted **once during each admission**. CLTM eligibility may include but is not limited to EMU, critical care, and long-term floor patient care, scanning/monitoring of those studies, advanced set-up/ checking electrodes (i.e., 10-10 placement, phase II, etc.), clipping/pruning of actively running studies, intra/extra operative functional mapping, reviewing/reading/reporting of long-term and invasive EEGs. **No more than 10% of cases (5) may be ambulatory recordings (AEEG). No more than 10% of cases (5) may be 10-10 electrode placement or electrode maintenance**. Refer to the Content Outline in the CLTM Handbook for further task details*****. Cases must have been monitored within the last 5 years, with 10% (5) within the last 24 months. Remote Monitoring (RM) LTMs must include a letter of recommendation from either a Physician or NA-CLTM® NeuroAnalyst with documentation submission.

NAME of TECHNOLOGIST:

#	Date of Recording	Type of Recording ICU/EMU/AEEG/RM No more than 5 cases submitted may be AEEG.	Reading Physician	Indications for Recording	Length of Recording (min. 12 hours)	Tasks Performed* No more than 5 cases may be 10-10 electrode placement or maintenance.

I certify that the information provided is true and accurate.

Submit the completed form with your application.
Random auditing will be conducted by ABRET.
******All form pages must be signed******

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****Signature of Medical Director or Supervisor*** ***Date***

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Print Medical Director/Supervisor Name ***Phone #*** ***Email***

3/24

ABRET
Neurodiagnostic Credentialing and Accreditation

*Supervisor is expected to be in authority over candidate and able to verify submitted LTMs