${\bf CLTM}^{\circledR} {\bf DOCUMENTATIONFORM}$

Fill out 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. The CLTM eligibility will include patient care time, scanning of studies, set-up/checking electrodes; mapping and writing reports. No more than 10% of cases submitted (5) may be ambulatory recordings. Cases must have been monitored within the last 5 years, with 10% (5) within the last 12 months.

NAME of TECHNOLOGIST:

NO	Date of Recording	Type of Recording/ ICU/EMU/AMB	Reading Physician	Indications for recording	Length of Recording/ min of 12 hours	Tasks Performed	

A		I certify that the information provided is true and accurate.			Submit completed form with your application. Random auditing will be conducted by ABRET. ***All form pages must be signed***			
A		*Signature of Medical Direc	tor or Supervisor	Date			page	_of
	RET							8/18
Neurodiag and	nostic Credentialing Accreditation	Print Medical Director/Supe	ervisor Name	Phone #	Email			