Dear Sir/Madame,

This letter is to request approval for EEG/ERP testing for Mr/Ms \_\_\_\_\_\_\_\_\_\_\_\_\_\_. The patient is scheduled for testing \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

This patient was involved in a car accident/fall/physical trauma/\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_ and has been exhibiting signs and symptoms that may be related to concussion. (See chart notes)

Current working diagnoses include:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(If you diagnose a concussion here it may invalidate the necessity to perform the test since you already diagnosed a concussion)

The medical necessity for EEG/ERP testing of this patient has been established by a complete Intake & History/Patient Interview/Family Interview/ Neurological Exam including Cranial Nerves/Cognitive Evaluation/Balance Testing/medically accepted Questionnaires including CDC Acute Concussion Evaluation/SCAT 5/Rivermead/Beck Depression/Beck Anxiety/PTSD Impact of Events Revised (keep those that apply)

Electroencephalograph and Event Related Potential testing (EEG/ERP) are helpful for determining Traumatic Brain Injury (TBI) and Dementia including Alzheimer’s. EEG evaluates the brains electrical activity at rest. ERP evaluates the brains electrical activity during stimulation by collecting data from a large number of neurons all firing together or in synchrony while processing informationrelated to an external stimulus such as sound.

ERP's are an objective measure of cortical synaptic dysfunction that can result from mTBI, and are sensitive to cognitive deficits associated with even milder injuries. Thus, ERP testing can improve patient management by providing clinicians like myself and those to whom I may refer, with more accurate assessment of patients cognitive status after a traumatic event, especially in hard to evaluate cases.

The EEG/ERP device used in my office is the FDA-cleared Cognision System. This same system is used by neurologists around the country, major pharmaceutical companies and at Veterans Administration clinics in conjunction with Boston University researchers. The technical component of the test is administered in my office by a trained staff member directly overseen by me with the test results interpreted by a qualified neurologist.

CPT 95816 - EEG including recording awake and drowsy; 20-40 minutes.

EEG/ERP as part of a protocol for diagnosing Traumatic Brain Injury (TBI) or Concussion is recommended in The American College of Occupational & Environmental Medicine's (ACOEM) latest publication, *Traumatic Brain Injury*. ACOEM is a leading evidence based medical guideline. You will find these recommendations on pages 8, 10+ and 238+ for TBI and Cognitive Event Related Potential. Page 238,*"Cognitive ERP latency...reliable diagnostic measure following TBI..."* Audiometry is included in our EEG/ERP testing and is also ACOEM recommended on page 269 to assess damage to hearing structures for TBI patients.

(***ACOEM info is copyrighted. We highly recommend you contact ACOEM for membership access to their Guidelines including their latest copyrighted Traumatic Brain Injury publication. Please contact the Reed Group at 800-347-7443 or www.reedgroup/solutions/#guidelines.com to become a member.***)

The cost for the EEG/ERP test is $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Please provide authorization for the EEG/ERP testing as soon as possible. The quicker and more accurate the diagnosis, the better the patient outcome and the more time, energy and money can be saved by all stakeholders.

I have include the Cognision Application Brief entitled *ERP for Diagnosis and Prognosis of Traumatic Brain Injury* by Marco Cecchi, PhD. (The bibliography is impressive if you want to comment on that)

If you have any questions or require further information please contact me.