



May Seminar Notice
State Chest Conference

Presented by

Yale University School of Medicine's
Section of Pulmonary, Critical Care & Sleep Medicine

**EEG Patterns of Undetermined Significance in
Critical Illness – To Treat or Not to Treat**



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Wednesday, May 4, 2016, 3-4 pm
Fitkin Amphitheater

Host: Margaret Pisani, M.D.

There is no corporate support for this activity

This course will fulfill the licensure requirement set forth by the State of Connecticut

ACCREDITATION

The Yale School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

DESIGNATION STATEMENT

The Yale School of Medicine designates this live activity for 1 *AMA PRA Category 1 Credit(s)*TM. Physicians should only claim the credit commensurate with the extent of their participation in the activity.

NEEDS ASSESSMENT

Continuous brain wave monitoring (cEEG) has become routine in the care of patients with critical illness. Patients with critical illness, especially those with acute brain injury, are at increased risk for seizures, the majority of which are nonconvulsive and would go undetected without cEEG monitoring. However, many patients exhibit EEG patterns that do not meet strict criteria for seizure, but in fact may be harmful to the brain. To date, it remains unclear which EEG patterns in critical illness are dangerous and need to be treated and which patterns are not and can be observed. Increased awareness as well as focused research efforts are needed to address how we can minimize neurological injury and unnecessary medications for the best long term brain function in patients with critical illness.

LEARNING OBJECTIVES

At the conclusion of this activity, participants will learn to:

1. List the indications for EEG monitoring in critical illness
2. Explain the difference between seizures and EEG patterns commonly seen in critical illness
3. Describe the role of therapeutic anti-seizure medication trials in critically ill patients with potentially harmful EEG patterns

FACULTY DISCLOSURES

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