

The ClearPoint® System Initial Site Analysis:

Neurology





Epilepsy:

Does the institution have a Level 4 epilepsy center?:

Yes No

Who are the epileptologist(s)? Are they available to meet with ClearPoint?:

Are DBS & RNS used in the epilepsy practice? If so, how often, (example: how many DBS / RNS cases done for seizures in the last year)?:

How are DBS or RNS leads implanted currently? Does neurology play an active role in directing placement by going to the OR for lead implantation? If so, does neurology bill for their services?:

Is laser therapy used for epilepsy? If so, how often?:

How are treatment decisions made regarding refractory epilepsy cases? Is there a joint conference with neurosurgery?:

Movement Disorders:

Does the institution have a multidisciplinary movement disorder clinic, a movement disorder neurologist, or a general neurologist with an interest in movement disorders?:

Yes No

Who are the movement disorder neurologist(s)? Are they available to meet with ClearPoint?:

Is DBS used in this practice? If so, how often, for instance how many DBS were done in the last year for Parkinson's, Essential Tremor, or Dystonia?:

How are DBS leads implanted currently? Does neurology play an active role in directing placement by going to the OR for lead implantation? If so, does neurology bill for their services?:

How are treatment decisions made regarding refractory epilepsy cases? Is there a joint conference with neurosurgery?:

How does neurology generally feel about the following?: DBS vs. Medical Management / Microelectrode Recording (MER) vs. no MER DBS / Staged vs. Simultaneous DBS

If neurology is open to asleep DBS, what types of patients do they see as appropriate (e.g. all patients, anxious patients, elderly patients, GPi target, etc.)?: