

# Adult Epilepsy Services - Neurosciences

## Scalp Telemetry/Video EEG

Your consultant has requested that you be admitted for a test known as scalp-video telemetry. This leaflet explains the purpose and nature of the test, answers most of your questions and prepares you for admission to hospital. To ensure that you are fully prepared for the test and to update us about your present medical condition, we are planning to contact you by phone as part of a **pre-admission consultation**.

The proposed date and time for your pre-admission consultation by telephone is

**Date:** MM/DD/YYYY **Time** \_\_:\_\_:\_\_ (Approx 15 to 20 minutes)

This is the telephone number we are planning to contact you on: \_\_\_\_\_

The purpose of the telephone consultation is to clarify the arrangements for your admission and discharge. It also serves as an opportunity to obtain a description of the seizures/episodes/attacks we hope to observe during your stay, record your present medication and answer any questions you may have concerning your test and admission to Addenbrooke's hospital. You are also welcome to visit the Telemetry unit prior to your admission. This can be arranged by contacting the ward on the number below.

If the date and time above are inconvenient or the telephone number is incorrect, please contact one of the telemetry team member on the telephone numbers below.

**Erica Chisanga, Consultant Nurse-Epilepsies**

**Tel: 01223 217992**

**Diane Anstey, Senior Neurophysiology Technician**

**Tel: 01223 217136**

**Cath Jarvis, Admissions Co-ordinator**

**Tel: 01223 216021**

**Telemetry Unit, Ward A4**

**Tel: 01223 216311**

## What is scalp telemetry?

The purpose of scalp telemetry is to record on EEG (electroencephalogram) any spontaneous electrical activity of the brain. At the same time it aims to record any physical movements and sounds that may occur during your usual attacks, episodes or seizures. A wall mounted video camera; microphone and the EEG cabling are set up at the telemetry bed. We aim to record three or more of your usual attacks, episodes or seizures. The purpose of recording both the EEG and video is to establish if any electrical changes occur in the brain prior to or during any physical symptoms you may experience.



The telemetry test can be helpful in

- Confirming a diagnosis of epilepsy or other conditions such as sleep and movement disorders.
- Establish the epilepsy focus as part of the epilepsy surgery assessment process.
- Recording exactly what occurs during the attack, episode or seizure.

The telemetry team will review the information recorded and forward a written report for your referring consultant/GP. It is not always possible to inform you of the result of the telemetry test prior to discharge, as the information recorded often has to be reviewed at length before a conclusion can be made.

## What will happen to me during monitoring?

You will be connected via scalp electrodes (thin plastic discs applied with special glue to your scalp and hair) to a computerized EEG monitoring system and within view of video camera. The video/EEG will continuously (24 hours a day) record until three or more of your usual attacks, episodes or seizures are recorded. You will be asked to wear a waistcoat to safely hold parts of the monitoring system. If you experience only nocturnal movements or sleep disturbance, we may only need to monitor you during sleep at night and you may be able to be disconnected from the monitoring system during the day time. This will be discussed with you during your preadmission telephone consultation and on admission.

## Would the glue affect my hair or scalp?

A small number of people find that the glue irritates their scalp. This can be treated with special cream which can be applied on the areas of the scalp that are affected. The glue does not pull out the hair and can easily be washed out with shampoo as soon as the tests are completed.

## How long will I be in hospital?

It is very difficult to predict how long you will be in hospital as this varies between individuals. The average stay is between three to five days. It is dependent upon recording three or more attacks, episodes or seizures and as most people can not trigger their turns it is not possible to predict the exact length of stay.

## Will my drugs be stopped or reduced?

If you are taking medication as treatment for your attacks, episodes or seizures, we may reduce or stop them during the recording. This will normally be discussed with you 24-48 hours after your admission if no attacks, episodes or seizures have taken place. The medical team will discuss with you reducing or even stopping some of or all of your medication. If the drugs are reduced, you will normally start taking them at least 24 hours before you are discharged home. Please bring all the medication/drugs that you are presently taking when you are admitted to hospital.

## Should I stop my drugs before admission for this test?

No, you should not change any of your medication before you are admitted for this test.

## What kind of room will I be in?

Telemetry is set up in a side room with ensuite facilities. As the EEG leads are connected to the recording equipment, walking around is difficult and you should expect to spend most of your time sitting in bed or in nearby chair. You will be **specialled** by a member of the nursing team for all or most of your stay in hospital.

## What does specialling mean?

This means that a member of the nursing team sits with you in your room so that they can observe your seizures and also ensure that you are safe at all times. This person is the one you can talk to about any of your concerns and they will ensure that they get addressed in a timely fashion

## Can I have a bath or shower while in hospital?

We highly recommend that you have a full bath or shower at home on the morning of your admission. If that is not possible you may have one on the morning of your admission before you get connected to the investigation equipment. After that you are not allowed to bath or shower as you will be attached to a number of wires. You may give yourself a wash in the ensuite part of the room which should take no more than 15 minutes in the morning and 15 minutes in the evening. Disconnection may cause loss of important information therefore we would like you to remain on the monitor all the time.

Early capture of seizure activity may reduce your hospital stay, so that you get discharged to the comfort of your home and bathing facilities. We would appreciate your cooperation very much.

## Can I smoke?

Addenbrooke's hospital has a smoking restriction indoors with few outdoor smoking sheds. These may take time to get to and any time spent off the system is time wasted. We therefore discourage patients to smoke during this short hospital stay. If you know that not being able to smoke or restricted smoking for up to five days is going to be very difficult for you, we recommend that you make an appointment with your GP (several weeks before your admission) to discuss a prescription for nicotine replacement patches or inhalator whilst you are in hospital. We do not recommend nicotine gum or any type of gum as the chewing movements interfere with the EEG recording. If you do however need to go to the smokers' shed, we would urge you to do so under supervision, once per shift i.e. three times only in a twenty four hour period. You will be accompanied by one of our healthcare assistants who would ensure your safety should you suffer a seizure.

## What are the visiting times?

Visiting is between 10:00 to 12:00 and 15:00 to 20:00. Only two visitors are allowed per bed at one time.

## Can a relative/friend stay with me?

Due to restricted space and limited facilities within the hospital we are unable to provide overnight accommodation. We can provide details of local hotels, bed and breakfast and other types of accommodation available in the area.

## Patients with learning disabilities

A family member or carer is encouraged to remain with their relative/client throughout their stay if they wish. Please inform either the epilepsy specialist nurse or the telemetry co-ordinator that you wish to stay and appropriate arrangements can be made for a fold away bed beside your bed.

## **What should I do if I know that a seizure or an episode is about to happen?**

If you feel that an attack, seizure or episode is about to happen, you should press the alarm button which will be attached to your waistcoat. You will be shown how to use it on admission. This will alarm at the nurses station and in the recording room. The telemetry nurse/technician will come to your room to complete the assessment and ensure you are safe both during and after the episode. The telemetry nurse will also carry out a check every hour to monitor your progress, ensure your equipment is working correctly and discuss if any of your usual attacks, episodes or seizures have occurred.

## **What should my relatives/friends do if a seizure occurs during visiting?**

Friends and family may also notify staff of any attacks, episodes or seizures they suspect have occurred. This can be done by pressing the alarm button on your waistcoat or by calling for help in the microphones that are placed in the room. This taped information is important for analysis of the event.

Please note that even while you relatives/friends are in your room, the hospital has legal responsibility for your safety so a member of staff will be in near proximity but at the same time allow you some degree of privacy

## **When will I be informed about the results of my tests?**

It may take two to four weeks for the results to be available. The neurologist and the telemetry team may be able to discuss the test results before you are discharged but often a more detailed review of your test is needed before a result is available. A written report will be forwarded to your referring consultant.

## **When will I know when I can go home?**

You will be informed at least 24 hours before discharge that you are able to go home. We recommend that when possible you arrange for a family member or friend to pick you up and accompany you home.

## **Am I likely to experience any problems at home after this test?**

It is unlikely that you will experience any problems after discharge. If your medication was reduced or stopped during your admission, you are at a slightly increased risk of experiencing problems with seizure. This is normally avoided by restarting your medication at least 24 hours before you are discharged home.

In the unlikely event of a dramatic increase in the number or change in your seizures (usually within 24-48 hours of discharge), you should contact any of the following:

- 1) Epilepsy Nurse Practitioner Tel: 01223 217992
- 2) Your GP
- 3) Attend your nearest Accident and Emergency Department.

**Remember your relative/friend can dial 999 if you are experiencing one seizure immediately after another without recovering between seizures.**

## What else do I need to know?

### Clothing

To ensure your modesty and comfort, please wear loose clothing that is cool and comfortable. Most people wear jogging tops and trousers, T-shirt, shorts or nightclothes. Tops that are front fastening are easier to put on and take off due to the monitoring leads placed on your scalp.

Please note that we recommend you wear underwear as often during an attack nightclothes may ride up and as constantly in the view of a camera this may be embarrassing.

You will also be required to wear stockings that help to reduce the risk of deep vein thrombosis. Deep vein thrombosis is a potential problem as your mobility will be limited for at least three days. Nursing staff will explain this to you in more detail when you arrive on the ward.

### Lighting

To ensure adequate video recording, overhead room lights will remain on continuously in the day and infra-red lights during the night. If you wish to use a sleep mask, please bring one that has elastic ties.

### Privacy

Although being continually observed may be bothersome, it is necessary to gather the necessary information and monitor your safety. Please note that areas such as the bathroom are not monitored by the camera. You will be asked to sign a consent form agreeing to be video monitored prior to being connected to the monitoring system. You will not be able to wash your hair while your electrodes are in place. Also a bath and shower are not possible until monitoring is completed; this prevents the monitoring equipment becoming wet or failing. You may ask to have a bath or shower prior to being connected to the monitor.

### Specialling

This is a term used to describe the practice of having a member of the health care team sitting by your bedside, in this case they would be seated on a chair on the side of the bed to ensure your safety and also observe any activity that may take place during your admission (day and night). This is a vital element of Video EEG Telemetry monitoring as the person specialling you will also be in a position to summon help for you should you need it when you have a seizure. Seizures may increase in number especially when you have your medications reduced.

### Travel arrangements for admission and discharge

It is recommended that whenever possible you make your own travel arrangements for admission and discharge. A friend or family member should accompany you. Hospital arrangement will only be arranged in exceptional circumstances based on medical grounds only. If you require hospital transport, our admissions clerk will contact you to make the arrangements.

The following information may assist with your travel arrangements.

- 1) Information on how to travel to Addenbrooke's hospital with public transport is available-please speak to the epilepsy nurse or visit <http://www.addenbrookes.org.uk> and choose the "finding us" option
- 2) A refund of travel costs is possible if you can provide the information below
  - a) If you are claiming any of the following benefits: income support, job seekers allowance, family tax credit or valid HC2/HC3 forms. Please contact the hospital transport department if you are receiving any benefits not listed above. Tel: 01223 274474.
  - b) Provide a receipt or actual ticket from the purchase of tickets for the train or bus journeys.
  - c) Admission letter from Addenbrooke's hospital with the planned date of admission detailed.
  - d) Car journeys: the cost of petrol used can be reimbursed but based on mileage rather than amount of petrol purchased.
  - e) Refunds can be made for parking fees.
  - f) Refunds can be made in person at the reception desk in the outpatients section of the hospital on level 2. Please note you will need to produce the information detailed above. Without this a refund cannot be processed.
  - g) If you are not in receipt of benefits you can not claim refund for travel costs.
- 3) It is not possible to reimburse costs for: taxi/cab fares, visitors travel and accommodation.
- 4) Escort for travel. This can be agreed based on medical grounds only and travel costs will only be available for the journeys they are actually escorting the patient and not for their own return journey.

- 5) Car parking is available in the various car parks for patients and visitors. There is also a Park and Ride option for visitors.

### **Boredom**

As the test involves you being within view of the camera and connected to the EEG system, your mobility will be restricted. You are advised to bring with you some games, books, music etc which you can easily carry and store with you. Remember not to bring anything that is valuable as unfortunately hospital thefts can occur. If you decide to bring a laptop with you, make sure that it is working on charge and **not plugged in**. You may arrange with family for it to be charged at home overnight. Any other electrical equipment should not be used while you are being monitored as they may interfere with the recording. Each bed has a wall mounted entertainment and telephone system. You can purchase a reusable card to pay and view the TV and telephone. You will have your own telephone number that friends and family can call directly at your bed area. Staff on the ward will give you more information about this on admission. You may also use your mobile phone as this would be cheaper and easier for your family and friends to keep in contact with you. This should not interfere with the monitoring equipment. The room is also equipped with a DVD player which can also play audio CDs

### **Refreshments/Meals**

A daily menu sheet will be given to you on which to choose your meals from the available menu. Special diets for medical reasons can be requested. The hospital has a food court with a wide selection of meals. There are two coffee shops in the food court. However, you are not allowed to go and have meals outside the room- depending on the staffing numbers, a member of staff can go and purchase what you need. This can be allowed no more than three times per day. Otherwise a member of your family or friend can do so on your behalf

### **Shops**

There is a shop in the main outpatient department and two in the main concourse from where you can buy newspapers, magazines, drinks, sweets, fruit and sandwiches to name a few items. All the shops are open daily. As you are not allowed to leave the monitoring room, a member of your family or staff can go out and purchase what you need from the shops.

### **Who should I contact if I have any concerns/questions about this test?**

If you have any further questions, please ask during the pre-admission phone clinic or contact any of the telemetry team whose names and contact details are at the front of this leaflet.



We are currently working towards a smoke-free site. Smoking is only permitted in the designated smoking areas.

For advice and support in quitting, contact your GP or the free NHS Stop Smoking helpline on 0800 169 0 169

## Help with this leaflet:



If you would like this information in another language, large print or audio format, please ask the department to contact Patient Information: 01223 216032 or [patient.information@addenbrookes.nhs.uk](mailto:patient.information@addenbrookes.nhs.uk)



## Document history

Authors	Consultant Nurse-Epilepsies
Department	Cambridge University Hospitals NHS Foundation Trust, Hills Road, Cambridge, CB2 0QQ <a href="http://www.cuh.org.uk">www.cuh.org.uk</a>
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