



Canadian Society of
Clinical Neurophysiologists

Société canadienne de
neurophysiologie clinique

CSCN EMG Examination certification requirements:

Last updated July 2015

Eligibility

Candidates must meet all the eligibility requirements for the year in which the examination is taken. Acceptance is on a first come first served basis for those in their 5th year of training or who have completed training. Should the exam reach the maximum number of applicants then no further candidates will be accepted. Those in 4th year of training will be accepted on a space available basis. Only three attempts at the exam will be allowed.

Specialty certification

Candidates must have an FRCPC or equivalent certificate from the USA (or be senior residents in the 4th or 5th year of an approved training program leading to certification) in:

Physical Medicine & Rehabilitation or Neurology (adult or pediatric)

Candidates from overseas may be excused the certification requirement above if they are currently eligible to practice as a specialist in Canada in PM&R or Neurology, or if they are current fellows in a neuromuscular fellowship program in Canada.

Training requirements

Minimum 6 months training, at least 3 of which must be continuous and full time, within the last 5 years. Alternatively 3 x 2 month full time training periods is also acceptable.

Minimum of 400 EMG examinations covering a full range of neuromuscular diseases performed during training

Supervision by a current member of the CSCN or the ABEM

If training took place more than 5 years ago, a minimum of 200 examinations per year must have been performed since training

General guidelines

“Full time” means ideally a neuromuscular/electromyography rotation in a RCPSC (or US equivalent) approved residency program. Located in an academic center with opportunities to see the full range of neuromuscular diseases (including ambulatory, inpatient and ICU), to perform a full range of electrodiagnostic studies and to be supervised by a range of qualified neuromuscular and electrodiagnostic specialists. The EMG lab should have sufficient volume of patients with one or more clinics running daily for 5 days a week.

“400 EMG examinations” is to be interpreted that the candidate has performed a relevant history, clinical examination and appropriate electrodiagnostic studies (nerve conduction studies +/- needle EMG) on 400 individual patients with direct supervision. Studies must be documented such that the supervisor (or chief examiner on request) may evaluate the clinical case and electrodiagnostic studies performed. It is expected that candidates will have performed the majority of studies independently from start to finish but it is acceptable to count studies if an EMG technologist and/or an electromyographer gave partial assistance for some of the studies. Candidates should know that he/she must be able to perform all electrodiagnostic testing independently, if required. It is also acceptable for the supervisor to be present in the room providing appropriate teaching and feedback so long as the candidate still performs the clinical assessment and electrophysiological studies independently for the majority of the studies.

“Full range of neuromuscular diseases” means ideally that the candidate should see at least one case in every main area of neuromuscular disease and be able to perform and appropriate clinical assessment, plan and perform independently the appropriate electrodiagnostic studies for that situation. Also ideally no more than 250 studies (of the 400) should be in the common areas such as CTS, Ulnar neuropathy at the elbow, and L5/S1 radiculopathies.

Training programs should provide a structured educational experience in the following areas (adults and children):

1. Anatomy and physiology of nerve and muscle
2. Pathology of neuromuscular diseases
3. Clinical neurophysiology of neuromuscular diseases
4. Clinical diagnosis, investigation and management of neuromuscular diseases
5. Electrodiagnostic medicine including technical skills in and interpretation of: motor and sensory nerve conduction studies in cranial nerves and limbs, Repetitive nerve stimulation, late responses such as F-waves and H-reflex, Blink reflex, and Needle EMG
6. Some knowledge and basic interpretation of other techniques such as evoked potentials (SSEPs), Single fiber EMG, autonomic testing, transcranial magnetic stimulation and quantitative sensory testing is strongly encouraged. Candidates may be assessed on their knowledge in these areas but will not be expected to demonstrate proficiency in these studies.

Appeal mechanisms

The chief examiner and the CSCN exam committee can give some “leeway” to these requirements under exceptional circumstances and only if there is adequate logistical resources to do so in that year. Please submit a letter with your application outlining the reasons why you might be exempted from these criteria.

There is also a formal appeal mechanism if the chief examiner initially refuses your application and you feel you should be allowed to sit. An email to the CSCN secretary within 30 days of the refusal stating your specific reasons for the appeal is sufficient.

Should you fail the examination then there is also a formal appeal mechanism. An email to the CSCN secretary within 30 days of the exam result stating your specific reasons for the appeal is sufficient.