



## NEWSLETTER

Since its initiation two years ago, our EMG program has been collecting data on EMG claims. In our September 2021 Newsletter, we discussed some basics about EMGs including a study of the medical usefulness of EMG reports which found that 68% were not useful for clinical decision making. We also highlighted the importance of certification for providers and labs who perform EMG studies (If you need a refresher, [please use this link](#)). Today's newsletter focuses on our EMG quality data to provide guidance in EMG claims in order to maximize patient care and minimize insurance provider risk.

Our program evaluates not only the overall technical and clinical quality of EMG and Nerve Conduction Studies, but also their medical usefulness in directing the care of injured patients and the credentials of the providers doing the tests. Though there is credentialing in EMG which includes board certification through the American Board of Electrodiagnostic Medicine and accreditation of an EMG facility, very few payors utilize credentialing as part of their assessment of EMG providers.

The EMG reports we review receive a score based on the quality of the study, medical usefulness of the results, and correlation with MRI imaging (*read more about [EMG + MRI reviews here](#)*). At present, we are using a simple 1 through 3 scoring system. Studies that score a 3 are considered not medically useful and, if medically indicated, a repeat study would be required. This scoring process has resulted in our ability to analyze a number of variables pertaining to the quality of the study.

Our initial observations regarding studies that score a 3 I suspect would be of interest to you, as, not surprisingly, none of the studies which have scored a 3 thus far have been performed by accredited labs. Less than 10% of the studies scoring a 3 have been done by physicians who are board certified by the American Board of Electrodiagnostic Medicine. The remaining 90+ percent of unacceptable studies have been performed by individuals working in labs that are not accredited and with the studies being performed by individuals who are not board certified in EMG. This is often because there are no legal requirements regarding performance of EMG and nerve conduction studies by licensed practitioners in most jurisdictions.

As is apparent from this initial data, quality matters. Fill out this form for a [free demo](#) or [contact us](#) if you would like to discuss the importance of scheduling EMG patients to ensure that, if possible, the facility is accredited with exemplary status or at a minimum, the doctor doing the study is ABEM certified. If you are in the [casualty space](#), fill out the same form to discuss with us our expert EMG reviews and how they can help improve risk management.

Ready to submit a case? [Click here](#).

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