

**NEUROLOGY CENTER FOR EPILEPSY AND SEIZURES – CONTINUOUS VIDEO  
ELECTROENCEPHALOGRAPHY (EEG) MONITORING UNIT – DESCRIPTION OF  
PROPOSED AMBULATORY CARE CENTER (other) & SUPPLEMENT TO  
APPLICATION FOR NEW ACUTE CARE FACILITY LICENSE**

I) Video EEG Monitoring Definition – continuous video EEG monitoring is a medical/neurological diagnostic service that involves the usage of video telemetry equipment synchronized with continuous EEG telemetry of a patient who is suspected of having a epileptic related condition or condition that may mimic an epileptic condition.

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A) Performed by an EEG technologist who continuously attends to a maximum of four patients undergoing a study at once.

B) Supervised by a board-certified neurologist and board-certified epileptologist (board certified neurologist with double board certification/board eligibility in epilepsy and/or clinical neurophysiology by the American Board of Psychiatry and Neurology) who reads and interprets the study

II) Proposed Facility Purpose – to operate a licensed independent medical diagnostic unit that performs the service of continuous video EEG monitoring studies on patients age 5 and over for periods of 12 – 96 hours where a maximum of eight (8) patients are continuously monitored by a total of at least 2 EEG technologists (maximum of 4 EEG technologists) at a time – with each technologist observing up to a maximum of 4 patients at a time.

A) Each patient is boarded in a private room that is hardwired with medical grade video EEG monitoring equipment (ceiling mounted video camera(s) and EEG equipment)

B) Each patient is screened prior to admission by a neurologist and/or epileptologist who works at Neurology Center for Epilepsy and Seizures, LLC as being appropriate for the procedure to be performed at the proposed acute care facility in that the spells of concern that are to be characterized are not deemed to be threatening to life and limb (patients with a medical history suggestive of generalized tonic-clonic seizures or focal seizures that are associated with

concerning cardio-respiratory complications will be referred to acute care hospitals for continuous video EEG monitoring)

- C) Less costly than acute care hospital facility where continuous video EEG monitoring has traditionally been performed
- D) Safe alternative to acute care hospital facility during COVID pandemic and less risk for nosocomial infections in ambulatory care setting for elective procedures
- E) Fully staffed and monitored by well-regarded physician – Amor Mehta, MD – with known reputation for excellence in patient care in New Jersey

**III) Location – 479 CR 520 – Building B, Suite B102, Marlboro, NJ 07746**

- A) Building is a medical office building that was built in 2019 and owned by SFC Enterprises, Inc (President/CEO – Salvatore Cannizzaro) and facility will be leased by Amor Mehta MD – Neurology Center for Epilepsy and Seizures, LLC (the owner/operator of the proposed facility)
- B) Facility will be new construction and proposed construction plans will be submitted to the Health Plan Review Program of the Division of Consumer Affairs for review.

**IV) Ownership and Financial Arrangements – proposed facility owned by Amor Mehta MD – Neurology Center for Epilepsy and Seizures, LLC dba Neurology Center for Epilepsy and Seizures (Federal Tax ID: 83-1177547)**

A) *Amor R. Mehta, MD – Owner & President/CEO since inception in 2018*

Bachelor of Science (BS) – Northwestern University 2002

Doctor of Medicine (MD) – New York Medical College 2007

Internship (Internal Medicine/Neurology) – UMDNJ-NJMS 2008

Residency (Neurology) – New York University School of Medicine/Langone Medical 2011

Fellowship (Clinical Neurophysiology/EEG/Epilepsy) – NYUSOM/Langone Medical 2012

Fellowship (Adult and Pediatric Epilepsy) – NYUSOM/Langone Medical 2013

B) Facility will operate as same tax ID as parent company – referring physicians/providers will only be those who are employed by parent company

**V) Clinical Services Rendered – diagnostic procedures only – continuous video EEG monitoring where maximum of eight (8) patients will be monitored via**

video EEG telemetry by a minimum of 2 and a maximum of 4 EEG technologists with one EEG

A) The services to be rendered at this proposed facility are not listed in NJ administrative code 8:43A-2.2 but, if so, would be most similar to the regulatory standards similar to a "sleep center" except patients may stay longer than 24 hours and the equipment used is different than what is used in a sleep center.

B) Given that the services in the proposed facility are not listed in the code – application is for Acute Care Center – "Other" category and application fee is assumed to be \$3500 with subsequent yearly renewal fees assumed to be \$2500 unless otherwise determined by the Commissioner of Division of Consumer Affairs

**VI) Clinical Personnel** – will be registered Electroencephalography (EEG) technologists and physicians/mid-level practitioners who are employed by the parent LLC – each clinical personnel in the facility is currently certified by the American Hospital Association or American Red Cross for basic life support and at least one clinical person with such certification will be on site at all times during operation of facility.

A) Current Neurologists/Epileptologists

1) Amor R. Mehta, MD

2) Hannah W. Klein, MD PhD

B) Current Advanced Practice Nurse

1) Heather Black, DNP APN

C) Current Registered EEG Technologists

1) Amber Tedesco, rEEGT

2) David Jannarrone, rEEGT

3) Sangita Patel, rEEGT

D) Current EEG Technologists

1) David Rybczyk

2) Daniel Friedwald

**VII) Non-clinical Personnel** – Medical assistants, practice manager/administrator

**VIII) Hours of Operation** – 24 hours daily & 7 days weekly except for major Holidays

**IX) Reason for Why ACC Licensing is Requested** – the proposed facility will provide services to which NJAC 8:43A-32 applies in that continuous video EEG monitoring uses technology and processes for which the Department of Consumer Affairs has no specific licensing standards.

A) All manufacturer specifications for the equipment/technology will be provided when required by Department of Consumer Affairs

B) Up-to-date documentation of compliance with the specifications for the equipment/technology will be maintained and described

C) Applicant seeks guidance from Department of Consumer Affairs with functional review of proposed facility, physical plant plans, policies and procedures, licensing protocols and applicable rules and regulations

**X) Description of How Procedure is performed**

A patient who has previously been evaluated at the practice office location adjacent to proposed facility in the same building on same floor (479 CR 520 – Bldg B, Suite B101 – Marlboro, NJ 07746) will be admitted to the video EEG monitoring unit between 6 AM – 8 PM and will stay in the facility for a minimum of 12 hours (1/2 day) and a maximum of 96 hours (4 days).

During the period that the patient is in the continuous video EEG monitoring unit, he/she will stay in a private room that is ADA accessible and modeled to be close to a central monitoring station where the EEG technologists on duty will be monitoring the video EEG telemetry screens, observing for any sudden clinical changes in a patient's behavior (see proposed construction plans). There will be a small lounge area with a refrigerator, television, kitchenette that will be accessible to patients who would like some respite from their room and there will be a separate counter where patients can get an individually wrapped/packaged snack or refreshment.

During the patient's stay in the video EEG monitoring unit, each study will be monitored and interpreted by a supervising physician, as of now Dr. Amor Mehta or Dr. Hannah Klein. Any sudden patient clinical events of concern will be attended to by the monitoring EEG technologist and the advanced practice nurse and/or the physician in charge of the patient's neurological care will be notified immediately of any events.

Dr. Mehta and Dr. Klein are on the medical staff and have full admitting privileges at Jersey Shore Medical Center (Neptune, NJ) and at CentraState Medical Center (Freehold, NJ) (both within 10-20 minutes drive from the proposed facility) and arrangements will be that patients will be brought to either hospital should unexpected medical emergencies that require more advanced level of care occur during a patient's monitoring stay.

The patient will initially wait in a small waiting room at the entrance to the proposed diagnostic facility until a staff member can greet the patient and bring the patient to his/her video EEG monitoring room where he/she will put the belongings down (patient's will be told to bring a small bag of loose fitting clothing and daily items of hygiene/oral care). The patient will then proceed to an EEG set-up room that can hold two patients on separate stretchers while they are being connected to EEG electrodes affixed to each patient's scalp for the duration of the monitoring study. It will take approximately 30 minutes – 60 minutes to connect a patient with electrodes affixed to the scalp using a medical grade adhesive. The patient will then go to his/her room and the study will commence.

The patient will then have the opportunity to lie down in a hospital bed, sit in a medical-grade reclining chair or desk chair. Verizon Fios television, high-speed WIFI, Netflix and/or Apple TV will be available for each room. Patients will be fed breakfast, lunch or dinner with appropriate meals ordered from local restaurants and/or food that patients bring individually.

Patient' will generally be there for monitoring only and if the patients are already on antiepileptic medications, they will be instructed to continue taking the medications as usual. Patients who require antiepileptic medication tapers to characterize known clinical seizures that are associated with transient alterations in cardiorespiratory function will not be admitted to the proposed facility and these patients will utilize acute care hospital facilities for the video EEG monitoring necessary.

The patients will always be attended to by the EEG technologists performing the diagnostic studies and by non-clinical staff members who assist in helping patients maintain their comfort during the prolonged study. Patients will have access to at least 2 dedicated restrooms (one full bathroom, one half bathroom) all of which are ADA accessible.

During nocturnal hours, patients will be continuously observed by the on-duty EEG technologists – of which there will be a minimum of 2 at a time. The supervising neurologist/epileptologist and administrator will be available during off-hours/nocturnal hours via telephone and one EEG technologist per shift will serve as the designated administrator on site (in charge EEG technologist on duty) during the time that the supervising neurologist and/or administrator of the facility is not on sit.

After the designated time of the continuous video EEG monitoring study is completed, the patient will have the EEG electrodes removed by the on-duty EEG technologists. The patient will have the opportunity to shower in the on-site full restroom prior to discharge from the facility.

Within 7 days of completion of the continuous video EEG monitoring study, the report of the study interpretation will be available for the patient and supervising neurologist as well as for other clinicians.

Under no circumstances will any medical care be rendered other than necessary emergent medical care that may need to be rendered should there be an unforeseen patient clinical event that requires emergent medical intervention by the clinical staff. Unlike an acute care hospital-based video EEG monitoring unit, antiepileptic medications will neither be started nor tapered.

**XI) Construction Plans** – attached to this application is the proposed architectural rendering of the proposed facility – with labels to indicate functionality.

- A) The proposed facility will be attached but wholly separated from and closed off from the medical office of the parent company.
- B) The proposed facility will be in a separate mailing address and will be physical separated from the parent company.
- C) The proposed facility will be accessible 24 hours a day but will not be able to be accessed from the adjacent medical office nor will have access to the adjacent medical office during times that the medical office is closed.

D) The patients will be boarded in a secure location that is only accessible by key fob/electronic security lock during all operating hours.

E) Plans will meet all Marlboro township rules, regulation and/or requirements

F) Concurrent application with township of Marlboro for a zoning variance to allow for the boarding of patients within the proposed facility for > 24 hours is being undertaken

G) The proposed construction plan/architectural plan is attached to this application and will concurrently be submitted to the Health Plan Review – Division of Codes and Standards at the Department of Consumer Affairs

**XII) Application for Waiver** – while there is no licensing standards for the proposed continuous video EEG monitoring facility, and application for waive of part of the rules as defined in NJAC 8:43A-1.1 & 8:43A-1.3 may need to occur in regards to the scope the proposed ACC and the definition of ACC.

A) The proposed services provided at the proposed facility for which licensing is sought in this application will provide diagnostic services to persons who come to the facility and depart after a minimum of 12 hours of continuous video EEG monitoring.

B) Given the nature of how continuous video EEG monitoring is performed and given that the durations of the recordings are often > 24 hours (on average, most patients will be expected to have 24 – 72 hour studies), most patients will not be able to be discharged on the same day as they are admitted – which is way an application for waiver of the rules may be necessary. Guidance from the Department of Consumer Affairs is sought in this regard.

I am available at any time to discuss the proposed application and look forward to collaborating with the Department of Consumer Affairs in this application for licensure of a proposed Acute Care Facility that will perform neurological diagnostic services of continuous video EEG monitoring.

Sincerely,

Amor R. Mehta, MD

dramormehta@gmail.com

(908) 625-0945 (cell)