



**EMG CENTERS OF CHICAGOLAND
NEUROLOGY CONSULTANTS, S.C.**

3330 West 177th Street, Suite 3C, Hazel Crest IL 60429

Kenneth W. Holmes, M.D.

Scott E. Lipson, M.D.

Eric J. Ericson, M.D.

Consent Form For EMG and Nerve Conduction Studies

Patient name _____ Date of Birth: _____

Ordering Physician _____

Your Physician has requested an EMG (Electromyography) and Nerve Conduction Study. The Nerve Conduction Study Consists of a series of small shocks along the course of the nerve and recording either over another area of the nerve, or over a muscle that the nerve leads to, in an attempt to assess whether there is any damage to the specific nerves.

The next portion of the study is the EMG, the electrical study of muscles. During this portion of the study, the physician will insert a needle into the muscle to record the electrical activity within the muscle to see if there is any primary disease of the muscle, or and damage to the nerves supplying this muscle. There is some discomfort associated with this study. Some patients may feel some muscle soreness for a day or two following the study. If you are on blood thinning medication, such as Coumadin, please let the physician performing the EMG study know. Infection at the site of the needle sticks are not usually seen, but are a theoretical possibility, so notify your physician if you notice any redness, swelling or warmth at a needle site.

Depending on the findings on initial Nerve Conduction Studies, additional studies may be necessary.

Patient Signature

Date

Witness