

## ASNM reply to letter of Eccher et al.

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Dear Editor,

We sincerely thank our colleagues, friends, and fellow professional Society members for their thoughts relative to the “Practice guidelines for the supervising professional: intraoperative neurophysiological monitoring” [1]. The document was the end result of an almost four year process that included circulation of draft documents to every member of the ASNM as well as all relevant medical Associations and Societies for review and comment. The final form of the document was approved by the Board of the ASNM. We all recognize crafting an effective clinical practice guideline is a subtle and complex task fraught with developing nuance and technical challenges in our evolving practice of IONM.

This Guideline was not intended to establish a standard of care, but rather intended to provide a path toward improving the quality of IONM practice. In the absence of an explicit evidence base for much of the field of IONM, the Guideline was constructed as a patient-centered method recognizing the delivery of clinical services as a patient

care activity. The Guideline intends to promote and facilitate a patient-professional relationship and emphasizes the importance of informing the patient of the IONM professional involved in their care and when possible providing an introduction.

We appreciate the authors raising clarifications, questions and concerns that deserve closer inspection inclusive of a broad, interactive and collaborative group of providers (including the Drs. Eccher, Emerson, Legatt, Lopez, Nguyen, and Nuwer) and pertinent medical associations and societies.

### Reference

1. Skinner SA, Cohen BA, Morledge DE, McAuliffe JJ, Hastings JD, Yingling CD, McCaffrey M. Practice guidelines for the supervising professional: intraoperative neurophysiological monitoring. *J Clin Monit Comput.* 2014;28:103–11.

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