

Table II.
Facial Nerve Monitoring Protocol Checklist
Based on the Kartush Facial Nerve Monitoring Protocol. Used with permission

Steps	Considerations	Check box
1	Consult with surgeon regarding procedure - Avoid local anesthesia near the facial nerve	<input type="checkbox"/>
2	Consult with anesthesia to avoid long-acting neuromuscular blockade - Full return of function upon incision	<input type="checkbox"/>
3	Verify absence of neuromuscular blockade via either: - Train of Four - Transcutaneous facial nerves stimulation - Facial nerves stimulation within the operative field	<input type="checkbox"/>
4	Assure the monitor's loudspeaker is audible - Sufficient loudness to be heard over the ambient noise of the operating room	<input type="checkbox"/>
5	Check recording electrode impedance	<input type="checkbox"/>
6	Verify performance of recording electrodes ability to record EMG activity - "Tap test" - Alternate validation of system recording	<input type="checkbox"/>
7	Verify stimulus current flow through soft tissue	<input type="checkbox"/>
8	Obtain a baseline facial nerve response to electrical stimulation	<input type="checkbox"/>
9	Map the location of the facial nerve with electrical stimulation	<input type="checkbox"/>
10	Selectively use the most advantageous stimulation technique - Flush tip monopolar stimulator - Concentric bipolar stimulator - Electrified surgical dissection instruments	<input type="checkbox"/>
11	Titrate stimulation current intensity - Based on nerve location and surrounding tissue in consideration of bone, soft tissue, blood and cerebrospinal fluid	<input type="checkbox"/>
12	Obtain a final facial nerve response to stimulation prior to closure	<input type="checkbox"/>
13	Provide adequate documentation (monitoring and operative) - Confirmation of protocol (and adherence thereof) - Highlight key events	<input type="checkbox"/>