

Guidelines for training and monitoring of TMS Treaters

Transcranial Magnetic Stimulation (TMS) Treaters are defined as those personnel who provide TMS treatments under the supervision of the prescriber who is licensed in the jurisdiction where the treatment will occur. These personnel are typically nurses or medical technicians who have received specific training in the administration of TMS.

The TMS prescriber has the ultimate responsibility of ensuring that the TMS Treater is properly trained, supported, monitored, and that high standards are maintained. In addition to training specifically for TMS, the TMS treater should receive training on professional conduct, setting and maintaining professional boundaries with patients, and boundary violations. (Please see guidelines developed by the CTMSS Legal Business & Ethics Committee)

Areas of proficiency for a TMS Treater include:

- proper chart review and documentation of procedure
- obtaining patient rating scales (and clinician rating scales if applicable and appropriately trained)
- assisting with Motor Threshold determination
- providing prescribed TMS treatments including identifying correct TMS target localization
- monitoring patient during treatments
- knowing emergency procedures

Documentation of TMS Treater training and proficiency is recommended. This documentation should include dates and person providing the training/assessment of proficiency. Checklists for the TMS Treater to follow at each treatment are also recommended.

Chart Review and Documentation of Procedure:

The TMS Treater needs to know how to retrieve information regarding a patient in the medical records (e.g., dose parameters for TMS, chair settings, safety/comfort information, etc.) prior to treatment. In training, proficiency in retrieving information in the medical record system will need to be confirmed in a minimum of five patients.

TMS Treaters who are documenting in the medical record will need to be trained to accurately document any potential changes in patient presentation and how those changes were handled (e.g., called covering prescriber and cleared for treatment). TMS treaters will need to accurately document the treatment provided and any side effects experienced. This can be aided by specific templates for documentation. For TMS Treaters who document directly in the medical record, proficiency in documentation should be confirmed in a minimum of five treatments during training, and this documentation should be reviewed annually.

Patient and Clinician Rating Scales and other TMS Forms:

The TMS Treater needs to know which specific patient rating scales and forms should be given to which patients. Having a Forms Template to use for reference is often helpful, especially during training. The TMS Treater needs to be able to provide accurate instructions for completion of rating scales (e.g., what time frame the rating covers, how to deal with patient questions regarding the scale, etc.) and to score the scale correctly. If the TMS Treater will be asked to administer clinician rating scales, appropriate training in the administration and scoring of the rating scales should be provided by an experienced clinician familiar with the scale.

A minimum of five patients should be monitored to ensure proper scales are being acquired at proper intervals. For clinician rated scales, after the initial five are confirmed accurate, this proficiency should be rechecked annually with clinician review.

Assisting with Motor Threshold:

The TMS Treater needs to be able to assist the clinician performing the motor threshold (MT) determination. This includes proper positioning of the patient and helping with the procedure.

Providing prescribed TMS treatments:

Prior to Treatment, the TMS Treater needs to:

- Confirm consent for TMS has been obtained
- Confirm correct patient with two identifiers (i.e., the patient matches the information used to set up the treatment)
- Confirm that there are no changes in medications or medical/psychiatric conditions, and appropriately alert the covering prescriber with concerns
- Assess if any side effects have occurred related to prior TMS treatments, and appropriately alert the covering prescriber with concerns
- Assess for suicidal or homicidal ideation, plans, or intent, and appropriately alert the covering prescriber in a timely manner if there are any concerns as well as implement clinic's safety protocol
- Ensure hearing protection is provided to all in the room

During the Treatment, the TMS Treater needs to:

- Position the patient
- Connect and apply the correct coil to the machine
- Place the coil in the correct location with the correct angle
- Select the prescribed treatment parameters
- Perform a pre-treatment verification of the patient to ensure proper protocol (Eg: time out)
- Visually monitor the patient throughout treatment
- Interact with the patient appropriately
- Monitor for abnormal movements
- Start and stop the treatments as needed
- Adjust the coil to maintain proper position, and for comfort within established guidelines
- Identify when an emergency is occurring

The skills regarding using the TMS machine are device specific and need to be demonstrated for each type of device that the TMS Treater will be utilizing.

All the above pre-treatment and during treatment skills will need to be properly performed in a minimum of five patients at the end of training. Procedure competency should be reviewed annually.

Emergency Procedures:

The TMS Treater should be trained and current in Basic Life Support or equivalent as well as in seizure recognition and management. For psychiatric and medical emergencies, including seizures and other possible emergencies (e.g., myocardial infarction), the plan should be reviewed at training and then annually to ensure stopping the treatment

and moving the coil, enacting a clear process for alerting assistance, staying with patient until assistance arrives, reporting to appropriate covering clinicians, and documenting the event in the medical record as appropriate.

Documentation of TMS Treater Training:

Having a “credentialing form” that documents the demonstration of required skills by the TMS Treater and is signed off by the TMS prescriber is recommended. Safety and other training should be documented at least annually. In addition, formal policy documents regarding TMS Treaters are recommended, as is periodic review of these documents.

Conclusion:

Above are the general areas of proficiency that the TMS Treater must demonstrate, but each clinical setting will have its own unique proficiency requirements. The responsibility is ultimately on the TMS prescriber to ensure that TMS Treaters are adequately trained and provide quality TMS treatments. These guidelines are recommended approaches, but do not represent regulation regarding TMS delivery.

Approved by the CTMSS Executive Committee on 04.17.23