## Syndromes by Age of Onset: (check all that apply)

Neonatal Period Table

| Neonatal Period | Present? |
| --- | --- |
| Benign familial neonatal epilepsy (BFNE) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Early myoclonic encephalopathy (EME) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Ohtahara syndrome | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |

Infancy Table

| Infancy | Present? |
| --- | --- |
| Epilepsy of infancy with migrating focal seizures | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| West syndromes | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Myoclonic epilepsy in infancy (MEI) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Benign infantile epilepsy | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Benign familial infantile epilepsy | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Dravet syndrome | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Myoclonic encephalopathy in nonprogressive disorders | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |

Childhood Table

| Childhood | Present? |
| --- | --- |
| Febrile seizures plus (FS+; can start in infancy) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Early onset benign childhood occipital epilepsy (Panayiotopoulos type)  | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Epilepsy with myoclonic atonic seizures | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Benign childhood epilepsy with centrotemporal spikes (BCECTS)  | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Autosomal-dominant nocturnal frontal lobe epilepsy (ADNFLE) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Late onset childhood occipital epilepsy (Gastaut type) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Epilepsy with myoclonic absences | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Lennox-Gastaut syndrome | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Epileptic encephalopathy with continuous spike-and-wave during sleep (CSWS) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Landau-Kleffner syndrome (LKS) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Childhood absence epilepsy (CAE) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |

Adolescence – Adult Table

| Adolescence – Adult | Present? |
| --- | --- |
| Juvenile absence epilepsy (JAE) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Other familial temporal lobe epilepsies | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Juvenile myoclonic epilepsy (JME) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Progressive myoclonus epilepsies (PME) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Autosomal Dominant Epilepsy with Auditory Features (ADEAF) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Epilepsy with generalized tonic-clonic seizures alone | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |

Less Specific Age Relationship Table

| Less Specific Age Relationship | Present? |
| --- | --- |
| Familial focal epilepsy with variable foci (childhood to adult) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Reflex epilepsies | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |

Distinctive Constellations Table

| Distinctive Constellations | Present? |
| --- | --- |
| Mesial temporal lobe epilepsy | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Rasmussen syndrome | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Gelastic seizures with hypothalamic hamartoma | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |

Other Localization Related Epilepsies Table

| Other Localization Related Epilepsies | Present? |
| --- | --- |
| Temporal lobe epilepsy | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Frontal lobe epilepsy | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Occipital lobe epilepsy | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Parietal lobe epilepsy | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |
| Focal epilepsy (specific localization unknown) | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |

Other Table

| Other | Present? |
| --- | --- |
| The epilepsy does not fit into one of these specific electro-clinical or distinctive constellations categories | [ ]  No[ ]  Possible[ ]  Probable[ ]  Definite[ ]  Unknown[ ]  N/A |

## Additional Information

If two or more epilepsy syndromes were selected as present, rate the confidence level that these are distinct syndromes:

[ ]  No Confidence

[ ]  Possible

[ ]  Probable

[ ]  Definite

[ ]  Unknown

[ ]  N/A

## GENERAL INSTRUCTIONS

Based on the current International League Against Epilepsy (ILAE) guidelines, this CRF Module is recommended to classify syndromes for all epilepsy studies. Only one syndrome should be checked for a given time point, however it is possible to have had a syndrome in infancy that develops into another syndrome during childhood. Therefore, if the form is used more than once during follow-up, the possible evolution of syndromes can be codified.

The following definitions should be used when completing this form:

* Not Present/None = The summary of evidence suggests no possibility
* Possible = The summary of evidence suggests less than 50% confidence level
* Probable = The summary of evidence suggests greater than 50% confidence level
* Definite = The summary of evidence suggests 100% confidence level
* Unknown = The summary of evidence is not sufficient to support a finding
* N/A = Not Applicable; to be used at the discretion of the Principal Investigator based on study design

## REFERENCES

Berg AT, Berkovic SF, Brodie MJ, Buchhalter J, Cross JH, van Emde Boas W, Engel J, French J, Glauser TA, Mathern GW, Moshé SL, Nordli D, Plouin P, Scheffer IE. Revised terminology and concepts for organization of seizures and epilepsies: report of the ILAE Commission on Classification and Terminology, 2005-2009. Epilepsia. 2010 Apr;51(4):676-85. Epub 2010 Feb 26.

Freely available online at: [Classifications and Terminology Report](http://www.ilae.org/Visitors/Centre/ctf/ctfoverview.cfm)