



Ceribell Announces New Critical Care Medicine Publication Reinforcing Link Between Seizure Burden Measured by Clarity AI Algorithm and Neurological Outcomes

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Study published in leading critical care journal shows that higher AI-detected seizure burden is associated with increased odds of disability, further demonstrating the utility of the Ceribell System as a clinical decision-making tool

SUNNYVALE, Calif., June 08, 2026 (GLOBE NEWSWIRE) -- CeriBell, Inc. (Nasdaq: CBLL) ("Ceribell"), a medical technology company focused on transforming the diagnosis and management of patients with serious neurological conditions, today announced that a new research paper entitled "Point-of-Care EEG Artificial Intelligence Measure of Seizure Burden Associates with Clinical Outcome at Discharge" was published in *Critical Care Medicine (CCM)*,¹ the official, peer-reviewed scientific journal of the Society of Critical Care Medicine (SCCM).

The landmark study provides evidence that Ceribell's Clarity[®] artificial intelligence (AI) algorithm, specifically its measure of seizure burden, is correlated with a patient's functional outcomes at discharge. The findings further support Ceribell's leadership in AI-powered Point-of-Care EEG (POC EEG), addressing a critical unmet need for rapid, actionable neurodiagnostics in the Emergency Department (ED) and Intensive Care Unit (ICU).

Key Research Findings:

The study analyzed data from 359 adult patients across three academic sites—Yale School of Medicine, Massachusetts General Hospital, and The University of New Mexico School of Medicine—where both Ceribell POC EEG and nearly 24/7 conventional EEG were available. Building upon the foundational SAFER-EEG (Seizure Assessment and Forecasting With Efficient Rapid-EEG) study, originally published in the peer-reviewed journal *Neurology* (July 2024),² the new analysis reveals:

- **AI Measure of Seizure Burden Linked to Outcomes:** Higher seizure burden detected by Ceribell's Clarity algorithm was associated with increased severe disability and poorer functional outcomes at the time of discharge. Compared to patients with 0% seizure burden, those with a peak 5-minute seizure burden greater than or equal to 90% at any point during EEG monitoring were 3.4 times more likely to experience death or severe disability as measured by a modified Rankin Scale (mRS) score equal to or higher than four, at discharge.
- **Time is Brain:** Risk escalates with ongoing seizure activity. Each additional hour of Clarity-assessed seizure in the EEG recording is associated with nearly a two-fold increase in risk of severe disability or death (adjusted odds ratio = 1.98).
- **Clinical Utility:** Clarity is the first validated bedside tool to demonstrate a strong "dose-response" relationship between AI-estimated seizure burden and functional outcomes of severe disability or death, even after adjusting for multiple clinical covariates. Prompt recognition and management of seizure burden may be critical to improving outcomes in acute care.

"I am proud of this collaboration between the SAFER-EEG clinical study investigators and Ceribell's clinical team," said Josef Parvizi, M.D., Ph.D., co-founder, board member and Chief Medical Adviser of Ceribell, and lead author of the paper. "This research confirms that Ceribell's Clarity AI algorithm is detecting biomarkers of a disease state that are clinically relevant, providing a window into the patient's prognosis. Intervening faster to reduce seizure burden, as measured by Clarity, may potentially alter the trajectory of a patient's recovery."

"For the first time, physicians can directly and continuously monitor seizure burden—a key metric relevant to patient outcomes that was previously inaccessible in real time. This represents a fundamental shift from indirect or delayed and sporadic assessment toward continuous brain monitoring that leads to informed decision-making at the bedside," said Jane Chao, Ph.D., co-founder and CEO of Ceribell. "At Ceribell, we strive to deliver real-time insights into the brain to empower medical teams to quickly identify and prioritize the care of critically ill patients in the ICU and ED."

The paper is available via Open Access on the [Critical Care Medicine](#) journal website.

References

1. [Parvizi, J., et al. \(2026\). Point-of-Care Artificial Intelligence Measure of Seizure Burden Associates With Clinical Outcome at Discharge. *Crit Care Med.* Advance online publication.](#)
2. [Kalkach-Aparicio M, et al. \(2024\). Seizure assessment and forecasting with efficient rapid-EEG: a retrospective multicenter comparative effectiveness study. *Neurology.* 103\(2\):e209621.](#)

Forward-Looking Statements

This press release contains forward-looking statements within the meaning of the Private Securities Litigation Reform Act of 1995 and other statements that are not statements of historical fact. Forward-looking statements can be identified by the use of words such as “will,” “may,” “could,” “likely,” “ongoing,” “anticipate,” “estimate,” “expect,” “project,” “intend,” “plan,” “believe,” “assume,” “target,” “forecast,” “guidance,” “goal,” “objective,” “aim,” “seek,” “potential,” “hope,” and other words of similar meaning. These statements are based on management’s current expectations and assumptions as of the date of this press release and involve risks and uncertainties that could cause actual results to differ materially from those described. Such risks and uncertainties, including but not limited to those related to regulatory approvals, clinical use and adoption, clinical outcomes, market acceptance, competition, and other factors, are described under the “Risk Factors” sections of our most recent Annual Report on Form 10-K, Quarterly Reports on Form 10-Q, and other reports filed with the U.S. Securities and Exchange Commission (“SEC”). These filings are available on the SEC’s website at <https://sec.gov/> and on Ceribell’s website at <https://investors.ceribell.com/>. Ceribell undertakes no obligation to update any forward-looking statements as a result of new information, future events, or otherwise, except as required by applicable law.

About CeriBell, Inc.

Ceribell is a medical technology company focused on transforming the diagnosis and management of patients with serious neurological conditions. Ceribell has developed the Ceribell System, a novel, point-of-care electroencephalography (“EEG”) platform specifically designed to address the unmet needs of patients in the acute-care setting. By combining proprietary, highly portable, and rapidly deployable hardware with sophisticated artificial intelligence (“AI”)-powered algorithms, the Ceribell System enables rapid diagnosis and continuous monitoring of patients with neurological conditions. The Ceribell System is FDA-cleared for use in detecting seizure and delirium in intensive care units and emergency rooms across the U.S. Ceribell is headquartered in Sunnyvale, California. For more information, please visit <http://www.ceribell.com> or follow the company on [LinkedIn](#).

Investor Contact

Brian Johnston or Caylene Parrish
Gilmartin Group
Investors@ceribell.com

Media Contact

Brian Price
Press@ceribell.com