

Epilepsy Care in the School Setting

Children's Epilepsy Educational Video Series







Epilepsy Care in the School Setting

Children's Epilepsy Educational Video Series

Presented by Susan McCallum, MSN, RN Children's Comprehensive Epilepsy Center 404-785-3720 www.choa.org





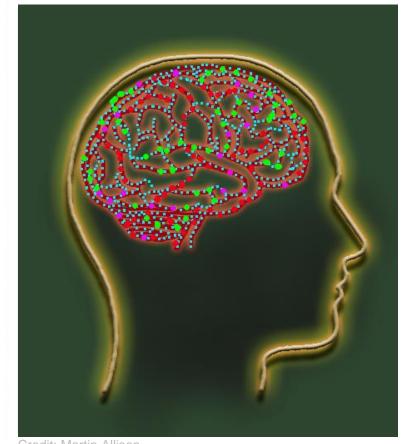
Course Disclaimer

This is general information and not specific medical advice for you, your child, or loved one. Always consult your doctor or other healthcare provider if you have any questions or concerns. Call 911 or go to the nearest emergency department in case of an urgent concern or emergency.

Educational Activity Disclosure

Epilepsy Seizure First Aid - Part 4 of 4

Disclosures	Action
Criteria for Successful Completion	View entire recording
	Completion of evaluation
Conflicts of Interest Statements for Planning Committee	The planning committee members have no relevant financial relationship to declare.
Conflicts of Interest Statements for Faculty/Presenters/ Authors	The content experts/faculty/presenters/authors have no relevant financial relationship to declare.
Commercial Support	No commercial support is being received for this event.
Sponsorship	No sponsorship is being received for this event
Non-endorsement of Products	No products are being displayed at this event
Continuing Education	This continuing nursing education activity was provided by Children's Healthcare of Atlanta. Children's Healthcare of Atlanta is an approved provider of continuing nursing education by the Alabama State Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. Contact hours: 0.5 Activity ID: 2017-0508-01 Expiration Date: 05/08/2019



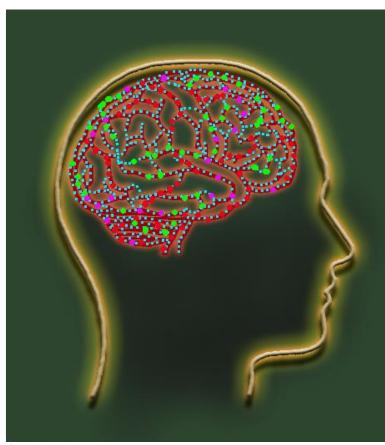
Credit: Martin Allison

Epilepsy Seizure First Aid

Children's Comprehensive Epilepsy Center

Presented by Susan McCallum, MSN, RN Children's Comprehensive Epilepsy Center 404-785-3720 www.choa.org

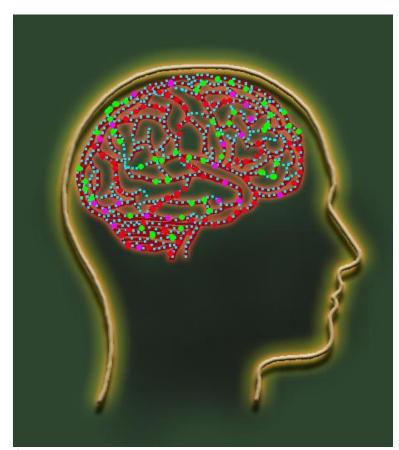




Credit: Martin Allison

This education video is intended for school nurses who:





Credit: Martin Allison

This education video is intended for school nurses who:

Care directly for students with epilepsy

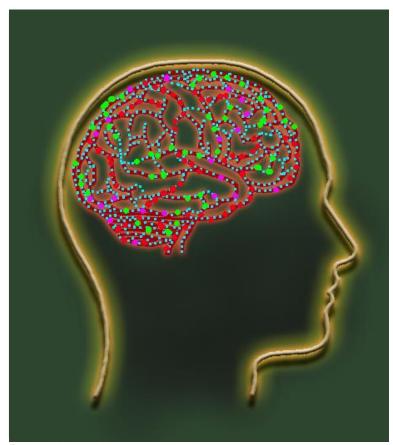


Credit: Martin Allison

This education video is intended for school nurses who:

- Care directly for students with epilepsy
- Provide first aid for seizures, including seizure medication





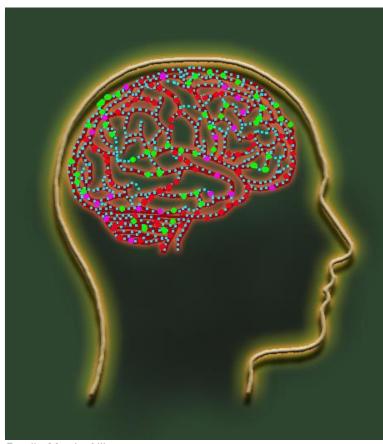
Credit: Martin Allison

This education video is intended for school nurses who:

- Care directly for students with epilepsy
- Provide first aid for seizures, including seizure medication
- May teach non-licensed school personnel such as teachers, coaches, or after school staff how to respond to students experiencing a seizure



Learning Objectives



Credit: Martin Allison

 Describe a seizure action plan and it's importance in seizure care

Learning Objectives

- Credit: Martin Allison

- Describe a seizure action plan and it's importance in seizure care
- Explain how to respond to an individual experiencing a seizure



Learning Objectives

- Credit: Martin Allison

- Describe a seizure action plan and it's importance in seizure care
- Explain how to respond to an individual experiencing a seizure
- Discuss common seizure medications and methods of administration



	Atlanta	524	Children's Pediatric Neurology Practic 404-785-9850				
		<u>s</u>	EIZURE AC	СТ	ION PLAN		
This student is being treated	for a seizure	disord	er. The informatio	n be	elow should assist y	ou if a seizure occurs	during school hours.
Student's Name:				Da	te of Birth:	•	
Parent/Guardian:				Ph	one:	Cell:	
Other Emergency Contact:				Ph	one:	Cell:	
reating Provider:				Ph	one:		
Significant Medical History:				_			
			Seizure In	ıfoı	rmation		
Seizure Type	Lengt	1	Frequency			Description	
Seizure triggers or warning sign							
Student's response after a seiz	ure:						
			Emergency	Me	dications		
Medication		Dosage Common S		Common S	ide Effects & Speci	al Instructions	
				╙			
						R	ed Zone
Green Zone Less than 2 minute	s		Yellov 2 to 5 r			More tha	n 5 minutes or eizures in an hour
Begin seizure First Aid Allow student to recover from Return student to class Notify parent/guardian	om seizure	* (* F		nist rec ardi	er Diastat/Versed over from seizure an ass or to home	Continue Sei: Administer Di Monitor respi and start CPF Notify parent/	ture First Aid astat/Versed rations and heart bea R if needed
- Stay calm & track time - Keep child safe - Do not restrain - Record seizure in log - Rational found in the service of seizure in log - Stay with child until fully conscious			g	- Convulsive (tonic-	clonic) seizure lasts l ated seizures without or has diabetes t-time seizure thing difficulties	an emergency whe onger than 5 minutes regaining consciousne	
Special Considera				ega	rding school ac	tivities, sports, t	rips, etc)
							_
Provider Signature				_		Date	Time

A ==

Green Zone Less than 2 minutes	Yellow Zone 2 to 5 minutes	Red Zone More than 5 minutes or 3 or more seizures in an hour
Begin seizure First Aid Allow student to recover from seizure Return student to class Notify parent/guardian	Continue Seizure First Aid Call for help Prepare to administer Diastat/Versed Allow student to recover from seizure Notify parent/guardian Return student to class or to home as instructed by parent/guardian	Continue Seizure First Aid Administer Diastat/Versed Monitor respirations and heart beat and start CPR if needed Notify parent/guardian Call 911 if seizure is greater than 7 minutes



Childre Healthcare of A		Children's Pediatric Neurology Practi 404-785-9850		
This student is being treated for a	seizure di	SEIZURE AC		ou if a seizure occurs during school hours.
Student's Name:			Date of Birth:	
Parent/Guardian:			Phone:	Cell:
Other Emergency Contact:			Phone:	Cell:
Treating Provider:			Phone:	
Significant Medical History:				
		Seizure In	formation	
Seizure Type	Length	Frequency		Description
Seizure triggers or warning signs:				
Student's response after a seizure:				
		Emergency I	Medications	
Medication		Dosage	Common S	ide Effects & Special Instructions
Green Zone Less than 2 minutes		Yellow 2 to 5 n		Red Zone More than 5 minutes or 3 or more seizures in an hour
Begin seizure First Aid Allow student to recover from : Return student to class Notify parent/guardian	seizure	 Allow student to r Notify parent/gua 	nister Diastat/Versed recover from seizure ardian o class or to home	Continue Seizure First Aid Administer Diastat/Versed Monitor respirations and heart beat and start CPR if needed Notify parent/guardian Call 911 if seizure is greater than 7 minutes
Basic Seizure First Aid - Stay calm & track time - Keep child safe - Do not restrain - Do not put anything in mouth - Record seizure in log - Turn child on side - Stay with child until fully conscious		- Convulsive (tonic- - Student has repeated - Student is injured	t-time seizure thing difficulties	
•		•	garding school ac	tivities, sports, trips, etc)
Describe any special consideration				
Describe any special consideration Provider Signature				Date Time

A seizure action plan is specific to the individual with epilepsy

Green Zone Less than 2 minutes	Yellow Zone 2 to 5 minutes	Red Zone More than 5 minutes or 3 or more seizures in an hour
Begin seizure First Aid Allow student to recover from seizure Return student to class Notify parent/guardian	Continue Seizure First Aid Call for help Prepare to administer Diastat/Versed Allow student to recover from seizure Notify parent/guardian Return student to class or to home as instructed by parent/guardian	Continue Seizure First Aid Administer Diastat/Versed Monitor respirations and heart beat and start CPR if needed Notify parent/guardian Call 911 if seizure is greater than minutes



Childr Healthcare of			Children's Pediatric Neurology Practi 404-785-9850		
			CTION PLAN		
This student is being treated: Student's Name:	for a seizure	disorder. The information	on below should assist you Date of Birth:	ou if a seizure occurs	during school hours.
Parent/Guardian:			Phone:	Cell:	
				-	
Other Emergency Contact:			Phone:	Cell:	
Freating Provider:			Phone:	•	
Significant Medical History:			•		
		Seizure Ir	nformation		
Seizure Type	Lengt	h Frequency	1	Description	
Seizure triggers or warning sign	ns:				
Student's response after a seiz					
		Emergency	Medications		
Medication				Side Effects & Special Instructions	
Green Zone Less than 2 minute	:s		w Zone minutes	More tha	ed Zone n 5 minutes or eizures in an hour
Begin seizure First Aid Allow student to recover from Return student to class Notify parent/guardian	om seizure	 Allow student to Notify parent/gu Return student t 	nister Diastat/Versed recover from seizure	and start CPF Notify parent/	astat/Versed rations and heart beat R if needed
Basic Sei - Stay calm & track time - Keep child safe - Do not restrain - Do not put anything in mouth - Record seizure in log - Stay with child until fully conscio	ild safe For tonic-clonic seizure: estrain - Protect head - Keep airway open/watch breathing seizure in log - Turn child on side		- Convulsive (tonic- - Student has repea - Student is injured	clonic) seizure lasts l ated seizures without or has diabetes t-time seizure thing difficulties	an emergency when: onger than 5 minutes regaining consciousness
Special Consideral Consideration Con			egarding school ac	tivities, sports, t	rips, etc)
Provider Signature				Date	Time

- A seizure action plan is specific to the individual with epilepsy
- Completed by a physician

Green Zone Less than 2 minutes	Yellow Zone 2 to 5 minutes	Red Zone More than 5 minutes or 3 or more seizures in an hour
Begin seizure First Aid Allow student to recover from seizure Return student to class Notify parent/guardian	Continue Seizure First Aid Call for help Prepare to administer Diastat/Versed Allow student to recover from seizure Notify parent/guardian Return student to class or to home as instructed by parent/guardian	Continue Seizure First Aid Administer Diastat/Versed Monitor respirations and heart beat and start CPR if needed Notify parent/guardian Call 911 if seizure is greater than minutes



Child	ren's of Atlanta	, sae 1	Children's Pe	diatric Neur 404-785-9850	ology Practice
		SEIZURE AC	TION PLAN		
This student is being treated	d for a seizure			ou if a seizure occurs	during school hours.
Student's Name:			Date of Birth:		
Parent/Guardian:			Phone:	Cell:	
Other Emergency Contact:			Phone:	Cell:	
reating Provider:			Phone:		
Significant Medical History:					
		Seizure In	formation		
Seizure Type	Lengt	h Frequency		Description	
Seizure triggers or warning sig	ans:		-		
Student's response after a sei					
		Emergency			
Medication		Dosage	Common S	ide Effects & Speci	al Instructions
				_	
Green Zone		Yellow			ed Zone n 5 minutes or
Less than 2 minu	tes	2 to 5 m	ninutes		eizures in an hour
				* Continue Sei	
		Continue Seizure Call for help	First Aid	* Administer Di	
 Begin seizure First Aid 		* Propose to admin	nister Diastat/Versed		rations and heart beat
 Allow student to recover f Return student to class 	rom seizure		recover from seizure	and start CPF	
Notify parent/guardian		* Notify parent/gua		 Notify parent 	
* Notify parent/guardian			class or to home		izure is greater than
		as instructed by	parent/guardian	7 minutes	
		-			
Basic S	eizure First	Aid			an emergency when:
- Stay calm & track time					onger than 5 minutes
- Keep child safe		-clonic seizure:			regaining consciousness
- Do not restrain	- Protect I		- Student is injured		
Do not put anything in mouth Record seizure in log	- Keep air - Turn chi	rway open/watch breathing	 Student has a first Student has breat 		
Stay with child until fully consci		id on side	- Student has a sei		
- Stay with Crine than lany Consc	1003		- Otabelit has a set	Edite in Water	
•		and Precautions (re	garding school ac	tivities, sports, t	rips, etc)
Describe any special consider	rations or pre	cautions:			
Provider Signature				Date	Time
Provider Signature Parent/Guardian Signature				Date Date	Time

- A seizure action plan is specific to the individual with epilepsy
- Completed by a physician
- Describes a typical seizure for the individual

Green Zone Less than 2 minutes	Yellow Zone 2 to 5 minutes	Red Zone More than 5 minutes or 3 or more seizures in an hour
Begin seizure First Aid Allow student to recover from seizure Return student to class Notify parent/guardian	Continue Seizure First Aid Call for help Prepare to administer Diastat/Versed Allow student to recover from seizure Notify parent/guardian Return student to class or to home as instructed by parent/guardian	Continue Seizure First Aid Administer Diastat/Versed Monitor respirations and heart beat and start CPR if needed Notify parent/guardian Call 911 if seizure is greater than minutes



Childr Healthcare o	en's	Sire	Children's Pe	diatric Neurology Practi 404-785-9850	ice
This student is being treated	for a seizure		CTION PLAN	ou if a seizure occurs during school hou	urs
Student's Name:			Date of Birth:		
Parent/Guardian:			Phone:	Cell:	
Other Emergency Contact:			Phone:	Cell:	
				Cell.	
reating Provider:			Phone:		
Significant Medical History:					
		Seizure In	formation		
Seizure Type	Lengt	h Frequency		Description	
Seizure triggers or warning sig	ns:				
Student's response after a seiz					
		Emergency	Medications		
Medication				ide Effects & Special Instructions	_
Green Zone Less than 2 minut	es		v Zone minutes	Red Zone More than 5 minutes or 3 or more seizures in an ho	
Begin seizure First Aid Allow student to recover fr Return student to class Notify parent/guardian	om seizure	* Allow student to * Notify parent/gua	nister Diastat/Versed recover from seizure ardian o class or to home	Continue Seizure First Aid Administer Diastat/Versed Monitor respirations and heart I and start CPR if needed Notify parent/guardian Call 911 if seizure is greater th: 7 minutes	
Basio Se - Stay calm & track time - Keep child safe - Do not restrain - Do not put anything in mouth - Record seizure in log - Stay with child until fully conscio	- Turn child on side		Convulsive (tonic- Student has repeated as injured)	t-time seizure thing difficulties	es
Special Considerations			egarding school ac	tivities, sports, trips, etc)	
Provider Signature				Date Time	

- A seizure action plan is specific to the individual with epilepsy
- Completed by a physician
- Describes a typical seizure for the individual
- Provides guidance on how to manage the seizures

Green Zone Less than 2 minutes	Yellow Zone 2 to 5 minutes	Red Zone More than 5 minutes or 3 or more seizures in an hour
Begin seizure First Aid Allow student to recover from seizure Return student to class Notify parent/guardian	Continue Seizure First Aid Call for help Prepare to administer Diastat/Versed Allow student to recover from seizure Notify parent/guardian Return student to class or to home as instructed by parent/guardian	Continue Seizure First Aid Administer Diastat/Versed Monitor respirations and heart beat and start CPR if needed Notify parent/guardian Call 911 if seizure is greater than 7 minutes

Healthcar	dren's	500	Children's Pe	ediatric Neurology Practice 404-785-9850
			CTION PLAN	
	sted for a seizure	disorder. The informati		ou if a seizure occurs during school hours.
tudent's Name:			Date of Birth:	
'arent/Guardian:			Phone:	Cell:
ther Emergency Contact:			Phone:	Cell:
reating Provider:			Phone:	
ignificant Medical History:			-	•
		Seizure I	Information	
Seizure Type	Lengti	h Frequency	у	Description
eizure triggers or warning	signs:			
tudent's response after a	seizure:			
		Emergency	y Medications	
Medication		Dosage		Side Effects & Special Instructions
mearouton		Dosage		ace Enecus a operati historicalis
Green Zon		Vello	w Zone	Red Zone
Less than 2 mir			minutes	More than 5 minutes or
				3 or more seizures in an hour
		* Continue Seizu	re First Aid	★ Continue Seizure First Aid
Begin seizure First Aid		* Call for help		Administer Diastat/Versed Monitor respirations and heart bear
 Allow student to recove 	er from seizure		ninister Diastat/Versed	 Monitor respirations and neart bear and start CPR if needed
		* Allow student to		
 Return student to class 		 Notify parent/gr 		 Notify parent/quardian
Return student to class Notify parent/guardian		 Notify parent/gu Return student 	uardian to class or to home	Notify parent/guardian Call 911 if seizure is greater than
		* Return student		
		* Return student	to class or to home	* Call 911 if seizure is greater than
Notify parent/guardian		* Return student as instructed by	to class or to home y parent/guardian	* Call 911 if seizure is greater than
Notify parent/guardian	Seizure First	* Return student as instructed by	to class or to home y parent/guardian A seizure is gen - Convulsive (tonic-	Call 911 if seizure is greater than 7 minutes Call 911 if seizure is greater than 9 minutes
Notify parent/guardian Basic Stay calm & track time Keep child safe	Seizure First	* Return student as instructed by Aid -clonic seizure:	to class or to home y parent/guardian A seizure is gen - Convulsive (tonic Student has repea	Call 911 if seizure is greater than 7 minutes
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain	Seizure First	* Return student as instructed by Aid -clonic seizure:	A seizure is gen - Convulsive (tonic Student has repes - Student is injured	Call 011 if seizure is greater than 7 minutes terally considered an emergency wher -clonic) seizure lasts longer than 5 minutes ated seizures without regaining consciousnes or has diabetes
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain Do not put anything in mout	For tonic - Protect h	Return student as instructed by Aid -clonic seizure: nead way open/watch breathi	A seizure is gen Convulsive (tonic- Student has reper Student has a first	Call 011 if seizure is greater than 7 minutes recally considered an emergency wher- clonic) seizure lasts longer than 5 minutes ated seizures without regaining consciousnes or has diabetes t-time seizure.
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain Do not put anything in mout Record seizure in log	For tonic - Protect h - Keep air - Turn chil	Return student as instructed by Aid -clonic seizure: nead way open/watch breathi	to class or to home y parent/guardian A seizure is gen - Convulsive (tonio Student has reper - Student has a first - Student has breat	Call 011 if seizure is greater than 7 minutes rerally considered an emergency wher clonic) seizure lasts longer than 5 minutes ated seizures without regaining consciousnes or has diabetes t-time seizure thing difficulties
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain Do not put anything in mout	For tonic - Protect h - Keep air - Turn chil	Return student as instructed by Aid -clonic seizure: nead way open/watch breathi	A seizure is gen Convulsive (tonic- Student has reper Student has a first	Call 011 if seizure is greater than 7 minutes rerally considered an emergency wher clonic) seizure lasts longer than 5 minutes ated seizures without regaining consciousnes or has diabetes t-time seizure thing difficulties
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain Do not put anything in mout Record seizure in log Stay with child until fully core	For tonic - Protect h - Keep ain - Turn chil	Return student as instructed by Aid -clonic seizure: -ead way open/watch breathild on side	to class or to home y parent/guardian A seizure is gen - Convulsive (tonic) - Student has repe Student is injured - Student has a first - Student has a sei-	Call 011 if seizure is greater than 7 minutes 7 minutes 1 min
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain Do not put anything in mout Record seizure in log Stay with child until fully cor Special Coi	For tonic - Protect h - Keep air - Tum chil	Return student as instructed by Aid -clonic seizure: read way open/watch breathi id on side and Precautions (r	to class or to home y parent/guardian A seizure is gen - Convulsive (tonic) - Student has repe Student is injured - Student has a first - Student has a sei-	Call 011 if seizure is greater than 7 minutes rerally considered an emergency wher clonic) seizure lasts longer than 5 minutes ated seizures without regaining consciousnes or has diabetes t-time seizure thing difficulties
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain Do not put anything in mout Record seizure in log Stay with child until fully core	For tonic - Protect h - Keep air - Tum chil	Return student as instructed by Aid -clonic seizure: read way open/watch breathi id on side and Precautions (r	to class or to home y parent/guardian A seizure is gen - Convulsive (tonic) - Student has repe Student is injured - Student has a first - Student has a sei-	Call 011 if seizure is greater than 7 minutes 7 minutes 1 min
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain Do not restrain Do not put anything in mout Record seizure in log Stay with child until fully cor Special Coi	For tonic - Protect h - Keep air - Tum chil	Return student as instructed by Aid -clonic seizure: read way open/watch breathi id on side and Precautions (r	to class or to home y parent/guardian A seizure is gen - Convulsive (tonic) - Student has repe Student is injured - Student has a first - Student has a sei-	Call 011 if seizure is greater than 7 minutes 7 minutes 1 min
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain Do not restrain Do not put anything in mout Record seizure in log Stay with child until fully cor Special Coi	For tonic - Protect h - Keep air - Tum chil	Return student as instructed by Aid -clonic seizure: read way open/watch breathi id on side and Precautions (r	to class or to home y parent/guardian A seizure is gen - Convulsive (tonic) - Student has repe Student is injured - Student has a first - Student has a sei-	Call 011 if seizure is greater than 7 minutes 7 minutes 1 min
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain Do not put anything in mout Record seizure in log Stay with child until fully cor Special Coo Describe any special consi	For tonic - Protect h - Keep air - Turn chil	Return student as instructed by Aid -clonic seizure: read way open/watch breathi id on side and Precautions (r	to class or to home y parent/guardian A seizure is gen - Convulsive (tonic) - Student has repe Student is injured - Student has a first - Student has a sei-	Call 011 if seizure is greater than 7 minutes terally considered an emergency wher clonic) seizure lasts longer than 5 minutes ated seizures without regaining consciousnes or has diabetes titime seizure thing difficulties zure in water twitties, sports, trips, etc)
Notify parent/guardian Basic Stay calm & track time Keep child safe Do not restrain Do not restrain Do not put anything in mout Record seizure in log Stay with child until fully cor Special Coi	For tonic - Protect h - Keep air - Turn chil sscious	Return student as instructed by Aid -clonic seizure: read way open/watch breathi id on side and Precautions (r	to class or to home y parent/guardian A seizure is gen - Convulsive (tonic) - Student has repe Student is injured - Student has a first - Student has a sei-	Call 011 if seizure is greater than 7 minutes terally considered an emergency wher clonic) seizure lasts longer than 5 minutes ated seizures without regaining consciousnes or has diabetes titime seizure thing difficulties zure in water twitties, sports, trips, etc)

- A seizure action plan is specific to the individual with epilepsy
- Completed by a physician
- Describes a typical seizure for the individual
- Provides guidance on how to manage the seizures
- The student's seizure action plan is <u>always</u> to be followed

Green Zone Less than 2 minutes	Yellow Zone 2 to 5 minutes	Red Zone More than 5 minutes or 3 or more seizures in an hour
Begin seizure First Aid Allow student to recover from seizure Return student to class Notify parent/guardian	Continue Seizure First Aid Call for help Prepare to administer Diastat/Versed Allow student to recover from seizure Notify parent/guardian Return student to class or to home as instructed by parent/guardian	Continue Seizure First Aid Administer Diastat/Versed Monitor respirations and heart beat and start CPR if needed Notify parent/guardian Call 911 if seizure is greater than minutes



Credit: Martin Allison



Credit: Martin Allison

Falls





Credit: Martin Allison

- Falls
- Bitten tongue





Credit: Martin Allison

- Falls
- Bitten tongue
- Prolonged or cluster seizures increase risk of:





Credit: Martin Allison

- Falls
- Bitten tongue
- Prolonged or cluster seizures increase risk of:
 - Brain damage





Credit: Martin Allison

- Falls
- Bitten tongue
- Prolonged or cluster seizures increase risk of:
 - Brain damage
 - Respiratory compromise





Credit: Martin Allison

- Falls
- Bitten tongue
- Prolonged or cluster seizures increase risk of:
 - Brain damage
 - Respiratory compromise
 - Cardiac arrhythmia





Credit: Martin Allison

- Falls
- Bitten tongue
- Prolonged or cluster seizures increase risk of:
 - Brain damage
 - Respiratory compromise
 - Cardiac arrhythmia
 - Status Epilepticus





Credit: Deposit Photos

Stay Calm



Credit: Deposit Photos

- Stay Calm
- Ease the person to the floor and gently turn onto one side



Credit: Deposit Photos

- Stay Calm
- Ease the person to the floor and gently turn onto one side
- Remove any objects in the area that might cause injury



Credit: Deposit Photos

- Stay Calm
- Ease the person to the floor and gently turn onto one side
- Remove any objects in the area that might cause injury
- Put something soft and flat under victim's head



Credit: Deposit Photos

- Stay Calm
- Ease the person to the floor and gently turn onto one side
- Remove any objects in the area that might cause injury
- Put something soft and flat under victim's head
- Remove glasses and loosen anything around the neck



Credit: Deposit Photos

- Stay Calm
- Ease the person to the floor and gently turn onto one side
- Remove any objects in the area that might cause injury
- Put something soft and flat under victim's head
- Remove glasses and loosen anything around the neck
- Do NOT try to stop the person's movements



- Stay Calm
- Ease the person to the floor and gently turn onto one side
- Remove any objects in the area that might cause injury
- Put something soft and flat under victim's head
- Remove glasses and loosen anything around the neck
- Do NOT try to stop the person's movements
- Do NOT put anything in a person's mouth



- Stay Calm
- Ease the person to the floor and gently turn onto one side
- Remove any objects in the area that might cause injury
- Put something soft and flat under victim's head
- Remove glasses and loosen anything around the neck
- Do NOT try to stop the person's movements
- Do NOT put anything in a person's mouth
- Time the seizure



- Stay Calm
- Ease the person to the floor and gently turn onto one side
- Remove any objects in the area that might cause injury
- Put something soft and flat under victim's head
- Remove glasses and loosen anything around the neck
- Do NOT try to stop the person's movements
- Do NOT put anything in a person's mouth
- Time the seizure
 - If the seizure lasts longer than 5 minutes or is followed by another seizure without regaining consciousness, begin emergency treatment



Credit: Deposit Photos

- Stay Calm
- Ease the person to the floor and gently turn onto one side
- Remove any objects in the area that might cause injury
- Put something soft and flat under victim's head
- Remove glasses and loosen anything around the neck
- Do NOT try to stop the person's movements
- Do NOT put anything in a person's mouth
- Time the seizure
- Follow the student's Seizure Action Plan



If this is the first instance of seizure



Credit: Martin Allison

- If this is the first instance of seizure
- If seizure persists after administration of medication



- If this is the first instance of seizure
- If seizure persists after administration of medication
- If individual gets injured



- If this is the first instance of seizure
- If seizure persists after administration of medication
- If individual gets injured
- If there is any respiratory compromise



- If this is the first instance of seizure
- If seizure persists after administration of medication
- If individual gets injured
- If there is any respiratory compromise
- If seizures occur in back-to-back clusters without regaining consciousness



- If this is the first instance of seizure
- If seizure persists after administration of medication
- If individual gets injured
- If there is any respiratory compromise
- If seizures occur in back-to-back clusters without regaining consciousness
- If individual is pregnant or diabetic



Credit: Martin Allison





Rectal Diazepam (Diastat)





Rectal Diazepam (Diastat)



Credit: Martin Allison



A gel formulation of Diazepam (Valium)





- A gel formulation of Diazepam (Valium)
- Given rectally



- A gel formulation of Diazepam (Valium)
- Given rectally
- An FDA approved, as-needed medication for management of prolonged (> 5 mins) and/or cluster seizures in patients with epilepsy



- A gel formulation of Diazepam (Valium)
- Given rectally
- An FDA approved, as-needed medication for management of prolonged (> 5 mins) and/or cluster seizures in patients with epilepsy
- Locked into correct dose by pharmacy





- A gel formulation of Diazepam (Valium)
- Given rectally
- An FDA approved, as-needed medication for management of prolonged (> 5 mins) and/or cluster seizures in patients with epilepsy
- Locked into correct dose by pharmacy
- Shelf life of 4 years





- A gel formulation of Diazepam (Valium)
- Given rectally
- An FDA approved, as-needed medication for management of prolonged (> 5 mins) and/or cluster seizures in patients with epilepsy
- Locked into correct dose by pharmacy
- Shelf life of 4 years
- Dosing and expiration date should be checked regularly





 May take seconds or up to 15 minutes to be completely effective





- May take seconds or up to 15 minutes to be completely effective
- Children often go to sleep after this medication is given





- May take seconds or up to 15 minutes to be completely effective
- Children often go to sleep after this medication is given
- Check breathing and heart rate





- May take seconds or up to 15 minutes to be completely effective
- Children often go to sleep after this medication is given
- Check breathing and heart rate
 - In rare instances, children can have respiratory suppression with this class of medications





Diastat Administration





How to Administer Rectal Diazepam

Video Curtesy of Wisconsin Department of Public Instruction



 The intranasal route can be convenient for administering medications



- The intranasal route can be convenient for administering medications
- The nasal mucosa is highly vascularized, allowing for quick absorption



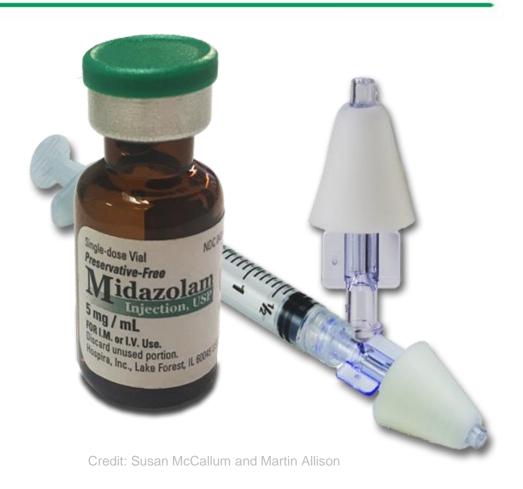
- The intranasal route can be convenient for administering medications
- The nasal mucosa is highly vascularized, allowing for quick absorption
- Within a few minutes of intranasal administration, blood levels are similar to that of giving midazolam IV



- The intranasal route can be convenient for administering medications
- The nasal mucosa is highly vascularized, allowing for quick absorption
- Within a few minutes of intranasal administration, blood levels are similar to that of giving midazolam IV
 - Onset of action 5 minutes



- The intranasal route can be convenient for administering medications
- The nasal mucosa is highly vascularized, allowing for quick absorption
- Within a few minutes of intranasal administration, blood levels are similar to that of giving midazolam IV
 - Onset of action 5 minutes
 - Maximum effect 10 minutes



- The intranasal route can be convenient for administering medications
- The nasal mucosa is highly vascularized, allowing for quick absorption
- Within a few minutes of intranasal administration, blood levels are similar to that of giving midazolam IV
 - Onset of action 5 minutes
 - Maximum effect 10 minutes
 - Duration of effect 30-60 minutes





Versed Administration



How to Administer Midazolam

Video Curtesy of Children's Colorado Hospital

How to give your child Midazolam



Driving

- Driving
 - GA Law states that you must be seizure free for 6 months to be eligible to drive

- Driving
 - GA Law states that you must be seizure free for 6 months to be eligible to drive
- Kitchen

- Driving
 - GA Law states that you must be seizure free for 6 months to be eligible to drive
- Kitchen
 - Use non-breakable dishes, cook with a partner

- Driving
 - GA Law states that you must be seizure free for 6 months to be eligible to drive
- Kitchen
 - Use non-breakable dishes, cook with a partner
- Bathroom

- Driving
 - GA Law states that you must be seizure free for 6 months to be eligible to drive
- Kitchen
 - Use non-breakable dishes, cook with a partner
- Bathroom
 - Bathtub drownings are the # 1 cause of accidental death for people with epilepsy or seizures

- Driving
 - GA Law states that you must be seizure free for 6 months to be eligible to drive
- Kitchen
 - Use non-breakable dishes, cook with a partner
- Bathroom
 - Bathtub drownings are the # 1 cause of accidental death for people with epilepsy or seizures
 - Take showers instead of baths and use shower curtains instead of glass doors

- Driving
 - GA Law states that you must be seizure free for 6 months to be eligible to drive
- Kitchen
 - Use non-breakable dishes, cook with a partner
- Bathroom
 - Bathtub drownings are the # 1 cause of accidental death for people with epilepsy or seizures
 - Take showers instead of baths and use shower curtains instead of glass doors
- Seizure control

- Driving
 - GA Law states that you must be seizure free for 6 months to be eligible to drive
- Kitchen
 - Use non-breakable dishes, cook with a partner
- Bathroom
 - Bathtub drownings are the # 1 cause of accidental death for people with epilepsy or seizures
 - Take showers instead of baths and use shower curtains instead of glass doors
- Seizure control
 - Do everything possible to maintain control of seizures



- Driving
 - GA Law states that you must be seizure free for 6 months to be eligible to drive
- Kitchen
 - Use non-breakable dishes, cook with a partner
- Bathroom
 - Bathtub drownings are the # 1 cause of accidental death for people with epilepsy or seizures
 - Take showers instead of baths and use shower curtains instead of glass doors
- Seizure control
 - Do everything possible to maintain control of seizures
 - Risk of death is 40 times higher in those with uncontrolled seizures



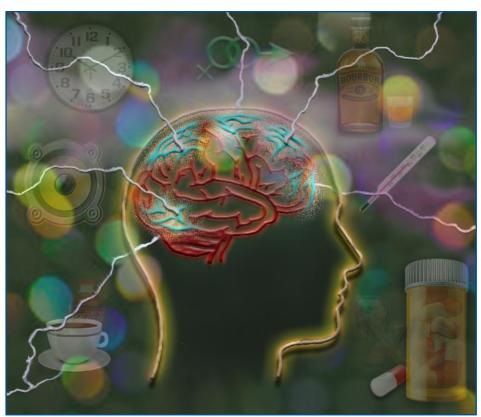
How Can I Use This Information?

Pause and think about how you can use the information discussed in this section in your daily practice.



Credit: Deposit Photos

Now that we have:



Credit: Martin Allison

Now that we have:

 Described a seizure action plan and it's importance in seizure care

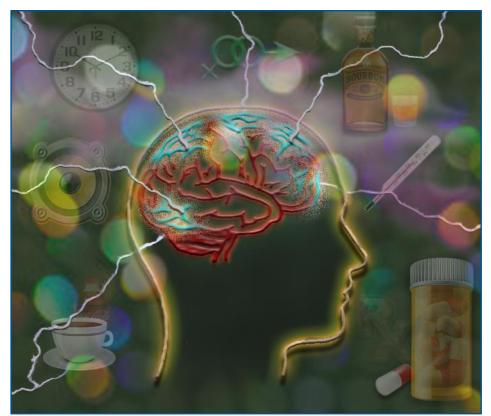


Credit: Martin Allison



Now that we have:

- Described a seizure action plan and it's importance in seizure care
- Explain how to respond to an individual experiencing a seizure



Credit: Martin Allison



Now that we have:

- Described a seizure action plan and it's importance in seizure care
- Explain how to respond to an individual experiencing a seizure
- Discuss common seizure medications and methods of administration

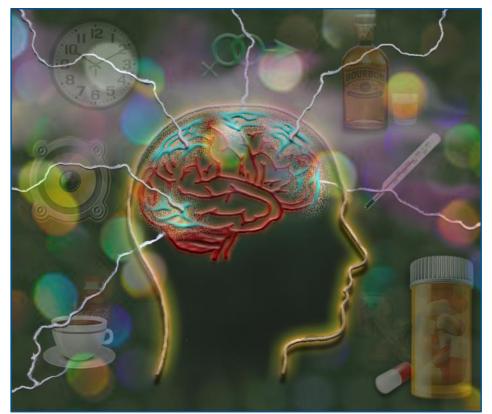


Credit: Martin Allison



Wrap-Up

Let's wrap up this video by looking at the Children's Healthcare of Atlanta Epilepsy program and additional resources for you to use.



Credit: Martin Allison



Resources

Web Address	Resource	4
epilepsy.com	Epilepsy Foundation	
seizuretracker.com	Seizure Self Management App (Free)	
cdc.gov/epilepsy	Center for Disease Control Epilepsy Program	
aesnet.org	American Epilepsy Society	
webease.org	Web Based Self Management Program (Free)	
choa.org/medical-services/neurosciences/epilepsy	Children's Healthcare of Atlanta Comprehensive Epilepsy Center	
	Susan McCallum 404-785-3720 Susan.McCallum@choa.org	

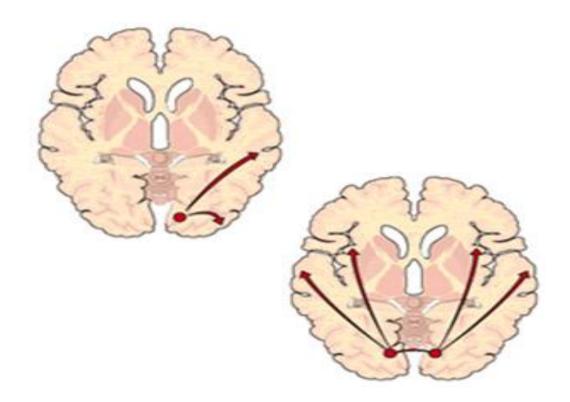
1. Overview of Epilepsy



Credit: Martin Allison



- 1. Overview of Epilepsy
- 2. Seizure Phases and Classifications



- 1. Overview of Epilepsy
- 2. Seizure Phases and Classifications
- 3. Seizure Diagnostics and Treatments



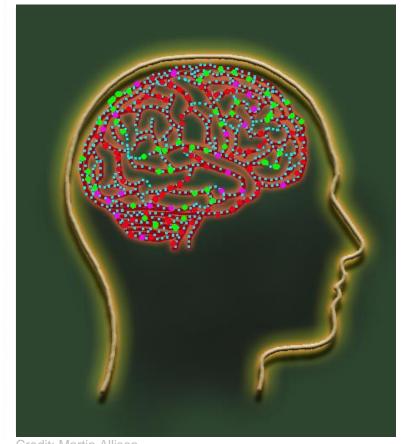
Credit: Children's Healthcare of Atlanta



- 1. Overview of Epilepsy
- 2. Seizure Phases and Classifications
- 3. Seizure Diagnostics and Treatments
- 4. Seizure First Aid



Credit: Deposit Photos



Credit: Martin Allison

Epilepsy Seizure First Aid

Children's Comprehensive Epilepsy Center

Presented by Susan McCallum, MSN, RN Children's Comprehensive Epilepsy Center 404-785-3720 www.choa.org





Medical Services

Patients

Visitors

Donors & Volunteers

Medical Professionals

Q Search

& Find a Doctor

Locations

& Children's Physician Group

▲ Research

Careers

About Us

\$ Donate Now

Medical Professionals

Nursing Resources







Video & Graphic Credits

Video Credits





Rectal Diazepam (Diastat)...University of Wisconsin – Joint Project with Wisconsin Department of Public Instruction



How to Give your Child Midazolam...Children's Hospital Colorado

Photo & Graphics Credits

Martin Allison

Susan McCallum

Mayo Foundation for Medical Education and Research

Deposit Photos





