Seizure

**History:**
- Reported / witnessed seizure activity
- Previous seizure history
- Medical alert tag information
- Seizure medications
- History of trauma
- History of diabetes
- History of pregnancy

**Signs and Symptoms:**
- Decreased mental status
- Sleepiness
- Incontinence
- Observed seizure activity
- Evidence of trauma
- Unconscious

**Differential:**
- CNS (Head) trauma
- Tumor
- Metabolic, Hepatic, or Renal failure
- Hypoxia
- Electrolyte abnormality (Na, Ca, Mg, K+)
- Drugs, Medications, Non-compliance
- Infection / Fever
- Alcohol withdrawal
- Eclampsia
- Stroke
- Hyperthermia
- Hypoglycemia

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**Universal Patient Care Protocol**

**Consider Spinal Motion Restriction Protocol**

**Airway Protocol**
(Pulse Ox and Capnography with Documentation is Mandatory !)

Lorazepam 1 to 2 mg IV/IO/IM
(May repeat q 10 min. if still seizing, to a max total of 4 mg)**
(Midazolam 0.1mg/kg up to 5 mg IVP/IOP/IM/IN**

Seizing

Post ictal

Glucose Assessment Procedure

**Altered Mental Status Protocol PRN**

**Contact Destination or Medical Control as needed**

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**Pearls:**
- Status epilepticus is defined as two or more successive seizures without a period of consciousness or recovery. This is a true emergency requiring rapid airway control, treatment, and transport.
- **Grand mal seizures (generalized)** are associated with loss of consciousness, incontinence, and tongue trauma.
- **Focal seizures (petit mal)** effect only a part of the body and are not usually associated with a loss of consciousness
- **Jacksonian seizures** are seizures which start as a focal seizure and become generalized.
- Assess possibility of occult trauma and substance abuse.
- Monitor for respiratory depression and hypotension associated with Midazolam & Lorazepam. **Pulse OX and Capnography with Documentation is Mandatory!** Be prepared to assist ventilations especially if Midazolam is used.
- For any seizure in a pregnant or recently post partum patient, follow the **OB Emergencies Protocol.**
- **Lorazepam and Midazolam Doses** are to be titrated to effect, maintaining SBP >100 mmHg and/or peripheral pulses present.
- Always use **smallest dose** possible to achieve desired effect. Elderly should start with ½ normal dose of Lorazepam or Midazolam.