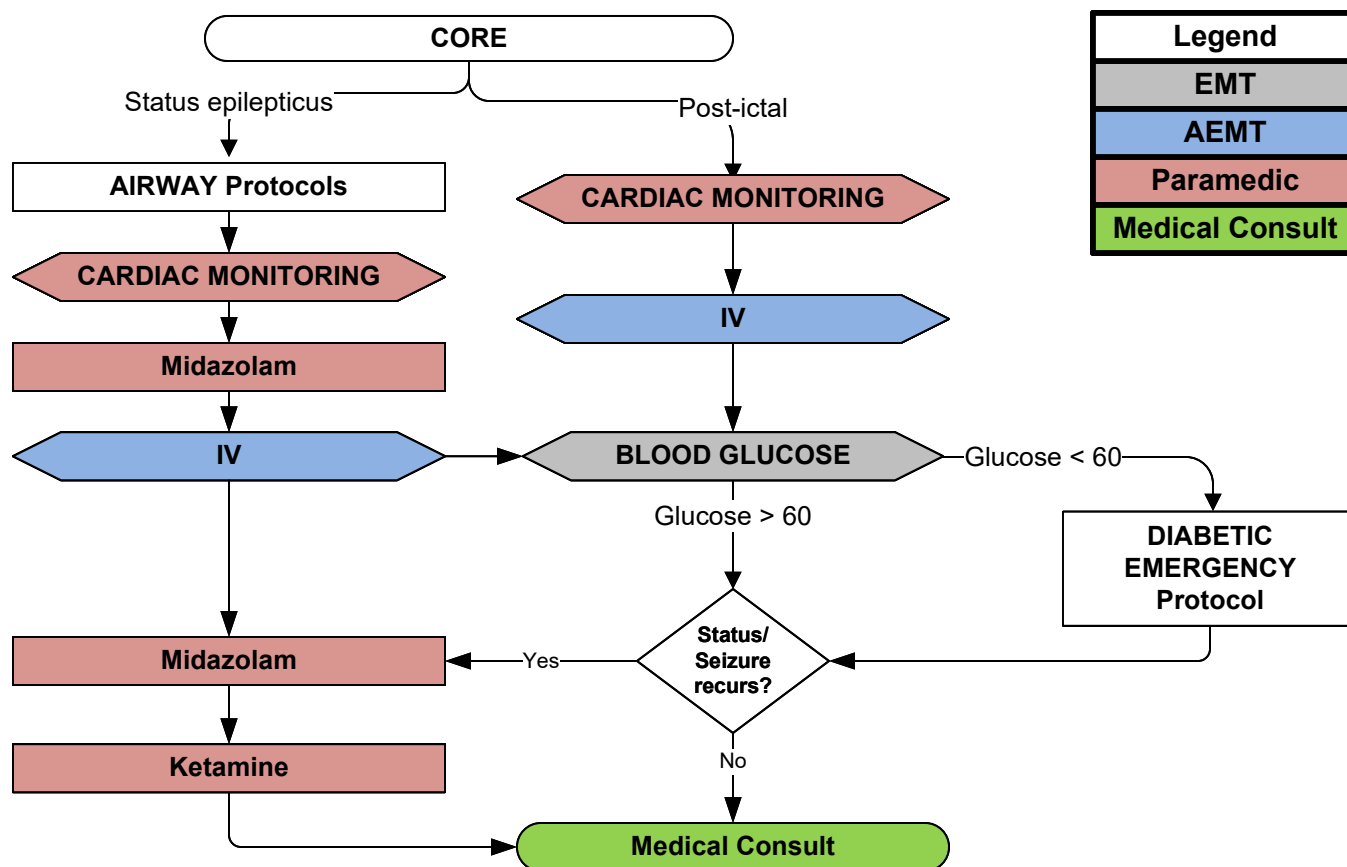


SEIZURE

History: ○ Reported / witnessed seizure activity ○ Previous seizure history ○ Medical alert tag information ○ Seizure medications ○ History of trauma ○ History of diabetes ○ History of pregnancy ○ Recent fever/illness ○ SAMPLE	Signs and Symptoms: ○ Decreased mental status ○ Sleepiness ○ Incontinence ○ Observed seizure activity ○ Evidence of trauma ○ In children, fever, hot dry skin, altered mental status	Differential: ○ CNS (Head) trauma ○ Tumor ○ Metabolic, Hepatic, or Renal failure ○ Hypoxia ○ Electrolyte abnormality (Na, Ca, Mg) ○ Drugs, Medications, Non-compliance ○ Infection / Fever ○ Alcohol withdrawal ○ Eclampsia ○ Stroke ○ Hyperthermia ○ Overdose
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Pearls:

- Status epilepticus is defined as a prolonged seizure greater than 5 minutes or two or more successive seizures without a period of consciousness or recovery. This is a true emergency requiring rapid airway control, treatment, and transport.
- Ketamine is indicated for status epilepticus refractory to Midazolam. Ketamine can be administered if seizures persist after the maximum standing order dose of Midazolam have been administered.
- Grand mal seizures (generalized tonic-clonic) are associated with loss of consciousness, incontinence, and tongue trauma.
- Focal seizures 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.
- Be prepared for airway problems and continued seizures.
- Assess possibility of trauma, substance abuse, or alcohol/benzo withdrawal.
- Be prepared to assist ventilations, especially if midazolam is used. Midazolam CAN cause hypotension and respiratory depression.
- For any seizure in a pregnant patient, follow the **PRE-ECLAMPSIA/ECLAMPSIA Protocol**.
- If febrile, remove clothing and sponge with room temperature water.
- In an infant, a seizure is most commonly a febrile seizure, but may be the only evidence of a closed head injury.