

Seizure Emergency Care Plan and Medication Orders for School or Care Settings

PARENT/GUARDIAN to complete, SIGN and DATE Below		
Child/patient Name:	Birth date:	
Parent/Guardian Contact:	Phone:	
Emergency Contact:	Phone:	
School:	Grade:	
Triggers: tiredness illness temperature	Other:	
Seizure Warning (aura) if any:	· · · · · · · · · · · · · · · · · · ·	
Has patient ever received rescue medication before	?Date:	
Antiseizure Medications Taken at Home What	side effects does this patient experience?	
In making the ingressed with a least growing digt the grows	for online 2	
Is patient being treated with a ketogenic diet therapy		
No Yes, family will arrange or discuss plans	for school meals and snacks.	
I give permission for school personnel to share this inform	mation, follow this plan, administer	
medication and care for my child and, if necessary, conta		
for providing the school with prescribed medication and d	evices. I approve this Seizure Emergency	
Care Plan for my child.		
Devent/Cuardian Signature Data Nurse/	COLIC Ciamatura Data	
Parent/Guardian Signature Date Nurse/	CCHC Signature Date	
HEALTH CARE TEAM to complete, SIGN and DATE Below.		
IF YOU SEE THIS:	DO THIS:	
Convulsive Generalized Tonic Clonic: These seizures may	FOR CONVULSIVE SEIZURES ONLY: 1. Time the seizure and record observations.	
begin with a warning (aura). The patient will lose consciousness. You	Keep calm. Provide reassurance. Remove bystanders.	
may see stiffening of the body or rhythmic jerking movements. Convulsive seizures may last 1-5 minutes. Sleepiness and confusion	3. Protect head, keep airway clear, turn on side.	
may occur after the seizure.	4. Do not restrain or place anything in mouth.	
Focal: These seizures often begin with a warning (aura). The	5. Call 911 if patient is injured or has difficulty breathing.6. Call guardian.	
patient may be partly alert or unconscious. You may see lip	7. Stay with patient until recovered from seizure.	
smacking, chewing, eye blinking, or picking at clothes. These seizures usually last 1-2 mins. Sleepiness and confusion may occur	Administer rescue treatments as marked below.	
after the seizure.	FOR ALL OTHER SEIZURE TYPES (BESIDES	
Absence: The patient may have sudden changes in alertness.	CONVULSIVE):	
You may see eye flutter or small twitching. Usually last less than 10	Time the seizure and record observations.	
secs. These are not an emergency unless clustering for more than 10	 Gently guide patient away from danger. Stay with patient and reassure them until recovered from 	
minutes without return to baseline.	seizure.	
Febrile seizures: The patient may not be on a daily antiseizure medication. Seizures may occur at the beginning of an illness and	Do not treat staring that is stopped by a touch/nudge.Call guardian.	
can appear similar to other seizure types. Preventative treatment with	5. Call guardian.	
antipyretics does not reduce incidence.	Administer rescue treatments as marked below.	
OTHER: please describe:		
Child has a history of psychogenic non epileptic evens (if		
selected please provide separate documentation for clarification,		
these do not require rescue treatments)		
RESCUE TREATMENTS:		

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Implantable devices:	
does patient have an implantable device? If yes, please describe:	
If convulsive seizure lasts longer than 5 minutes, or focal seizure >10 minutes administer:	
Diastat: rectallymg can give second Diastat dose if seizures continue afterminutes.	
Nayzilam nasally mg can give second Nayzilam dose if seizures continue after minutes.	
Midazolam nasallymg to administer half in each nostril. can give second nasal midazolam dose if	
seizures continue afterminutes	
Valtoco nasallymg can give second Valtoco dose if seizures continue afterhours	
Multistep seizure rescue plan – Please see attached letter for details.	
OR If <u>cluster</u> ofor more seizures inminutes, or repeated seizures without return to baseline > minutes administer:	15
Clonazepammg	
Diastat: rectallymg	
Nayzilam nasallymg can give second Nayzilam dose if seizures continue afterminutes	
Midazolam nasallymg to administer half dose in each nostril	
Valtoco nasally mg can give second Valtoco dose if seizures continue after hours	
Multistep seizure rescue plan – Please see attached letter for details.	
Call 911 immediately if emergency medication is administered	
[] Call 911 if seizure does not stop within min of giving medication.	
[] Can 911 if Seizure does not stop withinniin of giving medication.	
Does patient have photo-sensitive epilepsy (ie. can flashing lights trigger seizures)?(Y/N)	
accommodations: Always take seizure action plan and emergency medication for school activities, sports	
nd field trips. Close adult supervision when swimming or climbing.	
TH CARE PROVIDER SIGNATURE PRINT PROVIDER'S NAME PHONE/FAX DATI	F

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