



APPENDIX A

Surname:	
Given Name:	
DOB:	
Address:	
Phone:	
PHN:	
Sex:	
MHSC:	

TREATMENT GUIDELINES FOR SEIZURES

Keep calm. Do not try to stop seizure or move person.

Monitor ABCs and ensure **O₂** and **suction** are nearby.

Protect person from further injury by:

- Placing towel under head
- Loosening tight clothing
- moving sharp objects away
- rolling person on his/her side as soon as possible to allow secretions to drain.

DO NOT restrain person or force anything in person's mouth.

Check blood glucose. If client is hypoglycemic, follow WRHA Primary Care Hypoglycemia Practice Guidelines (PCPG2).

After seizure, provide a safe area to rest and offer reassurance and orientation,

For suspected status epilepticus (i.e., seizure lasting more than 5 minutes):

- **CALL 911 IMMEDIATELY**
- Administer O₂ 6-10 liters/minute
- Administer medication

Adults and adolescents: Lorazepam 2 mg SUBLINGUAL tablet inserted intrabuccally

Pediatric: Lorazepam sublingual tablet. If teeth are clenched, insert between gums and cheek.

- Less than 6 months: 0.25 milligram tablet
- 6 months to 2 years: 0.50 milligram tablet
- More than 2 years: 1.0 milligram tablet

NOTE: Lorazepam is to be administered in children only after 15 minutes of continuous seizure activity.

NOTE: These medications may cause respiratory depression, regardless of route of administration.

Treatment Record		
Name of Client: _____	Age: _____	Date: _____
Time	Assessment	Intervention