

Change in level of consciousness (LOC) before, during, and after the seizure

Movements (ask for demonstration of the seizure rather than relying on verbal description)

From parent or primary caregiver:

Previous seizures

Family history of seizures

Recent illness

Current medications

Nursing Diagnosis

Risk for injury

Risk for aspiration

Risk for ineffective coping

Nursing Interventions

What are the most appropriate nursing interventions for a child with seizures?

Nursing Interventions	Rationale
Monitor time (onset and duration), movements, and LOC during seizure.	To provide an accurate description of the seizure, including the order of events before, during, and after the seizure
If child is at risk of falling, ease child to floor. Prevent child from hitting head on objects. Do not attempt to restrain child or use force.	To prevent physical harm
During seizure, place child in a side-lying position on a flat surface such as floor. Do not put anything in child's mouth.	To prevent possible aspiration
Stay with the child and reassure the child when awakening from seizure.	To decrease child's anxiety and fear
Evaluate postictal feelings.	To provide accurate description of the postictal state