# **SEIZURES**

# **ALL PROVIDERS**

- ☐ Focused history and physical exam
  - Blood glucose, temperature and oxygen saturation assessment
  - Determine possibility of third trimester pregnancy, if appropriate
  - Assess scene for possible toxin, overdose or trauma
- ☐ Cardiac monitor, ETCO2, and pulse oximetry monitoring, when available

#### ☐ Treatment Plan

- Do not restrain, but do provide protection from injury during the tonic-clonic phase
- Spinal motion restriction per Spinal Motion Restriction Guideline
- Ensure patients experiencing febrile seizures are not excessively dressed or bundled
- Any child <12 months old with seizure activity should be encouraged to be transported

## ☐ Key Considerations:

- ONLY treat if actively seizing.
- Intranasal (IN) and intramuscular (IM) routes are preferred for first line administration of benzodiazepines
- Intravenous (IV) administration of benzodiazepines is appropriate once an IV is in place
- Rectal administration is not recommended

**ADULT** 

PEDIATRIC (<15 years of Age)
NOTE: Pediatric weight based dosing should not exceed Adult dosing.

#### FMT

- ☐ Maintain open airway with patient in the recovery position
- ☐ Assist patient's family or caretaker with any home medication treatments

### **AEMT**

- ☐ Advanced airway, vascular access and fluid therapy
- ☐ **Benzodiazepines**: cut the DOSE in half if the patient is under the influence of narcotics or alcohol

### Midazolam

o IN/IM/IV/IO – 5 mg, may repeat once in 5 minutes, if needed. Total max dose: 10mg

# Diazepam

- IV/IO 5 mg, may repeat every 5 minutes, if needed. Total max dose:
   20mg
- o **Intramuscular (IM) 10 mg,** may repeat once in 10 minutes, if needed. Total max dose: 20 mg (IM not preferred unless no other options)

# Lorazepam

 IV/IO/IM – 4mg, may repeat every 5 minutes, if needed. Total max dose: 8mg

#### **EMT**

- ☐ Maintain open airway with patient in the recovery position
- ☐ Assist patient's family or caretaker with any home medication treatments

## **AEMT**

- ☐ Advanced airway, vascular access and fluid therapy
- ☐ Benzodiazepines: cut the DOSE in half if the patient is under the influence of narcotics or alcohol

### Midazolam

- o **IN/IM: 0.2 mg/kg** (max 5 mg), may repeat once in 5 minutes, if needed. Total max dose: 10 mg
- o IV/IO 0.1 mg/kg (max 5 mg), may repeat once in 5 minutes, if needed. Total max dose: 10 mg

### Diazepam

- o IV/IO 0.1 mg/kg (max 5 mg), may repeat every 5 minutes, if needed. Total max dose: 10 mg
- O Intramuscular (IM): 0.2 mg/kg (max 10 mg), may repeat every 10 minutes, if needed. Total max dose: 20 mg (IM not preferred unless no other options)

# Lorazepam

- IV/IO/IM 0.1mg/kg (max 4 mg per dose), may repeat X1 in 10 minutes.
   Total max dose: 8 mg.
- Contact OLMC for dosages above those provided or use of medication NOT fitting the guideline parameters
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# **PARAMEDIC**

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- ☐ Pregnant females with eclampsia/seizures
  - Magnesium sulfate 5 gm IM/IV/IO gm. Give infusion over 15 to 30 min.
- Magnesium Sulfate For pediatric patients who are pregnant and having a seizure contact OLMC