# ADL Activities

1. **Morning Routine (7:00 AM 7:30 AM)**

* Wake up, take antiepileptic medication.
* Brush teeth, wash face, and comb hair.
* Get dressed in comfortable clothing.

1. **Breakfast (7:30 AM 8:00 AM)**

* Prepare a simple breakfast, like oatmeal and fruit.
* Eat while seated to avoid potential triggers.

1. **Medication Management (8:00 AM 8:30 AM)**

* Organize medication for the day.
* Take mid-morning antiepileptic medication.

1. **Light Exercise (8:30 AM 9:00 AM)**

* Practice seated stretches and deep breathing exercises.
* Focus on maintaining flexibility.

1. **Hygiene and Bathing (9:00 AM 9:30 AM)**

* Take a warm shower with assistance if needed.
* Use gentle soap and avoid extreme temperatures.

1. **Rest and Relaxation (9:30 AM 10:00 AM)**

* Lie down for a brief relaxation session.
* Listen to calming music or practice deep breathing.

1. **Snack and Hydration (10:00 AM 10:30 AM)**

* Have a healthy snack and drink water.
* Avoid overly sugary or caffeinated snacks.

1. **Household Chores (10:30 AM 11:00 AM)**

* Light dusting and organizing around the living area.
* Take breaks to prevent overexertion.

1. **Medication Reminder (11:00 AM 11:30 AM)**

* Set an alarm to remind about medication.
* Take prescribed antiepileptic medication.

1. **Lunch Preparation (11:30 AM 12:00 PM)**

* Prepare a balanced lunch with fruits, vegetables, and protein.
* Use caution with sharp knives and hot surfaces.

1. **Lunch and Rest (12:00 PM 12:30 PM)**

* Sit down for a leisurely lunch.
* Relax for a short time after eating.

1. **Communication (12:30 PM 1:00 PM)**

* Make a phone call to a family member or friend.
* Stay socially connected for emotional well-being.

1. **Medication Management (1:00 PM 1:30 PM)**

* Take afternoon antiepileptic medication.
* Check the medication schedule for the day.

1. **Indoor Activities (1:30 PM 2:00 PM)**

* Engage in a puzzle or craft activity.
* Keep the environment well-lit and comfortable.

1. **Snack and Hydration (2:00 PM 2:30 PM)**

* Have a nutritious snack and drink water.
* Stay hydrated throughout the day.

1. **Medication Reminder (2:30 PM 3:00 PM)**

* Set a reminder for medication time.
* Take prescribed antiepileptic medication.

1. **Listening to Music (3:00 PM 3:30 PM)**

* Relax and listen to favorite music.
* Create a calming atmosphere.

1. **Light Exercise (3:30 PM 4:00 PM)**

* Gentle seated exercises for joint mobility.
* Focus on maintaining flexibility.

1. **Cooking Dinner (4:00 PM 4:30 PM)**

* Prepare a light and balanced dinner.
* Take precautions while using the stove.

1. **Evening Routine (4:30 PM 5:00 PM)**

* Take evening antiepileptic medication.
* Change into comfortable clothes for the evening.

1. **Relaxation Time (5:00 PM 5:30 PM)**

* Sit in a quiet space and read a book.
* Practice mindfulness and deep breathing.

1. **Dinner Preparation (5:30 PM 6:00 PM)**

* Prepare dinner with focus on nutrition.
* Avoid heavy meals close to bedtime.

1. **Dinner (6:00 PM 6:30 PM)**

* Enjoy dinner in a relaxed setting.
* Choose foods that don't trigger discomfort.

1. **Evening Activities (6:30 PM 7:00 PM)**

* Engage in a hobby or watch a favorite TV show.
* Keep lighting optimal to prevent strain.

1. **Medication Management (7:00 PM 7:30 PM)**

* Organize medication for the night.
* Take prescribed antiepileptic medication.

1. **Evening Relaxation (7:30 PM 8:00 PM)**

* Engage in gentle stretches for relaxation.
* Avoid strenuous activities close to bedtime.

1. **Nighttime Routine (8:00 PM 8:30 PM)**

* Brush teeth and perform oral care.
* Set a calming ambiance for sleep.

1. **Reading and Wind-Down (8:30 PM 9:00 PM)**

* Read a calming book before sleep.
* Create a pre-sleep routine for relaxation.

1. **Medication Reminder (9:00 PM 9:30 PM)**

* Set an alarm to remind about medication.
* Take prescribed antiepileptic medication.

1. **Sleep Preparation (9:30 PM 10:00 PM)**

* Lie down and practice deep relaxation.
* Ensure the sleeping environment is comfortable.

Seizure Occurences

Sudden Seziures

Seizure # 1

* The patient suddenly stops ongoing activities and stares blankly.
* Muscle jerks start, causing arms and legs to twitch.
* Patient falls to the ground, caregiver ensures a safe environment.
* Muscle spasms continue, and the patient may foam at the mouth.
* Seizure activity gradually subsides, and patient starts regaining awareness.
* Patient feels disoriented and tired; caregiver provides comfort and support.

Seizure # 2

* Caregiver notices unusual behavior and identifies the start of a seizure.
* Patient's body stiffens, and they fall to the ground.
* Caretaker gently guides the patient to a safe, open area.
* Seizure continues with rhythmic jerking and shallow breathing.
* Caretaker times the seizure duration and offers comfort.
* Seizure activity decreases, and patient enters a postictal phase.

Absence Seizure (Complex Partial Seizure)

Tonic-Clonic Seizure (Grand Mal Seizure)

Simple Partial Seizure

Myoclonic Seizure

Postictal State

Seizure # 3

**Before Seizure:**

* Patient is reading a book while seated on the couch.

**During Seizure:**

* Patient loses balance and falls onto the carpeted floor.
* Caregiver cushions the patient's head and clears the immediate area.

**After Seizure:**

* Caregiver supports the patient to sit up slowly.
* Patient is provided with a light snack and comforted.
* Caregiver stays nearby to ensure patient's well-being.

Seizure # 4

**Before Seizure:**

* Patient is working at a desk in the home office.

**During Seizure:**

* Patient falls from the chair onto the carpeted floor.
* Caregiver nearby immediately cushions the fall.

**After Seizure:**

* Caregiver helps the patient sit up and offers a calming drink.
* Patient's head is supported, and comfort is provided.
* Caregiver stays until the patient feels stable.
* Before Seizure:
  + Patient is getting ready for bed, sitting on the edge of the bed.
* During Seizure:
  + Patient suddenly collapses onto the mattress.
  + Caregiver rushes to the bedside to ensure safety.
* After Seizure:
  + Caregiver helps the patient lie down comfortably.
  + Patient is covered with a blanket and offered a sip of water.
  + Caregiver remains present until the patient is fully awake.

**Scenerio1: Daily Routine with Seizure**

**Description:**  
This scenario depicts the daily routine of an elderly epileptic patient, including activities of daily living (ADL) before and after experiencing a seizure.

**Actor:Scenarios**

Elderly Epileptic Patient

**Preconditions:**

* The patient is at home.
* The patient's medical history, medication, and seizure triggers are known.
* The patient is under the care of a caretaker.

**Trigger:**

The patient's seizure threshold is reached.

**Basic Flow:**

1. **Morning Routine:**

* The patient wakes up and gets out of bed.
* Performs personal hygiene activities: washing face, brushing teeth.
* Changes into day clothes and wears slip-on shoes.
* Walks to the kitchen to prepare breakfast.

2.  **Breakfast:**

* Prepares a simple breakfast, such as cereal and fruit.
* Sits at the dining table and eats breakfast.
* Drinks a glass of water or juice.

3. **Light Exercise:**

* Engages in light exercises or stretches recommended by a healthcare professional.

4. **Engagement with Hobbies:**

* Spends time on hobbies such as reading or listening holy quran.

5. **Lunch Preparation:**

* Purchased bread and other ingredients for the lunch from the nearest market.
* Prepares a light lunch, like a sandwich or salad.
* Eats lunch and takes prescribed medications.

6. **Rest and Relaxation:**

* Takes a short nap or rests in a comfortable chair.

7. **Seizure Occurrence:**

* Experiences a seizure episode lasting for a few minutes.
* Nearby caregiver provides assistance and ensures safety.

8. **Post-Seizure Recovery:**

* The patient gradually regains consciousness.
* The caregiver reassures the patient and helps them sit up.

9. **Hydration and Snack:**

* Offers the patient water to stay hydrated.
* Provides a light snack to help regain energy.

10.  **Rest and Observation:**

* The patient rests while being observed by a caregiver.
* The caregiver notes down any changes in behavior or condition.

11. **Evening Routine:**

* The patient freshens up with a wet cloth.
* Changes into comfortable evening wear.
* Enjoys a light dinner prepared by a caregiver.

12.  **Entertainment and Relaxation:**

* Watches TV, listens to recitation, or reads a book.
* Engages in calming activities to unwind.

13. **Bedtime Preparation:**

* Brushes teeth and washes face.
* Changes into night clothes.
* Gets into bed and prepares for sleep.

**Postconditions:**

* The patient has experienced a seizure and received the necessary care.
* The patient's condition is stable.
* The caregiver continues to monitor the patient's well-being.

**Scenario2: Evening Routine with Seizure**

Description:

This scenario illustrates the evening routine of an elderly epileptic patient, encompassing activities of daily living (ADL) before and after experiencing a seizure.

Actors:

- Elderly Epileptic Patient

- Caregiver

Preconditions:

- The patient is at home in the evening.

- The caregiver is present and aware of the patient's medical condition.

Trigger:

- The patient's seizure threshold is reached.

Basic Flow:

1. -Dinner Preparation: -

- The caregiver prepares a nutritious dinner for the patient.

- Sets the table and ensures everything is within the patient's reach.

2. -Dinner Time: -

- The patient sits down to have dinner with the caregiver.

- The patient eats mindfully, enjoying the meal and conversation.

3. -Evening Medication: -

- After dinner, the patient takes prescribed medications.

4. -Relaxation Time: -

- The patient and caregiver engage in relaxed activities, such as listening to calming music or chatting.

5. -Seizure Episode: -

- The patient suddenly experiences a seizure episode.

- The caregiver provides immediate assistance, ensures patient's safety, and monitors the duration.

6. -Seizure Recovery: -

- As the seizure subsides, the patient gradually regains consciousness.

- The caregiver stays with the patient, offering comfort and support.

7. -Hydration and Rest: -

- The caregiver provides water for hydration.

- The patient rests in a comfortable chair under observation.

8. -Bedtime Preparation: -

- The caregiver helps the patient wash their face and hands.

- The patient changes into night clothes.

9. -Bedtime Routine: -

- The patient settles into bed.

- The caregiver ensures the room is comfortable and adjusts the bedding.

10. -Calming Activities: -

- The patient engages in calming activities, like deep breathing or gentle stretching.

11. -Caregiver's Support: -

- The caregiver reassures the patient and ensures they are comfortable.

Postconditions:

- The patient has experienced a seizure, received immediate care, and is in a stable condition.

- The caregiver continues to monitor the patient's well-being through the night.