

**SEIZURES**

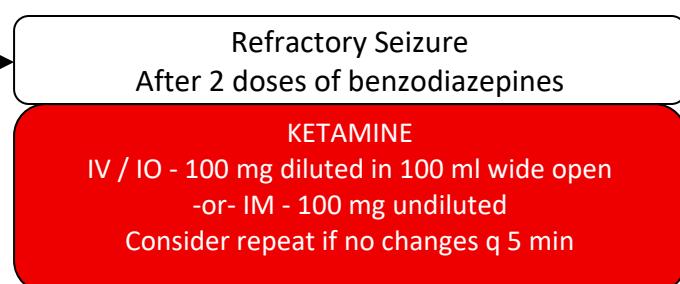
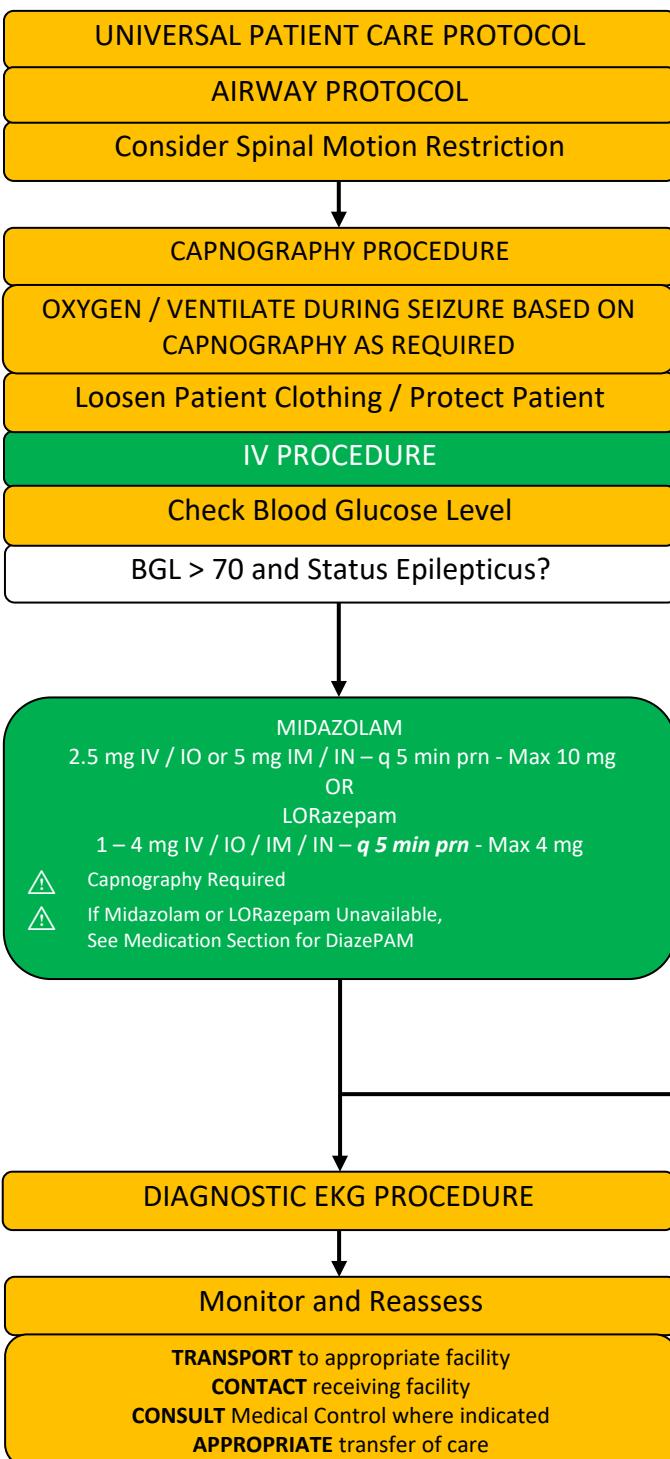
Airway / Breathing

Circulation / Shock

Cardiac

Medical

Trauma



EMT Intervention

AEMT Intervention

PARAMEDIC Intervention

Online Medical Control

# SEIZURES

HISTORY	SIGNS AND SYMPTOMS	DIFFERENTIAL DIAGNOSIS
<ul style="list-style-type: none"> <li>Reported / witnessed seizure activity</li> <li>Previous seizure history</li> <li>Medical alert tag information</li> <li>Seizure medications</li> <li>History of trauma</li> <li>History of diabetes</li> <li>History of pregnancy</li> </ul>	<ul style="list-style-type: none"> <li>Decreased mental status</li> <li>Sleepiness</li> <li>Incontinence</li> <li>Observed seizure activity</li> <li>Evidence of trauma</li> </ul>	<ul style="list-style-type: none"> <li>CNS (head) trauma</li> <li>Tumor</li> <li>Metabolic, hepatic, or renal failure</li> <li>Hypoxia</li> <li>Electrolyte abnormality (na, ca, mg)</li> <li>Drugs, medications, non-compliance</li> <li>Infection / fever</li> <li>Alcohol withdrawal</li> <li>Eclampsia</li> <li>Stroke</li> <li>Hyperthermia</li> </ul>

## Categories of Seizures

<b>Complex = Unconscious</b>	<b>Focal = Partial, Localized</b>
<b>Simple = Conscious</b>	<b>Generalized = All Body</b>

- Simple Focal**
- Simple Generalized**
- Complex Focal**
- Complex Generalized**

## KEY POINTS

- Exam: Mental Status, HEENT, Heart, Lungs, Extremities, Neuro
- Status epilepticus** is defined as two or more successive seizures without a period of consciousness or recovery. This is a true emergency requiring rapid airway control, treatment, and transport.
- Grand mal seizures** (generalized) are associated with loss of consciousness, incontinence, and possibly tongue trauma.
- Focal seizures** (petit mal) affect only a part of the body and are not usually associated with a loss of consciousness.
- For any seizure in a pregnant patient, follow the OB Emergencies Protocol and call Online Medical Control**
- Benzodiazepine administration is reserved for patients who are actively seizing only, not for prophylaxis of seizures.
- Be prepared to manage the airway and breathing of patients who have received benzodiazepines such as Lorazepam or Midazolam
- Jacksonian seizures are seizures that start as a focal seizure and become generalized.
- Be prepared for airway problems and continued seizures.
- Assess possibility of occult trauma and substance abuse. Lorazepam is well absorbed when administered IM but takes up to 15 minutes to act. It should be given IV or intranasally (IN) with an atomizer.
- The seizure has usually stopped by the time the EMS personnel arrive and the patient will be found in the postictal state.
- There are many causes for seizures including epilepsy, head trauma, tumor, overdose, infection, hypoglycemia, and withdrawal. Be sure to consider these when doing your assessment.
- Routinely assess the patient's airway.
- If the patient is combative and postictal, DO NOT use the Restraint Procedure before assessing for / treating hypoglycemia and hypoxia.
- If the patient is actively seizing, move any objects that may injure the patient. Protect, but do not try to restrain them.