

## 2.13 ADULT SEIZURE EMSAM OCTOBER 2025

General Assessment	
<ul style="list-style-type: none"><li>• Obtain focused history including:<ul style="list-style-type: none"><li>○ Duration of current seizure</li><li>○ Prior history of seizures, diabetes or hypoglycemia</li><li>○ Baseline seizure frequency and duration</li><li>○ Current medications, including anticonvulsants</li><li>○ Recent trauma, heat exposure, toxin exposure or pregnancy</li></ul></li></ul>	
BLS Management – General Guidelines	
<ul style="list-style-type: none"><li>• If signs of airway obstruction, perform chin-lift, jaw thrust</li><li>• Suction airway as needed</li><li>• <b>Oxygen</b> as indicated</li><li>• Place patient on side and protect head while seizing.</li><li>• Check blood glucose</li><li>• Call for ALS if BLS resource</li></ul>	
ALS Management – General Guidelines	
<ul style="list-style-type: none"><li>• If actively seizing, do not delay IM/IN administration to start an IV</li><li>• If BGL &lt; 60 mg/dl</li><li>• <b>Dextrose</b> IV/IO. Repeat as needed</li><li>• If IV cannot be established, administer <b>Glucagon</b></li><li>• Establish IV/IO access with <b>Normal Saline</b> TKO</li></ul>	

Status Epilepticus
<p><b>Status Epilepticus</b> definition:</p> <ul style="list-style-type: none"><li>• Continuous generalized tonic-clonic seizure activity lasting &gt; 5 minutes. This includes patients who are seizing on EMS arrival because it can be assumed that they have been seizing for at least 5 minutes beforehand.</li><li>• Partial seizure activity &gt;10 minute</li><li>• Multiple seizures without returning to baseline</li></ul>
ALS Treatment
<p>For patients that are meeting <b>status epilepticus</b> criteria:</p> <ul style="list-style-type: none"><li>• <b>Midazolam 10 mg IM (preferred)/IN (5mg in each nostril)-10 mg IV/IO slow IV push.</b></li></ul> <p>For seizures that do NOT meet the definition of status epilepticus (e.g. including partial seizures or &lt;5 minutes), no medication indicated.</p> <ul style="list-style-type: none"><li>• <b>Midazolam 5mg IM/IV/IO. Should repeat dose X1 if seizure not aborted at 5 minutes from symptom onset (see status epilepticus)</b></li></ul>

Eclampsia
<p>For patients <math>\geq</math> 20 weeks gestation or <math>\leq</math> 6 weeks post-partum consider <b>Eclampsia</b>: <b>should be considered if patient greater than 20 weeks gestational age or up to six weeks postpartum.</b> <b>History of pre-eclampsia is not required for development of eclampsia.</b> → <b>Administer</b></p>

## 2.13 ADULT SEIZURE

### EMSAM OCTOBER 2025

#### ALS Treatment

- **Magnesium Sulfate**
  - 6 grams in 100 ml D5W slowly over 5 minutes IV/IO
  - if no IV access, 10 grams IM administered as 5mg in each buttock
- If seizure patient last > 5 minutes after magnesium sulfate given, administer **Midazolam 10 mg IM/IN (5mg in each nostril) 10 mg IV/IO slow IV push.**

#### Comments Regarding Eclampsia

- ~~Seizure can be due to Eclampsia greater than 20 weeks gestational age or up to 6 weeks postpartum.~~
- ~~If actively seizing patient, give IM Magnesium do not delay administration for IV access.~~
- ~~Do not delay transport for treatment in cases of suspected eclampsia.~~
- ~~Maintain quiet, dim environment.~~

#### Base Hospital Contact Criteria

-