

PEDIATRIC SEIZURES

- A. Perform **Initial Treatment / Universal Patient Care Protocol** and follow the proper protocol for medical management based on clinical presentation.
- B. Protect patient from injury and place on left side.
- C. Obtain history to help determine origin of seizure:
 1. Refer to appropriate protocol
 2. History of seizures in the past and is patient taking anti-seizure medications.
- D. If child is actively seizing:
 1. Protect airway, **DO NOT** attempt intubation during convulsion.
 2. Calm caregiver's fears.
 3. Obtain key information and prepare for transport.
 4. If patient has been given prescription for **Diastat** and is still seizing, administer **Diastat** per rectum at prescribed dose and contact **Medical Command**.
5. Quickly assess serum glucose and attempt to establish IV normal saline KVO or saline lock.
6. If glucose level is < 60 mg/dl or cannot be determined:
 - a. **Patient 1 month of age or younger** – If blood glucose is < 60 mg/dl, administer 5.0–10.0 ml/kg **Dextrose 10%** IV/IO (**D10** is prepared by mixing 40 ml of NS with 10 ml of D50W).
 - b. **Patient older than 1 month but younger than 2 years old** – If blood glucose is < 60 mg/dl, administer 2 - 4 ml/kg of **D25** IV/IO; (**D25** is prepared by mixing 25 ml NS with 25 ml D50W).
 - c. **Patient 2 years of age or older** – If blood glucose is < 60 mg/dl, administer **D50W** 1–2 ml/kg IV/IO. Maximum dose is 25 grams



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- d. If no IV available, administer **Glucagon** as follows:
 - i. Patient < 20 kg, administer 0.5 mg IM.
 - ii. Patient > 20 kg, administer 1mg IM.

- 7. Expedite transport and contact **Medical Command**.

- 8. If seizure lasts longer than five (5) minutes **or** two (2) or more episodes of seizure activity occur between which the patient does not regain consciousness:
 - a. Administer **Midazolam (Versed®)** IV/IO/IM 0.1 mg/kg **per MCP order**.
 - b. If no IV access is available, administer **Midazolam (Versed®)** 0.2 mg/kg intranasal (IN) via atomizer **per MCP order**.
- 9. If seizure continues, further treatment as **ordered by Medical Command**.



- E. If child is **Not** actively seizing:

- 1. Monitor vital signs closely and be alert for recurrence of seizure.
- 2. Transport.
- 3. Perform remaining assessment, as indicated.
- 4. Notify **Medical Command**.

Note: If child is administered their personal prescription of *Diastat* by EMS, the child must be transported to the hospital for further evaluation.