Pediatric Seizure – Post

For any seizure that stopped prior to EMS arrival and there is no further seizure activity during EMS contact.

### History
- Reported or witnessed seizure
- Previous seizure history
- Medical alert tag
- Seizure medications
- History of trauma
- History of diabetes
- History of pregnancy
- Time of seizure onset
- Document number of seizures
- Alcohol use, abuse, or abrupt cessation
- Fever

### Signs and Symptoms
- Altered mental status
- Sleepiness
- Incontinence
- Evidence of trauma
- Unconscious
- Incontinence
- Bitten tongue/oral trauma

### Differential
- Fever
- Metabolic, hepatic or renal failure
- Tumor
- Hypoxia
- Electrolyte abnormality
- Drugs or medication non-compliance
- Overdose/toxic ingestion/exposure
- Infection/meningitis
- Stroke
- Head/occult trauma

### Treatment Protocol – P27

San Mateo County Emergency Medical Services

#### Effective April 2022

#### Treatment Protocol

For any seizure that stopped prior to EMS arrival and there is no further seizure activity during EMS contact.

- **E** Loosen any constrictive clothing and protect airway
  - Blood glucose analysis
  - Temperature measurement
  - SMR procedure if indicated
  - Consider, IV
  - Cardiac monitor

- **P** If patient begins seizing in the presence of EMS and treatment is indicated
  - Notify receiving facility. Consider Base Hospital for medical direction

### Pearls
- Status Epilepticus is defined as two or more successive seizures without a period of consciousness or recovery, or one prolonged seizure lasting longer than 5 minutes. This is a true emergency requiring rapid airway control, treatment, and transport.
- Assess the possibility of occult trauma and substance abuse.
- Be prepared for airway problems and continued seizures.
- Be prepared to assist ventilations or manage the airway, especially if Midazolam is used.