

PEORIA AREA EMS SYSTEM
PREHOSPITAL CARE MANUAL

**Status Epilepticus /
Seizure Protocol**

A seizure is a temporary, abnormal electrical activity of the brain that results in loss of consciousness, loss of organized muscle tone and presence of convulsions. The patient will usually regain consciousness within 1 to 3 minutes followed by a period of confusion and fatigue (*post-ictal state*).

Multiple seizures in a brief time span or seizures lasting more than 5 minutes may constitute status epilepticus and require EMS intervention to stop the seizure. Causes of seizures include: epilepsy, stroke, head trauma, hypoglycemia, hypoxia, infection, a rapid change in core body temperature (*e.g.* febrile seizure), eclampsia, alcohol withdraw and overdose.

First Responder Care

First Responder Care should be focused on assessing the situation and initiating routine patient care to assure that the patient has a patent airway, is breathing and has a perfusing pulse as well as beginning treatment for shock.

1. Render initial care in accordance with the *Routine Patient Care Protocol*.
2. **Oxygen:** 15 L/min via non-rebreather mask or 6 L/min via nasal cannula if the patient cannot tolerate a mask.

BLS Care

BLS Care should be directed at conducting a thorough patient assessment, initiating routine patient care to assure that the patient has a patent airway, is breathing and has a perfusing pulse as well as beginning treatment for shock and preparing the patient for or providing transport.

1. Render initial care in accordance with the *Routine Patient Care Protocol*.
2. **Oxygen:** 15 L/min via non-rebreather mask or 6 L/min via nasal cannula if the patient does not tolerate a mask. Be prepared to support the patient's respirations with BVM if necessary and have suction readily available.
3. Perform **blood glucose level test**.
4. **Glucagon:** 1mg IM if blood sugar is < 60mg/dL, the patient is unresponsive and/or has questionable airway control or absent gag reflex.
5. Initiate ALS intercept and **transport without delay**.

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ILS Care

ILS Care should be directed at continuing or establishing care, conducting a thorough patient assessment, stabilizing the patient's perfusion and preparing for or providing patient transport.

1. Render initial care in accordance with the *Routine Patient Care Protocol*.
2. **Oxygen**: 15 L/min via non-rebreather mask or 6 L/min via nasal cannula if the patient does not tolerate a mask. Be prepared to support the patient's respirations with BVM if necessary and have suction readily available.
3. Perform **blood glucose level test**.
4. **Dextrose 50%**: 25g IV if blood sugar is < 60mg/dL.
5. **Glucagon**: 1mg IM if blood sugar is < 60mg/dL and unable to establish an IV.
6. Perform a 2nd **blood glucose level test** to re-evaluate blood sugar 5 minutes after administration of Dextrose or Glucagon. Repeat Dextrose if BS is < 60mg/dL.
7. **Narcan**: 2mg IV or IM if no response to Dextrose or Glucagon within 2 minutes and narcotic overdose is suspected. May repeat 2mg IV or IM if no response in **5 minutes (with Medical Control order)**.
8. **Valium**: 5mg IV (**with Medical Control order only**) for seizure activity. May repeat 5mg every **2 minutes (with Medical Control order)** to stop seizure activity if indicated.
9. Initiate ALS intercept if needed and transport as soon as possible.
10. **Contact Medical Control** as soon as possible.

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ALS Care

ALS Care should be directed at continuing or establishing care, conducting a thorough patient assessment, stabilizing the patient's perfusion and preparing for or providing patient transport.

1. Render initial care in accordance with the *Routine Patient Care Protocol*.
2. **Oxygen**: 15 L/min via non-rebreather mask or 6 L/min via nasal cannula if the patient does not tolerate a mask. Be prepared to support the patient's respirations with BVM (and intubate) if necessary and have suction readily available.
3. Perform **blood glucose level test**.
4. **Dextrose 50%**: 25g IV if blood sugar is < 60mg/dL.
5. **Glucagon**: 1mg IM if blood sugar is < 60mg/dL and unable to establish an IV.
6. Perform a 2nd **blood glucose level test** to re-evaluate blood sugar 5 minutes after administration of Dextrose or Glucagon. Repeat Dextrose if BS is < 60mg/dL.
7. **Narcan**: 2mg IV, IM or SQ if no response to Dextrose within 2 minutes and narcotic overdose is suspected. May repeat 2mg IV, IM or SQ if no response in **5 minutes**.
8. **Midazolam (Versed)**: 2mg IV over 1 minute for seizure activity. May repeat Midazolam (Versed) 2mg IV every **5 minutes** as needed to a total of 10mg.
OR
Midazolam (Versed): 5mg IM if the patient is seizing and attempts at IV access have been unsuccessful. May repeat dose one time in **15 minutes** if the patient is still seizing.
9. Transport as soon as possible.
10. Contact the receiving hospital as soon as possible.