NORTH COAST EMERGENCY SERVICES

POLICIES AND PROCEDURES

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Subject: Seizures Treatment Policy

I. Definition

A. Active seizure (may include tonic or clonic activity or focal seizure with altered level of consciousness) upon presentation.

II. Basic Life Support

- A. Provide General Medical Care.
- B. Protect from injury.
- C. For suspected febrile etiology, provide passive cooling measures.
- D. Check blood glucose: (EMT and Paramedic ONLY)
 - 1. If hypo/hyperglycemia etiology is suspected, refer to *treatment guideline Draft Hypo/Hyperglycemia*.

III. Advanced Life Support			
Adult	Pediatric (less than 14 years of age)		
 A. Administer Midazolam. 1. IV: 1-2.5mg slow IV (over 2-3minutes) May be repeated if needed, in small increments. 2. IM: 5 mg 3. IN 5mg – 10 mg (maximum 1cc each nostril) 	 A. Administer Midazolam 1. IV: 0.5mg/kg not to exceed 5mg per dose or 10mg total. 2. IM 0.1mg/kg not to exceed 10mg total. 3. IN: 0.1mg/kg with maximum volume of 0.5cc each nostril. 		

IV. Special Considerations

- A. Patients greater than 65 years of age treated with Midazolam should be monitored for hypotension.
- B. If eclampsia etiology suspected do not delay transport and refer to *treatment guideline Draft Severe Pre- eclampsia/eclampsia*.

V. Base Orders

A. None

VI. Contraindications

A. None.

VII. Associated Policies

A.	General Medical Care	Policy No. Draft
B.	Hypo/Hyperglycemia	Policy No. Draft
C.	Pre-eclampsia/eclampsia	Policy No. Draft