

LABBB SEIZURE PROTOCOL

School Year: _____

Name: _____

DOB: _____

School: _____

Student Seizure Triggers:

Student Seizures Usually Look Like:

If _____ has a seizure:

- If available, ask another staff member to notify nurse
- Stay calm and track time with watch.
- Keep the student safe by moving furniture or equipment away from the student
- Do not restrain
- Turn him or her gently onto one side. This will help keep the airway clear.
- Place a cushion or folding cloth beneath the head for protection.
- Do not put anything in the mouth
- Stay with the student until fully conscious.
- Write down any observations in seizure log.

If seizure lasts _____ minutes or longer, nurse is to administer Diastat _____ per MD order, call 911
(time) (dose)
and notify parents. A staff person should accompany student to the hospital if possible.

Diastat is located: _____

CALL 911 FOR:

- A seizure lasting longer than _____ minutes (LABBB policy states 911 will be called after 5 minutes)
- Any signs of respiratory distress (Stops breathing or turns dusky/blue)
- If emergency seizure medication is administered
- Other: _____

After the seizure:

- Check the student for injuries and allow student to rest
- Notify school nurse, if not already
- Remain nearby until the student appears aware and alert
- Inform parents of seizure activity

Additional Instructions Including Safety Devices Worn AND/OR Vagal Nerve Stimulator Instructions:

OFF CAMPUS ACTIVITIES

- If seizure occurs off campus on a field trip or worksite, and a nurse is not present, 911 will be called.
- Diastat CANNOT be administered by non-nursing staff.

SWIMMING

All students with a history of seizures are required to have:

- 1:1 Continual observation by a LABBB staff member in the pool with the student
- Flotation Device

SEIZURES AS MEDICAL EMERGENCIES:

A seizure seldom requires an ambulance or emergency treatment. A seizure is generally considered an emergency when:

- Convulsive (tonic-clonic) seizure lasts longer than 5 minutes
- Student has repeated seizures without regaining consciousness
- Student is injured
- Student is pregnant or known diabetic
- Student has a first-time seizure
- Student has breathing difficulties
- Student has a seizure in the water

CONTACT INFORMATION

Parent/Guardian 1: _____
Home: _____ Work: _____
Cell: _____

Parent/Guardian 2: _____
Home: _____ Work: _____
Cell: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Primary Care MD: _____
Primary Care MD Number: _____

Neurologist Name: _____
Neurologist Number: _____

Physician Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date _____

Student Signature (if over 18): _____

Date _____

Nurse Signature: _____

Date _____