

**Epilepsy Care Plan & Emergency Medicine Protocol**

**To be completed by GP/Consultant and returned to NCAD.**

1. **Contact Information**

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| **Student Name:** |  |
| **Date of Birth:** |  |
| **Student CAO No:** |  |
| **Email contact:** |  |
| **Phone:** |  |
| **Term Address:** |  |
| **Home Address:** |  |
| **Date of Protocol:** |  |

1. **Epilepsy Information**

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| **What type of Epilepsy do you have?** |
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| **How is your epilepsy being treated?** (please provide medication details) |
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| **What happens to you in a seizure?** |
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| **How can we help? (Provide a locker, contact a family member, offer refreshments, leave the room / stay with you?** |
|  |
| **How long does your seizure normally last?** |
|  |
| **How long do you take to recover from a seizure?** |
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| **What to do if your seizure lasts longer than \_\_\_\_\_** (Use this section to give instructions to others on what they should do if your seizure lasts longer than usual): |
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1. **Emergency Medicine:** *(please complete if applicable)*

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| **When should Midazolam be administered?** (before giving – always check when Midazolam was last administered) |
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| **How much should be given initially?** |
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| **Can a second dose of Midazolam be administered, and if so after how long?** |
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| **When should further action be taken?** |
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Do not administer more than \_\_\_\_\_\_ of Midazolam in \_\_\_\_\_\_\_\_\_\_\_ hours.

This protocol is agreed by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

(*signature of prescribing GP or consultant*)

**Practice Stamp:**

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|  |

1. **Emergency Contact Details:**

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| **Parent / Guardian:** |
| **General Practitioner:** |
| **Epilepsy Specialist:** |

1. **General Guidelines When Responding to a Seizure**

**During a Seizure Do Not:**

* Put anything in the mouth
* Restrain or restrict movement during the seizure
* Give anything to eat or drink
* Move the person unless they are in danger

**During a Seizure Do:**

* Note the time
* Clear a space around the person
* Cushion the head to prevent head and facial injury
* Remove spectacles, if worn
* Loosen tight neckwear
* Loosen chest and leg safety straps on wheelchairs
* Turn on side if possible, to aid drainage
* Reassure others and explain what you are doing

**At the end of a Seizure:**

* Reassure the person and tell them what has happened
* Check for signs of injury and apply first aid if necessary
* Observe the person and stay with them until recovery is complete (they may need assistance to return to their routine)
* Provide privacy and offer assistance if there has been incontinence
* Record appropriately

**Call an Ambulance:**

* If it is the person’s first seizure
* If a seizure lasts more than 5 minutes and you do not know the usual length of the person’s seizure
* If a seizure lasts 2 minutes more than is usual, and rescue medication isn’t prescribed
* If a tonic clonic seizure follows another without full recovery in between, and rescue medication has not been prescribed or been effective
* If concussion/head injury is suspected
* If you are concerned about the person’s colour/breathing
* If water is inhaled
* When directed by organisational policy

