

SECTION: M-05

PROTOCOL TITLE: Adult Seizure Activity

REVISED: 01May2018

BLS SPECIFIC CARE: See Adult General Medical Care Protocol M-01

- Administer oxygen (high flow in the presence of neurological deficits or altered mental status)
- Place patient in recovery position; prevent accidental harm
- Anticipate brief combativeness or agitation during the post ictal phase
- Screen for probable causes
- Ensure the environment is safe for the patient
- If patient is female, determine if she is pregnant or has recently delivered
- Assess blood glucose

AEMT/ O.M. SPECIFIC CARE: See Adult General Medical Care Protocol M-01

ALS SPECIFIC CARE: See Adult General Medical Care Protocol M-01

Anticonvulsant Therapies (for the actively seizing patient):

- Diazepam (Valium)
 - **IV/IO:** 2-10 mg, repeat every 5-10 minutes PRN, max total dose 20 mg
 - **PR/IM:** 5-10 mg, repeat every 5-10 minutes PRN, max total dose 20 mg
- Midazolam (Versed)
 - **IV:** 0.5-2.5 mg, repeat PRN, max total dose 5 mg
 - **IN:** 5 mg (2.5 mg each nare), max total dose 5 mg
 - **IM:** 5 mg (If no vascular access)
- Lorazepam (Ativan)
 - **IV/IO:** 1-2 mg, may repeat at 10 min, max total dose 4 mg
 - **IM:** 1-2 mg (If no vascular access)

Additional Therapies:

- Dextrose (if hypoglycemia is present)
 - **IV/IO:** 25 g administered slowly through the distal port of a free flowing IV line
- Glucagon (If hypoglycemia present and unable to obtain IV access)
 - **IM:** 1 mg (U)

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PHYSICIAN PEARLS:

IM Versed is absorbed quicker than IM Valium. Consider using Versed when there is no vascular access.

Complete a detailed neurological assessment as patient condition allows.

If unable to control seizures after max dose of any single benzodiazepine, call medical control to continue with another benzodiazepine.