

SEIZURES

ALS

ALWAYS USE STANDARD PRECAUTIONS

INDICATION

- Recurring or continuous generalized seizures with ALOC

TREATMENT

- ALS RMC
- Treat hypoglycemia according to ALOC policy
- **Narcan** 2 mg IV/ IM/ SL/ IN if opiate overdose is suspected and the patient is in respiratory failure or shock
- **Midazolam (Versed)**
 - IV/IO: 1 mg slowly; MR q 3 minutes until seizure stops or maximum dose 0.05 mg/kg.
 - IN: 5 mg (2.5 mg in each nostril)
 - IM: 0.1 mg/kg; MR x 1 in 10 minutes if still seizing.

SPECIAL CONSIDERATION

- Consider treatable etiologies (hypoglycemia, hypoxia, narcotic overdose, unusual odor of alcohol, signs of trauma, medic alert tag) prior to administering anti-seizure medications.
- Expect and manage excessive oral secretions, vomiting, and inadequate tidal volume.
- Treatment should be based on the severity and length of the seizure activity.
- Focal seizures without mental status changes may not require pre-hospital pharmacological intervention.
- Never administer **Midazolam (Versed)** rapid IVP/IO since cardiac and/or respiratory arrest may occur.

DOCUMENTATION- ESSENTIAL ELEMENTS

- Blood glucose level
- Number, description, duration of seizures
- Dosage of medications, times administered
- Narcan administration by first responder, if known

RELATED POLICIES/ PROCEDURES

- Intranasal Medications Midazolam (Versed) & Narcan ALS PR 7
- ALOC N1