

Protocol 700-N2

Seizure

Rev: 2/18

### BLS Treatment

- ❖ Treat life threats. (See Procedure 701 *Life Threats*)
- ❖ Protect patient from injury. Spinal precautions as indicated
- ❖ Check for Hypoglycemia
  - Perform Blood Glucose check
    - if less than 60 mg/dl treat as needed.
      - If conscious and patient can swallow on command, administer glucose paste or let patient self-administer glucose product.
      - If unconscious, place a dime size amount of glucose paste under the tongue.
- ❖ Prepare for transport / transfer of care.

### ALS Treatment

- ❖ Treat life threats. (See Procedure 701 *Life Threats*).
- ❖ Do BG Chem and if less than 70 mg/dl treat as needed. (see Protocol 700-N1 *Altered Mental Status*)
- ❖ For Status Epilepticus
  - administer **Midazolam**, 5mg IM
    - Repeat with 2.5 mg IV or IN if continued seizures
- ❖ Transport.
- ❖ Contact Base Station if additional doses of **Midazolam** are needed.

### Special Considerations

- ❖ After max dose, contact Base Station for additional doses. In higher doses **Midazolam** may cause respiratory depression.
- ❖ Status epilepticus is defined as either continuous full body seizures lasting at least 10 minutes or two or more discrete seizures between which there is an incomplete recovery of consciousness.
- ❖ Consider meningitis especially in patients with no seizure history who present with headache, high fever and nuchal rigidity.
- ❖ Continuous Capnography, EKG, pulse oximetry, and blood pressure monitoring are mandatory during and after administration of **Midazolam**.



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