# Managing STUDENTS with SEZURES

**Module II** 

Seizure First Aid, Action Plans, and Delegation Issues







## Learning Objectives: Module II

- Provide appropriate first aid for a student during and after a seizure
- Identify when a seizure is an emergency and know the appropriate response



## Learning Objectives: Module II

- Describe the steps in the seizure action planning process
- Identify the essential components of a Seizure Action Plan
- Know key issues related to the delegation of medication administration



#### **Routine First Aid: Care and Comfort**

- Most seizures are not medical emergencies
- Basic first aid may vary depending on whether there is:
  - No change in awareness or consciousness
  - Altered awareness
  - Loss of consciousness
- Don't give anything by mouth until the student is back to normal state and able to swallow normally



#### Interventions for Seizure First Aid

- May be used at any time during a seizure (VNS magnet)
- May be prescribed after a specific number of seizures, length of seizure, or change in pattern (Rescue med)



# No change in Consciousness

(Simple Partial Seizure)

- Stay calm
- Time seizure



- Explain to others if necessary
- Protect student's privacy





#### **Altered Awareness**

(Complex Partial Seizure)

- Speak softly and calmly
- Guide away from potentially harmful objects such as tables, chairs and doors
- Allow for wandering in a contained area
- If lasts 5 minutes beyond what is routine for that student or another seizure begins before full awareness is regained, follow emergency protocol
- DO NOT restrain or grab (may result in combativeness)
- DO NOT shout or expect verbal instructions to be obeyed



#### **Loss of Consciousness**

(Generalized Tonic-Clonic Seizure)

- Protect from potentially harmful
   objects
   DO NOT put anything
- Observe and time events
- Ensure airway is unobstructed DO NOT restrain

in mouth

- Cushion and protect head
- Turn student on one side
- Remain with student until fully conscious
- Follow the student's Seizure
   Action Plan



# When is a Seizure an Emergency?

- First time seizure
- Convulsive seizure lasting more than 5 minutes
- Repeated seizures without regaining consciousness
- More seizures than usual or change in type
- Student has diabetes or is pregnant
- Seizure occurs in water
- Student is injured
- Parents request emergency evaluation

Follow the seizure emergency definition and protocol as defined by healthcare provider and included in the Seizure Action Plan



#### **Use of PRN Rescue Medications**

- Prescribed for seizure clusters and prolonged seizures
- Emergency protocol should include:
  - Medication name
  - How and when it should be given
  - Specific administration instructions
  - What to do following administration
- Monitor responses and side effects
- Follow Seizure Action Plan emergency response protocol



#### **Tonic-Clonic Seizure in a Wheelchair**

- Do not remove from wheelchair unless necessary
- Secure wheelchair to prevent movement
- Fasten seatbelt (loosely) to prevent student from falling but remove harness belt to prevent choking
- Protect and support head
- Ensure breathing is unobstructed and allow secretions to flow from mouth
- Pad wheelchair to prevent injuries to limbs
- Follow relevant seizure first aid protocol



#### **Tonic-Clonic Seizure on a School Bus**

- Safely pull over and stop bus
- Place the student on one side across seat facing away from the seat back (or in the aisle if necessary)
- Follow standard seizure first aid protocol until the seizure abates and child regains consciousness
- Continue to the destination or follow school policy



#### **Tonic-Clonic Seizure in Water**

- Place the student on their back and support head so that their head, mouth and nose are always above the water
- Remove the student from the water as soon as it can be done safely
- If the student is not breathing, begin rescue breathing
- Always transport the child to the emergency room even if he/she appears fully recovered

# Managing STUDENTS with SEIZURES

# **Seizure Action Plans**







# **Seizure Action Planning**

- Assess student needs and gather information
- Customize a Seizure Action Plan

Teach school personnel and tailor interventions as needed



#### MY SEIZURE PLAN

Epilepsy Foundation Eastern PA 919 Walnut Street, Suite 700 Philadelphia, PA 19107

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#### **MY SEIZURE PLAN**

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					1																		
Name:			Birth Date:			SEIZURE FIRST AID																	
Address: Phone:					☐ Keep calm, provide	☐ Keep calm, provide reassurance, remove bystanders																	
Relation:					<ul> <li>□ Keep airway clear, turn on side if possible, nothing in mouth</li> <li>□ Keep safe, remove objects, do not restrain</li> <li>□ Time, observe, record what happens</li> <li>□ Stay with person until recovered from seizure</li> </ul>																		
												Phone(s):			Email:			☐ Other care needed:					
												SEIZURE INFORMATION						WHEN SEIZURES REC	UIRE ADDITIO	ONAL HELP			
												Seizure Type/Nickname				How Long It Lasts How Often		Type of Emergency (long, clusters or repeated events)			Description		What to Do
						"A C NEEDED" TO AT	MENTS (VAIS		liain an)														
					_	"AS NEEDED" TREAT	<del></del>																
						Name	Amoun	t to Give	When to Give		How to Give												
RIGGERS																							
DAILY SEIZURE MEDICIN	NE					CALL 911 OR SEEK B  ☐ Generalized seizure			TENTION IF														
Medicine Name	Total Daily Amount	Amount of Tab/Liquid	How Taken (time of ea	ach dose	and how much)	☐ Two or more seizur			en seizures														
	Amount	Tabreiquia				☐ "As needed" treatm	ents don't work	k															
						☐ Injury occurs or is s																	
						□ Breathing, heart rat																	
						☐ Unexplained fever of			ter a seizure														
						☐ Other care needed:																	
						HEALTH CARE CONT	ACTS																
		+ +				Epilepsy Doctor:																	
						Nurse/Other Health Ca			Phone:														
						Preferred Hospital:			Phone:														
OTHER SEIZURE TREAT	MENTS					PCP or Other Doctor:_																	
		0.	erial#: Da	to Imples	tod:	Pharmacy:			Phone:														
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						-																	
Other Therapy:						My signature		Prov	vider signature		Date												
- mail a satisfied I -					)																		



# **Questions for Parents of a Student**with Seizures

- Encourage parent(s) to complete action plan and may take persistence
- May be helpful to interview the parent(s) to obtain and clarify information
- Update annually and when any changes occur



#### Seizure Observation Record

- To be completed by school personnel when reporting a seizure(s)
- Helps to identify seizure types, duration, triggers, and patterns

 Helpful to use for planning appropriate seizure plans, safety precautions, and need for accommodations or changes



### **Example**

Copies of the Seizure
Observation Record and
Seizure Action Plan are
available on the EFEPA
website:

http://www.efepa.org/programs
-and-resources/schoolinformation/



#### Seizure Observation Record

Student Name:							
Date & Time							
Seizure Ler							
	e Observation (Briefly list behaviors,						
	e Observation (Briefly list benaviors, events, activities)						
	(yes/no/altered)						
injuries (bri	efly describe)						
,	Rigid/clenching						
3ody	Limp						
Muscle Tone/Body Movements	Fell down						
	Rocking						
	Wandering around						
	Whole body jerking						
	(R) arm jerking						
Extremity Movements	(L) arm jerking						
	(R) leg jerking						
	(L) leg jerking						
	Random Movement						
L.	Bluish						
Color	Pale						
	Flushed						
	Pupils dilated						
,	Turned (R or L)						
Eyes	Rolled up						
	Staring or blinking (clarify)						
	Closed						
£	Salivating						
Mouth	Chewing						
	Lip smacking						
Verbal Sounds (gagging, talking, throat clearing, etc.)							
Breathing (normal, labored, stopped, noisy, etc.)							
Incontinent (urine or feces)							
	Confused						
9 c	Sleepy/tired						
Post-Seizure Observation	Headache						
	Speech slurring						
4 Q	Other						
Length to C	Prientation						
Parents No	tified? (time of call)						
EMS Called	d? (call time & arrival time)						
Observer's							

Please put additional notes on back as necessary.



## **Seizure Action Planning Process**

- Requires input and planning by the health care provider(s), parent(s), student, and school nurse.
- Provides basic information about student's seizures, seizure first aid, safety, and emergency response



# **Seizure Action Planning Process**

 Should generally be signed and approved by the treating health care provider, parent, and school nurse

 Distribute to relevant school personnel with parent(s) permission at the beginning of a school year, upon diagnosis or when a change in health status occurs



### **Assessment & Information Gathering**

- Gather seizure history and treatment information
- Speak with the student's medical team to clarify treatment and emergency response protocol
- Observe and document any in-school seizures
- Speak with teachers and other school personnel about:
  - Possible seizure precipitants (triggers)
  - Observed or perceived impact on learning and behavior



### Assessment & Information Gathering cont'd

- Consider transportation issues
- Complete a school safety assessment
  - Identify student activities that may need to be modified or necessitate special precautions
  - Identify environmental risks and need for safety precautions
- Determine best method to communicate with parents and medical team



# **Communication Tips**

- Set up a method for communicating with parents/guardians on a daily or weekly basis
- Be a liaison for parents and teachers regarding any status changes
- Have teachers regularly note physical, emotional or cognitive changes
- Create a "substitute teacher" folder with the Seizure Action Plan and other relevant information and keep this folder in a secure location



### Delegation Issues: Laws and Mandates

- Applicable Federal laws or mandates that may impact delegation include:
  - Section 504 of the Rehabilitation Act of 1973
  - Americans with Disabilities Act (ADA)
  - Individuals with Disabilities in Education Act (IDEA)
- Local and state laws, such as nurse practice acts and school district policies, generally govern the administration of medications in schools
- What are the state or school regulations in your area for delegation of medication administration?

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### **Tips for Effectively Managing Delegation**

- Know state nurse practice act, school district policies, and applicable state and federal mandates and laws
- Recognize that identifying when a change in behavior or seizure occurs does not require a skilled nursing assessment and is part of basic seizure first aid
- Bring parents and school personnel together to attempt to find a workable solution
- Explain to all parties that you are obligated to put the health, safety and welfare of the student first



# More Tips for Effectively Managing Delegation

When a school nurse delegates a task under his/her nursing license the nurse is responsible for the following:

- Ensuring that the delegate is appropriate
- Providing training and ongoing assessment and documentation of the competence of a delegate
- Ongoing assessment of the student's health outcome



# The Challenge of Delegation

Using Diazepam rectal gel and other seizure rescue treatments may be handled in different ways depending on school district policy, school policy and parent preference.

- How is it handled in your school?
- What challenges have you come across?
- How have you dealt with these and similar issues in your school?



# Exercise: Review a "Seizure Action Plan"

- Review and discuss how you might complete and use the following sections of the Seizure Action Plan:
  - Seizure Information
  - Basic First Aid
  - Emergency Response
  - Special Considerations and Precautions

Use case study for discussion and practice

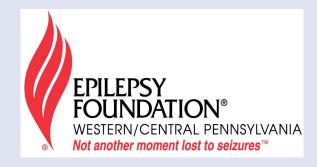


### Pennsylvania Epilepsy Affiliates





Epilepsy Foundation Eastern PA 919 Walnut Street, Suite 700 Philadelphia PA 19107 www.efepa.org 215-629-5003



# Andrea Zonneveld Community Educator & Events Coordinator

Epilepsy Foundation Western/Central PA 1501 Reedsdale Street, Suite 3002 Pittsburgh, PA 15233 www.efwp.org 412-322-5880

Contact us for more information regarding the information in this program and access to seizure action plan & observation forms.



# Other Available School Programs



The EFEPA and EFWCP offer additional on-site training programs for School Personnel and Students on First Aid & Seizure Recognition. We also offer assistance in IEP/504 Planning. Check out our website or contact us to set up your school's next session today!

- Eastern PA: <a href="http://www.efepa.org/programs-and-resources/school-information/">http://www.efepa.org/programs-and-resources/school-information/</a>
- Western/Central PA: <a href="http://efwp.org/programs/ProgramsPSA.xml">http://efwp.org/programs/ProgramsPSA.xml</a>



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