Copy of this plan to be kept in the office with emergency medication AND in classroom, readily available for all staff



School: Emergency Plan-Seizures School Year – 2023-2024

Student:

Date:

Emergency contact: Provider:

Birthdate:

Grade/Teacher:

Student Specific Emergency/Diagnosis: Seizure Type: Frequency: Triggers:

If you see this	Do this
 Feeling that a seizure may be starting noted by (add student specific aura symptoms if any) Eyes Twitching Blank Stare Sudden stop in motion Seizure activity noted by (add student specific) All muscles stiffen Student loses consciousness and may fall Arms and legs begin to jerk rapidly 	 Stay calm Activate response team by (add who is on team and how they should be contacted about emergency) Bring eCare equipment and emergency medication to the location of the student and call eCare nurse Provide privacy, remove other students from the area Protect from injury Lay them on the ground if they are not already, move items away from them Cushion head Do not attempt to hold down or hold still Do not place anything in the

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	mouth
	6. Note time seizure starts and stops,
	type of movements
	7. Ecare nurse will assist in
	Administering emergency
	medication (add ER med and
	directions for administration)
	• Determining if 911 should be
	called (add if/when this should
	happen per parent or
	provider)
	• Assess and monitor student
	8. After seizure stops:
	• Keeping child safe by turning onto
	side, keeping airway open
	Monitor
1. If Unresponsive AND not breathing	2. Begin CPR
	3. Call 911
	4. Get an AED
	5. Call enurse
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