

# SAN FRANCISCO EMERGENCY MEDICAL SERVICES AGENCY

Effective: 09/01/11  
Supersedes: 01/01/11

Protocol: P-047

## PEDIATRIC SEIZURES

### SUBJECTIVE FINDINGS

- History and duration of fever, infection.
- Onset, duration, description of seizure, history of pre-existing seizures.
- Change in mental status, mental status baseline, onset and progression of altered state.
- Antecedent symptoms such as headache, trauma, medical problems, medications, allergies, or possible ingestion of substance or medications.

### OBJECTIVE FINDINGS

- Appearance and neurological assessment.
- Evidence of trauma.
- Febrile state.

BLS Treatment	ALS Treatment
<ul style="list-style-type: none"><li>• ABC's, oxygenation, ventilation, suction, prn.</li><li>• Oxygen by blow-by, mask, or high flow prn, assist ventilations with BVM prn.</li><li>• Institute cooling measures as indicated by history.</li><li>• Routine Medical Care.</li></ul>	<ul style="list-style-type: none"><li>• Cardiac monitor</li><li>• IV or IO access [see PRECAUTIONS AND COMMENTS]</li><li>• If rapid blood glucose test shows glucose &lt; 60 mg/dl for child; &lt; 40 mg/dl for newborn. [see PRECAUTIONS AND COMMENTS]</li><li>• If vascular access established:</li><li>• <b>Dextrose:</b><ul style="list-style-type: none"><li>*Neonates &lt; 1 month: <b>D10W</b>, 1-2 ml/kg IVP or IO</li><li>*Child 1 month to 2 years: <b>D25W</b>, 2 ml/kg IVP or IO</li><li>*Child &gt; 2 years: <b>D50W</b>, 1 ml/kg IVP or IO</li></ul></li><li>• If no IV or IO access:</li><li>• <b>Glucagon:</b> 0.1 mg/kg IM (max. dose 1 mg)</li><li>• For status epilepticus: <b>Midazolam:</b> Utilize SF EMS Agency approved pediatric dosage chart to determine correct weight-based dose. Maximum single dose is:<ul style="list-style-type: none"><li>• 2.5 mg IV (may be repeated once in 5"),</li><li>• 5 mg IM, or</li><li>• 5 mg IN.</li></ul></li></ul>
BASE HOSPITAL CONTACT CRITERIA	
<ul style="list-style-type: none"><li>• Status epilepticus continues after maximum dose of Midazolam administered; requests for greater than the maximum dose.</li></ul>	

### DOCUMENTATION:

- If BG < 60 mg/dl, glucose or glucagon given.
- For status epilepticus, **Diazepam** given.

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## PRECAUTIONS AND COMMENTS

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- Be prepared to support ventilations and oxygenation.
- Blood glucose:
  - Consider **Dextrose** for any child with an altered level of consciousness and blood glucose test of less than 80 mg/dl; and consider not treating a normal child with blood glucose above 60 mg/dl.
  - **D25W** is half strength **D50W**. Mix 1ml of **D50W** with each 1 ml of NS.
  - **D10W** is made by mixing 1 ml of **D50W** with 4 ml of NS.
- Be attentive for excessive oral secretions, vomiting, and inadequate tidal volume.
- Consider suspected child maltreatment and/or occult head trauma in patients with seizures. and utilize PEDIATRIC TRAUMA TREATMENT Protocol (P-049).
- If patient has Diastat rectal gel for home use this may be substituted for IN/IV/IO **Midazolam** solution. Administer Diastat rectal gel per rectum by inserting a syringe only (no needle) tip into rectum. Hold or tape buttocks for 5 minutes to prevent spillage of Diastat from rectum. Follow dosing directions per patient's prescription.
- If fluid challenge/replacement or drug administration is required, place IV of NS.