MOUNTAIN-VALLEY EMS AGENCY POLICIES AND PROCEDURES

POLICY: 555.32 TITLE: Seizure (Pediatric)

SIGNATURE ON FILE IN EMS OFFICE APPROVED: EFFECTIVE DATE 7/01/2011

> **Executive Director** SUPERSEDES: **REVISED:**

SIGNATURE ON FILE IN EMS OFFICE REVIEW DATE: 7/2016

1 of 1 **Medical Director** PAGE:

PEDIATRIC SEIZURES

I. AUTHORITY: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9

To serve as the treatment standard for EMTs and Paramedics within their scope of practice. II. **PURPOSE:**

III. PROTOCOL: Status Seizures means an actively seizing child who has been seizing for more than ten (10)

minutes or an actively seizing child with recurrent seizures, with no reawakening in between seizures.

STANDING ORDERS	
ASSESS	CAB
OXYGEN	Oxygen delivered as appropriate.
MONITOR	Treat rhythm as appropriate.
IV/IO ACCESS	TKO with microdrip tubing and volume control chamber.
ACCUCHECK	Test for glucose.
DEXTROSE	If blood glucose is less than 60mg/dl: D50W 1 ml/kg IV/IO for patient greater than 2 years of age or D25W 2 ml/kg IV/IO for patients less than 2 years of age. May repeat once. Give oral glucose to patients who are awake and have an intact gag reflex. Recheck blood glucose in 5 minutes.
GLUCAGON	0.05 mg/kg IM if blood glucose is less than 60mg/dl and no IV/IO access immediately available. May repeat once. Recheck blood glucose in 5 minutes.
STATUS SEIZURES	
MIDAZOLAM	0.1 mg/kg IV/IO (maximum dose: 5 mg) OR If unable to establish IV after one attempt, give 0.2 mg/kg IM (Maximum dose: 5 mg). May repeat once in 10 minutes if seizures continue.