Pediatric Seizures

Pre-Medical Control

MRF/EMT/SPECIALIST/PARAMEDIC

1. Follow **Pediatric Assessment and Treatment Protocol**.
2. **IF PATIENT IS ACTIVELY SEIZING:**
   A. Protect patient from injury.
   B. Do not force anything between teeth.

SPECIALIST/PARAMEDIC

C. Start an IV/IO NS KVO.
D. Measure blood glucose level.

PARAMEDIC

E. If blood glucose is found to be less than 60 mg/dl or hypoglycemia is suspected, administer Dextrose 2 ml/kg IV.
   1) Dextrose 12.5% for children under 1 yr.
   2) Dextrose 25% for children between 1 and 12 years old.
F. Per MCA selection, administer Diazepam or Midazolam.

(Choose One)

☑ Diazepam - 0.1 mg/kg IV/IO or 0.5 mg/kg rectally (maximum individual dose 10 mg)

OR

☐ Midazolam - 0.05 mg/kg IV/IO, 0.1 mg/kg IM (maximum individual dose 5 mg)

G. If seizures persist, per MCA selection, repeat Diazepam or Midazolam at the same dose or contact medical control for further instructions.

EMT/SPECIALIST/PARAMEDIC

3. **IF PATIENT IS NOT CURRENTLY SEIZING, BUT HAS ALTERED MENTAL STATUS**
   A. Measure blood glucose level.

EMT/SPECIALIST

B. If glucose is less than 60 mg/dl and awake, administer oral glucose or oral high caloric fluid if available.

PARAMEDIC

C. If glucose is less than 60 mg/dl, administer Dextrose 2 ml/kg IV.
   1) Dextrose 12.5% for children under 1 yr.
   2) Dextrose 25% for children between 1 and 12 years old.

SPECIALIST/PARAMEDIC

4. **IF PATIENT IS ALERT:**
   A. Obtain vascular access.

<u>Post-Medical Control</u>
PARAMEDIC
Actively seizing:

1. Additional **Dextrose** IVP
2. Additional Benzodiazepine

NOTE: To obtain Dextrose 12.5%, discard 37.5 ml out of one amp of D50, then draw 37.5 ml of NS into the D50 amp; administer as indicated above.

To obtain Dextrose 25%, discard 25 ml out of one amp of D50, then draw 25 ml of NS into the D50 amp; administer as indicated above.