CMG 22 - SEIZURES

(Revised: December 2020)



Active management of seizures of any type (as below) should be considered if ≥5 minutes of continuous seizure activity or multiple seizures without full recovery of consciousness (i.e. back to baseline) between seizures.

FOCAL

Seizure activity starts in one area of the brain (may retain awareness, or have altered awareness)

GENERALISED

Seizure activity involves both hemispheres of the brain (e.g. tonic clonic, absence, tonic, clonic, myoclonic, atonic)

UNKNOWN

(e.g. myoclonic atonic, myoclonic tonic, unclassified)

ICP	Protect the patient from injury	AP
ICP	Midazolam	AP
ICP	BGL early, especially if no history of seizures	AP
ICP	Treat any complications secondary to the seizure (e.g. hypoglycaemia, hypothermia, injury, etc.)	AP
ICP	Pregnant patient, no history of previous seizure activity – prompt treatment with magnesium sulphate as FIRST drug (i.e. prior to midazolam)	AP

Children with seizure and/or fever >38°C:		
ICP	Remove excessive clothing	AP
ICP	Midazolam (for actively, continuously seizing patient)	AP
ICP	Place cool cloths in axillae, groin, wrist and neck – change as required	AP
ICP	Do not allow child to shiver	AP
ICP	Paracetamol (if indicated)	AP