

# SEIZURE NURSING CARE PLAN AND EMERGENCY DOCUMENTATION FLOW

# LAKELAND UNION HIGH SCHOOL

## HEALTH SERVICES

**KATHY REIMER SCHOOL NURSE 715-356-5252 x 1550**

STUDENT NAME: DOB	DATE WRITTEN:
ATTENDING DOCTOR and PHONE:  _____	SEIZURE MEDICATION PRESCRIBED:

Seizure Type: GRAND MAL SEIZURE \_\_\_\_\_ PETIT MAL SEIZURE \_\_\_\_\_ OTHER \_\_\_\_\_ R/T \_\_\_\_\_

**PARENTS/GUARDIAN CONTACT PHONE NUMBERS – HOME:** \_\_\_\_\_ **CELL:** \_\_\_\_\_

**WORK:**

**OTHER EMERGENCY CONTACT:**

**\* Note: Time seizure began \_\_\_\_\_ Time seizure stopped \_\_\_\_\_ Today's date \_\_\_\_\_**

- 1. Child should never be left alone**

**\* Have someone call for nurse to come for assistance and assessment of student.**

- 2. Position student laying on her / his side to prevent choking on saliva or vomit**

- ### 3. Do not insert anything in child's mouth

- 4. Place soft object under student's head – flat blanket to protect head from injury**

- 5. Trained staff to administer prescribed medication as above. NOTE:**

Medication given and mg \_\_\_\_\_

Time given

Route \_\_\_\_\_

- 6. Observe and notate any:**

\* **Breathing problems or skin discoloration**\_\_\_\_\_

\* Any incontinence of urine \_\_\_\_\_ or stool \_\_\_\_\_

\* **Movement (jerking or continuous) of arms (right) (left)**  
**legs (right) (left)**

\* **Loss of Consciousness (LOC) (For how long)** \_\_\_\_\_

\* Incoherence without LOC (describe) \_\_\_\_\_ Length of Time \_\_\_\_\_

- 7. Comfort and reassure child after seizure. Allow to rest in nurses office.**

- ## 8. CALL 911 IF:

**\* Child has respiratory difficulty**

**\* Diastat is given as ordered but seizure activity does not stop**

**\* Student has multiple seizure episodes**

- 9. Call parents / guardian and notify them of seizure activity or need for 911 call \_\_\_\_\_**

**Signature of Person Completing Report:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FURTHER DOCUMENTATION SPACE IF NEEDED**

FORMER DOCUMENTATION SINCE IT NEEDS	

**USE REVERSE SIDE FOR FURTHER DOCUMENTATION**