

**LAWRENCE COUNTY SCHOOL SYSTEM  
SEIZURE IHP/SAFETY PLAN -PRESCRIPTION MEDICATION ORDERS**

*\*This portion is completed by the Physician/Healthcare Provider and when signed may serve as the medication authorization.*

Student Name: \_\_\_\_\_ DOB: \_\_\_\_\_

**DURING THE SEIZURE ACTIVITY:**

1. STAY WITH THE STUDENT AND NOTIFY THE SCHOOL NURSE and/or EMERGENCY TEAM.
2. Note time at onset of seizure, observe pattern of the seizure and document on the seizure log.
3. If generalized jerking occurs, assist the student to the floor (if the student is in a wheelchair, lock the wheels and allow the student to remain in the chair).
  - a. Gently support the head, roll the student to the side position and monitor breathing and pulse.
  - b. **DO NOT** restrain the student or place anything in the student's mouth.
  - c. Protect student by moving items away that may cause injury.
  - d. Loosen clothing at neck and waist; remove eyeglasses (if applicable).
4. Have another adult remove other students from the area. Use a watch: TIME the seizure.
5. **CALL 911 AND PARENT IF CHILD EXHIBITS:**
  - a. Absence of breathing and/or pulse. (Start CPR for absence of breathing and pulse.)
  - b. Seizure of 5 minutes or greater duration.
  - c. Two or more consecutive (without a period of consciousness between) seizures which total 5 minutes or greater.
  - d. Continued unusually pale or bluish skin/lips or noisy breathing after the seizure has stopped.
  - e. Emergency Anti-seizure Medication is ordered and given: \_\_\_\_\_.
  - f. If Emergency Anti-seizure Medication is ordered and no trained staff member or school nurse is available at the onset of the seizure, call 911.

**Emergency and Other Medication(s) to be Administered at School (Including VNS magnet, if applicable)**

Name & Purpose of Medication	Strength and Dose to be Given	When to Administer at School/Frequency	Possible Side Effects

**This child has the following chronic illnesses/disabilities:** \_\_\_\_\_

**AFTER SEIZURE ACTIVITY:**

1. Continue to monitor until the student is alert and oriented
2. Provide for personal hygiene and privacy, as appropriate. If the student is tired after a seizure, allow to rest in a supervised area, as needed.
3. A student recovering from a generalized seizure may manifest abnormal behavior, such as incoherent speech, extreme restlessness, and confusion. This may last from 5 minutes to several hours.
4. **Notify the parent/guardian if seizure is different from usual type, 911 is called or the child has not reoriented after 30-60 minutes.**

**Student's response to any previous administration of emergency anti-seizure medication:** \_\_\_\_\_

**Physician/Healthcare Provider Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Physician/Healthcare Provider Name (Print):** \_\_\_\_\_ **Phone:** \_\_\_\_\_

*Nurse Use Only:* DIAZEPAM (OTHER ANTI-SEIZURE MEDICATION \_\_\_\_\_) LOCATED \_\_\_\_\_.

Only parents, nurses or trained personnel can administer Diastat or other emergency anti-seizure medication. If given, call 911, document on Emergency Medication MAR. If no trained personnel are available, call 911.