

**Seizures (Adult)****CFR AND ALL PROVIDER LEVELS**

1. Protect the patient from injury.
2. ABCs.
3. Airway management:
  - a. Position the patient to maintain airway patency.
  - b. Do not attempt placement of OPA during convulsions.
  - c. Consider use of NPA during active seizures, if available.
4. Avoid unnecessary or excessive restraint.
5. Administer oxygen.
6. Treat all injuries as appropriate.

**● CFR STOP****EMT**

7. Measure blood glucose level.
  - a. If the glucose reading is below 60 mg/dL, refer to the Altered Mental Status (Adult and Pediatric) protocol.
8. Request ALS assistance for ongoing seizures at time of patient contact.
9. Transport.

**● EMT STOP****Paramedic**

*For patients experiencing generalized seizures that are ongoing or recurring.*

10. If the patient is actively seizing, administer **ONE** of the following:  
If intravascular access has already been established, utilize the intravascular route. If intravascular access is not established, utilize the most appropriate and quickest route of administration available (IM/IN), based on available resources.
  - a. Administer Midazolam 5 mg, IV/IM/IN.  
OR
  - b. Administer Lorazepam 2 mg IV/IM/IN.  
OR
  - c. Administer Diazepam 5 mg, IV. (Rate of administration may not exceed 5 mg/min.)
11. After 5 minutes for generalized seizures that are ongoing or recurring, a single repeat of the same medication, at the same dose, may be given.
12. Intravascular access.
13. Begin cardiac monitoring.
14. Perform Advanced Airway Management in patients with GCS < 8, AND if less invasive methods of airway management are not effective.

**● Paramedic STOP****Medical Control Options**

*If seizure activity persists:*

1. Administer any of the benzodiazepines listed above.

**Key Points / Considerations**

1. Do **NOT** force anything into the patient's mouth.
2. Avoid unnecessary or excessive restraint.

3. Status epilepticus (continuing seizure) is a critical medical emergency. Anticonvulsant medication should be administered as soon as possible, preferably starting no later than 5-10 minutes after the onset of the seizure.
4. Diabetic patients with a blood glucose level reading between 60 – 80 mg/dL may still be experiencing hypoglycemia.
  - a. In the presence of such signs and symptoms, treat accordingly.