Kittitas County Prehospital EMS Protocols

SUBJECT: GRAND MAL SEIZURES/STATUS EPILEPTICUS

- A. If stable, administer O_2 @ 4-6 lpm per nasal cannula.
- B. If unstable, administer O₂ @ 12-15 lpm per non-rebreather mask.
- C. Physical assessment and history.
- D. Patient may have option of not being transported if;
 - seizure terminates spontaneously
 - patient has history of previous seizures with ongoing medical management of those seizures
 - adult is present
 - the clinical situation dictates
- E. If witnessed continuous seizure activity with respiratory compromise, or repetitive seizures without return of consciousness:
 - 1. Establish peripheral IV access with Isotonic Crystalloid @ TKO.
 - 2. Administer one of the following:
 - a. Lorazepam, 1-4 mg, slow IV push, or IM. May repeat in 10-15 minutes.
 - b. **Midazolam** 2.5-5mg, IV, IM, buccal as secondary medication option for those unaffected by Lorazepam.
 - 3. Establish cardiac monitor.
 - 4. If medications prove inaffective to control seizure activity, consider RSI to protect airway and ensure adequate oxygenation.

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