

SECTION: PM-4

PROTOCOL TITLE: PEDIATRIC SEIZURES

REVISED: November 3, 2010

BLS SPECIFIC CARE: See General Pediatric Care Protocol PM-1

- Administer oxygen (high flow if neurological deficits or altered mental status)
- Place patient in recovery position. Prevent accidental harm
- Anticipate brief combativeness or agitation in postictal phase
- Screen for probable causes
- Position patient as appropriate.
 - Provide for patient's physical safety
- Determine patient's color category on length based resuscitation tape (Broselow Tape)

ILS SPECIFIC CARE: See General Pediatric Care Protocol PM-1

ALS SPECIFIC CARE: See General Pediatric Care Protocol PM-1

- Assess for causes of seizure and treat accordingly

Anticonvulsant Therapies

- Diazepam (Valium)
 - IV/IO: 0.2-0.3 mg/kg given slowly. Repeat every 5 minutes PRN
 - PR: 0.5 mg/kg
 - MAXIMUM DOSAGE: 10 mg
- Versed (Midazolam)
 - Intranasal (IN): 0.2-0.4 mg/kg repeat every 5 minutes PRN. If no IV access is available
 - IV: 0.05-0.2 mg/kg every 5 –10 minutes PRN
 - MAXIMUM DOSAGE: 5 mg

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PHYSICIAN PEARLS:

When giving Midazolam, **DO NOT USE THE IV DOSAGES LISTED ON THE BROSELOW TAPE** as they are higher doses indicated for induction/RSI situations

PED SEIZURES