

**SECTION: PM-04**

**PROTOCOL TITLE: PEDIATRIC SEIZURES**

**REVISED: 01MAY2018**

**BLS SPECIFIC CARE: See General Pediatric Care Protocol PM-01**

- Administer oxygen (high flow in the presence of neurological deficits or altered mental status)
- Place patient in recovery position; prevent accidental harm
- Anticipate brief combativeness or agitation during the post ictal phase
- Obtain BGL and temperature
- Determine patient's color category on length based resuscitation tape (ACCESS Pediatric Tape)

**AEMT/O.M. Specific Care: See General Pediatric Care Protocol PM-01**

**ALS SPECIFIC CARE: See General Pediatric Care Protocol PM-01**

**Anticonvulsant Therapies (for the actively seizing patient):**

- Diazepam (Valium)
  - **IV/IO:** 0.2 mg/kg administered slowly, repeat every 5 minutes PRN, max total dose 10 mg
  - **PR:** 0.5 mg/kg, max total dose 10 mg
- Midazolam (Versed)
  - **IN/IM:** 0.2 mg/kg, repeat every 5 minutes PRN, max total dose 10 mg
  - **IV/IO:** 0.1 mg/kg, repeat every 5 minutes PRN, max total dose 5 mg
- Lorazepam (Ativan)
  - **IV/IO/IM:** 0.1 mg/kg, repeat in 5-10 min PRN, max total dose of 2 mg

**PHYSICIAN PEARLS:**

Complete a detailed neurological assessment as patient condition allows.

Obtain a BGL and repeat every 10-15 minutes, as needed. If hypoglycemia is present, refer to PM-06.

If unable to control seizures after the max dose of any single benzodiazepine, contact medical control to continue with another benzodiazepine.

Protocol  
PM-04

PEDIATRIC SEIZURES

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