

SEIZURE ACTIVITY

Level II
(No Level I)

Skill Level: RN

Definition: Paroxysmal episodes in which there are sudden involuntary contractions of a group of skeletal muscles and disturbances in consciousness, behavior, sensation, and autonomic functioning.

<p>Subjective:</p> <ul style="list-style-type: none">• May describe a brief period of loss of consciousness with or without generalized motor activity.• Patient may describe an aura.• "I bit my tongue."• "I wet myself."• There may be information described by those witnessing the episode: duration, character, activity pre-episode, trauma sustained during episode, incontinent post-episode activity.	<p>Assessment:</p> <ul style="list-style-type: none">• Potential for ineffective airway clearance.• Potential for ineffective breathing pattern.• Sensory/perceptual alteration.• Potential for trauma related to seizure.
<p>Objective:</p> <ul style="list-style-type: none">• Patient has a history of a seizure disorder.• Not the first time patient has ever had an episode similar to this.• Document witnessed or un-witnessed episode.• Document any injuries present.• Patient may have been incontinent of urine or stool.• No persistent focal neurological findings.• May not be taking medication properly.• Patient may be drowsy after a seizure (postictal).• Sometimes odd behavior can occur before, during or after the episode.• Seizure may be partial (focal), non-convulsive, or generalized convulsive ("grand mal").	<p>Plan:</p> <p>At nursing discretion may use any of the below:</p> <ul style="list-style-type: none">• Document information obtained by witnesses.• Maintain airway.• Administer O2 4-8 L/min prn by nasal prongs during any seizure if possible.• Supportive measures such as cushioning the head to protect from injury during episode.• After episode, reorient patient to environment to minimize sensory-perceptual alteration.• Evaluate patient medication adherence.• Consider getting serum drug levels.• If suspect pseudo-seizure, consult practitioner, consider prolactin level.• Consider CMP, CBC, CBG.• Consider emergency protocol for poisoning/overdose.

Seizure Activity - Level II

	<ul style="list-style-type: none">• If generalized seizure is sustained (more than 5 minutes) or additional seizures without recovery from previous seizure, contact practitioner. Make arrangements for immediate transport to emergency facility.• If new onset or change in type of seizure activity, call practitioner for orders and schedule practitioner appointment. Consider transport to an emergency facility.• If break through seizure in a patient with known epilepsy, practitioner chart review unless orders or individualized treatment plan calls for a different course of action.
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Nursing Education:

Patients who have no history of a seizure disorder and have a witnessed grand mal seizure require a more thorough physical and laboratory evaluation. Call the provider or arrange transport to an emergency facility. Possible causes of new onset seizure include an extensive list including:

- Metabolic abnormality such as Diabetes or Thyroid Problems
- Head trauma and stroke
- Drug overdose or withdrawal (including prescription medications)
- Brain tumor

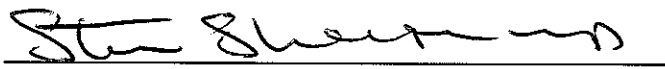
APPROVED:

Medical Services Manager


Date

Chief Medical Officer

Date



Medical Director



Date

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