

TREATMENT PROTOCOL: PEDIATRIC SEIZURE *



1. Basic airway
2. Spinal immobilization prn
3. Pulse oximetry
4. Oxygen prn
5. Assist respirations with bag-valve-mask prn using “squeeze-release-release” technique
6. Advanced airway prn:
ET tube placement approved for patients who are:
 12yrs of age or older **or** weight equal to or greater than 40kg;
King airway approved as a rescue airway for patients who are:
 12yrs of age or older **and** 4 feet tall
7. Cardiac monitor prn: document rhythm and attach ECG strip if dysrhythmia identified
8. Venous access prn
9. Perform blood glucose test (especially for non-febrile seizure)
If blood glucose is less than 60mg/dl:
 Consider oral glucose preparation, if patient is awake and alert
 Dextrose 10% 5mL/kg IV
 Patient's weight <24kg – administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/kg
 Patient's weight ≥24kg – administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/kg, OR rapidly infuse 120mL of 250mL IVPB, if no symptom improvement, administer remaining dose to a total maximum dose of 5mL/kg
If unable to obtain venous access:
 Glucagon
 Less than 1yr of age 0.5mg IM
 1yr of age or greater 1mg IM
10. Provide cooling measures prn (remove blankets, remove clothing)
11. If patient is still actively seizing (may include tonic and/or clonic activity or focal seizure with altered level of consciousness)
 Midazolam
 Up to 0.1mg/kg slow IV push, titrate to control seizure activity
 0.1mg/kg IM or IN if unable to obtain venous access
 May repeat one time in five minutes, maximum pediatric dose 5mg all routes
 Be prepared to assist ventilations with bag-valve-mask
12. If hypoventilation with suspected narcotic overdose
 Naloxone
 0.1mg/kg IV push, titrate to adequate respiratory rate and tidal volume
 0.1mg/kg IM or IN, if strong suspicion of narcotic overdose
13. **CONTINUE SFTP or BASE CONTACT**
14. If active seizure continues:
 Midazolam
 0.1mg/kg slow IV push, titrate to control seizure activity
 0.1mg/kg IM or IN if unable to obtain venous access
 Total maximum dose 5mg
15. If blood glucose remains less than 60mg/dl:
 Dextrose 10% 5mL/kg IV push
 Patient's weight <24kg – administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of

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5mL/kg

Patient's weight $\geq 24\text{kg}$ – administer in 1mL/kg increments every 2min until symptom improvement or a total maximum dose of 5mL/kg, OR rapidly infuse 120mL of 250mL IVPB, if no symptom improvement, administer remaining dose to a total maximum dose of 5mL/kg

16. If unable to obtain venous access

Glucagon

Less than 1yr of age 0.5mg IM

1yr of age or greater 1mg IM