STANDARD EMERGENCY PLAN — EPILEPSY — SCHOOL

AT ALL TIMES :

Monitor any changes in behaviour or periods of unresponsiveness and notify emergency contact.

Potential symptoms observed during a epileptic seizure: (often brief with sudden onset)

Partial seizure (non-convulsive)	Generalized seizure (convulsive)
• Vacant look (stares blankly)	• Upturned eyes or rapid blinking
• Confusion, memory lapses	• Loss of consciousness
• Lack of reaction	• Jerky movements
• Uncoordinated movements	• Stiffness in limbs
• Somnolence, sudden confusion	• Noisy breathing
• Unusual irritability	• Foaming at mouth
• Other(s):	• Possible incontinence (urine/stool)
	• Other(s):

DURING SEIZURE

Stay calm and remain with student.

Let seizure run its course. **Do not** immobilize student.

Prevent student from hurting themselves. If necessary, help student to lie on floor. Keep hazardous objects away.

Loosen tight-fitting clothing around neck.

Do not put anything in their mouth.

Turn student on their side for as long as seizure lasts (lateral recovery position).

Note duration of seizure – Start time: HH:MM / End time: HH:MM (on observation report).

AFTER SEIZURE

Allow student to rest in lateral recovery position.

Speak softly to student to reassure them.

Remain with student. They must remain under adult supervision.

Notify parents or other responsible person.

CALL 911 IF:

A convulsive seizure lasts over 5 minutes.

Student does not regain consciousness or breathing remains strained after end of seizure.

Second seizure occurs without a return to normal after first seizure.

Confusion persists for over an hour after seizure.

Seizure occurs in water and student swallows water (risk of heart or lung complications).

When it is student's first-ever seizure or they are injured or diabetic.

Accompany student during transfer to hospital and stay with them until parent or other responsible person arrives.

COMMUNICATE WITH A EMERGENCY CONTACT PERSONS