

SEIZURE CRIB SHEET

Types of seizures

There are many types of seizures and many variations. Below are a few types of seizures you may see:

- Generalized Tonic-Clonic (also known as **Grand Mal**)
- Absence
- Focal
- Myoclonic

Generalized Tonic-Clonic

Tonic-Clonic seizures are commonly referred to as Grand Mal seizures.

During the seizure:

- they jerk and shake as their muscles relax and tighten rhythmically
- their breathing might be affected and become difficult or sound noisy
- their skin may change color and become very pale or bluish
- they may wet themselves.

After the seizure (once the jerking stops):

- their breathing and color return to normal
- they may feel tired, confused, have a headache or want to sleep.

Absence Seizures

During a typical absence the person becomes blank and unresponsive for a few seconds. They may appear to be 'daydreaming'. The seizures may not be noticed because they are brief.

The person may stop what they are doing, look blank and stare, or their eyelids might blink or flutter. They will not respond to what is happening around them. If they are walking they may carry on walking, but will not be aware of what they are doing.

DID YOU KNOW?

Did you know that seizures are rarely fatal.

DID YOU KNOW?

Status Epilepticus is defined as a seizure lasting greater than 5 minutes, or multiple back-to-back seizures lasting greater than 5 minutes.

DID YOU KNOW?

Absence seizures (previously called petit-mal) are more common in children than in adults, and can happen very frequently.

Focal Seizures

Some people find their focal aware seizures hard to put into words. During the seizure they may feel 'strange' but not able to describe the feeling afterwards. This may be upsetting or frustrating for them.

Focal aware seizures (FAS) are sometimes called 'warnings' or 'auras' because, for some people, a FAS develops into another type of seizure. The FAS is then a warning that another seizure will happen (see focal to bilateral tonic-clonic seizures).

Myoclonic Seizures

Myoclonic seizures are brief but can happen in clusters (many happening close together in time), and often happen shortly after waking.

In myoclonic seizures the person is conscious, but they are classified as generalised seizures. This is because the person is likely to have other seizures (such as tonic clonic seizures) as well as myoclonic seizures.

Status Epilepticus

A seizure that lasts longer than 5 minutes, or having more than 1 seizure within a 5 minutes period, without returning to a normal level of consciousness between episodes is called **status epilepticus**.

This is a medical emergency that may lead to permanent brain damage or death.

What to do

SAFETY FIRST and time the duration of the seizure

- Keep calm
- Protect the client from injury
- Time the duration of the seizure
- Do NOT restrain the client during a seizure
- Do NOT insert anything in the client during a seizure
- If a client is heading their head on the floor or other hard surface, place a pillow or soft cushion between the client's head and the surface
- Roll the client onto their side when seizure stops
- Call the nurse with vital signs

DID YOU KNOW?

In focal aware seizures (FAS), the person is alert and will usually know that something is happening and will remember the seizure afterwards.

DID YOU KNOW?

Myoclonic means 'muscle jerk'. Muscle jerks are not always due to epilepsy (for example, some people have them as they fall asleep).

DID YOU KNOW?

Status epilepticus is very rare, most people with epilepsy will never have it. This condition is more common in young children and elderly adults.

DID YOU KNOW?

About 1.2 percent of U.S. people have active epilepsy. This comes out to about 3.4 million people nationwide — and more than 65 million globally.

Only the facts

The less you do for the client during a relatively brief seizure, is often best.

REMEMBER:

- Seizures are rarely life threatening
- Once the seizure starts...START THE TIMER

Special Circumstances - Wheelchair

If the client is in a wheelchair:

- Ensure that the brakes are on
- If the client begins to slide out of the wheelchair, help ease the client to the floor
- Never restrain a client in a wheelchair

After the seizure...

- Adjust the wheelchair in a partial recline position, not a full recline
- Gently turn the client's head to the side to allow the saliva to flow out of the mouth
- Let the client rest or sleep if needed.

Special Circumstances - Water

If the client is in water:

- Keep the client's head above water
- Get the client out of large bodies of water and lay them on their side.

What to expect after a seizure

- Confusion often times follow a seizure
- The client will fall asleep and lethargic following a seizure. Allow the client plenty of time to rest quietly
- Talk to the client softly and calmly

Common injuries

- General pain
- Bruising
- Broken bones
- Head injuries
- Change in skin color
- Labored breathing
- Chest pain

DID YOU KNOW?

Stay. Safe. Side

Stay with the client. Stay with the client and start timing the duration. Turn the client onto their side.

DID YOU KNOW?

Head injuries from falls during a seizure causes more deaths than the seizure itself.

DID YOU KNOW?

Seizures in large bodies of water such as swimming pools will likely cause a person to drown.

DID YOU KNOW?

Epilepsy is NOT contagious. You simply can't catch epilepsy from another person.

DID YOU KNOW?

You can't swallow your tongue during a seizure. It's physically impossible.

When to call 911

- Status Epilepticus
 - Seizure lasting longer than 5 minutes
- Broken bones
- Labored breathing or chest pains following a seizure
- Serious burns on the body
- Head injury
- Client remains unconscious after the seizure has subsided
- Eye pupils that remain dilated or different sizes

Reporting

Be ready to document and report seizure related information to the nurse and/or EMS.

Be prepared to meet EMS on location.

What you need to report:

- Type of seizure (use the best descriptors that you can, it is not necessary to know what type of seizure it is)
- Duration of seizure
- Injuries sustained
- Current vital signs
- Status of client post-seizure

Documentation

- Date
- Time
- Duration of seizure
- Characteristics of the seizure
- Actions taken
 - Did you assist the client to the floor
 - Did you place a pillow under the client's head
 - etc.
- Injuries
- Who did you notify

DID YOU KNOW?

You should always call 911 if the client has never had a seizure before.

DID YOU KNOW?

Epilepsy is most commonly diagnosed before age 20 or after age 65, and that rate of new cases increases after age 55.

DID YOU KNOW?

People with epilepsy are reportedly 15 to 19 times more likely to drown than the rest of the population