First aid for a Seizure is basically simple. The goal is to keep the person safe until the seizure stops naturally by itself.

**MILD SEIZURES symptoms** may include:
- Unusual behavior; some repetitive motion; such as eye blinking, and mild facial twitching, mumbling, picking at clothing;
- Student may tense up and stare, appear daydreaming; confused
- Student may be unaware of surroundings or unresponsive; or run or struggle if restrained.

**SEVERE SEIZURES symptoms** may include:
- Stiffening or Rigidity, followed by muscle jerks;
- Student may vomit;
- Student may have shallow, rapid, or temporary suspended breathing;
- Student may be pale or skin and lips turn blue.

**Lasts about 10 to 30 seconds**

**SEIZURE FIRST AID**

+ **KEEP CALM**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cushion Head</td>
<td>• Protect from obvious hazards or from falling. Place on the floor. Do not grab roughly or abruptly, unless there is immediate danger. • Clear the area around the person of anything hard or sharp.</td>
</tr>
<tr>
<td>Loosen tight clothes</td>
<td>• Loosen ties or anything around the neck that may make breathing difficult. • Don’t shout, restrain, or restrict movements.</td>
</tr>
<tr>
<td>Turn On Side</td>
<td>• Turn him or her gently onto one side. This will help keep the airway clear. • Put something flat and soft, like a folded jacket, under the head.</td>
</tr>
<tr>
<td>Don’t put anything In mouth</td>
<td>• Do not try to force the mouth open with any hard implement or with fingers. • Monitor breathing/airway. Do not place anything in mouth. • It is not true that a person having a seizure can swallow his tongue. Efforts to hold the tongue down can cause injury. • Don’t attempt artificial respiration except in the unlikely event that a person does not start breathing again after the seizure has stopped.</td>
</tr>
<tr>
<td>Look For ID</td>
<td>• Observe for any injury, the color of lips, face and skin, breathing. • Note time, length of seizure (by clock). <em><strong>Call 911 if longer than 5 min.</strong></em></td>
</tr>
<tr>
<td>Don’t Hold Down</td>
<td>• Don’t hold the person down or try to stop his movements. • Time the seizure with your watch.</td>
</tr>
<tr>
<td>As Seizure Ends</td>
<td>• When seizure is finished, the student may be sleepy which is normal. Provide a comfortable, private place for rest/sleep where he/she can be observed. Normal breathing then resumes, fatigue will be apparent. • People who’ve had this type of seizure should be fully conscious and aware before being left on their own. Make sure they know the date, where they are, where they’re going next.</td>
</tr>
<tr>
<td>...Offer Help</td>
<td>• Stay with the student until he/she is aware of where and what is happening. • Stay with the person until the seizure ends naturally. • Be friendly and reassuring as consciousness returns. • Document all seizure activity in the seizure log.</td>
</tr>
</tbody>
</table>

Although most seizures end naturally, one could be a sign of serious illness. **Call for medical assistance if:**
- the seizure lasts more than 5 minutes;
- there is no "epilepsy/ seizure disorder" I.D. present;
- there is slow recovery, a second seizure, or difficult breathing afterwards;
- the woman is pregnant or if there is medical I.D. indicating the presence of another medical condition; or
- there are any signs of injury.
**Seizures**

Refer to person's Emergency Action/Care Plan, if available, follow instructions from person's guardian or physician.

- During or immediately after a seizure, place on the floor (preferably a mat) for observation and safety
- **DO NOT RESTRAIN MOVEMENTS**
- Move surrounding objects to avoid injury
- Protect head and neck using a jacket or padding like a folded towel/cloth
- **DO NOT PLACE ANYTHING BETWEEN THE TEETH** or give anything by mouth

After seizure, keep airway clear by placing person on his/her left side and support the head in a neutral position with a towel roll
- Seizures are often followed by sleepiness and confusion. This may last from 15 minutes to an hour or more

After the sleeping period, the person should return to normal and be encouraged to participate in all normal class activities.

**Signs & Symptoms of Seizure**
- Episodes of staring and nonresponsive
- Staring with twitching of the arm and/or leg muscles
- Generalized jerking movement of arms and/or legs with unconsciousness
- Sudden unusual behavior for that person (e.g., strange sounds, belligerence, running)
- If trained personnel and medication available, administer Diastat.

A person with a history of seizures should be known to appropriate staff.
- An emergency care plan should be developed containing a description of the onset, type, duration and after effects of that person's seizures. If there is a history of diabetes, check blood sugar, see "Diabetes" (pg. 37)

Note:
- Observe details of the seizure for parent or legal guardian, emergency personnel, or physician.
  - Duration, movement of eyes, mouth, arms & legs
  - Loss of urine/bowel control
  - Loss of consciousness or change in behavior

Is seizure lasting longer than 5 minutes?
- Is person having multiple seizures following one another at short intervals?
- Is person having any breathing difficulties after the seizure?

Yes
- **CALL EMS 9-1-1**

No