

# When an Ambulance is called in an Epilepsy Emergency

## Considerations

Parents, carers, educators and the community are all advised to be prepared for an epilepsy emergency.

If there is a history of prolonged seizures, clusters of seizures or status epilepticus, consultation should occur with the treating doctor about the need for emergency medication.

If an emergency medication has been prescribed, an Emergency Medication Management Plan should be completed and signed by the prescribing doctor and attached to the Seizure Management Plan. These forms are available from the Epilepsy Foundation. However, only people trained in the administration of emergency medication specific to the individual may administer Midazolam or Rectal Valium.

All people administering emergency medication should follow the Seizure Management Plan (SMP) and the Emergency Medication Management Plan (EMMP) directions for emergency response as authorised by the individuals' doctor.

Ambulance membership should be considered to avoid significant costs for individual episodes of service provision as well as participation in an emergency first aid course and epilepsy training.

## Ambulance response

All paramedics have been trained to administer midazolam. If paramedics attend, the following procedures apply before midazolam can be administered.

1. Paramedics will utilise the doctor's written and signed instructions if they are readily available
2. If there is no prescription or doctor's instructions, the paramedic will administer midazolam as per ambulance protocol, calculating dose according to age/weight, in most cases, midazolam will be administered by intramuscular injection (IM) by the paramedic
3. Rectal diazepam (valium) is never used by the paramedic and is always substituted with midazolam
4. Transport to hospital: if a person has received midazolam, transport would depend upon:
  - Clinical presentation including vital signs and patient response to midazolam
  - Whether this event has been typical or would benefit from further investigation

Note: The decision to transport should be a joint one.

# DIAL 111 TO CALL AN AMBULANCE

## General questions asked when you dial 111

- What is the exact location of the emergency?
- What is your contact phone number?
- What is the problem?
- What exactly happened?
- How many people are hurt?
- Are you with the patient now?
- What is the age of the person needing the ambulance?
- Is the person conscious?
- Is the person breathing?
  - No to the last two questions results in the immediate dispatch of the ambulance.
  - Yes, leads to more specific questions.

## Questions asked in an epilepsy emergency

- Has the person had more than one seizure?
- If female, is she pregnant? (age 12–50)
- Did the person hit their head before the seizure?
- Does the person have diabetes?
- Does the person have a history of heart problems?
- Is the person known to have epilepsy or has the person had a seizure before?
- Has the jerking (twitching) stopped yet? (You go and check, I'll stay on the line.)
- Is the person breathing now?
  - No, operator will give CPR instructions.

## To assist the ambulance service

- Stay calm and answer each question accurately
- If you can, avoid third party calls
- Provide accurate location details – the nearest intersection is useful
- Have someone wait outside
- Ring 111 if the person's condition changes or they have another seizure.

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### For more information contact

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