

# Standards of care

## Seizure management in the school setting

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The school nurse can be instrumental in the identification of seizures and providing education and support to students, teachers, and parents/guardians. Signs and symptoms vary with the type of seizure a student experiences. The cause of seizures also varies. The school nurse needs to understand the various etiology associated with each type of seizure, the types of anticonvulsant medications that may be prescribed for the seizures, and the individualized plan of care for each student.

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### Seizure action plan

Students with seizure disorders should have an individualized healthcare plan (IHP) on file with the school. These are written by the school nurse and parent and can be reviewed by the student's healthcare provider. The IHP should be reviewed every year, and if the student transfers to another school.

The Utah Department of Health and Human Services, along with other stakeholders, have developed a state IHP form that is recommended for use in Utah. This form is not the only option; the school nurse may choose to use another seizure IHP form.

### Seizure rescue medication

Utah Code 53G-9-505 allows parents to request a volunteer be trained to administer seizure rescue medication for use in an emergency. The appropriate seizure medication management order must be completed and signed by the parent and a healthcare provider, and returned to the school before this can be initiated.

Before seizure rescue medication can be given at school the student:

- Must have been administered the medication in a non-medically supervised setting without a complication.
- Must have stopped having a full body prolonged convulsive seizure activity as a result of receiving the seizure rescue medication.

School nurses should determine their individual scope of practice regarding new seizure care, treatment therapies, and seizure care practices.

If both requirements are not met, a volunteer cannot be trained to administer the medication at school. The training program developed by the Utah Department of Health and Human Services must be followed if seizure rescue medication is to be available in a school setting.

Seizure rescue medication is a controlled substance, and as such, should not be carried by the student. The parent or guardian should bring the medication to the school. Medication should be kept in a locked location, yet accessible for use in an emergency.

## Management

Monitoring of seizure activity includes:

- Obtaining and updating the student's health history, including an in-depth history of seizure onset, kind of seizure activity, triggers, aura(s), and prescribed medications.
- Documenting seizure activity. If seizure activity is observed, the observer should document the frequency, date/time/duration, specific behaviors, aura, and changes in level of consciousness.
- Implementing emergency medical care as needed.
- Counseling the students, teachers, and other staff regarding safety precautions if a seizure happens.
- Counseling the student about social adjustment, self-care needs, activity restrictions, and necessary modifications.
- Reporting any seizure activity to parents/guardians and to the student's healthcare provider.

## Seizure awareness training

Utah Code [53G-9-213](#) requires all school staff who interact with or supervise students to complete seizure awareness training that includes recognizing signs and symptoms of seizures, and appropriate steps for seizure first aid. This training must be completed every 2 years. The following training sites meet this requirement.

- [Seizure Training for School Personnel](#) (Epilepsy Foundation)
- [Seizure First Aid](#) (Epilepsy Foundation)
- [On-Demand Seizure First Aid for School Personnel](#) (Epilepsy Alliance)