

EMT/ADVANCED EMT STANDING ORDERS

E/A

- Routine Patient Care.
- If the blood glucose reading is <60mg/dl, see [Hypoglycemia Protocol 2.10P](#).
- Obtain the patient's temperature for suspected febrile seizure (rectal route preferred, as appropriate). Treat fever per [Pediatric Color Coded Appendix A3](#).
- If diazepam rectal gel (Diastat) has been prescribed by the patient's physician, assist the patient or caregiver with administration in accordance with physician's instructions.
- If the patient has an implanted vagus nerve stimulator (VNS), suggest that family use the VNS magnet to activate the VNS and assist if required.
 - To use the VNS magnet, pass the magnet closely over the VNS device; if unsuccessful, repeat every 3 – 5 minutes for a total of 3 times.
 - Note: do not delay medication administration.

PARAMEDIC STANDING ORDERS

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- While seizure activity is present, consider:
 - *Midazolam 5mg/mL concentration (IM or IN preferred):
 - 0.2mg/kg IM/IN (single maximum dose 8mg) repeat every 5 minutes; or
 - 0.1mg/kg IV (single maximum dose 4 mg) repeat every 5 minutes, **OR**
 - Lorazepam 0.1mg/kg IV (single maximum dose 4mg) repeat every 5 minutes, **OR**
 - Diazepam 0.1mg/kg IV (single maximum dose 10mg IV) repeat every 5 minutes.



*For IN administration of midazolam use a 5mg/mL concentration.



Do NOT routinely place an IV/IO for the actively seizing patient (unless needed for other reasons).

PEARLS:

- Do not attempt to restrain the patient; protect them patient from injury.
- History preceding a seizure is very important. Find out what precipitated the seizure (e.g., medication non-compliance, active infection, trauma, hypoglycemia, poisoning).
- **Status epilepticus** is defined as any generalized seizures lasting more than 5 minutes. This is a true emergency requiring rapid airway control, treatment (including benzodiazepines), and transport.
- IM/IN is the preferred route for midazolam where an IV has not been previously established.
- IM midazolam should be administered to the lateral thigh.
- Diazepam and lorazepam are not well absorbed IM and should be given IV.
- There is an increase risk of apnea with >2 doses of benzodiazepines.