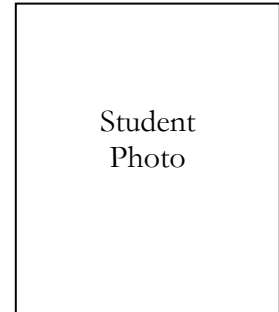


Valley Central School District Seizure Disorder Emergency/Health Care Plan

Student: _____ Grade: _____ DOB: _____
Mother: _____ MHome #: _____ MWork #: _____ MCell #: _____
Father: _____ FHome #: _____ FWork #: _____ FCell #: _____
Emergency Contact: _____ Relationship: _____ Phone: _____

SYMPTOMS OF A SEIZURE EPISODE MAY INCLUDE ANY/ALL OF THESE:

- Tonic-Clonic Seizure:
 - o Entire body stiffens, jerking movements
 - o May cry out, turn bluish, be tired afterwards
- Absence Seizure:
 - o Staring spell, may blink eyes



STAFF MEMBERS INSTRUCTED: Teacher(s) Administration Support Staff

To Be Completed by the Health Care Provider

TREATMENT:

Clear the area around the student to avoid injury.

DO NOT PUT ANYTHING IN THE STUDENT'S MOUTH

Place student on side if possible, speak to student in reassuring tone

Stay with student until help arrives

Emergency medication to be given by Nurse at onset of seizure: _____

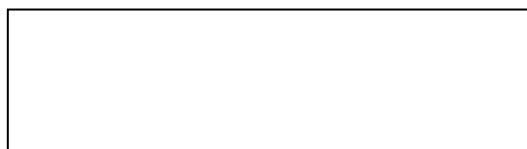
Student should be allowed to rest following seizure, call parent

Emergency Medical Services (911) should be called and student transported to hospital if: _____

Physician Signature: _____ **Date:** _____

Written by: _____ Date: _____

Parent/Guardian Signature to share this plan with Provider and School Staff: _____



Please Stamp

Valley Central School District Seizure Disorder Emergency/Health Care Plan

Student: _____ Date of Birth: _____

Physician: _____ Physician Phone #: _____

Do we have your permission to call the above physician should questions arise regarding your child's health here at school? Yes No

How long has your child been diagnosed with a seizure disorder? _____

I would describe my child's seizures as:

- Simple Partial -- Remains conscious, twitching or numb sensation, usually lasting less than 30 seconds.
- Complex Partial -- Altered consciousness, transient staring, feelings of unreality and detachment. May have hallucinations, unexplained feelings of fear, disrupted memory, teeth grinding, lip smacking, chewing, swallowing, scratching or pulling at buttons. Lasts usually no longer than 1-2 minutes.
- Tonic-Clonic -- Abrupt arrest of activity, loss of consciousness, symmetrical and rhythmical alterations of contraction and relaxation of major muscle groups. Ends suddenly in less than 5 minutes.
- Atonic -- Abrupt loss of postural tone, loss of consciousness, confusion, lethargy and sleep. (May just fall asleep suddenly; when laughing, the child may fall down.)
- Myoclonic -- Brief random contractions of a muscle group, may occur on one side of the body, no loss of consciousness.
- Absence -- Very brief periods of altered awareness, eyelids may flutter or twitch, blank facial expression, lasts 5-10 seconds but can occur repeatedly.
- Tonic -- Lack of movement, stiffening of the entire body musculature, arms flex, legs, neck and head extend. Peculiar, piercing cry, cyanosis (bluish coloring to skin), may temporarily stop breathing, increased salivation.
- Akinetic -- No movement, but muscle tone is maintained. Like "freezing into position," may lose consciousness.

My child does does not have an aura before his/her seizures. (An aura is a sensation just before a seizure happens -- may be a sound, sight, smell, feeling -- they usually can tell if a seizure is about to happen.)
If so, what is the aura? _____