Seizure: First Non-Febrile

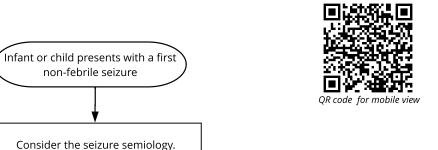
Associated Power Plans: EDP First Nonfebrile Seizure Pathway; Discharge Seizure Rescue Medications Pathway



Evidence Based Practice

Exclusion Criteria

- < 3 months of age
- Unimmunized or under-immunized if < 6 months of age
- Concurrent fever, refer to the <u>Febrile</u> <u>Seizure Clinical Pathway</u>
- Presenting in status epilepticus (seizure lasting longer than 5 minutes)
- Concerns for epileptic (formerly infantile) spasms (consult Neurology as soon as possible)
- Significant CNS event or surgical intervention within past two weeks; if applicable, refer to the <u>Shunts</u> (Neurosurgical): <u>Infection and Malfunction</u> <u>Clinical Pathway</u>



If not consistent with epileptic seizure, see <u>alternative diagnosis</u>

Was the

seizure provoked?

No

back to neurological

baseline?

Yes

Further work-up in the acute care setting is not indicated

Was the

seizure focal?

Off Guideline. Treat underlying cause

Provoked Seizure

- Electrolyte imbalance
- Toxic ingestion or recent medication changes
- History of head trauma or concern for non-accidental trauma (NAT)
- Concern for meningitis

Neurological Baseline

- 4 6 hours is a reasonable amount of time for a child to return to baseline following a first unprovoked seizure
- If a child has been treated for seizure (benzodiazepine or other), the recovery period will be affected

Is the child • Consult Neurology • Continue medical section (a) the child (b) the child (c) the ch

 Continue medical stabilization and workup as needed (CBC, BMP, consider urine drug screen)

Focal

Non-urgent neuroimaging (*MRI without* contrast) and EEG, both will be ordered at the Neurology Clinic appointment

Generalized

Neuroimaging is not necessary before EEG is obtained

Anticipatory Guidance

- Explain risk of recurrence
- Educate on seizure first aid and management plan
- Discuss age-appropriate seizure precautions
- Provide follow-up plan
- Frequently asked questions

Discharge

- Call Neurology if there are questions or concerns
- Place referral for non-urgent Neurology Clinic follow-up appointment (EEG will be ordered at that time)
- Provide anticipatory guidance
- <u>Prescribe rescue medication, refer to the medication table</u> and use the Discharge Seizure Rescue Medications Pathway power plan

Contact: EvidenceBasedPractice @cmh.edu

Link to synopsis and references