



ORANGE COUNTY EMERGENCY MEDICAL SERVICES
BASE HOSPITAL TREATMENT GUIDELINES
SEIZURE (PEDIATRIC)

BASE GUIDELINES

1. Determine ALS Standing Order treatments/procedures rendered prior to base hospital contact. Use ALS standing order as guidelines for treatments/procedures not initiated prior to base hospital contact.
2. Avoid use of oral glucose as any material placed in a patient's mouth may be aspirated if recurrent seizure occurs.
3. Administration of midazolam (Versed®) in pediatrics remains via the IN/IM routes only. Consider repeat dosing per #1 in the ALS Standing Order.

ALS STANDING ORDER

1. For on-going seizure activity:
 - ▶ *Turn to side, protect airway and suction when possible*
 - If over 12-months of age, give:
 - ▶ *Midazolam 0.1 mg/kg IN/IM (maximum 5 mg per dose); repeat 0.1 mg/kg IN/IM one time for continued seizure activity 3 minutes after initial dose or for recurrent seizure.*
 - If under 12-months of age, make base contact for orders and destination.
2. Pulse oximetry, if room air oxygen saturation less than 95%:
 - ▶ *Provide high-flow Oxygen by mask or nasal cannula as tolerated.*
3. Obtain blood glucose and document finding, if blood glucose less than 80, administer one of:
 - ▶ *10% Dextrose 5 mL/kg IV (maximum dose 200 mL).*
 - ▶ *Glucagon 0.5 mg IM if unable to establish IV.*

Note: IO access may be used for dextrose administration when patient is unconscious with blood glucose < 80, unable to establish IV and there is no response to IM glucagon.
4. ALS escort to nearest appropriate ERC or contact Base Hospital as needed.

Approved: