FITTING PATIENT

Management of a major fit

- Ensure that the airway is clear
- Turn the patient into the recovery position
- If no history of seizures or uncertain history blood glucose should be checked to exclude hypoglycaemia
- If a convulsion is continuing for longer than 5 minutes, manage with:
 - o Diazepam PR
 - Adult
 - 10-20 mg
 - Dose may be repeated once after 10-15 minutes
 - Consider checking blood glucose if prolonged fit
 - Elderly
 - 10 mg
 - Dose may be repeated once after 10-15 minutes
 - Consider checking blood glucose if prolonged fit
 - Child
 - 0.3-0.5 mg/kg/dose (maximum dose 10mg), only given once i.e. should not be repeated
 - Onset of action 5-10 minutes
 - Delayed respiratory depression may occur after rectal administration
 - Rectal Diazepam no longer held in Starship Children's Health Emergency Department
 - Consider checking blood glucose if prolonged fit

OR

- Diazepam IV
 - Adult
 - 10 mg at a rate of 5 mg per minute
 - Dose may be repeated once after 10-15 minutes
 - Consider checking blood glucose if prolonged fit
 - Child
 - 0.3-0.4 mg/kg/dose (maximum dose 10mg)
 - Dose may be repeated once after 10-15 minutes
 - Consider checking blood glucose if prolonged fit
- If the fit continues >5 minutes after 1st diazepam administration, treat as Status Epilepticus and arrange immediate admission to hospital

Status Epilepticus

Definition

Seizure without the patient regaining consciousness after 20 minutes

Management

- Repeat diazepam see doses documented above under 'Management of a major fit'
- If not previously done blood glucose should be checked to exclude hypoglycaemia
- Arrange immediate admission to hospital

Note

- Admit the following patients to hospital
 - Status Epilepticus
 - There is suspicion that the fit is secondary to other illness e.g.
 Meningitis, subdural haematoma
 - Recovery after the fit is incomplete (other than feeling sleepy)
- Refer any adult who has a first fit to neurology for urgent assessment
- Refer any child who has a first fit not related to a fever to paediatrics for urgent assessment