

LAKE WASHINGTON SCHOOL DISTRICT DISTRICT SEIZURE PLAN

Student Name _____

School Year _____

DESCRIPTION: GRAND MAL SEIZURE IS OCCURRING

TREATMENT:

1. Do not try to stop the seizure.
2. Do not put anything in the student's mouth.
3. Stay with the student.
4. If possible, move any hard or sharp objects away from the student.
5. Help the student onto the floor onto his side, or turn his face to the side, in order to keep his airway open.
6. Place something soft under the student's head.
7. Notify 911 unless a release has been signed by doctor.
8. Notify 911 even if a release has been signed if:
 - a. Another seizure begins soon after the first.
 - b. The student does not regain consciousness after cessation of jerking movements.
 - c. The student is having respiratory distress or has trouble breathing.
 - d. Student shows signs of other concerns.
9. Notify parents.
10. Notify district nurse.

Document the time and length of the seizure and what occurred

Parent signature _____ **Date** _____

District Nurse signature _____ **Date** _____