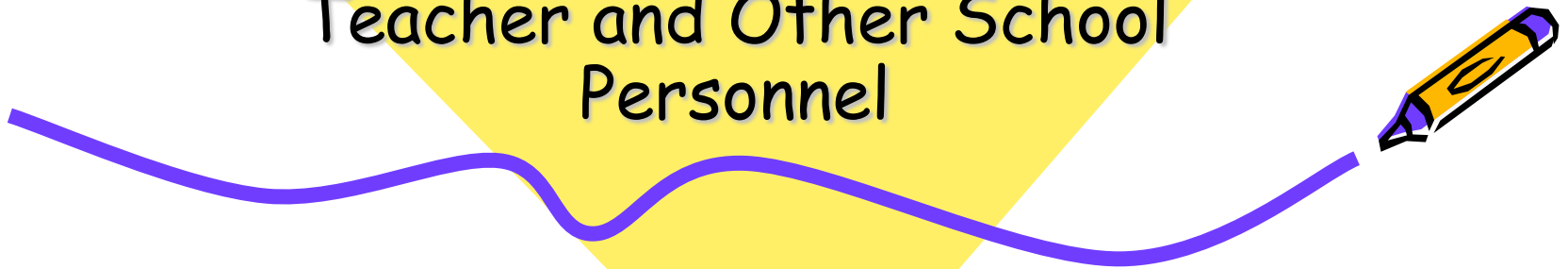


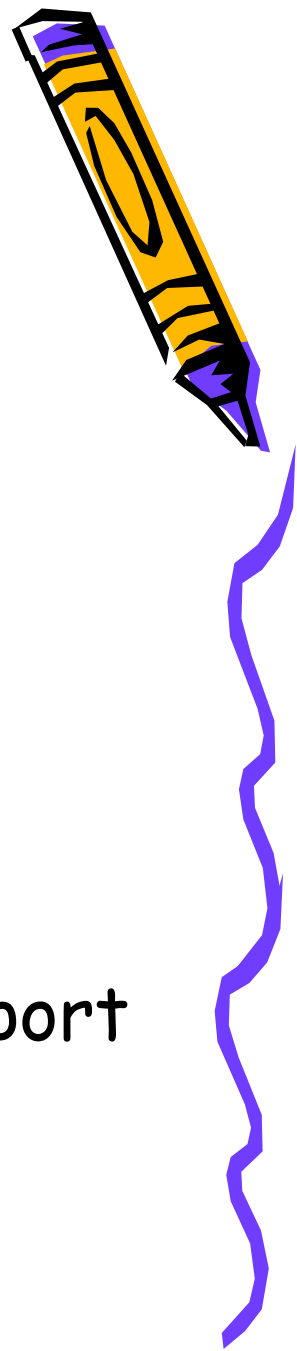


Managing Students with Seizure Disorders

Teacher and Other School
Personnel



Goal of Training for School Personnel



School personnel should be able to:

- Recognize complex partial seizures
- Provide appropriate first aid
- Provide appropriate social and academic support



What is Epilepsy?

- Epilepsy is a neurological disorder that causes people to have recurrent seizures.
 - Epilepsy is not contagious
 - Epilepsy is not a mental illness
 - Epilepsy is not mental retardation.

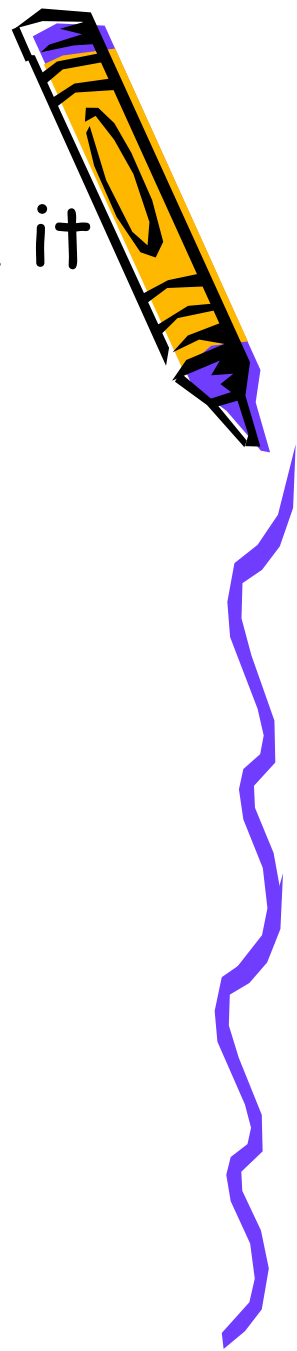


What Causes Epilepsy?



- More than half the time, the cause is unknown.



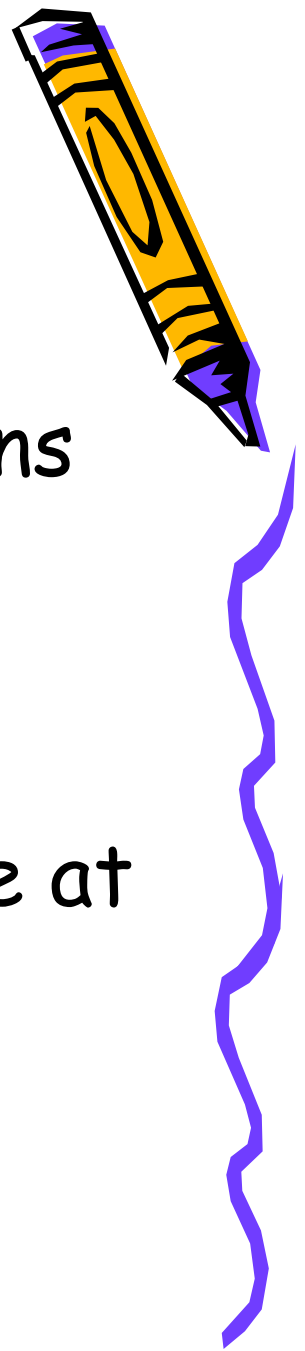


- Where a cause can be determined, it is most often one of these:
 - Head injury
 - Infections that affect the brain
 - Stroke
 - Brain tumor
 - Alzheimer's disease
 - Genetic factors



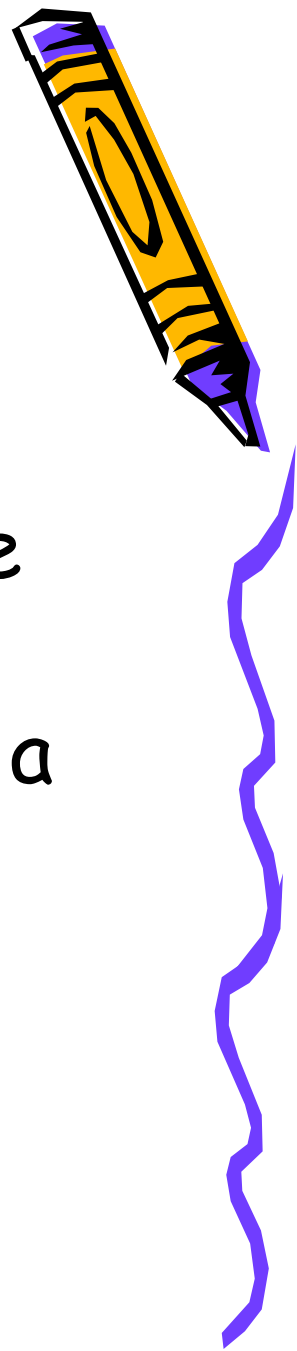
Who has Epilepsy?

- Approximately 2.5 million Americans have epilepsy, and over 1,800,000 new cases are diagnosed in the United States each year.
- One in 10 people will have a seizure at some point in their lives.



What is a seizure?

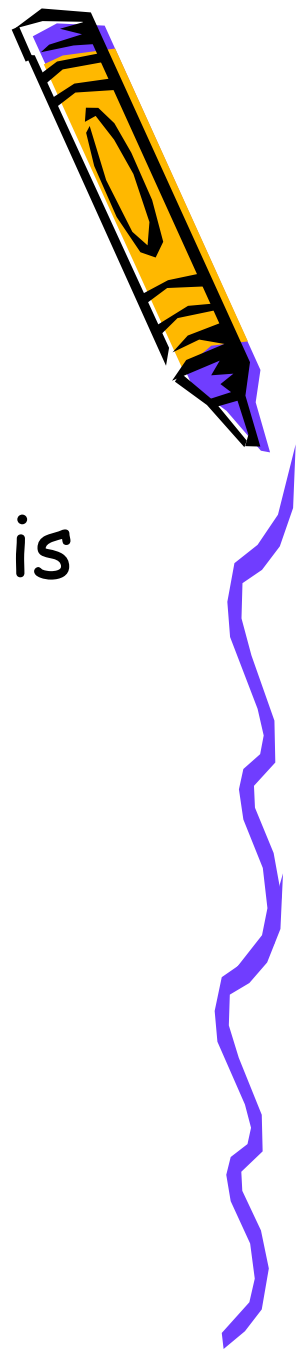
- A seizure is a brief episode of disorderly electrical activity in the brain which affects its normal functions and produces changes in a person's movements, behavior or consciousness.



What is a seizure?

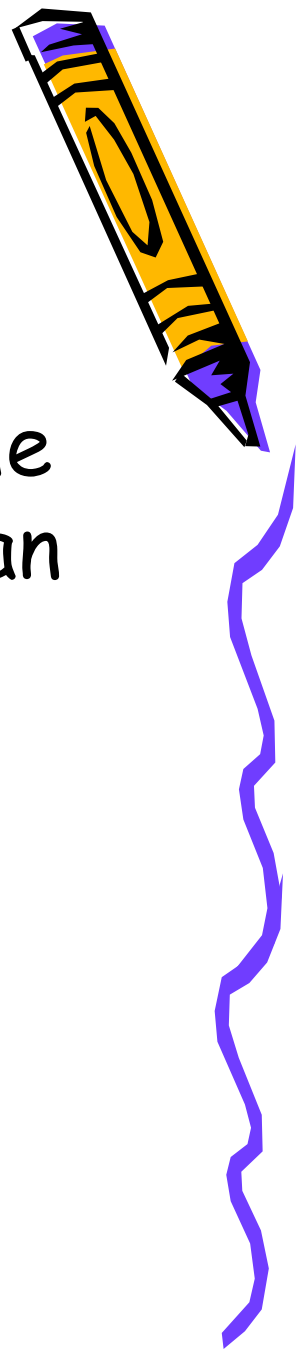
(continued)

- The kind of seizure a person has depends on how much of the brain is affected



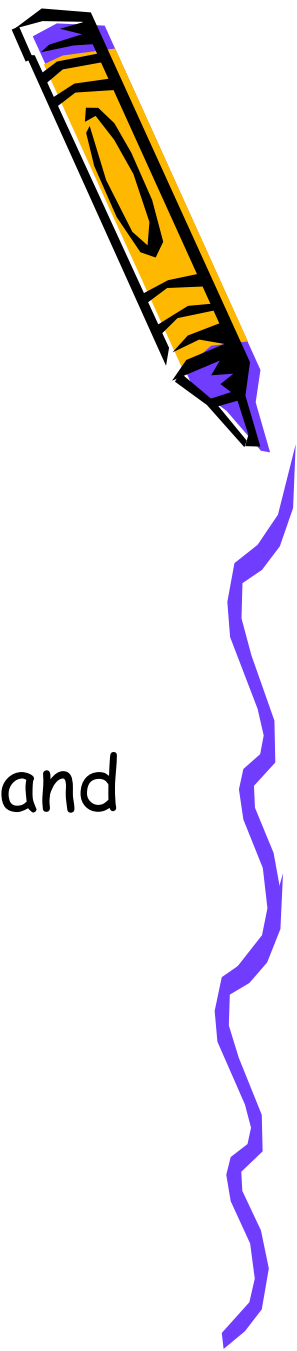
Partial Seizures

- These happen when only part of the brain is affected, although they can spread to the whole brain.

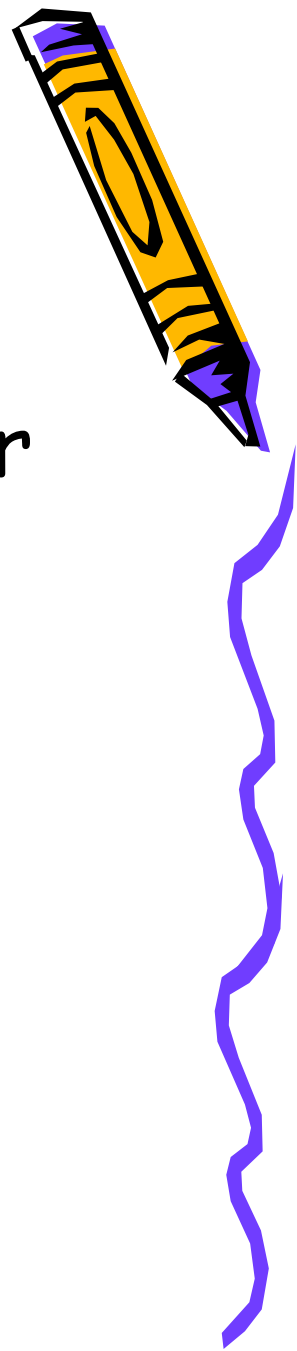


Simple Partial Seizure

- Affects the senses, feelings, emotions and movement.
- Things may look bigger or smaller
 - There may be hallucinations of sight and sound.



Simple Partial (continued)



- People can feel unexplained pain, or fear, or anger.
- A hand or leg may shake.
- People do not blank out.



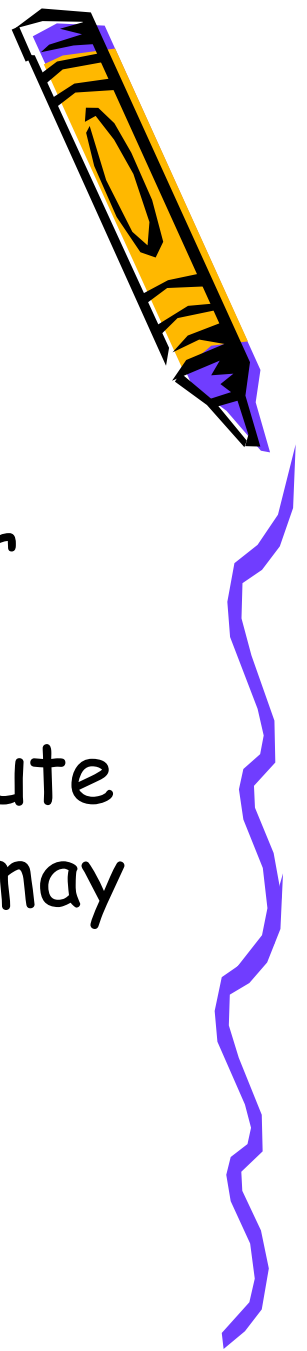
Complex Partial

- May start like a simple partial seizure, but progresses to cause loss of awareness and automatic movements that look like a trance-like state.

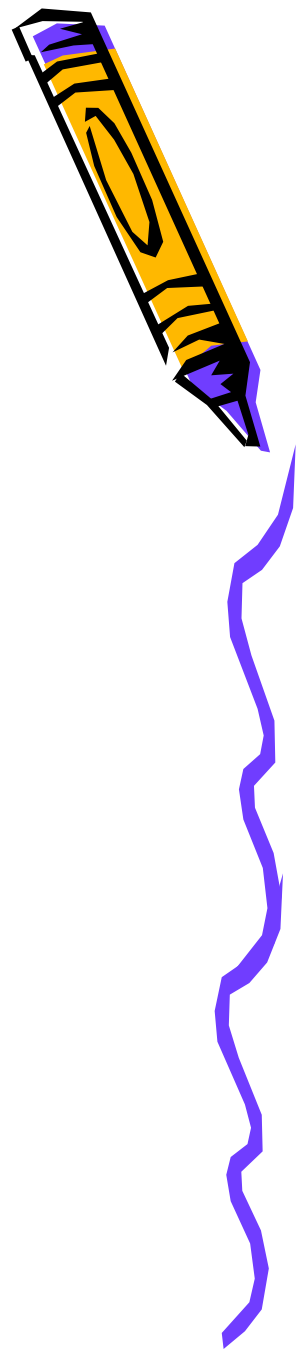


Complex Partial (continued)

- Automatic movements can take almost any form, but are not under conscious control.
- A complex seizure lasts only a minute or two, but confusion afterwards may last much longer.



Recognize a Complex Seizure



- Usually starts with blank stare, followed by chewing, followed by random activity.
- Student appears unaware of surroundings.





- Student may seem dazed and mumble; unresponsive.
- Acts clumsy, not directed.
- May pick at clothing, pick-up objects, try to take clothes off.
- May run, appear afraid.
- May struggle or flail at restraint.



Recognize a Complex Seizure (continued)

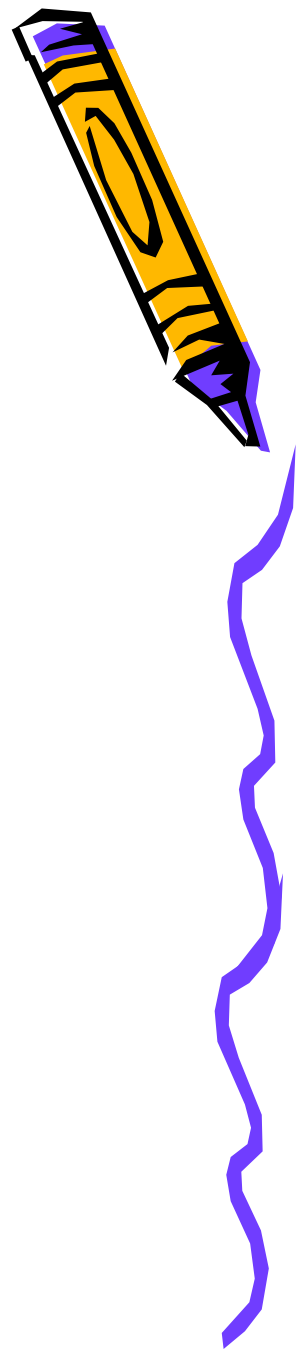


- May last a few seconds.
- Post-seizure confusion can last for minutes.
- NO MEMORY OF WHAT HAPPENED DURING SEIZURE PERIOD.

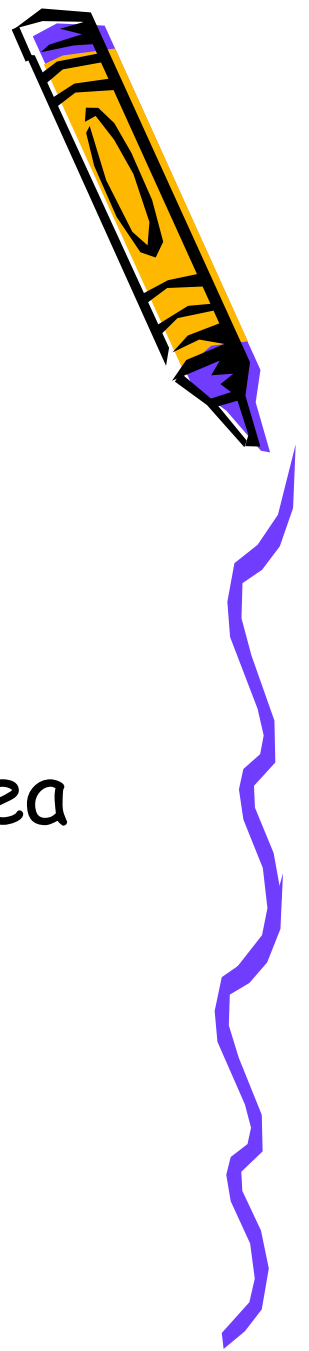


Possible Seizure Triggers

- Stress
- Lack of Sleep
- Infection
- Starvation or dehydration
- Flashing or strobe lights
- Certain medications
- High fevers
- Loud Sounds



What to Do....



- Track the length of seizure.
- Speak calmly and reassuringly to student and others.
- Reassure other students in the area as needed.
- Guide student away from hazards.

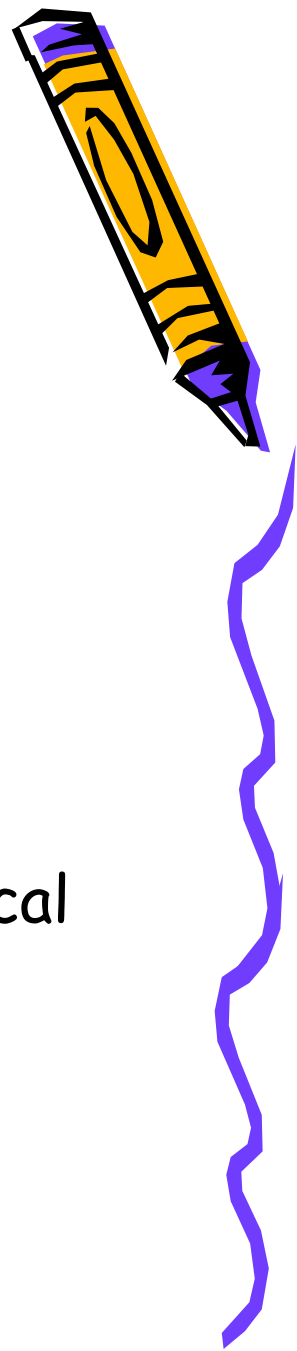


What to Do....

- Stay with student until completely aware of environment.
- Stay back from student acting angry or aggressive.
- If complex seizure, try to remove any eyeglasses to prevent injury



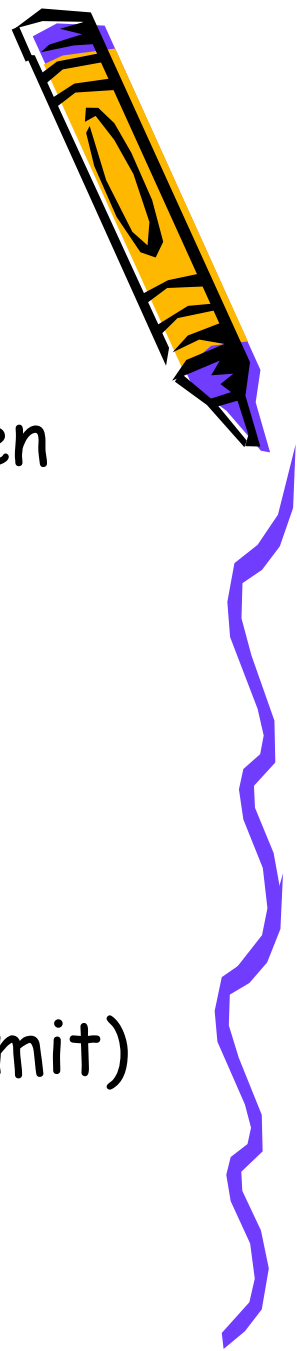
What to Do....



- NOTIFY SCHOOL NURSE
 - Nurse will assess need for further intervention.
 - Nurse will notify parent of episode.
 - Duration of episode will be noted.
 - When student "returned to self" noted.
 - Will advise parent to notify student's medical doctor of episode.
 - Document of seizure activity log.



What Not to Do....



- Don't grab hold of student unless sudden danger threatens.
- Don't try to restrain.
- Don't shout.
- Don't expect verbal instructions to be obeyed.
- Turn student onto his/her side (may vomit)



Social and Academic Support



- MAINTAIN AFFECTED STUDENTS RIGHT TO PRIVACY.
 - DO NOT SHARE ANY HEALTH RELATED INFORMATION WITH OTHERS WITHOUT THE WRITTEN PERMISSION OF PARENT



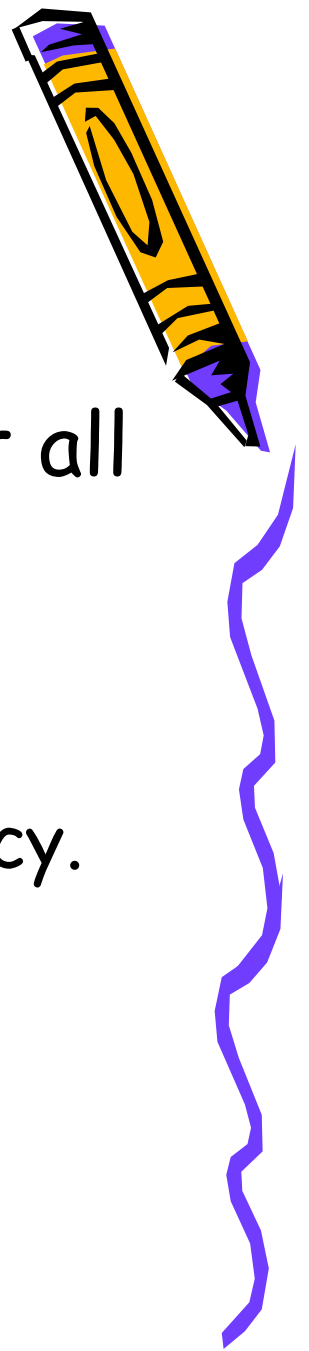
Social and Academic Support (continued)



- Provide a safe environment
- Limit sudden noise in classroom
 - In the event of a fire drill, evacuate student first, limiting exposure to loud, sudden noise of fire alarm.
- Limit use of flashing lights



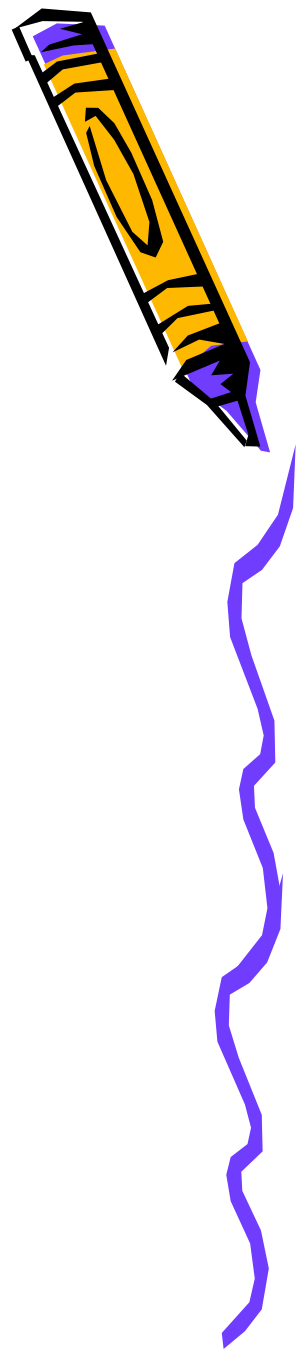
Social and Academic Support (continued)



- Student will travel with a buddy at all times.
 - All students instructed on the importance of never leaving any child alone when there may be an emergency.



Social and Academic Support (continued)



- Reinforce classroom safety rules.
 - Consistent with school policy.
 - All safety rules should apply to all students.



Social and Academic Support (continued)



- Allow student to remain well hydrated.
- Allow student to self-limit activity if increased classroom and/or outdoor temperature is noted.
- Allow student to sit near classroom fan.



Social and Academic Support (continued)



- Allow student time to reorient to classroom after seizure activity.
- Modify physical activity as medical doctor directions.
 - Student may not climb on equipment
 - Allow student to self limit when environmental temperature is elevated.



Social and Academic Support (continued)

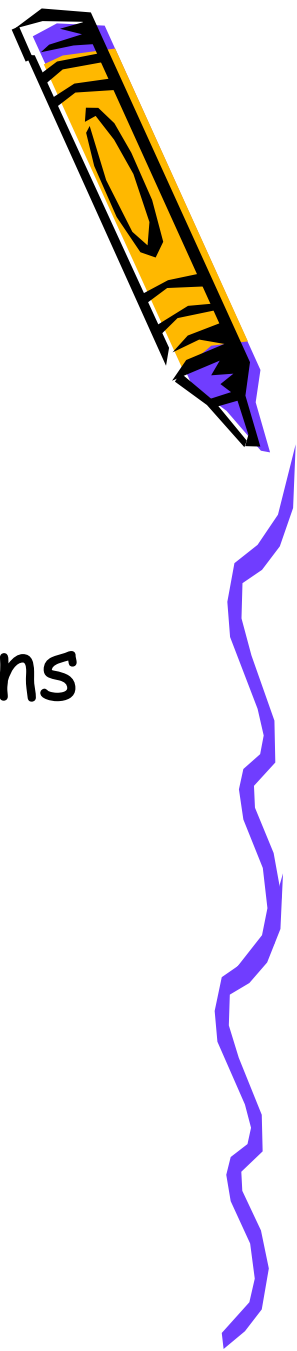


- Observe student's activity, behavior at regular intervals. (see accommodation plan)
- Report any possible seizure activity to school nurse immediately.

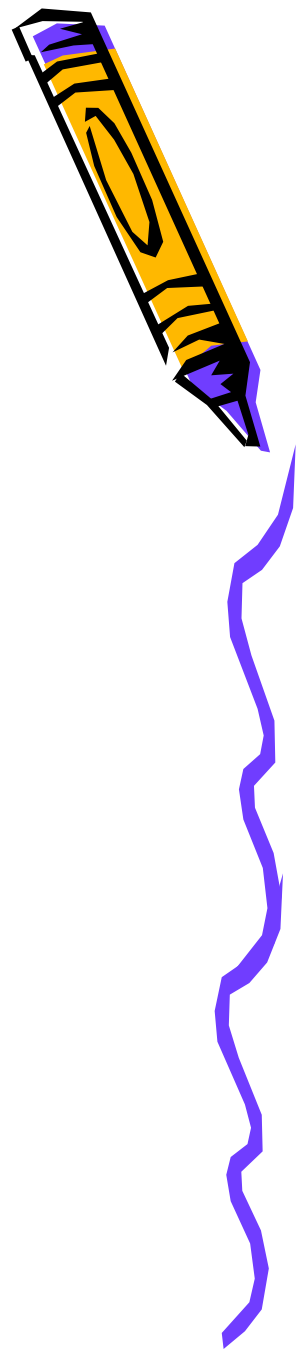


Social and Academic Support (continued)

- Provide all appropriate accommodations as written in student's individualized 504 Accommodation plan or Individualized Education Plan.



Resource for School Personnel



- www.epilepsyfoundation.org





- Information for this presentation provided by the following:
 - National Association of School Nurses
 - Epilepsy Foundation of America
 - Westwood Regional School District

PLEASE [CLICK HERE](#) FOR A BRIEF QUIZ. THANK YOU!

