



Individualized Healthcare Plan (IHP) - SEIZURES

Pupil:			
Grade:	DOB:	Educational Placement:	
School:			
District:			
School Nurse:		Cell #	
Parent/Guardian Consent Date:		Physician Authorization Date:	
Parent Signature:			
Mother	Primary Phone #	Secondary Phone #	
Father	Primary Phone #	Secondary Phone #	
Guardian	Primary Phone #	Secondary Phone #	
Home Address		City	Zip
Other Contact (Relationship):		Primary Phone #	Secondary Phone #
Physician		Phone #	Fax #
Physician Address		City	Zip
Healthcare Service Needed at School	Management of Seizures at School and School Sponsored Events:		
Purpose of an IHP	<ol style="list-style-type: none"> 1. The purpose of an Individualized Healthcare Plan (IHP) is to provide safe management of healthcare needs and services for pupils at school and during school-related activities. 2. The school nurse, in collaboration with the student and the student's parent/guardian, healthcare providers, and school team, is responsible for: <ol style="list-style-type: none"> a) Development, implementation, and revisions of the IHP. b) The training and supervision of all designated personnel who will provide healthcare according to the ISHP and standard procedures. 3. IHP revisions, if and when revisions are needed to the IHP, parent/guardian will inform school nurse of any updates from the physician by providing a doctor's note. 4. IHP review must occur annually and whenever necessary to ensure provision of safe care. 		

EMERGENCY MANAGEMENT PLAN FOR SEIZURES

IF YOU SEE THIS	DO THIS
<p><u>Signs and Symptoms</u></p> <p>If student has a FULL SEIZURE Also known as grand mal or tonic-clonic seizure:</p> <ul style="list-style-type: none"> • Lasts one to five minutes • Involves the entire body • The body falls, stiffens and jerks • May cry out and bite tongue • May become bluish due to lack of oxygen • May become incontinent • Generally tired afterwards and may sleep <hr/> <p>If student has an absence seizure, Also known as petit mal or partial seizure</p> <ul style="list-style-type: none"> • Lasts a few seconds • May have a staring spell or blink his eyes • Mistaken for daydreaming • Memory lapse • Lack of attention-unresponsive 	<p><u>Response Action</u></p> <ol style="list-style-type: none"> 1. Be sure the child is safe by clearing the area to protect from further injury. 2. CALL 911; then call parent for seizure lasting five minutes or immediately if signs of respiratory distress are present. 3. Do not restrain or interfere with the child's movements. 4. Do not put anything in the mouth. 5. Maintain the airway by turning the person on side and monitor for breathing 6. When seizure is over, if 911 wasn't called, allow person to rest. Usually, a person is sleepy following a seizure. 7. Consult w/ parent/guardian regarding the seizure and follow parent/guardian recommendation. 8. Alert teacher and principal to the situation. 9. Consult with the District Nurse as soon as is reasonably possible. <hr/> <ol style="list-style-type: none"> 1. No active first aid is required 2. Stay with student and make sure he is safe; 3. Record time, length and symptoms of seizure on seizure log. <p>It is also beneficial to the attending physician to have the following information:</p> <ul style="list-style-type: none"> • What parts of the body were first involved and how the seizure progressed • Level of consciousness • If vomiting occurred • If there was loss of bladder or bowel control

IF EMERGENCY OCCURS: Call 911 for life threatening emergency. Stay with student or designate another adult to do so. Provide ongoing care to student. Designate someone to call parent or guardian.

List all medications taken on a daily basis:

Parent Signature: _____ Date: _____

Nurse's Signature: _____ Date: _____

Physician's Signature: _____ Date: _____

Principal's Signature: _____ Date: _____