

SEIZURE RECOGNITION AND FIRST AID

GUIDELINES TO HELP YOU RESPOND TO ANY SEIZURE

DURING THE SEIZURE, THE PERSON MAY:	AFTER THE SEIZURE, THE PERSON:	WHAT TO DO:	IMPORTANT TO NOTE:	
Generalized Tonic-Clonic (Grand Mal)				
<ul style="list-style-type: none"> • Cry out and fall • Lose consciousness • Rapidly jerk their limbs • Have trouble breathing • Lose bladder or bowel control 	<ul style="list-style-type: none"> • May not become fully conscious right away (if it takes more than 30 minutes they may need to go to the ER) • May appear confused, need to sleep, or have a headache • May sleep for several minutes or hours • Breathes normally • Eventually becomes conscious 	<ul style="list-style-type: none"> • Time the seizure and call 911 if it does not end in 5 minutes • Protect their head with your hands or a soft object • Turn the person on their side • Loosen tight clothing around their neck (tie or scarf) • Keep onlookers away and explain what is happening • Stay with the person until the seizure is over • Stay calm 	<ul style="list-style-type: none"> • DON'T hold a person down • DON'T put any object in their mouth or hold their tongue • DON'T give liquids or oral medications until conscious • DON'T use artificial respiration • May look like a heart attack or stroke • Typically lasts 2-3 minutes • If this type of seizure occurs in a child 6 or under due to a high fever or illness, it is called a Febrile seizure 	
Absence (Petit Mal)				
<ul style="list-style-type: none"> • Stare blankly • Blink quickly • Make chewing movements • Be unaware of what's going on around them 	<ul style="list-style-type: none"> • Becomes fully conscious right away 	<ul style="list-style-type: none"> • No immediate first aid is required • Give comfort and reassurance • Time the seizures if they begin to cluster • Help the person reintegrate into the task they were just doing 	<ul style="list-style-type: none"> • This is most common in children • Usually lasts 5-10 seconds • Sometimes confused with daydreaming, not paying attention, or ignoring instructions 	
Myoclonic Seizures				
<ul style="list-style-type: none"> • Suddenly jerk their whole or part of their body • Spill a drink, drop an object, fall off of a chair • Maintain consciousness • If a baby, have their head and arms fall forward if sitting up; have their knees, arms, and head lift up, if laying down 	<ul style="list-style-type: none"> • Generally will not show post-seizure symptoms • Becomes fully aware immediately 	<ul style="list-style-type: none"> • No first aid needed unless injury occurs • Provide emotional support and reassurance • If this is the first time you have seen this behavior in a baby, contact your PCP 	<ul style="list-style-type: none"> • Sometimes confused with being clumsy • When this type of seizure occurs in babies up to 2 years, it may be confused with colic or asking to be picked up, but could also be a sign of a developing pediatric epilepsy. 	
Atonic Seizures (Drop Seizures)				
<ul style="list-style-type: none"> • Suddenly lose muscle control or suddenly fall • Lose consciousness 	<ul style="list-style-type: none"> • Becomes fully conscious • Can stand and walk • May be sore or injured from the fall and need first aid 	<ul style="list-style-type: none"> • No first aid needed unless the person is hurt during a fall • Provide emotional support and reassurance 	<ul style="list-style-type: none"> • Sometimes confused with being clumsy • In a child, confused with poor walking skills • In an adult, confused with being drunk • Usually lasts 10-60 seconds 	
Focal Seizure with No Change in Awareness (Simple Partial)				
<ul style="list-style-type: none"> • Jerk their body, arm, leg, or face (this may spread to other parts of their body) • See or hear things that aren't there • Feel scared, sad, angry, or happy for no reason • Feel like vomiting or have a stomach ache 	<ul style="list-style-type: none"> • May need to rest 	<ul style="list-style-type: none"> • Stay calm • Time the seizure • Protect the person from harm • Keep onlookers away and explain what is happening • Stay with the person and support them when the seizure ends 	<ul style="list-style-type: none"> • Usually lasts 1-2 minutes • During the seizure, the person usually stays aware • Sometimes this seizure can turn into a tonic-clonic seizure • Sometimes confused with acting out, odd behavior, or mental illness 	
Focal Seizure with Altered Awareness (Complex Partial)				
<ul style="list-style-type: none"> • Stare blankly • Make chewing movements • Try to take off their clothes • Not answer questions • Pick at clothing • Move their body in unusual ways 	<ul style="list-style-type: none"> • Mumble • Pick up objects • Be unaware • Seem scared or confused • Try to run away 	<ul style="list-style-type: none"> • Is confused • Can't remember what happened 	<ul style="list-style-type: none"> • Time the seizure • Speak calmly, reassuring them that they are safe • Protect the person from harm by gently and calmly guiding them away from hazards like stairs or traffic • Stay with the person and support them when the seizure ends • Keep onlookers away and explain what is happening • Stay calm 	<ul style="list-style-type: none"> • DON'T grab hold of a person unless there is sudden danger such as stairs or an approaching car • DON'T shout or startle the person • DON'T give liquids or oral medications until conscious • DON'T leave them alone until they are back to baseline • This seizure can be confused with drug use or alcohol intoxication, mental illness, behavior issues, or a stroke