

Childhood Seizures

Pediatric seizures are varied and are usually recognized early in childhood and can be definitively treated with certain medications, called anticonvulsants. Seizures may range from petit mal or absence seizures, as shown by very short lapses in verbal processing and other cognitive functioning, to the full grand mal seizures where the child has uncontrolled jerking of convulsions of all four extremities, may have fecal and urinary incontinence, may attempt to bite the tongue and is very sleepy after the seizure has finished. When such seizures are noted on the pool deck, the bystander should yell for help (summon lifeguards), and stay with the swimmer until additional medical help has arrived. The top priority for post-seizure management is to keep the child's airway open and to protect the child from further injury by laying him on his side. Children should not stop taking their anti-convulsant medication or alter their scheduled dosages, since breakthrough seizures may occur. After a seizure has been recognized in a child and she / he is stabilized; the parent(s) or guardian AND the child's coach should be notified.

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Disability Committee- VSI