



Nursing Care Quality Assurance Commission

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Registered Nurses (RN) Coordinating Seizure Management

In certain community based health care settings, schools, and other institutions, registered nurses are responsible for the coordination of care for individuals with seizure disorders. Registered nurses collaborate with family members, health care providers in the community, and other licensed and unlicensed assistive personnel to create individualized plans for client care.

Role of the Registered Nurse

As coordinator of the care plan it is critical that the RN consider the client/patient/resident/student as an individual with unique needs. Factors to consider in the development of an individualized seizure management plan may include:

- Acuity level.
- Brief medical history of client's seizure disorder, including seizure classification, medications and devices used to control symptoms, and any known triggers for seizure activity.
- Client's current medical treatment plan and orders, if applicable.
- Client needs for assistance with care plan and potential gaps in self-care; in which situations will the client need assistance with medications or activation of devices?
- If medications will need to be administered on a regular basis, which personnel are available and legally able to assist with this task? Agency and institution standards and rules may differ, depending on the setting for care of the client.
- If client will need regular assistance with activation of a device, which personnel will be available to assist, if client is unable to perform the activity?
- Description and information about typical emergent situations the client may have experienced, including early indications of impending seizure activity and types of seizure activity the client is likely to exhibit.
- Community resources, including level of emergency medical services available and usual response time.

Emergency plan

The emergency care plan is a component of the comprehensive seizure management care plan. The emergency care plan may include:

- Description of “emergency” for this individual.
- Medical treatment plan for this individual during an emergency (may include medications or devices).
- Which personnel will be available to assist during an emergency?
- Tasks to be performed by each team member.
- When should Emergency Medical System (EMS) be activated?
- Follow-up plan, including notification of significant others and appropriate members of the healthcare team.

In school settings, an emergency treatment plan may not include provisions for the RN to delegate the administration of non-oral medications to unlicensed individuals. Depending on the needs of the individual student, the licensed health professionals who are legally able to administer non-oral medications may as designated by the RN, be required to ensure student safety. Unlicensed assistive personnel may, as designated by the RN, activate devices such as vagal nerve stimulators, if their use is part of the Individualized Health Plan for the care and safety of the student.

Case example:

CJ is a 5 year old child with a seizure disorder which was diagnosed at age 2. His health status, cognitive function, and developmental status are all within normal limits. He has been hospitalized four times in two years for intractable seizures and has been on three different oral medications. He seems to have breakthrough seizures at unpredictable times no matter what medication he is on. His neurologist has prescribed diazepam rectal gel and has asked his parents to give him one if his seizures last more than five minutes. They have never actually done this, because each time they have called 911 or have just taken him to the emergency department. He has received intravenous diazepam on these occasions. His parents and doctor would like the school personnel to give him diazepam gel if he has a seizure lasting more than 5 minutes at school. His is in all day kindergarten. The school nurse is in the building two mornings a week.

Planning for this child’s care should include the elements listed in the policy for seizure management, with an emphasis on the plan for a seizure event at school. Knowledge of EMS response time and capabilities will be essential; since the school nurse cannot make plans to include regular delegation of the medication.

Elements of care planning should include areas of concern:

- Emergency Medical System (EMS) response time
- Family availability

- Physician input re likelihood of need for med & possible alternate plans
- Assessment of availability of other licensed personnel in this school.

* **WAC 246-840-800 Scope of practice -Advisory opinions**

(b) The opinion is not legally binding and does not have the force and effect of a duly promulgated regulation or a declaratory ruling by the commission.