

MODEL PROTOCOL

INTRANASAL ADMINISTRATION OF SEIZURE EMERGENCY MEDICATION USING ATOMIZER

Disclaimer: NASN's model protocols and/or language are intended as examples that may serve as a tool for those responsible for drafting protocols that meet the needs of a local school or district. These examples are not authoritarian, nor should they be viewed as complying with any requirements specific or unique to any school or district. Model policies and language should not substitute or replace the advice of legal counsel and/or research on applicable federal or local laws, regulations or ordinances.

Needed Supplies:

- Seizure emergency action plan
- Documentation log
- Syringe
- Needle
- Atomizer
- Prescribed medication
- Gloves
- Bulb syringe
- Sharps container

Basic Seizure First Aid Procedures:

For all seizures:

- Stay calm and track time
- Keep student safe
- Do not restrain
- Do not put anything in mouth*
- Stay with student until fully conscious
- Record seizure in log

For generalized tonic-clonic seizure:

- Protect head
- Keep airway open/watch breathing
- Turn student on side

A Seizure Becomes an Emergency (ACTIVATE EMS) When:

- Student has a first-time seizure
- Convulsive (tonic-clonic) seizure lasts longer than 5 minutes
- Student has repeated seizures without regaining consciousness
- Student is injured or has diabetes

- Student has breathing difficulties
- Student has a seizure in water
- For students with a known seizure disorder, it is the first episode requiring emergency treatment
- Any concerns with airway, breathing, circulation, or other vital signs

*Except for buccal or oral seizure rescue medication, as ordered by HCP (National Association of School Nurses, 2018).

Procedure:

1. If possible, wash your hands.
2. Assemble the needed supplies.
3. Put on gloves.
4. Check the vial of medication to ensure that it is:
 - a. for the right child
 - b. the right medication
 - c. the right dose
 - d. being given at the right time
 - e. being given by the right route
 - f. not expired.
5. Ensure that the proper amount of time has passed prior to administering the student's seizure medication.
6. If there is another adult present, have them call EMS/911 as you administer the medication.
7. Twist or place the needle onto the syringe.
8. Remove the cap from the vial of medication.
9. Insert the needle into the vial and withdraw prescribed amount of medication.
10. Pull the needle and syringe out of the vial and verify the dose of the medication.
11. Twist off or remove the syringe from the needle.
12. Attach the atomizer tip to the syringe and twist into place.
13. Discard the needle in a sharps container.
14. Look into the child's nostrils to determine if there is fluid or mucous in the nostrils.
15. If drainage or mucous is present, use a bulb syringe to remove it.
16. Using your free hand to hold the crown of the head stable, place the tip of the atomizer snugly against the nostril aiming slightly up and outward.
17. Quickly compress the syringe plunger to deliver half of the medication into the nostril.
18. Move the device over to the opposite nostril and administer the remaining medication into that nostril.
19. The child may grimace or appear more restless momentarily after the medication is given.
20. Remove gloves.
21. If EMS/911 has not been called yet, call 911 or EMS services.
22. Stay with the child, monitoring breathing.
23. If breathing stops, begin rescue breaths.
24. If breathing and heartbeat stop, begin CPR.
25. Once rescue squad arrives, inform them of medication administered, including type of medication, dose and time.
26. Remember to dispose of all used equipment and bottles of medicine safely out of the reach of children.
27. Wash hands.
28. Document the medication administration in the student's medication administration log along with what was observed during the seizure on the documentation log.
29. Follow up with the parent or guardian and healthcare provider, as needed.

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