

Seizure Packet

New forms must be completed annually.

Please Note

- Your physician must complete and sign the seizure action plan**. A new plan is to be submitted annually before the first day of school.
- A medication request form must be completed by your physician for any rescue or daily medications to be given during the school day.
- The parent questionnaire will provide our health office personnel with additional information for 504 plans and staff training.

***** If a current seizure action plan is not submitted, any seizure activity will warrant 911 to be called and your child will be taken to the nearest hospital.***

Dear Parent/Guardian:

Evanston/Skokie School District 65 addresses the needs of students with chronic medical conditions who attend its schools. Your student has been identified as a child with seizures attending a school within School District 65 and your child's health needs are important to us. Managing seizures in the school setting requires parents and health office staff to work closely together. District 65 health office personnel will assist in ensuring that staff working with your student have the training and information they need to keep them safe throughout the school day.

District 65 requires students with a diagnosis of seizures to provide a current Seizure Action Plan (SAP) completed by the child's healthcare provider annually. Parents/guardians are responsible for communicating changes to your child's plan as necessary. This form is required before the first day of school to allow the health office personnel time to review and address any questions or special considerations. Additional information that your child's healthcare provider chooses to share is useful and will be incorporated as we develop a 504 plan for your student. A meeting with you and school staff will be scheduled close to the beginning of the new school year. In order for the health services team to properly care for your student, we ask that you review and complete the enclosed information.

Please feel free to contact us with questions or concerns.

Jeanne McCullough, MSN, RN, PEL-CSN
Director of Health Services
Evanston/Skokie School District 65

Seizure Action Plan (SAP)

A SAP is required before the first day of school and must be renewed annually. This is a plan that must be completed by your student's healthcare provider and contains emergency medical orders in the event that your student experiences seizure activity while at school. If a current seizure action plan is not submitted, **any** seizure activity will warrant 911 to be called and your student will be taken to the nearest hospital.

[Seizure Action Plan ENG](#)

[Seizure Action Plan SPA](#)

Parent Seizures Questionnaire

*Please provide updates to your student's Seizure Parent Questionnaire annually and when anything has changed with your child's medical **needs**.*

[Seizure Parent Questionnaire ENG](#)

[Seizure Parent Questionnaire SPA](#)

Medication Request Form

When a student's licensed health care provider and parent/guardian believe that it is necessary for the student to take prescription and/or over-the-counter medication during school hours and/or for emergency care, a request for the school to administer the medication to the student, or for the student to self-administer medication must be submitted. No School District employee shall administer to any student, or supervise a student's self-administration of, any prescription or non-prescription medication until a completed [Medication Authorization Form](#) is received. Medication Authorization Forms must be signed by a healthcare provider as well as the parent/guardian and submitted to the school health office. This form is valid for the current school year and must be renewed annually at the beginning of each school year.

[Medication Authorization Form](#)

[Student Medication Information](#)

Release of HealthCare Information

The Authorization To Release / Exchange Confidential Information form allows a parent/guardian to give authorization to a school designee access to their child's health records and allows for healthcare providers to share health information if requested by the designee.

[Release of Information \(ROI\)](#)