REV 09-2023

# PITTSBURGH PUBLIC SCHOOLS – HEALTH SERVICES

## DIASTAT – SEIZURE ACTION PLAN FOR SCHOOL

**Enter School Year**_____ **Enter Current Date**_____

| | | | | |
|---|---|---|---|---|
| LAST NAME | | | DOB | |
| FIRST NAME | GENDER | Male ☐ | Female ☐ | Non-Binary ☐ |
| SCHOOL | GRADE | | | |

**DATE OF LAST SEIZURE**_____

**PLEASE DESCRIBE ALL SEIZURE PRESENTATIONS, TYPICAL LENGTH, COMPLICATIONS, ETC.**
**(Example:** The most common seizures are staring spells occasionally accompanied by chewing mouth movements and turning of the head to the left side. Duration-usually last less than 5 minutes. Afterward, student may be a little sleepy. Student may also have tonic clonic seizures lasting less than 2 minutes.)
**PLEASE DESCRIBE EXACTLY WHAT SEIZURE TYPE OR SEIZURE DURATION SHOULD BE TREATED WITH DIASTAT.**

**INDICATIONS FOR DIASTAT:**

**MEDICATIONS:**

**ARE THERE RESTRICTIONS OR LIMITATIONS OF ANY SCHOOL ACTIVITIES? (I.E. GYM, SPORTS, OTHER) YES ☐ OR NO ☐**

**If yes, describe**

**Diastat mg should be given rectally if student has a seizure longer than mins.**

**Was Diastat used in the past? Yes ☐ or No ☐ If yes, when?**

**List any side effects that occurred after use**

**For seizure activity in school:**

1. The student should be carefully placed on their side.
2. Cushion and protect student's head.
3. 911 should be called. The school nurse should be called to immediately return to the school or come to the scene.
4. Nothing should be placed in the student's mouth. The location should be cleared of nonessential personnel.
5. The parents should be called.
6. If the student has a seizure lasting longer than_____minutes,_____mg of rectal diastat should be given by the nurse or the paramedic, whoever arrives first. Following diastat administration, the student should be placed back in the recovery position and their breathing and pulse should be monitored every 2-3 minutes until paramedics arrive.

✘ NEUROLOGIST SIGNATURE ✘ PRINT NAME ✘ DATE

DATE PHONE FAX

✘ PARENT/GUARDIAN SIGNATURE ✘ PRINT NAME ✘ DATE