

Checklist Instructions
<p>Each step/item in the following checklist must be completed prior to a school staff being able to provide the seizure rescue intervention(s) to the student in the school setting. The most appropriate person at the school must verify that all of the steps have been completed and that the school staff are ready to provide the student-specific seizure rescue intervention(s).</p>
Step 1 - Seizure Action Plan and Medical Alert Information Form (SAP)
<p><input type="checkbox"/> Confirm that the Seizure Action Plan and Medical Alert Information Form (SAP) form is fully completed and available at the school.</p>
Step 2 - Identification of School Staff
<p><input type="checkbox"/> Identify the non-medical school staff who will be trained to provide the student’s seizure rescue intervention(s) in the school setting.</p>
Step 3 - NSS Seizure Rescue Intervention Training Request Form
<p><input type="checkbox"/> Complete the NSS Seizure Rescue Intervention Training Request form and fax it to 604-708-2127 or email it to nssreferrals@cw.bc.ca</p> <p style="text-align: center;">*** Note: It is best practice to ensure steps 4-6 are completed before the NSS the rescue intervention training session (step 7) however, this is not mandatory. ***</p>
Step 4 - Seizure Rescue Intervention Training for Non-medical School Staff online learning module
<p><input type="checkbox"/> Prior to the NSS rescue intervention training session, ensure that all of the staff identified in step 2 have completed the Seizure Rescue Intervention for Non-Medical School Staff module on the Learning Hub (Sign-Up Instructions). A certificate is provided to participants upon completion of the online training module, and can be provided to school administration to verify the training has been completed.</p>
Step 5 – Parent/Guardian Information Sharing Session
<p><input type="checkbox"/> Hold an information sharing session with the student’s parent/guardian, the non-medical school staff who were identified in step 2, and school administrator/case manager. During this session, all the information in the student’s SAP is to be reviewed, including:</p> <ul style="list-style-type: none"> • A description of what the student’s seizures look like so the non-medical school staff can recognize them. • A description of how long the student’s seizures normally last. • A description of any auras (warning signs) that would indicate the student is going to have a seizure. • A description of any triggers that may make seizures more likely (e.g., illness, lack of sleep flashing lights). • A description of how the student usually behaves after a seizure. • A description of the student’s typical seizure patterns: <ul style="list-style-type: none"> ○ time of day they typically happen ○ how long they typically last (duration) and, ○ how often they typically occur (frequency). • A description of any student specific care that is to be provided during and/or after a seizure. • Any student-specific instructions for seizure first aid (e.g., what would the school staff do if the student has a

seizure while in a wheelchair).

- Rescue intervention:
 - when to provide the rescue intervention (e.g. if seizure lasts longer than __ minutes);
 - what intervention to provide (e.g., lorazepam medication); and,
 - how much of the rescue medication to provide (e.g., 1 tablet).
- If the student uses midazolam as their rescue intervention, a demonstration of how the school staff should line up the plunger with the pre-marked line (or tape) on the syringe that the parent/guardian has marked to ensure that the correct dose will be given. This demonstration will be done using the student’s supplies.
- Completing seizure log (i.e., how, what, and where to document any seizures and/or seizure rescue intervention(s) provided to the student).
- When to call 911.
- When to call the parent/guardian.

Step 6 – Seizure Rescue Intervention Supplies at School

- Confirm that the appropriate supplies are available at school (as per the order on the SAP). **Note:** a student may have only one rescue medication (either lorazepam or midazolam) as their seizure rescue intervention, or they may have both a medication (either lorazepam or midazolam) and a Vagus Nerve Stimulator (VNS) as their rescue interventions. If the student has midazolam as their rescue intervention, they must have either buccal midazolam or intranasal midazolam, but not both.
 - Lorazepam (Ativan) sublingual tablet(s) – a **single dose** in a pharmacy labeled container/package with the student’s name, medication name, dosage, route of administration, indication for use, and expiry date.
 - Midazolam in a pharmacy labeled vial with the student’s name, medication name, dosage, route of administration, indication for use, and expiry date, **and:**
 - a 3 ml luer-lock syringe marked with the appropriate dosage (number of millilitres) prescribed for the student. The **dosage must be marked on the syringe** by the parent/guardian either by drawing a line or by marking with a piece of tape.
 - a blunt needle to withdraw the medication from the midazolam vial.
 - a nasal atomizer (for intranasal administration only).
 - Vagus Nerve Stimulator (VNS) - the student’s magnet may be a wrist band/watch or a pager/belt clip style.

Step 7 - NSS Seizure Rescue Intervention Training Session

- Confirm that the school staff identified in step 2 have attended the NSS Seizure Rescue Intervention Training session and the NSS Coordinator has provided the school with a copy of the completed and signed NSS Seizure Rescue Intervention Training Documentation Record.

IMPORTANT: The school staff identified in step 2 **are not able** to provide any seizure rescue intervention(s) until all 7 of these steps above have been completed and confirmed by the school. Prior to these steps being completed, any school staff who have previously been trained in seizure first aid (e.g., through a Public Health Nurse or Epilepsy BC) **and** who have been to the parent/guardian information sharing session may be able to provide basic seizure first aid as per the student’s SAP and any applicable school district policies/directives.