		Orders for School and Childcare Settings		
PARENT/GUARDIAN complete and signification of the complete and significant complete and signific				
	Birth date:		Place	
Parent/Guardian Contact:	Phone:		child's	
Emergency Contact:	Phone: Grade:		photo here	
School:		de: ☐ hunger ☐ temperature ☐ Other:	F	
Triggers: ☐ tiredness ☐ flashing lights ☐ Seizure Aura (if any):	_ iliness	☐ nunger ☐ temperature ☐ Otner:		
Seizure history: Convulsive Focal	□ Abse	ence Date of last known seizure		
Describe:				
Antiseizure Medication Taken at Home C	ommon side	e effects		
Other Seizure Treatments/Special Diet Th	erapy:			
	e full respor	follow this plan, administer medication and care for my chilnsibility for providing the school with prescribed medication	and devices. I	
ARENT SIGNATURE DATE		SCHOOL NURSE SIGNATURE DATE	_ □ 504 plan □ IEP	
ARENT SIGNATURE DATE		SCHOOL NORSE SIGNATURE DATE		
EALTH CARE PROVIDER to complete all	items, SIC			
IF YOU SEE THIS:		DO THIS:		
Convulsive Generalized Tonic Clonic:	ناحما مما	Time the seizure Keep selm Provide reseaurance		
You will see loss of consciousness. Stiffening of the body. Rhythmic jerking movements. Convulsive seizures may		 Keep calm. Provide reassurance. Protect head, keep airway clear, turn on side if possible. 		
ast 1-5 minutes. The child may have a warning (aura)		4. Do not place anything in mouth.		
before the seizure. Sleepiness and confusion ma		5. Call 911 if student is injured or has difficulty breathing.		
after the seizure.	.,	6. Call parent.		
		7. Stay with student until recovered from seizure.		
		8. Administer rescue treatments as marked below	'.	
Focal:		 Time the seizure Gently guide child away from danger. 		
These seizures may begin with an aura. They may be partly alert or unconscious. You may see lip smacking,		3. Stay with student and reassure them until recovered from seizure.		
chewing, eye blinking, or picking at clothes. These seizures		4. Do not treat staring that is stopped by a touch or a nudge.		
usually last 1-2 minutes.		5. Call parent.		
		6. Administer rescue treatments as marked below	'.	
Absence: You will see quick changes in alert				
May see eye flutter or small twitching. Usually las	t less			
than 10 seconds.				
Rescue Treatments				
☐ Child has a VNS. Child/staff may swipe with a Give rescue medications below if seizure		nay swipe at onset of seizure and every 60 seconds until seconds within	seizure stops.	
Give rescue medications below it seizure	s does not s	stop withinniindtes.		
If seizure <u>lasts longer</u> than minutes administe	er:			
☐ Diastatmg rectally	Midazola	ammg in the nose	cheek	
☐ Multistep seizure rescue plan – Pleas	se see attac	ched letter for details.		
·				
If <u>cluster</u> of or more seizures in min ac	lminister:			
☐ Diastatmg rectally	☐ Midazola	ammg in the nose	cheek	
☐ Multistep seizure rescue plan – Pleas	se see attac	ched letter for details.		
·				
	Call 911 im	mediately or Call 911 if seizure does not stop with	in 5 minutes	
Other:				
If no emergency medication is at school a	and the ch	nild is experiencing seizures:		
Call family to bring medications to school or	pick up ch	ild. Call EMS if seizure lasts more than min		
ccommodations: Always take seizure action	on plan an	d emergency medication for school activities, sports	and field trips	
close adult supervision when swimming or cli		·	•	
EALTH CARE PROVIDER SIGNATURE P	RINT PRO	OVIDER'S NAME PHONE/FAX D	DATE	