

## SEIZURES

SEIZURE TYPE	WHAT IT LOOKS LIKE	OFTEN MISTAKEN FOR	WHAT TO DO	WHAT NOT TO DO
SIMPLE PARTIAL (Also called Jacksonian)	<p>Jerking begins in fingers or toes, can't be stopped by person's, but person stays awake and aware.</p> <p>Jerking may proceed to arm, and sometimes spreads to whole body and becomes a convulsive seizure.</p>	<ul style="list-style-type: none"> <li>• Acting out, bizarre behavior</li> </ul>	<ul style="list-style-type: none"> <li>• No First Aid necessary, unless seizure becomes convulsive; then first aid as noted above.</li> </ul>	
SIMPLE PARTIAL (Also called Sensory)	<p>May not be obvious to onlooker other than person's preoccupied or blank expression. Person experiences a distorted environment. May see or hear things that aren't there; may feel unexplained fear, sadness, anger, or joy. May have nausea, or experience odd smells, and have a generally "funny" feeling in the stomach.</p>	<ul style="list-style-type: none"> <li>• Hysteria</li> <li>• Mental Illness</li> <li>• Psychosomatic illness</li> <li>• Parapsychological or mystical experience</li> </ul>	<ul style="list-style-type: none"> <li>• No action needed other than reassurance and emotional support.</li> </ul>	
COMPLEX PARTIAL	<p>Usually starts with blank stare, followed by chewing, followed by random activity. Person appears unaware of surroundings, may seem dazed and mumble. Unresponsive. Actions clumsy, not directed. May pick at clothing, pick up objects, try to take clothes off. May run, appear afraid. May struggle or flail at restraint. Once pattern established, same set of actions usually occur with each seizure. Lasts a few minutes, but post-seizure confusion can last substantially longer. No memory of what happened during seizure period.</p>	<ul style="list-style-type: none"> <li>• Drunkenness</li> <li>• Intoxication on drugs</li> <li>• Mental Illness</li> <li>• Indecent exposure</li> <li>• Disorderly conduct</li> <li>• Shoplifting</li> </ul>	<ul style="list-style-type: none"> <li>• Speak calmly and reassuring to person and others.</li> <li>• Guide gently away from obvious hazards.</li> <li>• Stay with person until completely aware of environment.</li> <li>• Offer to help get person home.</li> </ul>	

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ATONIC SEIZURES (Also called Drop Attacks)	The legs suddenly collapse. After 10 seconds to a minute, the person recovers, regains consciousness, and can stand and walk again.	<ul style="list-style-type: none"> <li>• Clumsiness</li> <li>• Lack of good walking skills</li> <li>• Normal "childhood" stage</li> </ul>	<ul style="list-style-type: none"> <li>• No First Aid needed unless the person hurts self in falling</li> </ul>	
MYOCLONIC SEIZURES	Sudden brief, massive muscle jerks that may involve the whole body or parts of the body. May cause person to spill what they were holding or fall out of a chair.	<ul style="list-style-type: none"> <li>• Clumsiness</li> <li>• Poor coordination</li> </ul>	<ul style="list-style-type: none"> <li>• No First Aid needed</li> </ul>	
INFANTILE SPASMS	Starts between 3 months and two years. If a child is sitting up, the head will fall forward, and the arms will flex forward. If lying down, the knees will be drawn up; with arms and head flexed forward, as if the baby is reaching for support.	<ul style="list-style-type: none"> <li>• Normal movements of the baby, especially if they happen when the baby is lying down.</li> </ul>	<ul style="list-style-type: none"> <li>• No First Aid needed</li> </ul>	

All seizures must be documented using appropriate form. Seizures which must be reported to the health care professional are:

- a. Any person having a seizure with no known history of seizures.
- b. Any change in frequency or type of seizures.

Reference:

DCH\_Curric.pdf - Basic Health/Medications. (n.d.). Retrieved from <http://www.mdch.state.mi.us/DCH-GHomeCurriculum>