Concern for Status Epilepticus

Initial Assessment
- ABC
- O₂
- IV access
- Intravenous & telemetry
- POC glucose

Initial lab testing as indicated
- CBC, BMP, LFTs, EKG, AED level, lactate, CBC, U&S

Continued seizures?
- 3-10 minutes

Administrator: 1st Line (within 30sec)
- IV Lorazepam 0.1 mg/kg/dose, max 4 mg/dose - May repeat once after 3-5 minutes
  If no IV access, choose one of the following and give as a single dose:
  - IM Midazolam 1 mg for <40 kg, 5 mg for 13-40 kg
  - Rectal Diazepam 0.2-0.5 mg/kg/dose, max 20 mg/dose

Continued seizures?
- 15-40 minutes

Administrator: 2nd Line (within 10-15min)
- IV Levetiracetam 600mg/kg, max 4500mg
- IV Valproate 40mg/kg, max 3000mg
- IV fosphenytoin 20mg PE/kg, max 2000mg

Continued seizures?
- 45-60 minutes

Secure airway (as indicated or before 3rd line)
- Use short acting paralytic, if possible
- Suggested induction agents
  - Midazolam - 0.2mg/kg IV
  - Propofol - 1-2 mg/kg IV

Administrator: 3rd Line

Continued therapy
- Midazolam (preferred) - Init 0.2 mg/kg over 1-2 minutes,
  repeat every 5 minutes until seizures stop (max total load of 2 mg/kg)
  Initial iv rate, 0.1 mg/kg/hr infus.
  Will need to convert to mg/hr to program IV pump
- Propofol - load, 1-2 mg/kg IV over 1-2 min; repeat every 5 minutes until seizures stop (max
  total load of 10 mg/kg)
  Initial iv rate, 20 mg/kg/min
  Ramp 20-40 mg/kg/min, re-dose 1st bolus, then 1 by 10 mg/kg/min

Order STA, EEG
Consult neurocritical care
Order CT Head

Continued seizures?
- >60 minutes

Administrator: 4th Line

Ketamine
- Init 1.3mg/kg IV, repeat q5min PRN, max 5 mg/kg
  - Initial iv rate, 1 mg/kg/min
  - Range 7.5-100 mg/kg/min (re-dose, then 1)

Paraldehyde
- Init 5 mg/kg IV with rate up to 90 mg/kg/min, repeat q15-30min PRN, max 20 mg/kg
  - Initial iv rate, 1 mg/kg/min
  - Range 1-10 mg/kg/hr (re-dose, then 1)

Created: 6/2021
Department of Emergency Medicine