

## Status Epilepticus

**Definition:** A neurologic disorder characterized by continuous seizures lasting >15 minutes or a series of seizures lasting >30 minutes without a return to baseline consciousness

### Remember the AAP

| Time          | Intervention |  |
|---------------|--------------|--|
| 0-5 minutes   | A            | ABC's, AMPLE Hx(Allergies, Meds, PMHx, Last meal, events leading to presentation), Adjuncts (glu, Na <sup>+</sup> , Ca <sup>++</sup> , ABG, anticonvulsant levels) |
| 5-10 minutes  | A            | Ativan 0.1mg/kg IV, can cause respiratory depression and ↓ BP, consider IO if no IV access available   |
| 10-20 minutes | P            | Phosphenytion 20mg/kg IV (2-3mg/kg/min) <b>can cause respiratory depression, ↓ BP, and arrhythmias</b>   |
|               | A            | ABC's  |
|               | A            | Repeat Ativan .1mg/kg IV   |
| 20-30 minutes | P            | Phenobarbital 20mg/kg IV over 5-10minutes, <b>can cause respiratory depression and ↓BP</b>   |
|               | A            | ABC's, anticipate intubation and volume bolus may be needed  |
| >30 minutes   | A            | Repeat Ativan .1mg/kg IV   |
| 40-60 minutes | P            | Repeat Phenobarbital 10 mg/kg aliquots x2 <b><u>WILL cause respiratory depression, ↓BP</u></b>   |
|               | A            | ABC's, Intubate  |
|               | A            | Arterial line for BP monitoring (consider) and central line for possible Dopamine  |
|               | P            | to PICU, for pentobarbital or versed drips, consider continuous EEG, especially if neuromuscular blockade needed (goal is burst suppression)                       |

#### Head CT indications:

Head trauma  
Evidence of ↑ ICP  
Focal neurologic deficits  
Focal seizure activity

#### LP contraindications:

Suspected ↑ ICP  
Focal neurologic deficits  
Cardiopulmonary instability  
Severe coagulopathy or thrombocytopenia