FIRST AID FACT SHEET

Seizures and Epilepsy

A seizure is a sudden surge of electrical activity in the brain. Seizures may vary from muscle jerks through to severe and prolonged convulsions. Epilepsy is a neurological disorder which triggers recurrent and unprovoked seizures. Not all seizures are epilepsy, but all require first aid.

What to do

During a seizure
1. Follow DRSABCD St John Action Plan.
2. DO NOT
   + Restrain the casualty or restrict movement.
   + Put anything in the casualty’s mouth.
   + Move the casualty, unless in danger.
3. Protect casualty from environment: move furniture, cushion head and shoulders.
4. Ensure the airway is maintained.
5. Follow the casualty’s Seizure Management Plan if in place.
6. Record the duration of the seizure.

After a seizure
1. Place casualty into Recovery Position, ensure that the airway is clear and open.
3. Seek medical aid.
4. DO NOT disturb if casualty falls asleep, but continue to monitor breathing and response.

Call Triple Zero (000) for an ambulance if:
+ First ever seizure.
+ The seizure continues for more than five (5) minutes or another seizure quickly follows.
+ The casualty has been injured, is a diabetic or is pregnant.

Caused by
+ Head injury or high fever.
+ Brain tumour or stroke.
+ Poisoning or drug overdose.
+ Serious infection or lack of oxygen.

Signs & symptoms
+ Sudden spasm of muscles producing stiffness or rhythmic jerking movements. If standing, the casualty will fall which may result in injury.
+ Suddenly cry out.
+ Shallow breathing or breathing may temporarily stop, leading to pale, blue tinged lips and face.
+ Excessive saliva (frothing) from the mouth.
+ Changes in conscious state from being fully alert to confused, drowsy or loss of consciousness.

In a medical emergency call Triple Zero (000)

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