Student Name:	Student ID:	Date of Birth:	Emergency	Care Plan? Y	′ N

**Seizure Disorders** (Please delete or add any nursing diagnosis, interventions or outcomes that you feel are appropriate for your student).

Nursing Diagnosis	Nursing Interventions	Client Outcomes
Include those that apply based on the nursing assessment	Include those that are achievable in your school district	Include those that are tangible goals for the student in question
1) Risk for injury Risk Factors → uncontrolled movements during seizure, falls, drowsiness caused by anticonvulsants	<ul> <li>Instruct school staff on the correct positioning and strategies to take to prevent injuries</li> <li>Position the student to prevent injury</li> <li>Administer emergency medications as directed</li> <li>Monitor vital signs</li> </ul>	Student will remain free of injuries; school staff will be able to utilize methods to prevent injuries and administer emergency medications as needed.
2) Risk of Aspiration Risk Factors→ impaired swallowing, excessive secretions	<ul> <li>Position the student on their side after seizure activity</li> <li>Monitor the student's airway by assessing respiratory rate, depth, and effort.</li> <li>Note any signs of aspiration such as dyspnea, cough, cyanosis, wheezing, hoarseness or fever.</li> <li>Auscultate lung sounds</li> <li>Take vital signs as appropriate</li> <li>If client needs to be fed, then feed slowly and allow adequate time for chewing and swallowing.</li> <li>Note any presence of nausea, vomiting or diarrhea.</li> <li>Encourage oral care including brushing of teeth at least two times per day.</li> </ul>	Student will maintain patent airway and clear lungs sounds; student will be able to swallow and digest oral, nasogastric, or gastric feeding without aspiration.
3) Risk for ineffective airway clearance Risk Factor→ accumulation of secretions during seizure	<ul> <li>Auscultate breath sounds</li> <li>Monitor respiratory patterns, including rate, depth, and effort when abnormalities are expected</li> <li>Monitor pulse oxygen saturation levels if pulse oximeter is available</li> </ul>	Student will demonstrate effective coughing and clear breath sounds; student will maintain a patent airway at all times; student will be able to explain methods useful to enhance secretion removal; student will be able to explain the significance of changes in sputum to include

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	<ul> <li>Position the student to optimize respiration</li> <li>Help the student breathe deep and perform controlled coughing, if appropriate, after an episode.</li> <li>Administer medications as needed</li> </ul>	color, character, amount, and odor; identify and avoid specific factors that inhibit effective airway clearance; student will be able to report changes in airway clearance to the school nurse.
4) Risk for falls Risk Factor→ possible seizure	<ul> <li>Screen at-risk students for balance and mobility skills</li> <li>Determine whether the student's medication increases the risk of falling. (Consult with physician regarding the student's medication if appropriate)</li> <li>Thoroughly orient the student to the school environment</li> <li>If the student has a change in mental status, recognize that the cause is usually physiological and is a medical emergency. Consider possible causes for delirium. Consult with physician or healthcare provider immediately</li> </ul>	Student will be able to remain free of falls, if possible, change environment to minimize the incidence of falls, school staff will explain methods to prevent injury.
5) Impaired Memory related to seizure activity	<ul> <li>Monitor vital signs.</li> <li>Monitor orientation to person, place and time.</li> <li>Assess overall cognitive function and memory. The emphasis of the assessment should be everyday memory, the day to day operations of memory in real-word ordinary situations.</li> <li>Assess for memory complaints because memory loss may be the earliest manifestation of mild cognitive impairment</li> <li>Determine whether onset of memory loss is gradual or sudden. If memory loss is sudden refer the client to a physician or neuropsychologist for evaluation</li> </ul>	Student will demonstrate use of techniques to help with memory loss; student will demonstrate improved memory for everyday concerns.

	<ul> <li>Note the client's current medication and intake of any mind altering substances.</li> <li>Note the client's current stress level. Ask if there has been a recent traumatic event.</li> <li>Encourage the client to develop an aerobic exercise program</li> <li>Determine the clients sleep patterns</li> <li>Determine the clients blood sugar levels</li> <li>If signs of depression such as weight loss, insomnia, or sad affect are evident then refer the client for psychotherapy</li> <li>Perform a nutritional assessment</li> <li>Encourage the client use external memory devices</li> <li>If safety is an issue with certain activities, suggest alternatives.</li> </ul>	
6) Social isolation Risk factors→ unpredictability of seizures, community imposed stigma	<ul> <li>Establish a therapeutic relationship by being emotionally present and authentic</li> <li>Observe for barriers to social interaction</li> <li>Note risk factors</li> <li>Discuss/assess causes of perceived or actual isolation</li> <li>Establish trust one on one then gradually introduce the student to others.</li> <li>Allow the student opportunities to introduce issues and to describe his or her daily life.</li> <li>Promote social interactions. Support expression of feelings.</li> <li>Involve students in writing specific outcomes such as identifying what is most important from their viewpoint and lifestyle.</li> <li>Help the student identify appropriate diversional activities to encourage socialization.</li> </ul>	Student will be able to identify feelings of isolation; student will be able to practice social and communication skills needed to interact with others; student will be able to initiate interactions with others, set and meet goals; student will be able to participate in activities and programs at level of ability and desire; student will be able to describe feelings of selfworth.

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	<ul> <li>Identify available support systems and involved these individuals in the student's care</li> <li>Refer student and family to support groups, when appropriate</li> <li>Help the student identify role models and encourage interactions with others with similar interests</li> </ul>	
7) Ineffective Health Maintenance Definition: lack of knowledge regarding anticonvulsive therapy, fever reduction and/or febrile seizures	<ul> <li>Assess the student's feelings, values, and reasons for not following the prescribed plan of care, if applicable.</li> <li>Assess for family patterns, economic issues, and cultural patterns that influence compliance with a given medical regimen.</li> <li>Help the student choose a healthy lifestyle and to have appropriate diagnostic evaluations and follow up</li> <li>Assist the student in reducing stress</li> <li>Help the student and/or family determine how to manage complex medication schedules</li> <li>Refer the student and/or family to appropriate services, as needed</li> <li>Identify support groups for student and family related to the disease process</li> </ul>	Student/family will be able to discuss fear of or blocks to implementing health regimen; student/family will be able to follow mutually agreed on health care maintenance plan; student will meet goals for healthcare maintenance so he/she can fully participate and be successful in school.
8) Ineffective self-health management (for older children and adolescence)	<ul> <li>Establish a collaborative partnership with the student and/or family for purposes of meeting health-related goals</li> <li>Listen to the student's story about his or her illness self-management</li> <li>Explore the meaning of the student's illness experience and identify uncertainties and needs through openended questions</li> </ul>	Student/family will be able to describe scheduling of medications that meets therapeutic goals; student will be able to verbalize ability to manage therapeutic regimens; student will be able to collaborate with health providers to decide on a therapeutic regimen that is congruent with their health goals and lifestyle.

• Help the student enhance self-efficacy or confidence in his or her own ability to manage the illness • Involve family members in knowledge development, planning for selfmanagement, and shared decision making • Use various formats to provide information about the therapeutic regimen to the student and family when necessary • Help the student to identify and modify barriers to effective self-management. • Help the student self-manage his or her own health through teaching about selfmanagement strategies • Help the student maintain consistency in therapeutic regimen management for optimal results 9) Risk for delayed • Consider use of a screening tool to Family will be able to describe realistic, agedevelopment and appropriate patterns of growth and determine risk or actual deviations in disproportionate development; Student will participate in activities normal development. arowth • Regularly compare height and weight and interactions that support age-related measurements for the child or adolescent developmental tasks; student will display Risk Factors → effects of seizure disorder, parental consistent, sustained achievement of agewith established age-appropriate norms overprotection and previous measurements, if applicable appropriate behaviors and/or motor skills; • Recommend normal sleep and wake times achieve realistic developmental and/or growth milestones based on existing abilities, extent off for students to promote growth and disability, and functional age; attain study gains development • Encourage parents to take student for in growth patterns. routine health visits to the family physician or pediatrician. • Assess whether parents may benefit from social support groups, parenting classes, or online support groups.