

Epilepsy is a neurological condition affecting the brain. Having epilepsy means having a tendency to have seizures, which is when the brain's electrical activity is disrupted. There are many types of epilepsy. Pre-seizure symptoms may include feeling "fuzzy," or dizzy, fainting, headaches, vomiting, or "being vacant." Once seizures begin they may be mild or severe, not obvious ("staring") or obvious. Among the most common (but not the only) types of seizures are:

**Simple partial seizure** - may be fully conscious and just have twitches or jerks.

**Complex partial seizures** – consciousness is altered, may show confused behavior; may have effects such as lip-smacking, wandering, chewing. (Behaviors may seem purposeful but they are not and the person may not be aware of them.) Typically, the person is not aware of what occurred, though they were conscious. They may be tired afterwards.

**Absence (petit mal) seizures** – briefly loses awareness, appears to "switch off" or seem in a "trance". This, of course, can lead to missed class notes or not hearing part of a lecture or demonstration.

**Tonic-clonic (grand mal) seizures** – loses consciousness, becomes stiff and limbs jerk. Most common type. Last from a few seconds to longer. Leaves the person exhausted, confused, upset, and groggy, or with other effects. May be okay after 15 minutes or may o(f)2 (I6 (f)2 (f)-8 d4 (be)1

## Instructors can:

- Learn from the student and the D<sup>2</sup>A<sup>2</sup> adviser about epilepsy and the student's particular experience.
- Assist by being proactive about providing accommodations.
- Understand that the student may need to be absent for brief periods, or may be late to class if there was recent seizure activity.

## If someone is having a seizure:

- Stay calm.
- Loosen clothing around the person's neck.
- If the student is standing, and you are willing, prevent him/her from falling by holding him/her in a hug, or try to help her gently to the floor.
- Do not try to hold the person down or restrain them. This can result in injury.
- Do not insert any objects in the person's mouth. This can also cause injury.
- Do not allow a crowd to gather around the student experiencing a seizure.
- Reassure concerned bystanders who may be upset and ask them to give the person room.
- Remove sharp objects (glasses, furniture, and other objects) from around the person to prevent injury.
- After the seizure, it is helpful to lay the person on their side to maintain an open airway and prevent the person from inhaling any secretions.
- After a seizure, the person may be confused. Do not leave them alone.
- In many cases, especially if the person is known to have epilepsy, it is not necessary to call 911.
- Call 911 if the seizure lasts longer than 5 minutes or if another seizure begins soon after the first, or if the person cannot be awakened after the movements have stopped.
- As stated previously, it is often not necessary to call 911, however, do call 911 if you are uncomfortable with any of the above, as faculty and staff are not required to be in charge of such a situation.

## After the seizure:

- If not able to be done during the seizure, ensure that the student is on their side
- If the person is having trouble breathing call for emergency help.
- Provide a safe area where the person can rest.
- Do not give the person anything to eat or drink until she is fully conscious and aware of her surroundings.
- Stay with the person until he or she is awake and any confusion wears off. Most people feel sleepy or confused after a seizure.

Extracted from

## **Additional Resources:**

Four Things to do if a Student Has a Seizure	https://www.aphed.com/aphe-blog/post/36-
in Your Classroom (Advanced Professional	four-things-to-do-if-a-student-has-a-seizure-
Healthcare Education, LLC)	<u>in-your-classroom</u>
Seizure First Aid (Centers for Disease	https://www.cdc.gov/epilepsy/about/first-
Control and Prevention)	aid.htm
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