

POLICY: 555.32
TITLE: Pediatric Status Seizure

EFFECTIVE: 09/01/2026
REVIEW: 8/2028
SUPERCEDES:

APPROVAL SIGNATURES ON FILE IN EMS OFFICE

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PEDIATRIC STATUS SEIZURE

- I. AUTHORITY
Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE
To serve as a patient treatment standard for EMRs, EMTs, AEMTs, and Paramedics within their scope of practice.
- III. PROTOCOL
Status epilepticus is characterized by an actively seizing child who has either been seizing for more than ten minutes OR an actively seizing child with recurrent seizures with no reawakening between seizures.

**Provider Key: F = First Responder/EMR E = EMT O = EMT Local Optional SOP
P = Paramedic A=Advanced EMT D = Base Hospital Physician Order Required**

	F	E	O	A	P	D
ASSESSMENT	X	X	X	X	X	
POSITION: gently support head of child to avoid injury. Loosen tight fitting clothing.	X	X	X	X	X	
BLS AIRWAY: okay if airway patent. Support ventilations with appropriate airway adjuncts.	X	X	X	X	X	
SUPRAGLOTTIC AIRWAY: if GCS is < 8 and not rapidly improving, consider SGA.			X	X	X	
PULSE OXIMETRY: apply and monitor.		X	X	X	X	
CAPNOGRAPHY: apply and monitor if SGA has been placed.					X	
OXYGEN: 100% by non-rebreather mask or blow-by.	X	X	X	X	X	
VASCULAR ACCESS: IV/IO, rate as indicated.				X	X	
MIDAZOLAM: Do not delay for IV/IO access. - IM/IN: 0.2 mg/kg up to 10 mg. May repeat if seizure continues every 5 minutes, max total dose 20 mg. - IV/IO: 0.1 mg/kg up to 5 mg every 2 minutes until seizure stops or max total dose 10 mg.					X	
ECG MONITOR: lead placement may be delegated. Treat as indicated.					X	
TEST FOR GLUCOSE		X	X	X	X	
D10: 2-4 mL/kg IV/IO if blood sugar < 70 mg/dL for age > 28 days old or 2 mL/kg IV/IO if blood sugar < 40 mg/dL age ≤ 28 days old. Recheck blood glucose 10-minutes post infusion and repeat as needed.				X	X	
GLUCAGON: If no IV/IO access and unable to tolerate oral glucose, give 0.05 mg/kg IM (max 1 mg) if blood glucose < 70 mg/dL. Recheck blood glucose 10 minutes post injection. If blood glucose remains < 70 mg/dL, repeat dose.				X	X	

CONSIDER CAUSES

555.41 PEDIATRIC NON-TRAUMATUC SHOCK and 555.82 PEDIATRIC TRAUMA AND TRAUMATIC SHOCK
555.51 PEDIATRIC POISONING
555.53 PEDIATRIC OVERDOSE
Head Trauma – refer to 555.82 PEDIATRIC TRAUMA AND TRAUMATIC SHOCK

Pediatric Normal Vital Signs

Age	HR	RR	BP	Temp (C)	Temp (F)
<i>Premie</i>	120-170	40-70	55-75/35-45	36-38	96.8-100.4
<i>0-3 months</i>	100-160	35-60	65-85/45-55	36-38	96.8-100.4
<i>3-6 months</i>	90-120	30-45	70-90/50-65	36-38	96.8-100.4
<i>6-12 months</i>	80-120	25-40	80-100/55-65	36-38	96.8-100.4
<i>1-3 years</i>	70-110	20-30	90-105/55-70	36-38	96.8-100.4
<i>3-6 years</i>	65-110	20-25	90-110/60-75	36-38	96.8-100.4
<i>6-12 years</i>	65-100	14-22	90-120/60-75	36-38	96.8-100.4
<i>12+</i>	55-100	12-20	100-135/65-85	36-38	96.8-100.4