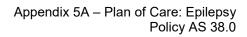




PREVALENT MEDICAL CONDITION — EPILEPSY Plan of Care				
	STUDENT IN	FORMATION		
Student Name	Date Of Birth			
Ontario Ed. #	Age		Student Photo (optional)	
Grade	Teacher(s)			
EN	MERGENCY CONTAC	TS (LIST IN PRI	ORIT	Y)
NAME	RELATIONSHIP	DAYTIME PHONE		ALTERNATE PHONE
1.				
2.				
3.				
Has an emergency resci	ue medication been presc	ribed? Yes	ſ	⊐ No
If yes, attach the rescue medication plan, healthcare providers' orders and authorization from the student's parent(s)/guardian(s) for a trained person to administer the medication.				
Note: Rescue medication training for the prescribed rescue medication and route of administration (e.g. buccal or intranasal) must be done in collaboration with a regulated healthcare professional.				
	KNOWN SEIZU	RE TRIGGERS		
CHECK (✓) ALL THOSE THAT APPLY				
☐ Stress	☐ Menstrual Cycle	Inactivity	☐ Inactivity	
☐ Changes In Diet	☐ Lack Of Sleep	☐ Electronic Stimulation (TV, Videos, Florescent Lights)		
☐ Illness	☐ Improper Medicat	☐ Improper Medication Balance		
☐ Change In Weather	Other	□ Other		
☐ Any Other Medical Co	ondition or Allergy?			



DAILY/ROUTINE EPILEPSY MANAGEMENT			
DESCRIPTION OF SEIZURE (NON-CONVULSIVE)	ACTION:		
	(e.g. description of dietary therapy, risks to be mitigated, trigger avoidance.)		
DESCRIPTION OF SEIZURE (CONVULSIVE)	ACTION:		
	NAGEMENT		
Note: It is possible for a student to have more than one seizure type. Record information for each seizure type.			
SEIZURE TYPE ACTIONS TO TAKE DURING SEIZURE			
(e.g. tonic-clonic, absence, simple partial, complex partial, atonic, myoclonic, infantile spasms) Type:			
Description:			
Frequency of seizure activity: Typical seizure duration:			





BASIC FIRST AID: CARE AND COMFORT		
First aid procedure(s):		
Does student need to leave classroom after a seizure? ☐ Yes ☐ No		
If yes, describe process for returning student to classroom:		
BASIC SEIZURE FIRST AID Stay calm and track time and duration of seizure Keep student safe Do not restrain or interfere with student's movements Do not put anything in student's mouth Stay with student until fully conscious		
FOR TONIC-CLONIC SEIZURE: Protect student's head Keep airway open/watch breathing Turn student on side		
EMERGENCY PROCEDURES		
Students with epilepsy will typically experience seizures as a result of their medical condition.		
Call 9-1-1 when: • Convulsive (tonic-clonic) seizure lasts longer than five (5) minutes.		
Student has repeated seizures without regaining consciousness.		
Student is injured or has diabetes.		
Student has a first-time seizure.		
•Student has breathing difficulties.		
Student has a seizure in water		
☀ Notify parent(s)/guardian(s) or emergency contact.		



★This information may remain or	n file if there a	are no changes to	o the student's medical condition.
A	UTHORIZ	ATION/PLAN	N REVIEW
INDIVIDUALS	WITH WHOM	THIS PLAN OF	CARE IS TO BE SHARED
1	2		3
4	5		6
Other Individuals To Be Contacte			
Before-School Program	□Yes	□ No	
After-School Program	☐ Yes	□ No	
School Bus Driver/Route # (If App	olicable)		
Other:			
This plan remains in effect for to on or before: notify the principal if there is a ne	the 20	20 school ye (It is the the plan of care of	ear without change and will be reviewed the parent(s)/guardian(s) responsibility to during the school year).
Parent(s)/Guardian(s):	Signature)	Date:
Student:	Signature	}	Date:
Principal:	Signature	3	Date:



Epilepsy Individual Care Plan: ______(name)

Student Name and Grade	Known Epilepsy Seizure Triggers:		
STUDENT PHOTO	☐ Stress ☐ Diet Change ☐ Illness ☐ Weather Change ☐ Menstrual Cycle	 □ Lack of Sleep □ Inactivity □ Electronic Stimulation (TV, Video, Florescent Lights) □ Medical Condition / Allergy □ Other 	

Basic First Aid	Tonic Clonic Seizure (Convulsive seizure with loss of consciousness, muscle stiffening, falling, followed by jerking movements.)
Stay calm and track time	1. Time the seizure
and duration of seizure.Keep student safe.	Protect from injury, quickly remove any hard objects that could cause injury.
 Do not restrain or interfere with student's movements. Do not put anything in 	 3. Protect the head as best you can - place something soft under the head. 4. Do not attempt to restrain the person or to stop the jerking. 5. Do not put anything in the mouth 6. Gently roll the person onto one side as soon as it is practical to do so.
student's mouth.	This will
Stay with student until fully conscious.	 Help keep the airway clear. Stay with the person until the seizure ends naturally. Calmly talk to the person until they regain consciousness. Let them know where they are, that they are safe and that you will stay with them while they recover.

Call an Ambulance (911)

- If the seizure lasts more than 5 minutes or a second seizure quickly follows.
- If the student remains non-responsive for more than 5 minutes after the seizure stops.
- If the student is having a greater number of seizures than is usual for them.
- If the student is injured, goes blue in the face or has swallowed water.
- If the student is pregnant.
- If the student has diabetes.
- You know, or believe it to be, the student's first seizure.
- You feel uncomfortable dealing with the seizure.

Emergency Contacts (List in Priority)				
Name	Relationship	Daytime Phone	Alternative Phone	