Status Epilepticus-PALS

1. What is the difference between generalized and partial seizures?

2. Define nonconvulsive status epilepticus (SE).

3. List the most common etiologies of status epilepticus.

4. How should you handle a child who is seizing and has poor air exchange?

5. List the indications for tracheal intubation in a patient with SE.

6. List the drugs that would be appropriate to use for rapid sequence intubation in a pt with SE. Which drugs are relatively contraindicated?

7. Describe the management of hypoglycemia and hyponatremia.

8. Describe the advantages of using lorazepam vs diazepam in a pt with SE.

9. List the dosages per kg for the administration of IV/IM/IN midazolam.
Status Epilepticus

1. What is the clinical difference between generalized and partial seizures?

2. What is the newest time-based criterion for the diagnosis of status epilepticus (SE)?

3. What is the reason some patients will develop pulmonary edema following an episode of status epilepticus?

4. Describe what happens to a patient’s vital signs when experiencing status epilepticus?

5. List the basic work up for patients presenting in SE.

6. Why choose ativan over versed for the initial treatment of SE?

7. 3 yo male presents to the ED with generalized tonic-clonic seizures. After securing adequate ABCs, how will you treat this patient’s seizures?

8. What are the concerns over using propofol as a continuous drip in the PICU? Look up propofol infusion syndrome in pediatric patients.