

**Northwest Community EMS System**  
**April 2017 CE: Seizures, Submersion and Special Needs**  
**Credit Questions**

Name:	Date submitted:
EMS Agency	Credit awarded (date):
EMSC/Educator reviewer:	Returned for revisions:
	Revisions recd.:

This packet should take 2 hours to complete – which earns you the equivalent of the 2 hour live CE class.  
 Sources of information: April CE handout and SOPs.

**Seizures**

1. **Seizures and epilepsy are *not* the same. Define seizure & explain the difference. (PP slide/handout)**

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2. **70% of seizure cases have an unknown etiology. The other 30% consists of: (handout)**

<p><b>Newborns and infancy</b></p> <ul style="list-style-type: none"> <li>a.</li> <li>b.</li> <li>c.</li> <li>d.</li> <li>e.</li> </ul>	<p><b>Young adults</b></p> <ul style="list-style-type: none"> <li>a.</li> <li>b.</li> <li>c.</li> <li>d.</li> <li>e.</li> </ul>
<p><b>Childhood</b></p> <ul style="list-style-type: none"> <li>a.</li> <li>b.</li> <li>c.</li> </ul>	<p><b>Older adults</b></p> <ul style="list-style-type: none"> <li>a.</li> <li>b.</li> <li>c.</li> <li>d.</li> <li>e.</li> <li>f.</li> <li>g.</li> <li>h.</li> <li>i.</li> <li>j.</li> </ul>

3. **Recently, there has been an updated Basic Classification System implemented when discussing seizures. What 3 key features are used when describing such events?**

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- .
- .

4. What is implied regarding where a seizure may begin in the brain when it is described as being a focal seizure?

5. Where is the origin of a seizure when it is described as being generalized in nature?

6. When describing a person's level of awareness, explain the following:

- Focal Awareness: \_\_\_\_\_
- Focal Impaired Awareness: \_\_\_\_\_
- Awareness Unknown: \_\_\_\_\_

7. A description of motor and other symptoms is important to document and relay to other medical professionals. Give examples of such additional information as identified in the handout and ppp.

8. When describing the level of awareness in a person who is experiencing a generalized seizure, what is assumed?

9. Terminology: (fill in the term based on the PP slide)

OLD	NEW
Absence seizure	
	Generalized
Myoclonic	
Petit Mal	
	Tonic Clonic
Simplex partial	
Complex partial	

10. Identify 4 long term plans used for the treatment of seizures.

- a.
- b.
- c.
- d.

**11. EMS is called to the scene in which the bystander states that the 18 month old pt became unconscious and stopped breathing. When trying to interpret the information being given on scene, what question would best identify the activity as a seizure related to trauma?**

- a. "Have you given the pt any medications today?"
- b. "Has the child had any recent illnesses in which there was a fever present?"
- c. "Has the child fallen or hit their head on anything that could an injury to the brain?"
- d. "Has the child ingested anything that they may either be allergic to or that would make them vomit?"

**12. What type of seizure is not considered a diagnosis of epilepsy, usually self-limiting but can be very scary for parents/caregivers because of the nature of presentation?**

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**13. In accordance with SOP, if EMS arrives on the scene of a pt actively having generalized tonic clonic activity; what should be done?**

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**14. If a pt should exhibit signs and symptoms of eclampsia in pregnancy with generalized tonic clonic seizure activity, what specific treatment is needed?**

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**15. Define status epilepticus and explain why it is so important to intervene.**

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**16. Not all "spells" are actual seizure activity. What other etiologies should be considered when encountering these situations?**

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## Populations with special considerations for EMS

17. When encountering a person with a central line catheter, give a brief description as outlined in the handout of what might be seen upon inspection?

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18. In accordance with the handout on page 8, who is the individual that most often will insert these devices?

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*\*(Because of this answer, these devices should be taken care of properly and should not be accessed by EMS without first permission and second proper instruction.)*

19. Identify 3 vascular device complications for patients listed in the handout.

a.

b.

c.

20. What consideration should be taken by EMS when a pt has a PICC line placed in the upper extremity?

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21. Why do patients require an insertion of a shunt as discussed in the handout and pp?

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22. What is the purpose for the shunt in this patient population?

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23. Why is hydrocephalus, left untreated, fatal in these pt populations?

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24. Define a tracheostomy.

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25. Why might a person need to have either a cricothyroidomy performed pre-hospital or a tracheostomy in the hospital?

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**26. List and explain the purpose of the 4 main parts of a trach tube.**

*A tracheostomy (trach) tube is a curved tube that is inserted into a tracheostomy stoma. All tracheostomy tubes have similar parts:*

**27. EMS Care of a child with a trach involves listening to \_\_\_\_\_. (handout)**

**28. What does the pneumonic DOPE stand for and why should this be checked always in pts with trachs?**

D:

O:

P:

E:

**29. Describe what a VAD is and how it works?**

**30. In accordance with SOP, what is the first priority when encountering a patient with a VAD?**

**31. What two special considerations must be appreciated when assessing a patient with a VAD?**

**32. How would you describe what a life vest is and why a patient might need one?**

**33. After reading the section in the handout on p. 12-14 regarding autism, identify one thing that can impact your practice in EMS.**

**Submersion and drowning injury**

*Item #34-40 pertains to the PCR's from class. These 5 reports will either need to be obtained from your nurse EMS coordinator or from the original packet from class. Please refer to them when completing the following questions.*

PCR Review #1		89 M car into the lake
In reviewing the PCR, what priority level is given to this pt in accordance with current SOP?		
In accordance with SOP, should this patient have been resuscitated?		
Is there a situation in which the pt should NOT be resuscitated?	(top of SOP)	
What are the EMS priorities of care for this patient?		
What is a common occurrence for submersion patients? What should you have in preparation for such situations?		
Is CPAP indicated in this patient scenario?		
When would CPAP be indicated?		
What should be done for a pt that is unresponsive with ineffective ventilations but still has a pulse?		
Should this patient be moved with CPR being done?		
PCR REVIEW #2		1M fell into a kiddie pool at a day care facility~ 10 sec of unresponsiveness
Based on dispatch info, who or what is needed to adequately work this scene?		
Are there any special considerations other than ITC needed by EMS to care of this patient?		
In reviewing the PCR, what priority level is given to this pt in accordance with current SOP?		
What are the EMS priorities of care for this patient?		
Should this pt via a family member or care giver be allowed to refuse care and transport to the hospital?		
Defend the above answer.		

PCR #3	59 M dispatched for drowning s/p fall
Who or what is needed to adequately work this scene?	
Are there any special considerations other than ITC needed by EMS to care of this patient?	
In reviewing the PCR, what priority level is given to this pt in accordance with current SOP?	
What are the EMS priorities of care for this patient?	
Is spinal restriction indicated in this patient scenario?	
Does this pt meet criteria for transport to L 1 or L 2 TC?	
Defend the above answer.	
PCR #4	3 M found in a pool
What barriers to care might influence patient treatment?	
In reviewing the PCR, what priority level is given to this pt in accordance with current SOP?	
What are the EMS priorities of care for this patient?	
PCR #5	4 M found in pool
In reviewing the PCR, what priority level is given to this pt in accordance with current SOP?	
What are the EMS priorities of care for this patient?	
After reviewing these cases, what themes are noted?	
As discussed in the SOPs, what important additional factor must NOT be overlooked with cases involving submersion type incidents?	