

Seizure record

Seizure record for _____

NAME OF PERSON COMPLETING THIS FORM _____

PHONE _____

DATE	TIME OF THE DAY/NIGHT	HOW LONG SEIZURE LASTED

DESCRIPTION OF THE SEIZURE AND OTHER INFORMATION TO BE DISCUSSED WITH THE DOCTOR:

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Use additional page if more space is required (available on request from the Epilepsy Centre).

Guidelines for Recording Seizures

Keeping a record of seizures is important because few doctors ever see their patient having a seizure and rely heavily on an accurate account from an observer when diagnosing epilepsy. There are many different types of seizure, and other conditions that can be misdiagnosed as epilepsy. A precise diagnosis is easier to make if a clear description of the person's seizures is available.

In addition, after diagnosis, the doctor will welcome an ongoing record of seizures, which details their frequency and any changes that may occur in the pattern or type of seizures. This information may guide the doctor's choice of antiepileptic medication and will also help assess the response to treatment.

Important information to consider

Phases

There may be several phases in a seizure that should be carefully observed and recorded. Remember to time the seizure from the beginning to the end and note the frequency if the seizures are very brief.

Build-up and onset

This may last for minutes, several hours or, rarely, days, in the form of a build-up of tension or irritability. A clear change in behaviour prior to the onset of a seizure only occurs in some people with epilepsy. In some instances, an 'aura' or warning (called a simple partial seizure), consisting of odd sensations, such as an unpleasant smell, tingling feeling, déjà vu, or 'butterflies' in the stomach, may precede a complex partial or tonic clonic seizure.

The seizure

This may be one of many different types and each person's seizure experience is unique to them.

The period after the seizure

Recovery may be immediate or may take a few hours or, rarely, a few days. There is often confusion and drowsiness immediately after some seizures such as tonic clonic or complex partial seizures.

The following questions should help you to gather useful information for the doctor.

- Date of the seizure
- Exact time of day or night
- What was the person doing at the time?
- Had the person just fallen asleep or woken up?
- What called your attention to the seizure (a cry, fall, stare or head-turn)?
- What parts of the body were affected?
- Was one side affected more than the other?
- Did their body become stiff?
- Did it jerk, twitch or go into convulsions?
- Was the person unconscious?
- If not, was there any alteration in awareness?
- Did their skin show changes (flushed, clammy, signs of blueness)?
- Did their breathing change?
- Did the person talk or perform any actions during the seizure?
- Was the person incontinent?
- Did the person vomit during or after the seizure?
- Did they bite their tongue or inside their cheek?
- Did any injuries result from the seizure?
- How did the person behave after the seizure (alert, drowsy, confused, irritable etc.)?
- After recovery did the person remember any unusual sensations before or at the onset of the seizure?
- How long did the person take to recover completely?
- Was there a known trigger?