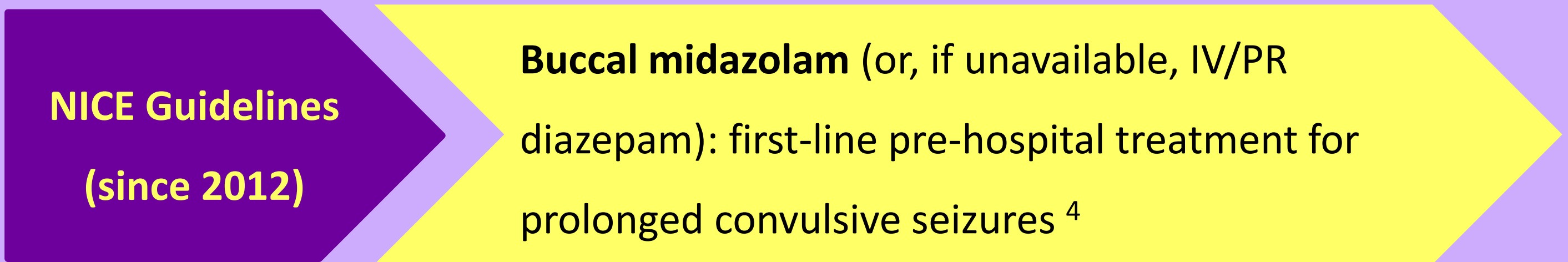


Overview

Seizures are a common cause for ambulance callouts in the UK. ¹
Most epileptic seizures occur in a pre-hospital setting, and of those who travel to hospital, most do so via ambulance. ^{2,3}



Despite this, paramedics have reported issues regarding various aspects of seizure management, including ^{3,5}

System structured to favour patient transfer to hospital	No access to patients’ medical histories or epilepsy information
Seizure training is limited and potentially inadequate	Decisions led by paramedic experience rather than published guidelines

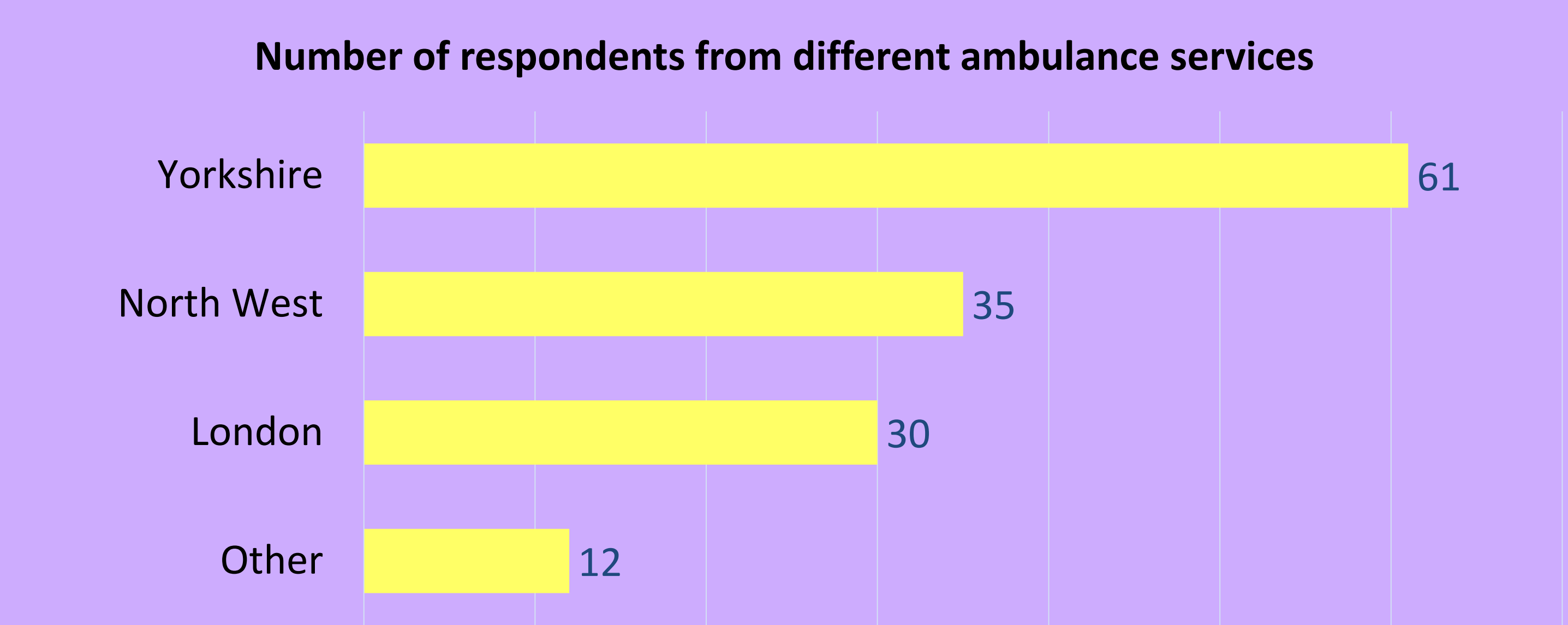
In 2015, the Joint Royal Colleges Ambulance Liaison Committee seizure guidelines were judged to be incomplete, specifically concerning patient conveyance to hospital and the cost-ineffectiveness of treatment guidelines. ⁶ An update was published in 2016. Until now, there had not been a study of the extent these guidelines are being followed by paramedics.

Design and Setting

SIMPLE	The questionnaire was accessed easily online via a simple survey tool and all responses were automatically saved
SHORT	The questionnaire was comprised of ten questions, with subsections for adult and child patient groups
ANONYMOUS	Ambulance clinicians were able to submit their responses anonymously via the survey tool
COMPARABLE	Responses were then compared to national guidelines to determine whether there were any significant differences

Participants

138 paramedics from seven UK ambulance services chose to complete the questionnaire after being informed about it by their ambulance service.



Results

94.03% of respondents were aware of when a seizure requires anticonvulsant therapy. Most ambulances only stocked diazepam; this was always administered when the patient did not possess rescue medication. Ambulance diazepam was also used in over 50% of cases when individual rescue medication was available. Paramedics were likelier to choose rescue medication for children.

