Referral Algorithm: Seizure/Epilepsy

Concern for seizure/epilepsy?
Collect historical details:
• Duration of event
• Description of event
• What was the child doing before, during and after?
• Any provoking factors? (illness, stress, positional change, anger, sleep deprivation)
• Physical appearance during event (rigid, limp, eyes open or closed, cyanosis/pallor/flushing)
• Does family have a video?

Yes

Red flags for urgent neuro referral:
• Age under 1 year with another risk factor*
• Developmental regression
• Accelerating frequency of events

No

• Unprovoked event that could not be interrupted
• Abnormal neurological exam
• Focal symptoms during event

No

Call the Provider-to-Provider Line at 206-987-7777 to discuss urgent referral AND Order routine EEG (40-60 minutes). Neurologist will advise if MRI brain without contrast is also needed.

No

Refer to First Seizure Clinic
Preferred workup: Routine EEG, consider MRI brain without contrast

Risk Factors for Epilepsy:
• Prematurity
• Known CNS infection or injury
• Abnormal head imaging
• Abnormal EEG
• Abnormal development
• Nocturnal first seizure
• Family History

Differential Diagnosis:
• Febrile seizures
• Trauma
• Infection
• Genetic
• Toxic/metabolic
• Cardiac arrhythmia
• Movement disorder (tics, stereotypies, myoclonus)
• Sleep disorder (parasomnia)
• GI disorder (Reflux)
• Syncope
• Breath-holding spells

• Syncope upon standing +/- twitching
• Sensory symptoms without altered awareness (Tingling, buzzing, numbness, dizziness, pain)
• Abnormal EEG on sleep study with no history of seizure
• 1st or 2nd febrile seizure, without hemiconvulsion, for children 12 months - 5 yrs
• Interruptible staring spells (with noxious stimulus like touch)
• Abnormal movements without loss of awareness (concern of tics/stereotypies)
• Known history of epilepsy, on 1-2 meds

Refer to General Neurology
Consider EKG for syncope