Seizures happen when your brain cells, which communicate through electrical signals, send out the wrong signals. Anything that interrupts the normal connections between nerve cells in the brain can cause a seizure. When a person has two or more recurrent unprovoked seizures, then they are considered to have epilepsy for which there may be no detectable cause. There are different types of seizures and seizure disorders which may be treated with medicine and other alternative treatments.

A convulsive seizure is where someone shakes or jerks during the seizure. While this can be frightening to see, this type of seizure is not usually a medical emergency.

Some suggestions and strategies for preparing for and including girls with seizure disorders in your troop:

1. Consult with the girl’s parent/guardian beforehand about any medication or medical equipment that may be present with the girl or adult during meetings-be clear in how and when to administer the medication or treatment and be sure it’s being stored in a safe location away from general accessibility of the girls (they may have an “Seizure Action Plan” to consult).

2. Ask the girl’s parent/guardian to provide you with instructions about what to do if the girl has a seizure and any possible side effects of her medication.

3. Unless the girl and her parent/guardian prefer confidentiality within the troop, have the girl share about her differing abilities and special needs with the troop safely and allow the other girls to ask questions in a sensitive and caring manner to better understanding and allow everyone to work together as a troop to help everyone’s needs be met.

4. Always consult with the parent/guardian beforehand to be sure you’re providing for the girl’s needs to the best of your ability – they will know the best methods and strategies to help their child.


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If you have other questions or concerns you may contact the GSFA committee via email at gsfa@gsctx.org or GSCTX at customercare@gsctx.org or via phone at 1-800-733-0011.

This document is not intended to replace or supersede any doctor’s instructions nor should it in any way be taken as medical advice or directions. This resource is a suggestion for GSCTX volunteers to use while welcoming girls to their troops with special needs and is for informational and educational purposes only. Please follow a parent/guardian’s instructions in the medical care of their child and make sure you always have the appropriate medical and troop permission forms completed and available for emergency medical services (EMS) personnel.
### Some symptoms or warning signs of seizures

- Staring
- Jerking movements of the arms and legs
- Stiffening of the body
- Loss of consciousness
- Breathing problems or breathing stops
- Loss of bowel or bladder control
- Falling suddenly for no apparent reason, especially when associated with loss of consciousness
- Not responding to noise or words for brief periods
- Appearing confused or in a haze
- Nodding the head rhythmically, when associated with loss of awareness or even loss of consciousness
- Periods of rapid eye blinking and staring

### Suggestions for what to do if someone has a convulsive seizure

- Stay calm.
- Look around – is the person in a dangerous place? If not, don't move her. Move objects like furniture away from her.
- Note the time the seizure starts.
- Stay with her. If she doesn't collapse but seems blank or confused, gently guide her away from any danger. Speak quietly and calmly.
- Cushion her head with something soft if she has collapsed to the ground.
- Don't hold her down.
- Don't put anything in her mouth.
- Check the time again. If a convulsive (shaking) seizure doesn't stop after 5 minutes, call for emergency medical services (EMS).
- After the seizure has stopped, put her into the recovery position (see websites below for more details on this) and check that her breathing is returning to normal. Gently check her mouth to see that nothing is blocking her airway such as food. If her breathing sounds difficult after the seizure has stopped, call for emergency medical services (EMS).
- Stay with her until she is fully recovered.
- If she is injured, or she has another seizure without recovering fully from the first seizure, call for emergency medical services (EMS).