



## **Emergency Medication Management Plan**

## Midazolam (Zyamis Prefilled Syringe)

(only to be administered by a trained person)

Midazolam – Zyamis Management Plan for:				
Middzolam – Zydmis Managemen	THAITIOI.			
Date of Birth: text	Date of plan: text	Weight: text		
Administration method: BUCCAL				
1. FIRST DOSE Midazolam (Zyamis)				
First dose prefilled syringe =				
☐ 5mg/0.5ml (Blue) ☐ 7.5mg/0.75ml (Purple) ☐ 10mg/1ml (Orange)				
For single seizures:				
☐ As soon as a text (seizure type) begins				
☐ If the text (seizure type) continues longer than text mins text hrs				
Special instructions: text				
For clusters of seizures:				
<ul> <li>□ When text (number) text (seizure type) occurs within text mins text hrs</li> <li>□ Other (please specify): text</li> </ul>				
Special instructions: text				
2. SECOND DOSE Midazolam (Zy	ramis)			
Second dose prefilled syringe =				
☐ 5mg/0.5ml (Blue) ☐ 7.5mg/0.75ml (Purple) ☐ 10mg/1ml (Orange)				
□ Not prescribed OR				
☐ If the text (seizure type) continues for another text mins following the first dose				
☐ When another text (number) text (seizure type) occur/s within text mins text hrs following the first dose				
☐ Other (please specify): text				
Special instructions: text				

3. Maximum number of Midazolam doses to be given in a 24-hour period	
Maximum number: text	
4. Dial 000 to call the ambulance:	
☐ Prior to administering Midazolam	
☐ Immediately after administering Midazolam	
☐ If the seizure has not stopped text minutes after giving the midazolam	
☐ If injured or has difficulty with breathing	
☐ Other (please specify): text	

## 5. Describe what to do after Midazolam has been administered:

- Continue to provide seizure first aid, keeping me safe from injury. Continue to time and monitor the seizure.
- If possible, keep me on my side to protect my airway. If this is not possible, turn my head to the side.
- It in a wheelchair or car seat, leave me seated and continue to support my head and protect my airway.
- Document time Midazolam was given, when ambulance called and when seizure activity stops.
- Stay with me and monitor:
- For shallow or slow breathing, change of facial colour
- Other: text

6. Prescribing medical practitioner	
Name of medical practitioner: text	
Telephone: text	Date: text
Signature: text	

## 7. Storage and family special instructions

Recommended MIDAZOLAM storage information:

- Keep out of reach of children
- Protect from light (stored in container provided) and store at room temperature (below 25°C)
- Regularly check the expiry date.

Any special instructions e.g. storage of medication, when on outings etc. or people to contact if emergency medication is given:

Emergency contact name: text		
Relationship: text	Telephone: text	
Signature: text	Date: text	

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