



## Emergency Medication Management Plan

### Midazolam (Zyamis Prefilled Syringe)

(only to be administered by a trained person)

Midazolam – Zyamis Management Plan for: text

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:

- When text (number) text (seizure type) occurs within text mins text hrs  
 Other (please specify): text

Special instructions: text

#### 2. SECOND DOSE Midazolam (Zyamis)

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.
- If 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:* text

Emergency contact name: text

Relationship: text

Telephone: text

Signature: text

Date: text