



# Emergency Medication Management Plan

## Midazolam (Only to be administered by a trained person)

Midazolam Management Plan for:

Date of Birth:

Date of plan:

Weight:

Administration method:

BUCCAL ☐ INTRANASAL (with atomiser) ☐ INTRANASAL (Drop) ☐ ANY METHOD ☐

### 1. FIRST DOSE Midazolam

First dose =  mg  ml

#### For single seizures:

- ☐ As soon as a  (seizure type) begins
- ☐ If the  (seizure type) continues longer than  mins  hrs

Special instructions:

#### For clusters of seizures:

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

Special instructions:

### 2. SECOND DOSE Midazolam

Second dose =  mg  ml

- ☐ Not prescribed OR
- ☐ If the  (seizure type) continues for another  mins following the first dose
- ☐ When another  (number)  (seizure type) occur/s within  mins  hrs following the first dose
- ☐ Other (please specify):

Special instructions:

### 3. Maximum number of Midazolam doses to be given in a 24-hour period

Maximum number:

#### 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:

**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 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**

Email: **text**

PO Box 1834, Launceston TAS 7250  
31 Thistle St, South Launceston 7249  
1-7 Liverpool St, Hobart TAS 7000  
P: 6344 6881/1300 852 853  
[www.epilepsytasmania.org.au](http://www.epilepsytasmania.org.au)