



MY SEIZURE MANAGEMENT PLAN

Functional Neurological Disorder (FND) is a condition that results in neurological symptoms such as functional seizures, paralysis, gait disorder, sensory issues, involuntary movements, problems with speech and swallowing, and bowel and bladder issues. Pain and chronic fatigue often co-exist with these symptoms.

FND is as disabling and distressing as similar neurological diseases such as Epilepsy, Multiple Sclerosis, Parkinson and Stroke. For many people FND is a life-long condition that they will have to manage long term.

Functional Seizures unlike epilepsy are not due to abnormal electrical activity in the brain. Medications used to treat epilepsy may be unhelpful for people with FND, unless the person also has epilepsy. FND results from a problem with the functioning of the nervous system. Functional seizures may present similar to epileptic seizures, although they are generally longer in duration. While functional seizures can look like epileptic seizures the attacks themselves are not harmful for the brain. People may experience epilepsy and functional seizures.

Functional seizures are known by many different terms including dissociative attacks, dissociative seizures, non-epileptic seizures, non-epileptic attack disorder, functional non-epileptic seizures and FND attacks. Please use the term you are most comfortable with.

For people with functional episodes / attacks / seizures, a **management plan** may be helpful so others know how to best support the person. NOTE: A management plan is very individual, what helps one person, may not help another person with the same condition.

NAME	
DATE OF BIRTH	
DATE OF PLAN	<i>Plans should be review if there is a change in the individual's health or medical state, or as often as required to best meet the individual's health needs.</i>
MEDICATION/S I AM ON	
ALLERGIES	





MEDICAL CONDITIONS	1. 2. 3.	4. 5. 6.
OTHER RELEVANT MEDICAL HISTORY		
MY EMERGENCY CONTACT IS	NAME: _____ RELATIONSHIP: _____ PHONE NUMBER: (M) _____ (H): _____ (W): _____	
MY DOCTOR / SPECIALIST CONTACT DETAILS ARE:	NAME: _____ PROFESSION: _____ ADDRESS: _____ PHONE NUMBER: (M) _____	

MY FUNCTIONAL EPISODES MAY BE TRIGGERED BY: <i>e.g. fatigue, stress, emotions, (N/A = if no triggers or unknown)</i>	
WARNING SIGNS PRIOR TO A FUNCTIONAL EPISODE (<i>e.g. fatigued, distracted, feeling of an aura, dissociated, sad, agitated, other behaviour change</i>)	
TYPES OF FND EPISODES / ATTACKS / SEIZURES I HAVE: <i>e.g. epileptic and/or non-epileptic / functional / dissociative.</i> <u>Hyperkinetic</u> – <i>with shaking, stiffening, jerking and/or thrashing movements.</i> <u>Hypokinetic</u> – <i>falling down, lying still, fainting spells, blackouts</i> <u>Blank Spells</u> – <i>non-responsive, not present, trance-like state</i>	





HOW MY FUNCTIONAL EPISODES / ATTACKS / SEIZURES PRESENT	
DURATION:	MY SEIZURES MAY LAST FROM ____ TO ____ MIN
FREQUENCY:	HOW OFTEN MY SEIZURES TEND TO OCCUR
HOW I NEED PEOPLE TO ASSIST <i>e.g. place cushions around me, keep me safe from injury, reassure me, help keep me calm, remain calm around me.</i>	
DURING A FUNCTIONAL EPISODE / ATTACK / SEIZURE PLEASE <u>DON'T</u> <i>e.g. sternum rub, hold me down, pinch me, panic</i>	
AFTER A FUNCTIONAL EPISODE / ATTACK / SEIZURE I MAY NEED: <i>e.g. to rest, remain quiet</i>	
I may NOT need an ambulance unless I am injured or my condition is different to my normal health experiences.	Please call an ambulance in the following situations, including injury, emergency

I have discussed this above management plan with my treating doctor / specialist, named on page 2. I confirm that this is the agreed management plan in the event that I / [name] _____ experiences functional episodes. I understand that this plan does not constitute medical advice or instruction and that an ambulance will be called in an emergency.

PATIENT NAME: _____





SIGNATURE of PATIENT: _____

OR

CARER / EMERGENCY CONTACT NAME: _____

RELATIONSHIP TO PATIENT: _____

SIGNATURE of CARER: _____

REFERENCES

Reuber, M. (2019) Dissociative (non-epileptic) seizures: tackling common challenges after the diagnosis. *Practical Neurology* v. 19:332-341.

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This document was prepared by Dr. Katherine Gill, FND Australia Support Services Inc. with input and feedback by FND specialist neurologists, Professor Jon Stone and Dr Alex Lehn. People living with functional seizures, from the FND Australia Support Services network also provided input and feedback.

Disclaimer

This document is intended to be used as a guide to assist patients with FND, prepare a management plan with their treatment team, about how bystanders and carers can best support the individual with FND. **This document should never replace or serve as medical advice or instruction.**

All health issues and concerns should be discussed with the treating medical professional.

In the event of an emergency please call 000 (In Australia)

