

**LINCOLN PUBLIC SCHOOLS**  
**HEALTH SERVICES**  
**PROTOCOL FOR ADMINISTRATION OF DIASTAT**

**STUDENT** \_\_\_\_\_ **STUDENT NUMBER** \_\_\_\_\_

If needed for a prolonged or cluster seizure, Diastat will be administered to your student according to the written order of their physician.

A signed parent medication permission form, a written physician authorization, a signed Protocol for Administration of Diastat, and a Seizure Action Plan are required **prior** to Diastat administration. There will be **no** exceptions.

Diastat will be administered by the school nurse or other designated school personnel who have successfully completed training on the procedure for giving this medication.

If Diastat is administered, **911** will be called immediately.

If Diastat is administered, the student will not remain at school for observation.

When Diastat is given, close monitoring of the student's respiratory and seizure activity is necessary. If parents are not on site, the student **will be transported** to the hospital.

Parent/Guardian will be contacted as soon as possible.

<u>Parent Contact</u>	<u>Telephone Contact</u>
1. _____	_____
2. _____	_____
3. _____	_____

A Diastat administration system, with a current expiration date, will be stored in the school health office and will not be transported to and from school daily. If your student has a seizure while being transported on a Lincoln Public School bus, diastat will not be given. Transportation services will call **911** and the student's home school who will notify the parent/guardian. Diastat may be administered on fieldtrips with parent/guardian permission.

My student may receive Diastat while on field trips according to their Seizure Action Plan.

Yes \_\_\_\_\_ No \_\_\_\_\_

I have read the above protocol for administering Diastat to my child.

**Parent/Guardian** \_\_\_\_\_

**Date** \_\_\_\_\_