

Seizures & Safety

Information for People with Seizures



EPILEPSY
FOUNDATION®

**Disclaimer:**

This publication is designed to provide general information about epilepsy and seizures to the public. It is not intended as medical advice. People with epilepsy should not make changes to their treatment or activities based on this information without first consulting their health care provider.

This publication is supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$3,000 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, CDC/HHS, or the U.S. Government.



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Safety and You

Most seizures will not hurt you. But, you can get hurt if you have seizures that make you blackout or fall, so be aware of your surroundings.

Some dangers are easy to spot, like deep water or the edge of a cliff, while others are not, such as in kitchens or bathrooms. Some seizures can lead to other risks too depending on where a seizure happens. People can get burns, cuts, or bruises. More serious injuries like broken bones and head injuries can happen too, but are not common.

Does this mean you have to stop doing everything and not go anywhere at all?

NO. Chances are, just a few simple things can help you be safe and still lead an active life.

Think and plan ahead.

Know Your Risks

Living with epilepsy may have different risks for different people. Seizure safety starts with learning how to assess your risks, environment, and your activity or lifestyle. Here are a few things to consider:

- Seizure type and how often they happen: Seizures with falls or loss of consciousness may cause injury. The risk of injury is less if you don't fall.
- Side effects of medicines: Some medicines may cause problems with balance, coordination, blurry vision, or other things that may lead to falls, accidents, or other problems.
- Your lifestyle: The types of activities you like to do.
- Your home: Do you have stairs to climb? Do you need help around the house?
- Can you drive or get around easily?
- Other neurological or medical problems that may lead to injury or accidents.

Share this information with your care team - your doctor, nurse, or other people who know you. Then develop a seizure safety plan.

Safety Every Day

The following tips will help you live more safely with seizures. You can use them to help your children or others be safer, too.

- Make sure everyone in the family knows what to do when you have a seizure.
- Make sure they know when to call for help.
- Wear or carry medical alert information that says you have epilepsy, such as a bracelet, necklace, or digital device.
- Take your medicine on time, every day. Use reminders on phones or pillboxes to help you remember to take your medicine.
- Try to get enough sleep. Not getting enough sleep can lead to more seizures.
- Do not drink a lot of alcohol or use substances. Talk with your health care provider before taking other medicines, supplements, or substances.
- If you have a warning before a seizure, lie down on your side and away from any hard or sharp objects and stairs.
- Carry a cell phone in case you need help.
- Keep your appointments as scheduled with your health care provider.

Know Seizure First Aid

First and foremost, know seizure first aid. Teach family and friends what to do. For most seizures, basic seizure first aid is all that is needed. Remember three steps: **STAY, SAFE, SIDE**.

STAY with the person and start timing the seizure.

- Remain calm - it will help others stay calm too. Talk calmly and reassuringly to the person during and after the seizure - it will help as they recover from the seizure.
- Check for a medical ID.
- Look at your watch and **time** the seizure from beginning to end of the active seizure. Timing the seizure will help you determine if emergency help is needed.

While most seizures only last a few minutes, seizures can be unpredictable. Some may start with minor symptoms but lead to loss of consciousness or falls that could cause injury. Other seizures may end in a few seconds.

Keep the person SAFE.

- Move or guide away from harmful or sharp objects.
- If a person is wandering or confused, help steer them clear of dangerous situations. For example, gently guide them away from traffic, train or subway platforms, heights, or sharp objects.



- Encourage people to step back and give the person some room. Waking up to a crowd can be embarrassing and confusion for a person after a seizure.

Turn the person onto their SIDE if they are not awake and aware.

- Make the person as comfortable as possible.
- Loosen tight clothes around the neck.
- If they are aware, help them sit down in a safe place.
- If they are at risk of falling or having a convulsive seizure or tonic-clonic seizure:
 - Lay them down on the floor.
 - Put something small and soft under the head.
 - Turn them on their side with their mouth pointing toward the ground. This prevents saliva from blocking their airway and helps the person breathe more easily.
- During a convulsion, it may look like the person has stopped breathing. This happens when the chest muscles tighten during the tonic phase of a seizure. As this part of a seizure ends, the muscles relax and breathing will resume normally.
 - Rescue breathing is generally not needed during these seizure-induced changes in a person's breathing.

Do NOT put anything in their mouth

- Don't put any objects like a spoon, stick, or wallet into a person's mouth.
- Don't worry - a person can't swallow their tongue during a seizure.
- Jaw and face muscles may tighten during a seizure, causing the person to bite down. If this happens when something is in the mouth, the person may break and swallow the object or break their teeth.
- Rescue medicines can be given if recommended by their health care team. If given by mouth, place inside the cheek to dissolve.
- Don't give water, pills, or food to swallow until the person is awake. Food, liquid, or pills could go into the lungs instead of the stomach if they try to drink or eat when not fully aware.

Do NOT restrain or forcibly hold the person down

- Trying to stop movements or forcibly hold a person down does not stop a seizure.
- Restraining a person can lead to injuries and make the person more confused, agitated, or aggressive.
- People do not fight on purpose during a seizure - yet if they are restrained when they are confused, they may respond aggressively.
- If a person walks during a seizure, let them walk in a safe, enclosed area if possible.

STAY with them until they are awake and alert after the seizure.

- Most seizures end in a few minutes.
- Injury can occur during or after a seizure, requiring help from other people.
- If a person appears to be choking, turn them on their side and call for help. If they are not able to cough and clear their air passages on their own or are having breathing difficulties, call 911 immediately.
- Be sensitive and supportive. Ask others to do the same.
- Seizures can be frightening for the person having one, as well as for others.
- Reassure the person that they are safe.
- Once they are alert and able to communicate, tell them what happened in very simple terms.
- Offer to stay with the person until they are ready to go back to normal activity or call someone to stay with them.

Call for Emergency Medical Help When:

- A seizure lasts 5 minutes or longer.
- One seizure occurs right after another without the person regaining consciousness or coming to between seizures.
- Seizures occur closer together than usual for that person.
- Breathing becomes difficult or the person appears to be choking.
- The seizure occurs in water.
- Injury may have occurred.
- The person is pregnant or has another medical problem that needs to be checked.
- The person asks for medical help.
- First time seizure or no history is known.

“ Right from the beginning we taught our kids what to do if mommy falls and shakes and does not wake up. ”



Safety Around the House

Bathrooms and kitchens can be dangerous places for someone who may suddenly blackout or fall. Here are some things you can do to make these places safer.

In the bathroom

- Hang bathroom doors so they open out instead of in. Your family will be able to open the door if you have a seizure and fall against it.
- Use safety glass, plastic, or a shower curtain for a shower door. Use safety glass in mirrors too.
- Leave the bathroom door unlocked. That allows people to get in and help if you have a seizure. Use an occupied sign on the bathroom door for privacy.
- Take a shower rather than a bath.
- Use a rubber mat or non-skid strips in the bathtub or shower to lessen the risk of falls.

- Use tub rails or grab bars
- Make sure the shower and bath drains are working. Install a shower with a flat floor to avoid pooling of water.
- Keep water temperature low to avoid burns. Always turn on cold water first and shut off cold water last.
- Use soap trays set within the wall that do not stick out into the shower or tub.
- For people who fall during a seizure or have frequent seizures:
 - Use a shower chair or sit on bottom of tub and use hand held shower nozzle.
 - Take showers when someone else is in the house.
- Use an electric shaver instead of a razor and keep away from water.
- **Avoid using any electrical appliances near running water in case you drop it during a seizure.**
- Put padding and bathroom carpeting on the floor. A softer surface is safer if you fall.
- Install a padded toilet seat.

“My daughter had drop seizures without any warning and I always had to be extra careful when she was in the shower.”



In The Kitchen

- Use a microwave for most of your cooking.
- Use an electric or gas stove **only** when someone else is home. Use the back burners or a toaster oven to avoid burns.
- Serve hot things directly from the stove onto plates.
- Rather than lift containers with hot contents, slide them on counter tops. Use a cart to carry hot items across longer distances in the house.
- Use unbreakable dishware or plastic or paper plates and drinking cups instead of china, ceramic, or glass.
- Use cups with lids so you do not get burns from spilling hot liquids.
- Use long oven mitts when you take food out of a hot oven to avoid burns.
- Carve meat or poultry with a regular knife, not an electric slicer. Use presliced food when you can.
- Position pot handles toward the back of the stove.
- Avoid carrying very hot liquids.
- Sit whenever possible.
- Keep commonly used items on lower shelves.
- Keep electrical wires and appliances away from water.
- Make sure your home has a working smoke detector alarm on each level.



“ I love to cook, but there are some precautions I need to take to make sure I don’t get hurt. When I am at the stove, I make sure my wife is in the kitchen with me just in case. ”

In The Bedroom

- **Consider using a seizure alert device, detection system, or other monitor to alert someone when a seizure occurs.**
- Avoid hard or sharp-edged bed frames, tables, or dressers.
- Sleep in a low-lying bed and do not sleep on a top bunk. Use non-skid rugs next to the bed in case you fall.
- If you have shaking during your seizures, move your bed away from the walls, radiators, night tables, and hard surfaces. Consider bed rails or placing a mattress or cushion around the bed.
- Make sure your partner/spouse knows seizure first aid in the event of a seizure.
- Don't pull covers over your face or head while sleeping. Sleep on your side or back. Keep the bed free from extra pillows or stuffed animals, especially if you have seizures in your sleep.

Around The House

- Remove clutter from the floor to avoid tripping.
- Be extra careful with the use of tools like circular saws, drills, or sawing machines. **Never use electrical tools alone and make sure they have automatic shut-offs.**
- Keep doors shut to prevent you from wandering outside alone during or after a seizure. Consider setting alarms that alert others that an outside door is open.
- Avoid ironing clothes when alone.
- Put padding on square table corners and other furniture with sharp edges. Better yet, use furniture with rounded edges. Catalogs for baby and toddler supplies offer special padding in many shapes and sizes.
- Don't light candles or fireplaces when alone.
 - Do not carry lighted candles around the house. Place candles where you will not knock them over during a seizure.
 - Do not carry hot ashes from the fireplace through the house. Place guards around all fireplaces.
- Be careful with the use of hot appliances. Use appliances with automatic shut-off switches.

- Avoid smoking, both for health and safety reasons.
- Install softer flooring instead of hardwood floors. Consider instead carpeting with thick padding.
- Put carpeting on stairs and at the bottom of the steps to reduce injury from a fall. Keep area clear.
- Avoid freestanding heaters and avoid those that can easily tip over.
- If you have radiators, consider using padded covers.



“ We have this large country style table in our dining room. One problem is that the table corners are sharp. After almost hitting my head once, I found some attractive corner guards. You hardly even notice they are there – and they give me peace of mind. ”

Outside of the House

- Use lawnmowers and snowblowers with an automatic kill switch. This kind of mower and blower stops running if you stop holding the handle.
- When using outdoor tools, wear protective eye wear, gloves, and appropriate footwear. Sit on a low workbench.
- Consider installing “outdoor carpeting” on hard surfaces.
- At barbecues, ask someone else to do the grilling.

Seizure Action Plan

Name: _____ Date written: _____

Emergency Contact/Relationship _____ Phone: _____

Emergency Contact/Relationship _____ Phone: _____

Seizure Type	How Long It Lasts	How Often	What Happens

How to respond to a seizure (check all that apply) ☒

- ☐ First aid - **Stay, Safe, Side.**
- ☐ Give rescue therapy.
- ☐ Swipe VNS magnet
- ☐ Notify emergency contact.
- ☐ Call 911
- ☐ Call school nurse (for school)
- ☐ Other _____

X Do NOT restrain
X Do NOT put any objects in their mouth.

When **rescue therapy** may be needed: **WHEN AND WHAT TO DO**

If seizure (cluster, # or length) _____

Name of Med/Rx _____ How much to give (dose) _____

How to give _____

Seizure First Aid

How to help someone having a seizure

1

STAY with the person until they are awake and alert after the seizure.

- ✓ Time the seizure
- ✓ Remain calm
- ✓ Check for medical ID
- ✓ **Rescue medicines can be given** if prescribed by a health care professional



2

STAY Keep the person **SAFE**.

- ✓ Move or guide away from **harm**



3

Turn the person onto their **SIDE** if they are not awake and aware.



3

- ✓ Keep **airway clear**
- ✓ **Loosen tight clothes** around neck
- ✓ Put **something small and soft** under the head



Call 911 If...

- ▶ Seizure lasts longer than 5 minutes
- ▶ Person does not return to their usual state
- ▶ Person is injured, pregnant, or sick
- ▶ Repeated seizures
- ▶ First time seizure
- ▶ Difficulty breathing
- ▶ Seizure occurs in water

Do NOT

- ✗ Do **NOT** restrain
- ✗ Do **NOT** put any objects in their mouth.

Learn more: epilepsy.com/firstaid



DEVICE:

☐ VNS ☐ RNS ☐ DBS Date _____

Implanted: _____

Triggers: _____

When to call 911

- ☐ Seizure with loss of consciousness longer than 5 minutes, not responding to rescue med if available.
- ☐ Repeated seizures longer than 10 minutes, no recovery between them, not responding to rescue med if available.
- ☐ Difficulty breathing after seizure
- ☐ Serious injury occurs or suspected, seizure in water.

When to call your provider first

- ☐ Change in seizure type, number or pattern
- ☐ Person does not return to usual behavior (i.e., confused for a long period)
- ☐ First time seizure that stops on its own
- ☐ Other medical problems or pregnancy need to be checked.

Care after seizure

What type of help is needed? (Describe): _____

When can you resume normal activity? _____

Special Instructions

First Responders: _____

Emergency Department: _____

In The Workplace

- Talk to your health care provider about whether certain duties would risk your health or safety.
- Due to safety concerns, certain jobs may not be available if you have seizures. For example, jobs that require driving, working with dangerous machines, or climbing heights.
- Think about safety risks in your workplace and if you can change anything to reduce these risks.
- Consider installing carpeting or cushioned mats on the floor around your work area.
- Use the elevator instead of stairs.
- If you might have a seizure at work, talk to your employer about your seizure response plan so others know how to help. This plan should include:
 - Warning signs of a possible seizure
 - How and when to provide help
 - Who to call if you need other help
 - When to call an ambulance
- Ask your employer for a chance to teach co-workers about epilepsy. You can then address concerns or misunderstandings they may have.
- Be careful when climbing ladders. If you work at heights, use safety harnesses or belts to keep from falling.
- Avoid sites with extreme temperatures or with pools of water.
- Be extra careful around machinery. Use equipment with automatic shut-off and guards in place. Wear safety clothing.
- Try to avoid work-related sleep deprivation or exhaustion. Learn coping strategies to reduce stress.
- Keep a pillow handy for coworkers to place under your head if you have a seizure. Show them how to place it so it doesn't block your breathing.
- Keep extra clothes at work in case you need to change after a seizure.

Safety When Traveling

- If you are old enough to drive, first talk to your health care provider about whether it's safe for you to get a driver's license. Check with your state motor vehicle department about any state driving regulations. Never drive without a valid driver's license.
- Consider taking the bus or other public transportation, if available.
- Seek out special bus or taxi services for people with disabilities.
- If you ride a bike, protect yourself with a helmet, kneepads, and elbow pads. Keep to side roads or bike paths as much as you can.
- If you are waiting for a bus or train, stand back from the road or the edge of the platform.
- If you are at risk for walking into danger during a seizure, travel with a partner.
- Consider a taxi or ride-share service. Your safety is worth the extra cost.
- Stay away from long, steep escalators or stairs. Take an elevator instead.
- When traveling by air, carry an extra supply of medication in your carry-on bag in case your luggage is lost.
- Bring extra medication in case your return home is delayed.
- Travel with others if possible.
- When you cross time zones, it is easy to miss medicines or get mixed up on when to take your medicines. It can be harder when your travel east and are "losing" time. Talk with your health care team about when to take your medicines and prevent missed doses.



Safety Outdoors



“ I found out that my pool has special times for people with disabilities to swim. During those times, more people are watching swimmers and there are fewer swimmers in the pool. I feel a lot safer – and I get to swim again. ”

- When you exercise, take frequent breaks.
- Try to stay cool and drink plenty of water.
- Are you taking up a new sport? Get to know the sport ahead of time. Ask yourself, would I get hurt if I black out while doing this?
- The buddy system is best for skiing, swimming, and hiking.
- When swimming, pools may be safer than open bodies of water such as the ocean or lake.
- Talk to your doctor about your safety when taking part in activities. This includes activities such as skiing, swimming, high diving, scuba diving, and rock climbing.
- Wear a helmet and other protective gear where appropriate.

- Ride a bicycle on side roads and designated paths. Avoid busy roadways when possible. Protect yourself with a helmet, kneepads, and elbow pads.
- It may be helpful to inform lifeguards, coaches, or other staff about your seizures and what to do if a seizure occurs.
- Do not use a hot tub alone. Make sure that water temperature is not too hot before entering.

Safety for Children

When your child has seizures:

Many of the safety tips you have been reading about can help keep children safe too. As a parent, you will need to strike a balance between protecting your child and being over-protective.

Here are some other things to think about when kids have seizures:

- You may want to use a seizure alert device, detection system, or other monitor to alert you when your child has a seizure. Use one that will alert you if a seizure happens while they are sleeping.
- A child with seizures should sleep in the lower bed of a bunk bed to avoid falling out of bed during a seizure.
- If your child has drop seizures, using a helmet may help avoid injury.
- When friends and family take care of your child, teach them first aid and review your child's seizure response plan with them.
- Share your child's seizure action plan with caregivers while they are away from home at sleepovers or camp. People feel better when they know what to do.
- Practice seizure drills so your child's caregivers know what to do and what not to do. Make sure the seizure action plan is easy to get to.

When a Parent Has Seizures

You have seizures. You have a child of your own. How is this all going to work?

You may have already done things around your house to make it safe for your baby. That is a major step.

A few more simple changes and new habits can help.

- When holding or feeding your baby, sit on the floor.
- Dress, change and sponge-bathe the baby on the floor, using a changing pad.
- Have the baby securely in a stroller equipped with brakes—or strapped in an infant seat—while you feed them.
- When you are home alone, use a playpen or play yard with doors and gates closed and latched.
- Use a crib or bassinet in your room instead of sharing a bed with your baby.
- Keep baby supplies nearby on each level of the home.
- Avoid carrying hot fluids or dangerous items near your child.
- If your seizures are sensitive to sleep deprivation, get extra help caring for the baby at night.
- Always keep your epilepsy medicine (and other medications) where your child cannot get them.
- When out of the house with your child, consider using a connection such as a harness on your child. This can help make sure your child does not wander off if you have a seizure.
- If you get a warning (aura), put your child in a safe place when it first happens, then lie down in a safe place.
- Carry a cell phone, even in the house, to call for help when needed.
- If you have frequent seizures, consider having someone with you while you care for your baby.

“ What happens if I have a seizure while taking care of my baby? ”



One day, as your child grows, they may ask about your seizures. Use simple language to explain seizures. Say that you will be okay but that you may need help sometimes. Show them how to get another adult to help, or to call 911, if you do not wake up after a seizure.

If you are calm, your child will be calm.

As your child gets older, they will have more questions for you. You will want to go into more detail about what seizures are and what to do.



Photo by Andrew Branch

Seizure Alert Devices

What are seizure alert devices?

A seizure alert device is a monitoring system that can detect when a person may be having a seizure and notify someone who can respond. Devices can be used by people of any age. Some systems also record and store seizure data that can be shared with your doctor. Seizure alert devices do not prevent, diagnose or treat seizures or epilepsy. For information about these other types of devices, please go to www.epilepsy.com/treatment/devices or www.dannydid.org.

How do I know what type of seizure alert device to consider?

First, learn whether the device can detect the seizure type(s) you want to monitor. Different seizures types can be detected by different systems. It's important to remember that not all seizures can be detected by devices currently available, such as videos, watches, arm bands, or mattress monitors. Talk to your neurologist or epilepsy specialist about your seizure type and what methods may work best for you. Also, think about the situations you are most concerned about. For example, are you more worried about nocturnal seizures when sleeping alone or having seizures during the day when out in public?

What is my living situation?

Some devices work best if you live with someone else. Others can be helpful even if you live alone.

- Do you have the resources to use the device and any technology that comes with it? For example, is internet access required? Does it need a particular smart phone to work?
- Is someone able to respond and help you if they are alerted? If the person notified is in a different location, how would they check in with you?

Do I want to use the device outside the home?

Some devices are designed to work in one setting, such as inside the home. Other systems are mobile.

- Ask whether the device is GPS enabled and can show the user's location.
- Find out if the device can alert an emergency medical responder (EMS).

What type of monitoring am I willing to use?

No device will be accurate if it is not used correctly. Ask yourself:

- Is the device physically comfortable to wear?
- Does the device make you stand out in a way that makes you uncomfortable?
- Does using the device raise concerns about your privacy?



Do I want data from the device to be shared with other people?

Find out if the device allows you to share data and how this is done.

- Who do you want to see your data - family, health care provider, researchers? Can the device allow you to share this data with multiple people?
- Does the system share data in real time or is it shared at a later date?
- What is done to protect my privacy when data is shared?

Are there any downsides to using a device?

Before getting a seizure alert device, ask how reliable and sensitive it is in picking up the symptoms you want recorded.

- The device you select may not pick up all types of seizures that you have. In that scenario, an alert cannot be sent.
- How well does it detect the seizure types it is intended for?
- A device may pick up movements or events that are not seizures and you may get “false alerts.” How are these false alerts handled? If there is a false detection, can you prevent an alert from being sent? Would this bother you or affect your decision about using the device?



What is the cost?

- What does the device cost? Is there a monthly or annual fee?
- Is the system covered by insurance? If yes, will the manufacturer submit it to insurance, or do you pay the full cost first, then get reimbursed?
- What is the product's return and refund policy? Is there a warranty program or help after a warranty ends?

Can the device prevent SUDEP or any of the factors that may lead to SUDEP?

- Seizure alert devices are not known to prevent sudden unexpected death in epilepsy (SUDEP). Yet by knowing when and how many seizures happen, you can talk to your health care team and learn about your risk for SUDEP.
- A device may alert someone to give first aid sooner.
- We know that getting control of seizures is one of the most important ways to lower a person's risk for SUDEP and other seizure emergencies.
- Collecting reliable data about your seizures may help you and your care team improve your seizure control.

What other factors should I consider?

- Are there weight or age restrictions to use it?
- If worn, does the device come in different sizes?
- Is it battery powered, or does it need to be connected to a power source? If it is battery powered, what is the battery life?

If you are thinking about getting a device, talk to your health care provider to learn what's available and if the device would meet your needs. You can also contact the manufacturer for details about the system and its features.

Emergency Preparedness

Whether it is a natural disaster, extreme weather, a terrorist event, or another pandemic, it is important to be ready for any emergency. Disasters can happen without warning and threaten lives, especially for those with chronic diseases such as epilepsy. During a disaster, you may face challenges that can affect your transportation, medication, and the support of others, making it harder to manage your seizures. Consider these steps to help you be better prepared.

Prepare an emergency kit and store it in a place easy to get to. Your kit should include:

- » Medical alert bracelet
- » Whistle to signal for help
- » Dust mask to help filter contaminated air
- » First aid kit with extra anti-seizure medication
- » Water (one gallon per person per day for at least 3 days)
- » Plastic sheeting and duct tape to shelter in place
- » Manual can opener
- » Local maps
- » Flashlight with extra batteries
- » Cell phone with charges and a backup battery
- » Battery or hand-crank radio with weather alerts

- » Food (at least a three-day supply of non-perishable food)
- » Moist towelettes, garbage bags, and plastic ties for personal sanitation

Store some items in a waterproof bag, such as:

- Prescription medication
- Doctor's name, address, and phone number
- List of local pharmacies
- Emergency contacts for family and friends, including their names, addresses, phone numbers, and email address
- Seizure Action Plan
- Copies of birth certificates, marriage certificates, identification cards, and credit cards
- Change of clothing
- Money
- Personalized items like eyeglasses, contact lenses, and hearing aid batteries

Have an emergency plan in place in case of an evacuation. Review and update your plan regularly. Make sure your plans meet your needs, such as wheelchair accessibility. You may need additional help if you are ...

- a child, an older adult, or pregnant
- a person with disabilities and/or chronic conditions
- a person with limited access to transportation and do not have a car
- a person whose English is not your first language
- experiencing homelessness or poverty

When reviewing your emergency contacts, determine the order of whom to call first, second, etc., during and after an emergency to update them on your current situation. Consider selecting someone who does not live nearby, as the disaster may also affect them. You can also check with your local 211 to see if they, or another program, are managing a disaster check-in.

Know your area's evacuation routes and safe places during an emergency. If evacuated, discuss a location with your loved ones where you can meet during or after an emergency.

Getting Support

If you have questions about safety and seizures, talk to your health care provider first. Local Epilepsy Foundations throughout the country can help too. They provide a variety of services and support, and may be able to put you in touch with other people who are living with epilepsy and seizures.

Learn more, connect, and get involved

Visit www.epilepsy.com or call 1-800-332-1000 to:

- Learn more about seizures and safety.
- Find resources about epilepsy.
- Find support groups for people affected by seizures and the epilepsies.
- Locate the Epilepsy Foundation office nearest to you.
- Learn more about seizure first aid and sign up for a free course in Seizure Recognition and First aid at epilepsy.com/firstaid.
- Get resources for managing your epilepsy, helping your loved one, and teaching other about epilepsy at epilepsy.com/toolbox.
- Participate in free education programs at learn.epilepsy.com.
- Learn more about disaster preparedness at epilepsy.com/DisasterReady

About the Epilepsy Foundation

The Epilepsy Foundation, and its network of 50 organizations throughout the United States, leads the fight to overcome the challenges of living with epilepsy and to accelerate therapies to stop seizures, find cures, and save lives. As an unwavering ally for individuals and families affected by epilepsy and seizures, the Epilepsy Foundation connects people to treatment, support and resources; leads advocacy and awareness efforts; funds innovative research and the training of specialists; and educates the public about epilepsy, Sudden Unexpected Death in Epilepsy, and Seizure First Aid. To learn more, please visit epilepsy.com.



www.epilepsy.com • 800.332.1000

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