Appendix O: Eclampsia Algorithm

Patient Intervention

When seizure begins

- 1. Call for help
- 2. Position patient in a left lateral decubitus position, head of bed down
- 3. Prevent maternal injury, side rails up, pad as appropriate
- 4. Establish open airway, maintain breathing, and have suction available
- 5. Provide oxygen

When seizure ends

- Check and treat blood pressure per protocol
- 2. Obtain IV access: 1 or 2 large-bore IV catheters as soon as possible
- 3. Start magnesium loading dose

Medical Intervention

Magnesium Sulfate 4-6* grams IV loading dose over 20-30 minutes; followed by a 1-2 gram/hour maintenance dose if renal function is normal

*BMI >35 requires a 6 gram loading dose and 2 grams per hour maintenance dose

If patient has a recurrent seizure, give additional 2-4 grams of magnesium sulfate over 5 minutes*

If patient has a recurrent seizure after 2nd loading dose of magnesium sulfate, administer one of the following and notify anthesthesia

Medications

- Midazolam 1-2 mg IV; may repeat in 5-10 minutes OR
- Diazepam 5-10 mg IV slowly; may repeat q15 min to max of 30 mg OR
- Phenytoin 1,250 mg IV at a rate of 50 mg/minute
- Other medications have been used with the assistance of anesthesia providers such as:
 - Sodium thiopental
 - Sodium amobarbital
 - Propofol

Resolution

Resolution of seizure

- Maintain magnesium sulfate infusion for at least 24-48 hours after the last seizure or after delivery, whichever is later
- Assess for any signs of neurologic injury/focal deficit: head imaging should be considered if neurologic injury is suspected
- Once the patient is stabilized preparations should be made for delivery; mode of delivery is dependent upon clinical circumstances surrounding the pregnancy

Discontinue therapy

For preeclampsia with severe features and eclampsia: 24-48 hours after delivery or after last seizure

NOTE: Administration beyond 24 hours may be indicated if the patient shows no signs of clinical improvement

*Monitor respiration and BP, EKG and signs of magnesium toxicity.

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