

**OLIVE VIEW-UCLA MEDICAL CENTER  
NEUROLOGY DEPARTMENT  
POLICY & PROCEDURE**

**NUMBER: 2167  
VERSION: 2**

**SUBJECT/TITLE: MEDICAL EMERGENCIES IN EEG LAB**

- POLICY:**
- 1. If a person (patient or non-patient) collapses** in the EEG lab, **call Code Blue**. If the victim is breathless or pulseless, administer CPR until Code Blue team arrives.
  - 2. For generalized tonic-clonic seizures, seizure clusters, or seizures that require immediate medical assistance, call Code Blue**, then page the Neurology team. Place the patient on the side, loosen clothing around the neck, and move objects away that may cause injury. Do not put fingers or other objects in the patient's mouth during a seizure. If cyanotic, administer oxygen by face mask. After the seizure is over, if breathing is shallow or difficult, extend the neck, suction oral secretions, place an oral airway and give oxygen by mask.
  - 3. For absence (petit mal) or partial seizures:** If the seizure ends spontaneously before three minutes in a patient getting an EEG, the technologist should document and describe the seizure occurrence as text comments in the EEG recording. If the seizure continues longer than three minutes or occurs unexpectedly in a non-patient who happens to be in the lab, page the Neurology Resident on call.
  - 4. If a seizure occurs in a patient not on antiepileptic medication**, refer patient to the Emergency Department or Urgent Care.

**PURPOSE:** Urgent Medical Problems in the Neurophysiology/EEG lab

**DEPARTMENTS:** All

**DEFINITIONS:**

**PROCEDURE:**

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References:	
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