



Community provider guidelines for managing simple febrile seizure

Commonly asked questions	Answers and guidelines
What is a febrile seizure?	 A febrile seizure is a seizure occurring in a child (between the ages of 6 months and 5 years) with a febrile illness, who has not previously had a non-febrile seizure, and who does not have another cause for their seizure, such as central nervous system infection or electrolyte abnormality. Sometimes, the fever can present after the seizure. Febrile seizures are very common and occur in approximately 2 to 5% of children.
What is a simple febrile seizure?	 A simple febrile seizure is a febrile seizure that occurs as a single seizure lasting <15 minutes and lacks any focal findings such as shaking on only one side of the body. If a patient has multiple febrile seizures, focal findings during the seizure, or if the seizure lasts >15 minutes, then it would be classified as a complex febrile seizure.
Do simple febrile seizures need to be treated with anti-seizure medication?	 We do not treat patients with simple febrile seizures with daily anti-seizure medication. You may consider offering the family a seizure rescue medicine to be given if the child experiences a future seizure which lasts >5 minutes. In this age group, the rescue medicine we use is called Diastat, which is diazepam administered rectally.
Should I order a brain MRI, EEG test, or refer them to Neurology?	 MRI and EEG are not needed for patients with simple febrile seizures. With simple febrile seizures, the overwhelming majority (~98%) of patients will outgrow their seizures and Neurology consult is not needed.
Would anti-pyretic medications help prevent subsequent febrile seizures when they develop fevers in the future?	Antipyretics like acetaminophen or ibuprofen may help with reducing the fever, but they haven't been shown to reduce the chances of having a febrile seizure