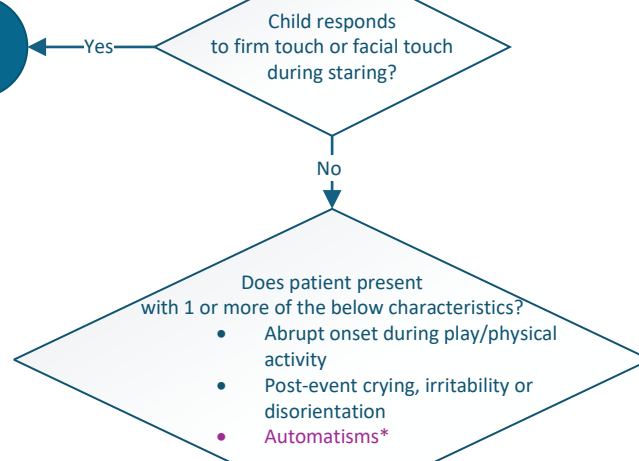


Staring Spells

**Consider alternate diagnoses

Monitor. No referral and consider alternate dx**



Ages 0-3 yrs

Ages 3-12 yrs

Ages 12-19

Order EEG

Abnormal results?

No

Yes

Refer to Neurology or consider e-consult. Video event if possible

Probable Absence Seizures

Attempt to trigger Absence Seizures*** by hyperventilation to confirm

Possible Complex Partial Seizures

EEG & Refer to Neurology

Order EEG

Abnormal results?

No

Yes

Refer to Neurology or consider e-consult. Video event if possible

Most staring is not seizure

Seizures may usually be distinguished from non-seizures by certain characteristics and reactivity to touch. Sleepiness due to OSA, ADD or ADHD, and various behaviors are other common reasons for staring spells. Parents & guardians highly familiar with the child are much more reliable as reporters of suspected seizure than teachers, therapists and coaches.

Exclusion Criteria:

Known dx Epilepsy, known neurodevelopmental disorder or CP, use of significantly sedating medication.

*Automatisms:

Repetitive, purposeless movements often seen during seizures, may include:- Eye blinks or lid flutter-Picking or tapping with hands-Eye rolling, head nodding-Mouth movements

**Consider Alternate Diagnosis:

ADD, OSA, behavior, day dreaming. No other eval required. No referral unless events change or increase.

***Absence Seizures can be triggered by hyperventilation. Have patient sit, blow at pinwheel or tissue steadily x 3min, observe for typical spell.