

Seizure Rescue Medication Handoff Sheet

Organize rescue medication name and location, prescribing clinician, pharmacy, emergency contacts, seizure plan location, and handoff contacts.

Person and emergency contacts

Name / preferred name
 Date of birth
 Emergency contact 1
 Emergency contact 2
 Primary caregiver
 School / respite / program contact

Clinician and pharmacy contacts

Prescribing clinician
 Neurology / specialist contact
 Primary care
 Pharmacy
 Medication label location
 Seizure action plan location

Rescue medication location notes

☐ Rescue medication name written below
☐ Medication location
☐ Backup medication location if applicable
☐ School / camp / respite form location
☐ Allergy list location
☐ Patient portal or clinician record location
 Other handoff notes

Handoff notes

Who can confirm current seizure action plan
 Where official instructions are kept
 School / respite / travel contacts
 Do not write when or how to give rescue medication here
 Last updated by / date

Important note

Organization and preparedness only. Not medical advice. Does not replace 911, EMS, clinicians, medical records, medication labels, seizure action plans, school plans, emergency action plans, care plans, patient portals, or professional guidance.

