

SANILAC INTERMEDIATE SCHOOL DISTRICT SPECIAL EDUCATION PROGRAMS/SERVICES

46 N. Jackson Street Sandusky, MI 48471

SEIZURE RECORD

STUDENT:

DATE	TIME									Lo	ss of		O	nset		In	jur
		Length of Seizure (in seconds)								Bladder Control	Bowel Control	Fall	Stand		Lying		
		3-4	5-10	10-30	31-59	60	61-75	76-90	91-120	m	M	K	35	i š	1	Yes	ž
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Parent was N	Totified	□ Ye	s C	l No		era v Sv		Teac	her Sign	nature	**************************************				rej ve k		
Parent was N	Notified	□ Ye	s C	l No				Teac	cher Sign	71.1	s of		On	set	*(. * _. *	Ini	RYV
Parent was N	TIME	□ Ye		Len	gth o			Teac	cher Sign	Los	wel Control		On	set	Su	Inji	ury
		☐ Ye	5-10	Len			s)	Teac		71.1	Bowel Control go	Fall	On Stand	set	Lying	Inj	ury ºX
				Len (in sec	conds	s)			Los		Fall			Lying		
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				Len (31-59	60	61-75	76-90		Los		Fall			Lying		
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