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## **EPILEPSY CHECKLIST**

This checklist is designed to assist you in getting the information and support you require from your GP and from other members of the health care team and support staff.

### **The Diagnosis - Are you clear about...**

- \* the diagnosis of epilepsy?
- \* what epilepsy is?
- \* what your own seizures are like?
- \* what your own seizures are called?

### **Lifestyle - Have you had guidance on...**

- \* leading a full and active life?
- \* adopting a moderate approach to alcohol?
- \* having regular and sufficient sleep?
- \* safety in the home? (e.g. fires/radiators, bathing/showering, stairs, pillows, cookers, locked doors etc.)
- \* safety/risk for sport and recreation (e.g. swimming, cycling, riding etc.)
- \* implications of epilepsy (e.g. for \*relationships and parenthood)
- \* safety issues regarding mortality and SUDEP prevention

### **The Medication - Do you know...**

- \* the purpose of the medication?
- \* the importance of compliance?
- \* about possible side-effects?
- \* about drug interactions? (e.g. anti-epileptic medication and oral contraceptives)
- \* that the medication is free?

### **What to do if...**

- \* a dose is missed?
- \* vomiting occurs?
- \* a trip abroad is planned?

### **Ongoing Dialogue - Have you had the opportunity to...**

- \* return with questions?
- \* keep a record of seizures?

- \* report changes in seizure pattern and general health to your GP
- \* discuss how best to manage your epilepsy? \* discuss possible self-control of seizure techniques?

**Basic Information - Have you had....**

- \* a basic information booklet?
- \* a chance to see an epilepsy video?
- \* first aid instruction/demonstration
- \* information on legal restrictions for driving and certain jobs

**Further Help - Are you aware....**

- \* that further support and information can be obtained from

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