	M29 – LEVETIRACETAM (KEPPRA)	
	Version date: 2025-04-17	Effective date: 2025-04-30 (07:00)

INDICATIONS
<ul style="list-style-type: none"> • Known or suspected provoked seizure, multiple seizures, or prolonged seizure when the time to hospital care will be prolonged • Seizure prophylaxis with penetrating head wound, depressed skull fracture, or GCS less than 11 • Status epilepticus

WARNINGS
ABSOLUTE CONTRAINDICATIONS: <ul style="list-style-type: none"> • Hypersensitivity to levetiracetam
USE WITH CAUTION: <ul style="list-style-type: none"> • Prolonged QT ¹



ADMINISTRATION	
INTRAVENOUS (INTRAOSSEOUS)	ACP
<u>SEIZURE</u>	
ADOLESCENTS / CHILDREN OVER 6 YEARS: <ul style="list-style-type: none"> • Administer 10 mg/kg (maximum per dose = 500 mg) by slow push over 10 minutes • If further seizure(s) repeat a second dose 	
<u>STATUS EPILEPTICUS</u>	
ADULTS / ADOLESCENTS / CHILDREN OVER 6 YEARS: <ul style="list-style-type: none"> • Administer 60 mg/kg (maximum single dose = 4500 mg) once by slow push over 5 minutes • Do not repeat dosing (proceed to second agent if necessary) 	

NOTES
<ol style="list-style-type: none"> 1. Levetiracetam can cause or exacerbate prolonged QT and, except during status epilepticus, its use should be avoided with known prolonged QT. 2. Levetiracetam can cause CNS depression and this may be exacerbated after a prolonged seizure or benzodiazepine administration. Carefully monitor respiratory status after administration.

LINKS

- E14 - Seizure & Status Epilepticus
- F07 - Head Trauma

APPROVED BY

	
EMS Medical Director	EMS Associate Medical Director

VERSION CHANGES (refer to X08 for change tracking)

- New