

EPILEPSY INSTRUCTIONAL STRATEGIES

Generally, no variation in a standard approach to instruction is required for someone with a seizure disorder. Many people with a seizure disorder are so well controlled by medication, they may never mention it or show any symptoms of the disorder. In some cases effects on cognitive functioning are evident, and this exception can be met by searching the Brain Injury chapter for useful ideas.

When a person returns to class following an episode of prolonged or multiple seizures, it is appropriate to assess their readiness to continue from where they left off (e.g., review the previous lesson or retake a chapter quiz).

Strategies for English Language Learners (ELL)

Naturally, students of all origins will demonstrate the same types of signs and symptoms of a seizure disorder. The challenge to instructors is to obtain a satisfactory description of the person's history with seizures in the presence of any communication difficulties. If a seizure disorder is suspected, the instructor should try his or her best to find someone in the family, if not the student, who can report reliably on the student's medical history related to seizures. It will also be helpful to get the name of the local doctor who is monitoring their medication, for consultation or referral if necessary.

Testing Accommodations for the Classroom

Testing accommodations for seizure disorder are generally unnecessary. However, it is important to avoid seizure-precipitating factors by ensuring that for at least 24 hours prior to taking a test the person...

- gets good sleep
- makes no dramatic changes in sleep-wake schedule
- minimizes emotional stress
- avoids caffeine
- avoids alcoholic beverages
- takes no non-prescribed medication or drugs
- regularly follows their doctor's orders

For women who have noticed increased seizure activity during a menstrual cycle, it would be helpful to schedule a test at a time of the month that is least suspect.