

Spell / Seizure / Black Out Questionnaire

At what age did patient start having spells / seizures? _____

When was the last spell / seizure? _____

How often do spells / seizures occur? _____

What is the longest time without a spell / seizure? _____

How many types of spells / seizures does patient get? _____

How long do the spells / seizures last? _____

What triggers the spells / seizures? _____

Any injuries from a spell or seizure? Y | N If so, what? _____

Any history of hospitalization to STOP a seizure that wouldn't stop on its own?? _____

Has patient or family member ever had ANY mental health issues? Y | N _____

Does patient have any difficulties with memory, attention, language, or mental slowing? Y | N (circle)

Any sleep disturbance? Y | N _____ Any history of fractures/osteoporosis? Y | N (circle)

Has patient ever had prolonged video EEG monitoring? Y | N _____

Has patient ever had a FDG-PET scan, MEG, functional MRI, or WADA study for seizures? Y | N _____

Has patient ever had a neuropsychological evaluation? Y | N _____

Does patient have a Vagal Nerve Stimulator? Y | N If so, when was it put in? _____

Has patient ever had surgery for seizures? Y | N If so, where and when? _____

Does patient have any of the following seizure risk factors? (Please circle)

Cerebral bleed

Concussion

Dementia

Birth trauma/complications

Brain Malformation

Brain surgery

Brain tumor

Cerebral palsy

Developmental Delay

Emotional/Physical/Sexual

Abuse

Family History of Seizures

Febrile seizure

Encephalitis

Meningitis

Premature birth

Prenatal exposures

Stroke

NONE

Other:

Please describe what happens before, during and after each type of your spells or seizures:

Please mark each seizure medication you have taken in the past and why the medication was stopped. If stopped due to side effects, please describe effects.

- ☐ Alprazolam (Xanax) _____
- ☐ Briviact (Brivaractam) _____
- ☐ Carbamazepine (Tegretol) _____
- ☐ Cenobamate (Xcopri) _____
- ☐ Clobazam (Onfi) _____
- ☐ Clonazepam (Klonopin) _____
- ☐ Diazepam (Valium, Diastat) _____
- ☐ Eslicarbazepine (Aptiom) _____
- ☐ Ethosuximide (Zarontin) _____
- ☐ Ezogabine (Potiga) _____
- ☐ Felbamate (Felbatol) _____
- ☐ Gabapentin (Neurontin) _____
- ☐ Lacosamide (Vimpat) _____
- ☐ Lamotrigine (Lamictal) _____
- ☐ Levetiracetam (Keppra) _____
- ☐ Lorazepam (Ativan) _____
- ☐ Midazolam (Nayzilam) _____
- ☐ Oxcarbazepine (Trileptal, Oxtellar) _____
- ☐ Perampanel (Fycompa) _____
- ☐ Phenobarbital _____
- ☐ Phenytoin (Dilantin) _____
- ☐ Pregabalin (Lyrica) _____
- ☐ Primidone (Mysoline) _____
- ☐ Rufinamide (Banzel) _____
- ☐ Tiagabine (Gabitril) _____
- ☐ Topiramate (Topamax, Trokendi) _____
- ☐ Valproic Acid/Valproate (Depakote/Depakene) _____
- ☐ Vigabatrin (Sabril) _____
- ☐ Zonisamide (Zonegran) _____
- ☐ Cannabidiol Products or Epidiolex _____
- ☐ Any others? _____