



	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Fear																																
Depression																																
Shame/Guilt																																
Exhaustion																																
Headache																																
Pain																																
Weakness																																
Nausea																																
<b>How long did these post-seizure symptoms last?</b>																																
Less than 5min																																
5-30min																																
Greater than 30min																																
<b>Did you feel the need to nap after your seizure?</b>																																
Yes																																
No																																
<b>Did you have any resulting injury (ex. Bruising, head trauma, fractures etc.) from your seizure? If yes, please write details in the additional information section</b>																																
Yes																																
No																																
<b>Did you require assistance from another individual or emergency service with this seizure? If yes, please write details in the additional information section</b>																																
Yes																																
No																																
<b>Were there any contributing factors or cause for this seizure? If yes, please write details in the additional information section</b>																																
No																																
Stress																																
No medication																																
Other Health Issue																																

If there is any other information you would like to include please enter that below. For instance, if there was a symptom not on the list that you experienced, describe it and include the date it occurred. If you were taken to the hospital or doctor please include date, provider and place you were seen, along with any other details. Detailed explanations and additional information will be helpful to the development of your case. We appreciate your help in developing your case.