

APPARENT LIFE-THREATENING EVENT - ALTE**•Pediatric Routine Medical Care****1. DEFINITION:**

- 1.1 An Apparent Life-Threatening Event (ALTE) was formally known as a “near-miss SIDS” episode
- 1.2 An ALTE is an episode that is frightening to the observer (may think the infant has died) and involves some combination of:
 - ▶ **Apnea** (central or obstructive)
 - ▶ **Color change** (cyanosis, pallor, erythema, plethora)
 - ▶ **Marked change in muscle tone** (limpness)
 - ▶ **Choking or gagging**
- 1.3 Usually occurs in infants < 12 months old, however, any child less than 2 years old who exhibits the symptoms in #1 may be considered an ALTE
- 1.4 Most have a normal physical exam when assessed by responding field personnel
- 1.5 50 – 60% have no known etiology
- 1.6 40 – 50% have an identifiable etiology
(e.g. Child abuse, SIDS, swallowing dysfunction, infection, bronchiolitis, seizures, CNS anomalies, tumors, cardiac disease, chronic respiratory disease, upper airway obstruction, metabolic disorders, or anemia)

2. MANAGEMENT

- 2.1 Assume the history given is accurate
- 2.2 Determine the **severity**, **nature** and **duration** of the episode
 - ▶ was the patient awake or asleep at the time of the episode
 - ▶ details of the resuscitation required
- 2.3 Obtain a **medical history**
 - ▶ known chronic diseases
 - ▶ evidence of seizure activity
 - ▶ current or recent infections
 - ▶ gastroesophageal reflux
 - ▶ inappropriate mixture of formula
 - ▶ recent trauma
 - ▶ medication history (current and recent)
- 2.4 Do a **comprehensive physical exam** that includes the general appearance of the child, skin color, extent of interaction with environment, and evidence of trauma
- 2.5 Perform **glucose analysis** if hypoglycemia suspected
(see ALOC **page 56** if B.S. < 60mg/ dL)
- 2.6 Treat any identifiable causes
- 2.7 Transport
- 2.8 **Note:** **Contact the Base Physician** for consultation if the parent/guardian is refusing medical care and/or transport, prior to completing a Refusal of Care form