SUBJECT: PEDIATRIC TREATMENT PROTOCOL - ALTE (APPEARANT LIFE-THREATENING EVENT) / BRUE (BRIEF RESOLVED UNEXPLAINED EVENT)

<table>
<thead>
<tr>
<th>BLS</th>
<th>ALS</th>
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<tbody>
<tr>
<td>• Ensure patent airway</td>
<td>• Monitor EKG</td>
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<tr>
<td>• O₂ Saturation prn</td>
<td>• Obtain blood glucose prn</td>
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<td>• O₂ and/or ventilate prn</td>
<td>• IV SO prn</td>
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<td>If trained and available:</td>
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<tr>
<td>• Obtain blood glucose prn</td>
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**Hypoglycemia (suspected) or patient’s glucometer results, if available, read <60 mg/dL (Neonate <45 mg/dL):**

- If patient is awake and has gag reflex, give oral glucose paste or 3 tablets (15 g). Patient may eat or drink if able.
- If patient is unconscious, NPO.

**Note:** If the parent/caretaker refuses medical care and/or transport, contact the base hospital prior to completing a refusal of care form.

**Definition:**

An ALTE (Apparent Life-Threatening Event)/ BRUE (Brief Resolved Unexplained Event) is defined as an episode involving an infant less than 12 months of age that is frightening to the observer and is characterized by one or more of the following:

- Apnea (central or obstructive)
- Color change (cyanosis, pallor, erythema)
- Marked change in muscle tone
- Unexplained choking or gagging

**Transport:**

Transport to nearest appropriate facility:

- ALS transport, if child is symptomatic
- BLS transport, if child is asymptomatic
- Private transport acceptable for asymptomatic patient IF:
  - Transportation is available now
  - The parents/caretaker are reliable
  - The parents/caretaker understand the importance of evaluation