

### **Key Documentation Elements**

- Document key aspect of history
  - The event:
    - Breathing (apnea or respiratory distress)
    - Color change (central and/or peripheral)
    - Change in muscle tone
    - Level of responsiveness
    - Event duration
    - Witnessed?
  - Pre-event circumstances and history
    - Event associated with feeding or other activity
    - History of prematurity
    - Prior BRUE events (ever or in past 24 hours)
    - Past medical history, especially cardiac, respiratory, gastrointestinal, neurologic
  - Caregiver resuscitation efforts
  - Post-event symptoms and circumstances
- Document key aspects of the exam and assess for changes after each intervention:
  - Full set of vital signs (pulse, blood pressure, respiratory rate, neurologic status assessment), temperature, and O<sub>2</sub> saturation
  - Respiratory effort
  - Mental status including pupillary reaction and pediatric Glasgow Coma Score (GCS) or AVPU
  - Color (central and peripheral) and capillary refill
  - Presence of signs of abuse, trauma, or neglect
- Document environmental and scene/social clues, especially those suggesting abuse, neglect, non-accidental trauma, or unsafe sleeping practices

### **Performance Measures**

- Complete set of vital signs recorded
- Appropriate transport destination relative to risk criteria

### **References**

#### **Key Reference**

1. Tieder JS, Bonkowsky JL, Etzel RA, et al. Brief resolved unexplained events (formerly apparent life-threatening events) and evaluation of lower-risk infants: a systematic review. *Pediatrics*. 2016;137(5): e20165090

#### **Supplemental References**

1. Alhaboob AA. Clinical Characteristics and Outcomes of Patients Admitted with Brief Resolved Unexplained Events to a Tertiary Care Pediatric Intensive Care Unit. *Cureus*. 2020;12(6): e8664
2. Al-Kindy H, Gelinas J, Hatzakis G, Cote A. Risk factors for extreme events in infant hospitalized for apparent life-threatening events. *J Pediatr*. 2009;154(3):332–7
3. Arane K, Claudius I, Goldman RD. Brief resolved unexplained event: new diagnosis in infants. *Can Fam Phys*. Jan 2017; 63:39–41
4. Bastin JP. Brief Resolved Unexplained Events in Infants. *JAAPA*. 2019;32(7):38–40
5. Benham-Terneus M, Clemente M. SIDS, BRUE, and Safe Sleep Guidelines. *Pediatr in Rev*.