

D. APPARENT LIFE-THREATENING EVENT (ALTE)



1. Initiate General Patient Care.

2. Presentation

An episode in an infant or child less than 2 years old that is frightening to the observer and is characterized by some combination of the following:

- a) Apnea (central or obstructive)
- b) Skin color change: cyanosis, erythema (redness), pallor, plethora (fluid overload)
- c) Marked change in muscle tone
- d) Choking or gagging not associated with feeding or a witnessed foreign body aspiration



MOST PATIENTS WILL APPEAR STABLE AND EXHIBIT A NORMAL PHYSICAL EXAM UPON ASSESSMENT BY RESPONDING FIELD PERSONNEL. HOWEVER, THIS EPISODE MAY BE THE SIGN OF UNDERLYING SERIOUS ILLNESS OR INJURY. FURTHER EVALUATION BY MEDICAL STAFF IS REQUIRED AND IT IS ESSENTIAL TO TRANSPORT ALL PATIENTS WHO EXPERIENCED ALTE.



3. Treatment

- a) Perform an initial assessment utilizing the Pediatric Assessment Triangle.
- b) Obtain a description of the event including nature, duration, and severity.
- c) Obtain a medical history with emphasis on the following conditions:
 - (1) Known chronic diseases
 - (2) Evidence of seizure activity
 - (3) Current or recent infections
 - (4) Gastroesophageal reflux
 - (5) Recent trauma
 - (6) Medications (current or recent)
- d) Apply oxygen.
- e) Be prepared to assist with ventilation if this type of episode occurs again during transport.
- f) Assess environment for possible causes.



- g) Place patient on cardiac monitor.
- h) Consider establishing IV/IO access with LR.



IF THE PARENT OR GUARDIAN REFUSES MEDICAL CARE OR TRANSPORT, PROVIDER SHALL CONTACT A **PEDIATRIC BASE STATION** PHYSICIAN.

4. Continue General Patient Care.