PEDIATRIC EMERGENCY DEPARTMENT CLINICAL GUIDELINE:
APPARENT LIFE THREATENING EVENT IN INFANTS (ALTE)

Population:
- Infants, peak age 2-4 months
- Heterogeneous group of diagnoses
- Diverse pathophysiology

History:
- Apnea (respiratory pause > 15 sec or any duration with associated pallor, cyanosis &/or bradycardia)
- Change in muscle tone, either rigidity or limpness
- Change in mental status
- Choking or gagging

Physical Exam:
- Rapid cardiopulmonary assessment
- Assess for signs/symptoms of shock
- May appear well and in no distress

Diagnostic Evaluation & Management:
- Full cardiopulmonary resuscitation/support as indicated
  - Other elements in the history will determine further diagnostic work-up:
    - How long did the event last?
    - Were there any color changes and if so where?
    - Was the child awake or asleep?
    - Was there a need for any resuscitative efforts by the caregiver?
    - Were there any associated movements (seizure activity) or changes in tone?
    - How long after the last feeding did this event occur?
    - Did the child vomit?
    - Has the child had a “cold” or “fever”?
    - How did the child appear after the event?
- Consider:
  - Sepsis work-up for bacterial and viral (RSV) etiologies
  - Evaluation for seizures
  - Evaluation for physical abuse
  - Evaluation for systemic and metabolic disorders
  - Evaluation for cardiovascular diseases
  - Evaluation for gastroesophageal reflux

Disposition Assignment:
- ALTE is a description of an event with an extensive differential diagnosis.
- Many will require admission for observation and further evaluation if the history and physical support the diagnosis of ALTE.

References:


DISCLAIMER:
This clinical guideline has been developed for the purpose of unifying the general emergency care of children with ATLE. It is intended to aid, rather than substitute for, professional judgment. It is not intended to serve as a rigid protocol or a written proxy for the standard of care. Failure to comply with this guideline does not represent a breach of the standard of care.