

BRIEF RESOLVED UNEXPLAINED EVENT BRUE

| Signs & Symptoms | Low Risk | High Risk |
|---|---|--|
| <ul style="list-style-type: none"> • Absent, decreased, or irregular breathing • Color change (Central cyanosis or pallor) • Marked change in muscle tone (hyper-/otonia) • AMS | <ul style="list-style-type: none"> • Age \geq 60 days • Premature but \geq 32 weeks • Postconceptional age \geq 45 weeks • 1 BRUE • Duration BRUE < 1 min. | <ul style="list-style-type: none"> • Age < 60 days • Premature < 32 weeks • Postconceptional age < 45 weeks • >1 BRUE • Family PMH sudden cardiac death |

| | | EMR | EMT | PM |
|----|---|-----|-----|----|
| 1. | Provide Pediatric Routine Medical Care - treat life threatening problems with airway, breathing circulation and disability. | • | • | • |
| 2. | Obtain ECG, monitor Capnography. | | • | • |
| 3. | Transport for medical evaluation, even after resolved | | • | • |
| 4. | Contact OLMC if transport is refused | | • | • |

PEARLS:

1. Regardless of the patient's well appearance, all infants with a history of signs or symptoms suggestive of BRUE should be transported for further evaluation
2. The determination of a BRUE is made only after hospital evaluation, not in the field. A few of these infants will die even after hospital evaluation and treatment