Proposed Quality Measures for Brief Resolved Unexplained Events

Settings: Emergency departments, outpatient clinics and private offices

Inclusion Criteria: Patient < 1 year of age presenting for medical care after an event consistent with either an ALTE or BRUE

Exclusion Criteria: Patients who required intubation

1) Definition
   Proportion of patients with ALTE appropriately classified as BRUE
   Numerator: Number of patients with ALTE correctly classified as BRUE or non-BRUE
   Denominator: Number of patients with ALTE
   Data Source: chart review
   Goal: 90 or 95%

2) Risk stratification
   Proportion of patients with BRUE categorized into the correct risk stratification
   Numerator: Number of BRUES correctly classified as lower risk or high risk
   Denominator: Number of patients with BRUE
   Data Source: chart review
   Goal: 95%

3) Risk factor documentation
   Proportion of patients with BRUE with documentation of risk factors
   Numerator: Number of patients with a BRUE and documentation of all RFs on check list
   Denominator: Number of patients with BRUE
   Data Source: Chart Review
   Goal: 90%
   Suggested core set of RF
   Prior history - Gestational age, previously healthy, no prior episodes;
   Family history - sudden death;
   Social History – concern for NAT;
   Event history - event duration, CPR, GER symptoms;
   Physical exam -Well appearing, vital signs, HEENT/cardiac/lung/neurologic exams normal or baseline

4) Resource Utilization
   Proportion of patients with lower risk BRUE without excess resource utilization
   Numerator: Number of infants with lower risk BRUE who were 1) discharged home (not admitted for observation or inpatient admission) and 2) received no imaging, procedures or laboratory other than EKG, brief pulse ox monitoring or pertussis testing. Examples of excess resource utilization include lab tests: CBC, BMP, blood gas, viral testing, urinalysis, cultures; imaging tests: CXR, UGI, video swallow study; procedure: polysomnography, PH probe, Multiple intraluminal impedance testing
   Denominator: Number of patients with lower risk BRUE
   Data Source: Chart review or Administrative data

5) Revisits
   Proportion of patients with lower risk BRUE with revisit to healthcare provider within 7 days
Numerator: Number of infants with lower risk BRUE who have an unscheduled revisit within 7 days for symptoms or concerns related to ALTE
Denominator: Number of patients with lower risk BRUE
Data Source: Chart review (administrative data could be used but relies on ICD-10 code to determine if the revisit was related to an ALTE)

6) Other possible metrics for research initiatives
1. Length of visit
2. Costs
3. Ultimate diagnosis
4. Family experience