



BURNS

ADULT	PEDIATRIC
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Burn Triage Criteria

- Partial/full thickness (2nd or 3rd degree) burns involving greater than 15% TBSA without airway compromise
 - Partial/full thickness (2nd or 3rd degree) burns of face, hands, feet, perineum or circumferential burn to any body part
 - Significant electrical injuries with voltage in excess of 220v or lightning injury
 - Significant inhalation injury
 - All full thickness burns (3rd degree)
- These patients should be transported to the closest receiving Burn Center

BLS Procedures

Assess Airway.
 Assist Ventilations, if needed.
 Oxygen, Titrate to SPO2 of 94% or higher.
 Assess Vitals.

For burns ≤ 30% and in the absence of immediate life threats:

- Initiate or continue cool running water to the burn area to immediately stop the burning process.
- It is optimal to have 20 minutes of cool running water (20CRW) prior to transport
- If it is not possible to complete 20CRW, notify ED or Air Transport, the total time that 20CRW was completed.
- 20CRW water does not need to be sterile, tap water or equivalent sources are acceptable.
- When 20CRW is completed or if unable to complete, cover burn(s) with sterile, dry dressing, or clear plastic wrap; DO NOT apply any burn cream.
- Remove all jewelry or constricting items (rings, necklaces, watches, etc.).

ALS Standing Orders

Obtain ECG.
 IV/IO as necessary.
 Pain Control – refer to Pain Management Protocol.

ALS Treatments

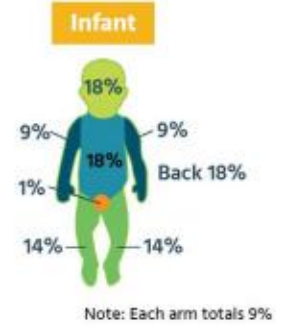
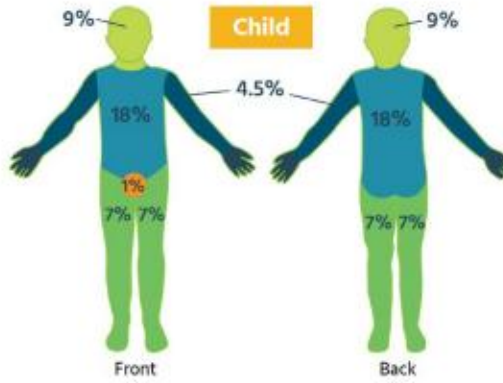
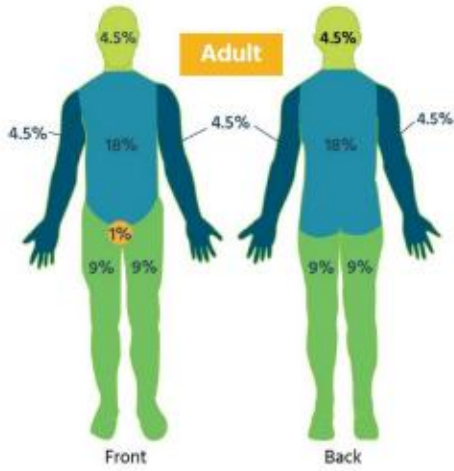
<p style="text-align: center;">For Burns ≥ 20 % or SBP < 90 mmHg</p> <p>Fluid Bolus 500 ml IV/IO</p> <ul style="list-style-type: none"> • Total max infused 2 L <p style="text-align: center;">Patients who are Wheezing</p> <p>Albuterol 5 mg Nebulized</p> <ul style="list-style-type: none"> • May repeat once <p style="text-align: center;"><u>AND/OR</u></p> <p>Duo-Neb Nebulized (Ipratropium 0.5 mg/Albuterol 2.5 mg)</p> <ul style="list-style-type: none"> • May repeat once 	<p style="text-align: center;">For Burns ≥ 20 % or low SBP</p> <p>0-9 yrs. old - Systolic blood pressure 70 + (2 x age in yrs.) 10 or older - Systolic blood pressure 90+</p> <p>Fluid Bolus 20 ml/kg IV/IO</p> <ul style="list-style-type: none"> • Total max infused 60 ml/kg <p style="text-align: center;">Patients who are Wheezing</p> <p>Albuterol 5 mg Nebulized</p> <ul style="list-style-type: none"> • May repeat once <p style="text-align: center;"><u>AND/OR</u></p> <p>Duo-Neb Nebulized (Ipratropium 0.5 mg/Albuterol 2.5 mg)</p> <ul style="list-style-type: none"> • May repeat once
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Special Considerations

- Consider early intubation in adult burn patients with signs of severe respiratory compromise (wheezing stridor, carbonaceous sputum, facial edema, nasal singeing, etc.).
- Patients with severe burns to head, face, throat or chest should be transported with the head elevated at least 30°.
- Assess for airway involvement with severe chemical burns and patients burned from fires in enclosed spaces.



Rule of 9's



Base Hospital Orders Only