

ABCs of Burn Care

RICHARD M. FAIRBANKS BURN CENTER AT ESKENAZI HEALTH • INDIANAPOLIS

1.800.4.TRAUMA • For patient transfers and adult and pediatric consultation

Airway

1. Establish patient airway.
2. Assess for symptoms of airway/inhalation injury.
3. Consider intubation for: inhalation injury, facial burn, respiratory distress, singed nasal hair and singed eyebrows.

Breathing

1. Administer 100 percent high-flow O₂ by non rebreather mask or ETT.
2. Observe for symptoms of respiratory distress.
3. Evaluate initial ABG, COHb, and O₂ saturation.

Circulation

1. Fluid resuscitation begins at time of injury.
2. Initiate with burns of 20 percent TBSA or greater.
3. Insert foley catheter.
4. Remember: $4\text{ml} \times \text{kg (dry weight)} \times \%TBSA = \text{total 24-hour fluid need}$.
5. Give half of total need in first eight hours.
6. Titrate fluids to keep urine output 0.5ml-1ml/kg/hr.

Depth

Classify the burn as one of the following based on indicated characteristics:

Superficial	Partial Thickness	Full Thickness
Red	Moist	Dry, leathery
Dry	Blisters	Insensate
Painful	Painful	Color variable

Depth of burn will evolve over the next 12-18 hours

Extent

1. Estimate percentage of burn.
2. Refer to adjacent chart.

Fahrenheit

1. Apply dry dressings.
2. Provide warm blankets.
3. Provide warm fluids.
4. Maintain normothermia.

GI Tract

1. Keep NPO for stabilization and transport.
2. Place NG tube on intubated patients.

History Head to Toe

Record the following:

1. Mechanism of injury.
2. Past medical history.
3. Tetanus immunization status.
4. Medications.
5. Allergies.
6. Head-to-toe survey.
7. Time of last meal.

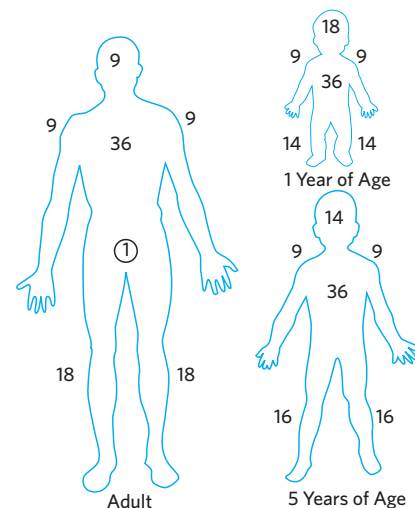
Identify Candidates for Transfer

Patients who have:

1. Partial thickness burns of more than 10 percent.
2. Full thickness burns of more than 5 percent.
3. Circumferential burns of extremities, trunk, neck or burn over a joint.
4. Burns of face, hands, feet, perineum.
5. Electrical or chemical injury.
6. Burns with associated trauma or inhalation injury.
7. Burns of less than 5 percent on a patient more than 40 years of age.

- **Protect** yourself and your team.
- **Stop** the burning process.
- **Decontaminate** chemical injuries.
- **Consider** spine precautions based on mechanism of injury.

Estimating Percent of Burn: Rule of Nines



Estimate percentage of burn for each body part according to age.

Other considerations:

Pain management
IV Analgesia

