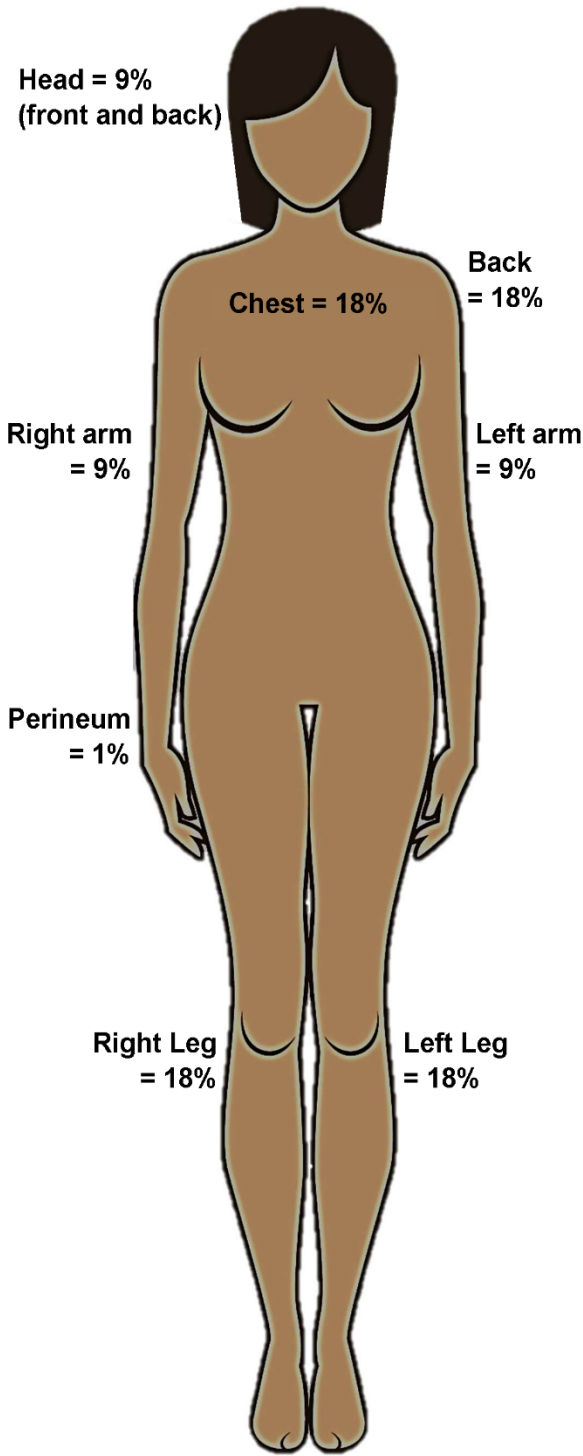


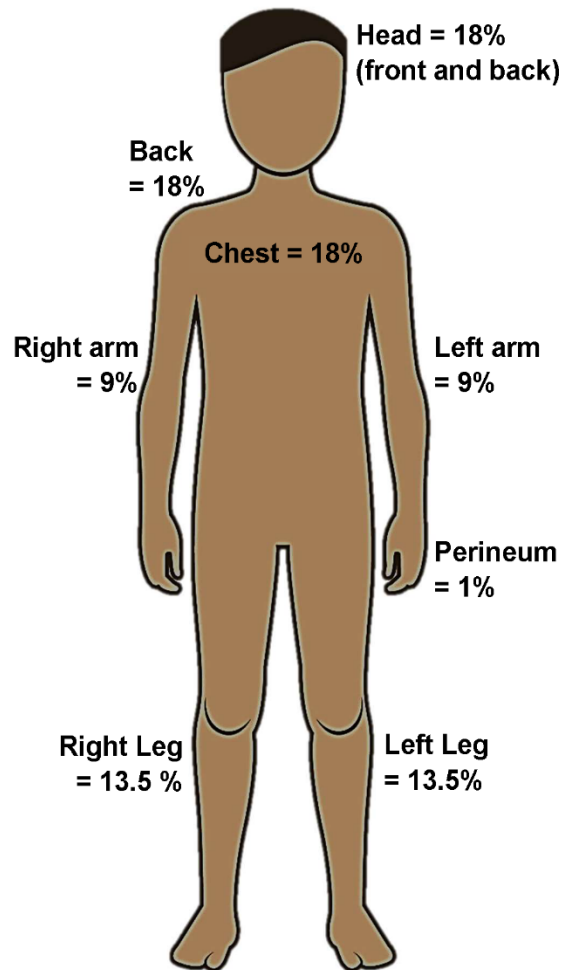


<b>INDICATION</b>	<ul style="list-style-type: none"> <li>• Burns caused by heat, electrical, radiation, friction or chemicals.</li> </ul>
<b>BLS</b>	<ul style="list-style-type: none"> <li>• Follow <a href="#">General Trauma Care T-01</a>.</li> <li>• Stop burning process:             <ul style="list-style-type: none"> <li>• Remove contact with agent, unless adhered to skin.</li> <li>• Flush with water to stop burning process or to decontaminate skin.</li> </ul> </li> <li>• Remove restrictive clothing and jewelry that is not adhered to patient.</li> <li>• Protect the burned area with sterile dressings or sheets.             <ul style="list-style-type: none"> <li>• Burns &lt;10% total body surface area may be kept wet with saline moistened dressings.</li> <li>• Burns &gt;10% total body surface area should only use dry dressing to avoid hypothermia. Cover patient with sterile burn sheet and blanket to prevent loss of body heat.</li> </ul> </li> <li>• Elevate burned body parts 30° if possible.</li> </ul>
<b>ALS</b>	<ul style="list-style-type: none"> <li>• All specific ALS treatment is identified in <a href="#">General Trauma Care T-01</a>.</li> <li>• For suspected exposure to Cyanide or CO, <a href="#">Smoke Inhalation / Carbon Monoxide Monitoring &amp; Cyanide Toxicity M-10</a>.</li> </ul>
<b>KEY CONCEPTS</b>	<ul style="list-style-type: none"> <li>• Direct transport to a Burn Center is preferred for major burns. Burn injuries that should be referred to a burn center include:             <ul style="list-style-type: none"> <li>• Partial thickness burns greater than 10% total body surface area (TBSA).</li> <li>• Partial thickness and full thickness burns that involve the face, hands, feet, genitalia, perineum, or major joints.</li> <li>• Full thickness burns in any age group.</li> <li>• Electrical burns, including lightning injury.</li> <li>• Chemical burns.</li> <li>• Burn injury in patients with preexisting medical disorders that could complicate management, prolongs recovery, or affects mortality.</li> <li>• Any patient with burns and concomitant trauma (such as fractures) in which the burn injury poses the greatest risk of morbidity or mortality. In such cases, the patient may be initially stabilized in a trauma center before being transferred to a burn unit. Base Hospital consultation will be necessary in such situations.</li> <li>• Any patient with inhalation injury shall be transported to the closest Emergency Department.</li> </ul> </li> <li>• Use the “Rule of Nines” to estimate TBSA.</li> </ul>

# “Rule of Nines”



**Adult**



**Child**