Michigan Adult Treatment Protocols BURNS

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Burns

Pre-Medical Control

MFR/EMT/SPECIALIST/PARAMEDIC

- 1. Follow General Pre-hospital Care Protocol.
- 2. Determine burn extent & severity (rule of nines) or (palm = 1%).
- 3. Follow local MCA transport protocol.
- 4. Keep patient warm and avoid hypothermia.

THERMAL BURNS:

- 1. Stop the burning process. Remove smoldering and non-adherent clothing. Irrigate with sterile water (i.e., tar adherent)
- 2. Assess and treat associated trauma.
- 3. Remove any constricting items.
- 4. If partial/full burn is moderate-to-severe, more than 15% of total body surface area (TBSA), cover wounds with dry clean dressings.
- 5. Use cool, wet dressings in smaller burns, less than 15% BSA, for patient comfort.

CHEMICAL BURNS:

- 1. Protect personnel from contamination.
- 2. Remove all clothing and constricting items.
- 3. Decontaminate patient prior to transport, brushing off dry chemicals prior to irrigation.
- 4. Assess and treat for associated injuries.
- 5. Evaluate for systemic symptoms, which might be caused by chemical contamination.
- 6. Notify receiving hospital of possible chemical contamination.
- 7. Cover burned area in clean, dry dressing for transport.

ELECTRICAL INJURY:

- 1. Protect rescuers from live electric wires.
- 2. Remove patient from electrical source when energy source is removed.
- 3. Treat associated injuries provide spinal precautions per spinal injury assessment protocol and spinal precautions procedures when indicated.
- 4. Assess and treat contact wound(s).

PARAMEDIC

5. Monitor patient ECG for possible arrhythmias. Treat as per specific arrhythmia protocol.

FOR ALL TYPES OF BURNS: SPECIALIST/PARAMEDIC

- 1. Obtain vascular access if indicated for pain management or fluid therapy.
- 2. Administer NS IV/IO fluid bolus up to 1liter wide open for hypotension or severe burn greater than 15% TBSA. Repeat as indicated.
- 3. Follow local MCA burn transport protocol.



MCA Implementation Date

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PARAMEDIC

4. Administer Analgesic Medication. Refer to Pain Management Procedure.

Post-Medical Control

Thermal Burns and Electrical Injury:

1. Additional NS IV/IO fluid bolus, up to $\pm \frac{2}{2}$ liters, wide open.

Thermal inhalation, chemical burns:

2. Intubation per Emergency Airway Procedure.



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Page 1 of 3 Date: September 22, 2015 Follow General Pre-hospital Care Protocol Determine burn extent and severity (rule of nines) Follow local MCA transport protocol Keep patients warm to prevent hypothermia **THERMAL BURNS ELECTRICAL BURNS CHEMICAL BURNS** Stop the burning process Protect rescuers from live Protect personnel from Remove smoldering & nonelectrical wires adherent clothing. Irrigate contaminant Remove patient from with sterile water Remove all clothing and electrical sources when constricting items Assess & treat associated energy source removed Decontaminate patient prior to trauma Treat associated injuries Remove any constricting items transport, brushing off dry provide spinal precautions per spinal injury assessment chemicals prior to irrigation Assess & treat for associated protocols and spinal precautions procedures when injuries Evaluate for systemic symptoms, indicated If partial/full burn, more than which might be caused by chemical Assess contact wound(s) 15% of total body surface area (TBSA), cover wounds with dry contamination Monitor patient ECG for Notify receiving hospital of possible arrhythmias. Treat as clean dressings. possible chemical contamination per specific arrhythmia Keep patient warm to prevent hypothermia Cover burned area in clean, dry protocol dressing for transport Obtain vascular access if indicated for pain management or fluid therapy If partial or full thickness burn is greater than 15% TBSA: Administer NS IV/IO fluid bolus, up to 1 Liter, wide open, for hypotension or burn greater than 15% TBSA. Repeat as indicated Follow local MCA transport protocol Administer analgesic medication. Refer to Pain Management Procedure Thermal burns and electrical injury: Additional NS IV/IO fluid bolus, up to 1 liter, wide Thermal inhalation, chemical burns: Intubation per Emergency Airway Procedure



