Alaska Burn Triage and Transport Guidelines

Alaska Trauma Systems Review Committee and the Office of the Alaska EMS Medical Director (Accessible text document below)

Goals

- Improve burn outcomes using most appropriate resources
- Identify and treat life-threatening injuries within the capabilities of the sending facility
- Initiate early consultation with a burn specialist
- Timely transfer to closest, most appropriate facility

Early Transfer to HMC for Definitive Care

- Pediatric Full Thickness Burn >10% *
- Adult Full Thickness Burn >30% *
- High energy electrical injury with soft tissue loss
- *Assessed by burn specialist which may be done remotely

Resources

Level 1 Harborview Medical Center (HMC) 888-731-4791

Level 2 ANMC 907-729-2337 Level 2 PAMC 907-212-7363

Burn Mass Casualty: Western Region Burn Disaster 24/7 Hotline 1-866-364-8824

Reminder

Calculate TBSA counting only partial and full thickness burns

Extent of Burn Injury

- Intubated patient
- Inhalation injury
- Full thickness head/neck burns
- >10% TBSA in pediatrics
- >20% TBSA in adults
- Circumferential burn to limb or chest compromising circulation or ventilation
- Burns with associated trauma
- Medical condition complicating burn treatment
- High-energy electrical injury including lightning

NO

NO

YES

Hydrofluoric acid burn

>5% pediatrics, >10% adults · Burn to the face, hands, feet, genitalia, **Consult for Transport** perineum or major joints

Critical Transport

Closest Burn/Trauma Facility

Destination

• Electrical burns (other than above) • Suspected non-accidental trauma

Extremes of age

Minor burns can be treated in consultation with the referring provider on an outpatient basis: **Minor Pathway** either locally (at original place of care) or via referral to an ambulatory burn care clinic

> Does the Situation Meet All of the Following Requirements?

- 1. Pain is controlled
- 2. Ability to perform wound care
- 3. Perform activities of daily living
- 4. Adequate support system
- 5. Safe discharge disposition

Inpatient Management

NO

These are guidelines. Early specialty consultation is encouraged.

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- Improve burn outcomes using the most appropriate resources
- Identify and treat life-threatening injuries within the capabilities of the sending facility
- Initiate early consultation with a burn specialist
- Timely transfer to the closest, most appropriate facility

Early transfer to Harborview Medical Center for definitive care:

- Pediatric full-thickness burn >10%*
- Adult full-thickness burn >30%*
- · High energy electrical injury with soft tissue loss

Resources:

- Level I Harborview Medical Center (HMC): 888-731-4791
- Level II ANMC: 907-729-2337
- Level II PAMC: 907-212-7363
- Burn Mass Casualty: Western Region Burn Disaster 24/7 Hotline: 1-866-364-8824

Reminder:

Calculate TBSA counting only partial and full thickness burns

Extent of Burn Injury

- 1. Are any of the following present?
 - a. Intubated patient
 - b. Inhalation injury
 - c. Full thickness head/neck burns
 - d. >10% TBSA in pediatrics
 - e. >20% TBSA in adults
 - f. Circumferential burn to limb or chest compromising circulation or ventilation
 - g. Burns associated with trauma
 - h. Medical condition complicating burn treatment
 - i. High-energy electrical injury including lightning
 - j. Hydrofluoric acid burn

^{*}Assessed by burn specialist which may be done remotely

If yes to any of the above, jump to 2

If no to all of the above, jump to 3

- 2. Critical Transport to Closest Burn/Trauma facility
- 3. Are any of the following present?
 - a. >5% pediatrics, >10% adults
 - b. Brun to face, hands, feet, genitalia, perineum, or major joints
 - c. Electrical burns (other than above)
 - d. Suspected non-accidental trauma
 - e. Extremes of age

If yes to any of the above, jump to 4

If no to all of the above, jump to 5

- 4. Consult for Transport Destination
- 5. Minor pathway- jump to 6.
- 6. Minor burns can be treated in consultation with the referring provider on an outpatient basis: either locally (at original place of care) or via referral to an ambulatory burn care clinic.
- 7. Does the situation meet all of the following requirements?
 - a. Pain is controlled
 - b. Ability to perform wound care
 - c. Perform activities of daily living
 - d. Adequate support system
 - e. Safe discharge disposition

If yes to all of the above, jump to 5

If no to any of the above, jump to 8

8. Inpatient management

These are guidelines. Early specialty consultation is encouraged.