

ALS: Burns

GLOBAL MARK			
CLEAR PASS	BORDERLINE PASS	BORDERLINE FAIL	FAIL

Criteria

Introduces Self, confirms patient identify, Washes hands,	2, 1
PPE	1
Confirms team competencies	1
Explains Plan A-E Assessment Airway problems may be difficult Cling film	
Summons appropriate help Trauma team Plastics or burns doctor on call Difficult airway trolley	
ABCDE approach	
Asks for IV access, appropriate first line Ix	
Assesses airway for signs of compromise Soot, Burnt nares, mouth, oral mucosa Neck	
Asks for airway control	
Aware that intubating conditions will deteriorate if airway control is not pro-active	
Applies O2	
Slick B-D assessment	
E – Uses rule of nines asks for Lund Browder charts, or palmar method to estimate BSA. Rule of 9s (adults) Arm, Abdomen, Head and Chest - 9 Leg and back 18 Palmar method – patients palm and fingers = 1% Doesn't count erythema.	
Comes up with appropriate figure	
Offers/gives patient analgesia	
Asks for burn to be LOOSLEY wrapped in clingfilm	
Calculates Fluid using parkland formula % burn x weight x 4ml = 24 hours. 50% in first 8 hours (FROM TIME OF BURN) Know that this is the resuscitation fluid and that maintenance fluid will need to be added.	

Hands over to burns team/ICU using SBAR	
Thanks team	
Offers debrief	
TOTAL	

Tom Bircher 2019.