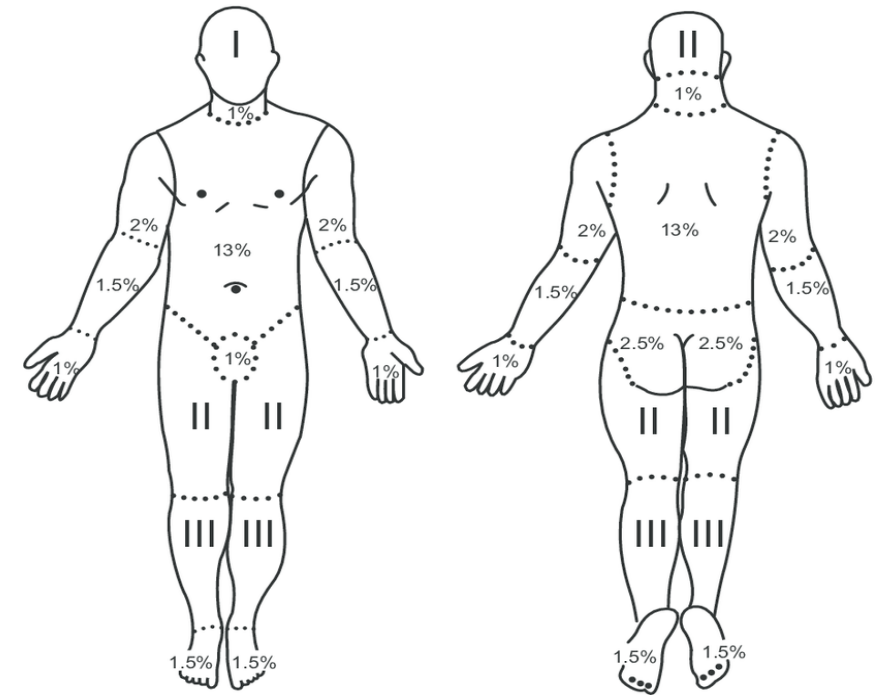


Severe Thermal Burns Management

A	<ul style="list-style-type: none"> Respiratory distress, stridor or wheeze Hoarse voice Singed nasal hairs Sooty sputum 	<ul style="list-style-type: none"> Burns within enclosed space Deep facial burns <p style="text-align: center;">Involve Anaesthetics early</p>
B	<ul style="list-style-type: none"> Apply high flow oxygen ABG to check COHb If signs of cyanide poisoning (low GCS, low BP, refractory raised lactate) give cyanokit 	<ul style="list-style-type: none"> Check if restricted ventilation due to circumferential burns and consider escharotomy
C	<ul style="list-style-type: none"> Bilateral wide bore cannulae, away from burns if possible Full blood count, Urea & Electrolytes, Liver Function Tests, CRP, Amylase, Creatine Kinase, Cross-Match, Group & Save Calculate fluid requirements and consider NG tube 	
D	<ul style="list-style-type: none"> Pain management with opioids or ketamine Temperature management with active/passive measures If blast injury, consider need for CT traumagram 	
E	<ul style="list-style-type: none"> Remove non-adherent clothing and jewelry Cool and clean wounds for at least 20 minutes with running water Cover burns with loose cling-film, except on the face Assess the percentage and depth of 	<ul style="list-style-type: none"> burns Consider need for tetanus prophylaxis If circumferential limb burns discuss with plastics and ortho Refer, with photos, via www.trips.nhs.uk and discuss on 01342 414440



Age	0	1	5	10	15	Adult
Front or back half	(%)	(%)	(%)	(%)	(%)	(%)
I (Head)	9½	8½	6½	5½	4½	3½
II (Thigh)	2¾	3¼	4	4¼	4½	4¾
III (Leg)	2½	2½	2¾	3	3¼	3½

Fluid requirements = 2ml - 4ml / kg / %BSA
 Give half over 8 hours, then the rest over 16 hours
 Catheterise and aim urine output 0.5-1ml/kg/hr (1ml/kg/hr in children < 30kg)