BURNS

Key Questions

How was the patient burned?
- THERMAL — Is anything on the patient still burning?
- ELECTRICAL — Is the patient still in contact with the electric source?
  - How was patient electrocuted?
  - If household, was it the stove, clothes dryer or other 220 volt source?
- CHEMICAL — What chemical caused the burn?

Can the patient answer your questions?
Is the patient short of breath or does it hurt to breathe?
Is the patient having difficulty swallowing?
Where is the patient burned?
If head or face:
- _ Are they coughing?
- _ Are their nose hairs burned?
- _ Are there burns around their mouth and nose?

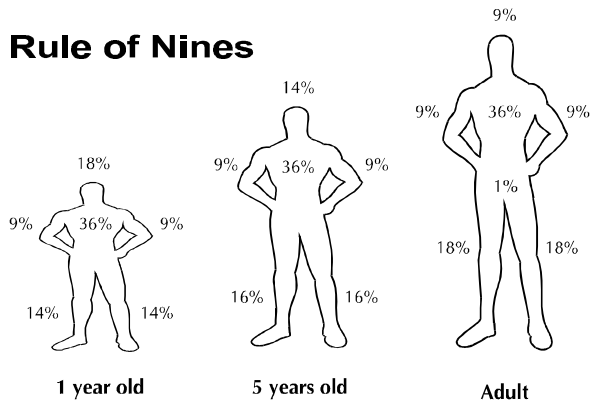
If male, is any facial hair burned?
Are there any other injuries?

Dispatch

SIMULTANEOUS ALS/BLS	BLS DISPATCH
Unconscious/not breathing normally. Decreased level of consciousness. Burns to airway, nose, mouth. Hoarseness, difficulty talking or swallowing. Burns over 20% of body surface. Electrical Burns/electrocution from 220 volts or greater power lines/panel boxes.	Less than 20% body surface burned. Spilled hot liquids. Chemical burns to eyes. Small burn from match, cigarette. Household electric shock. Battery explosion. Freezer burns.

BURNS Pre-Arrival Instructions

Turn power off, (if safe).
Have patient remove contaminated clothing, if possible.
If chemical, get information on chemical (MSDS Sheet if available).
If chemical is powder, brush off, no water.
Flush chemical burns from eyes. Remove contact lenses if present.
Place burned area in cool water (not ice), if convenient.
Gather patient medications, if possible.
If the patient's condition changes, call me back.



Prompts

If unconscious, go to UNCONSCIOUS/BREATHING NORMALLY AIRWAY CONTROL
If unconscious, NOT breathing normally, go to CPR for appropriate age group.
Dispatch Fire Department, according to local protocol.

Short Report

Age
Sex
Specific location
Chief complaint
Pertinent related symptoms
Medical/Surgical history, if any
Other agencies responding
Any dangers to responding units