Burn Initial Stabilization Worksheet

Vital Signs:

HR ____ BP _____ Temp _____ RR _____ O2Sats _____

Airway & Breathing Assessment

Injury Circumstances:

- Enclosed Space? If yes, administer 100% FiO2 immediately. If no, supplement with oxygen if needed.
- Is intubation necessary? If so, reason for: _____
- Tube Size _____ Depth _____
- Cuffed or Un-cuffed? _____
- Secured with _____
- ABG results _____ /_____ /_____ /_____

Level of Consciousness (circle the number)

GCS (Glascow Coma Scale):

Eye: Spontaneous 4, voice 3, pain 2, none 1

Verbal: Oriented 5, confused 4, inappropriate words 3, incomprehensible sounds 2, none 1

Motor: Obeys commands 6, localizes 5, withdraws 4, flexion 3, extension 2, none 1

Total GCS: _____

AVPU: A V P U (circle one)

Calculating % Total Body Surface Area (%TBSA) Burned

(use diagram to note deep injuries, and the TBSA Chart on the protocol for TBSA% calculation)

% Total Body Surface Area Burned _____

IVF Given prior to transfer (Step 6 of stabilization protocol):

LR _____ml NS _____ml Current IVF Rate_____ml/hr

Output—Total UOP prior to transfer _____ UOP in ml /hr _____

Comfort Management

IV Narcotic _____ Dose _____ Time Given _____

IV Anxiolytixc _____ Dose _____ Time Given _____

Tetanus

TD Given? Yes ☐ or No ☐ TIG given? Yes ☐ or No ☐

Site (s) _____ Time Given _____

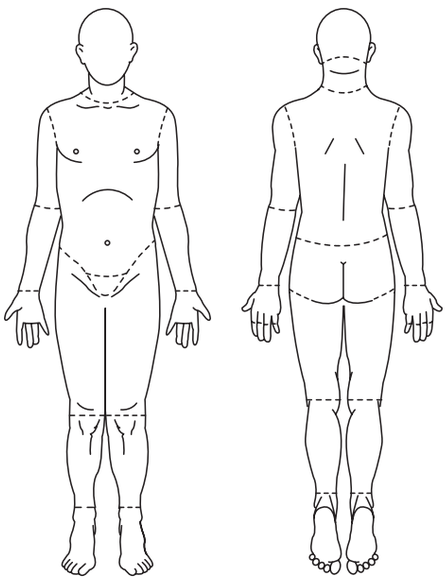
Wound Care

- For short transport times (< 4 hours) wrap in dry sterile gauze dressings
  Dry Dressings Applied? Yes ☐ or No ☐ Site _____
- For Longer Transport times (> 4 hours) apply Silver Sulfadiazine (SSD) cream in a thin layer to gauze, and apply SSD impregnated gauze to open areas on burned skin. Cover with dry sterile gauze wraps.
  SSD Dressings Applied? Yes ☐ or No ☐ Site _____

Prepare for Burn Team Report/ Transport

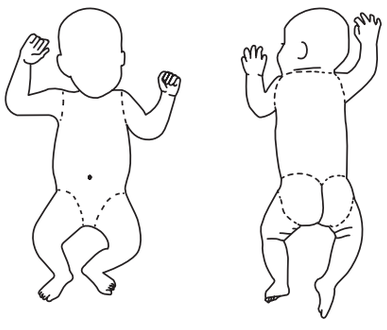
Time of injury: _____ Mechanism of injury: _____

Past Medical History		Respiratory Status/Vent Settings and ETT info	
Allergies		Lab and Test Results	
Estimated %TBSA		Associated Injuries	
IV Fluids Already Given		IV Access Type	
Total Urine Output • Foley Present • Hourly Urine Output	Yes No	Other Lines or Tube Present	
Current IVF Rate and Fluid		Child Protective Services Involved?	Yes No
Tetanus Status		Type of Transport Anticipated	
Most Recent Vital Signs		Family accompanying patient	



Starting IVF Rate is age based

- Infants (< 1 yr)	125 mL/h
- Kids (1-12 yr)	250 mL/h
- Adults (> 12 yr)	500 mL/h



Record Regions Hospital Burn Center Accepting Physician

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_____

Record Sending Provider

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