

Michigan
Adult Treatment Protocols
BURNS

Date: September 22, 2015

Page 1 of 3

Burns

Pre-Medical Control

MFR/EMT/SPECIALIST/PARAMEDIC

1. Follow **General Pre-hospital Care Protocol**.
2. Determine burn extent & severity (rule of nines) or (palm = 1%).
3. Follow local MCA transport protocol.
4. Keep patient warm and avoid hypothermia.

THERMAL BURNS:

1. Stop the burning process. Remove smoldering and non-adherent clothing. Irrigate with sterile water (i.e., tar adherent)
2. Assess and treat associated trauma.
3. Remove any constricting items.
4. If partial/full burn is moderate-to-severe, more than 15% of total body surface area (TBSA), cover wounds with dry clean dressings.

CHEMICAL BURNS:

1. Protect personnel from contamination.
2. Remove all clothing and constricting items.
3. Decontaminate patient prior to transport, brushing off dry chemicals prior to irrigation.
4. Assess and treat for associated injuries.
5. Evaluate for systemic symptoms, which might be caused by chemical contamination.
6. Notify receiving hospital of possible chemical contamination.
7. Cover burned area in clean, dry dressing for transport.

ELECTRICAL INJURY:

1. Protect rescuers from live electric wires.
2. Remove patient from electrical source when energy source is removed.
3. Treat associated injuries provide spinal precautions per spinal injury assessment protocol and spinal precautions procedures when indicated.
4. Assess and treat contact wound(s).

PARAMEDIC

5. Monitor patient ECG for possible arrhythmias. Treat as per specific arrhythmia protocol.

FOR ALL TYPES OF BURNS:

SPECIALIST/PARAMEDIC

1. Obtain vascular access if indicated for pain management or fluid therapy.
2. Administer NS IV/IO fluid bolus up to 1liter wide open for hypotension or ~~severe~~ burn greater than 15% TBSA. Repeat as indicated.
3. Follow local MCA burn transport protocol.

PARAMEDIC

MCA Name: Genesee County
MCA Board Approval Date: February 4, 2016
MDHHS Approval Date: 9/22/15
MCA Implementation Date April 8, 2016



Section 1-5

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Page 1 of 3

4. Administer Analgesic Medication. Refer to Pain Management Procedure.

Post-Medical Control

Thermal Burns and Electrical Injury:

1. Additional NS IV/IO fluid bolus, up to 2 liters, wide open.

Thermal inhalation, chemical burns:

2. Intubation per Emergency Airway Procedure.