

EMT STANDING ORDERS

E

- Routine Patient Care.
- Stop the burning process.
- Remove jewelry.
- Decontaminate the patient as appropriate.
- Assess the patient's airway for evidence of smoke inhalation or burns: soot around mouth or nostrils, singed hair, carbonaceous sputum, see [Smoke Inhalation Protocol 2.22P](#).
- For chemical burns consider contacting Poison Control at 800-222-1222.
- Maintain patent airway.
- Determine percent extent of the burn using rule of nines. Remember to use the Pediatric Rule of Nines.
- Do not include 1st degree burns in burn surface area (BSA)%.
- Determine depth of injury.
- If a partial thickness burn (2nd degree) is <10% body surface area, apply room-temperature water or room-temperature wet towels to the burned area for a maximum of 15 minutes. Prolonged cooling may result in hypothermia.
- Maintain body temperature.
- Cover burns with dry, sterile sheets, or dry, sterile dressings.
- Do not apply any ointments, creams, or gels to the burn area.

ADVANCED EMT STANDING ORDERS

A

- Transport time less than 1 hour:
 - 5 – 15 years of age: Administer 0.9% NaCl at 250 mL/hr.
 - 2 – 5 years of age: Administer 0.9% NaCl at 125 mL/hr.
 - Less than 2 years of age: Administer 0.9% NaCl at 100 mL/hr.
- Transport time greater than 1 hour
 - Administer 0.9% NaCl at $2 \text{ mL/kg} \times \% \text{ burn} / 8 = \text{hourly rate} \times \text{first 8 hours}$.

PARAMEDIC STANDING ORDERS

P

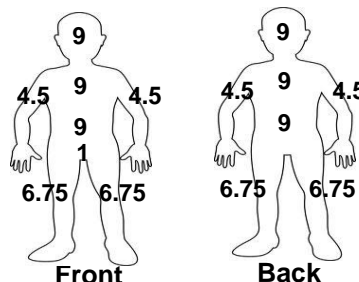
- If the patient has respiratory difficulty, burns about the mouth or neck, or is producing carbonaceous sputum, consider advanced airway management, see [Airway Management Protocol 5.1P](#).
- Refer to [Pain Management Protocol 2.17P](#).



Expert burn center opinion recommends no or limited prehospital IVF, based on concerns for fluid overload and development of compartment syndrome. In cases where burn patients are in shock, IV fluid administration should be based on use of the [Shock - Traumatic Protocol 4.4](#).

Rule of Nines

Head & Neck:	18%
Left arm:	9%
Right arm:	9%
Chest:	9%
Abdomen:	9%
Upper back:	9%
Lower back:	9%
Left leg:	13.5%
Right leg:	13.5%
Genital region:	1%



PEARLS

- Patients with severe frostbite injury may benefit from urgent treatment with IV TPA at a burn center.
- Patients who sustain an electrical burn should be placed on a cardiac monitor.
- Consider spinal motion restriction for electrical burns that result in hand to hand flow.
- Patients with extensive electrical burns often require higher volumes of IVF administration compared with thermal burns.