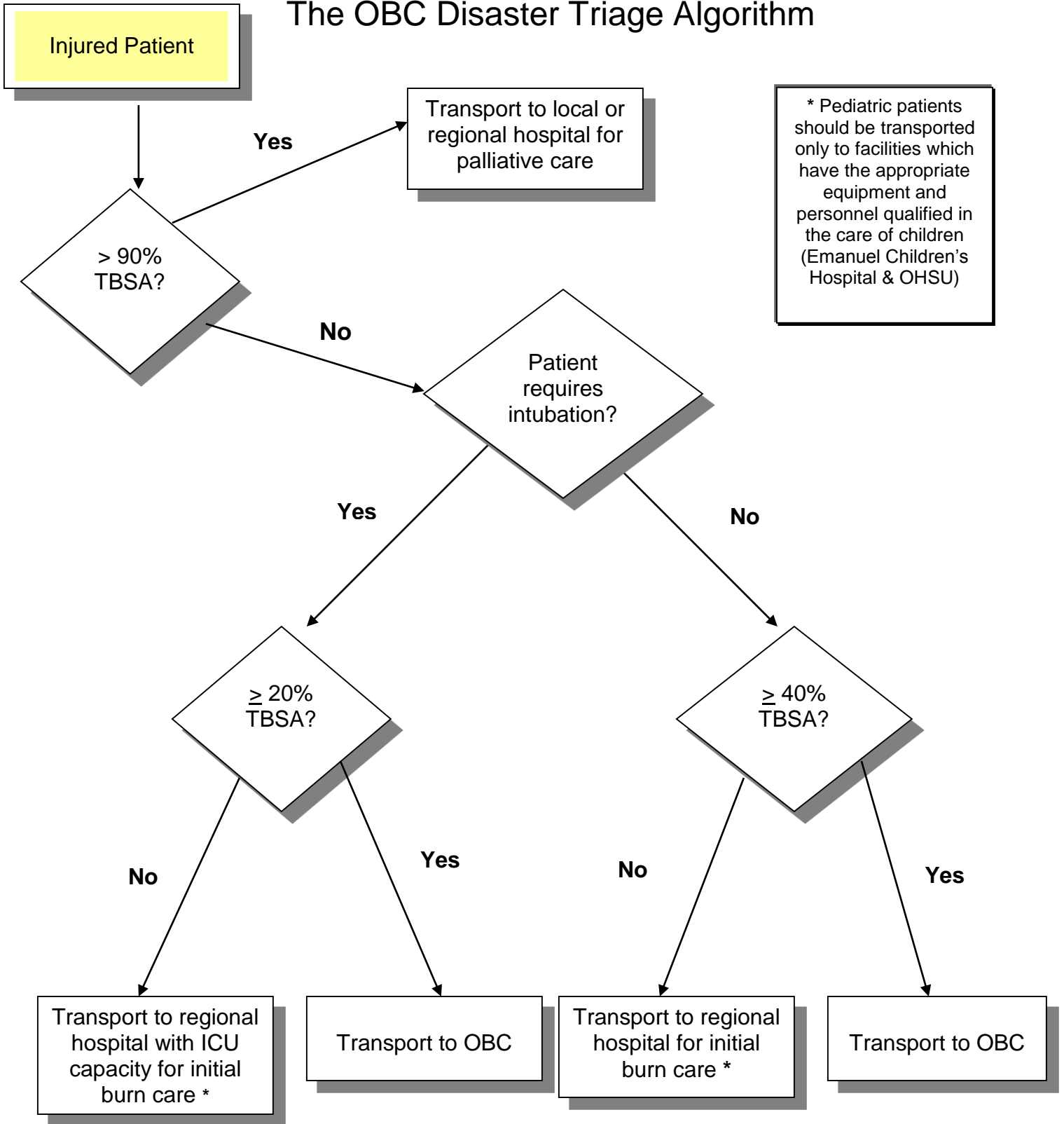


The OBC Disaster Triage Algorithm



Field or Scene Initial First Aid:

- Stop the burning process
- Use universal precautions
- Remove any clothing or jewelry
- Rinse liberally with water, according to protocols, are suspected
- Apply clean, dry dressing initially, avoiding hypothermia

Primary Assessment

If immediate transfer to a regional Burn Center is not feasible:

Primary Assessment

- Two large bore peripheral IV's in nonburned, upper extremities, secured well
 - IV's may be placed thru burned skin if needed, suture to secure in place
- Initiate burn resuscitation for a patient with a TBSA >20 %:
- $4 \text{ ml (LR)} \times \text{body weight (kg.)} \times \text{TBSA \% burn} = \text{Lactated Ringers Solution (LR) fluid in first 24 hours post burn (calculate from time of burn)}$
 - Patient weight in Kg $\div 4$, x percent of burn = ml/hr
- Give half the fluid (LR) in the first 8 hours then the next half (LR) over the next 16 hours
 - Pediatrics: In addition to the resuscitation formula using LR, children require a fluid with 5% dextrose at a maintenance rate
 - For first 10 kg of body weight: 100 ml/kg/24 hours
 - For second 10 kg of body weight: 50ml/kg/24 hours
 - For each kg above 20 kg: 20ml/kg/24 hours
- **KEYPOINT: Titrate IV rate to maintain a urine output; 0.5ml/kg for adults (\approx 30-50ml/hr), 1ml/kg for children < 30 kg**
- Tetanus Prophylaxis unless given in last 5 years