



PEDIATRIC BURNS

Effective: January 1, 2024
Replaces: May 20, 2021

1. BLS Treatment

- 1.1. Routine Medical Care – Pediatric (700-S05)
 - 1.1.1. **Oxygen** – titrate as appropriate
- 1.2. If patient has an unstable airway, transport to the closest hospital (**Policy 602**)
- 1.3. Stop the burning process with sterile water (Do NOT use ice packs)
- 1.4. Expose and examine the patient for all burned areas
 - 1.4.1. Do not remove clothing, jewelry or tarlike substances **if** adhered to the burn area
- 1.5. Estimate the severity of the burns using the ABA classification or “Rule of 9’s” or Palmar Method (Rule of 1’s with patient’s palm)
 - 1.5.1. Superficial, first-degree burns should not be counted toward total body surface (TBSA) area calculation
- 1.6. Protect against hypothermia
 - 1.6.1. Dry sterile dressings or burn dressings for any burns 10% TBSA or greater
 - 1.6.2. Moist sterile dressings or burn sheets are permitted for small burns 10% TBSA or less
 - 1.6.3. Maintain patient body temperature (> 97.7 F) with sheets, blankets and/or ambient temperature to prevent hypothermia
- 1.7. If patient meets burn center criteria, transport to the burn center (**Policy 605**)
- 1.8. Assess for associated trauma and treat accordingly (700-P16)

2. ALS Treatment

- 2.1. Assess for inhalation injury and be prepared to intubate early
- 2.2. **Vascular Access (IV) or (IO)**, TKO
 - 2.2.1. For major burns (greater than 15% TBSA) administer IV fluids (macro drip set) as follows:
 - 2.2.1.1. Age less than 5 years, 2 mL/min or 20 gtt/min (1 gtt every 3 seconds)
 - 2.2.1.2. Age 5-15 years, 4 mL/min or 40 gtt/min (1 gtt every 1-2 seconds)
 - 2.2.1.3. If patient is hemodynamically unstable administer 20 mL/kg fluid bolus; otherwise do not bolus fluids
- 2.3. Consider pain management
 - 2.3.1. **Morphine 0.1 mg/kg IV / IO**, max single dose of 5mg, may repeat once, max 10 mg
 - 2.3.2. **BASE CONTACT**: if additional Morphine above 10 mg is needed

3. Special Considerations

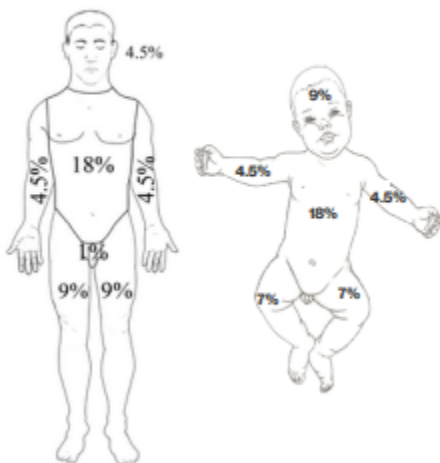
- 3.1. Liquid chemical burns:
 - 3.1.1. Flush immediately with copious amounts of water for 20 minutes
- 3.2. Dry chemical burns:
 - 3.2.1. Brush powder off skin, then flush with copious amounts of water or saline, try to identify the chemical if safe



4. Pediatric – Rule of Nines and Palmar Method

Percentage Total Body Surface Area (TBSA)

"RULE OF NINES"



"PALMAR METHOD"



Patient's entire palmar surface is approximately 1%

Burn Severity Determination	
Superficial (first-degree)	Dry, red, easily blanches, sometimes painful Example: Sunburn
Superficial Partial Thickness	Moist, red, blisters, blanches, very painful
Deep Partial Thickness	Drier, more pale, less blanching, less pain
Full Thickness	Dry, leathery texture, variable color (white, brown, black), loss of pin prick sensation

Protocol # 700-P06