**OPERATIONAL GUIDELINES: OBTAINING CONSULTS ON ADULT BURN PATIENTS**

**GUIDELINES: To provide guidance and understanding in the necessary consults for patients with burn injuries.**

**NOTE: Patients with suspected trauma, follow the recommendations of the trauma consults guidelines in addition to burns.**

1. An ENT consult for patients with inhalation injuries not currently mechanically ventilated, at the discretion of the Attending.
2. A Vascular surgery consult should be obtained for complex vascular injury due to severe burns, at the discretion of the attending.
3. An Ophthalmology consult for patients who have had a flash or other burn injury to the face. (eyebrows and eyelashes noted to be singed)
4. Nutrition consult-All burn patients are required to have a nutrition consult within 24hours of admission.
5. Social Work consult is required for burn patients on admission.
6. Spiritual Care consult is required for burn patients on admission.
7. Speech Language Pathologist: for patients with deep facial burns and/or prolonged intubation. At the discretion of the attending.
8. PM&R consults are to be placed for patients with a TBSA >20
9. Palliative care consults are required for patients who have a Baux score > than 100% or suspected anoxic injury.
10. Occupational/Physical Therapy consult: Consult is required for all patients within 24 hours of admission.
11. Ace Consult for:
	1. An ACE consultation should be obtained on geriatric burn patients with a positive FRAIL score.

Or

* 1. A medically complex geriatric burn patient is any geriatric burn patient with a previous history of dementia or delirium or uncontrolled major medical condition (i.e. HTN with SBP > 160 after adequate pain control, DM with a hyperosmolar state).