

OPERATIONAL GUIDELINES: PATIENT APPROPRIATENESS FOR PEDIATRIC BURN ADMISSIONS

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GUIDELINES:

The following are criteria/guidelines that need to be considered in admitting a pediatric patient to the Burn Service:

1. All patients with the following thermal or chemical injuries
 - a. >10% full thickness burn
 - b. >20% partial thickness burn
 - c. Any circumferential burn of an extremity (full or partial thickness)
 - d. Deep second or third degree burns that involve critical areas of face, hands, feet, & perineum with discussion with manager or designee.
2. Documented or suspected inhalation injury:
 - a. Requiring mechanical ventilation or non-invasive mechanical support (BIPAP, CPAP).
 - b. Associated with a carboxyhemoglobin of >20% measured any time after the burn
 - c. With associated with hoarseness, stridor, carbonaceous sputum
 - d. Requiring bronchoscopy or laryngoscopy
3. Any patient sustaining thermal or chemical injury that meets the admission criteria
4. Thermal injury that are estimated to require > 10 liters of resuscitation fluid in the first 24 hours
5. Chemical burns
6. Electrical burns requiring monitoring for compartment syndrome, myonecrosis, or myoglobinuria
7. Patients who have pre-existing medical problems requiring special monitoring at the discretion of the Burn unit attending
8. Patients with other skin problems that need the special services of the Burn unit as described above but not limited to:
 - a. Stevens-Johnson Syndrome
 - b. TENS >10%
 - c. Epidermolysis Bullosa
9. Admit pediatric patient to 12f - ICU level - Patients with life-threatening conditions, who are unstable or at high risk of physiological deterioration. This will include all those receiving advanced life support (including acute mechanical ventilation, hemodynamic resuscitation).
Intermediate level – Patients who have potentially life-threatening conditions who are presently stable, but who are at high risk for physiological deterioration.
10. Admit pediatric patient to 11e have a stable respiratory and cardiac status and are not considered critical.