

BURNS ASSESSMENT FORM FOR SEVERE BURNS - NHSL

Admission ☐ Direct ☐ Transfer from Day of burn

Patient name

Address

Date and time of Burn Age BHT Contact

1) Airway and Cervical spine Control

- a) Facial swelling / Hoarse voice Y / N
- b) Evidence of inhalational injury Y / N
- c) Intubation required Y / N

2) Breathing and Oxygenation

- a) Breathing pattern Normal / Abnormal
- b) O₂ saturation
- c) ABG Y / N / NA

3) Circulation-2 x IV lines

- a) Pulse rate volume
- b) Blood Pressure
- c) IV lines Size Location

4) Disability

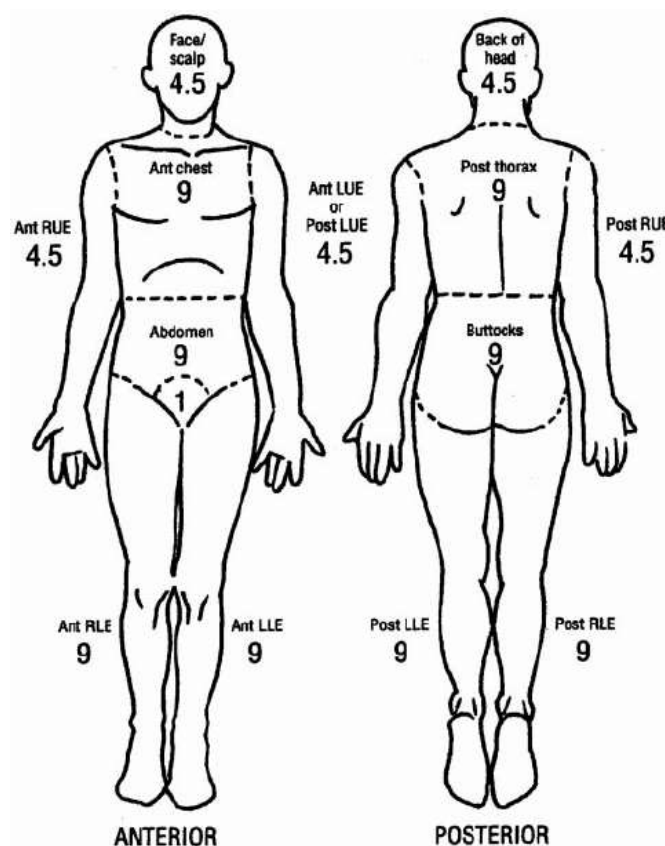
- a) Alert ☐ confused ☐ Drowsy ☐ unconscious ☐ Tuber ☐
- b) Pupils - Reactive Y / N

5) Exposure, environment

- Total burn surface area (TBSA) Circumferential burn Y/N

6) Fluid Requirement 1st hours ml/hr Next 16 hours ml/hr.

7) Analgesia



Type	Dose	Route	Frequency

8) Tube Inserted

Nasogastric tube Y / N / NA

Urinary catheter Y / N / NA hourly monitoring Y / N

9) AMPLE history

Allergies Last meal

Medications

Past medical history

Event description:

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10) Associated Injuries:**11) Escharotomy Needed:** Y / N / NA Done: Y / N**12) First aid given:** Y / N Adequate Y / N**13) Tetanus Needed:** Y / N**14) Tests to be done** FBC ☐ SE ☐ ECG ☐ CPK ☐ ☐ CXR**Clinician Attended** Name..... Date/...../..... Time.....

Signature.....

IV Fluids and Observation Chart

Hour	Fluid type	Amount	UOP	Pulse rate	BP	RR	SpO ₂
1							
2							
3							
4							
5							
6							
7							
8							

SR /Reg /MO – Eye oncall,

Dear Doctor,

Re -

Please kindly see this patient with burn injury to eye and advice on further management.

Thank you

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SR/Reg/MO – Burns unit NHSL

SR /Reg /MO – ENT oncall,

Dear Doctor,

Re -

Please kindly see this patient with facial burns and advice on further evaluation and management on upper airway injury

Thank you

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SR/Reg/MO – Burns unit NHSL

SR /Reg/ MO – Anesthesia oncall,

Dear Doctor,

Re -

Please kindly provide secure IV access or central line to this patient with burn injury for fluid resuscitation.

Thank you

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SR/ Reg / MO – Burns unit NHSL

Other instructions and Referrals