INCLUSION CRITERIA FOR TRANSFER TO A BURN CENTER

- 1. Partial thickness burns of greater than 10% total body surface area.
- 2. Burns that involve the face, hands, feet, genitalia, perineum, or major joints.
- 3. Third-degree burns in any age group.
- 4. Electrical burns, including lightning injury.
- 5. Chemical burns.
- 6. Inhalation injury.
- 7. Burn injury in patients with preexisting medical disorders that could complicate management, prolonged recovery, or affect mortality.
- 8. Any patients with burns and concomitant trauma (such as fractures) in which the burn injury poses the greatest risk of morbidity or mortality. In such cases, if the trauma poses the greater immediate risk, the patient's condition may be stabilized initially in a trauma center before transfer to a burn center. Physician judgment will be necessary in such situations and should be in concert with the regional medical control plan and triage protocols.
- 9. Burned children in hospitals without qualified personnel or equipment for the care of children.
- 10. Burn injury in patients who will require special social, emotional or rehabilitative intervention.

Remember:

Consider bypassing the closest hospital for the burn center if airway is controlled (Airway Adjunct does not qualify).

Remove all jewelry and clothes where applicable.

Please refer to Pediatric Burn protocol if 14 years old or less. Refer to Adult Burn protocol if > 14 years old.