

BURNS	
ADULT	PEDIATRIC (≤ 34 KG)
BLS	
<ul style="list-style-type: none"> • Universal Protocol #601 • Pulse Oximetry <ul style="list-style-type: none"> ○ O₂ administration per Airway Management Protocol #602 • Thermal <ul style="list-style-type: none"> ○ Stop the burning process (see notes) ○ Cover with clean dressing/sheet • Chemical <ul style="list-style-type: none"> ○ Decontamination and HazMat procedures ○ Brush off dry powder ○ Irrigate with water or saline ○ Continue irrigation en route • Electrical <ul style="list-style-type: none"> ○ Cover with clean dressing/sheet 	
ALS Standing Orders	
<ul style="list-style-type: none"> • Pain Control per Pain Management Protocol #603 • Hypotension – SBP of ≤ 90 mmHg or if unable to palpate peripheral pulses <ul style="list-style-type: none"> ○ Normal Saline up to 500 mL IV <ul style="list-style-type: none"> ■ May repeat X 1 for ongoing hypotension 	<ul style="list-style-type: none"> • Pain Control per Pain Management Protocol #603 • Hypotension – as identified for age group <ul style="list-style-type: none"> ○ Normal Saline IV/IO 20 mL/kg not to exceed 500 mL <ul style="list-style-type: none"> ■ May repeat x1 if no change in SBP
Base Hospital Orders Only	
<ul style="list-style-type: none"> • As needed 	<ul style="list-style-type: none"> • As needed
Notes	
<ul style="list-style-type: none"> • Remove rings, constrictive clothing and garments made of synthetic material • Stop the burning process <ul style="list-style-type: none"> ○ Initially cool with tepid water ○ Do not use ice or ice packs on burns • When burn area is $< 10\%$ may use moist/gel dressings for comfort • Use appropriate dressings to prevent hypothermia • Maintain burned body areas in neutral position • Assess for complicating factors, i.e. exposure in enclosed space, total time exposed, drugs or alcohol • If associated with trauma, transport per Trauma Triage and Destination Policy #153 • If no trauma associated with burn, transport to nearest hospital for evaluation and stabilization 	