

# Burn Emergencies

Slide Presentation prepared by Randall Benner, M.Ed., NREMT-P



# Learning Objectives

- Understand the various burn classifications and how they relate to the anatomy of the skin.
- Identify the characteristics of superficial, partial-thickness, and full-thickness burns.
- Calculate the extent of burns using the Rule of Nines.
- Explain how to assess the severity of burns.

### **Learning Objectives**

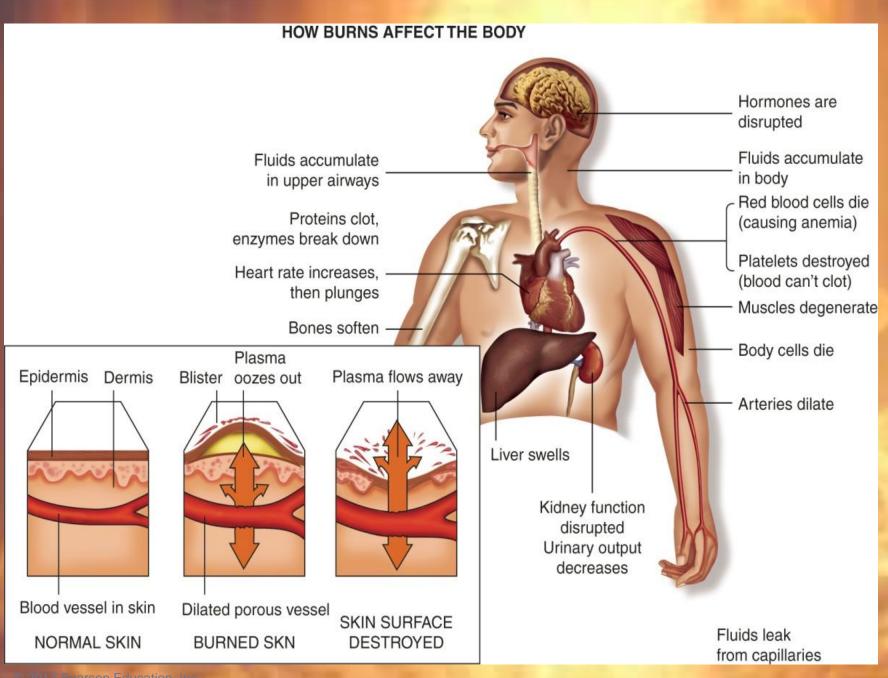
- Describe appropriate **burn management** for thermal and radiant burns.
- Identify the signs and symptoms of inhalation injuries.
- Describe first aid care for inhalation injuries.
- Describe first aid care for chemical burns.
- Understand how electrical energy and lightning can injure the body.
- Describe first aid care for electrical shock.
- Describe first aid care for injuries inflicted (imposed) by lightning.

# Introduction

- More than 500,000 burn victims per year with about 4,000 deaths.
- Burns obviously injure the skin, but they can also disrupt the normal fluid and electrolyte balance of the body.
- Burns are also associated with trauma, most often internal injuries, blunt trauma, head trauma, fractures, and lacerations.

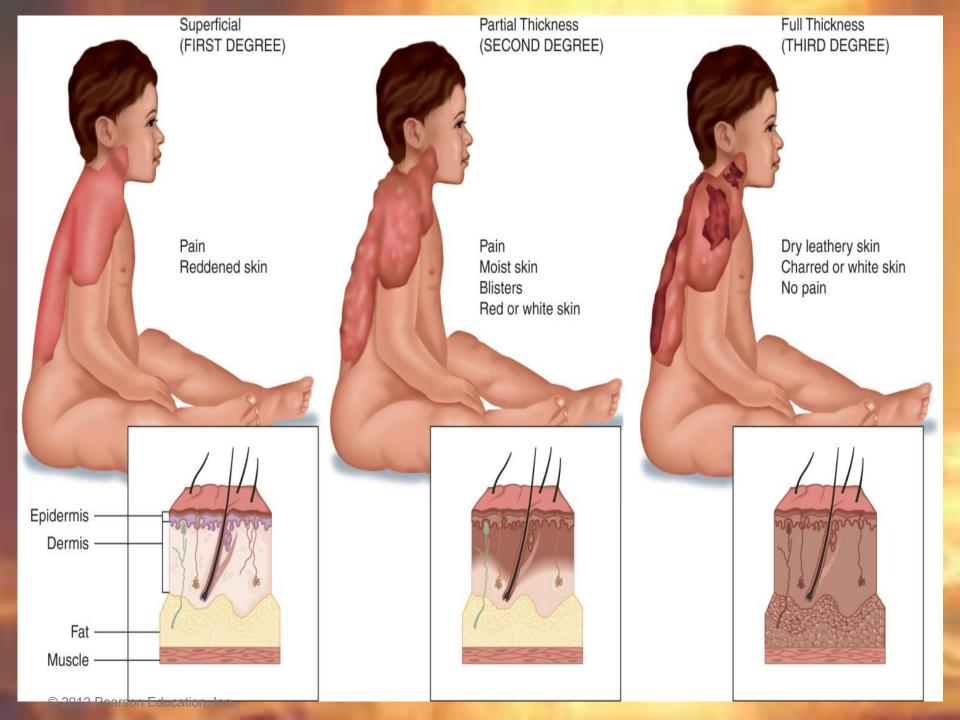
# Assessment of Burns

- Seriousness of a burn is determined by
  - -Depth of the burn
  - -Percentage of body area burned
  - -Severity of the burn
  - -Location of the burn
  - Accompanying complications (e.g., preexisting physical or mental conditions)
  - −Age of the victim



## **Degrees of Burn**

- Superficial burn (first degree)
- Involves only outermost layer of skin, the epidermis; burned area is **painful** and appears red (reddened) and dry
- Partial thickness burn (second degree)
  - Typically is red or white, moist, painful, and may produce blisters
- Full thickness burn (third degree)
  - No pain/ Most severe type; damages all layers of skin and may affect subcutaneous tissue, muscle and bone. Dry leathery, charred or white skin.



## **Calculating Percentage of Body Burned**

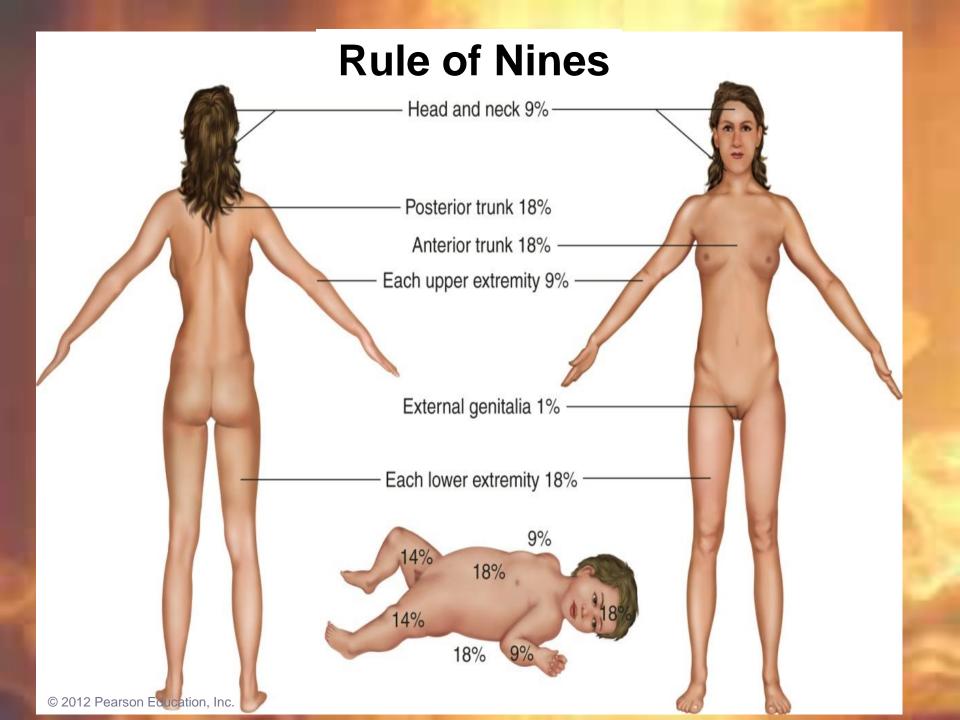
- Two methods are used to determine percentage of body burned.
  - 1. Palmar surface method
    - Palm of victim's hand is equal to roughly 1% of the victim's body surface area
    - Use with irregular burns or "patchy" burns
  - 2. Rule of Nines

# Calculating Percentage of Body Burned

• Two methods are used to determine percentage of body burned.

#### 2. Rule of Nines

- Divides the body into key regions
- Different area assessment is used for infants



# **Assessment of Burns**

- Severity of burn
  - Based on depth of burn, extent of burn,
     and location of burn
  - Burn severity is classified as
    - Minor
    - Moderate
    - Critical

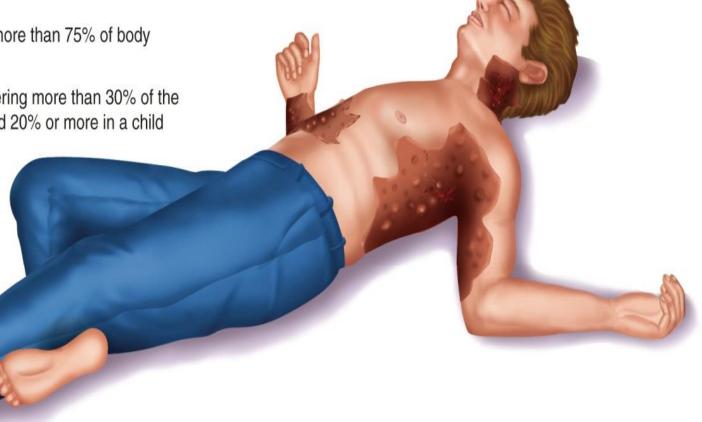
# **Assessment of Burns**

- Location of burn
  - Certain areas are more critical than others
    - Face, neck
    - Hands, feet
    - External genitalia
    - Circumferential burns to neck or chest

# Critical burns include: Critical Burn

- All inhalation injuries
- Electrical burns
- Deep acid burns
- Burns in patients with underlying physical or medical conditions
- Superficial burns covering more than 75% of body surface
- Partial-thickness burns covering more than 30% of the body surface in an adult, and 20% or more in a child

- Full-thickness burns covering more than 10% of body surface in an adult, and 2% to 3% in a child
- Partial-thickness or full-thickness burns involving the face, eyes, ears, hands, feet, or genitalia



# Burn Management

- Problems most often associated with burns are
  - -Airway or respiratory difficulties
  - -Toxic inhalations
  - -Musculoskeletal injuries
  - Loss of body fluids
  - -Pain and swelling
  - Anxiety
  - -Infection

# • Management of Thermal and Radiant Burns

- Activate EMS, take standard precautions.
- Prevent further injury if you can do so safely.
- Eliminate cause of burn extinguish إطفاء fire, immerse scald or grease burns حرق in cold water.
- Remove victim from source of burn; eliminate chance for smoke inhalation.

#### Care of Thermal and Radiant Burns

- Assess airway, breathing, and circulatory components (ABCs) and support any lost function.
- Continue to assess the vital signs until help arrives.
- Never break any blisters; apply dry sterile dressings to burned areas.
- Dress with wet sterile dressing if burn covers less than 10% of body surface

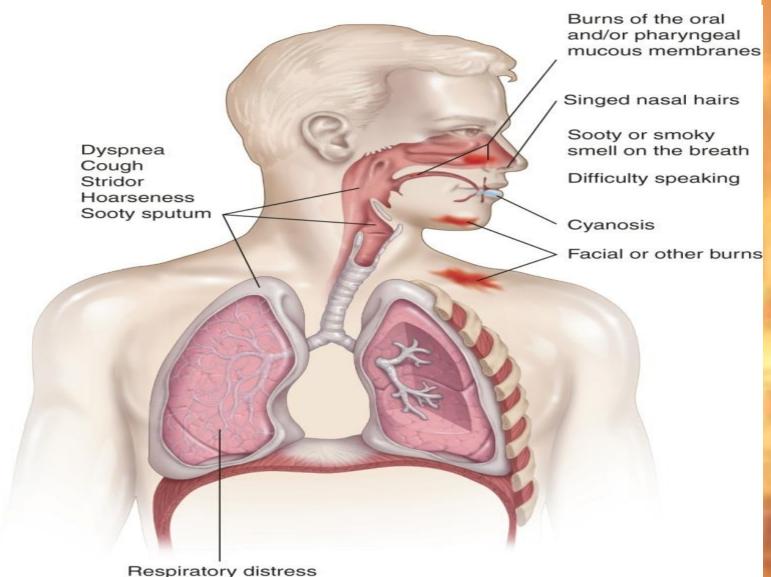
## Inhalation Injuries

- More than half of fire related deaths are caused by smoke inhalation.
- Three main causes of inhalation injuries
  - Heat inhalation
  - Inhalation of toxic chemicals or smoke
  - Inhalation of carbon monoxide

#### Signs and Symptoms of Inhalation Injuries

- Stridor (high-pitched sound on inhalation)
- Facial burns
- Singed nasal hair
- Specks (dots) of carbon in saliva/mouth
- Sooty (black/ dirty) or smoky smell on breath
- Dyspnea, cyanosis, restlessness (resp. distress)
- Chest tightness, hoarseness, noisy breathing
- Burns of the mucous membranes in nose or mouth
- Coughing

#### Signs and Symptoms of Inhalation Injuries



2012 Pearson Education, Inc. Noisy breathing

Noisy breathing

Restricted chest movement

# **Toxic Fumes Inhalation**

- Carbon monoxide symptoms
  - Altered mental status
  - Headache
  - Weakness
  - Nausea or vomiting
  - Cyanosis
  - -Loss of manual dexterity.

# **Toxic Fumes Inhalation**

- Carbon monoxide symptoms
  - Confusion, lethargy, irrational behavior
  - Don't wait for appearance of cherry-red skin; this is a very late sign that might not appear until after death occurs.

#### First Aid Care for Toxic Inhalation

- Activate EMS, take standard precautions.
- Remove victim from the fumes source.
- Clear the victim's airway.
- Provide artificial ventilations if needed.
- Place in upright position, <u>unless</u> other injuries contradict this.
- Remove restrictive clothing.
- Monitor respiration and airway until EMS arrives.

# **Chemical Burns**

- Difficult to assess depth and severity
- Chemicals continue to burn as long as in contact with body
- Chemical Burn are critical; treat immediately.



#### First Aid Care for Chemical Burns

- Activate EMS, take standard precautions.
- Brush dry powder from skin, then flush with water for at least 20 minutes (or until EMS arrives).
  - Brush off all lime powder prior to flushing.
  - -Phenol should be washed off with alcohol first.
  - -Sulfuric acid should be flushed with copious water.

#### First Aid Care for Chemical Burns

- Brush dry powder from skin, then flush with water for at least 20 minutes (or until EMS arrives).
  - Remove clothing, shoes, stockings, and jewelry.
  - Use soap and water if possible after irrigation.
  - When finished flushing, cover burned area with dry sterile dressing.

#### Protecting yourself and the victim

- Be alert for tingling sensation as you approach.
- -Look for downed wires with auto accidents.
- Do not touch vehicle if downed wire is touching it.
- Instruct victim in a car to stay inside if it is in contact with a downed wire.

#### Protecting yourself and the victim

- Instruct victim to jump from the vehicle if it catches fire.
- Ensure electrical equipment is unplugged.
- Shut down power if victim is found in a pool.
- If electrical item is in a bath tub with victim, unplug device before reaching for victim.

- Three types of electrical burns
  - **Thermal:** fire is present, but electricity does not touch the victim
  - -Contact: victim touches electrical point, causes source and ground injuries
  - -Arcing or flash burns: current jumps from one surface to another and burns skin, but electricity does not flow through body





Electrical flash burns. Mills, Morton, Page. A Color Atlas of Accidents and Emergencies, 1984.

# AWARNING

# Arc Flash and Shock Hazard Appropriate PPE Required

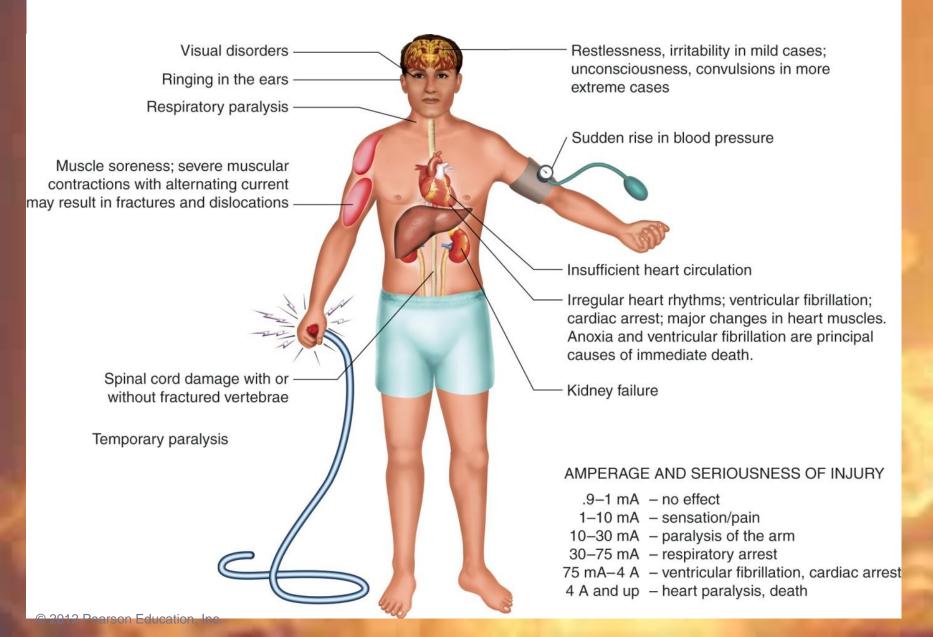
Arc Flash Protection	Required PPE	
Flash Protection Boundary:	☐ Hard Hat	□ T-shirt
Hazard Risk Category:	□ Safety Glasses	☐ FR Shirt
Incident Energy at 18" (cal/cm²):	☐ Safety Goggles	☐ FR Pants
modern Energy at 10 (canom ).	☐ Face Shield	☐ FR Coverall
Shock Protection	☐ Flash Hood	☐ Flash Suite
Shock Hazard when cover	□ Ear Protection	□ Leather Shoes
is OPENED or REMOVED:	☐ Long Pants	□ Leather Gloves
Limited Approach:	☐ Long Sleeve Shirt	
Restricted Approach:	☐ Cotton Underwear	
Prohibited Approach:	☐ Voltage Rated Gloves	

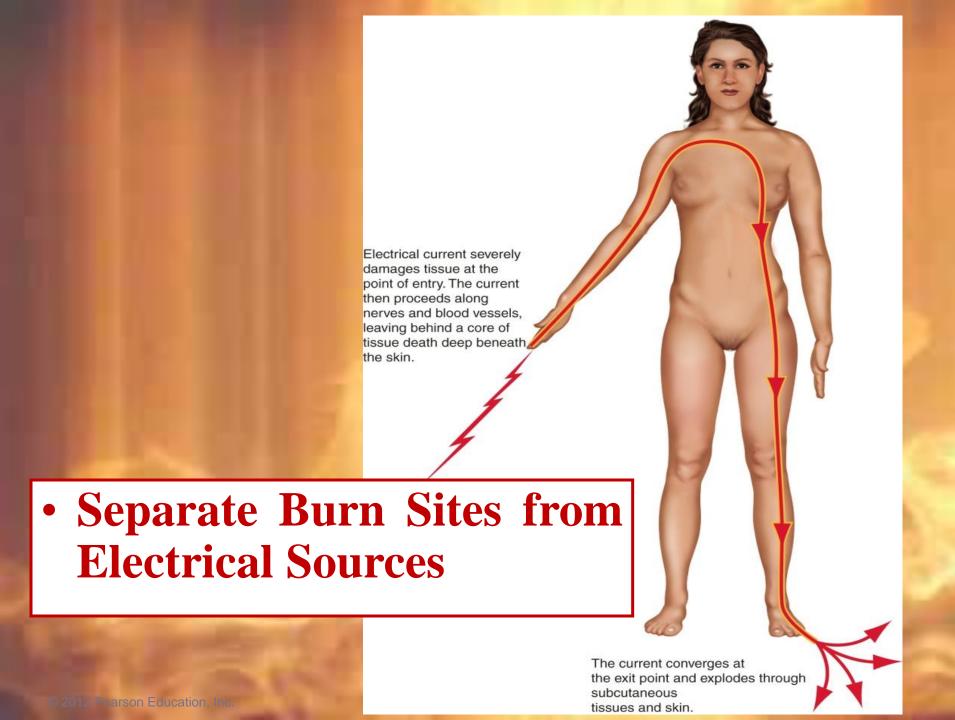
Equipment ID:

Date:

- Severity of electrical shock depends on
  - Voltage and amperage of the current
  - Amount of time exposed to electricity
  - Amount of moisture on the skin
  - -Body surface area in contact with electricity
  - Amount of insulation (protection) worn by the victim
  - Areas of the body electricity passes through
  - Type of current (AC or DC)

#### Possible Effects of Electrical Shock





#### First Aid Care for Electrical Burns

- Activate EMS, take standard precautions.
- Check airway, breathing and pulse, support lost function.
- Use AED (Automated External Defibrillator) if patient is in cardiac arrest.
- Treat for spinal injuries if victim fell or was thrown (see Chapter 13).
- Provide specific care for any soft tissue trauma.
- Treat the patient for shock (see Chapter 6).

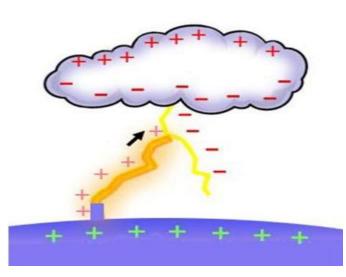
# **Lighting Injuries**

- 300 deaths yearly from lightning strikes
- Two main types: direct strikes and splash strikes
- Burns from lightning are usually superficial and not a primary concern
- Deeper burns occur from heat created by metal objects
- Injuries from lightning typically involve
  - Nervous system
  - -Skin
  - Heart and vascular system

• **Splash** hits occur when lightning jumps to a person (lower resistance path) from a nearby object that has more resistance, **striking** the person on its way to the ground.

• In ground strikes, the bolt lands near the person and is conducted by a connection to

the ground ...





#### First Aid Care for Lightning Injuries

- Activate EMS, take standard precautions.
- Ensure scene is safe for you and the victim.
- Assess the airway, breathing, and circulation, support lost function if needed.
- Use AED if victim is pulseless.
- Provide cervical and spinal immobilization.
- Assess any response to **pain** in extremities.
- Treat any other soft tissue trauma as needed.

#### Summary

- Burns not only affect the skin, but based on the burning mechanism, there may also be internal injuries.
- Use the Rule of Nines or palmar surface method to determine the extent of a burn.
- Assess, support, and monitor the victim's airway, breathing, and circulation functions.
- Assume an inhalation injury is present in any victim with head/neck burns, or with dyspnea.

## Thermal Burns



## **Chemical Burn**



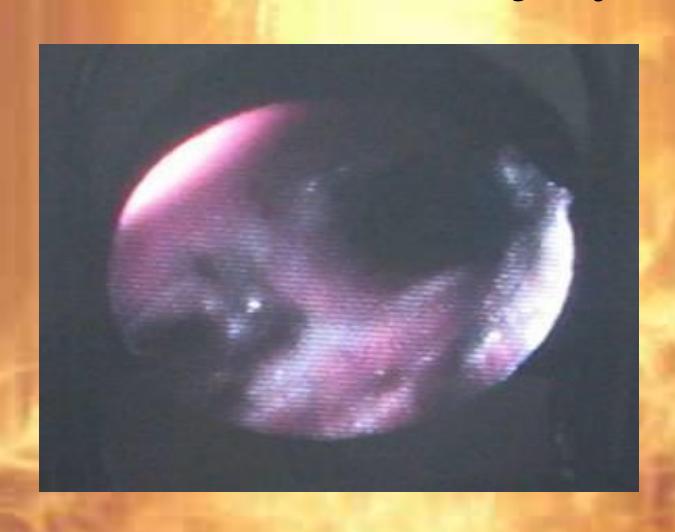
# Scald Burns



#### **Electrical Burns**



# **Smoke and Inhalation Injury**





## **Cold Thermal Injury (Frostbite)**



