



LIONS BURN CARE CENTER

Seasonal impact in admissions and burn profiles in a desert burn unit



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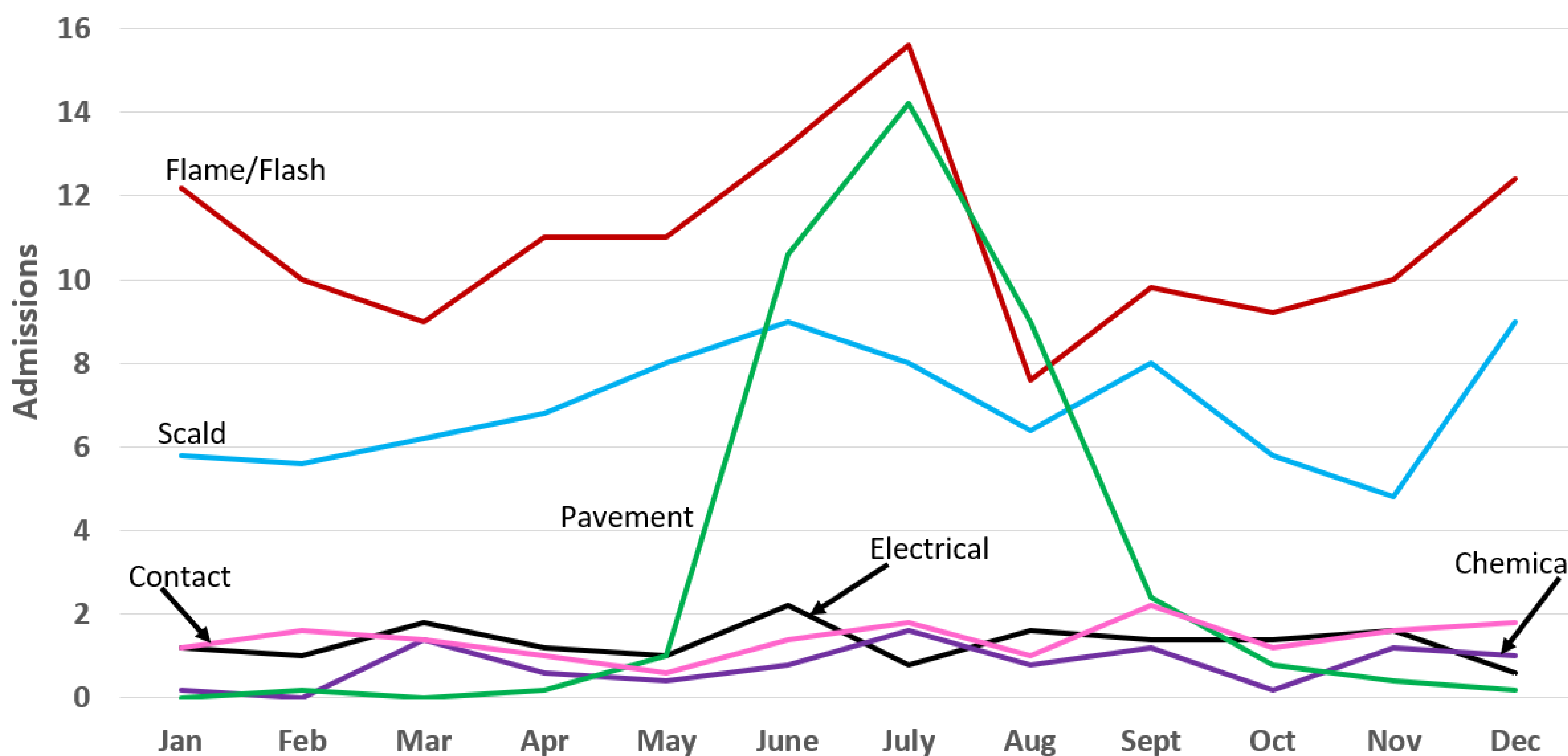
Burn injuries are seasonal and usually most common in the winter. Understanding seasonal variation can allow burn centers to allocate resources towards the busiest time of year.

Methods and Results

- 5-year Retrospective review of burn registry from March 1, 2014 to February 28, 2019
- 1519 patients admitted for acute burn injuries
- Most admissions came during the Summer (35%), followed by Winter (23%), Spring (21%) and Fall (21%)
- Most common mechanisms are flame/flash (677, 45%), scald (414, 27%) and pavement (194, 13%)
- 169 (87%) of 194 pavement burn admissions occurred during the Summer (June-July-August)

Season	Total Admissions	Mean age (years)	Male (%)	Mean TBSA (%)	Mean LOS (days)	ICU LOS (days)	Mortality (%)	Pavement Admissions	Daily Census (Patients)
Spring (March, April, May)	323 (21%)	40.6	64.4	10.6	12.4	3.4	8.9	6 (3%)	8.7
Summer (June, July, August)	534 (35%)	39.9	68.9	7.8	12.1	2.7	3.2	169 (87%)	14.1
Fall (Sept, Oct, Nov)	321 (21%)	37.9	65.4	7.6	12.3	3.3	4.1	17 (9%)	7.1
Winter (Dec, Jan, Feb)	341 (22%)	39.8	67.5	8.8	12.9	3.2	6.7	2 (1%)	9.8

Average Burn Center Admissions Per Month



Conclusion

Summers are busiest for burn centers in a desert climate due to a surge of pavement burns and their longer hospital length of stay compared to other mechanisms

Lessons learned

- It is essential to increase our resources during the Summer to match the increased demand
- Understanding such patterns can better guide efforts directed at injury prevention

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