

Beyond the Burn Center: Creating Nursing Clinical Guidelines for Pediatric Burn Patients That Present to Community Emergency Departments

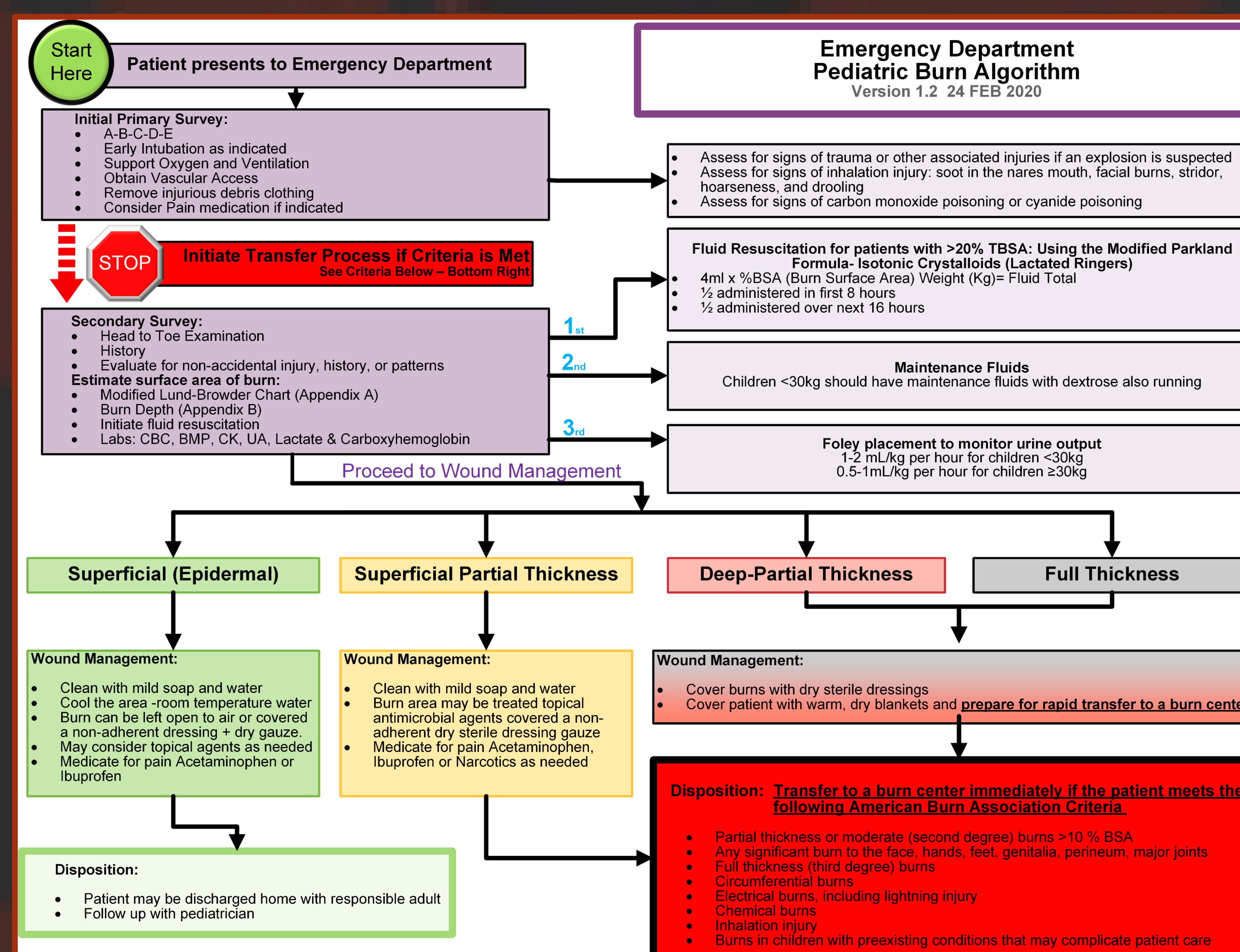
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Introduction

The goal of this project was to improve the initial care of pediatric burn patients that present to community hospital emergency departments before transfer to a burn center. The pediatric burn center received a transfer of a burn patient from a community emergency department that showed there was room for improvement on the initial care before transfer to the burn center.

Methods

This was a quality improvement project between the pediatric emergency department in conjunction with an outside community hospital emergency department to develop clinical guidelines using the burn centers handbook as well as the most recent ABA and ABLS guidelines to develop standards of care for a pediatric burn patient. These clinical guidelines would serve as recommendations in regards of calculating the total body surface area (TBSA) effected, the calculations of required fluid resuscitation including the addition of maintenance fluids, pain control recommendations, as well as when to transfer to a burn center.



Results

This project resulted in a multi-site collaborative effort which produced a thorough and easy to follow algorithm which takes the care provider through each step of the initial resuscitation of a pediatric burn patient. The algorithm initiates with the primary survey and moves through to the secondary survey with individual color coded categories for each thickness of burn. These categories run through the treatment recommendations while adhering to burn center's treatment recommendations. This all terminates into a disposition determination for both minor and major burns. The major burn category runs through the transport criteria set forth by The American Burn Association.

Conclusion

Phase one of this project concluded with a collaborative effort between a Community Hospital ED and a Level 1 Burn Center ED. This coordination established an evidence based practice guideline allowing two completely separate departments within the state to provide synergistic and coordinated care to one of the most vulnerable populations.

Applicability to Practice

The algorithm produced by this project while detailed, is a universal approach and can be implemented and adapted by any first line or receiving facility. Moving forward there will be collaborative efforts to conduct exercises involving identification, stabilization, and initial resuscitation of a simulated pediatric burn case at the community hospital for which this diagram was developed for. It is our goal to keep this momentum going and conduct these simulations regularly in order to test the system and make improvements to the algorithm.