OUTPATIENT CARE OF THERMAL BURNS ≤ 20% TOTAL BODY SURFACE AREA

1. INITIAL ASSESSMENT
   - Remove anything wet/cold.
   - Cover with a dry dressing.
   - Provide pain medication.

2. CALCULATE TOTAL BODY SURFACE AREA
   - Use PALMAR METHOD to evaluate

3. WOUND CARE
   - Immediate referral: no need to wash or apply medication.
   - Outpatient referral: wash burn with soap and water if visibly dirty.
     - One wipe is sufficient, no need to debride all loose skin.

4. DRESSING APPLICATION
   a. Apply antibiotic ointment to a non-adherent dressing.
   b. Place directly on the burn and wrap lightly, maintaining full range of motion.

5. REFERRAL
   a. Cincinnati Shriners welcomes all referrals.
   b. AMERICAN BURN ASSOCIATION REFERRAL CRITERIA:
      Recommends all burns meeting the criteria below should be referred:
      1. Burns to face, hands, feet, genitals or covering a joint
      2. Full-thickness - regardless of TBSA
      3. Burn greater than 10% TBSA

PITFALLS TO AVOID
- Wet/cold can cause vasoconstriction thus harming the wound bed.
- Leaving burn open to air increases pain.
- No oral antibiotics needed.

NO SILVER SULFADIAZINE

PALMAR METHOD
(Patient’s entire hand)
No IV fluids needed.

Once burn has healed, moisturizing and protection from the sun is critical.

NON-PERFUMED SOAP IS BEST.

OUTPATIENT PALMAR METHOD
(Patient’s entire hand)