



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.



PITFALLS TO AVOID

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

2 CALCULATE TOTAL BODY SURFACE AREA

- Use **PALMAR METHOD** to evaluate



PALMAR METHOD (Patient's entire hand)

No IV fluids needed.



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.



Non-perfumed soap is best.

4 DRESSING APPLICATION

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



NO SILVER SULFADIAZINE

5 REFERRAL

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

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