

IMMEDIATE CARE OF THE BURN PATIENT Prehospital car

IMMEDIATE CARE OF THE BURN PATIENT Prehospital care

Good prehospital care is essential in ensuring rapid assessment and transfer. The key principles are:

- Ensure rescuer safety . This is particularly important in the case of electrical and chemical injuries and building fires.
- Stop the burning process . Stop, drop and roll is a good method of extinguishing fire burning on a person.
- Check for other injuries . A standard ABC (airway- breathing-circulation) check followed by a rapid secondary survey will ensure that no other significant injuries are missed. Patients burned in explosions or even escaping from fires can have coexisting fractures or blast pattern injuries.
- Cool the burn wound . This provides analgesia and slows the delayed microvascular damage that can occur after a burn injury . Cooling should occur for a minimum of 20 minutes and is effective up to 1 hour after the burn injury . It is a particularly important first aid step in climates, cooling should be at about 15°C - tepid water - and hypothermia must be avoided, particularly in the extremes of age.
- Give oxygen . Anyone involved in a fire in an enclosed space should receive oxygen, especially if there is an altered consciousness level.
- Elevate . Sitting a patient up with a burned airway may prove life-saving in the event of a delay in transfer to hospital care. Elevation of burned limbs will reduce swelling and discomfort.
- Analgesia . Administration of analgesia prior to or during transfer will alleviate pain.

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