

BURN TRIAGE

ADMINISTRATIVE 1.7

- I. Patients with an unstable airway should be transported to the closest facility
- II Any patient with burns who also meets any of the SAEMS Trauma Triage Decision Scheme criteria should be transported to a trauma center for initial stabilization before being transferred to a burn unit.

III. Adult Burn Triage

- A. Patients with the following characteristics should be taken directly to the St. Mary's Hospital
 1. Partial or full thickness burns greater than 10% total body surface area (TBSA)
 2. Burns that involve the face, hands, feet, genitalia, perineum, or major joints.
 3. Electrical burns, including lightning injury
 4. Chemical burns
 5. Inhalation injury
 6. Burn injury in patients with preexisting medical disorders that could complicate management, prolong recovery, or affect mortality, such as: diabetes, cardiac disease, pulmonary disease, pregnancy, cirrhosis, morbid obesity, immunosuppression, bleeding disorders
- B. In the event the St. Mary's Burn Unit is unable to accept patients, any patient with the above characteristics found in A #1-6 may be considered for air transport to The Arizona Burn Center at Maricopa Medical Center in Phoenix or the closest facility per on=line medical direction.
- C. In outlying areas with a transport time of greater than 30 minutes, transport the patient to the closest facility or consider air transport directly to The Arizona Burn Center at Maricopa Medical Center in Phoenix.

II. Pediatric Burn Triage

- A. Children (age 16 and under) who present with any of the above characteristics (1-6) should be transported to the nearest Pediatric Critical Care Facility (PCCF) (in Tucson- UMC or TMC)
- B. The PCCF will then coordinate care and, if necessary, subsequent transfer to a burn unit.
- C. In outlying areas with a transport time of greater than 30 minutes to St. Mary's Hospital, transport the patient to the closest facility or consider air transport directly to The Arizona Burn Center at Maricopa Medical Center in Phoenix

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