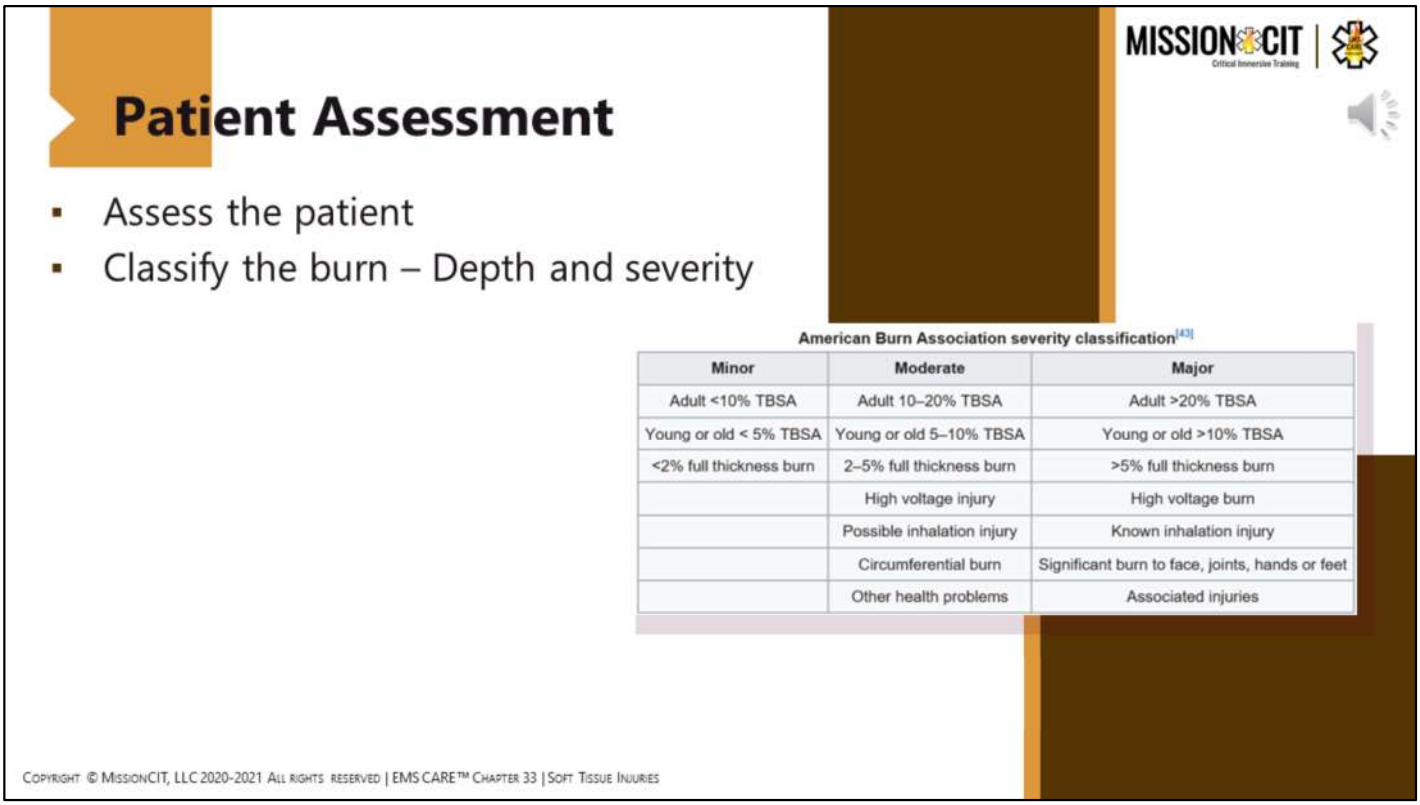


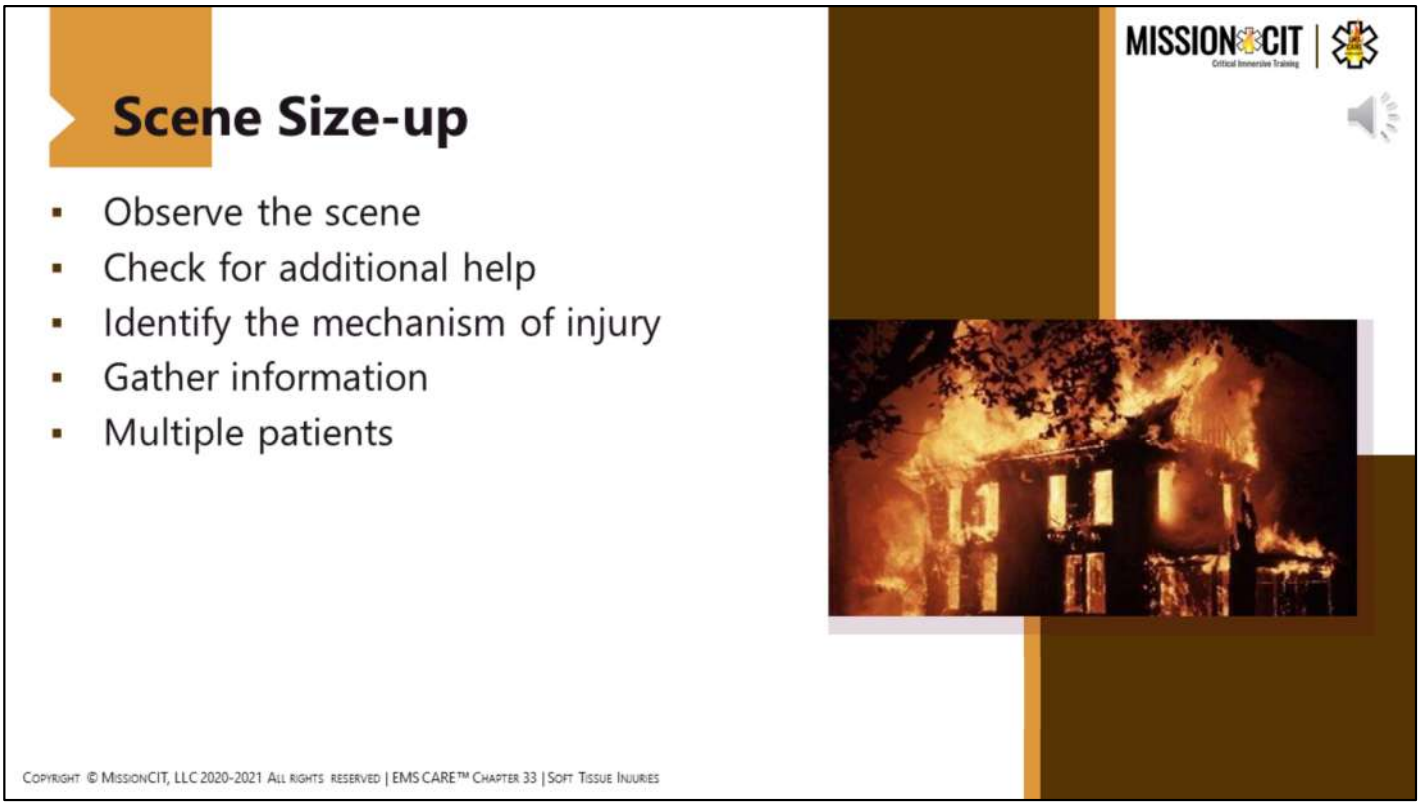
Thank you, Justin!

In this last lesson, we will talk about the treatment of burns. Though we saw a bit of what you can in the previous lesson, we will take a more detailed look into your different options, so you can choose the most appropriate one.

So, let's get started.



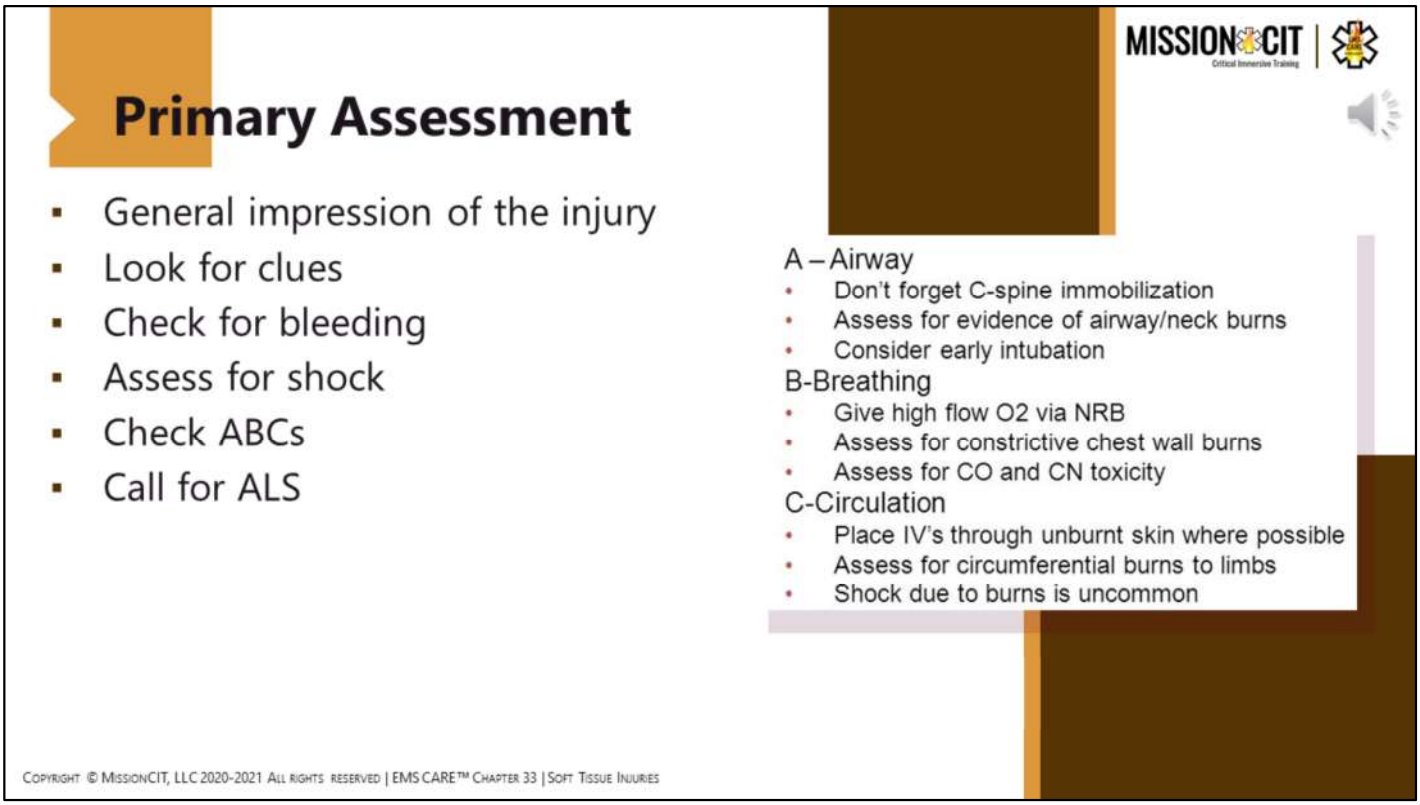
Assess the patient and the severity of burn before beginning treatment. An important part of the assessment is to classify the burns according to their source, depth, and severity, as this will help to determine the appropriate course of action.



As soon as you enter, look around and observe the scene for hazards and safety threats. Keep your safety in mind, and check if you need additional help, the HazMat team, or law enforcement officials. Check the source of the burn as this can help you determine if you need additional help.

Once you deem the scene to be safe, identify the mechanism of injury and the type of burn caused by it. For this, you may have to talk to the patient and bystanders along with your assessment of the scene.

Check if there are multiple patients and consider the potential for other injuries as well.



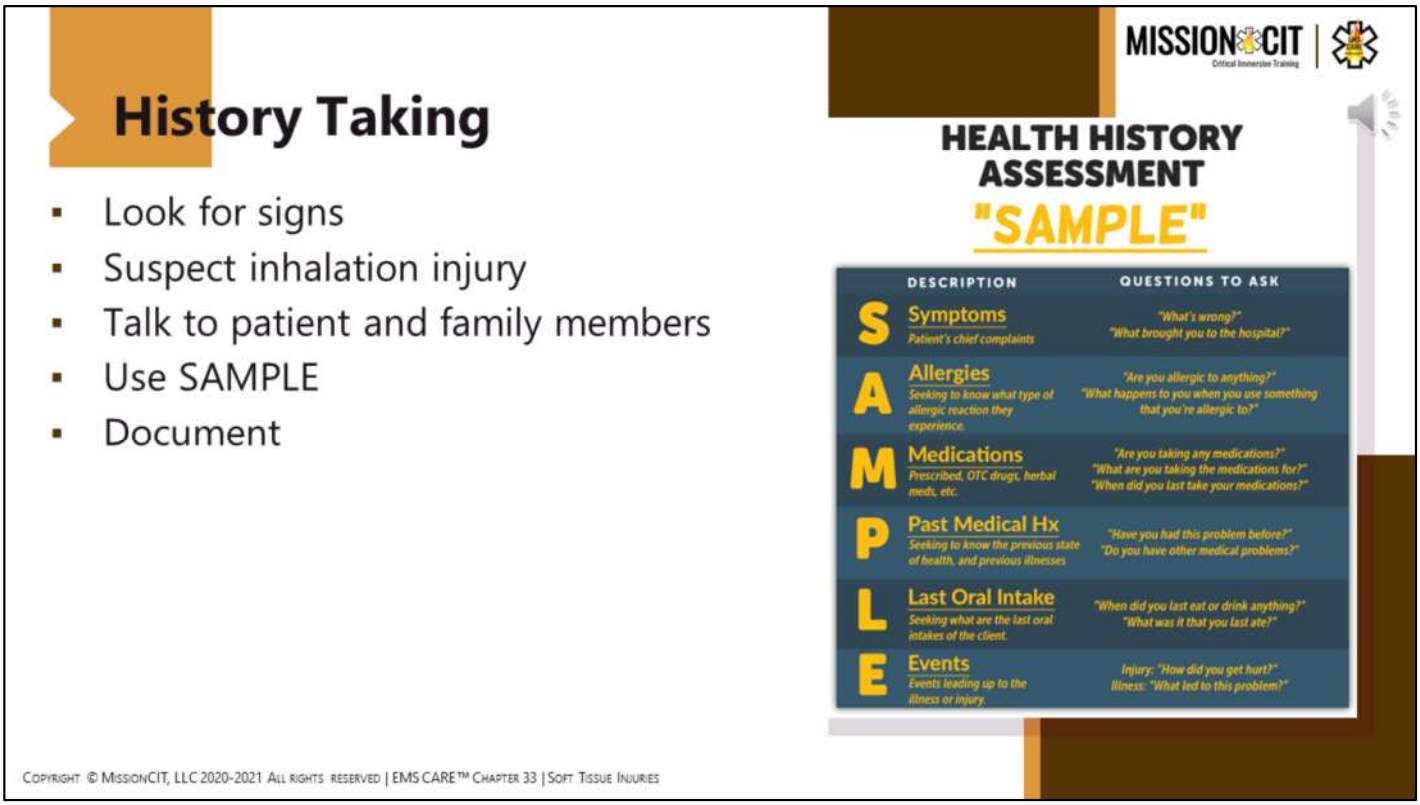
After determining the cause of the burn, begin the primary assessment. Take a glance at the burn and form a general impression of the injury. Specifically, look for clues to determine the severity of the burn and determine if rapid interventions are needed. Also, check for the patient's responsiveness and decide on emergency transport.

Be suspicious of clues that may indicate abuse.

Check for bleeding and control the obvious life-threatening hemorrhage. Also, assess the patient for shock symptoms.

Next, check the airways and breathing. If the patient has inhaled hot gases or vapors, you will see singed facial hair and the presence of soot in and around the airway.

Based on these evaluations, decide on emergency transport. Call for ALS support or transport a patient to the nearest healthcare center if the patient has an airway or breathing problem, significant burn injuries, significant external bleeding, and signs and symptoms of internal bleeding.



After the primary assessment is done and transport decisions are made, start documenting the patient's history to better understand the mechanism of injury.

Look for signs and symptoms that indicate injuries other than the mechanism of injury. If the patient was in a confined space, suspect an inhalation injury, and check for it.

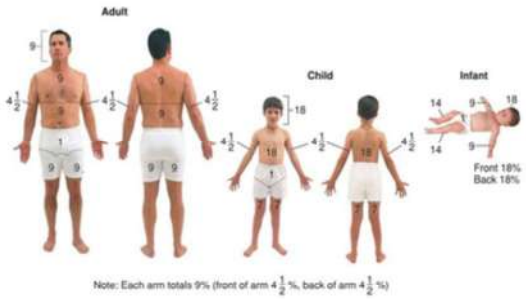
Talk to the patient or family members to obtain the patient's medical history. You can use the SAMPLE methodology for taking history, which stands for Symptoms, Allergies, Medications, Past Medical History, Last Oral Intake, and Events leading to the injury.

Besides SAMPLE, document if the patient had difficulties swallowing or breathing and was suffering from pain.

Finally, note if the patient has an emergency medical identification device.

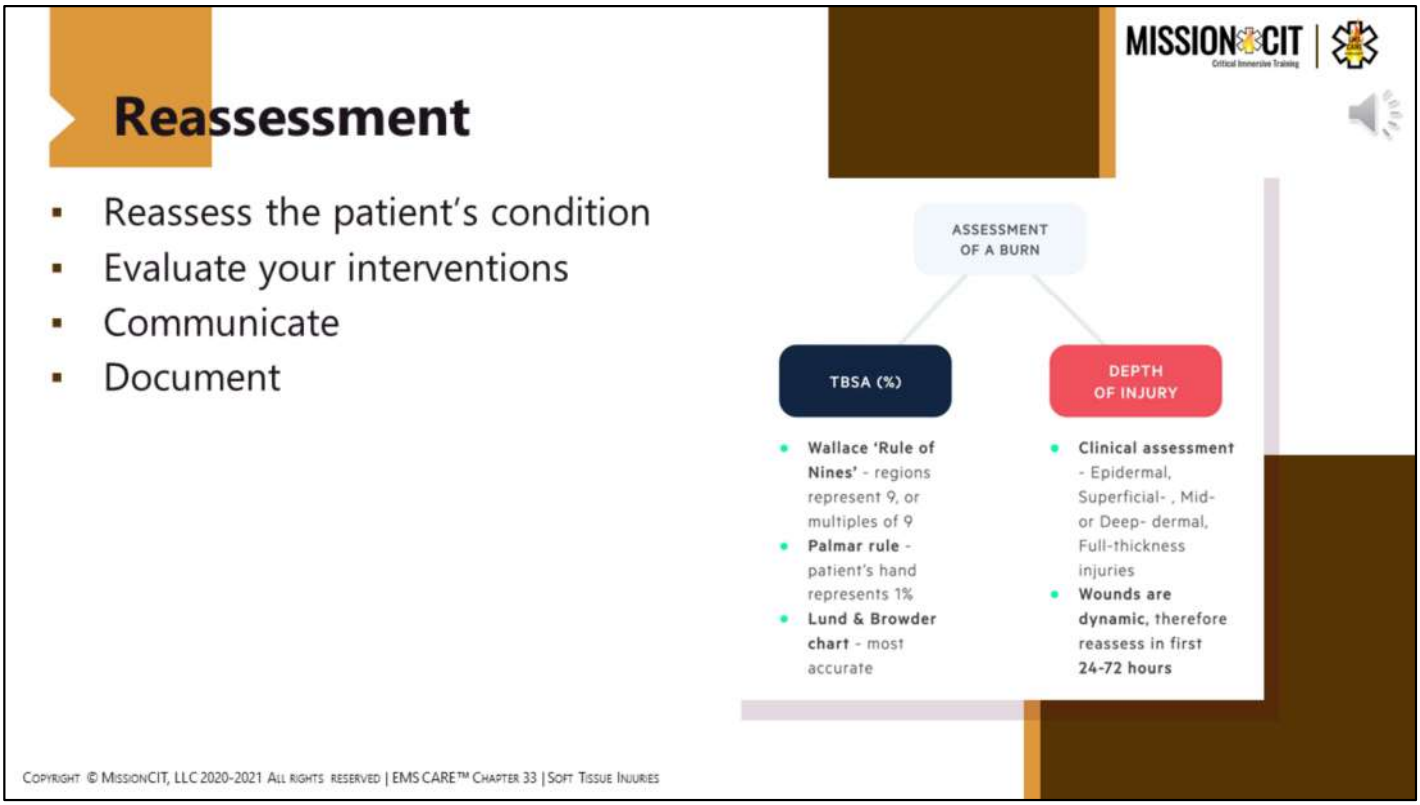
Secondary Assessment

- Detailed examination
- Check for additional injuries
- Rule of nines



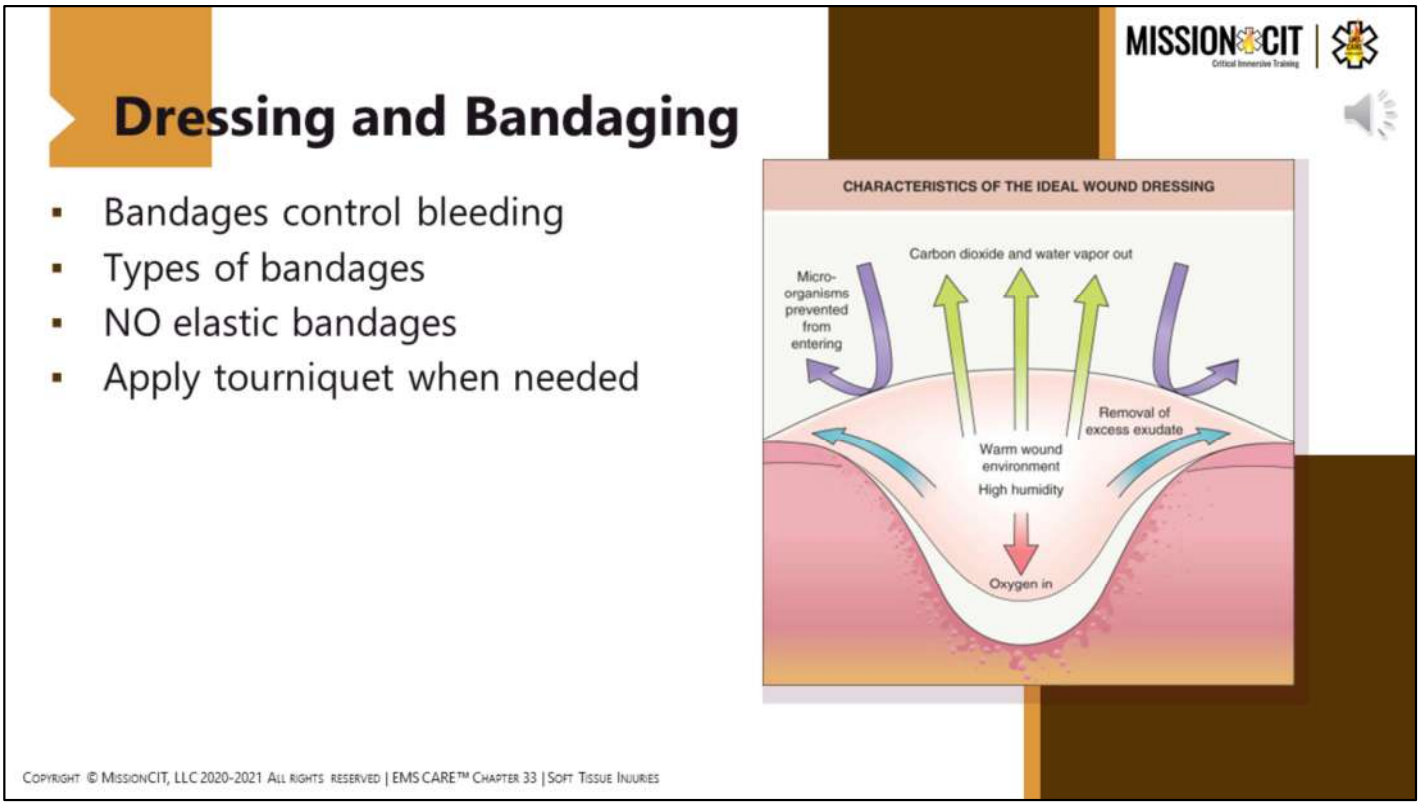
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Now, do a detailed examination of all the body systems to check for additional injuries or other conditions. Use the rule of nines mentioned earlier to determine the nature and severity of the burn. Document your secondary assessment.



Reassess the patient's condition and vital signs to evaluate your interventions and to know if the patient's condition has improved or deteriorated.

Communicate and document your findings as this will give healthcare personnel an idea of the source of the burn and its extent, so appropriate treatment can be provided.



Bandages control bleeding, protect the wound from further damage, and prevent further contamination and infection.

Though all wounds require bandaging, nature and severity will determine the type of bandaging to use.

Most wounds will be covered by universal dressings, which are typically four-inch by four-inch or four-inch by eight-inch gauze pads for small wounds. You can also use assorted small adhesive-type dressings and soft self-adherent roller dressings for minor wounds. Occlusive dressings are also helpful as they prevent air and water from entering or exiting the wound.

When you want to keep the bandages in place during transport, use

- Soft-roller bandages
- Rolls of gauze
- Triangular bandages
- Adhesive tapes

Out of these, the self-adherent soft-roller bandages are the easiest to use. The adhesive tapes can come in handy for small dressings and for keeping large wound dressings in place.

Never use elastic bandages to secure dressings and if the wound continues to bleed, apply

tourniquets.

This brings us to the end of this lesson and Justin will take you through the chapter review next.