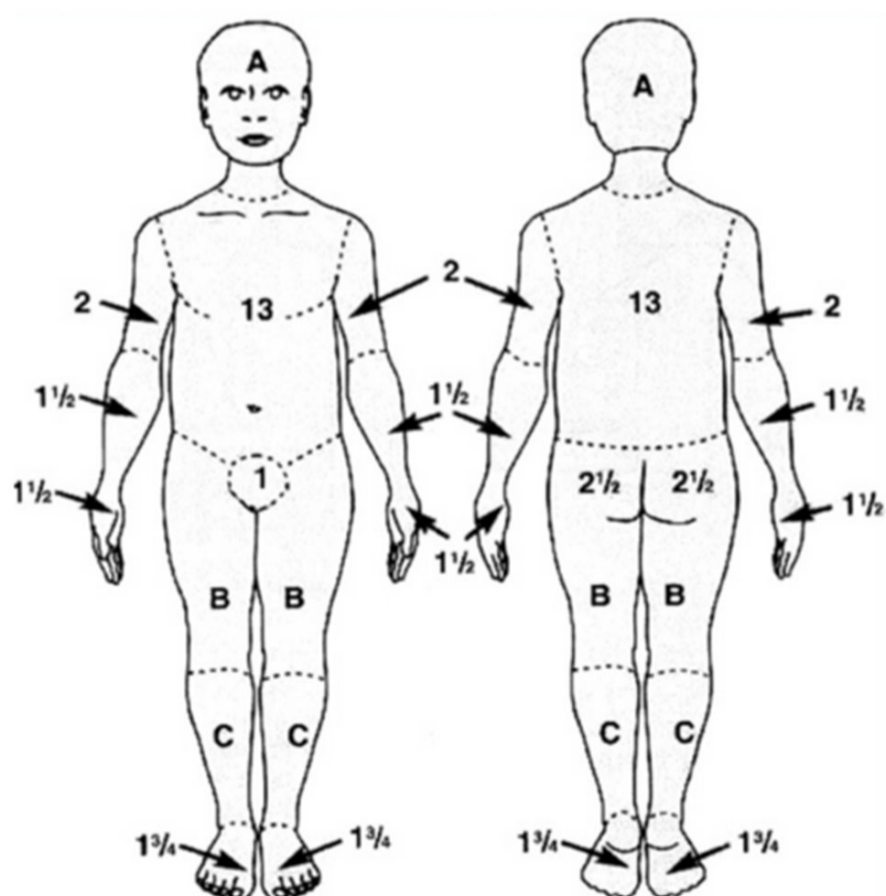
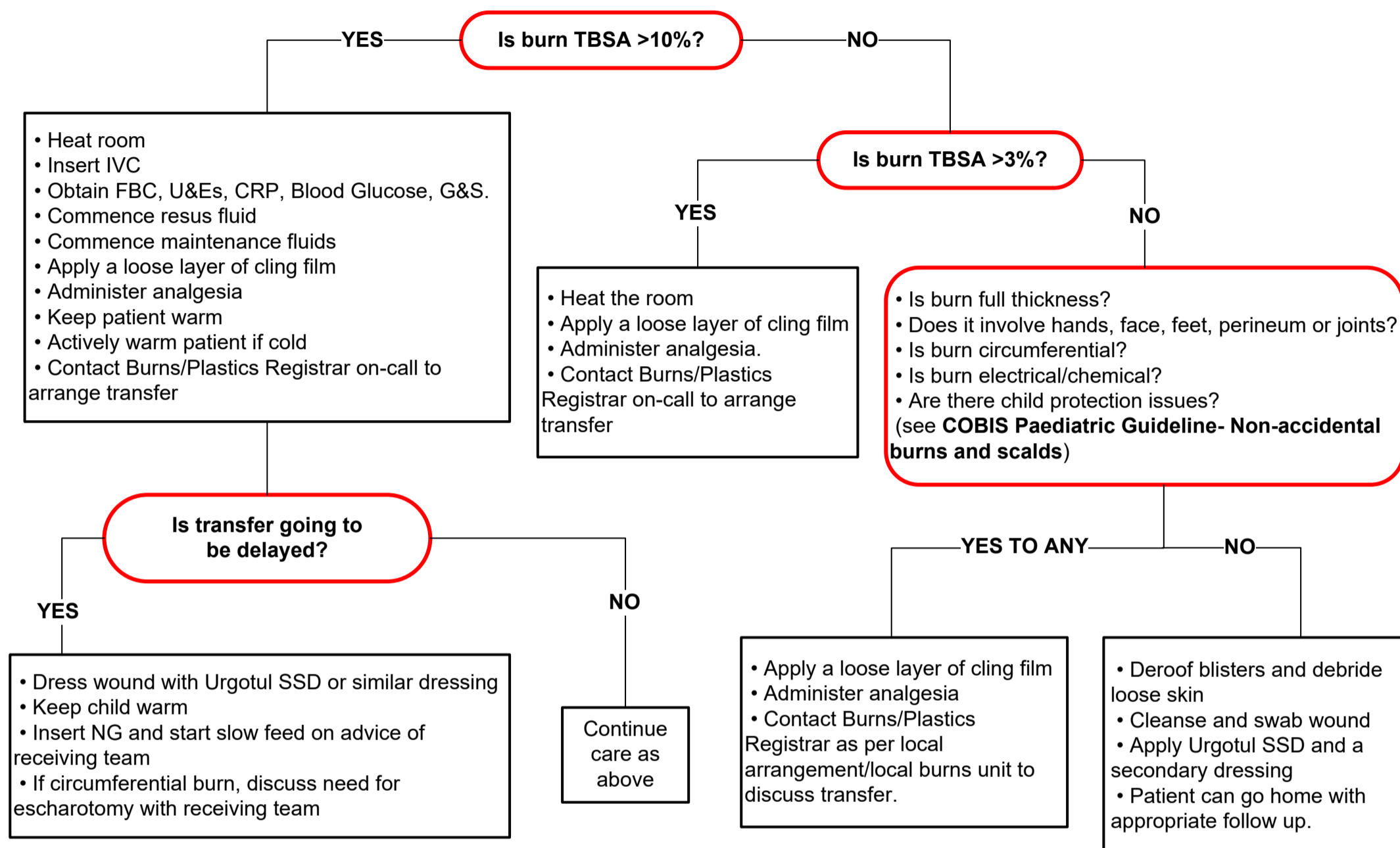


Management of Paediatric Burns

- Are there signs of airway injury? If yes, contact anaesthetist.
- If appropriate **COOL THE BURN** with cool running tap water.
- **Keep the child warm**
- **Check immunisation and tetanus status**



Relative percentages affected by growth

AREA	AGE 0	1	5	10	15	ADULT
A=1/2 of head	9 1/2	8 1/2	6 1/2	5 1/2	4 1/2	3 1/2
B=1/2 of one thigh	2 3/4	3 1/4	4	4 1/4	4 1/2	4 3/4
C=1/2 of one leg	2 1/2	2 1/2	2 3/4	3	3 1/4	3 1/2

COBIS Paediatric Fluid resuscitation guidelines (excerpt)

The initial resuscitation period is 24 hours, split into 2 periods:

First period (8 hours): Modified Parkland formula (given as Plasma-Lyte 148)

Total volume of Plasma-Lyte 148 = %TBSA x weight (in kg) x 1.5

This should be the volume of fluid given by 8 hours post-injury (minus lag time to presentation).

- **Target Urine output:** Refer to age-appropriate PEWS chart
- It's a clinical decision whether to include bolus volumes in total amount.

Second period (16 hours): Fluid administered as Human Albumin Solution (HAS)

Hourly rate of HAS = %TBSA x weight (in kg) x 0.1mls/hr

In addition, remember to give maintenance fluids as follows:

- **100ml/kg/day for the first 10 kg body weight**
- **Plus 50 ml/kg/day over 10kg and less than 20 kg body weight**
- **Plus 20ml/kg/day for each kg over 20kg body weight**

Oral / NG fluid volume is subtracted from maintenance fluids, ml for ml.