NOTE
Contact Surgeon before giving any medication marked with an asterisk. In an emergency or during Loss of Signal, begin appropriate treatment; then call Surgeon as soon as possible.

MAJOR

NOTE
Electrical burns may cause severe organ injury in spite of minimal skin damage. May also produce irregular heart rhythm including cardiac arrest.

Treatment
1. Evaluate vital signs and record every 5 minutes.

<table>
<thead>
<tr>
<th>Time (minutes)</th>
<th>0</th>
<th>5</th>
<th>10</th>
<th>15</th>
<th>20</th>
<th>25</th>
<th>30</th>
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<tbody>
<tr>
<td>ALSP Blood Pressure (ALSP-4)</td>
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<td>Pulse</td>
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<td>Respiratory Rate</td>
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<tr>
<td>ALSP Temperature (Assessment-4)</td>
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</tbody>
</table>

2. Control bleeding with pressure, Gauze Pads (P3-B4)(Surgical Supply-4).
3. Pain relief as needed
   Refer to (PAIN RELIEF) (SODF: ISS MED: O THROUGH Z).

4. If severe pain,
   ALSP (red) *Morphine (Injectables-21 --- 24, and 9, 10) - Narcotic pain reliever
   Dose: Inject 4-10 mg intramuscularly as needed (10 mg/ml).

   ALSP (red) *Meperidine (Demerol) (Injectables-25 --- 30) - Narcotic pain reliever
   Dose: Inject 50 mg intramuscularly.
   Refer to (INJECTIONS - INTRAMUSCULAR) (SODF: ISS MED: INJECTIONS/IV).

**WARNING**

1. The following drugs should not be used together as they may cause excessive drowsiness: Ambien, Benadryl, Claritin, Compazine, Demerol, Dilantin, Morphine, Phenergan, Restoril, Soma, Valium, Vicodin, Soma, Grandaxin, Persen, Phenazepam, Phenibut, Radedorm, Relanium, Rudotel, Suprastin, Tavegil, Xanax.

2. May cause low blood pressure, reduced breathing rate. Antidote for severe side effects is Narcan. (ALSP-Drug 23, 24) 0.4 mg/ml-2 ml injected intramuscularly or intravenously.

Possible side effects
   Dizziness, light-headedness, sedation, nausea, vomiting, sweating, dry mouth, blurred vision, constipation

5. Estimate degree of burn
   First degree - superficial reddening of skin, pain
   Second degree - blisters, red mottled skin, swelling, pain
   Third degree - pain often minimal, skin may appear white, charred, may resemble second degree burn
6. Estimate area of burn - (% of body surface area)
   - Head: 9%
   - Chest: 9%
   - Abdomen: 9%
   - Upper Back: 9%
   - Lower Back: 9%
   - Arms (each): 9%
   - Upper Leg (each): 9%
   - Lower Leg (each): 9%
   - Genital: 1%
NOTE
Area of palm of hand equals approximately 1 % (for estimation).

7. If area of burn > 9 %, establish IV.
   Refer to [INJECTIONS - NONPOWERED INTRAVENOUS FLUID INFUSION]
   (SODF: ISS MED: INJECTIONS/IV).

AMP 8. Unstow:
   (blue) Gloves, Non-Sterile (P3-B2)
   Adaptic Dressing or Gauze Pads (P3-B1) (P3-B4)
   Kling Dressing (P3-B5)
   Tape (P3-A8)
   Telfa Pads (P3-B1)
   Silvadene Cream (P2-A13)
   Vaseline Gauze (Airway-22)

   (red)

10. Cool burn with Drink Bag or Gauze Pad, Towel moistened with water.

11. Apply Olasol (Aerosol) followed by Silvadene Cream in thin layer to
    entire burn area.

12. Apply Adaptic Dressing or Vaseline Gauze to fully cover burn area.

13. Wrap with several layers of Kling Dressing or apply 2-3 Gauze Pads.

14. Secure dressing in place with Tape, not tightly.

15. Contact Surgeon.
MINOR Treatment

AMP (blue)

1. Unstow:
   - Gloves, Non-Sterile (P3 B2)
   - Adaptic Dressing (P3-B1)
   - or Gauze Pads (P3-B4)
   - or Telfa Pads (P3-B1)
   - Kling Dressing (P3-B5)
   - Povidone Iodine Swabs (P3-A3)
   - Tape (P3-A8)
   - Silvadene Cream (P2-A13)
   - Olasol (Aerosol)

2. Don Non-Sterile Gloves.

3. Cool burn with Drink Bag or Gauze Pad, Towels moistened with water.

4. Clean skin around burn with Povidone Iodine Swabs.

5. Apply Olasol (Aerosol) followed by Silvadene Cream to wound in thin layer to entire burn area.

6. Apply Adaptic Dressing, Vaseline Gauze, or Telfa Pad to fully cover burn area.

7. Wrap with Kling Dressing or apply Gauze Pad.

8. Secure dressing in place with Tape, not tightly.


10. Contact Surgeon.