Burn transfer flowchart

Retrieval

- intubated patient
- inhalation injuries
- head/neck burns
- >10% in children
- >20% in adults
- burns with significant comorbidities
- associated trauma
- significant pre-existing medical disorder
- circumferential burn to limbs or chest that compromises circulation or respiration
- significant electrical including lightning injuries
- significant chemical,
 e.g. hydrofluoric acid

Referral

- >5% children, >10% adults
- burns to the hands, feet, genitalia, perineum, or major joints
- chemical burns
- electrical burns
- burns in patients with preexisting medical conditions
- suspected non-accidental injury including children, assault or self-inflicted
- pregnancy with cutaneous burns (RNSH 2nd & 3rd trimester)
- extremes of ages

Minor burns

Burns that do not fit the criteria for retrieval or referral and can be managed in a non-burn unit hospital or clinic, including appropriate management for wounds and pain.

Minor burns can be treated, in consultation with the referring clinician, on an outpatient basis; either locally (at original place of care), or on referral to an ambulatory care burn clinic for assessment.



Contact retrieval service

Adults: ACC 1800 65 0004 Children: NETS 1300 36 2500

Set up conference call with receiving burn unit and ICU (if required), facilitates communication with primary referral site.

CHW ICU: 9845 1171 CRGH ICU: 9767 6404 RNSH ICU: 9463 2600



Contact registrar on-call for burns

CHW: 9845 0000, then page registrar on-call for burns

CRGH: 9767 5000, then page

registrar on-call for burns

RNSH: 9926 7111, then page registrar on-call for burns



Contact burn ambulatory care

CHW: 9845 1850 (b/h) 9845 1114 (a/h)

kidsburns@health.nsw.gov.au

CRGH: 9767 7775 (b/h)
9767 7776 (a/h)
slhd-concordburnsunit@
health.nsw.gov.au

RNSH: 9463 2108 (b/h) 9463 2111 (a/h)

BurnsRNS@health.nsw.gov.au





AMRS/NETS will coordinate transfer between the primary hospital and the receiving hospital.



The on-call registrar will offer advice and arrange a bed in liaison with bed management and the burns unit. They are responsible for receiving the patient. The referrer will make the ambulance booking.





Treated locally. Referred to burn unit.