

BURN & SOFT TISSUE SURGERY

BST Pager: 741-3016

WHO:

Burn Director: Damien Carter: (206) 234-6828

Attendings: Elizabeth Turner: (617) 775-4469, Laura Withers: (917) 650-5408

Burn/Wound Nurse: Hannah Miner: (603) 817-1621

APP: Rosemary Paine: (207) 423-3494

WHAT: see wound grid

Admits: generally, this is what we admit as primary

- burns, necrotizing infections, cold injuries, exfoliative skin diseases

Consults: there's a medical reason for the wound, it should be managed medicine

- decubitus ulcers, cellulitis, diabetic foot ulcers

Trauma: generally, go to trauma, unless there are complex closure/grafting needs

- compartment syndrome, large hematomas

General Surgery: we can help if the wound is complex or requires grafting

- simple abscess, peri-rectal abscesses

WHERE/WHEN:

Morning Sign Out: Everyday @ 600 - R3 Work Room

Morning Report: M-F @ 630 - Dana Center ; S&S @ 700 - R3 conf.

Present 24 hr admits, complications, escalations of care, education

BST Daily Rounds: M/W @ 800 - ICU if patients, R3 if no ICU patients

T/F in OR, Th - TBD per attending

Wound Rounds: M, T, Th, F @ 1100 - R3 nurses station

Discuss R3 patients, evaluate wounds scheduled, book wound on white board day prior

OR: Tuesday and Friday block time, other days as needed

Multidisciplinary Burn Clinic: Wed @ 1300- 1600 w/ BST attending & APP

BST Attending Clinic: Mon @ 1230-1530

PIPS: Tues @ 700-800 - R3 conference room - *PI Review for Burn/Trauma patients*

Multidisciplinary Burn Rounds: Wed @ 1200-1300 - *R3 conference room*

Present all inpatient burns, discuss plan w/ team, educational offering

ROUNDING:

Primary: progress note daily

Consult: brief note at least weekly or whenever the plan changes

SCU patients: surgical ICU is the primary team, brief note daily

R3 WOUND ROUNDS

- Review all R3 patients with charge nurse and nurses
- Each evening, write on white board which patient you would like to see the next day
- Nurses will premedicate patient and have dressing removed for the team to see

ORDERS:

Burn Adult Acute Admission Order Set - Floor admit orderset

Pulm/Crit Care ICU Burn Care - ICU admit orderset

Wound Care - update order daily with changes and post op.

CHARTING:

Burn Admission Note: every burn admission/consult

dot phrase: BURNADMIT

Soft Tissue Consult Note: use for all consults other than burns/trauma

dot phrase: BSTCONSULT

Tertiary Note: complete for burns within 24 hrs of admission

dot phrase: BURNTERTIARY

Burn Primary Progress Note: use for daily rounding on BST Primary patients

dot phrase: BURNPROGRESSNOTE

Plan of Care Note: complete at burn MDR every Wednesday

dot phrase: BURNPLANOF CARE

Burn Pre Op: complete prior to OR for burn patients

dot phrase: BURNORCHECKLIST

Discharge Summary:

smart text: MH IP SURG DISCHARGE SUMMARY

Discharge Instructions: ensure up to date wound care instructions are included

dot phrase: BURNDINSTRUCTIONS

Plan for Burns: use in daily progress note for burn patients

dot phrase: BURNPLAN

Plan for Wounds: use in daily progress note for soft tissue patients

dot phrase: BSTWOUNDPLAN

Wound Care Instruction: this dot phrase will import all wound care instructions into note

dot phrase: WOUNDORDER

FOLLOW UP:

BST Service Patients

- Staff message in Epic to: P MMP Acute Care & General Surgery Admin Pool
- Request when you would like the patient to be seen (burn clinic vs other clinic)

ED/Outpatient Providers to set up follow

- Email burnfollowup@mmc.org
- Include patient name, DOB, reason for visit

EXTRA:

Update Sticky Note frequently with any changes and weekend plans on Friday

Report complications to traumapi@mmc.org (see comp list on Burn orientation page)