Palliative Care in the Management of Burn Injured Patients

Maine Medical Center

Burn and Soft Tissue Surgery Service

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Burn injuries may result in severe illness and affect quality of life. It is important to set clear expectations for patients, family and burn care providers in respect to course of treatment and long-term outcomes for this population. Accordingly, patient centered goals of care must be established and reaffirmed throughout the admission. The burn team aims to collaborate with the palliative care team to set criteria and expectations for consultation. The collaboration will include the multidisciplinary teams from both services including: physicians, nurses, physical therapy, occupational therapy, advanced practice providers, psychology, social work and spiritual care.

Criteria for Consultation:

- Age >65 and TBSA >30%
- All ages > 50% TBSA
- Self-immolation
- Underlying dementia
- Underlying malignancy
- Care team distress
- Multi-system organ failure
- Multi-trauma
- Significant physical disability and/or amputation

Expectations:

- The burn team member (not ICU team) will discuss case with palliative care team member prior to consultation.
- Goals of care discussions will be held with representation from multidisciplinary burn and palliative care teams. This includes nursing and therapy representatives.
- The burn team will manage pain control. Palliative care will not consult for pain control.
- A palliative care representative will participate in burn multidisciplinary rounds when following an admitted burn patient.