23 – BURN, CANYONEERING

SPAIN



THE STORY:

A 23 y/o female on a remote canyoneering trip with two friends was boiling water for morning coffee when she knocked the pot off the rock she was cooking on and spilled much of the water onto herself. She quickly removed her boiling-water soaked shorts but not before sustaining a significant burn to approximately 7% of her right thigh, crotch, and hip. Her companions immediately used a liter of treated drinking water to cool the burned area and placed the patient onto a sleeping pad to assess the injury.

On exam, the Pt was alert and uncomfortable, with reddened slightly swollen skin extending from her inner thigh into the crease of her pelvis and over her right hip almost to her illiac crest. The patient suffered no burn injury to her genitals or elsewhere on her extremities. She stated an allergy to sulfa drugs and compliance with her regular medication: synthyroid. Her vitals at 0730 were: Pulse: 88, Resp.: 24, Skin: normal, Pt was alert and uncomfortable.

Put the appropriate information from the story above into the correct spaces provided in the SOAP note. Develop an Assessment for 0730hrs. with Anticipated Problems and an appropriate Treatment Plan.

At 0800hrs., the group was able to acquire and treat another couple liters of potable water and further irrigated the burn, noting increased swelling and clear fluid-filled blister formation beginning on the injury site. Although the patient complained

of a "stinging and itching sensation," she seemed to tolerate her discomfort well. Vitals: Pulse: 76, Resp.: 16, Skin: normal, Pt was alert and somewhat more comfortable.

QUESTIONS

- 1. Would you consider this burn injury to be high-risk? What tools would you like to have in your first-aid kit to manage an injury like this?
- **2.** What implications does this injury have in the context of a canyoneering trip where the Pt will need to negotiate technical terrain including swimming a number of pools to complete the trip or evacuate?

| A = Assessment (Problem List) | A' = Anticipated Problems | P = Treatment Plan |
|--------------------------------------|---|---------------------------------------|
| 0730 | A - Anticipated Floorenis | i – ireacinent ran |
| 7% boiling water burn to thigh, | pain/swelling/infection | irrigation / dress / bandage / moni- |
| inguinal crease, and hip | paint overing meetion | tor for infection |
| <i>O</i> | | |
| ASR | cont. ASR | treatment/reassurance |
| | | |
| 0800 | | |
| 7% partial thickness burns to | pain/swelling/infection/function | OTC analgesic / burn dressing / |
| thigh, inguinal crease, and hip | | monitor for infection/function |
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| | What Astually Happan and North | |
| | What Actually Happened Next | |
| | ofen PO tid and her dressings were insp | <u> </u> |
| tion noted (pus drainage) on the er | nd of the 2nd day. Despite efforts to rec | elean, dress, and protect the injury, |
| | e care in the hospital when her burn co | ontinued to present with persistent |
| the patient was evacuated to receive | | |
| * | ing travel in such a high mobility area. | |
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