

INTERDISCIPLINARY TEAM

Page 1

The Burn Team is interdisciplinary. Every team member has an important and unique contribution to make to the burn patient. The burn nurse spends the majority of the time with any individual patient and thus the nurse is often called upon to coordinate the care. Every team member contributes to the patient's plan of care.

Burn Surgeon; The burn surgeon is the leader of the team and orders appropriate care. The burn surgeon may call in other physician consultants but changes in the plan of care is reviewed and approved by the burn surgeon. He or she directs all aspect of care.

Burn Nurse: The RN assigned to the patient has an understanding of appropriate burn care and follows the plan of care. Since the RN spends most of the time with the patient, he or she is responsible for reporting changes in a patient's condition, adjusting care to meet patient's needs and in coordinating care delivered by other team members. The day shift RN must ask if the physician wishes to be present for dressing changes prior to initiating "tubings" or-dressing changes. The RN also calls the therapists to ask if they need to see the patient with the dressings off, etc.

Burn Technician is a CNA specially trained in aspects of burn care including aseptic dressing changes, hydrotherapy, and splinting and positioning. He or she assists the burn nurses.

Physical therapists evaluate all burn patients on admission. He/she consults with the doctor as to the needs of the patient and outlines a treatment plan. The therapist should be incorporated in scheduling "tubings" and dressing procedures. The patient exercises best in the water and with the dressings off. The PT will also make appropriate splints ordered by the doctor.

Occupational Therapists *may* be involved throughout the patient's stay in the Burn Center but their participation is especially crucial during the rehabilitation phase of burn care. They fashion adaptive devices for the patients and teach the patient to make needed adjustments so that he/she can return to as much independence in activities of daily living as possible.

Speech Therapists work with many of our burn patients. Many burn patients are intubated for days and have a certain amount of dysphagia once extubated. The speech therapists work with the patient to ensure that the patient swallows appropriately and does not aspirate.

Dietician sees all burn patients within 24-hours of admission. The dietician assesses the patient's nutritional status and anticipates nutritional needs based on the severity of the bum. The dietician offers advice to the patient's doctor. He/she initiates calorie counts which the nurse has the responsibility to document. Since early enteral feedings are standard of care in burn patients the dietician will suggest the appropriate formula. The dietician, like the therapists, will follow the patient throughout the hospitalization. He/she monitors lab values and patient's weight to assure that the patient does not lose more than 10% of body weight while hospitalized.



INTERDISCIPLINARY TEAM

Page 2

Social Worker meets with the patient and family to offer support and facilitate locating resources needed by the patient and family. Patients often will confide in social workers things they will not tell anyone else.

Chaplain meets with the patient and family and assesses for any spiritual needs. The chaplain also will give an avenue for venting feelings and concerns. If requested by the patient or family, he/she facilitates visits from clergy.

Case Manager RN: Involved with discharge planning. The case manager seeks out resources for the patients. The case manager coordinates placement of patients in transitional care or acute rehabilitation facilities.