

## Guideline: Referral, Transfer and Discharge in the NBC

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### Purpose

To provide guidelines for which patients should be referred to the National Burn Centre from other regions.

To outline the process for referring patients to the National Burn Centre.

To outline the process for transferring patients from the National Burn Centre to regional services.

### Responsibility

Medical personnel from local hospitals.

Regional plastic surgeons.

National Burn Centre surgeons.

Burns clinical nurse specialists.

### Associated Documents

Other documents relevant to this guideline are listed below:

<b>NZ Legislation</b>	
<b>CMDHB Clinical Board Policies</b>	
<b>NZ Standards</b>	
<b>Organisational Procedures or Policies</b>	Admission Process for Out of Region and Overseas Burns, Progress Reports for Out of Region Burn Patients - Policy.
<b>Other related documents</b>	National Burn Service Framework

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<b>Counties Manukau District Health Board</b>			

## Guideline

### **The following criteria indicate discussion and/or transfer to the NBC:**

*(NB. Referral does not necessarily mean transfer.)*

- Burns  $\geq$  30%TBSA
- Patients potentially requiring prolonged ventilation
- Full thickness burns greater than 15% TBSA in the very young or very old
- Electrical burns – high voltage with underlying tissue damage
- Significant chemical burns

All patients that fulfil these criteria are required to be discussed with the NBC but may not necessarily be transferred, if this is agreed by the RBU and the NBC staff. Regardless of whether the patient is transferred or not, a referral form should be sent to the National Burn Centre to confirm the agreed outcome. If there is no consultation and agreement with the NBC, funding will not be available to the RBU<sup>1</sup>.

Any patient who fulfils the criteria for admission in a RBU (ANZBA criteria, see below) *may* be discussed (at the discretion of the referring plastic surgeon) with the NBC if it is felt that the patient's care would benefit from transfer, although transfer is not necessarily guaranteed.

### **Complex Burn Injury – ANZBA Criteria**

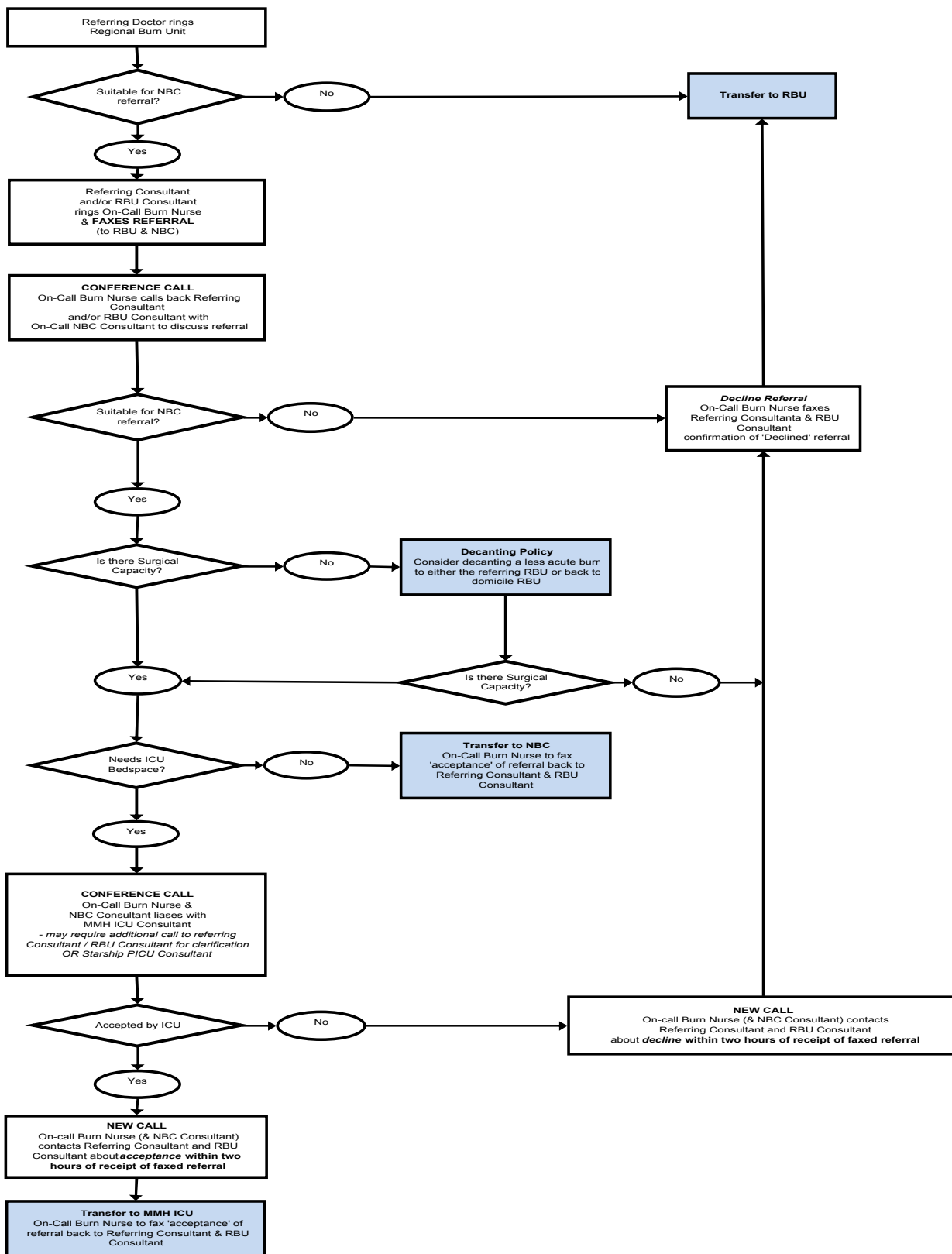
- Burns >10% Total Body Surface Area (TBSA) or 5% in a child
- Burns of Special Areas, ie. face, hands, feet, perineum and major joints.
- Full thickness burns >5% TBSA.
- Electrical burns.
- Chemical burns.
- Burns with associated inhalation injury.
- Circumferential burns of the limbs or chest.
- Burns at the extremes of age, ie children and elderly.
- Burn injury in patients with pre-existing medical disorders which could complicate management, prolong recovery or effect mortality.
- Any burn patient with associated trauma.

<sup>1</sup> Additional revenue is accessible via ACC for funding of extreme and HCB's. This is accessible by RBU's only if discussion and agreement has taken place between the NBC and RBU, and the details recorded – (procedure to be put in place).

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Referral, Transfer and Discharge in the National Burn Centre

**Referral Process**



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### **Transfer of Care from the National Burn Centre**

Once the patient is discharged from the NBC, responsibility for ongoing care lies with the Regional Burn Unit. The consultant responsible will be the referring consultant, unless notified otherwise by the Regional Burn Unit.

Patients will be transferred as inpatients from the NBC to the appropriate Regional Burn Unit, to enable regional personnel to arrange local support services and plan follow-up care. Exceptions can be made in collaboration between the NBC and the RBU for a patient to be discharged directly home, OR to a local hospital, if this is believed to be more appropriate for the patient and family.

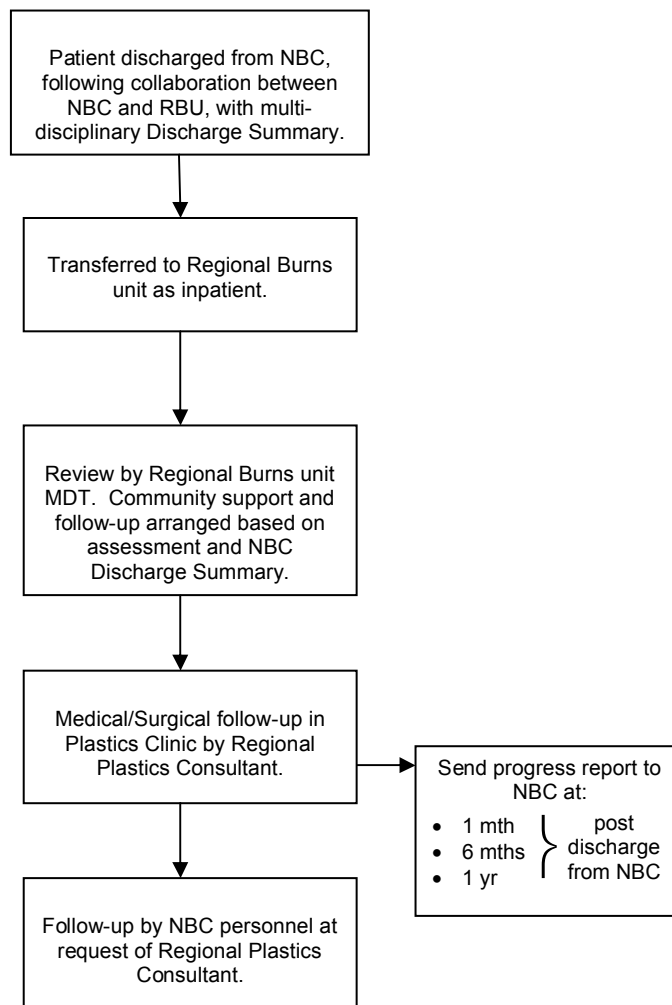
Patients will be discharged from the NBC under the following guidelines:

- When NBC personnel consider the patient is ready for return transfer, following comprehensive multi-disciplinary discharge planning.
- After discussion with the Regional Plastic Surgeon and Charge Nurse of the receiving unit.
- After acute surgical treatment has been completed.
- After very early reconstructive surgery has been completed eg. Eyelid ectropian release, severe neck contracture.
- After complex splints such as Uvex masks, mouth splints have been made and problems addressed.

Comprehensive discharge summaries and plans will be sent to the receiving unit, in line with the Progress Reports for Out of Region Burn Patients Policy.

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### Follow-up of patients discharged from NBC



### Definitions

Terms and abbreviations used in this document are described below:

Term/Abbreviation	Description
TBSA	Total Body Surface Area
MDT	Multi-Disciplinary Team
NBC	National Burn Centre
RBU	Regional Burn Unit
MMH	Middlemore Hospital

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