**Appendix 1: Pathway for management of Toxic Shock Syndrome in Paediatric Burns**

Temperature ≥ 38⁰C in any child with burn:

**0 mins**

**5 mins**

**10 mins**

**15 mins**

**45 mins**

**1 hour**

**Paediatric SpR and Burns SpR to review patient urgently**

**Nursing Team**

**Escalate** urgently to Paediatric SpR and Burns SpR:

30-minute **observations** and **fluid balance** monitoring

Give **antipyretics** if prescribed

**Paediatric Registrar**

Bleep 1165

**Burns Registrar**

Bleep via Switchboard, dial 0

Look for Signs of Toxic Shock:

* Rash of any sort
* Temp ≥ 38.8 °
* Vomiting +/- Diarrhoea
* Irritability/Drowsiness
* Lymphopaenia
* Hyponatraemia

**Paediatric Team**

**Full examination** looking for focus of infection

**Involve consultant early.** Order FFP early (See Appendix 2)

**IV access & urgent bloods -** FBC, U+E, CRP, clotting, blood gas, **group + save x 2**, blood cultures

**Septic screen**: urine culture, wound swab +/- stool sample, etc.

**ANTIBIOTICS**: **IV** **Ceftriaxone + IV Clindamycin** (see BNFC for doses)

Give IV **Sodium Chloride 0.9% bolus** 20 mls/kg

**Give FFP 10mls/kg** over 15 mins

Consider further **FFP +/- IVIG** 2g/kg (See appendix 3 & 4)

Inform **anaesthetics** on call (bleep 1319). Consider informing Bristol Burns Centre +/- Southampton PICU.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ACTION | Antipyretics | Antibiotics | IV Fluid | FFP | IVIG |
| TIME GIVEN |  |  |  |  |  |

**Plastic Surgery Team**

**Dressing change to inspect wound.** Consider theatre for dressing change (inform anaesthetics, bleep 1319).

Swab for MC&S, clean and apply silver dressing.

Check recent micro swabs.

**Inform Paediatric Consultant and Burns Consultant as soon as possible.**

Consider informing Bristol Burns Centre +/- Southampton PICU.

**PICU Southampton** **Bristol Burns Centre**

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