# Arcos

#### Burn Navigator <sup>®</sup> Training Guide Adult Example



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#### For Burn Navigator Web Version 6.2.3

July 2019

#### What is Burn Navigator?

Burn Navigator is a <u>Clinical Decision Support</u> tool to help health care providers manage IV fluid therapy for adult and pediatric severe burn patients.

#### **Resuscitation Graph**



This resuscitation is going well.

#### **Resuscitation Graph**



Intervening when fluids exceed the guideline is key to avoiding too much fluid. The red box above shows the key time to intervene. (More on this graph later.)

### **Clinical Data**

- Army's Initial Retrospective Study (before and after, n=70)<sup>1</sup>
  - 35% additional time in target Urine Output range
  - 24 hour fluids given reduced from 6.5 to 4.2 mL/kg/TBSA
  - 2.5 fewer ventilator days
  - Decreased mortality between cohorts
- Army Retrospective Review (n=207)<sup>2</sup>
  - 24 hour fluids given were 3.5 mL/kg/TBSA
  - Mean urine output for initial 24 hours was 55 mL/hr
- **UTMB Retrospective Review** (n=154)<sup>3</sup>
  - AKI incidence reduced from 15% to 6% in first five days (p=.089)
- 1 Salinas, J et al, Computerized decision support system improves fluid resuscitation following severe burns: An original study, Crit Care Med 2011, 39(9), 2031-8.
- 2 J Salinas et al, *Review of Patients Resuscitated Using a Computerized Decision Support System in A Burn Intensive Care Unit*. Crit Care Med 2012, 225: Abstract only.
- 3 Sheaffer J et al, Incidence of Acute Kidney Injury in Computerized Decision Support System Guided Fluid Resuscitations, American Burn Association Oral Presentation, 24 March 2017.

### Indications for Use

- The Burn Navigator is indicated for use in the care of <u>adult</u> patients with 20% or more Total Body Surface Area (TBSA) burned, or <u>pediatric</u> patients, 24 months old or older, weighing <u>at least 10 kg</u> with 15% or more TBSA burned, as a fluid resuscitation monitor and calculator for hourly fluid recommendations.
- The Burn Navigator is intended to be used for burn patients of <u>all ages, weights and co-morbidities as a fluid</u> resuscitation monitor.
- The Burn Navigator is intended to be <u>initiated within 24</u> <u>hours</u> of the burn incident and to be used no longer than 72 hours post burn.

#### **Protocols**

Room: 501	Weight: 80kg	TBSA: %	HPB:	09:22			
Select the patient	protocol:						
O Adult predi	ctive protocol						
Targets 30 - 50 mL/hr Up to 15% changes each hour. Recommended for most adults without gross myoglobinuria.							
Custom pro	otocol						
Target: 0.5 Limited to 10 Recommend	5 to 1.0 mL/kg 0% changes each ho ded for pediatric patie	, 40 - 80 mL/hr our. ents.	urine output.				
Monitor onl	У						
No hourly re Provides res	commendations. suscitation graphs an	nd alerts.					
			Back	Next			

## Adult Predictive Protocol

- Uses the Salinas algorithm developed by U.S. Army Burn Center<sup>1</sup>.
- The Salinas algorithm uses the trend of the last three hours of UO to recommend the next hour's IV infusion rate.
- The Salinas algorithm will go up to the hourly cap chosen by your medical director (e.g., 10%, 15% or 20% each hour).
- This protocol is recommend for most adult patients who do not have resuscitation confounders.



Targets 30 - 50 mL/hr Up to 15% changes each hour. Recommended for most adults without gross myoglobinuria.

1 Salinas, J et al, Computerized decision support system improves fluid resuscitation following severe burns: An original study, Crit Care Med 2011, 39(9), 2031-8.

### Adult Predictive Protocol uses a 3-hour trending algorithm



### **Custom Protocol**

- Allows clinicians to set a target Urine Output range in mL or mL/kg each hour.
- If the patient's UO is not in target, then the Custom Protocol will recommend increasing or decreasing the IV fluid rate by 10%.

Custom protocol								
Target:	0.5	to	1.0	mL/kg ,	40 - 80 mL/hr	urine output.		
Limited to 10% changes each hour.								
Recom	nende	d foi	<sup>r</sup> pediat	tric patien	ts.			

## **Monitor Only**

- Monitor Only provides resuscitation graphs, projections and alerts
- Monitor Only does <u>not</u> provide an hourly IV fluid recommendation based on UO
- Choose this protocol when <u>UO is not a good</u> <u>surrogate of general organ perfusion</u> (such as acute renal failure or with diuretics) or if the patient does not have a Foley catheter

#### Monitor only

No hourly recommendations. Provides resuscitation graphs and alerts.

## Clinical Decision Support (CDS)

- As a CDS tool, Burn Navigator is not intended to replace clinical decision judgement, rather it informs clinical decision making.
- Users should always rely on their clinical judgment when making decision regarding patient care. The Burn Navigator recommendations are not a substitute for clinical judgment.

#### Interface



#### Log into Burn Nav Web

For U.S., log into <u>https://burnnav.net</u> For Europe, log into <u>https://eu.burnnav.net</u> For Canada, log into <u>https://ca.burnnav.net</u> **Click "Training Mode"** 

#### Arcos Hospital

Welcome Chris -

#### Active patients

Room No.	TBSA	Weight	Protocol	Hours Post Burn	Report	Session Id
training	65 %	80 kg	Adult predictive algorithm	HPB 1	PDF	training-100
Training603	50 %	67 kg	Adult predictive algorithm	HPB 6	PDF	training-96





Room: 501	Weight: 80kg	TBSA: %	HPB: 09:14	4
Confounders				
Does the patient have				
Gross myoglobinuria?	? 🔶 Ye	s 🔵 No	O Unknown	
High blood alcohol/Et	OH? 🔵 Ye	s 🔵 No	O Unknown	
Hyperglycemia?	Ye	s 🔵 No	O Unknown	
End stage renal disea	ise? 🛛 🔘 Ye	s 🔵 No	O Unknown	
Congestive heart failu	ıre? 🛛 🔘 Ye	s 🔵 No	O Unknown	
Urinary catheter?	O Ye	s 🔵 No		
			Back Next	

#### **Choose Adult predictive algorithm**



# If an adult patient has myoglobinuria, you may need to target 75-100 mL UO



#### **Enter TBSA**

- Be as accurate as you can be
- Only count 2<sup>nd</sup> and 3<sup>rd</sup> degree



#### Enter height

#### (it is optional for adult predictive algorithm)



# Enter how long ago the patient was burned in <u>hours</u> and <u>minutes</u>

If you don't know, make your best guess



## The software will calculate time of burn

#### Enter total fluids given and urine output since the burn until now



If you don't know this information now, you can leave it blank and enter it later

## You can select different starting formulas

	Room: Training	Weight: 80kg	TBSA: 80%	HF	PB: 9	09:41	
	Select primary resus	citation fluid:					
	Lactated Ringer's					•	
	Select initial rate form	nula:					
	3 mL/kg/TBSA					•	
	Recommended rate:		Enter new rate	e:			
	600 mL	./hr		600	mL/hr	]	
			7	Back		Next	
	Your	physicia	n may w	ant y	ou		
	to start at a different rate.						
If so, enter the rate here.							

Lactated Ringer's is the default fluid. You can change fluid types.

### You've completed the new patient setup! Now you see the Home Screen



#### **Enter checklist information**



Checklists are recommended:

- When starting a new resuscitation
- Every 6 hours

#### Advance time to the next update

Room: Traini	ng	Weight: 80kg	TBSA: 80%	HPB: 9	09:45
Home	Patient	Notes	I/O Table	Volume 🔤I/O G	∋raph
Cu	rrent primary	fluid:	Next	update due:	
L	actated Ring	er's	1	5 minutes	
Cu	rrent infusion	rate:	Projected	d 24 hour volume	e
	600	mL/hr	2.5	mL/kg/TBSA	
Hourly Update	Stop Burr Navigator	n Enter Notes	Enter Checklist	Main Next Menu Updat	t te
				1	
			Pres	s "Nex	t Ur



"From" time is the end of the last update

"**To**" time is when you collect UO data

#### Enter 3 mL UO, then press "Next"



The <u>rate</u> and <u>volume</u> will be different if the time period is not 60 minutes

If you edit the rate, the volume for the time period will be updated

# Click "Select a fluid type"



Note that "Additional Fluids" are divided into two categories: Secondary Fluids and Other Fluids.

Secondary Fluids are added to the total fluid volume and – if repeated – are included in the 24hour fluid projection.

**Other Fluids** are not included in the total fluid volume or the 24-hour fluid projection.

Addit	ional Fluids		
	Fluid	Volume	Repeat
	Select a fluid type	•	
	Select a fluid type		
>	Secondary Fluids Category:	s: mL	
Enter Burn Navig	Lactated Ringer's Normal Saline Plasma-lyte Albumin 5% Albumin 25% Packed Red Blood Cells Fresh Frozen Plasma Whole Blood Hextend	Back ast hour.	Next
	Other Fluids Category: Tube Feeds Lactated Ringer's + 5% Dextrose IV Medications Other Fluid		

#### Choose "Albumin 5%"

#### Type 70mL and click "Repeat"



#### Total Additional Fluids: 70 mL

WARNING: Giving fluids in addition to the primary resuscitation fluid may require an adjustment to the fluid infusion rate by the user, different from the rate recommended by Burn Navigator. The attending physician should be contacted to determine if the new recommended infusion rate is appropriate.

You'll see this warning message anytime additional fluids are given, because the algorithm doesn't take those fluids into account Back



# Accept this recommendation by pressing "Enter"

#### Let's do another update





Enter UO, then press "Next"

Room: Training	Weight: 80kg	TBSA: 80	)%	HPB: 11	11:04
Fluids Given					
From:10:00	To:11	:00		60 mins	
Primary fluid was:					
Lactated Ringer's					T
Infusion rate:		Infusion volu	ume:		
690	mL/hr		690	mL	
			В	ack	Next

# Since our pump rate wasn't changed during this hour, just press "Next"

Because you chose "Repeat" last time, albumin is listed again.

#### Press "Next"

Room: Training	Weight: 80kg	TBSA: 80%	HPB: 11		11:05
Additional Fluids					
Fluid		Volume			Repeat
× Albumin 5%			70	mL	
Select a fluid type		T			

Total Additional Fluids: 70 mL

WARNING: Giving fluids in addition to the primary resuscitation fluid may require an adjustment to the fluid infusion rate by the user, different from the rate recommended by Burn Navigator. The attending physician should be contacted to determine if the new recommended infusion rate is appropriate.




### Let's do one more update





#### **Enter UO**

Room: Training	Weight: 80kg	TBSA: 80	)%	HPB: 12	12:01
Fluids Given					
From:11:00	To:12:	00		60 mins	
Primary fluid was:					
Lactated Ringer's					T
Infusion rate:		Infusion vol	ume:		
790	mL/hr		790	mL	
			В	ack	Next

### Confirm the pump wasn't changed: **press Next**

Room: Training	Weight: 80kg	TBSA: 80%	HPI	12:02	
Additional Fluids					
Fluid		Volume			Repeat
× Albumin 5%			70	mL	
× Fresh Frozen Plas	ma		250	mL	$\bigcirc$
Select a fluid type		T			

#### Total Additional Fluids: 320 mL

WARNING: Giving fluids in addition to the primary resuscitation fluid may require an adjustment to the fluid infusion rate by the user, different from the rate recommended by Burn Navigator. The attending physician should be contacted to determine if the new recommended infusion rate is appropriate.



### Add FFP, 250 mL (without repeat)

_							
Room:	Training	Weight: 80k	g	TBSA: 80%	HPB: 12	12:	03
Safety	Questions						
	Is patient hypot	ensive?	$\bigcirc$	Yes	No		
	Is patient hypergly	ycemic?		Yes	O No		
	Is patient on pr	essors?		Yes	O No		
	Is patient on di	uretics?		Yes	O No		
					Back	Next	

### Accept this recommendation



If you say "Yes" to a safety question, you'll see this alert



Change new rate to **700 mL/hr** Because patient was hypotensive

### Main Screens



# **Edit Update Button**



# Fluid Update Button



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## **Enter Notes Button**



### Press "Enter" to save the note

### **Enter Checklist Button**



Room: Training	Weight:	80kg	TBSA: 70%	HPB: 9	14:20			
		Enter C	hecklist					
Enter Vitals			Check Extremities					
🗸 Systolic BP	85	mmHg	J Elevate burned	d extremit	ies 🗸			
🗸 Diastolic BP	64	mmHg	Check for Tightness					
CVP		mmHg	Check Pulses					
✓ Heart Rate	115	bpm	√Left Upper	norma	al 🔹			
Enter Bladder Pressu	re		✓ Right Upper	weak	•			
Bladder pressure		mmHg	✓ Left Lower	norma	al 🔻			
Enter Labs			/ Pight Lower	weak	•			
ScvO2		%	V Right Lower	Induit				
✓ Lactate	2.1	mg/dL						
Base excess		mEq/L						
✓ Hemoglobin	10.5	g/dL						
			C	ancel	Enter			

"Enter Checklist" shows the checklist screen

We've already done one, so just continue for now!

### Press the "Home" tab

This screen show Current Infusion rate

It shows Patient ' protocol status

Room: Training		Weight: 79kg	TBSA: 80% HPB: 16		17:18					
Home	Patient	Notes	I/O Table	Volume 🔤l/O	Graph					
Cu	rrent primary	fluid:	N	Next update due:						
(²⁄3) [	_R + (1⁄3) Albu	ımin 5%		42 minutes						
Cu	rrent infusion	rate:	Projec	cted 24 hour volum	е					
	440	mL/hr	2	2.4 mL/kg/TBSA						
	LR 293 Alb 5% 147	6 mL/hr 7 mL/hr								
<ul> <li>Adult pr</li> <li>Custom</li> <li>Monitor</li> </ul>	edictive proto protocol only	30 to 50 30 to	mL 50 mL							
Fluid Update	Stop Burn Navigator	Enter Notes	Enter Checklist	Main P Menu Re	PDF eport					

### Press the "Patient" tab

This screen lets you edit patient information

If you've mapped a more accurate TBSA, edit it here!

Room: Training	Weight: 80kg	TBSA: 80%	HPB: 12	13:29			
Home Patient	Notes	I/O Table	lume 🔤l/O	Graph			
Room number:		Minimum rate after	r 8 HPB:				
Training		1	120	mL/hr			
Weight:		Fluids given pre-Burn Navigator:					
80	kg	7	000	mL			
Size of burn (TBSA):		Urine output pre-B	urn Navigato	or:			
80	%			mL			
Height:		Burn time:	01:14 HPB	0			
in.	cm.	Software started:	10:14 HPB	9			
Confounders?	Unknown	Software ended:	:				
Elapsed time since burn	(HPB):						
12 hrs.	15 mins.						
Fluid Update Navigator	Enter Notes	Enter Checklist	Main Menu	PDF Report			

### Press the "Notes" tab

Your **notes** and system generated notes are **on < the left** 

Room: Training	Weight: 80kg	TBSA: 80%	HPB: 12	13:30	
Home Patient	Notes	I/O Table	Volume 🚟l/O	Graph	
Notes: 13:00 HPB: 12 Hypotensive: Yes Hyperglycemic: No Pressors: No Diuretics: No	Í	Checklists: 10:15 HPB: 9 Checklist Systolic BP Diastolic BP CVP Heart rate	= 85 mmHg = 64 mmHg = 115 BPM		Checklists ar
13:00 HPB: 12 Recommended rate: 680 mL/hr Entered rate: 700 mL/hr Physician: Dr. Caregiver: Nurse Rationale: Physicians direction		Bladder pressure ScvO2 Lactate Base Excess Hemoglobin Left upper pulses Right upper pulses	= mod film = mHg = % = 2.1 mg/dL = mEq/L = 10.5 g/dL = normal = weak		on the <b>right</b>
10:14 HPB: 9 Confounders: Myoglobinuria: Unknown Hyperglycemic: Unknown High blood alcohol/EtOH: Unknow	n	Right lower pulses Right lower pulses Burned extremeties Tightness checked	= normal = weak elevated		)
Fluid Update Stop Bur Navigato	n Enter r Notes	Enter Checklist	Main Menu	PDF Report	

The most recent notes and checklists are at the top **Scroll down to see older entries!** 

Each note and checklist is **<u>time-stamped</u>** with <u>hour post burn</u>!

### **Resuscitation Plan: First Note**

Room: Training	Weight: 80kg	TBSA: 80	% HPB: 12	13:30
Home Patient	Notes	I/O Table	Volume 🔤l/C	Graph
Notes: 13:00 HPB: 12 Hypotensive: Yes Hyperglycemic: No Pressors: No Diuretics: No		Checklists: 10:15 HPB: 9 Checklist Systolic BP Diastolic BP CVP Heart rate	= 85 mmHg = 64 mmHg = mmHg = 115 BPM	
13:00 HPB: 12 Recommended rate: 680 mL/hr Entered rate: 700 mL/hr Physician: Dr. Caregiver: Nurse Rationale: Physicians direction		Bladder pressure ScvO2 Lactate Base Excess Hemoglobin Left upper pulses Right upper pulses	= mmHg = % = 2.1 mg/dL = mEq/L = 10.5 g/dL = normal es = weak	
10:14 HPB: 9 Confounders: Myoglobinuria: Unknown Hyperglycemic: Unknown High blood alcohol/EtOH: Unknown		Left lower pulses Right lower pulses Burned extremet Tightness checke	= normal es = weak ies elevated ed	
Fluid Stop Burn Update Navigator	Enter Notes	Enter Checklist	Main Menu I	PDF Report

Helpful for reviews, training & quality improvement

### Press the "I/O Table" tab

Room: demo		Weigh	Weight: 75kg		TBSA: 35%		HPB: 15			01:03
Home P	atient	No	Notes		O Tabl	e 🖊	Volun	ne 🛄	l/O Gr	aph
Actual Times(edit)	ourly Averag	es								
Hours Post Burn (HPB)	) HPB	HPB1	HPB2	HPB3	HPB4	HPB5	HPB6	HPB7	HPB8	HPB9
Clock Hour	10-11	11-12	12-13	13-14	14-15	15-16	16-17	17-18	18-19	19-20
Urinary Output (mL)	12	25	25	53	45	45	49	55	54	41
Urinary Output (mL/kg/hr)		0.3	0.3	0.7	0.6	0.6	0.7	0.7	0.7	0.5
Recommended Rate (mL/hr)				245	400	330	390	340	330	271
Actual Primary Rate (mL/l	nr) 83	167	167	329	400	330	390	340	330	271
Actual Primary Volume (m	n <b>L)</b> 83	167	167	328	400	330	390	340	330	272
Lactated Ringer's	(mL) 83	167	167	328	400	330	390	340	330	272
Total Secondary Fluids (n	nL)					50	50	50	197	53
Fresh Frozen Plasma	(mL)								148	2
5% Albumin	(mL)					50	50	50	49	51
Total Other Fluids (mL)							100	100		
IV Medications	(mL)						100	100		
Total Fluids In (mL)	83	167	167	328	400	380	540	490	527	325
Total Cumulative Fluids (r	<b>nL)</b> 83	250	418	746	1,146	1,526	2,066	2,556	3,083	3,407
Hypotensive				No	No		No	No	No	No
Hyperglycemic				No	No		No	No	No	No
On Pressors				No	No		No	No	No	No
On Diuretics				No	No		No	No	No	No
	4									•

#### The I/O Table is a record of all fluid data

"Hourly Averages"
view shows you data
fitted to clock hours
e.g.:
13:00 – 14:00
14:00 – 15:00
etc.

Hours are labeled by HPB: Hour Post Burn 1 Hour Post Burn 2 etc.

<b>IPB3</b> <b>IPB3</b> 3-14 53 0.7 245 329	нрв4 14-15 45 0.6 400	HPB5 15-16 45	<b>Volum</b> <b>HPB6</b> 16-17	HPB7	I/O Gr	aph нрвэ
<b>IPB3</b> I3-14 53 0.7 245 329	HPB4 14-15 45 0.6	HPB5 15-16 45	HPB6 16-17	HPB7	HPB8	HPB9
IPB3     I       13-14     53       53     0.7       245     329	HPB4 14-15 45 0.6 400	HPB5 15-16 45	HPB6 16-17	HPB7	HPB8	HPB9
13-14 53 0.7 245 329	14-15 45 0.6 400	15-16 45	16-17	17-18		and the second of
53 0.7 245 329	45 0.6 400	45	40		18-19	19-20
0.7 245 329	0.6	0.0	49	55	54	41
245 329	400	0.6	0.7	0.7	0.7	0.5
329	400	330	390	340	330	271
	400	330	390	340	330	271
328	400	330	390	340	330	272
328	400	330	390	340	330	272
		50	50	50	197	53
					148	2
		50	50	50	49	51
			100	100		
220	400	200	100	100	507	005
328	400	380	540	490	527	325
746	1,146	1,526	2,066	2,556	3,083	3,407
No	No		No	No	No	No
No	No		No	No	No	No
No	No		No	No	No	No
No	No		No	No	No	No
1	10	No No No No Enter Checklist	No No No No Enter Checklist	No No No No No No Enter Checklist	No N	No N

# **"Actual Times"** view shows you the data **when** you entered it,

e.g.:	
13:00	
14:05	
15:03	
etc.	

The columns might not be 60 minutes!! They could be: 65 min 57 min 60 min etc.

Room: Training			Weight: 80kg T		BSA: 70%		HPB: 11		20:59		
Home	Patie	ent	No	otes		O Tabl	e 📕	Volun	ne 🛄	l/O Gr	aph
O Actual Times(edit	t) Hourly	Averages									
Actual Tim	es	13:03	14:00	15:00	16:00	17:00	18:00	19:00	20:00	(21:00)	
Urinary Output (ml	_)	150	250	50	60	65	45	40	25		
Urinary Output (ml	_/kg/hr)	0.5	3.3	0.6	0.8	0.8	0.6	0.5	0.3		
Recommended Ra	te (mL/hr)		1,050	900	770	880	750	750	850	880	
Actual Primary Rat	te (mL/hr)	500	1,050	900	770	880	750	750	850		
Actual Primary Vol	ume (mL)	2,000	998	900	770	880	750	750	850		
Lactate	d Ringer's (mL)	2,000	998	900	770	880	750	750	850		
Total Secondary Fl	uids (mL)			50					150		
р	lasma-lyte (mL)			50							
259	6 Albumin (mL)				050	050	050	050	150		
Iotal Other Fluids	(mL)				250	350	250	250	250		
T	ube Feeds (mL)				250	100	250	250	250		
Total Fluids In (mL	)	2,000	998	950	1,020	1,230	1,000	1,000	1,250		
Total Cumulative F	luids (mL)	2,000	2,998	3,948	4,968	6,198	7,198	8,198	9,448		
Hypotensive			No	No		No					
Hyperglycemic			No	No		No					
On Pressors			No	No		No					
On Diuretics			No	No		No					
Fluid Update	Sto	op Burn Ivigator		Enter Notes		Enter Checklist		Main Menu		Next Update	

### Numbers on the two views may differ!

Weight: 80kg T				
ent	Notes			
y Averages				
12:22	13:00	14:10	(15:00)	
	3	20		
0.0	0.1	0.2		
	1,050	1,260	1,510	
7,000	665	1,470		
7,000	665	1,470		
	70			
C.	70			
7,000	735	1,470	_	
7,000	7,735	9,205		
		$\sim$		
Enter Notes Checklist				

g TBSA: 70% I				
I/O Table				
HPB3	HPB4	HPB5	(HPB6)	
11-12	12-13	13-14		
	3	17		
0.0	0.1	0.2		
0	665	1,260	1,510	
1,750	1,307	1,260		
1,750	1,307	1,260		
	70			
4.750	70	4 0 0 0		
1,750	1,377	1,260		
6,358	7,735	8,995		
	Main Menu		Next Update	

### Press the "Volume" tab

Shown are <u>all</u> fluids given to the patient since time of burn

The "green mountain" of fluids grows over time

How much fluid has this patient received?



### **Resuscitation guidelines:**

- 4mL/kg/TBSA (Parkland) in yellow
- 2mL/kg/TBSA (Modified Brooke) in green



### Alert lines 250 mL/kg in 24 hours (Ivy Index) in red

200 mL/kg in 24 hours in orange



#### **Cumulative Infusion Volume**

### 24-hour fluid projections:

- Shows by HPB 10
- Based on current rate & past fluids



#### The label will turn <u>red</u> if <u>either</u>:

- ml/kg/TBSA is above 6.0, or
- ml/kg is above 250



#### The label will turn orange if:

- ml/kg/TBSA is above 5.0 and 6.0
- ml/kg is between 200 and 250



#### The label will turn <u>black</u> if both:

- ml/kg/TBSA is less than 5.0
- ml/kg is less than 200



### Press the "I/O Graph" tab



Pre-Burn Navigator fluids have transparent bars

Legend

# **Safety Features**

#### **Recommendations:**

- Won't change more than the "cap"
- Max recommended:
   2,000mL/hr or less





### Minimum rates

# **Alerts are a Safety Feature**

#### "Non-Responder" Alert

# When patients aren't responding to fluid therapy

Room: Training	Weight: 20kg	TBSA: 60%	HPB: 6	18:34	
----------------	--------------	-----------	--------	-------	--

Alert! Urinary output is not responding to fluid therapy. Check Foley catheter for obstruction and check bladder pressure. Patient may be a fluid "non-responder". Contact attending physician.



## **Checklists are also a Safety Feature**

#### Other indicators of under-resuscitation or over-resuscitation

Room: Training		Weight: 80kg	TBSA: 80%	HPB: 12 13:30
Home	Patient	Notes	I/O Table	Volume 🔤l/O Graph
Notes: 13:00 HPB: 12 Hypotensive: Yes Hyperglycemic: N Pressors: No Diuretics: No	0		Checklists: 10:15 HPB: 9 Checklist Systolic BP Diastolic BP CVP Heart rate	= 85 mmHg = 64 mmHg = mmHg = 115 BPM
13:00 HPB: 12 Recommended ra Entered rate: 700 Physician: Dr. Caregiver: Nurse Rationale: Physici	te: 680 mL/hr mL/hr ans direction		Bladder pressure ScvO2 Lactate Base Excess Hemoglobin Left upper pulses Right upper pulses	= mmHg = % = 2.1 mg/dL = mEq/L = 10.5 g/dL = normal = weak
10:14 HPB: 9 Confounders: Myoglobinuria: Ur Hyperglycemic: U High blood alcoho Edit Update	iknown nknown il/EtOH: Unknown Stop Burn Navigato	n Enter r Notes	Enter Checklist	= normal = weak s elevated Main Menu Next Update

# Keep in Mind!

Recommendations are only recommendations! Understand the whole clinical picture, communicate with the attending physician, and do what's best for the patient

### **Press "Stop Burn Navigator"**



# **Reviewing Patient Files**



"End Decision Support" button moves the patient from "Active" to "Records"

You can view, but cannot edit, past patient files

### **Frequently Asked Questions**

#### Can more than one person see a patient's file at the same time?

YES!

And any browser can do the fluid update



### FAQs

#### What if we change fluid types (e.g., LR to an albumin protocol)?

Room: Training	Weight: 20kg	TBSA: 60%	HPB: 4	18:01
New Rate				
	Previous infusio	n rate: 225 mL/hr		
Fluid type:	La	actated Ringer's		~
Recommended	Lactated Ringer's Lactated Ringer's + 5% Dextrose (3/2) LR + (1/2) Albumin 5%			
225	(½) LR + (½) Albumin 5% (⅔) LR + (⅓) FFP			
C	Normal Saline Plasma-lyte			
	Albumin 5%		Back	Enter
			Daon	Enter

On the recommendation screen,

select the new Fluid Type from the drop-down list.

The new Primary Fluid Type will be titrated up or down next hour.


## What if I change the pump rate in the middle of the hour?



## Accos Burn Navigator® Questions?



## Arcos customer support: 877.542.8025 support@arcosmedical.com