SYMPTOMS:
Patient exposed to electrical current resulting in electrical burns and/or electrocution.

ASSESSMENT and TREATMENT
ALL LEVELS

1. Verify the scene is secure – the electrical source disabled.
2. Conduct primary survey with specific focus on dysrhythmias and/or cardiac arrest.
3. Document time of injury.
4. Remove constricting clothing and jewelry since swelling is possible.
5. Obtain and monitor vital signs (pulse, respirations and blood pressure).
6. Identify all sites of burn injury.
    a. If the patient becomes part of the circuit, there will be an additional burn site near the contact with ground.
    b. Electrical burns are often full thickness and involve significant deep tissues damage.
    c. External appearance will underestimate the degree of tissue injury.
    d. Apply dry dressing to any wounds.
    e. Consider ALS for pain management as electrical injuries may be associated with significant pain.
7. Assess for associated trauma.
    a. Note if patient was thrown from contact point
    b. If patient has altered mental status, assume trauma and treat accordingly.
8. Determine characteristics of electrical source if possible: AC or DC voltage, amperage.

EMT-O

9. Consider transport to a burn center whenever possible.
10. If considerable trauma, prioritize treatment of trauma and transport accordingly.
11. Obtain ECG.

AEMT-R

12. Consider isotonic IV/IO fluid bolus 20 ml/kg normal saline.

AEMT-O

13. Consider IV/IO fluid bolus 20 ml/kg lactated Ringer’s as appropriate.

INT-R

14. Interpret ECG; anticipate atrial and/or ventricular dysrhythmias as well as cardiac arrest.