Burns & Scalds Assessment Template (BASAT)

Please complete for ALL children 0-16th birthday presenting with a BURN or SCALD injury.

Please complete ALL sections, ticking ALL answers that apply.

Section 1: History of Injury

1.1 Type of Injury
- (Please check all that apply)
- Scald
- Contact Burn
- Electrical

1.2 Location
- Home
- School
- Other:

1.3 Details of Incident
- Was anyone in the room/vicinity at the time?
- Yes
- No

1.4 What was the child doing just before the incident?
- Running/Walking
- Sitting
- Standing

1.5 Agent/Mechanism (please complete all applicable)
- Contact Burn
- Flame
- Electrical
- Other:

1.6 First Aid
- Yes
- No
- What is the explanation for the injury?

Section 2: Details of child

2.1 Is there any developmental impairment?
- N/A

2.2 Current 'best' stage of development.
- (Please check all that apply)

2.3 Details of incident
- N/A—no visible injury

Section 3: Characteristics of injury on examination

3.1 Body map—please shade distribution of injury.

- RIGHT
- LEFT

3.2 Pattern of injury (tick all that apply)
- Symmetrical (both sides of the body)
- Discrete/striking distribution
- Clearely defined margins
- Skin fold sparing
- Margin in shape of an implement
- Multiple contact burns (more than one)

3.3 Depth of Injury (tick all that apply)
- N/A

Section 4: Screening, Referrals & Outcomes

4.1 Social Service (SS) Involvement

4.2 TBSA

4.3 Any other injuries on examination?
- Yes
- No
- Details if yes:

4.4 Referrals & Outcomes

Overall Additional comments: