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.

Patient Details (or addressograph)

Hospital or NHS number:
Name:
Date of Birth:
Gender:
Post code:

Ethnicity:

Hospital or NHS number: [Field Blank]
Name: [Field Blank]
Date of Birth: [Field Blank]
Gender: [Field Blank]
Post code: [Field Blank]

Ethnicity: [Field Blank]

Section 1: History of Injury

1.1 Type of Injury
- Scalp
- Contact Burn
- Electrical
- Other:

1.2 Location
- Home
- Café/Restaurant
- 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?
- Lying Down
- Sitting
- Standing
- Running/Walking
- Being Carried/held
- N/K
- Other:

1.5 Agent/Mechanism
- Hot Drink
- Oven Hob
- Radiator
- Baking/BBQ
- Sun
- Other:

1.6 First Aid
- Was First Aid given by Parent/carer? Yes
- No

3.1 Body map—please shade distribution of injury. N/A—no visible injury

3.2 Pattern of injury
- Symmetrical (both sides of the body)
- Asymmetric/thick/thin distribution
- Clearly defined margins
- Skin fold sparing
- Margin in shape of an implement
- Multiple contact burns (more than one)

3.3 Depth of Injury
- N/A

3.4 TBSA
- %

3.5 Any other injuries on examination?
- Yes
- No

3.6 Have there been any previous ED attendance for:
- Pyrexia/Redness
- Bleeding, not burnt
- Wet, pink
- Dry, white or charred
- Burn Injury
- Other Injury

Section 2: Details of child

2.1. Is there any developmental impairment?
- N/A

2.2. Current ‘best’ stage of development.
- (Please complete for children < 3 years & if yes to Q 2.1)

2.3. Was a Child Protection referral made?
- Yes
- No

Section 3: Characteristics of injury on examination.

3.1 Body map—please shade distribution of injury. N/A—no visible injury

Section 4: Screening, Referrals & Outcomes

4.1 Social Services (if applicable)

4.2 Referrals & Outcomes (if applicable)

Overall Additional comments:

Section 5: Referrals & Outcomes

5.1 Pattern of injury
- Symmetrical (both sides of the body)
- Asymmetric/thick/thin distribution
- Clearly defined margins
- Skin fold sparing
- Margin in shape of an implement
- Multiple contact burns (more than one)

5.2 Depth of Injury
- N/A

5.3 Any other injuries on examination?
- Yes
- No

5.4 Have there been any previous ED attendance for:
- Pyrexia/Redness
- Bleeding, not burnt
- Wet, pink
- Dry, white or charred
- Burn Injury
- Other Injury

Overall Additional comments: