Annex 4. Example burns data form (EMTCC use)

EMT Burns Response Daily Data Form – October 2023	EMT
Organization Name:	
Team Name:	
Team Type:	
Contact person:	
Email address of contact person:	
Date of activity (dd/mm/yy):	
Latitude:	
Longitude:	
Region where deployed:	
City where deployed:	
Facility name (if relevant):	
Number of new consultations today:	
Number of adults consultations today:	
Number of children (< 19 years of age) today:	
New admissions today:	
Number of patients discharged today:	
Number of referrals today:	
Number of dead on arrival:	
Number of deaths within facility:	
Total patients with injuries:	
Total procedures:	
Total dressing changes:	
Escharotomies:	
Skin grafts:	
Surgical debridements:	
Other procedures:	
Other comments/concerns:	