Letter from the President

“Alone we can do so little, together we can do so much.” This quotation from Helen Keller goes to the heart of what the American Burn Association is all about. The ABA is all about its members—without the time, resourcefulness, and energy of all of our volunteers, the Association could accomplish none of its goals.

The ABA is somewhat of an anachronism among medical societies—it is a surgical society that is not dominated by surgeons. Surgeons are far outnumbered by nurses, therapists and other disciplines representing key functions on burn teams. As well it should be—the difficult work we all do could not be done by any one specialty alone.

Many topics will be covered in the upcoming annual meeting at the Sheraton Boston in March, but let me draw your attention to a couple of highlights. First, the Presidential Address on Wednesday morning, March 22, will be devoted to the burn team. My colleagues Melissa Pressman and Karen Badger have been conducting innovative research into the functioning of burn teams. We have gathered data from extensive surveys performed across the country, including in-person site visits to a few burn centers. We will show why burn centers are among the best interdisciplinary teams in medical centers, but will also focus on what we can do to improve team functioning.

Then on Thursday, March 23, the Presidential Plenary session will focus on the role of spirituality in burn care. Long a neglected topic, this session will address not only the importance of spirituality to patients and their families as they recover the impact of the burn injury, but also to caregivers as they cope with one of the most challenging fields of medicine. The keynote speaker will be Professor Wendy Cadge, Chair of the Women’s Gender & Sexuality Studies Program in the Department of Sociology at Brandeis University.

Finally, the members of the ABA will have a chance to meet our new Executive Director. Kim Hoarle comes to us from her role as Executive Director of the American Society for Healthcare Risk Management. She has extensive experience leading the organization as it provided education, professional development, networking and advocacy for its 6000+ members. She has many other years of experience with other non-profit organizations. One of the interesting items on her resume was a stint with the Peace Corps in Nigeria after obtaining her degree from Northwestern University. Please take time to introduce yourself to Kim, and ask her about Nigeria!

We look forward to seeing all of you in Boston during the week of March 20–24!

Michael Peck, MD, FACS
President, Board of Trustees 2016-2017
American Burn Association

ABA Mission Statement
The American Burn Association is dedicated to improving the lives of everyone affected by burn injury.

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DID YOU KNOW?
ABA Burn Awareness Week
Annually, first week of February.
Advanced Burn Life Support (ABLS)
Register for LIVE or Online Courses.
ABA Regional Meetings
Visit the ABA website for upcoming registration dates.

NEW!
2017 ABA MEETING APP
Event password: aba2017
1942 Cocoanut Grove Nightclub Fire

By: Jody M. Rood, RN

November 28, 2017, marks the 75th anniversary of one of the worst disasters in American history. On a busy Saturday night, fire destroyed Boston’s Cocoanut Grove Nightclub, killing 491 people. Hundreds of victims, who were able to escape, poured into Boston City Hospital and Massachusetts General Hospital (MGH). The only bit of luck bestowed on the hospital staff that night was the fact that the tragedy struck at 10:15 PM—change of shift—doubling the number of available staff to treat over 400 people brought to their facilities.

Despite this tragedy, tremendous advances in topical burn treatment, fluid resuscitation, and the use of a new antibiotic, Penicillin resulted. Prolonged exposure to smoke and the clinical effects seen in many victims was described for the first time, leading to significant advances in inhalation injury management and mechanical ventilation. Dr. Charles Lund and Dr. Newton Browder developed a diagram chart for “Estimation of the Areas of Burns” which eventually became the internationally used Lund & Browder Chart of burn surface area.

After working with over 500 survivors of the fire, Dr. Erich Lindemann and Alexandra Adler conducted some of the earliest research on post traumatic stress disorder (PTSD). An administrative decision at MGH to house burn survivors together while maintaining strict isolation along with a dedicated area for dressing changes and wound care may well be the first organized burn care unit in the United States. This one significant event spurred the medical community to begin to seek a better understanding of burn physiology and to dedicate dollars towards its research.

The reform of safety standards and enforcement of fire codes across the U.S. to prevent further tragedy is another key result of the Cocoanut Grove fire. Laws were enacted requiring outward swinging exits with clearly visible signs and a ban of flammable decorations in public establishments. The recent significant loss of lives in Oakland, CA revisits the need for a continued effort towards fire code enforcement. The fire at the Cocoanut Grove will remain one of the most important single events that shaped the framework for improvement in burn care treatment and fire prevention.

How We Do It

RECOMMENDATIONS FOR ASSESSING PTSD

By: Kristen Quinn, CMHC, CCLS, Psychosocial Program Coordinator, University of Utah Burn Center

Did you know? In 2013, the Psychological Outcomes Consensus Committee met in Washington DC to “establish quality metrics for psychological outcomes after burn injuries”. (1) The committee focused its attention on Major Depressive Disorder (MDD), acute stress disorder (ASD) and post-traumatic stress disorder (PTSD). “According to the literature, 3%-58% of burns survivors develop PTSD symptoms”. (2) Recommendations: The committee recommended “that all inpatients be screened for depressive and ASD symptoms within 48 hours of accessibility (e.g., mental status clears) and at least one time before discharge. All outpatients should be screened at their first clinic visit after discharge and as indicated thereafter”. (1) The committee also noted that “verified burn centers should demonstrate that they have a referral process in place for an appropriate intervention by a licensed mental health practitioner should the patient screen positive for depressive, ASD or PTSD symptoms.” (3)

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<table>
<thead>
<tr>
<th>Disorder</th>
<th>ASD</th>
<th>PTSD</th>
<th>Depression</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timepoint</td>
<td>Within 48 hours of accessibility</td>
<td>Once just prior to discharge, first outpatient clinic visit</td>
<td>Within 48 hours of accessibility, once just prior to discharge, first outpatient clinic visit</td>
</tr>
<tr>
<td>Who Screens</td>
<td>Bedside nurse or social work</td>
<td>Social work, mental health professional, bedside nurse</td>
<td>Bedside nurse, social work, mental health professional</td>
</tr>
<tr>
<td>Possible Measure</td>
<td>Reported sx of nightmares, flashbacks, hypervigilance or avoidance</td>
<td>4-item PTSD Scale PTSD Symptom Checklist-Civilian version, the Davidson Trauma Scale</td>
<td>PHQ-2, PHQ-9</td>
</tr>
<tr>
<td>Follow Up</td>
<td>If sx are present, refer to mental health professional</td>
<td>If above the cut off score, refer to mental health professional</td>
<td>If 2 or higher on PHQ-2 or 10 or higher on PHQ-9 then refer to mental health professional</td>
</tr>
</tbody>
</table>

In addition, some burn centers have utilized computer assisted technology (CAT) in assessing patients in the outpatient burn clinic on a number of domains. At the University of Utah, every outpatient, at every appointment is asked to complete a CAT assessment called Meval prior to being seen by the medical team. A screen for PTSD and depression is included in this tool. This allows the team to tailor appointments to the patient’s reported needs. The LIBRE project is also developing a similar multidimensional burn-specific tool that will be available soon. For children and young adults, the Burn Outcomes Questionnaire is also available to assess outcomes on various domains. Based on these assessments, a mental health referral may be initiated. Burn Centers should have a list of outpatient mental health providers that they can refer to.


DID YOU KNOW? ABA is on Twitter

› Create a Twitter account at www.twitter.com
› Find ABA by typing “ameriburn” in the search engine.
› Click “Follow” on ABA’s page. Now you will see our tweets.
› Use @ameriburn to share links with other ABA members.
› Share inspiring stories, job and CE postings, press releases, burn resources.

www.ameriburn.org
A Warm Welcome

Taking a slight departure from our typical “Member Profile,” we would like to take this opportunity to introduce the newest “member” of our team, the Executive Director of the American Burn Association, Kimberly Hoarle.

With more than 20 years of association experience, Kim brings considerable knowledge and skills to the ABA team. Her background includes strategic planning and implementation, program development, program growth, credentialing and financial management. Most recently, Kim served as Executive Director of the American Society for Healthcare Risk Management (ASHRM). For five and a half years, she led her staff of 11 to meet the educational, professional development, networking and advocacy needs of over 6,100 members. At ASHRM she also managed $4.3 million budget with 10 project areas. During her time with ASHRM, the annual conference attendance grew 13% and sponsorship grew 125%.

Previously, Kim served as Director of Member Services at the American Academy of Dermatology (AAD), a 17,000-member medical specialty society. There she managed a staff of 17 and provided oversight for membership recruitment and retention, marketing, customer service, international programs and various other membership programs. During her 11-year tenure at the AAD she also served as Executive Director for several subspecialty dermatology societies with membership of 500 to 1,500. In addition, she has held positions with the American Academy of Periodontology and the Institute for Charitable Giving. Kim is a Certified Association Executive (CAE) with an undergraduate degree from Northwestern University, and an MBA from Roosevelt University. Upon graduation from Northwestern, Kim joined the US Peace Corps and served for two years in Nigeria, West Africa.

Kim lives in Roselle, Illinois with her husband and two children. In her spare time, she enjoys travel, family activities and involvement in her community. Please make a point this week to help me welcome Kim Hoarle to our American Burn Association community.

Fire Fighter’s Corner

FIRE FIGHTER MAYDAY TRAINING GONE MOBILE!

By: Lionel Crowther, IAFF 13th District Burn Coordinator & IAFF FGS Master Instructor

There is no other call more challenging to fire ground operations than the mayday call—the unthinkable moment when a Fire Fighter’s personal safety is in imminent danger.

The Fire Ground Survival (FGS) program teaches Fire Fighters and Incident Command to be prepared for worst case scenarios. Topics covered include situational awareness, air management, communications, avoiding panic, disentanglement and upper floor escape techniques.

The program was developed as a way to ensure the highest degree of survivability when things on the fire ground go wrong. The FGS training program has spread its influence across North America. Now this training has gone mobile and strategically stationed.

The FGS two story training trailers by the International Association of Fire Fighters (IAFF) and those purchased by many Fire Departments, are equipped with train the trainer programs provided by IAFF Master Instructors, training syllabus and course materials. Going mobile allows departments to maximize the number of participants who can benefit from the training. FGS instructors across North America conduct the training from the largest departments to the smallest. This allows those departments that do not have the resources or training facilities, to get this high level of instruction.

The IAFF FGS trailer, props and Master Instructors will be at the 49th ABA Annual Meeting in Boston, MA, Hynes Convention Center Hall B. Please come and see how Mayday training has gone mobile to save Fire Fighter lives. (Fire Fighter I Course, Wednesday, 3/22, 10:00 am – 12:00 pm. All are welcome.)
ABA Updates
By: Kimberly A. Hoarle, MBA, CAE, Executive Director

For the ABA, 2016 was a year of assessment and evaluation, and 2017 will be a year for growth. The Board of Trustees realized some things would need to be done for the organization to be sustainable into the future, and they began the process of reevaluating the programs and services offered and looking for new opportunities.

During the search for a new Executive Director, priorities included experience growing membership, engaging younger members, and reaching out to new audiences. They were also looking for someone who could increase efficiency with internal processes and launch new programs.

In 2017 the ABA Board will hold a strategic planning meeting March 19 in Boston with the purpose of having a clear path forward with goals and strategies. We are considering the benefits of membership to all the different types of members, such as the value provided by JBCR. A top priority is developing a new ABA website which will launch by the summer. This will allow the ABA to more easily share information and resources with members and the public as well as encouraging members to participate in the ABA and connect with each other. We also anticipate that educational resources will expand and other opportunities may emerge through the strategic planning process.

It’s an exciting time to be part of the ABA. I’m thrilled to be part of this great organization and we’re glad you’re on the journey with us!

Survivor’s Corner
A SURVIVOR’S PERSPECTIVE
By: Edward Smith
December 15, 2016

Changes are expected throughout life, but on November 11, 2003, my life was altered forever. Not just my job or my house, but me, in my entirety. In an unfortunate accident in my garage, I burned 73% of my body. I should have died that day. Instead, I had the opportunity to learn how to actually live.

For several years alcohol had ruled my life, and it was no different on this night. My burn was the result of intoxication. I had a very long stay at the University of Utah Burn Unit, and more surgeries than I can even remember; but I lived. I went home to Boise, Idaho and couldn’t deal with the hand I was dealt. Life was not even close to the same, and never would be. I fell fast using alcohol as my only coping mechanism. The amazing staff finally got me to participate in a Burn Camp through the University of Utah. That week was a real eye-opener for me. Surrounded by survivors and family, friends and SOAR Support members I realized that I was not worthless, and my life was not over or destined to be miserable forever. It would be what I made it. I could use my burn as a way to grow and help others. I gained a whole new perspective on life and a renewed hope that I could learn to cope with this burn without self-destructing.

The last 13 years as a burn survivor have had their share of struggles; however, I have experienced more blessings than I could ever explain. I have a smart, caring and strong son who has learned to accept people regardless of appearance or circumstance. I married a woman who loves me for me. I have myself been able to become a SOAR Peer Supporter, alongside my wife. Although I cannot say that I love my burn or the physical and emotional pain it has caused, I can say that today life is better than it ever has been.

MAC: WHO ARE WE?

This newsletter is produced by the Membership Advisory Committee (MAC), made up of multidisciplinary ABA members and the Committee mission is to:

1. serve as a resource for the membership of the American Burn Association,
2. disseminate information to the membership,
3. facilitate communication between the ABA Board of Trustees and the membership regarding needs and issues, and
4. support and participate in the recruitment and retention of ABA members.

MAC Committee: Shelley Wiechman, PhD, ABPP, Chair; Kathe Conlon, RN, BSN, MSHS; Sara E. Bills, PT, DPT; Lionel Crowther, FF; Jane Faris, PharmD, BCPS; Lisa Forbes, MSc, OT; Vincent A. Gabriel, MD, MSc, FRCP (C); Elizabeth D. Hess, LCSW; Kathleen A. Hollowed, RN, BSN, MSN; Jeanie M. Leggett, RN, BSN, MA; David J. Lorello, PT, DPT; Kristen Quinn, CMHC, CCLS; Cynthia Reigart, RN, BSN; Jody M. Rood, RN; Michael Serghiou, OTR, MBA; Jill Sproul, RN, MS; Phil Tammaro, FF; Jason Woods, FF; Sandra J. Yovino, RN, MSc, CCLS; Marion H. Jordan, MD, MSc, FACS;

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Interested in submitting MAC newsletter content? Contact Maureen T. Kiley, kiley@ameriburn.org, ABA Central Office.