

## Scenario II

72 hours after admission to the Burn Unit, following initial fluid resuscitation based on the Parkland formula, the patient's vital signs have stabilized.

### Current Status:

- **Vital Signs:** BT 38.5°C, BP 110/70 mmHg, PR 110 bpm, RR 22 bpm, SpO2 98%.
- **Wounds:** The burn on the upper back has formed a firm, dry eschar. The burns on the arm and leg are slightly red, with some necrotic tissue forming. There is no pus or foul smell.

### Laboratory Results (normal range in parentheses):

- **Complete blood count:** WBC 15,000 cells/ $\mu$ l (Normal range: 4,600-10,600 cells/ $\mu$ l), PMN 80% (43.7-70.9%)
- **Blood chemistry:** Sodium 135 mEq/L (Normal: 135-145 mEq/L), Potassium: 4.5 mEq/L (Normal: 3.5-5.0 mEq/L)
- **Serum Creatinine:** 1.0 mg/dL (Normal: 0.6-1.2 mg/dL)
- **C-reactive protein (CRP):** Significantly elevated.

IV fluids and supportive care are provided. The medical team discusses the patient's physiological response, optimal wound care, and early intervention for necrotic tissue.