

Abstract

This project explored a new method of pain control during burn dressing changes. Ketamine administration will be introduced for daily burn dressing changes in ventilated patients with significant burn injuries at the Midwest Regional Burn Center. This new method emerged from the desire for decreased use of opioids for pain control during daily burn dressing changes, and the need to discontinue opioid continuous infusions sooner as opposed to maintaining a fixed, increased rate of the infusion. This method had not yet been used at the Midwest Regional Burn Center. This project provided education and information about the benefits of low-dose ketamine usage for procedural pain control, and identified the need for better pain control during daily burn dressing changes. It also identified the need to educate the nursing staff at the Midwest Regional Burn Center on ketamine administration during daily burn dressing changes.