

Burn Resuscitation and Management for Early Responders

BMExtra Group:

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Contact:

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Presentation Overview

```
graph LR; A[Background/ Problem Statement] --> B[Needs Assessment]; B --> C[Neural Net and Image Differentiation]; C --> D[Flow Chart Review]; D --> E[User Interface And Prototype]
```

Background/
Problem
Statement

Needs
Assessment

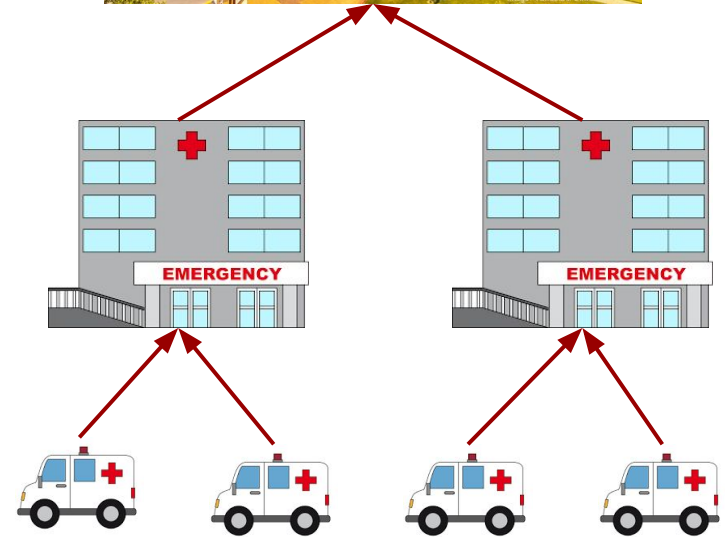
Neural Net and
Image
Differentiation

Flow
Chart
Review

User
Interface
And
Prototype

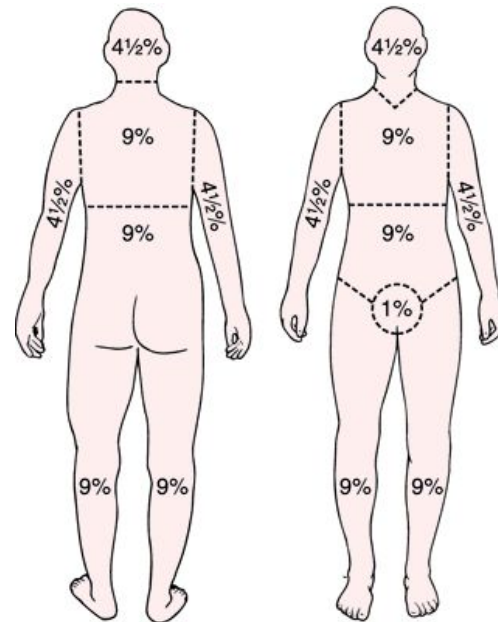
VUMC Burn ICU

- Vanderbilt Burn ICU
 - Level 1 Burn Center
 - 630 new admissions per year
 - Majority transferred from E.R.
 - Primary Contact: Dr Avinash Kumar

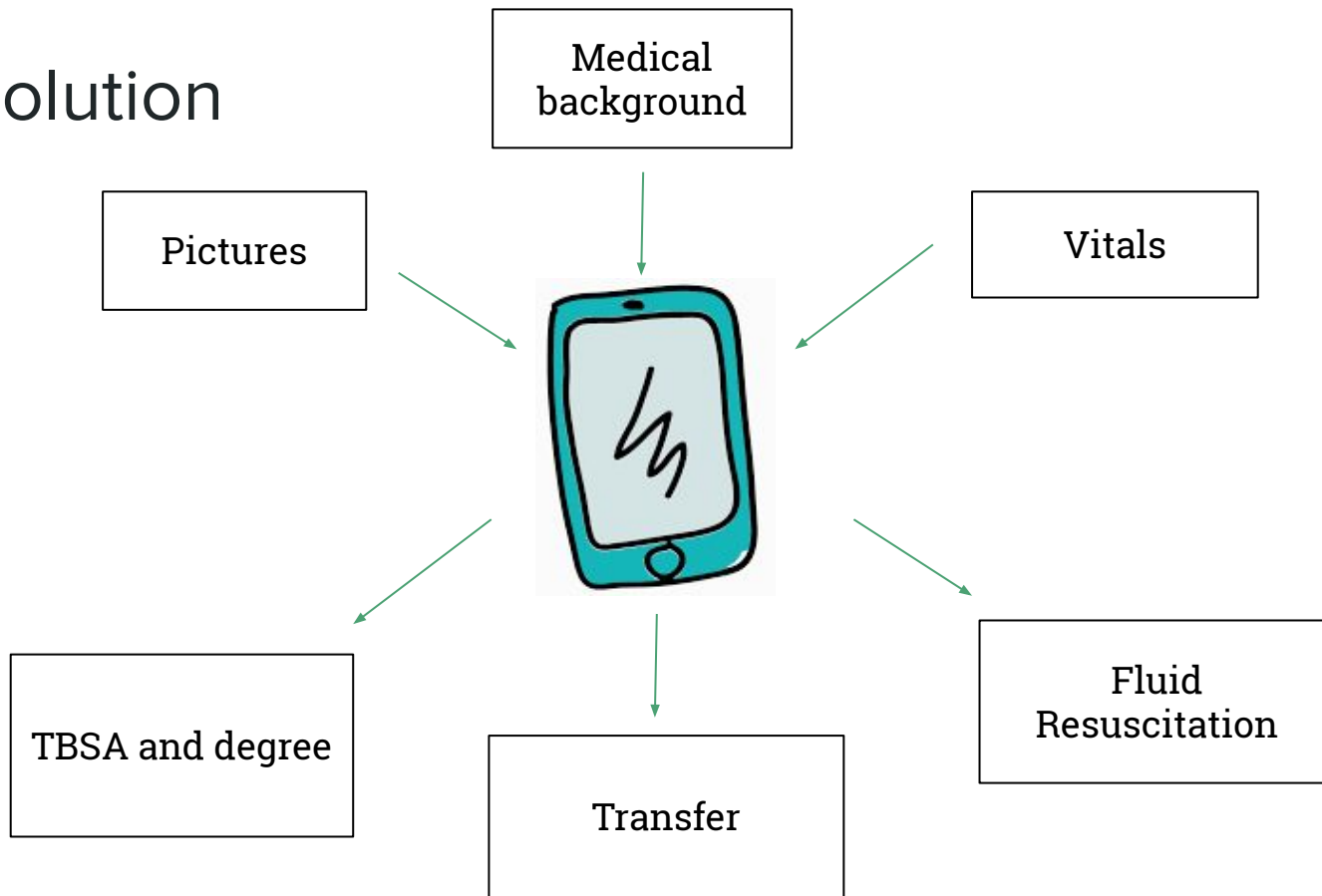


Problem Statement

- Current System:
 - Wallace Rules of Nine (Adult)
 - Rules of Eight/Palm method
- Problems:
 - Overestimation of burn percentage
 - 79% of TBSA was estimated inaccurately
 - $\frac{1}{2}$ of these burns overestimated by $\geq 5\%$
 - Overburden Burn centers with patients
 - Does not account for different body types
- **Goal: Develop system to rapidly and accurately determine TBSA**



Our Solution



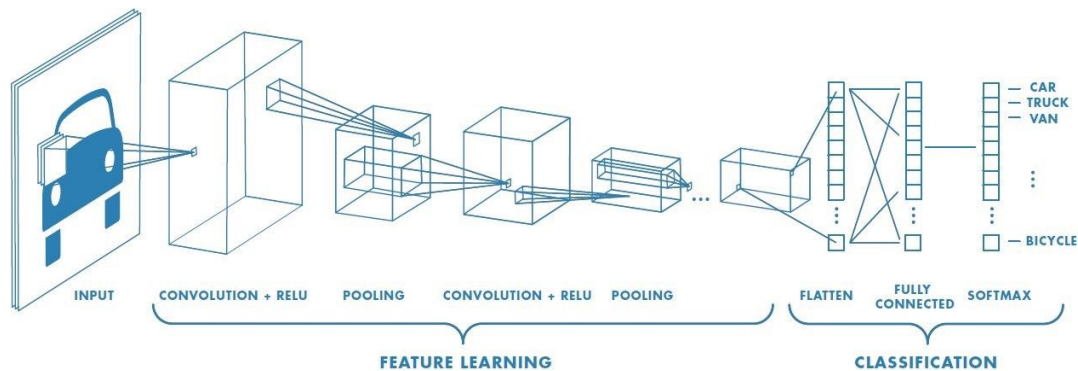
Needs Assessment

1. Infrastructure Compatibility
2. Safety
3. Patient Efficacy
4. Performance Capabilities
5. Cost Efficacy



Neural Network Model

- Convolutional Neural Network
 - 50x50x3 Images → Softmax Output



Neural Net Update

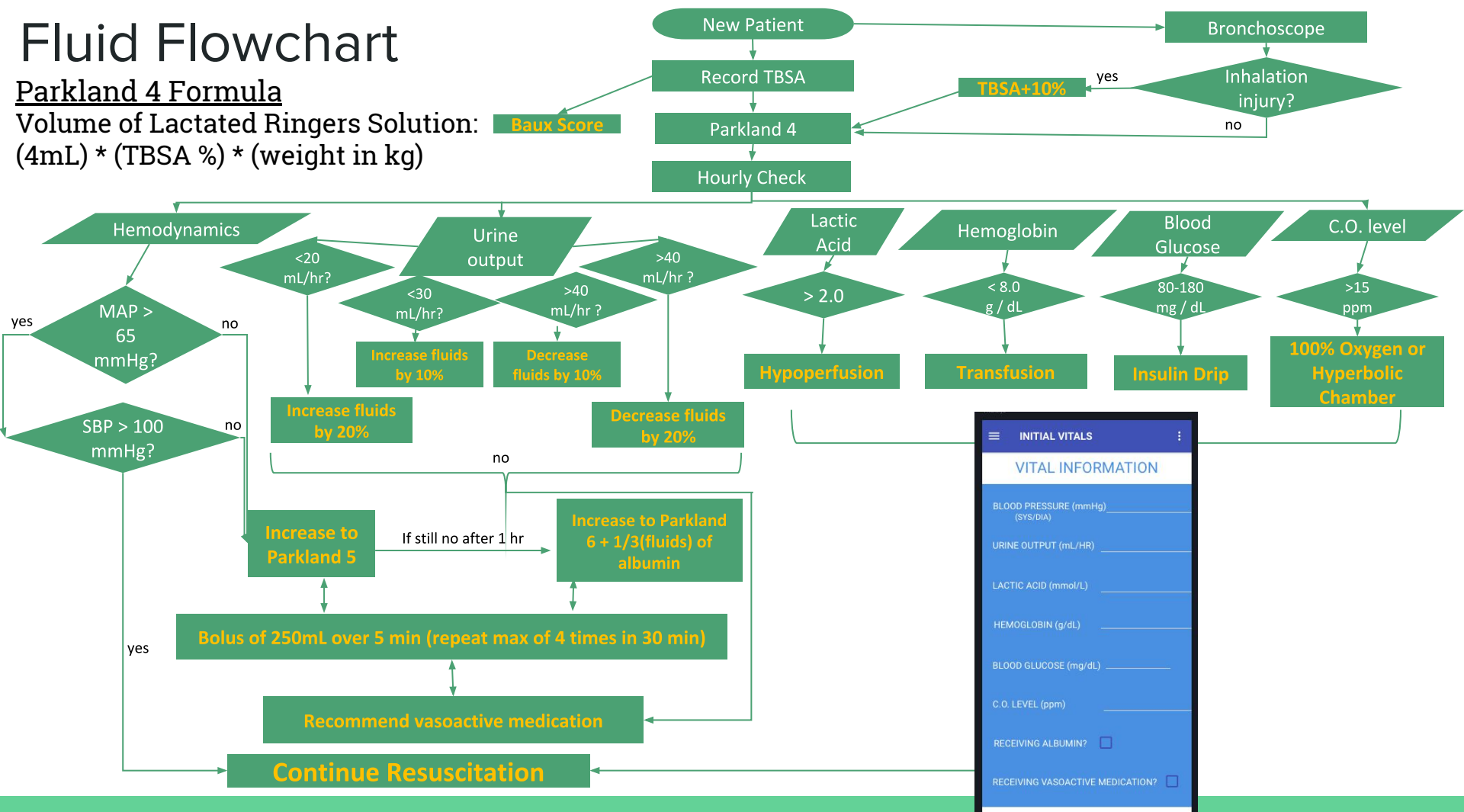
- Neural Net Trainer v2 Update
 - Through 50 Epochs with 18228 subimages:
 - Maximum Accuracy = $\sim 83\%$
 - Minimum Loss = $\sim .496$
 - Reduced Features to 100/Conv Layer
 - Saved into .pb file for mobile version
- Neural Net Predictor v3 Update
 - Input any image
 - Image is split into 50x50 subimages and classified
 - Reconstructed and colored based on classification
 - Control BSA Error: 7%-17%
 - This error translates to .3%-3% error in TBSA

Fluid Flowchart

Parkland 4 Formula

Volume of Lactated Ringers Solution:
 $(4\text{mL}) * (\text{TBSA } \%) * (\text{weight in kg})$

Baux Score



INITIAL VITALS

VITAL INFORMATION

BLOOD PRESSURE (mmHg) (SYS/DIA) _____

URINE OUTPUT (mL/HR) _____

LACTIC ACID (mmol/L) _____

HEMOGLOBIN (g/dL) _____

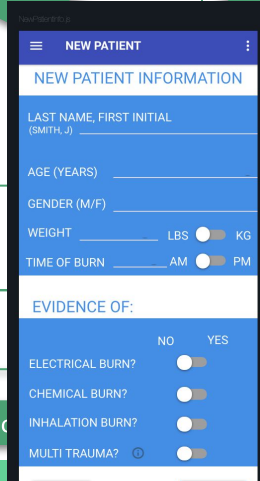
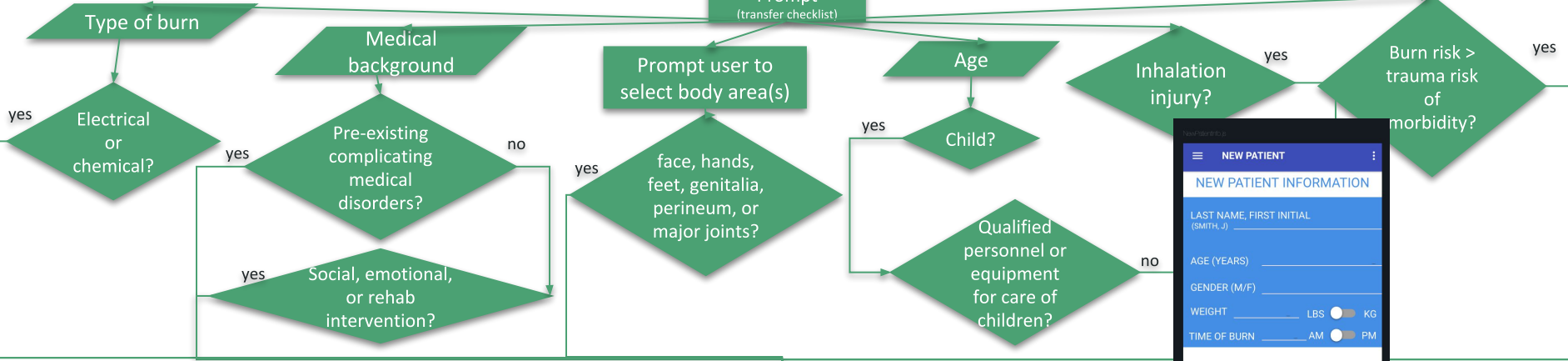
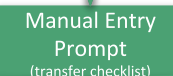
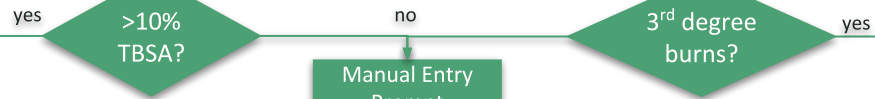
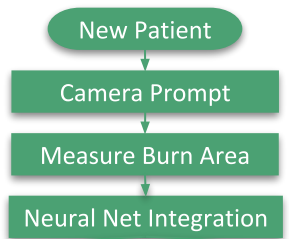
BLOOD GLUCOSE (mg/dL) _____

C.O. LEVEL (ppm) _____

RECEIVING ALBUMIN?

RECEIVING VASOACTIVE MEDICATION?

Flow Chart for Transfer

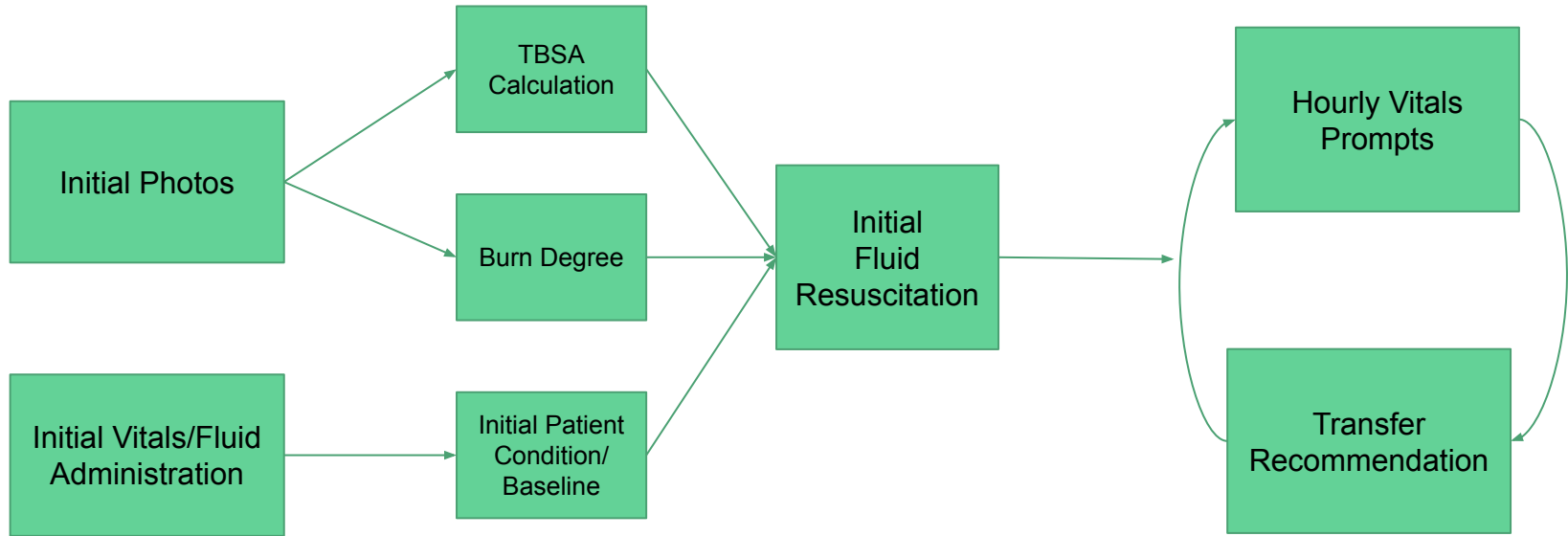


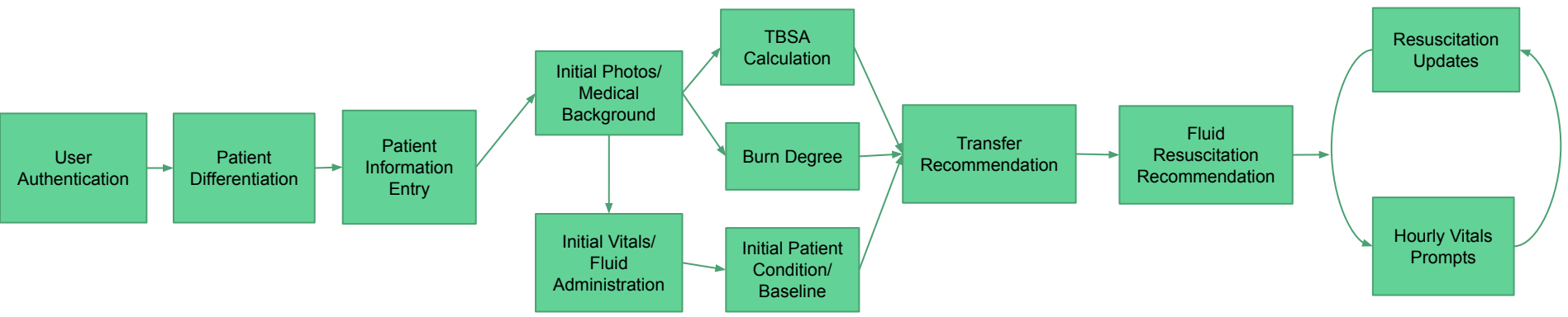
User Interface - Beginning Prototype

User Interface - Basic Design Ideas



User Interface - Basic Design Ideas





NEW PATIENT

NEW PATIENT INFORMATION

LAST NAME, FIRST INITIAL
SMITH, J

AGE (YEARS)

GENDER (M/F)

WEIGHT LBS KG

TIME OF BURN AM PM

EVIDENCE OF:

INITIAL INPUTS

FLUID INFORMATION

FLUID DELIVERED SINCE ADMISSION (ML)

LOG IN

Create an Account

Disclaimer: The Burn Resuscitation Network is not a diagnostic tool to replace physician judgement. Analysis is purely recommendational.

BODY PARTS

TAKE CLOSE-UPS OF ALL BURNED BODY PARTS: ⓘ

HEAD/NECK

RIGHT ARM

LEFT ARM

CHEST

GENITALS

RIGHT LEG

LEFT LEG

BACK

FINISHED

BODY PART PICTURE

BODY PART

FRONT BACK

DELETE CAPTURE

BLANCHES WITH PRESSURE? YES NO

BACK FRONT AND BACK COMPLETED

INITIAL VITALS

VITAL INFORMATION

BLOOD PRESSURE (mmHg) (SYS/DIA)

URINE OUTPUT (mL/HR)

LACTIC ACID (mmol/L)

HEMOGLOBIN (g/dL)

BLOOD GLUCOSE (mg/dL)

C.O. LEVEL (ppm)

RECEIVING ALBUMIN?

RECEIVING VASOACTIVE MEDICATION?

BACK CONTINUE TO CHART

SOLUTION

TOTAL BURN SURFACE AREA (TBSA)

BURN DEGREE

FLUID RESUSCITATION RECOMMENDATION

TRANSFER RECOMMENDED

BACK ADD VITALS



Burn Resuscitation Network

USERNAME



PASSWORD



LOG IN

Disclaimer: The Burn Resuscitation Network is not a diagnostic tool to replace physician judgement. Analysis is purely recommendational.

Create an Account

CREATE AN ACCOUNT

FIRST NAME

LAST NAME

MEDICAL POSITION? (MD, RN, EMS, OTHER)

CITY, STATE (NASHVILLE, TN)

CHOOSE USERNAME

CHOOSE PASSWORD



RETYPE PASSWORD



CREATE AN ACCOUNT

BACK

MENU

CHOOSE PATIENT

NEW PATIENT

EXISTING PATIENT

INITIAL INPUTS

BODY PARTS

INITIAL VITALS

SOLUTION

CHART

UPDATE VITALS

MORE INFO

BACK

LOG OUT



PATIENT



NEW PATIENT

EXISTING PATIENT

NEW PATIENT INFORMATION

LAST NAME, FIRST INITIAL
(SMITH, J) _____

AGE (YEARS) _____

GENDER (M/F) _____

WEIGHT _____ LBS KG

TIME OF BURN _____ AM PM

EVIDENCE OF:

- | | NO | YES |
|------------------|--------------------------|--------------------------|
| ELECTRICAL BURN? | <input type="checkbox"/> | <input type="checkbox"/> |
| CHEMICAL BURN? | <input type="checkbox"/> | <input type="checkbox"/> |
| INHALATION BURN? | <input type="checkbox"/> | <input type="checkbox"/> |
| MULTI TRAUMA? ⓘ | <input type="checkbox"/> | <input type="checkbox"/> |

BACK

CONTINUE

WHAT IS MULTI TRAUMA?

MULTI TRAUMA, OR POLYTRAUMA USUALLY INVOLVES SEVERE INJURY TO TWO OR MORE BODY REGIONS AND/OR ORGANS TYPICALLY DEFINED AS AS HAVING AN INJURY SEVERITY SCORE (ISS) > 15

BACK

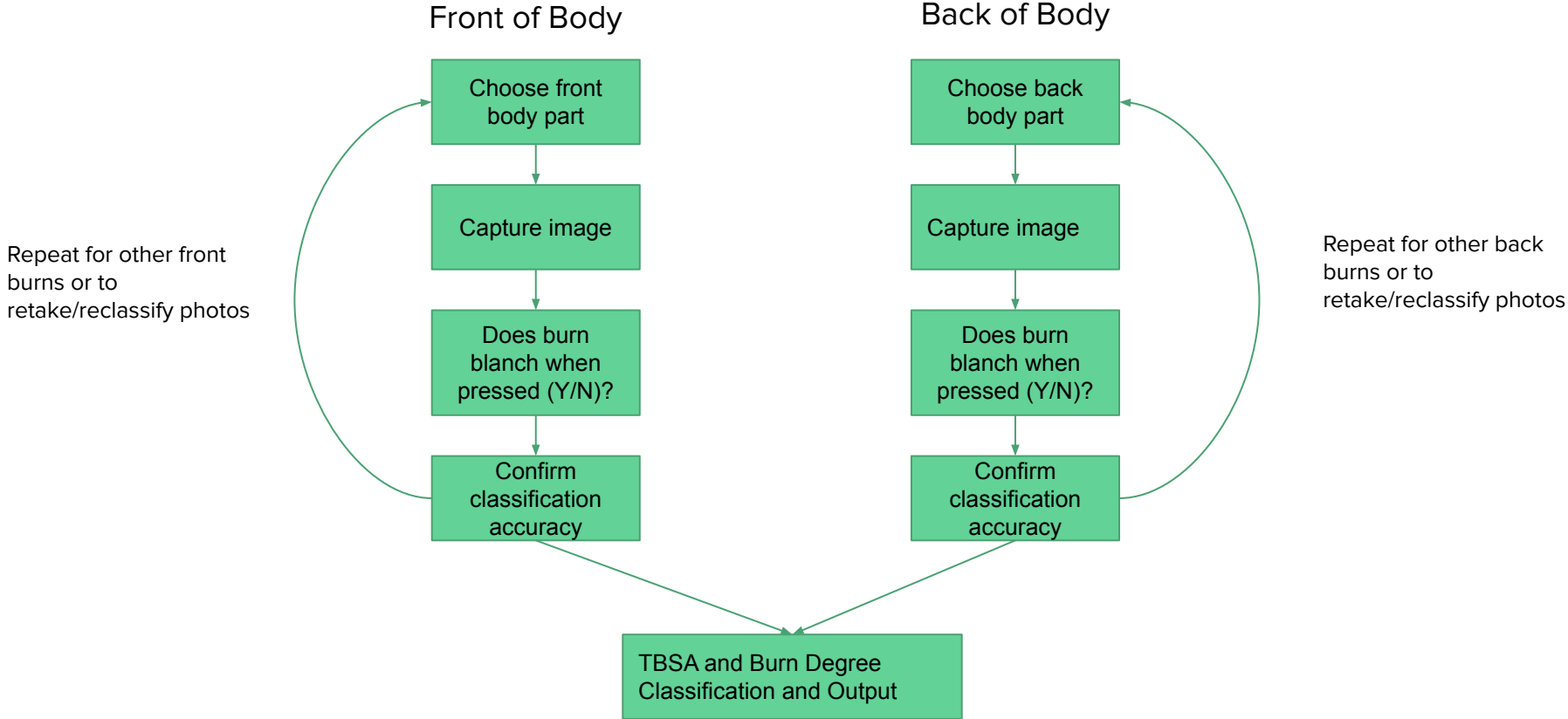
FLUID INFORMATION

FLUID DELIVERED SINCE ADMISSION (ML)

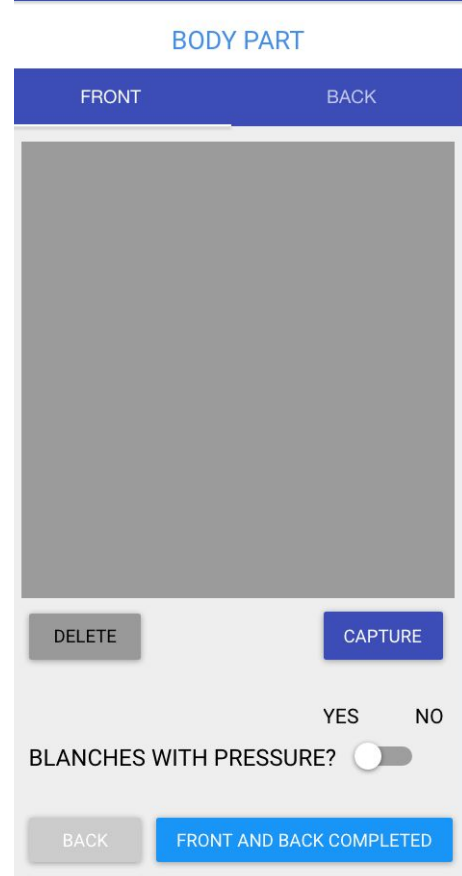
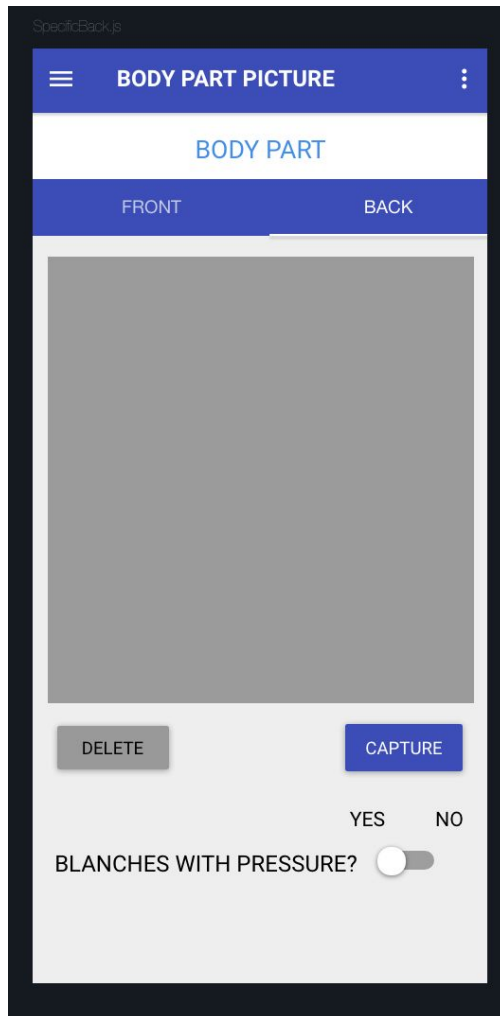
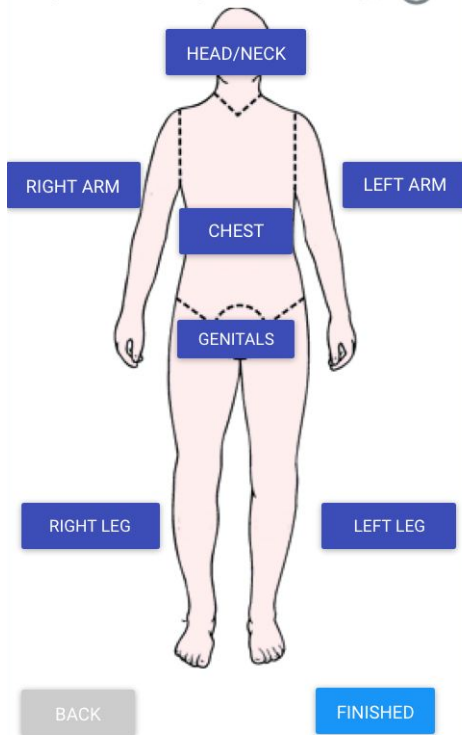
BACK

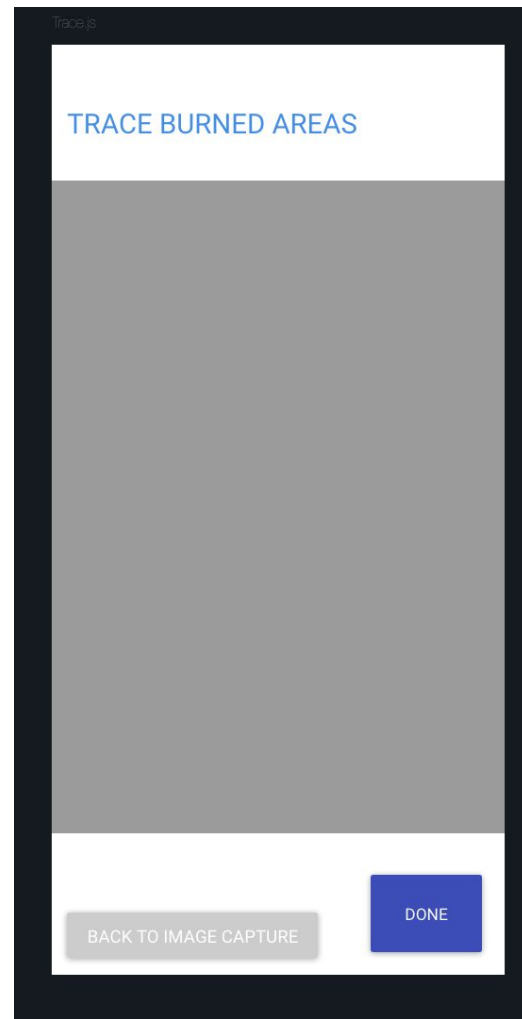
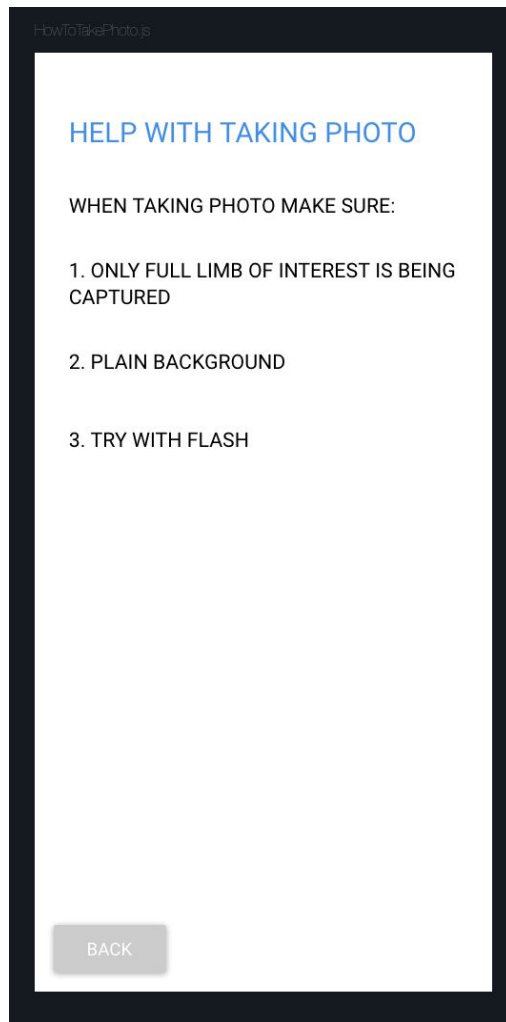
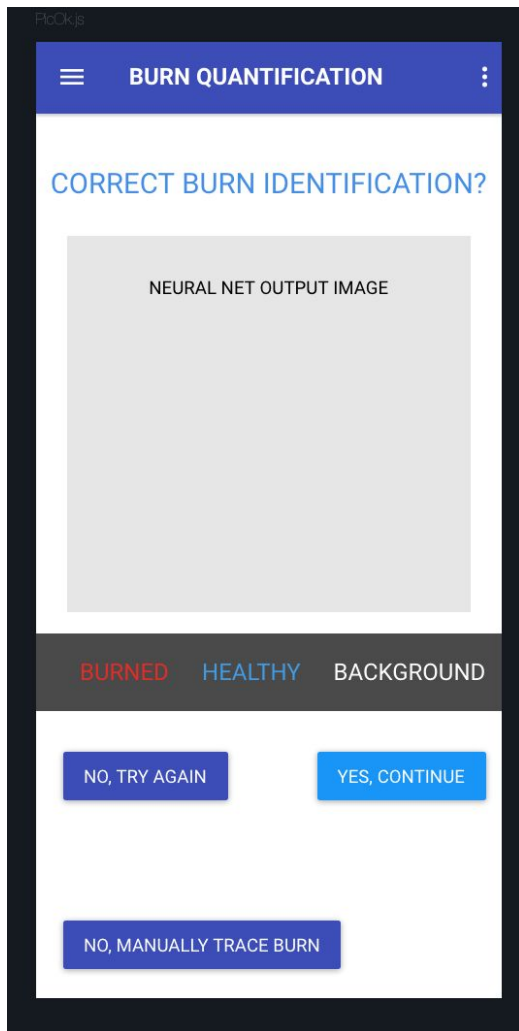
CONTINUE TO PICTURES

Breakdown of Key Branches - Image Capture



TAKE CLOSE-UPS OF ALL
BURNED BODY PARTS: ⓘ





☰ INITIAL VITALS ⋮

VITAL INFORMATION

BLOOD PRESSURE (mmHg) (SYS/DIA) _____

URINE OUTPUT (mL/HR) _____

LACTIC ACID (mmol/L) _____

HEMOGLOBIN (g/dL) _____

BLOOD GLUCOSE (mg/dL) _____

C.O. LEVEL (ppm) _____

RECEIVING ALBUMIN?

RECEIVING VASOACTIVE MEDICATION?

BACK CONTINUE TO CHART

☰ SOLUTION ⋮

TOTAL BURN SURFACE AREA (TBSA) _____

BURN DEGREE _____

FLUID RESUCITATION RECOMMENDATION _____ ⓘ

TRANSFER RECOMMENDED _____ ⓘ

BACK ADD VITALS

WhyFluids

INITIAL FLUID EXPLANATION

BASED ON VITALS, PARKLAND ___ WAS USED AND PREVIOUS FLUIDS WERE TAKEN INTO ACCOUNT.

Volume of Ringer's lactate =
4 mL x % BSA x weight (kg)

```

graph TD
    A["Volume of Ringer's lactate =  
4 mL x % BSA x weight (kg)"] -- 1/2 --> B["First 8 hours"]
    A -- 1/2 --> C["Next 16 hours"]
  
```

PARKLAND 4 FORMULA IS SHOWN ABOVE.
PARKLAND 5 USES 5 ML AND PARKLAND 6 USES 6 ML IN THE FORMULA.

BACK

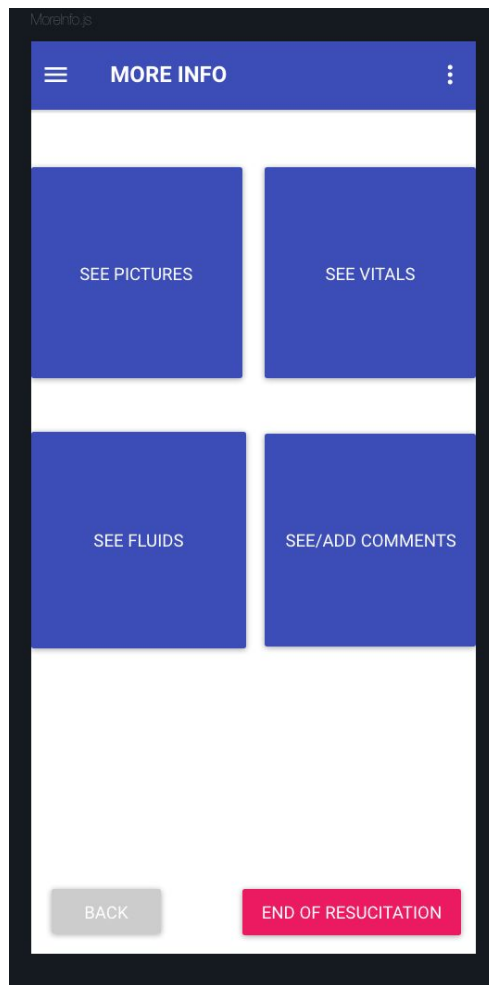
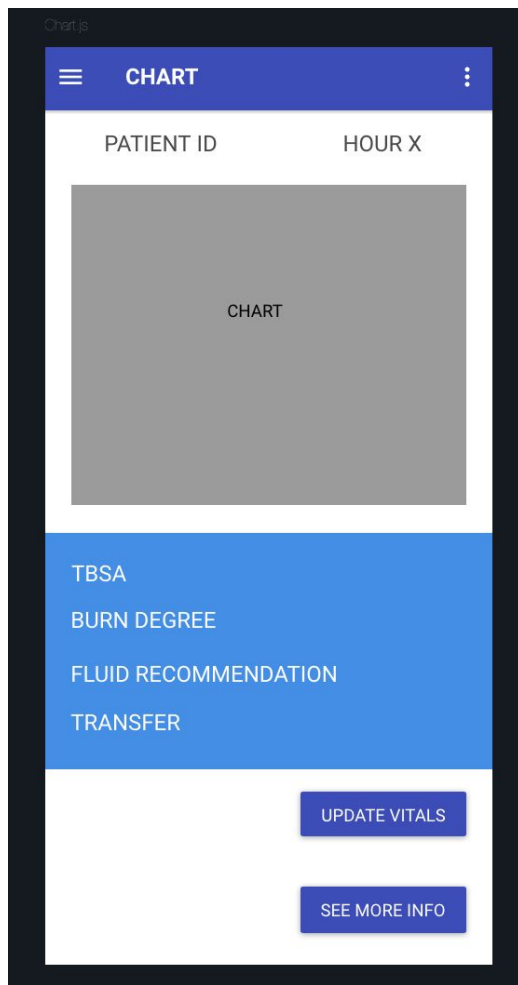
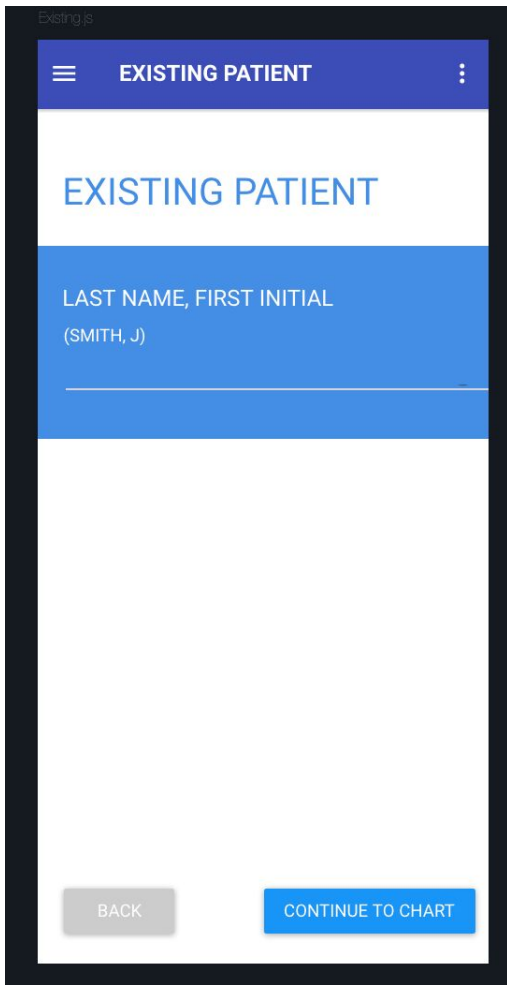
WhyTransfer

TRANSFER EXPLANATION

BASED ON THE FOLLOWING CRITERIA TRANSFER WAS/ WAS NOT RECOMMENDED.

- CHEMICAL AND ELECTRICAL BURN
- INHALATION BURN
- TBSA >20%
- CHILD OR ELDERLY PATIENT
- MULTI-TRAUMA

BACK



FLUID HISTORY

VOLUME (ML) HOUR X

VOLUME (ML) HOUR X

VOLUME (ML) HOUR X

BACK

VITAL HISTORY

CHOOSE HOUR

T-1 HOUR

T-2 HOUR

BACK

VITAL HISTORY FOR HOUR X

BLOOD PRESSURE (mmHg) _____
(SYS/DIA)

URINE OUTPUT (mL/HR) _____

LACTIC ACID (mmol/L) _____

HEMOGLOBIN (g/dL) _____

BLOOD GLUCOSE (mg/dL) _____

C.O. LEVEL (ppm) _____

RECEIVING ALBUMIN? RECEIVING VASOACTIVE MEDICATION?

BACK

PAST PICTURES

PAST PICTURES HERE

BACK

PAST COMMENTS

BEGINNING OF COMMENT... HOUR X

BEGINNING OF COMMENT... HOUR X

BEGINNING OF COMMENT... HOUR X

ADD NEW COMMENT



ADD

BACK

NOTE: CLICKING END RESUSCITATION
WILL DELETE ALL INFORMATION ON
THIS
PATIENT AFTER 48 HOURS IN THIS
APPLICATION

ARE YOU SURE YOU WANT TO END
THIS PATIENT'S RESUSCITATION?

YES, END AND EXPORT TO PDF

NO, BACK



UPDATE VITALS



UPDATE VITALS FOR THIS HOUR

BLOOD PRESSURE (mmHg)
(SYS/DIA)

URINE OUTPUT (mL/HR)

LACTIC ACID (mmol/L)

HEMOGLOBIN (g/dL)

BLOOD GLUCOSE (mg/dL)

C.O. LEVEL (ppm)

RECEIVING ALBUMIN?

RECEIVING VASOACTIVE MEDICATION?

NO, BACK

UPDATE

FLUID RECOMMENDATION

PAST RECOMMENDATION (mL/HR)

UPDATED RECOMMENDATION (mL/HR)

AGREE AND UPDATE



DISAGREE?

ENTER IN NEW FLUID AMOUNT (mL/HR)



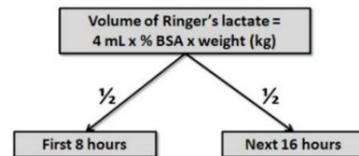
UPDATE

BACK

FLUID EXPLANATION

FLUID AMOUNT HAS INCREASED/
DECREASED BECAUSE BLOOD PRESSURE
HAS
INCREASED/ DECREASED AND URINE
OUTPUT HAS INCREASED/ DECREASED.

BASED ON VITALS, PARKLAND __ WAS USED.



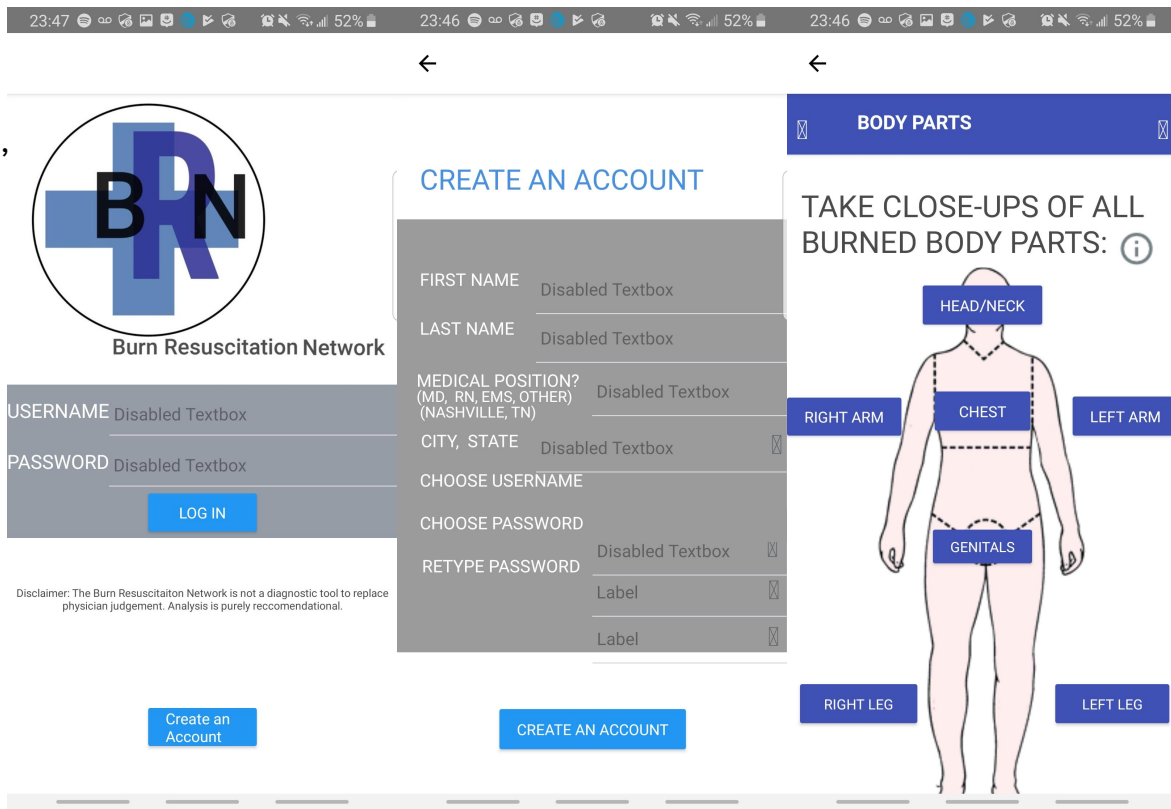
PARKLAND 4 FORMULA IS SHOWN ABOVE.
PARKLAND 5 USES 5 ML AND PARKLAND
6 USES 6 ML IN THE FORMULA.

BACK

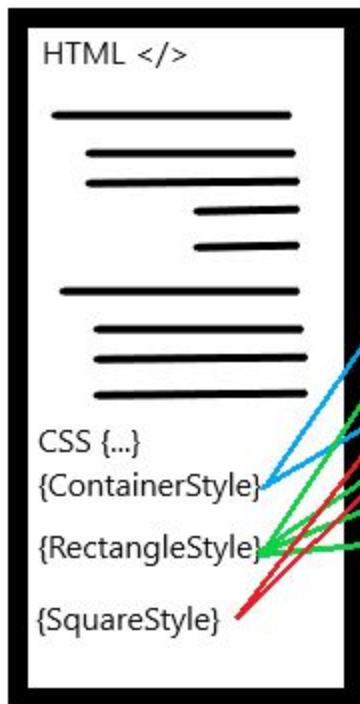

```
1 import React, { Component } from "react";
2 import Button117 from "../symbols/button117";
3 import { Center } from "@builderx/utils";
4 import Button612 from "../symbols/button612";
5 import { View, StyleSheet, Text } from "react-native";
6
7 export default class EndRes extends Component {
8   render() {
9     return (
10       <View style={styles.root}>
11         <Center vertical>
12           <View style={styles.rect} />
13         </Center>
14         <Center horizontal>
15           <Button117 style={styles.button117} />
```

UI Deployment

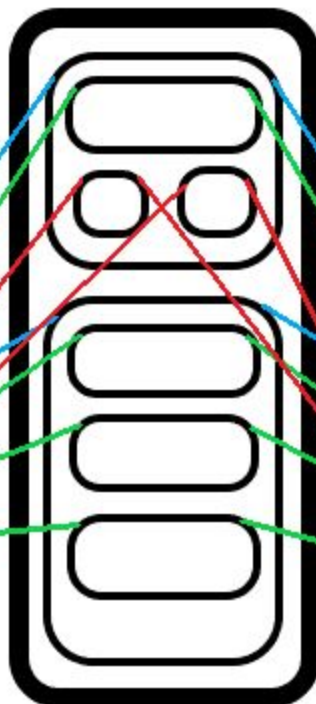
- Deployed BuilderX React Native code to Android
 - BuilderX export had styling, formatting, maintainability issues
 - Due to 'component' redundancy and inflexible layout specification
- Will adjust UI code over Spring Break to fix existing issues and add Camera, NN, and TBSA algorithm



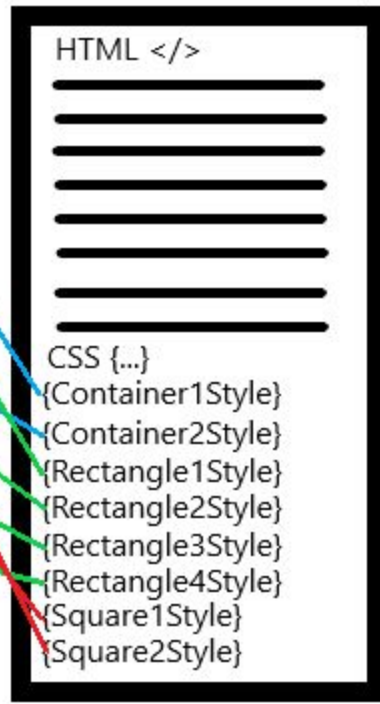
'Maintainable' React Native



App on Android



BuilderX React Native Output



```
export default class SecurityAuth extends Component {
  render() {
    return (
      <View style={styles.root}>
        <Image
          source={require("../assets/a3d677392ee343199bc8e0bfbbba7037f_(1).jpeg")}
          style={styles.logo}
        />
        <View style={{...styles.gray, flex: 0.6, flexDirection: 'column', justifyContent: 'flex-start', alignItems: 'stretch'}} >
          <View style={{flex: 1, flexDirection: 'row', alignItems: 'center'}}>
            <Text style={styles.text}>USERNAME</Text>
            <DisabledTextbox style={styles.DisabledTextbox} />
          </View>
          <View style={{flex: 1, flexDirection: 'row', alignItems: 'center'}}>
            <Text style={styles.text}>PASSWORD</Text>
            <DisabledTextbox style={styles.DisabledTextbox} />
          </View>
          <View style={{flex: 1, flexDirection: 'row', justifyContent: 'center', alignItems: 'center'}}>
            <Button101
              style={{...styles.button}}
              root={() => {
                this.props.navigation.push("Patient");
              }}
              onPress={() => {
                this.props.navigation.push("Patient");
              }}
            />
          </View>
        </View>
      </View>
    );
  }
}
```

Validation Metrics

- Sensitivity (Burn Images)
- Specificity (Background and Healthy Skin)
- Similarity Metric
 - Compare the “masks” created by code and doctors
- Determine effect on patient care
 - Average time
 - Compare fluid recommendations

Next Steps

- Deployment into Application
 - UI
 - Neural Net
 - Flowchart Decisions
 - Algorithms
- Validation/Testing

