



Call for Participation for the ISBI Burn Center Assessment Program!

ISBI Burn Center Assessment Program

ISBI is pleased to announce a new initiative called the ISBI Burn Center Assessment Program which we hope will improve burn care in low- and middle-income countries (LMIC). This program will increase the engagement of ISBI in these countries and is consistent with ISBI's mission.

The Program: This program will visit burn centers, assess their resources and structures, provide a burn center assessment and create a roadmap for the center to improve the care their patients receive. The assessment process will be very inclusive, and it is hoped that all centers will be able to join the ISBI Burn Assessment Program on an ongoing basis (Full details of the program are on the ISBI website). The cost of travel and lodging for these trips would be borne by ISBI.

Process: ISBI will be accepting applications over the next 3 months for centers who would like to participate. The ISBI selection committee will review the applications and select burn centers to visit in 2025. The program will visit up to 6 burn centers a year. ISBI will try to visit burn centers in one country or one geographic region at a time to reduce travel burden and expense of the ISBI visiting teams.

Who should apply: Burn centers in low and middle resource countries who want to collaborate with ISBI to create a roadmap for change in their burn center. You do not need to be an ISBI member to apply or participate in this program, but ISBI membership is encouraged. ([Join the Society | International Society for Burns Injuries \(worldburn.org\)](https://worldburn.org))

Deadline for applications: 1 November 2025, 5PM CST US

Application materials: on the next page (page 2)



Application for the ISBI Burn Center Assessment Program

Date of Application: _____

Contact person for the Burn Center:

Name: _____

Current Address: _____

Email address: _____

Role in Burn Center: Rehab / Nurse / Physician / Administrator / Other: ____

Name of Burn Center: _____

Location of Burn Center: _____

Burn Center Leadership

Name of Burn Center Director (MD): _____

Name of Lead/Head Nurse of the Burn Center: _____

Name of Lead Rehabilitation Specialist in the Burn Center: _____

Description of hospital

Type of hospital: private / social security hospital / public / other: _____

Size of hospital (number of inpatient beds): _____

Description of burn center:

The center cares for: ADULTS ONLY PEDIATRIC ONLY ADULTS AND PEDIATRICS

Number of patients admitted to the hospital inpatient service annually for the last 3 years:

ALL BURN ADMISSIONS	<u>Pediatric (<= 16 years old)</u>	<u>Adults (>16 years old)</u>
2023		
2024		
2025 (year to date)		

Number of burn PROCEDURES AND OPERATIONS performed in the operating room in last 3 years:

	<u>Pediatric (<= 16 years old)</u>	<u>Adults (>16 years old)</u>
2023		
2024		
2025 (year to date)		

Number of patients seen in the outpatient clinics in last 3 years:

	<u>Pediatric (<= 16 years old)</u>	<u>Adults (>16 years old)</u>
2023		
2024		
2025 (year to date)		

Grid of age and burn size of all patients admitted over last 12 months (or last complete year):

Dates of data in table below: From: _____ To: _____

	0 - 14 years	15 - 55 years	56 - 75 years	>75 years
0-10% TBSA				
11-20% TBSA				
21-40% TBSA				
40-60% TBSA				
> 60% TBSA				

Does your burn center have a database where you collect information on your burn patients (i.e. age, burn size, number of surgeries, live/die)? YES ___ NO ___

It is helpful to have the support from a local NGO (non-profit entity) to support the burn center. Does your burn center have a local NGO that supports your center? YES ___ NO ___

If yes what is name of NGO: _____

Please attach a letter of support from the NGO for the ISBI visit.

It is helpful to have the support from the hospital director for this visit. Please attach to this application a letter of support from the Hospital Director for the ISBI visit.

It is helpful to have the support from the National Burn Society for this visit. Please attach to this application a letter of support from an officer of the National Burn Society for the ISBI visit.

It is helpful to have the support from the country's Minister of Health for this visit. Please attach to this application a letter of support from the Minister of Health for the ISBI visit.

Have other societies and/or NGO(s) visited your burn center in the last 5 years? YES ___ NO ___

If so, please list the organization (s): _____

Why does your burn center want to apply for the ISBI Burn Center Assessment Program (250 words or less):

If your burn center is selected for the ISBI Burn Center Assessment Program, there will be a fee / charge for the ISBI visit and participation in the program (\$200 US Dollars for Upper Middle-Income Country, \$100 US Dollars for Lower Middle Income Country, \$50 US Dollars for Low Income Country). Will your center be able to pay this fee? YES ___ NO ___

If your burn center is selected for the ISBI Burn Center Assessment Program, an ISBI Assessment Team will visit your center. The cost of travel and the hotel accommodations will be paid for by ISBI, but ISBI will need your help with the following things:

1. Is there a local hotel that can accommodate 3-4 ISBI personnel for 1-2 night stay? YES ___ NO ___
2. Local transportation during the visit will be arranged by the burn center (you), do you have the ability to arrange local transportation? YES ___ NO ___
3. Does your center have a local conference room where lectures can be given – AV equipment? YES ___ NO ___

If your burn center is selected for the ISBI Burn Center Assessment Program, the ISBI Assessment Team will be in contact with your physician, nursing and rehabilitation leadership every 6 months for the following 2 years. Does your center have the ability to conduct ZOOM (or equivalent) calls? YES ___ NO ___

The Burn Center leadership team has read the materials concerning the ISBI Assessment Program and feel that their center is in a position to try to improve their burn center YES ___ NO ___

Thank you for your interest in the ISBI Burn Center Assessment Program.

Once you complete this application please cut and paste it into an email and send it to:

office@worldburn.org

ATTENTION: Michael Serghiou, ISBI Executive Director