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# Steven Johnson Syndrome/Toxic Epidermal Necrolysis Management in the Pediatric Population: The Surgeon's Perspective

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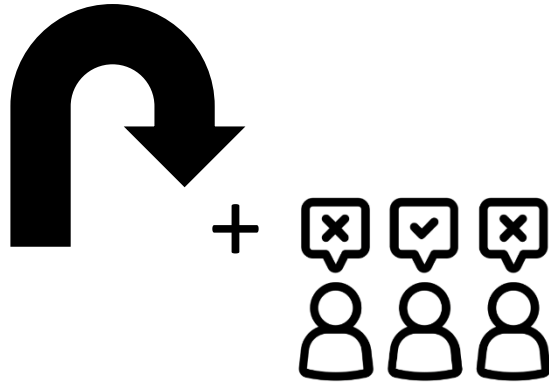
Children's Mercy Hospital

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# Introduction/Methodology



- 36 item survey
- 5 **pediatric-only** burn centers
- 6 pediatric surgeons responded



- Admitting service
- Wound management
- Debridement practices
- Types of dressings

# Results

- High variability in the admitting services and debridement practices
- Burn consults are obtained at least within 24 hours
- All institutions use antibiotic ointment and occlusive gauze as a primary dressing.

# Conclusion

- SJS/TEN is a rare but serious disease in children with wide variations in practices and limited data on wound management
- Standardized protocols and guidelines may aid in improving outcomes
- Next step: Multi institutional retrospective review

