



UNC
NORTH CAROLINA
JAYCEE BURN CENTER

Bruce A. Cairns, MD
John Stackhouse Distinguished Professor of Surgery
Director North Carolina Jaycee Burn Center
University of North Carolina- Chapel Hill

UNC- Chapel Hill - A Tradition of Excellence

- Oldest Public University in Nation (1796)
- Most Rhodes Scholarships for public university
- “Our goal is to reinvent the global, public research University”- Chancellor Carol L. Folt



NOBEL PRIZES | ALFRED NOBEL | PRIZE AWARDERS | NOMINATION | PRIZE ANNOUNCEMENTS

By Year | Nobel Prize in Physics | Nobel Prize in Chemistry | **Nobel Prize in Medicine**

Medicine



Oliver Smithies
The Nobel Prize in Physiology or Medicine 2007

UNC Department of Surgery

- Home
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- Dr. Aaron Garrison

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Surgery-Mentored Student Wins Rhodes Scholarship



On Nov. 29, UNC senior Elisabeth "Lisette" Yorke, of Nova Scotia, Canada, was selected as a Rhodes Scholar. The biology major will have the opportunity to study at Oxford University for the next several years.

Yorke has volunteered with the NC Jaycee Burn Center since early in 2007. She works with injured patients and participates in burn research under the mentorship of Dr. Bruce Cairns, Associate Professor of Surgery and Director of the Burn Center. Dr. Cairns was honored to recommend Yorke to the Rhodes Scholarship Selection Committee.

Additional details are available at the [UNC News site](#).

SLIDE SHOW See All Slide Shows Page 2 of 12

10 Best Public College Values, 2013

1. University of North Carolina at Chapel Hill

Undergrad enrollment: 18,430
Student-faculty ratio: 14:1
Graduation rate: 4-yr., 77%; 6-yr., 90%
Annual in-state cost: \$18,609
Annual out-of-state cost: \$39,361
Avg. debt at graduation: \$17,525

UNC Chapel Hill is our number-one public college for the 12th time. Why is it a perennial Kiplinger winner? Credit its stellar academics, reasonable sticker price and generous financial aid. UNC's 77% four-year graduation rate trounces the 31% national average, and its 31% admission rate (the percentage of applicants who are accepted out of those who apply) makes it one of the most competitive schools on our list. Non-Carolinians can also take advantage of a superior value – UNC is number two in our out-of-state rankings, behind SUNY Geneseo.

The Princeton Review
Your Goals. Our Expertise.

College Graduate Business Law Medical Find Schools Search

The Princeton Review's 2014 Best Value Colleges

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 - Press Release / Reporter Resources

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USA TODAY
Check out our bookstore for titles on this subject



We chose our Best Value Colleges for 2014 based on data we collected from Fall 2012 through Fall 2013 via our institutional and student surveys. Broadly speaking, we weighted more than 30 data points covering academics, costs and financial aid.

We also considered the percentage of graduating seniors who borrowed from any loan program and the average debt those students had at graduation. For more info, read our release or learn more about our best value colleges methodology.

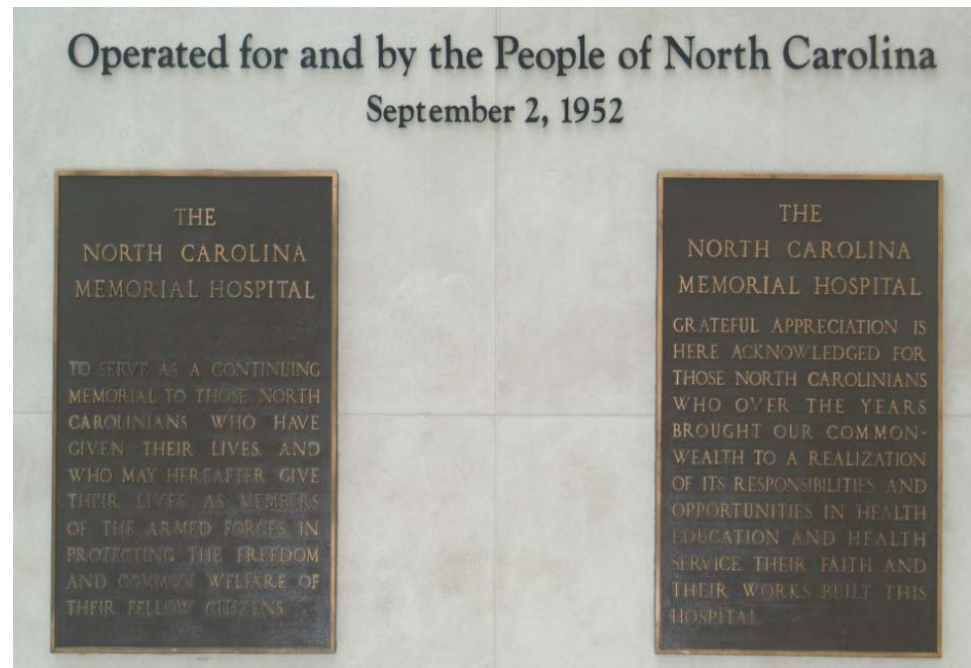
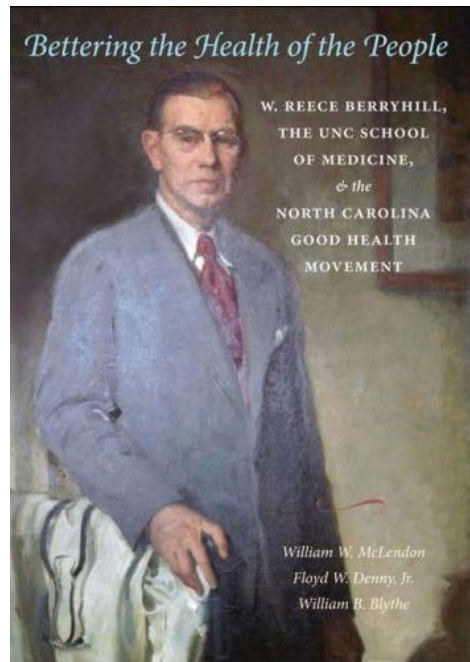


Top 10 Public Colleges		Top 10 Private Colleges	
1. The University of North Carolina at Chapel Hill		Williams College	
2. New College of Florida		Hanard College	
3. University of Virginia		Swarthmore College	



Esse Quam Videri- Service to the State of North Carolina

The University of North Carolina- “to make the *campus co-extensive with the boundaries of the State*, while keeping the highest standards of university instruction and scholarly research on the highest plane, put the University-- as head of the State’s educational system– *in warm, sensitive touch with every problem in North Carolina life, small and great.*” Edward Kidder Graham- President University of North Carolina 1917-21



The North Carolina Jaycee Burn Center at UNC- Chapel Hill

- Opened in 1981 (Johnny Stackhouse, Duke Energy/ Progress Energy, Electrical Co-ops, Firefighters, NC Jaycees and others)
- Re-verified by ACS/ ABA in October 2012
- 21 bed dedicated ICU capable- 2008; 15 acute floor beds- 2012
- Verified to admit critically injured adults and pediatrics
- Over 1300 acute admissions, more than 250 ICU admits
- Burn team consists of surgeons, nurses, social work, PT/ OT, nutrition, chaplain, recreation therapy, psychology
- Acute care, prevention, education, research, rehabilitation



The North Carolina Jaycee Burn Center at UNC- Chapel Hill



**Groundbreaking for North Carolina Jaycee Burn Center
January 15, 1977**

**North Carolina Jaycee Burn Center Advisory Board made up of energy providers
(Duke Energy, EMC); fire service; burn survivors; community leaders**

**Developed (and continue to develop) multi-million dollar
endowment to support research and other programs**



Why North Carolina?

Southeast is Major Source of Burn Injury in U.S. (“Burn Belt”)

JAMA[®]

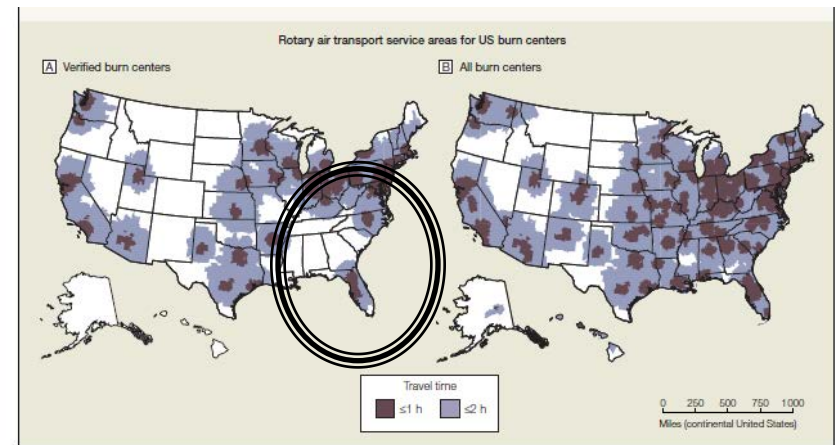
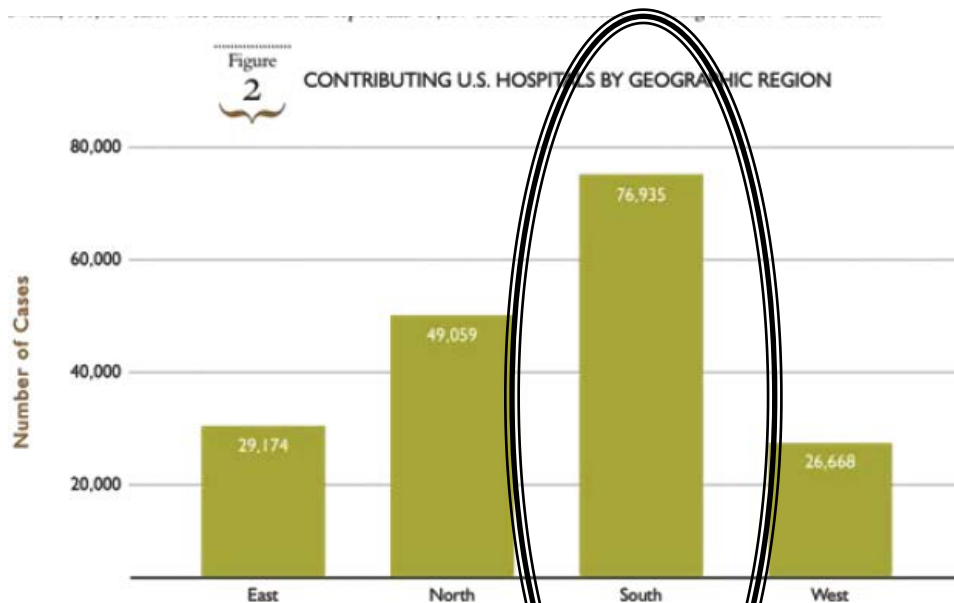
Online article and related content
current as of March 9, 2010.

Geographic Access to Burn Center Hospitals

Matthew B. Klein; C. Bradley Kramer; Jason Nelson; et al.

JAMA. 2009;302(16):1774-1781 (doi:10.1001/jama.2009.1548)

<http://jama.ama-assn.org/cgi/content/full/302/16/1774>



Census tracts with very low population density are geographically very large. Inclusion of those tracts makes some of the service area polygons in our analysis highly irregular in shape. This irregularity represents an artifact of variation in census tracts and not misclassification in our analysis. Interactive maps are available at <http://www.jama.com>.

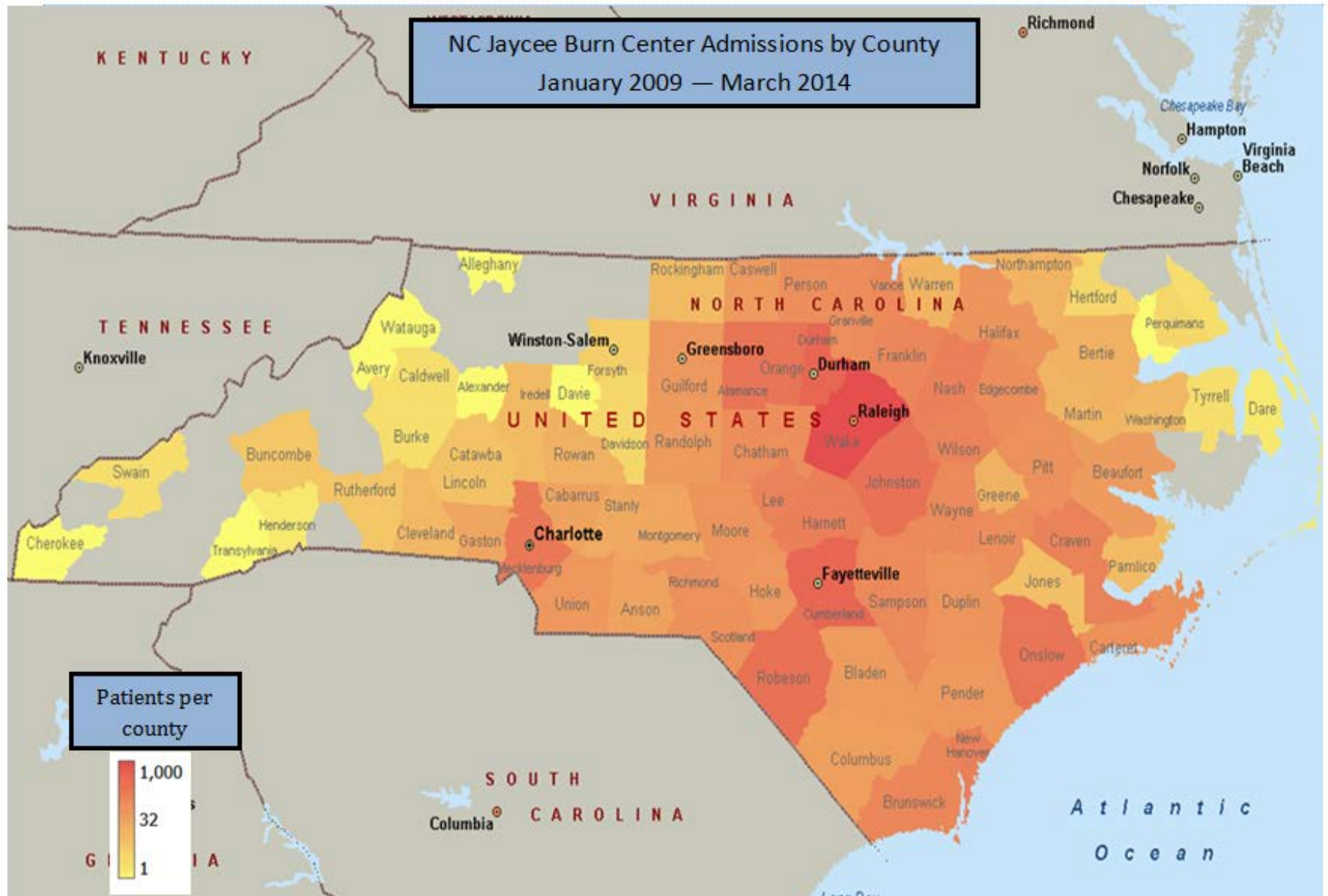
©2009 American Medical Association. All rights reserved.

(Reprinted) *JAMA*, October 28, 2009—Vol 302, No. 16 1779



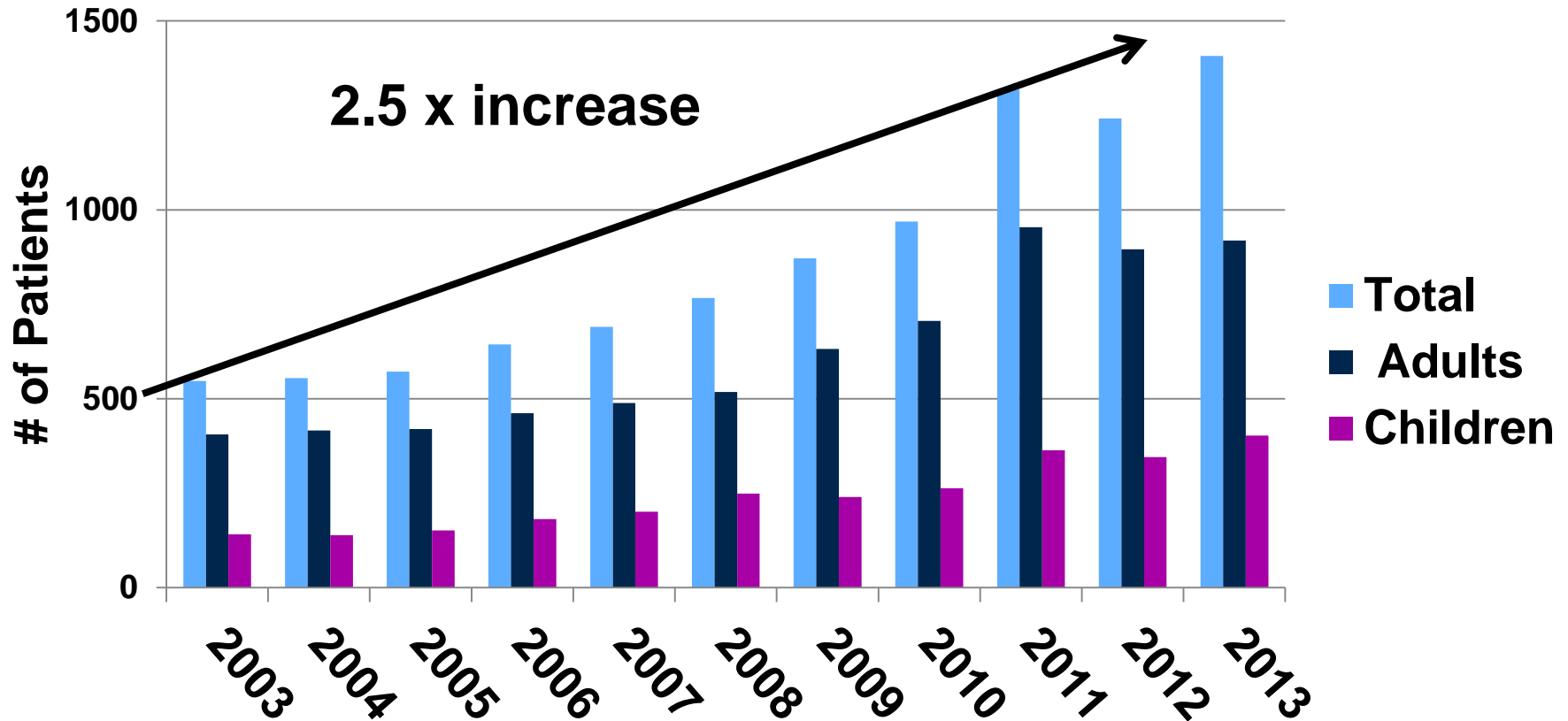
National Burn
Repository
2007 Report
Dataset Version 4.0

Serving the Needs of North Carolina



Serving the Needs of North Carolina

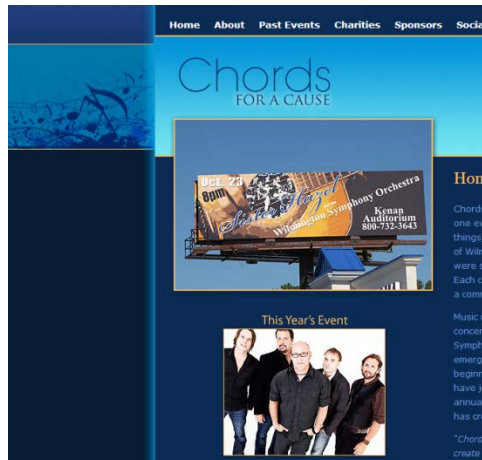
UNC Burn Center Volume 2003-2013



Source: ABA/ACS Verified Registry

Census 5-16-2014: 52
43 Adults
9 Children

Acute Burn and Wound Unit 2012



Chords for a Cause began in 2008 as a group of friends who had been touched by a burn injury, both children and adults, in their own lives and families. Working from the risk to the benefit, the team began to consider the opportunity of both arts and education through an annual concert. Founded in 1941, the Kenan Auditorium has become recognized as one of the best symphony halls in the world. Kenan Auditorium is currently honored to support this continuing work of the North Carolina Justice Burn Center by donating a percentage of sales from this original poster business program.

www.levatherraffa.com

Chords for a Cause takes powerful resonance that music can create and use it to bring people together to help those in need.

Duke Energy Family Room 2013

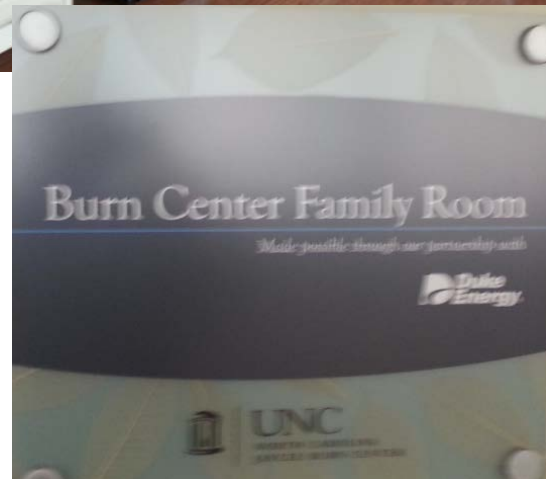


Burn Center Family Room

The North Carolina Jaycee Burn Center is dedicated to providing the crucial combination of specialized medical care and rehabilitation services required by patients recovering from burn injuries.

Above all, we labor to provide superb clinical care of acutely burned patients and support their families in an atmosphere of love, kindness, tolerance and compassion.

The Burn Center recognizes that all members of the family experience the trauma and are survivors. The Burn Center Family Room is dedicated to provide a place of comfort for you.



Burn Center Clinical Faculty



UNC
NORTH CAROLINA
JAYCEE BURN CENTER



Samuel W. Jones, MD



James Hwang, MD



Felicia N. Williams, MD
Arriving July 2014



Anthony G. Charles, MD

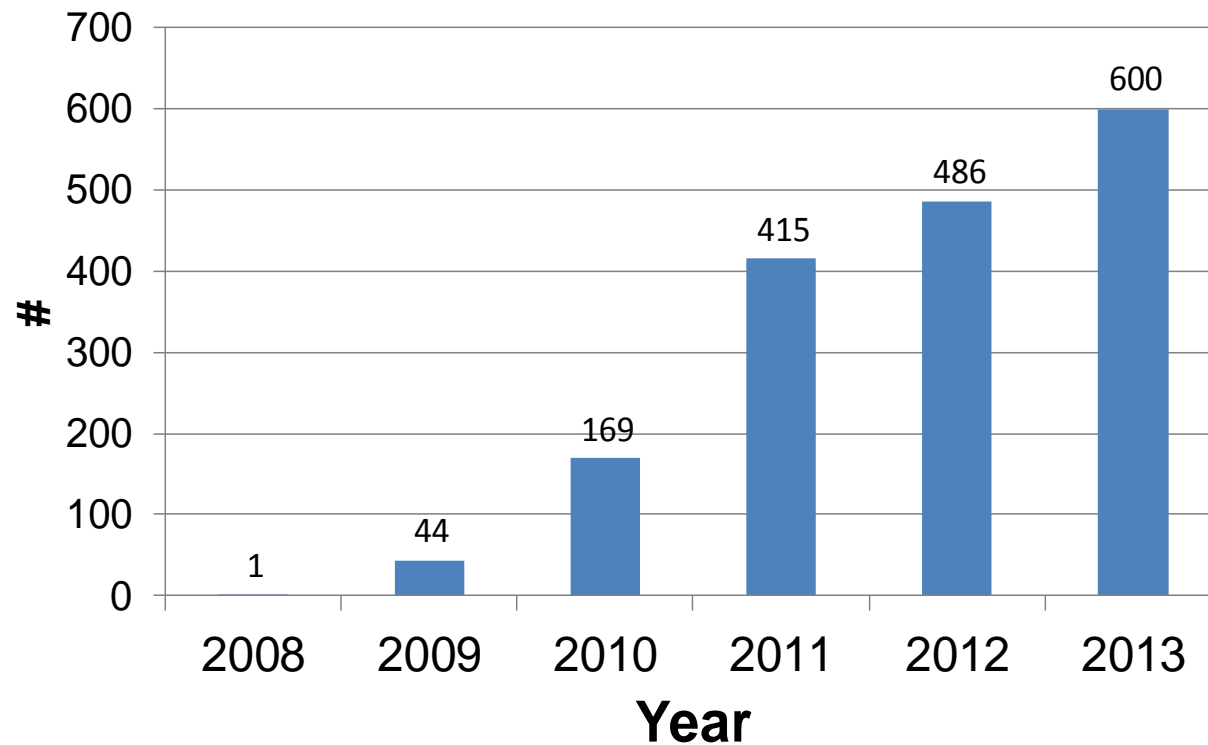


UNC Burn Reconstruction and Aesthetic Center: Opening October 3, 2012



UNC Burn Reconstruction and Aesthetic Center

Laser Sessions per Year





American Surgical Association

The oldest surgical association in the United States

Established in 1880

Home

Annual Meeting

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Committees

History and Mission

The American Surgical Association was founded in 1880 and is the nation's oldest and most prestigious surgical organization. Its members include the nation's most prominent surgeons from the country's leading academic medical institutions, many of whom are Chairs of the Departments of Surgery at these institutions. Membership also includes leading surgeons from around the world, making it much more than an American association.

Laser Resurfacing and Remodeling of Hypertrophic Burn Scars: The Results of a Large, Prospective, Before-After Cohort Study, with Long Term Follow-Up
Charles S Hultman, Jon S Friedsta†, Renee E Edkins*, Bruce A Cairns, Anthony A Meyer
University of North Carolina, Chapel Hill, NC

Objectives: Hypertrophic burn scars produce significant morbidity (itching, pain, stiffness, contracture), but best practices for management remain unclear, with unknown long-term benefit. We present the largest study to date that examines long-term impact of laser therapies, a potentially transformative technology, on hypertrophic burn scars.

Methods: We conducted a prospective, before-after cohort study in burn patients with hypertrophic scars. Pulsed-dye laser was used for pruritis, erythema; fractional CO2 laser was used for stiffness, abnormal texture. Outcomes included: 1) Vancouver Scar Scale (VSS), which documents pigmentation, erythema, pliability, height; 2) 4P Scar Scale (4PSS), which rates pain, pruritis, paresthesias, pliability.

Results: 147 burn patients (mean age, 26.9 years; TBSA, 16.1%) received 415 laser sessions (2.8 sessions/patient), 16 months (median) after injury, including PDL (n=327) and CO2 (n=139), over a mean area of 83 cm2. Laser treatments produced rapid, significant, lasting improvements in hypertrophic scar (table/figure).

Conclusions: For the first time ever, in a large prospective study, laser therapies have been shown to dramatically improve both the signs and symptoms of hypertrophic burn scars, as measured by objective/subjective instruments. Laser treatment of burn scars represents a disruptive innovation that can yield results not previously possible and may displace traditional methods of operative intervention.

Impact of Laser Treatment on Hypertrophic Burn Scars

SCALE	PREOP Baseline	1 Session	All Sessions	FINAL Result (2 Year F/U)	p value
VSS, range 0-15	10.43, sd 2.37	6.67, sd 2.11	5.16, sd 1.92	3.29, sd 1.24	<0.001
4PSS, range 0-12	5.40, sd 2.54	2.89, sd 1.91	2.05, sd 1.67	1.74, sd 1.72	<0.001



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ANNALS OF SURGERY

A Monthly Review of Surgical Science and Practice Since 1885

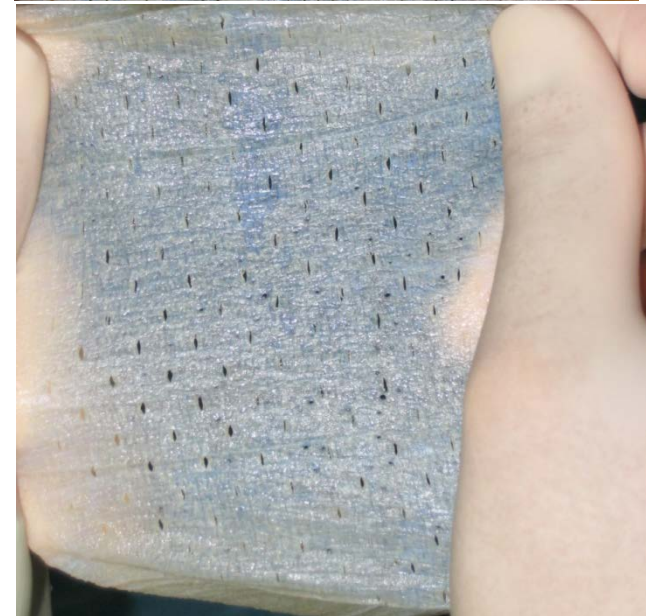
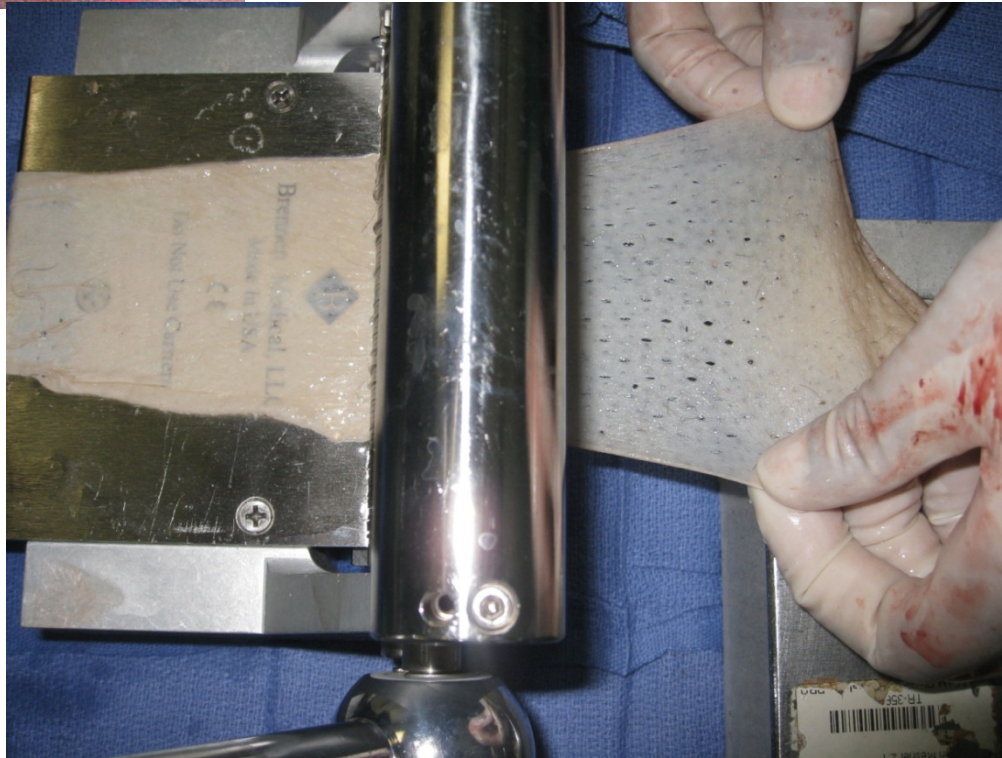
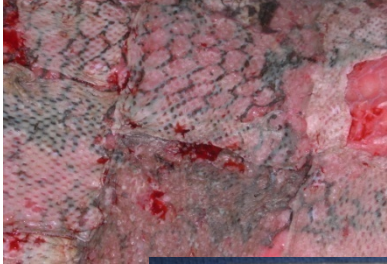


www.annalsofsurgery.com

Wolters Kluwer | Lippincott Williams & Wilkins



Innovation: Development of a Novel Minimal Perforation Skin Graft Mesher



Innovation: Development of a Novel Minimal Perforation Skin Graft Mesher



Innovation: Development of a Novel Minimal Perforation Skin Graft Mesher

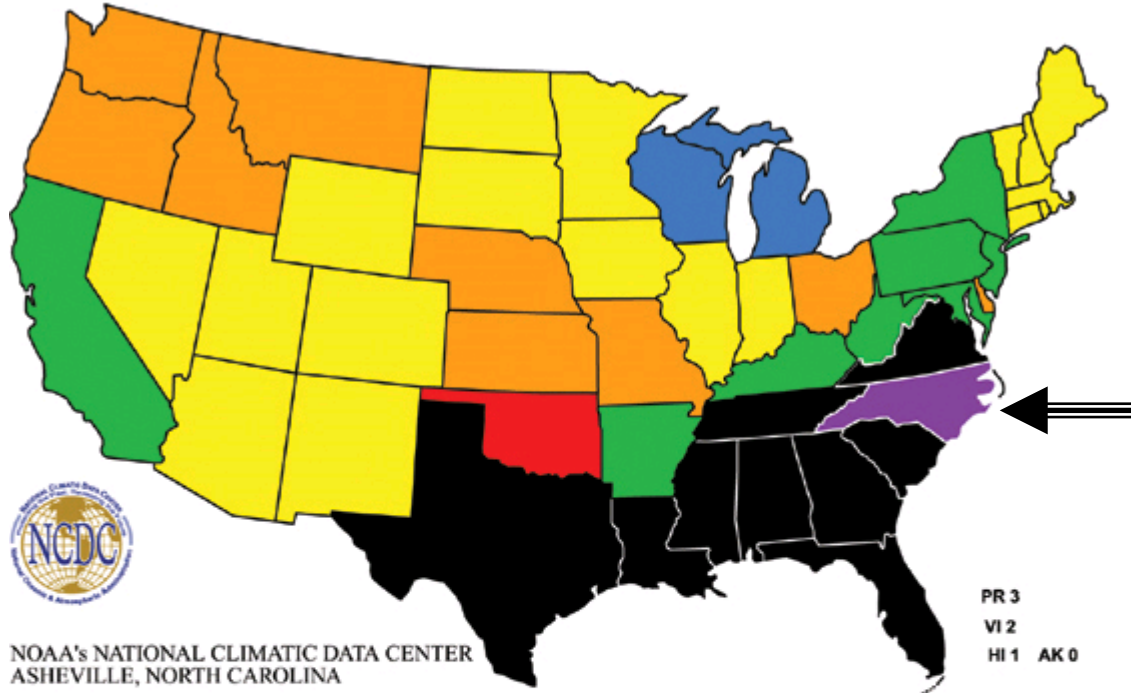


Why North Carolina?

A Major Location for Disasters in U.S.



**Billion Dollar Climate
and Weather Disasters**
1980 - 2004



NOAA's NATIONAL CLIMATIC DATA CENTER
ASHEVILLE, NORTH CAROLINA

PR 3
VI 2
HI 1 AK 0

NUMBER OF EVENTS	DISASTER TYPE	NUMBER OF EVENTS	PERCENT FREQUENCY	NORMALIZED DAMAGES (Billions of Dollars)	PERCENT DAMAGE
1 - 3	Tropical Storms/Hurricanes	20	32.3%	144	36.8%
4 - 6	Non-Tropical Floods	12	19.4%	55	14.1%
7 - 9	Heatwaves/Droughts	10	16.2%	144	36.8%
10 - 12	Severe Weather	7	11.3%	13	3.3%
13 - 15	Fires	6	9.6%	13	3.3%
16 - 20	Freezes	2	3.2%	6	1.6%
	Blizzards	2	3.2%	9	2.3%
	Ice Storms	2	3.2%	5	1.3%
21 - 25	Non-aster	1	1.6%	2	0.5%
		62		391	

Please note that the map color-coded by event frequency reflects a summation of billion dollar events that have affected--ie, it does not mean that each state shown suffered at least \$1 billion in losses for each event.




National Burn Disaster Preparedness



The United States Critical Illness and Injury Trials Group

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Annual NIH Meeting in November
The USCIITG annual meeting will be held in Bethesda, MD November 6th, 2012.

USCIITG Calendar of Events

« < October 2012 > »

S	M	T	W	T	F	S
30	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24			
28	29	30	31			

Programs
USCIITG - CIO8

Home
About USCIITG


2012 Joint Preparedness Conference

March 20 - Burn Bed Surge Strategy Meeting
March 21, 22, 23 - Joint Preparedness Conference

Information

- Summary
- Contact Us
- Travel and Hotel Information
- Dial-in Information
- Burn Surge Meeting Presentations
- Joint Preparedness Conference Materials
- Agenda

The Center for Disease Control and Prevention (CDC), Office of Public Health Preparedness and Response (OPHPR), Division of State and Local Readiness (DSLRL) and the Office of the Assistant Secretary for Preparedness and Response (ASPR), Office of Preparedness and Emergency Operations (OPEO) invite awardees from each directly funded jurisdiction, as well as representatives from ASTHO, NACCHO, and other national partners to attend the **2012 Joint Preparedness Conference** on March 21 - March 23, 2012 in Atlanta, GA. A pre-conference **Burn Bed Surge Strategy Meeting** will occur on March 20, 2012 in the same location.



[Click here to register for the conference.](#)


THE CENTER FOR DEVICES & RADIOLOGICAL HEALTH
PRESENTS AN FDA PUBLIC WORKSHOP:

MEDICAL COUNTERMEASURES FOR A BURN MASS CASUALTY INCIDENT

September 27-28, 2012

FDA Headquarters
White Oak Campus
Silver Spring, MD

An FDA Medical Countermeasures Initiative (MCMi) Funded Project




Translational Burn Immunology Lab

Cairns/Maile Lab

Bruce Cairns, MD, FAC

Rob Maile, PhD

Laurel Kartchner

Julia Malik

Steven Mouro

Tom Fischer, PhD

Amal Khoury, MD

April Mendoza, MD

CJ Neely, PhD

Rebecca Drapp

Sha'Leema Miller

Janice Lee

Karli Gast

Kelly Tackett



•Collaborators

•Doerschuk Lab

Claire Doerschuk, MD

•Richardson Lab

Lance Thurlow, PhD

•Ting Lab

Jenny Ting, PhD

June Brickey, PhD

•Wolfgang Lab

Cindy Gode, PhD

Funding

- NIH R01 GM076250-01A2
 - Cairns' R01
- NIH U19 AI067798-09
 - RADCCore
- NIH T32 AI007273-29 (Linz)
 - Basic Immune Mechanisms Training
- NSF DGE-1144081 (Kartchner)
 - Graduate Research Fellowship Program
- UNC-HHMI (Malik)
 - Med-Into-Grad Initiative





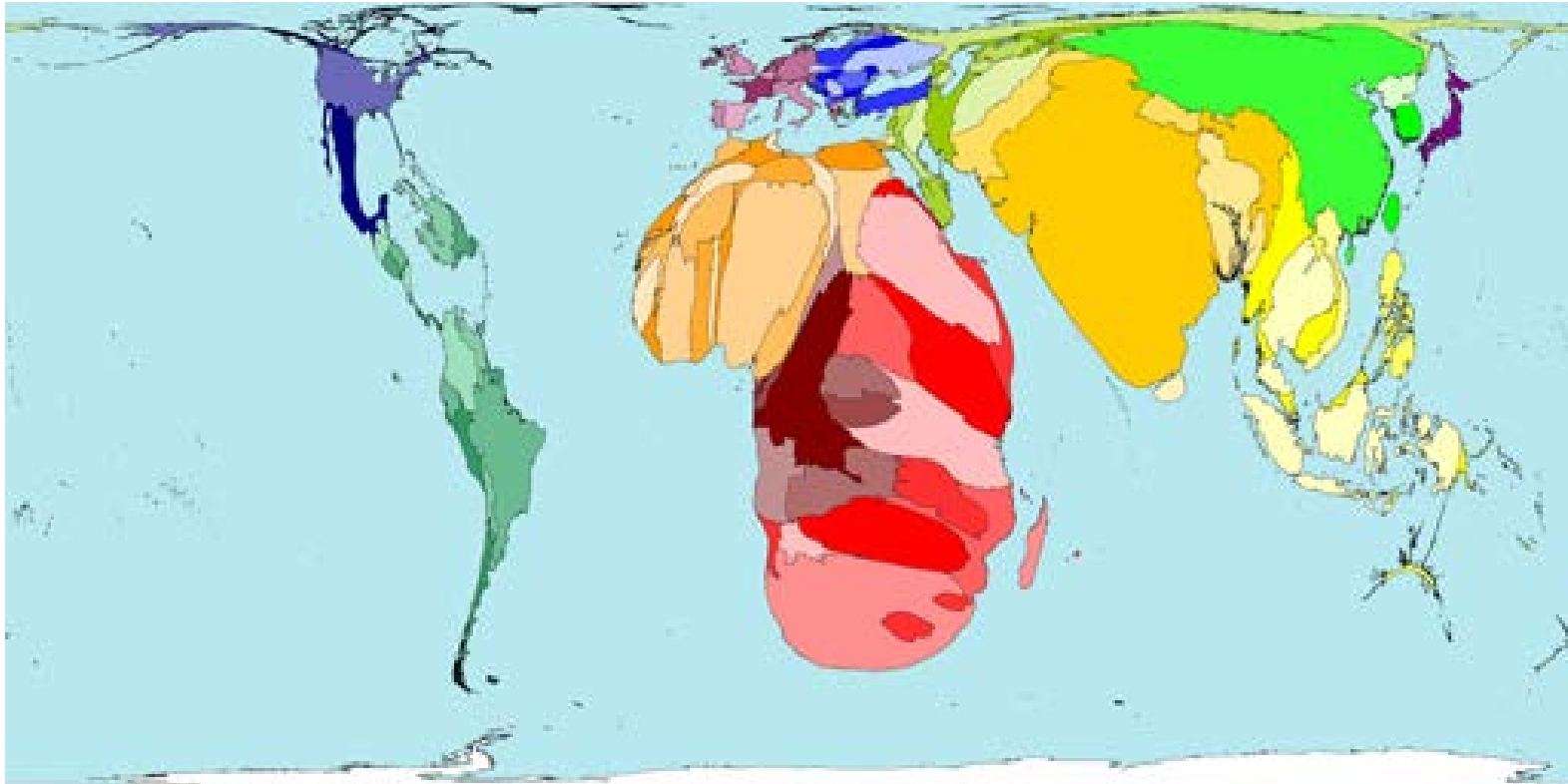
UNC
HEALTH CARE

Advanced Medic Instructor Training *“Pauci Cura Pro Plures”*

UNC School of Medicine PA Program
Request to Plan approved by University



All injury deaths 15-45 years





World J Surg (2011) 35:17–21
DOI 10.1007/s00268-010-0836-2



The Journal of International Medical Research
2011; 39: 873 – 879

Surgery and Global Public Health: The UNC-Malawi Surgical Initiative as a Model for Sustainable Collaboration

Javeria S. Qureshi · Jonathan Samuel ·
Clara Lee · Bruce Cairns · Carol Shores ·
Anthony G. Charles

The Epidemiology, Management, Outcomes and Areas for Improvement of Burn Care in Central Malawi: an Observational Study

JC SAMUEL^{1,2}, ELP CAMPBELL³, S MJIWENI¹, AP MUYCO¹, BA CAIRNS¹ AND AG CHARLES¹

¹Department of Surgery, Kamuzu Central Hospital, Lilongwe, Malawi; ²Department of Surgery, University of North Carolina, Chapel Hill, North Carolina, USA; ³University of North Carolina Project, Lilongwe, Malawi



Johnson & Johnson Responsibility

Dramatically Improved Survival Following Burn Injury in Malawi

Survival after burn in a sub-Saharan burn unit: Challenges and opportunities

Anna F. Tyson^a, Laura P. Boschini^a, Michelle M. Kiser^a, Jonathan C. Samuel^{a,b,c},
Steven N. Mjuweni^b, Bruce A. Cairns^{b,c}, Anth

^a Department of Surgery, University of North Carolina, United States
^b Department of Surgery, Kamuzu Central Hospital, Lilongwe, Malawi
^c North Carolina Jaycee Burn Center, Chapel Hill, United States

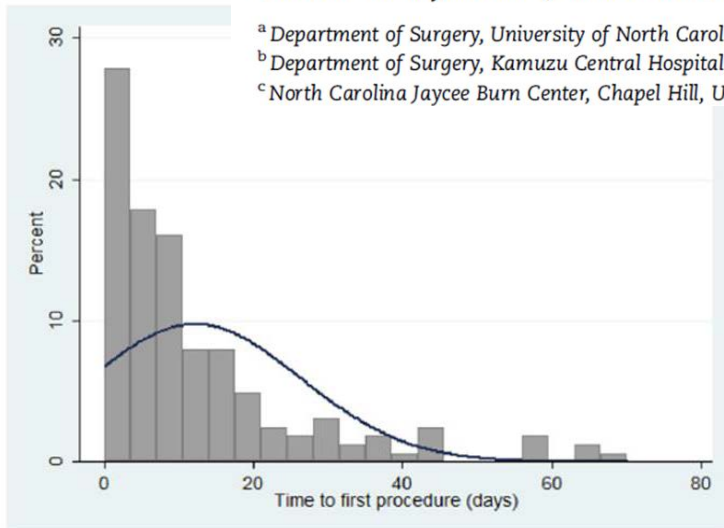
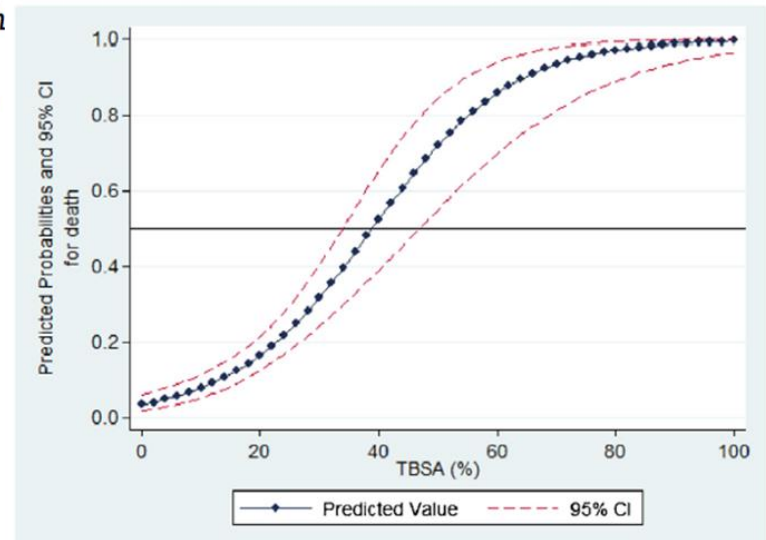


Fig. 2 – Distribution of time from admission to first procedure (n = 162).



*TBSA= total body surface area (%)

†Based on a logistic regression model, adjusted for age and mechanism of burn

Fig. 4 – Probability of death by TBSA*, adjusted for age and mechanism of burn†.



Camp Celebrate



Burn Center: Playroom Renovation 2014



UNC
NORTH CAROLINA
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19.5"(49.5cm) w x 16.5"(41.9cm)h x 5"(21.5cm)



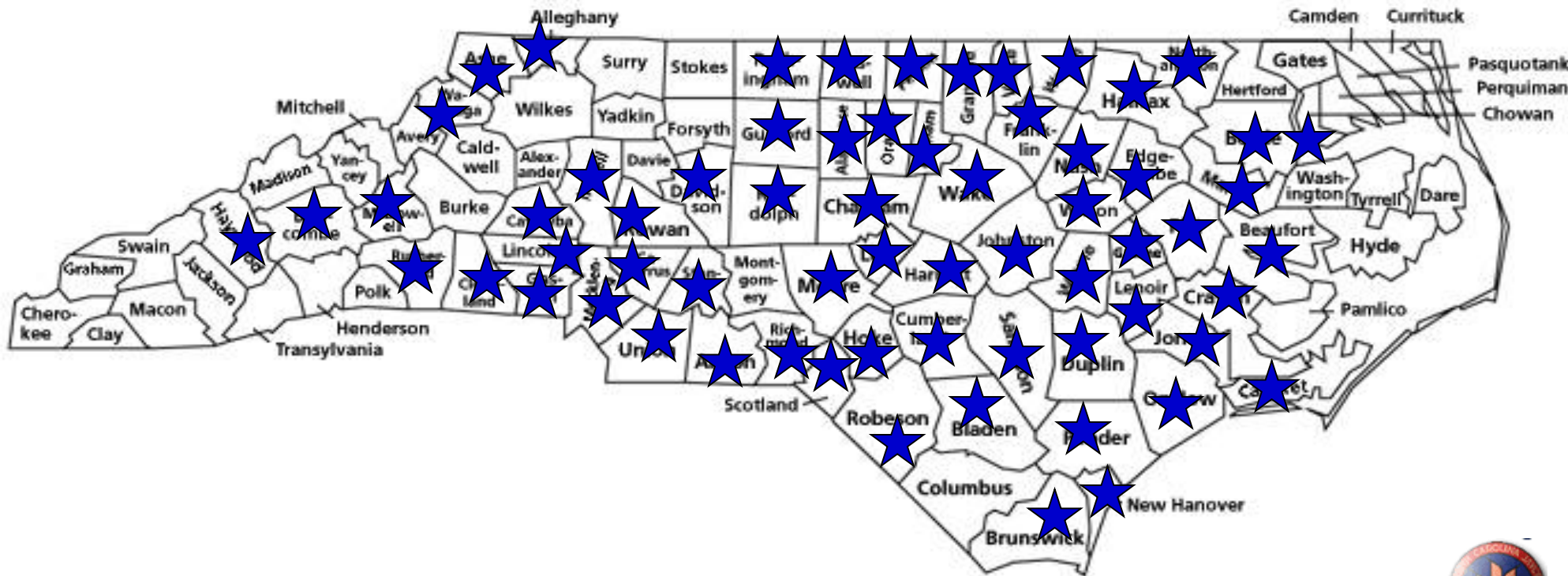
Touchstone Energy[®]
Cooperatives
of North Carolina

Burn Center: Aftercare



UNC
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**Citizens in these NC Counties have participated
In UNC Burn Center Aftercare (2005-2009)**





UNC

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