**Title: IS THIS THE POWER OF ZEUS, THE GREEK SKY AND THUNDER GOD?**

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| **Introduction**Lightning is a powerful electrical discharge that can cause electrical injuries.. This can result in a range of injuries, from mild to severe. In this case, it can cause burns as the electrical current travels through the skin. Without a doubt, medical trauma resulting from a lightning injury requires prompt and comprehensive medical care especially in Emergency Department.**Case Presentation**We’re receiving a male, 8 years old male who had been struck by lightning on his way back to his home. He was taking shelter under a tree when lighting strikes. Post trauma, he sustained loss of consciousness at scene, subsequently regain consciousness at ED. Upon arrival in ED, the patient was conscious but restless and triaged to redzone. Vital signs upon arrival are BP: 141/95, PR: 119, Temp: 37.3 and SPO2: 96% under RA. Patient was intubated in view of circumferential neck burn with suspected airway injury for airway protection. During intubation, we noted laryngeal oedema and vocal cord oedema. In ED, the patient was resuscitated with IV Hartmann according to Parkland formula. Patient was properly sedated with on IVI Midazolam and given analgesia of IVI Fentanyl. On examination, GCS E1M1V1, sedated with second degree burn over chest, abdomen and bilateral lower limb and genital area, second degree burn over circumferential neck area approximate about 25%. This case was referred to Plastic team HSB by surgical team HTF and to admit this patient to PICU HSB.**Discussion**Immediate medical attention is crucial for lightning strike victims as cardiac arrest is a common immediate consequence. As for this patient, a quick decision was being made for early intubation since the patient has develop laryngeal oedema and vocal cord oedema, in order to prevent upper airway obstruction. Fluid resuscitation and the Parkland Formula is used as burns can lead to significant fluid loss and dehydration. The goal of fluid resuscitation in burn patients is to maintain organ perfusion and prevent hypovolemic shock. **Conclusion / Take Home Messages**Effective management of burn injuries necessitates a well-coordinated and personalised strategy, encompassing multiple medical disciplines. Timely interventions, comprehensive care, and continued support enhance outcomes and enhance the quality of life for those who have suffered burn injuries.Keywords: burn injuries, Parkland Formula, Hartmann |