

Lund and Browder Chart

Patient Name: _____ Date of Birth: _____

Gender: _____

Medical History (if needed):

Referring Physician's Name: _____

Region	Partial Thickness (%) [NB1]	Full Thickness (%)
Head		
Neck		
Anterior trunk		
Posterior trunk		
Right arm		
Left arm		
Buttocks		
Genitalia		
Right leg		
Left leg		
Total burn		

*NB1: Do not include erythema

Area	Age 0	1	5	10	15	Adult
A = half of head	9½	8½	6½	5½	4½	3½
B = half of one thigh	2¾	3¼	4	4½	4½	4¾
C = half of one lower leg	2½	2½	2¾	3	3¼	3½

Additional Notes (Next steps, Findings, Observations, etc.):