

Burns and Scalds

Treatment and Management



Accident and Emergency Department

A Burn is an injury caused to the skin by thermal (fire/iron), chemical, electrical or radiation (sunburn/radiotherapy) energy. A scald is a burn caused by hot liquid or steam.

What first aid should I do?

All Burns /Scalds should be cooled with running cold water at 2- 15 ° C for 20 minutes within three hours of injury. Apply cold compresses changed frequently if no running water available. Do not use Ice, Ice packs, iced water. Do not apply creams. Remove jewellery. You can cover the burn with cling film wrapped loosely in layers. Treat the pain with Ibuprofen or Paracetamol over the counter as directed.

What types of burns are there?

Burns are assessed by how seriously your skin is damaged and which layers of skin are affected. The epidermis is the outer layer of skin. The dermis is the layer of tissue beneath which contains nerve endings, blood capillaries sweat glands and hair follicles. Below this is the subcutaneous fat which is the deeper layer of fat and tissue.

Minor

- Superficial burn- the epidermis is damaged the skin is red, slightly swollen and painful, but not blistered.
- Superficial partial thickness burn- the epidermis and part of the dermis are damaged, the skin is pale pink/red, painful, and blisters may be present.

Major

- Deep dermal- the epidermis and the dermis are damaged the skin is dark pink/red or white, blotchy, swollen, blistered, very painful or painless
- Full thickness- all three layers of skin damaged, the skin is white/ black/ brown or yellow with no blisters, the skin may appear waxy with no sensation.

When should I to go to hospital?

Most burns are minor and can be safely managed at home or in primary care but go to your Emergency Department for:

- Large or deep burns or any size burns that cause white, charred skin
- Burns that cause large blisters or on face ,hands, genitals
- All chemical and electrical burns
- If you have breathed in smoke or fumes
- If you are elderly, pregnant, a child or have complicated medical problems

How will my burns be managed?

Major and Complex burns will be referred to a specialist Burns unit.

Superficial burns with red skin but no blisters:

- Symptomatic pain relief with over the counter painkillers, such as Ibuprofen, Paracetamol or Co-codamol.
- Moisturise with non-perfumed gels or creams to non-broken skin i.e. Aloe Vera or after sun or Emulsifying ointment.
- A light dressing can be applied for comfort.
- See your GP or return to Emergency Department if blisters develop.
- These types of burns heal in about a week without scarring.
- Superficial partial thickness with blisters:
 - You may require a Tetanus injection; your vaccine status will be assessed.
 - Your blisters may have the top layer of skin removed (de-roofing), you should not do this yourself. This is to control the amount of exudate (tissue fluid) and remove dead and loose tissue that could cause infection. This also ensures an accurate assessment of the skin beneath.

- You will have a non-adherent dressing plus an absorbent layer applied.
- You may be asked to return after 24 to 48 hours for reassessment of the dressing. If the dressing is wet it must be changed.
- According to the dressing type used you will then be asked to review the dressing with your Practice Nurse every three to five days till you are discharged from their care.
- Symptomatic pain relief with over the counter painkillers, such as Ibuprofen, Paracetamol or Co-codamol, or if necessary you will be prescribed stronger painkillers.
- Swelling called oedema is the body's natural reaction to injury and is normal after a burn .It can interfere with wound healing and increase pain. To lessen this it is important to elevate the affected area if possible- use of pillows, a sling and sitting semi-recumbent for facial burns can assist. Activity and motion exercises can also reduce swelling. Tubular bandage may be used.
- Prophylactic (“just in case”) antibiotics are not required.

After Care of my Burn:

- Scarring- Depends on size, depth, location, and age and skin type. Minor burns which heal within two weeks are unlikely to cause scarring.
- Scar massage- Healed wounds can be dry, tight and hard which can be uncomfortable. Moisturise with non-perfumed gels or creams to non-broken skin i.e. Aloe Vera or After sun or Emulsifying ointment at least three times a day in firm deep circular movements
- Washing- You may wash as normal when burn is fully healed but it may be temperature sensitive, ensure it is adequately cleansed to remove build-up of moisturiser
- Itching- This is a common problem after healing, it can be severe. Avoid scratching. Cooling the skin, moisturising and massaging can help. Antihistamines may be needed for persistent itching.

- Sun Exposure- Newly healed skin is sensitive to sun, avoid direct exposure to sun for at least the first year as it may cause blisters. Keep covered with cotton clothing and use a high protection sun block.
- Blisters and Cysts- Newly healed skin may be prone to this, these may require protection or they may self-resolve without any treatment.

What should I look out for?

- If the wound becomes painful or smelly.
- If you develop a high temperature and feel unwell.
- If the dressing becomes soaked with fluid from the wound.
- If the wound is not healing and you are discharged.

How can I prevent Burns?

- Be mindful of dangerous situations in kitchen; keep children out, cook on back burners, turn handles inwards.
- Hot liquids /drinks keep away from children do not pass over their heads; can still scald up to 20 minutes afterwards.
- Test Bathwater temperature with elbow.
- Keep matches/ lighters away and irons hair tongs and curlers out of reach till cool.
- Use fireguards on fires and heaters and keep away from barbecues
- Keep chemicals locked away.
- Sun; Use the shade keep out of sun 11am-3pm. Cover up with loose baggy cotton clothing. Use hats and sunshades. Use high protection factor sun cream.

Reference sources:

Burns Assessment and Management

<https://patient.info/doctor/burns-assessment-and-management> accessed 17/12/15

Burns and Scalds

<https://cks.nice.org.uk/burns-and-scalds> accessed 17/12/15

Burns and Scalds NHS Choices

<http://www.nhs.uk> accessed 17/12/15

London SE Burns Network

<http://www.lsebn.nhs.uk> accessed 17/12/15

Sunburn

<http://patient.info> accessed 17/12/15

Support organisations:

British Burn Association

<http://www.britishburnassociation.org>

Burn Centre Care

<http://www.burncentrecare.co.uk/support>

Contact details

If you have any other questions or problems you can contact the Emergency Department:

Telephone: 01483 571122 ext. 2370

Alternatively ring 111 or speak to your GP

PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

Telephone: 01483 402757

Email: rsc-tr.pals@nhs.net

Opening hours: 9.00am–4.00pm, Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

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