

Burns and Scalds Advice

This information leaflet will provide you with the information regarding the treatment and care required to manage your burn/scald.

A burn is damage to your skins tissue caused by either direct contact with something hot, such as fire, or by radiated heat from an extreme source, such as the sun. Burns can be also caused by certain chemicals, electricity, and friction. A scald is caused by hot liquid or steam and **can include immersion in a hot bath or shower. They usually cause skin injuries but are managed in the same way as a burn.** The following advice should help you to recover.

Treatment

- Superficial burns to the limbs or body are treated with a sterile dressing. Those to the face are treated with the application of a fragrance-free moisturizer to prevent the skin drying. This needs to be re-applied frequently.
- You will need to return to have your burn/scald checked after 24 hours to ensure infection is not present, and to assess any blisters that may have developed. A trained nurse will do this assessment.
- You will probably be referred to your practice nurse after this for further review and dressings normally after 3-5 days.

Things you should do	Things you shouldn't do
<ul style="list-style-type: none"> • Keep your dressing clean and dry. • Take the recommended medication to relieve the pain (such as Paracetamol or Ibuprofen). This can be bought over the counter from a pharmacy or local shops. Follow the instructions on the packet/bottle. • Return to the department/see your GP if: <ul style="list-style-type: none"> ○ Fluid seeps through the dressing. ○ The dressing becomes wet. ○ Pain and discomfort increases after initial improvement. ○ You feel ill or have developed a temperature • It is important to keep well hydrated to help wound healing and reduce the risk of any complications • For mild sunburn only use a moisturiser 	<ul style="list-style-type: none"> • Remove your dressing – exposing the wound may increase the chance of infection. • To lessen the risk of infection don't burst any blisters - if necessary these will be dealt with when your burn/scald is reviewed • Wear rings, bracelets, watches, etc on the affected hand/wrists – if any swelling occurs, they may cause tightness or

cream, like aloe vera, to help to soothe the skin and cover from direct sunlight until skin has fully healed <ul style="list-style-type: none"> • After the burn/scald has healed you should <ul style="list-style-type: none"> ◦ use a fragrance-free moisturiser daily to help prevent dryness, cracking, and itching. ◦ protect the area from the sun by using sun block for 6–12 months. 	constriction <ul style="list-style-type: none"> • Apply creams, ointments, oils, grease, etc. • Put on an adhesive, sticky or fluffy dressing. • Use ice or ice packs on sunburnt skin • Scratch or try to remove peeling skin
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Types

of Burns

We assess burns based on the seriousness of the damage to your skin. There are three main types:

Superficial burns

- These affect the top layer of skin only - a good example is mild sunburn
- The skin looks red and is painful.
- The top layer of skin may peel a day or so after the burn, but the underlying skin is healthy.
- It does not usually blister or scar.

Partial-thickness

- These cause deeper damage.
- The skin forms blisters and may weep straw coloured fluid
- It is painful. Some of the deeper layer of skin (the dermis) is involved. The skin usually heals well, sometimes without scarring if the burn is not too extensive.
- The skin may be pale pink with blistering or dry, blotchy and cherry red

Full thickness

- These burns damage all layers of skin.
- The skin is white or charred black.
- There may be little or no pain as the nerve endings are destroyed.
- These often require skin grafting.

Electrical burns

- These can cause damage inside the body even if there is little damage to the skin. **These always need to be assessed in an Emergency Department.**

However, a single burn from one accident may have various types of burn. For example, some areas of the burnt skin may be superficial, some partial thickness, and some full thickness.

Preventing sunburn

- Keep out of hot sun, particularly between 11 am and 3 pm.
- When out in the sun, remember: **Slip, Slop, Slap** - slip on a shirt, slop on some high-protection sunscreen and slap on a hat.

First Aid treatment for a burn/scald: Cool the area using cold (not iced) water (or a cold compress) over the area for 20-30 minutes. If cooling large areas of skin

in children and the elderly make sure the person is kept warm to avoid hypothermia. Then cover the burn using clean cling film, layered on rather than wrapped around a limb. You can use a clean, clear plastic bag for burns to the hand. **If cling film is not available, use clean, cotton material such as a sheet.** Get the person to take some pain relief such as Paracetamol or Ibuprofen. **Get** medical help.

If you are concerned about your progress, or if you have not improved within 10 days, we advise you to contact your GP or return to the Emergency Department/MIU department where you were seen.

References: <https://cks.nice.org.uk/topics/burns-scalds>
<https://patient.info/skin-conditions/burns-and-scalds-leaflet>