

The Children's Hospital
Children's Day Care Ward
Hand and Plastic Injury Clinic (HAPI)

Minor burn and scald injuries

Information for parents and carers



This leaflet has been written to give you information to help you care for your child after a burn or scald injury.

Burns are often categorised into different types, depending on the severity of the burn. The way the burn is treated will vary from one type to another.

We will let you know the type of burn your child has.

Superficial burns:

These affect just the surface of the skin, causing redness and pain.

Partial thickness burns:

These are deeper than the superficial burns and can cause the skin to become blotchy and red or pale pink. These burns may be painful and develop blisters.

Full thickness burns:

These cause damage to all layers of the skin, resulting in a brown or white leathery appearance. They usually need treatment at a specialist burns unit.

Blisters

These can develop soon after the original injury, but can also take some time to fully form.

Blisters are collections of fluid which cover the skin that has died as a result of the burn. Blisters that are smaller than your little fingernail can be left alone, but larger blisters which may burst are sometimes treated by having the top layer removed. This also allows us to see how severe the burn is under the blister.

The process of removing blisters is known as 'de-roofing'. It can be done by a trained nurse or doctor. If your child has a blister that needs to be de-roofed this will either be done in the Emergency Department or by the specialist nurse practitioner in the HAPI clinic.

If your child still has blisters, or the overlying skin from the blisters has not been fully removed, it is important you mention this, so that they can be treated at their follow-up appointment.

Following emergency treatment

Around two days after receiving emergency treatment in the Accident and Emergency Department, your child will need to come for a review in the Children's Hand and Plastic injury clinic (Children's HAPI clinic). Their injury will be reviewed at this appointment by a Specialist Plastic Consultant.

If your child has a dressing covering their burn, this will be changed. Please give your child some pain relief medicine (such as paracetamol) before bringing them for this review, as the dressing change can sometimes cause some discomfort.

We usually take photographs of the burn injury at the start of treatment, so we can monitor that it is healing appropriately. You may have had the first photos taken in the Emergency Department. If not, they may be taken at the two day review.

Dressings used to treat a burn injury

Aquacel AG burn

This is a silver impregnated dressing made of wood pulp, which has been shown to be effective for burns treatment. In the first 24 hours after being applied, the fluid from the wound turns the dressing into a gel like substance. When the skin has healed underneath, the gel will dry out to a parchment like material that can be peeled off.

Mepitel

This is a silicone dressing used on sensitive areas of the body and over joints, as it will not harden.

Dressing changes

Your child may need to come for further dressing changes twice a week for the next two weeks, so we can monitor that the injury is healing. After this time, the dressing changes will be in the Plastic Dressings Clinic on LG1 in the West Wing of the John Radcliffe Hospital.

We will book your child's next appointment for a dressing change after their review in the Children's HAPI clinic.

Before you come for the dressing change appointment we recommend giving your child a simple pain relief medication, such as paracetamol, as this will help with any discomfort.

Care of the dressing at home

It is important to keep the dressing clean and dry while the injury is healing, to prevent any infection.

The nurse will give you advice about washing or bathing your child while the dressing is in place. We usually advise to cover the affected area with a plastic bag, if possible, and to keep the affected area out of the water as much as you can.

It is important to seek advice if the dressing becomes wet, moves or comes off. The nurse will tell you who to contact, depending on your child's injury, where you are at the time and which day and time it is. You may need to either return to the HAPI clinic (if your child has not yet had an appointment at the Plastic Dressing clinic) or you may need to contact the Plastic Dressing Clinic for an urgent appointment.

In some circumstances it may be best to ask your GP's Practice Nurse to change the dressing, or you may need to go to your nearest Emergency Department or Minor Injury Unit.

The Nurse will advise you about this during the HAPI clinic review.

Dressing used:

Advice if dressing requires changing before routine dressing change appointment:

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You should have your child's dressing changed sooner if:

- fluid is seeping through the dressing
- it becomes accidentally wet
- it becomes loose/starts to peel off.

Pain

You can give your child painkillers regularly, if needed, such as ibuprofen and paracetamol. Please follow the dosage instructions recommended for your child's age on the bottle.

If your child has a burn to a limb (arm or leg) it may help to raise the limb (if appropriate) to relieve discomfort and reduce any swelling.

Things to look out for

Burns can occasionally lead to problems or complications such as:

Toxic Shock Syndrome

Toxic shock syndrome (TSS) is a **rare** but life-threatening bacterial infection caused by *Staphylococcus aureus* and *Streptococcus pyogenes* bacteria.

If your child experiences any of the following symptoms you should seek urgent medical advice:

- generally feeling unwell, with flu like symptoms such as headache, sore throat, cough and aching muscles
- develops a fever/high temperature (38°C or above)
- feels sick or is sick
- has diarrhoea
- feels faint or dizzy (if they are able to tell you this)
- has a widespread flat, red skin rash.

Other problems to look out for:

If you notice that your child has any of the following symptoms, please seek medical advice as soon as possible.

Cellulitis

This causes redness and swelling around the affected area which feels hot to touch.

Infection

The injury has an offensive smell and may have fluid or pus oozing from it.

Worsening pain

Your child is experiencing worsening pain not relieved by regular pain relief medicine.

Psychological distress

Burn injuries can be very distressing. If you think your child is experiencing symptoms of emotional distress, such as disturbed sleep, flashbacks or vivid dreams, or a change in their general behaviour, please contact us. We can put you in touch with support for these problems.

Activities/school or nursery

As mentioned earlier, it is important to keep the dressing clean and dry. Your child should avoid activities where this may prove difficult, such as swimming, until the burn has healed.

If your child goes to school or nursery, the nurse or doctor in clinic will advise you about when they can return. Activities that involve some types of 'messy' play, such as sand, paint or water will need to be avoided until the burn has healed.

Please ask us if you have any queries about your child's activities. You can also speak to your GP or Nurse Specialist in the Plastic Dressing Clinic, if they are doing your dressing changes.

Long term care of the burn injury

Once the burn wound has healed, the skin may become dry or itchy. Moisturise the area regularly with a non-perfumed, water-based moisturiser, such as aqueous cream.

There will be a scar (patch of tissue) that remains once the wound has healed. To reduce the risk of permanent or noticeable scarring, continue to moisturise with a non-perfumed, water-based moisturiser, such as aqueous cream.

For the first eighteen months to two years after a burn, the area of skin may be very sensitive, particularly to sunburn. Avoid exposing the affected area to the sun, if possible, and use a high factor sun block, even if it is not warm, as the UV rays can still damage the skin.

How to contact us

Children's Hand and Plastic Injury Clinic (Children's HAPI)

Children's Day Care Ward, Level 1, Children's Hospital

Tel: 01865 234 148/9

(12.00pm to 2.00pm, Monday to Friday)

Hand and Plastic Injury Clinic

Level 0, West Wing, John Radcliffe Hospital

Tel: 01865 234 746

(12.00pm to 2.00pm, weekends and Bank Holidays)

If you have queries outside of these times you can phone the:

Children's Day Care Ward

Tel: 01865 234 148

(between 7.30am and 7.30pm on weekdays)

Nurse Specialist for the Hand and Plastic Injury Clinic

Tel: 01865 234 746

or call the hospital switchboard and ask for bleep 6341

(between 8.00am to 3.30pm on weekends and Bank Holidays).

Plastic Dressing Clinic

LG1, West Wing, John Radcliffe Hospital

(9.00am to 4.00pm, Monday to Friday)

Tel: 01865 231 175

Or 01865 223 535

John Radcliffe Hospital Switchboard

Tel: 0300 304 7777

If you need urgent advice or care for your child outside of clinic or ward opening hours you should contact your local 'out of hours' service. This may be a GP service, NHS Walk-in Centre, Minor Injury Unit or your nearest Emergency department.

Information about urgent and emergency care in England can be found on the NHS Choices website or by calling the NHS Helpline 111.

Further information

NHS Choices

Website: www.nhs.uk/conditions/burns-and-scalds

Website: www.nhs.uk/conditions/Toxic-shock-syndrome/Pages/Introduction.aspx

Support groups

www.changingfaces.org.uk/Home

www.dansfundforburns.org/

www.meht.nhs.uk/our-charity/about-us/childrens-burns-club/

www.capt.org.uk/resources/burns-and-scalds

Your child's next appointment:

Date:

Time:

Place:

If you have a specific requirement, need an interpreter,
a document in Easy Read, another language, large print,
Braille or audio version, please call **01865 221 473**
or email **PALS@ouh.nhs.uk**

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