

GUIDELINE

Burns - Dressings			
Scope (Staff):	All Emergency Department Clinicians		
Scope (Area):	Emergency Department		

This document should be read in conjunction with this DISCLAIMER <u>http://kidshealthwa.com/about/disclaimer/</u>

Burns - Dressings

Pre-Procedure

- Use aseptic technique at all times to minimise risk of infection
- Do not use 0.9% saline on wound as it de-activates the silver dressing
- Debride any large blisters and remove loose skin with sterile scissors and metal forceps
- Do not use Fixomull on **any** burns

Procedure

Medications

• Ensure child has had adequate analgesia before applying burns dressing. See ED Guideline: <u>Burns – Medication</u>.

Management

Sunburn

- For non blistered superficial erythema use Aloe vera gel and leave uncovered
- For more severe sunburn (blistered or skin loss) treat as below

Facial Burns

Apply a thin layer of emollient

Management of All Other Burns at PMH (as per the following scenario):

Child admitted to Burns Ward without delay

• Keep the wound moist by wrapping in sterile water soaked dressing towel or in cling warp (if age appropriate) until transfer to the Burns Ward

Delay in admission or returning to Burns Clinic appointment the following day

- Use Nanocrystalline Silver dressing (Acticoat) moistened with sterile water
- Cut the Acticoat to the size of the burn (include blistered and/or erythematous area)
- Apply layer of intrasite gel to the blue side of the Acticoat
- Apply prepared Acticoat directly to the wound surface (blue side down)

• Cover Acticoat with water compress (gauze soaked in sterile water) to keep the Acticoat moist

• Wrap with sterile webril and crepe bandage and secure with leucoplast tape

For discharge with Burns Clinic appointment in 2 days or later

- Use Nanocrystalline Silver dressing (Acticoat) moistened with sterile water
- Cut the Acticoat to the size of the burn (include blistered and/or erythematous area)
- Apply layer of intrasite gel to blue side of Acticoat
- Apply prepared Acticoat directly to the wound surface (blue side down)
- Cover Acticoat with Duoderm dressing ensuring that edges overlap Acticoat dressing by 2cm and adhere to skin

• Wrap with sterile webril and crepe bandage and secure with leucoplast tape

Links

- Burns Ward: 9340 8257
- Burns Outpatient Clinic: 9340 8861
- Burns Clinical Nurse Specialist: 9340 8269

Tags

acticoat, aloevera, blister, blistered, burn, burns, dressing, dressings, duodenum, emollient, erythema, erythematous, facial, gel, intrasite, leukoplast, medication, medications, nano crystalline, scald, silver, skin, sunburn, webril, wound

This document can be made available in alternative formats on request for a person with a disability.

File Path:				
Document Owner:	Dr Meredith Borland HoD, PMH Emergency Department			
Reviewer / Team:	Kids Health WA Guidelines Team			
Date First Issued:	5 February, 2014	Version:		
Last Reviewed:	12 October, 2015	Review Date:	12 October, 2017	
Approved by:	Dr Meredith Borland	Date:	12 October, 2015	
Endorsed by:	Medical Advisory Committee	Date:	12 October, 2015	
Standards Applicable:	NSQHS Standards: 🔍 📀			
Printed or personally saved electronic copies of this document are considered uncontrolled				