Burn Care

You have a burn injury. Minor burns (first degree) cause redness to the skin and involve only the outer layer of skin. Deeper burns (second degree) involve several layers of skin and cause blistering. Third degree burns damage all layers. These burns may appear dry, pale, white or charred black. These may need surgical treatment. The goal of burn treatment is to prevent infection and protect the damaged skin.

- Keep the area around the burn clean. Before touching the burn, wash your hands with soap and water.
- Ice in a plastic bag may be applied over the dressing to help control pain. Keep a towel between the bag of ice and the injury.
- Change your burn dressings at least daily or as instructed by your caregiver. Soak your old bandage in warm water if it sticks when you change dressings. Wash the burn area with warm soapy water and rinse well. Look for signs of infection. Apply antibiotic ointment or cream for dressing changes if advised.
- Do not break open blisters. When blisters break open on their own, the dead skin may be trimmed off with clean fine scissors.

Some redness, swelling, and drainage are expected for the first few days. Keep the area of your burn at rest and elevated for the next 2-3 days. After that, you should move the joints around the burn actively during dressing changes. See your doctor at once or go to the emergency room if you think your burn is infected, or if it is not healed within 10 days.

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop increasing pain, redness, or swelling
- You develop heavy or foul-smelling drainage from the burn
- You develop chills or fever

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