

Minor burns and scalds

An information guide



Minor burns and scalds

This leaflet contains discharge advice following your attendance to the Accident & Emergency Department (A&E).

What is a burn?

A **burn** is a type of injury to skin, or other tissues, caused by heat, cold, electricity, chemicals, friction or radiation. Most burns are due to heat from hot liquids, solids, or fire.

What type of burn is it?

- **Superficial burn** - These affect just the surface layer of the skin, causing redness and pain.
- **Partial thickness burns** - These are deeper burns, causing the skin to become blotchy and red or pale pink. These burns may become painful and develop blisters.
- **Full thickness burns** - These burns cause damage to all layers of the skin. This results in the skin becoming a brown or white leathery appearance. These burns require specialist treatment and you will likely be referred to a specialist burns unit.

Burns to the body, arms or legs

Burns in these areas are treated with special dressings which are designed to stop infections getting into the body. You should:

- Keep the dressing clean and dry.
- Take painkillers such as paracetamol and ibuprofen if necessary. Stronger painkillers such as codeine may be needed. You can ask about these while you are in the Emergency Department or at a pharmacy.
- Always take medication according to the manufacturers instructions.
- Keep the burnt area elevated as much as possible.
- Keep moving any joints near the burn to reduce stiffness.

Burns to the hands and feet

The general advice for these burns is the same as for burns to the body, arms or legs (see above).

We may treat the burn by using a special antiseptic cream (Flamazine), then applying a non-adhesive dressing with bandage support.

Burns to the face

Burns to the face are usually left open.

You may have been given cream to apply to keep the skin moist while it heals. Petroleum jelly (such as Vaseline) can also be used for this. You should apply it as advised until the burn has healed. You should:

- Wash your face once a day with water
- **DO NOT** use perfumed soap
- Avoid aftershave
- Avoid cosmetics and face creams

What to look out for

You should contact/return to the A&E Department if any of the following occur:

- Your dressing gets wet or falls off.
- You feel ill, have a high temperature or develop a rash.
- The burn becomes swollen.
- The burn becomes more painful.
- The area of redness around the burn gets bigger.

Later on

Although the skin may appear discoloured for several months your burn should be healed over within about 10 days.

The healed skin will probably be sensitive to sunlight for several months after a burn. You should always cover it up or use a high strength sun block if you are exposed to strong sunlight or a sun lamp within this time.

You have been treated for a minor burn or scald. If you need to return for further treatment and redressing you will be advised and an appointment given before your discharge.

If English is not your first language and you need help, please contact the Interpretation and Translation Service

Jeśli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy, skontaktuj się z działem tłumaczeń ustnych i pisemnych

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Dacă engleza nu este prima ta limbă și ai nevoie de ajutor, te rugăm să contactezi Serviciul de interpretare și traducere

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☎ : 0161 627 8770

@ : interpretation@pat.nhs.uk

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For advice on stopping smoking contact the Specialist Stop Smoking Service on 01706 517 522

For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897


For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service

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