

Further information can be obtained from:

NHS Direct	0845 4647
Or contact your GP	
Bluebell Ward, Lister Hospital, Stevenage	01438 781008
Children's A&E, Lister	01438 784732
Children's Centre QE11 Hospital Welwyn Garden City (open from 8.00am to 8.00pm, not 24hours)	01707 365351
Lister Community Children's Nurses	01438 781012
QE11 Community Children's Nurses	01707 365223
Patient Advice and Liaison Service	01438 284678

Burns and Scalds

Child Health Patient Information Leaflet



The information in this leaflet was taken from www.burnsurgery.org

www.enherts-tr.nhs.uk

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This leaflet aims to provide you with information about different types of burns, how to manage them and ways to prevent accidents occurring. Burns and scalds are unfortunately common in young children.

Superficial burn

This affects the top layer of the skin only. The skin looks red and is mildly painful.

The top layer of the skin may peel a day or so after the burn, but the underlying skin is healthy. It does not usually blister or scar. A good example of this is mild sunburn.

Partial thickness burn

This causes deeper damage. The skin forms blisters and is painful. However, some of the deeper layer of skin (the dermis) is unharmed. This means the skin can usually heal well, usually without scarring if the burn is not too deep or extensive.

Full thickness burn

This damages all layers of the 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 burn

This can cause damage inside the body even if there is little damage to the skin.

What causes burns and scalds?

Nearly half of severe burns and scalds in children occur in children under five years of age.

About half happen in the kitchen, with scalds from hot liquids being the most common. Many are the result of the child reaching up and pulling on a mug or cup of hot drink.

Other common causes include children falling or climbing into a bath of very hot water, and accidents with kettles, teapots, coffee-pots, pans, irons, cookers, fires, heaters and more recently hair straighteners!

How to prevent burns from happening to children

- Keep young children out of the kitchen unless they are fully supervised.
- The front of the oven, and even the washing machine, can become hot enough to burn a child. Keep them away.
- Use the back rings of cookers when possible. Turn handles towards the back and away from where a child may reach and grab.
- Never drink hot drinks with a baby or child on your lap.
- Never let a child drink a hot drink through a straw.
- Never heat up a baby's milk in the microwave. This heats the milk unevenly, and some parts may become very hot. Stir baby food well if it is heated in a microwave.
- Put cold water in the bath or sink first, and then bring up the temperature with hot water. Do not set the thermostat for hot water too high in case children turn on the hot tap.

Treatment

Immediately cool the burnt area with cool water (preferably running water) for at least 20 minutes. A shower or bath is useful for larger areas. Do not use very cold water or ice.

Remove rings, bracelets, watches etc. from the affected area. These may cause tightness or constriction if swelling occurs.

After cooling, remove clothing from the burnt area. However, do not try to pull off clothing that is stuck to the skin. This may cause damage.

A cold compress such as a tea towel soaked in cold water may be soothing over the burnt area. You can apply this after the initial cooling under cool water.

Before going to the hospital or doctor's surgery, cover the burn with cling film or a clean plastic bag and leave on until seen by a doctor or nurse. Apply cling film in layers around like a bandage, to prevent it causing pressure if the burn area swells.