

Burns in Children

Information for parents



You probably received a lot of information during your consultation following your child's burn. This brochure contains everything you need to know about how to care for your child at home. It also provides advice on prevention that you can share with those around you.

What is a burn?

A burn is a skin injury usually caused by contact with extreme heat (boiling water, very hot surface, etc.). It can also occur by exposing a part of the body to severe winter cold (frostbite). Contact with chemicals such as product cleaners or with electricity can also cause burns. The severity of the injury is primarily determined by the extent, depth and location of the burn.

What to do in case of a burn?



- Remove the child's clothes.
- Submerge the burn under cold water for a minimum of 20 minutes in order to limit the affected area as well as the depth of the burn. Warm water is not enough.
- If the burn is on the face, apply soaked compresses of cold water on the face.



Do not apply ice, petroleum jelly, butter, toothpaste, honey or any other product on the burn.



• Go to the Emergency Department as soon as possible so that an adequate cleaning can be done and a dressing to cover the wound can be apply.

Covering the burn with a clean sheet or blanket can help reduce the discomfort of the child during the transportation to hospital.

How to treat a burn

A burn can take a few days to a few weeks to heal, depending on the severity. Treatments will be explained to you throughout the healing process (e.g., dressings, pain and itch relief, treatment of the scars as it heals).

In case of a more severe burn, hydrotherapy (cleaning the burn in water, under sedation), a skin graft and joint follow-up in occupational and physical therapy may also be required.

Treatment of a facial burn

- Clean the face with plain water (tap water), gently patting the affected area to avoid bruising.
- Apply an antibiotic ointment prescribed by the doctor (e.g., Polysporin®).
- Lightly pat dry with a clean cloth before each application of ointment.
- Reapply ointment as required, 3 to 5 times a day, to keep the burned area moist, prevent infection and promote healing.

Thoroughly cleaning the skin and removing the previous layer of ointment is essential before each new application to prevent the formation of scabs which can slow wound healing and lead to infection.

Changing dressings

- The dressing should be kept clean and dry at all times. If it is wet or soiled, contact the clinic nurse to arrange a dressing change if needed.
- If the doctor asks you to change the dressing yourself, the nurse will show you how to clean the burn and change the dressing.
- A burn makes your child more susceptible to infection. It's important to wash your hands before changing the dressing (if you're changing it at home) and before applying antibiotic ointment (see Treatment of a facial burn section).
- Change the dressing as frequently as instructed by the doctor. Don't touch the dressing covering the burns before your appointment for the dressing change. Note that the dressing changes may take place at the CLSC or in a clinic other than that of the CHU Sainte-Justine.
- If silver dressing is used, it can remain in place up to 7 days. You'll have to come back to the hospital to have it changed. We'll let you know about the appointment frequency.
- To make your child more comfortable when changing the dressing, we recommend that you administer a dose of acetaminophen (e.g., Tylenol[®], Tempra[®], Atasol[®]) one hour before the appointment at the clinic. Anti-inflammatory drugs like ibuprophen (e.g., Advil[®], Motrin[®]) can also be added if acetaminophen is not efficient enough.

Hygiene

As long as your child has dressings on his body, you'll need to wash him/ her with a cloth. Don't give your child a bath or a shower to avoid getting the dressings wet.

When the burn has healed, you can start giving your child baths with a mild soap (e.g., unscented liquid soap).

Pain and itch relief

- If your child complains of discomfort or pain, administer medication as prescribed in the Emergency Department.
- If no prescription was provided, you can give him acetaminophen (e.g., Tylenol[®], Tempra[®], Atasol[®]) as directed on the package. Don't give any medication containing acetylsalicylic acid (e.g., Aspirin[®], Aspergum[®]). Use anti-inflammatory drugs (e.g., Advil[®], Motrin[®], Naprosyn[®]) only as needed, as these drugs increase the risk of bleeding.
- If medication fails to relieve the pain, you should go back to the Emergency Department or contact the medical team to reassess your child's condition.
- Your child may be itchy. This is a normal phenomenon during the healing process of a wound. However, he must not scratch himself, because he could infect the wound, slow down the healing or damaging his already weakened skin.
- Your doctor may also prescribe an antihistamine for the itching (e.g., Benadryl[®], available over the counter) to be given as needed.

Food

It's very important that your child has plenty of fluids and protein-rich foods (e.g., cheese, meat, fish, legumes). This is critical for wound healing. If your child refuses to eat or drink, you should notify the medical team or return to the Emergency Department sooner.

Things to monitor

Return to the Emergency Department immediately if your child

 Shows signs of infection (fever, redness around the dressings, swelling of the burned area/limb, yellow/green discharge or bad smell from the dressings).

- Refuses to eat or drink.
- Is still in pain despite taking medication.
- Is really not feeling well (listless, irritable, crying a lot, etc.).

Rehabilitation

When dressings are no longer required, rehabilitation continues. You can start massaging your child's burn 3 times a day with moisturizer (a vitamin-E-based cream can be used) or another product recommended by your doctor. Massages can help soften burn scars. They are recommended for a minimum of 3 months after the wound has healed.

Sometimes, occupational therapy is required. Keep in mind that scars can change over a period of 12 to 18 months. It's important to encourage your child to use the affected limb. For 18 to 24 months, SPF 50 sunscreen should be used as much as possible to protect the burned area and to avoid that the scars takes on a very dark color. In addition, the burned area will remain more sensitive to sun and cold during the following year, hence the importance of protecting it well.

Make sure to keep your appointments with the medical team — they're critical. The doctor has to assess the healing and adjust the treatment if necessary. Your child may be followed at the Burn Clinic, where he will meet a multidisciplinary team composed of doctors, nurses, occupational therapists, and physical therapists, and other stakeholders, as needed.

If your child is no longer being followed at the Burn Clinic and the scars thicken, harden or hurt, please contact the nurse at the Plastic Surgery Clinic.

How to prevent getting burn

- Turn pot and pan handles toward the back of the stove.
- Install smoke detectors in your home and check the batteries twice a year.
- Cover up your children when out in the sun and apply sunscreen.
- Prevent access to the oven door.
- Don't eat or drink hot food or beverages with a child on your lap.
- Make sure your children can't pull hot drinks off the table by tugging on the tablecloth.
- Always check the water temperature before putting your child in the bath.
- Make sure food and drinks aren't too hot before giving them to your child.
- Never leave extension cords plugged in and keep outlets covered.
- Make sure matches and lighters are out of reach of children.
- Install protective screens in front of fireplaces.
- Make sure that the heaters are compliant in order to prevent the little ones can put their hands in it.
- Be sure not to leave cups or containers of hot liquids on the edge of tables and counters.
- Be sure not to allow young children to use exercise treadmills, which cause significant friction burns from falls.

For any medical information

You can contact the nurse at the Plastic Surgery Clinic Monday through Friday from **8:00 a.m. to 3:30 p.m. at 514-345-4931, ext. 3444.**

If your child was hospitalized for a short period of time, you can reach the nursing staff who cared for your child at **514-345-4931**, ext. **4855 or 4853**.

Info-Santé: 811

If you think your child needs immediate attention or care that you can't provide, go to the Emergency Department.

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Committee on Client Documentation

Printed by

CHU Sainte-Justine Printing Press © CHU Sainte-Justine

F-4501A GRM 30012282 (rév 04-2022)