

4

Burns

Patient name: _____

NRS
DATE INITIAL

- I. The client/caregiver can list signs and symptoms of burns.
 - A. First degree (superficial)—pain, redness, and blanching with pressure
 - B. Second degree (partial thickness)—pain, blisters, redness, firm texture, and blanching with pressure
 - C. Third and fourth degree (full thickness)—dryness, pale, red or brown color, no pain, firm, and leathery skin texture
- II. The client/caregiver can list actions to take with minor burns.
 - A. Cool the burn. Hold under cold running water. If this is not possible, immerse the area in cold water or use cold compresses. Do not put ice on the burn (can produce further injury by causing frostbite).
 - B. Loosely cover area with sterile gauze bandage.
 - C. Watch for signs of infection.
 - D. Do not break blisters.
 - E. After healing, use sunscreen on area for at least a year.
 - F. Use proper handwashing before and after care.
- III. The client/caregiver can list actions needed if third-degree burn.
 - A. Call for emergency assistance.
 - B. Do not remove burnt clothing.
 - C. Do not immerse severe burns in cold water. This could produce shock.
 - D. Check for signs of circulation and respiration. Begin CPR if needed.
 - E. Cover area with a cool, moist, sterile bandage; a clean, moist cloth; or moist towels.
- IV. The client/caregiver can list treatment measures to promote healing.
 - A. Eat a high-protein, high-calorie diet.
 - B. Take vitamin C and vitamin B complex supplements.
 - C. Increase fluids to 2000 to 3000 ml per day unless contraindicated.

NRS
DATE INITIAL

Admission: _____

- D. Avoid contact with persons with infections (especially upper-respiratory infections).
- E. Use proper handwashing and wound care to prevent contamination or infection.
- F. Exercise as tolerated with planned rest periods.
- G. Keep follow-up appointment with physician, laboratory, and physical therapy.
- V. The client/caregiver can list measures to prevent muscle shortening or contractures.
 - A. Perform range of motion exercises.
 - B. Position in good body alignment.
- VI. The client/caregiver can list measures to decrease pain.
 - A. Take pain medication before painful procedures and as directed by physician.
 - B. Use relaxation techniques.
 - C. Wear loose-fitting cotton garments.
- VII. The client/caregiver can list symptoms related to burns that need immediate attention.
 - A. Seek medical attention for symptoms such as
 - Fever
 - Pus-like or foul-smelling drainage
 - Excessive swelling
 - Blisters filled with greenish or brownish fluid
 - Burns that do not heal in 10 days to 2 weeks
- VIII. The client/caregiver can list possible complications.
 - A. Dehydration
 - B. Acute respiratory distress
 - C. Septic shock (infection)
 - D. Circulatory collapse
 - E. Anemia
 - F. Disuse atrophy and contractures
 - G. Scarring
 - H. Stress diabetes
 - I. Depression

(Continued)

RESOURCES

The Phoenix Society for Burn Survivors
www.phoenix-society.org/

Child safety: Prevent burns, 2007
www.mayoclinic.com/health/child-safety/CC00044

American College of Emergency Physicians on “Avoiding Household Burns”
www.acep.org/webportal/PatientsConsumers/HealthSubjectsByTopic/Burns/default.htm

Support groups

Counseling services

Clergy

REFERENCES

- Ackley, B. J., & Ladwig, G. B. (2006). *Nursing diagnosis handbook: A guide to planning care*. St. Louis: Mosby Inc.
- Avoiding household burns. (2007). Irving, TX: American College of Emergency Physicians.
- Canobbio, M. M. (2006). *Mosby's handbook of patient teaching*. St. Louis: Mosby Inc.
- Cohen, B. J., & Taylor, J. J. (2005). *Memmler's the human body in health and disease* (10th ed.). Philadelphia: Lippincott Williams & Wilkins.
- Lutz, C., & Przytulski, K. (2001). *Nutrition and diet therapy*. Philadelphia: F. A. Davis Company.
- Nutrition made incredibly easy*. (2003). Philadelphia: Lippincott Williams & Wilkins.
- Taylor, C., Lillis, C., & LeMone, P. (2005). *Fundamentals of nursing*. Philadelphia: Lippincott, Williams & Wilkins.