Burn

What is a burn?

A burn is damage to body tissues caused by sunlight, heat, fire, electricity, friction, radiation, chemicals, hot water or steam. Burns are described by the damage they cause. A mild burn that affects only the top layer of skin, causing redness, is called a first-degree burn or superficial burn. A burn that is red with blisters and affects the top layer of skin and supporting tissues is called a second-degree or partial thickness burn. More severe burns that affect all layers of skin and supporting tissues, causing a white color or black charring, are called third-degree or full thickness burns. Full thickness burns that also affect the fat, muscle and bone under the skin may be called fourth-degree burns. Even burns that are not as deep may be considered severe if they cover a large area of your body. A person who is burned may also have damage to the eyes (ocular burn) with facial burns or to the airway (inhalation burn) from breathing in hot air, steam, smoke, or chemicals.

What can I expect in the hospital?

You may need to stay in the hospital because:

- · Your burn is severe or covers more than 10% of your total body surface area.
- · Your burn affects your face, hands, feet, genitals, or large joints.
- Your burn has damaged your airway.
- You have a medical condition that is making your burn more difficult to treat.
- You have an electrical or chemical burn.

Several things may be done while you are in the hospital to monitor, test, and treat your condition. They include:

Monitoring

- · You will be checked often by the hospital staff.
- · Your heart rate, blood pressure, and temperature will be checked regularly.
- A cardiac (heart) monitor may be used to keep track of your heart rate and rhythm.
- Your blood oxygen level will be monitored by a sensor that is attached to your finger or earlobe.
- Your fluid intake will be monitored closely by keeping track of everything you eat and drink and any IV fluids you receive.
- Your fluid output will be monitored closely by keeping track of the amount of urine and bowel movements you produce. You may have a small tube (catheter) placed into your bladder through the urethra (the opening from the bladder to the outside of the body) to drain and measure urine from the bladder.

Testing

Testing may include:

- Arterial blood gas (ABG): A blood test to measure the levels of oxygen and carbon dioxide in your blood.
- Blood, urine, or other tests to check for fluid and electrolytes, infection, or organ function.
- · Tests to look for abnormalities inside your body, which may include:
 - · X-rays: Pictures of the inside of the lungs to check for damage.
 - Bronchoscopy: A test in which a slim, flexible, lighted tube called a bronchoscope is passed through your mouth and down into your lung to check for damage.
 - Electrocardiogram (ECG): A test that measures and records the electrical activity of your heart.
 - Endoscopy: A test in which a long, flexible tube and tiny camera is put into mouth, down your esophagus, into your stomach and into the upper small intestine to look for damage if you have swallowed chemicals.

Treatment

The treatment for a burn depends on its cause, how severe the burn is, how well you respond to treatment, your overall health, and any complications you may have.

- You will have a small tube (IV catheter) inserted into a vein in your hand or arm. This will allow for medicine to be given directly into your blood and to give you fluids.
- You will receive oxygen through a small tube placed under your nose or through a mask placed over your face. In very severe cases, you may need a tube put into your windpipe to help you breathe.
- You may have a tube put through your nose down into your stomach, called a
 nasogastric or NG tube. The tube may be used to give fluids or medicine, or
 with suction to help relieve pressure from air or fluids in your stomach and
 intestine.
- You may need treatment to remove the burned tissue. Your provider will choose the best debridement method.
 - Surgical: The burned tissue is removed with a sharp surgery tool or laser.
 - · Chemical: Medicine is put on the burned tissue to help remove the burned tissue.
 - Mechanical: Dressings or a stream of water is used to remove the burned tissue.
 - Autolytic: A wet or moist dressing is put on the burned tissue to keep the burned tissue moist and allow your body to grow new, healthy tissue underneath it.
- · You may need surgery to treat your burn. Surgery may include:
 - Escharotomy or fasciotomy: Surgery to cut through the burned skin, fatty tissue, and connective tissue (fascia) to relieve pressure from swelling in the area of the burn.

- Skin grafts: Surgery that uses skin taken from another area of your body, a donor, or an animal to cover the burned area after the burned tissue is removed to help new skin grow.
- Your provider may prescribe medicine to:
 - Treat pain
 - Treat or prevent an infection
 - · Control your blood pressure
 - Replace or supplement nutrients, hormones, or other chemicals that your body may need to recover from the burn
 - · Reduce the workload of the heart or treat any abnormal heart rhythms
 - Help relax your airways
 - · Reduce swelling in the airways
- You may need physical or occupational therapy to help prevent complications and improve your recovery. Most rehabilitation programs include:
 - Physical therapy to help prevent scars and muscle contractures and regain muscle strength
 - Occupational therapy to help you relearn ways to do the tasks that you did before the burn

What can I do to help?

- · You will need to tell your healthcare team if you have new or worsening:
 - Trouble breathing
 - Bluish color of your skin below the level of the burn
 - · Numbness in your feet or hands below the level of the burn
 - · Chest discomfort (pressure, fullness, squeezing or pain) that lasts more than 5 minutes or goes away and comes back, or chest discomfort that goes to your arms, neck, jaw or back
 - · Fast, slow, or irregular heartbeat
 - · Increased pain at the site of the burn
 - Increased drainage from the burned area
 - Increased thirst and dry mouth
 - Depression
- Ask questions about any medicine, treatment, or information that you do not understand.

How long will I be in the hospital?

How long you stay the hospital depends on many factors. The average amount of time to stay in the hospital with a burn is 4 to 9 days.

If your burn was severe or you have complications, you may stay in the hospital longer. You may need to go to a rehab facility to continue your burn recovery program before going home.

Developed by RelayHealth.

This content is reviewed periodically and is subject to change as new health information becomes available. The information is intended to inform and educate and is not a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional.

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