Burn or scald

IN A MEDICAL EMERGENCY CALL TRIPLE ZERO (000) FOR AN AMBULANCE.

DRSABCD Danger ▶ Response ▶ Send for help ▶ Airway ▶ Breathing ▶ CPR ▶ Defibrillation
The DRSABCD Action Plan is the first step when providing first aid. Use this to assess the immediate situation.

WARNING

• Do not apply lotions, ointments, fat or ice to a burn.
• Do not touch the injured areas or burst any blisters.
• Do not remove anything sticking to the burn.
• If the burn is larger than a 20 cent piece, or deep, seek medical aid.

SIGNS AND SYMPTOMS

Superficial burns The area is:
• red
• very painful
• blistered.

Deep burns The area is:
• mottled red and white
• dark red or pale yellow
• painful
• blistered.

Full thickness burns The area:
• is white or charred
• feels dry and leathery.
• Because the nerves are destroyed, the pain will not be as great as in a superficial burn.

WHAT TO DO

If the patient’s clothing is on fire

1 Stop the patient from moving around.
2 Drop the patient to the ground and cover or wrap them in a blanket or similar, if available.
3 Roll the patient along the ground until the flames are extinguished.
4 Manage the burn.

For all other burns

1 Follow DRSABCD.
2 If the burn is severe or if it involves the airway, call triple zero (000) for an ambulance.
3 As soon as possible, hold the burnt area under cool running water for 20 minutes.
4 Remove any clothing and jewellery from the burnt area, unless they are stuck to the burn.
5 Cover the burn with a light, loose nonstick dressing, preferably clean, dry, non-fluffy material (eg plastic cling film).
6 Continue to check the patient for shock, and treat if necessary.

A ‘cold’ burn is actually tissue damage from extreme cold, and accordingly treatment is different from other burns. See the fact sheet on frostbite.

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