MEDICAL SOCIAL WORKER
All children and families will be spoken to by the social worker and are used as a form of support while attending the Burns service.

PLAY SPECIALIST
There are two play specialists on the ward who work Mon-Thurs. They are involved with assisting nursing staff during COD’s by providing distraction for your child. They are also available to help your child, through play, to reduce anxiety.

PAIN NURSE
This nurse specialises in pain control and will review at any time that there is an issue controlling your child’s pain.

PSYCHOLOGIST
Sometimes it may be needed to involve a psychologist if your child is having nightmares or appears overly affected by the injury.

If you or your child have any queries about any issue, do not hesitate to ask anyone involved in your child’s care. We are here to help reduce any fears/anxieties while making your hospital stay as comfortable as possible.

For more information on Burn Injury please contact St Annes ward on 01 4096100

Our Lady’s Children’s Hospital, Crumlin, Dublin.

Please see link to Parent information leaflets on the OLCHC website that may be of interest to you.

http://www.olchc.ie/Children-Family/Parent-Patient-Information-leaflets/Parent-Patient-Information-Leaflets.html

Remember: Ask your nurse if you are unsure about anything about your child’s care.

ADDITIONAL INSTRUCTIONS

Developed by G Noone – St. Annes Ward

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Welcome to St. Anne's Ward

This leaflet is designed to give you a brief outline of what may happen to your child while being treated for a burn injury in Our Lady's Children's Hospital, Crumlin. Each child is individually assessed and specific care will be given and explained according to your child's needs at all times.

What is a burn injury?
A burn is an injury causing damage to skin by means of heat (scald, contact, flame), cold (frostbite), electricity or chemicals. It is described as being superficial, partial thickness or deep. Assessment of the burn injury takes place at presentation, for size (percentage) and depth, and will continue to be assessed at each dressing change. Here you will be informed of any changes and progress regarding the management of the burn.

Care during hospitalisation
As well as normal day to day nursing care, there is specific care related to the care of a burn which include:

Change of dressings (COD)
Dressings are normally changed every 3 days on the ward however, depending on the type of burn, they may need to be changed daily or repadded / replaced before this time. Even though it may be upsetting for both you and your child, a bath is the best way to clean and assess the injury.

There are many different types of dressings in use, but the best option will be chosen following assessment of the burn at each COD. Photos and wound swabs are taken at least weekly to observe and record changes. These are used to show staff involved, who are unable to attend dressing change, to see how the burn is progressing.

Surgery
In some cases, it may be necessary for your child to have a surgical procedure called a Split Skin Graft (SSG). This will be explained in more detail if required.

Pain
A burn can be quite painful especially for the first few days and during/after COD. Your child will be on regular pain relief including paracetamol, ibuprofen and other stronger analgesics depending on pain levels and requirements. They will always get analgesia prior to COD and some will get a mild sedative (‘sleepy medicine’) which will help reduce some anxiety during this stressful time.

Itch
As burns heal, they can become itchy. An antihistamine will be prescribed when and if needed. Also, moisturising the healed skin is effective in managing itch.

Diet
A good nutritional diet – high protein, high calorie – is important for wound healing. We will monitor your child's dietary intake closely and will advise accordingly. It may be necessary to pass a nasogastric tube (through the nose into the tummy) to assist with feeding if he/she is not eating/drinking adequately. This will be discussed further if needed.

Temperatures
It can be common for your child to spike a temperature of >38C after COD and it doesn't necessarily mean there is a problem. However, if it persists, it may be necessary to do further investigations i.e. blood tests, chest x-ray, urine sample, ear nose and throat review, to out rule other sources of infection. It may also be necessary to involve the Infectious Diseases team with regards to possibly commencing antibiotics.

Multidisciplinary team
You will come into contact with a number of hospital staff during your child’s stay. The following is a list of some of those people you will meet.

Nursing staff
A designated nurse will be assigned daily and he/she will be your child’s main carer to include basic nursing care as well as COD and other needs.

Medical staff
Your child will be admitted under a Plastics Consultant and their team, who will review your child daily. You may not always see the Consultant but if you want to speak to them at any stage, we will contact them for you. Also, there may be a referral made to a Medical Consultant for other issues that arise.

Physiotherapist & Occupational therapist
These will provide information on exercises/splints/garments, that may be needed to assist healing of the burn both during and after hospitalisation. They will advise about contracture prevention and scar management.

Dietician
The dietician will assess the nutritional needs of your child and advise accordingly.