

Follow Up

Each child heals at different rates. We will keep in close contact with you and arrange an appointment after the first couple of days to ensure you are managing to provide the care required. Prolonged healing is usually associated with poorer outcomes with scarring. If we feel this may be a potential problem, we will refer you to the appropriate member of our team for scar management.

It is important to note that, after a facial burn/injury, the skin is more susceptible to burning and can have further skin damage from the sun for at least up to 2 years post injury. Therefore, Factor 50 Sun cream is always advised for protection.



Please contact the child's parents if you are worried about the child in your care at any stage.

For more information on **Facial Burns / Abrasions**, please contact The Burns & Plastics Department in Children's Health Ireland at Crumlin, Dublin.

Contact details:

Phone: 01 409 6496

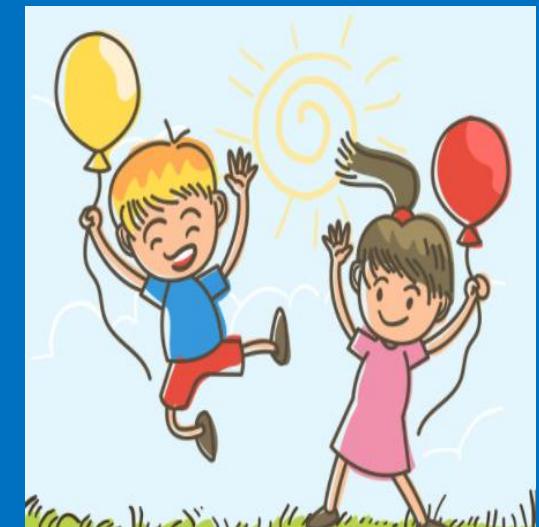
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Information for Parents / Carers of a child Care with Facial Burns / Abrasions



Children's Health Ireland at Crumlin

Phone: 01 409 6100

The face is a difficult area to manage with standard dressings therefore healing is achieved with regular washing and application of an antimicrobial gel three times a day. The purpose of this management is to promote healing while also minimising the risk of infection and potential scarring. This leaflet will advise you on how to manage your child's facial burn/abrasion.

Occasionally some complications or concerns may arise, so please contact us in the clinic on 01 4096496 for further advice. If it is outside clinic hours, which are Monday-Friday 07.00-15.00, you can contact the plastics team by ringing the main hospital on 01 4096100. Your child could become extremely unwell quite quickly, so it is important that you seek prompt medical advice if you are concerned at all.

Some complications include:

Swelling: After a facial burn/injury, it is quite common to have some facial swelling around the eyes, lips, cheeks, or neck for the first few days. Your child would have been assessed at initial presentation by the doctors to ensure this is not an issue, but if you are concerned please let us know especially if you feel there is a problem with their breathing. Usually, swelling reduces when the child is kept upright.

Infection: This is rare but if there are any signs or symptoms of infection (temperature, cellulitis/redness surrounding the area, swelling or excess pain), contact us or your GP/ED for further advice. Your child may need to be started on some antibiotics or even admitted to hospital for treatment.

Pain: If you feel Calpol® or Nurofen® is not sufficient to help control pain while cleaning their face they may need review for possible admission and stronger analgesia for a few days.



Procedure for cleaning your childs burn/abrasion:

- Apply the antimicrobial gel you obtained from the Nurse/Doctor/Pharmacy, to your childs facial wounds 3 times a day following the step by step instructions below. If the wounds become dry in between applications, you can apply petroleum jelly e.g. Vaseline/Paraffin gel, to keep the wounds moist.
- Give adequate pain relief approximately 30 minutes before starting procedure. This can be reduced (after the first couple of days) when you notice the face healing or if you feel your child does not need it anymore.
- Wash and dry your hands before and after each application of the gel.
- Wash your childs face with a soft cloth and non-perfumed body wash e.g. Elave. Use a circular motion to help remove excess residue from previously applied gel, ooze, and dead/dry skin. You will need to use a little pressure while cleaning to help do this.
- All scabs may not come off at each cleaning, but with regular washing and care, they will decrease and eventually come away.

- Pat the skin dry.
- Sometimes the face may bleed slightly during cleaning, but this can be stopped by leaving a damp cloth on the area for a couple of minutes.
- Next, apply the gel using a light pressured circular massage to all raw areas on the face, not forgetting the ears, nose, lips, or eye area.
- If the scalp and hair line are also affected, it is important to wash and apply the gel here too. A member of the Plastic & Burns team may have to shave some of the hair if it is difficult to access this area or if there is an indication of delay in wound healing.
- As areas of the face start to heal, the skin will become pink and have no raw skin evident. These areas will no longer need the gel but will need to be moisturised with a simple non-perfumed moisturiser e.g. Aveeno moisturising lotion, 3 times a day.
- Apply the moisturiser with a circular massage technique to continue the healing process and minimise scarring. A member of the Plastic & Burns team will instruct you on how to do this.
- Some areas may be deeper than others and will take a little longer to heal but usually healing is within 2 weeks. The discolouring of the area will be evident for the next few months (red/dark pink), however this will subside gradually with consistent moisturising and massaging of the face.