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First aid for burns with blisters

Go to the main content Appropriate first aid should be used to treat burns or boiling as soon as possible. This limits the degree of skin damage. You can apply the following first aid techniques to yourself or to another person who is burned. Stop the burning process as soon as possible. This can mean removing the person from the area, burning the flames with water or suppressing the flames with a blanket. Don't put yourself in danger of being burned as well. Remove any clothing or jewellery near the burnt skin area, including baby diapers. But do not try to remove anything that is stuck in the burnt skin, as it can cause more damage. Cool the burn with cold or lukewarm running water as soon as possible after the injury for 20 minutes. Never use ice, ice water, or any cream or fatty substance, such as butter. Keep yourself or the person warm. Use a blanket or a layer of clothing, but do not place them in the damaged area. Keeping warm prevents hypothermia, where a person's body temperature drops below 35C (95F). This is a risk if refrigeration is a large burnt area, especially for young children and the elderly. Cover the burn with foil. Put the foil in a layer above the burn, instead of wrapping it around a limb. A clean, clean plastic bag can be used for burns to the hands. Treat the pain of burning with the help of paracetamol or ibuprofen. Always check the manufacturer's instructions if you are using over-the-counter medicine. Children under 16 years of age should not be given aspirin. Sit upright as much as possible if your face or eyes are burned. Do not lie down as long as possible, as this will help to reduce swelling. Once you have taken these steps, you need to decide whether additional medical treatment is necessary. Go to the hospital for an accident and emergency (A&T; Class E: large or deep burns greater than the affected person's hands burns of any size causing white or charred skin burns to the face, hands, arms, legs, legs or genitals causing blisters in all chemical and electrical burns can also get medical help immediately if the person has burns : other injuries that need to be treating going into shock - signs include cold , damp skin, sweating, rapid shallow breathing, and weakness or dizziness pregnant over the age of 5 years have a medical condition, such as heart, lung or liver disease, or diabetes weakened immune system (the body's defense system) – for example, because of HIV or AIDS, or because they are receiving chemotherapy for cancer If someone has inhaled smoke or smoke, they should also consult a doctor. Some symptoms can be delayed, and may include: sore throat with difficulty breathing disrupting facial burns of nasal hair See recovery from burns and scaldings to find out how to treat severe burns. Electrical burns do not appear to be serious, but they can be very harmful. If you have electrical burns, you should immediately consult a doctor in an emergency room. emergency room. If the person is damaged by a low voltage source (up to 220-240 Volts), such as domestic electricity supply, safely turn off the power supply or remove the person from the electrical source using a material that does not lead to electricity, such as a wooden stick or a wooden chair. Do not approach a person who is connected to a high voltage source (1000 volts or more). Acid and chemical burns can be very harmful and require immediate medical attention from A&T; In this department. If possible, find out what chemical caused the burn and tell Health Professionals about A&T;T E. If you help someone else, pick up the right protective clothing and then: remove contaminated clothing from the person, if the chemical is dry, brush off the skin with running water to help remove traces of the chemical from the burnt area In case of sunburn, follow the following tips: If you notice any signs of sunburn such as hot, red and painful skin , move into the shadows or preferably inside. Take a cool bath or shower to cool the burnt skin area. Apply aftersun cream to the affected area to hydrate, cool and soothe it. Do not use fatty or oily products. If you have any pain, paracetamol or ibuprofen will help relieve it. Always read the manufacturer's instructions and do not give aspirin to children under 16 years of age. Stay hydrated by drinking plenty of water. Pay attention to the signs of heat exhaustion or heat stroke, where the temperature inside the body rises to 37-40 °C (98.6-104F) or higher. Symptoms include dizziness, rapid pulse or vomiting. If a person's heat exhaustion gets into a cool place quickly, as the water is ingested and the suit is loosened, then it is necessary to start to feel better within half an hour. If not, they can cause heatstroke. It's a medical emergency, and you need to call 999 for an ambulance. Learn more about what to do if someone has heat exhaustion or heatstroke. The burn penetrates all layers of the skin. The skin is skin-like or charred with looking, white, brown, or black spots. The person is an infant or an older person. 1. Stop Burning Extinguish the fire immediately or stop the person from coming into contact with hot liquid, steam or other material. Help the person stop, drop, and roll to quell the flames. Remove the smoldering material from the person. Remove hot or burnt clothing. If the dress sticks to the skin, cut or tear it off. 2. Remove the reducer clothing Immediately remove jewelry, belts and tight clothing. The burns swell quickly. Then take the following steps: 1. Cool Burn Keep burnt skin under cold (not cold) running water, or immerse in cold water until the pain subsides. Use compression if running water is not available. 2. The burn cover must be protected by a sterile, non-adhesive bandage or clean cloth. Do not use butter, oil, lotions or creams if they contain a scent). Apply oil-based ointment two to three times a day. 3. Treatment of pain 4. When to see a doctor if: You signs of infection such as increased pain, redness, swelling, fever or leaking. The person needs tetanus or booster shots, depending on when the last injection. Tetanus booster should be administered every 10 years. The burn blister is larger than two inches or leaks. Redness and pain last longer than a few hours. The pain is getting worse. Hands, legs, face or genitals are burned. 5. Follow-up 1. Cool Burn Immerse in cold water for 10 or 15 minutes. Use compression if running water is not available. Don't apply ice. This can reduce body temperature and cause further pain and damage. Do not break blisters or apply butter or ointments that can cause infection. 2. Loosely protect the burn cover with a sterile non-stick bandage and secure it in place with gauze or adhesive tape. 3. Prevent Shock Unless the person has a head, neck, or leg injury, or it would cause discomfort: Elevate feet by about 12 inches. Lift the burn area above the heart level if possible. Cover the person with a coat or blanket. 4. See the Doctor The doctor can test burn severity, antibiotics and painkillers and administer a tetanus shot if necessary. 1. Call 911 2. Protect the burn area with a loosely sterile non-stick bandage or a sheet or other material in large areas that does not leave the lint in the wound. Separately burned toes and fingers dry sterile dressings. Do not soak the burn in water or apply ointments or butter that can cause infection. 3. Prevent Shock Unless the person has a head, neck, or leg injury, or it would cause discomfort: Elevate feet by about 12 inches. Lift the burn area above the heart level if possible. Cover the person with a coat or blanket. In case of respiratory burn, do not place a pillow under the person's head when the person is lying down. This could close the airway. A man with a face burn should sit up. Check your pulse and breathing to watch for shock until emergency help arrives. 4. See the doctor doctors give oxygen and fluids if necessary and treat the burn. SOURCES: CDC: Mass Casualties: Burns. General Practitioner: First Aid: Burns. Subbarao, I. AMA Manual for First Aid and Emergency Care, Random House Reference, 2009. University of Rochester Medical Center: Hot Tips: First Aid Burns. Merck Manual: Burns. New York Presbyterian: Burns. Thermal Burns Information eMedicineHealth © 2020 WebMD, LLC. All rights reserved. How long it takes to recover from a burn or scald depends on how severe it is and how it is treated. If the wound is infected, seek further medical help. If the burn or scalded is mild and treated at home, it usually heals without the need for further treatment. Learn more about first aid for burns and sources. While the skin heals, keep the area clean and do not apply any creams or fatty substances. Do not break the this may lead to infection. If you've scalded the inside of your mouth drinking something hot, try to avoid things that irritate the scalded area, such as hot and spicy foods, alcohol and smoking until the area heals. Cure. Burns or scalding that only the uppermost layer of skin (superficial epidermal burns) usually heal about a week without scarring. If there is a burn or scalding that requires medical treatment, then it is necessary to evaluate it to determine the level of care required. The health care professional treats you: assess the size and depth of the burn by testing the area clean of the burn, making sure not to burst blisters covered with the burn sterile dressing (usually a pad and a gauze bandage to keep it in place) offering pain relief if necessary (usually paracetamol or ibuprofen) Depending on the burn occurred , you may need to inject an injection to prevent tetanus caused by the bacteria that enter the injury. For example, tetanus injections may be recommended if there is a chance the soil has been placed in the wound. Your bandage will be checked regularly for signs of infection. It will be changed regularly until the burn is completely healed. Minor burns affecting the outer layer of the skin and some underlying layers of tissue (superficial skin burn) tend to heal in about 14 days, leaving minimal scarring. If the burn is moderate or severe, it can be referred to a special burn care service. In some cases, surgery may be required to remove the burnt skin area and replace it with a skin graft taken from another part of the body. See plastic surgery techniques for more information about this. More severe and deeper burns can take months or even years to fully heal and usually leave some visible scarring. The expert opinion is divided on the treatment of blisters caused by burns. But it is recommended not to break out any blisters. If the burns caused a blister, consult a doctor. The blister is likely to remain intact, although some burn units in hospitals follow the policy of deroofting blisters. Deroofing means removing the top layer of skin from the blister. In some cases, a needle can be used to make a small hole in the blister to drain the liquid out. It is called aspiration and can be carried out with large blisters or blisters, which are likely to burst. The healthcare professional will advise you on the best way to care for blisters and what type of dressing should be. In the first few years after burning, you should try to avoid exposing damaged skin to direct sunlight, as this can cause blistering. He's particularly sensitive in the first year after the injury. This applies to a new skin area after a skin graft. It is important to cover the area with cotton clothing. If you have the burn or scalded on your face, wear a peaked cap or wide-brimmed hat when you're out in the sun. Full solar lock blocking (e.g. with a sun protection factor of 50) should be used in all affected areas. The area may be exposed to sunshine again about years after injury, but it is still very important to apply high-factor sun cream (SPF 25 25 above) and stay away from the midday sun. Whether the burn requires medical attention or not, you should consult a doctor if: the wound becomes painful or smelly develops to a high temperature of 38C or higher in dressing will be soaked in fluid leaking from the wound the wound has not healed after 2 weeks

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