



BEESWIFT
FOCUSED ON SAFETY

Product Code

CM1312

Available in Sizes

ONE SIZE

Available in Colours

White
CM1312

Click Medical First Aid for Burns Poster



- Fully coloured illustrations and clear, easy to follow text
- Clear step by step instructions
- Compiled by qualified health and safety practitioners
- Encapsulated finish for superior durability
- Fully updated with the latest guidance
- Size 59 x 42cm (A2 Paper size)

First Aid for Burns

1. INTRODUCTION

The information contained within this poster will assist you in identifying the cause, severity and percentage of a burn. Do not use cold or chemical solutions to treat a burn. If a burn is sustained while the work place has been involved then an incident or you safety provider. Do not attempt to treat a burn until you can contact your general healthcare team (see inside).

CAUSE	EFFECTS	CONSEQUENCES
Thermal (dry)	Heat	Thermal injury to the skin and underlying tissues
Thermal (liquid)	Hot liquid	Thermal injury to the skin and underlying tissues
Thermal (gas)	Hot gas	Thermal injury to the skin and underlying tissues
Chemical	Acid	Acid injury to the skin and underlying tissues
Chemical	Alkali	Alkali injury to the skin and underlying tissues
Chemical	High Voltage Power Line	Electrical injury to the skin and underlying tissues
Chemical	High Voltage Power Line	Electrical injury to the skin and underlying tissues

2. CLASSIFICATION OF BURNS

SUPERFICIAL

- Reddening and discoloration of the skin.
- Some swelling.
- Pain.

PARTIAL THICKNESS

1. A combination of discoloration, swelling and blistering of the skin.
2. Any blisters have burst a clear yellow fluid may leak from the skin (blister) fluid may leak from the skin.
3. Very tender to touch or when touched.
4. Pain.

FULL THICKNESS

1. Prolonged appearance.
2. Surrounding skin around burn site.
3. No pain at all.
4. Clear white fluid may leak.
5. Clear white fluid may leak.
6. No pain at all.
7. No pain at all.
8. No pain at all.
9. No pain at all.
10. No pain at all.

3. TREATMENT OF BURNS

1. Ensure that the cause of the burn does not endanger your life or that of the casualty.
2. Assess that the casualty is still conscious (if you are not, carry out the ABC or resuscitation).
3. Establish the cause of the burn - if a chemical is suspected get the MSDS.
4. Immediately begin to cool the burn as soon as possible. Continue cooling under water for 10 minutes. **DO NOT** use cold, you may harm the body temperature of the burn.
5. If the burn has affected a limb e.g. arm, remove any constrictive items such as watches, rings, etc. at the site of any swelling.
6. Do not remove or directly or indirectly touch the burn.
7. Initially cool under running water for 10 minutes or until burning sensation has stopped and then apply a non-adhesive sterile dressing.

DO NOT

- Apply any ointment.
- Apply adhesive dressings.
- Remove damaged skin.
- Apply ointment to the burn.
- Cover with 'fluffy' dressings.
- Apply dressing too tightly.
- Apply butter/Vaseline/cream.
- Remove damaged clothing.
- Apply ice.

4. CHEMICAL BURNS

1. If a chemical burn is suspected, the burn must be washed with copious amounts of water until the casualty's Airway, Breathing and Circulation have been checked.
2. The contaminated skin must be washed under running water for at least 20 minutes.
3. Ensure that the chemical is washed off the skin and not on to unaffected areas.
4. Any contaminated clothing must be removed (ensuring it is not adhered to the skin) to allow the water to irrigate the skin correctly.
5. Attempt to establish the cause of the burn.
6. Do not remove or directly or indirectly touch the burn.
7. Initially cool under running water for 10 minutes or until burning sensation has stopped and then apply a non-adhesive sterile dressing.
8. As the supply of chemical is exhausted, other sources of water should be used to irrigate the burn.

Take Care not to inhale any fumes. Always wear your Personal Protective Equipment (PPE.)

5. DRESSING A BURN

1. When a burn has been cooled sufficiently a sterile non-sticky dressing should be applied.
2. Gently remove any rings, watches, belts, shoes or constricting items before the casualty begins to bleed.
3. **DO NOT** attempt to remove any clothing that is stuck to the burn.
4. A sterile bandage pad soaked in water dressing is ideal as it helps prevent burn progression and infection.
5. If a suitable dressing is not available, you may improvise using a clean, damp length of clothing.
6. **DO NOT** apply any ointment that may cause a toxic effect.

6. CLOTHING ON FIRE

If a casualty's clothing is on fire the greatest danger will be to their airway. Due to a combination of pain and heat they may be unable to see and therefore will not be able to escape the area of the casualty.

ACTION TO TAKE

1. Remove the casualty from the fire.
2. Arrange to get the casualty flat on the floor - you may have to physically press them over using a blanket or the nearest object.
3. Once on the casualty is flat on the floor try to smother the flames. Smother any fire blanket or improvise with a wet sheet or curtain.
4. Smother the flames.
5. Remove the casualty's Airway, Breathing and Circulation as per 3.
6. Cool the burn.
7. **DO NOT** cover your head, you may lower the body temperature too much. **DO NOT** use the casualty. Extinguish fire first if possible.

7. COMPLICATED BURNS

AIRWAY

All burns involving the airway are potentially life threatening. Attempts to treat any potential burns and (BSP) by help.

BURNS TO THE RESPIRATORY SYSTEM

As well as in breathing, a damaged airway, throat and associated tissue may be damaged by hot fumes and smoke. This may cause difficulty in the throat and require urgent medical attention.

CIRCULATION

Normally resulting from chemical contamination, a large burn involves damage to the skin that, as well as the loss of a large amount of body fluid, causes a circulatory shock of the body. This is a life-threatening condition. There is a risk of infection. (See BS 6871:2 for help).

8. BURN SEVERITY

The severity of burns depends on the area of the body affected and the extent of the burn (depth and area).

DO NOT attempt to remove any clothing that is stuck to the burn.

CAUSALTY SHOULD BE REFERRED TO HOSPITAL IN THE FOLLOWING INSTANCES:

- Any Partial thickness burn involving more than 1% of the body's surface.
- Any Full thickness burn, any burn involving children.
- All burn involving face, hands, feet, or genital areas.
- All burns that extend around a limb.
- Any burn with a raised pattern of blisters.
- Any burn of depth or severity of burn.

Accident & Emergency Department

© 2024 Beeswift First Aid Ltd. All rights reserved. The information contained on this poster is for general guidance only and should be used in conjunction with the relevant MSDS.

