

# Burn Cleansing

Burns are a common presentation to the emergency department. It is important that they are adequately cleaned prior to dressing to reduce the risk of complications such as toxic shock syndrome. Prior to commencing the cleansing of a burn, it is essential that 20 minutes of active cooling has been undertaken. Also ensure that the child will be able to tolerate the procedure, utilising non-pharmacological and pharmacological methods to support comfort.

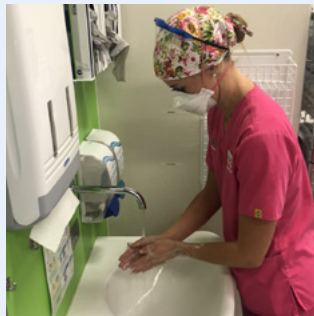
## 1 GATHER EQUIPMENT

Gather your equipment.



## 2 PREPARE

Perform hand hygiene. An aseptic clinical handwash of 60 seconds is sufficient.



## 3

Put warm tap water in clean bowl. Apply QV wash to a damp cloth.



## 4

## PROCEDURE

Cleanse the wound with the already prepared dampened cloth with QV wash. Allow blistered skin to be rubbed off during this process.



## 5

If blisters are thick and unable to be wiped away, with care, use sterile scissors to remove the top of the blister.



## 6 PREPARE

Dilute 10mL Chlorhexidine Gluconate 5% with 500mL water.



## 7

## PROCEDURE

Rinse the burn with the diluted chlorhexidine solution prepared in step 6.



## 8

If wound is not yet to be dressed, dry and cover with fresh cling wrap.



## ALERT

Do not use needles to express blisters as this poses a significant risk of needlestick injury.



## Alternative Cleansing Solutions

The availability of cleansing solutions may vary with geographical location. Where QV Wash is unavailable, a soap-free cleaner is a suitable alternative. Where Chlorhexidine Gluconate 5% is unavailable, Chlorhexidine Irrigation Solution 0.1% is a suitable substitute.

## Referral & Follow Up

All burns in paediatric patients must be followed up by the relevant paediatric burns service. Ensure a referral is made prior to discharging the patient.

Please contact the Surgical/Burns Registrar via hospital switch for each referring health service along with photos and referral to below email address.

- **For sites including and north of Mackay contact Townsville University Hospital:**  
**BurnsNQ@health.qld.gov.au**
- **For sites including and south of the Gold Coast contact Gold Coast University Hospital:**  
**email GCHChildburns@health.qld.gov.au and complete Blue Slip referral**
- **For all other sites contact Queensland Children's Hospital:**  
**burns-opd@health.qld.gov.au**

## For further information:

[Skill Sheet: Burns Dressing - Mepilex® Ag](#)

[Skill Sheet: Burns Dressing - Acticoat™](#)

[Skill Sheet: Burns Dressing - Hands](#)

## References:

This Queensland Paediatric Emergency Skill Sheet was developed by the Emergency Care of Children working group (funded by the Queensland Emergency Department Strategic Advisory Panel) with the help of the following resources:

Children's Health Queensland. (2021, March 18). Burns - Mepilex® Ag Dressing. Accessed 21 February, 2022 from [https://qheps.health.qld.gov.au/\\_data/assets/pdf\\_file/0029/706565/proc\\_o6001](https://qheps.health.qld.gov.au/_data/assets/pdf_file/0029/706565/proc_o6001).

Children's Health Queensland. (2021, April 6). Management of a paediatric burn patient. Accessed 21 February, 2022 from <https://www.childrens.health.qld.gov.au/wp-content/uploads/PDF/guidelines/gdl-paediatric-burns.pdf>

Gold Coast Hospital and Health Service. (August, 2020). Paediatric Burns Referral and Management. Accessed June 14, 2022 from <https://gchweb.sth.health.qld.gov.au/documents/GL1949>

## Skill Sheet Legal Disclaimer

The information contained in these Queensland Paediatric Emergency Care skill sheets is for information purposes only. It was developed to inform emergency nursing care, but can also be applied by other clinicians acting within their scope of practice. The information has been prepared using a multidisciplinary approach with reference to the best information and evidence available at the time of preparation. No representation, warranty or assurance is given that the information is entirely complete, current, or accurate in every respect. The skill sheets are not a substitute for clinical judgement, knowledge and expertise, or medical advice. Variation from the skill sheets, taking into account individual circumstances may be appropriate. This does not address all elements of standard practice and accepts that individual clinicians are responsible for the following:

- Providing care within the context of locally available resources, expertise, and scope of practice.
- Supporting consumer rights and informed decision making in partnership with healthcare practitioners including the right to decline intervention or ongoing management.

- Advising consumers of their choices in an environment that is culturally appropriate and which enables comfortable and confidential discussion. This includes the use of interpreter services where necessary.
- Ensuring informed consent is obtained prior to delivering care.
- Meeting all legislative requirements and professional standards.
- Applying standard precautions, and additional precautions as necessary, when delivering care.
- Documenting all care in accordance with mandatory and local requirements.

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