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FACULTY OF NURSING

BURNS

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Definition-

Injuries that results from direct contact or exposure to any thermal, chemical, electrical or radiation source are termed as burns.

Burn is the second leading cause of injuries in age group between 1-14 year. 80% of burn injuries occur within home.

Causes-

- (a) Scald injury from moist heat**:- Scald occurs in homes like kitchen, bathroom (hot water, coffee, tea etc).

- (b) Flame**:- It is 2nd most common cause of burn. It occurs due to contact with stove, heater, smoking in bed etc.

- (c) Electrical injury**:- It is caused by high voltage electrical contact.

(d) Chemical and contact injury:-

ingestion of alkalies or acids, caustic soda, tar etc.

(e) Radiation injury:- exposure to ultra violet rays from sun.

Assessment of Burn Depth and Severity:-

The physiologic responses, therapy and prognosis are related to:-

- (a)Extent of injury
- (b)Depth of injury
- (c)Severity

(a) Extent of injury:- The extent of burn is usually expressed as a percentage of total body surface area (TBSA).

(i) Modified rule of nine:-

- **Head and Neck- 19%**
- **Anterior trunk- 18%**
- **Posterior trunk- 18%**
- **Upper extremities- 9%**
- **Lower extremities- 13%**
- **Perineum- 1%**

(ii) Rule of '5' (Lynch and Blocker):-

Area	Infant	Child
Head and Neck	20%	15%
Hands	10%	10%
Anterior trunk	20%	20%
Posterior trunk	20%	20%
Legs	10%	15%

(iii) TBSA of burn according to age:-

Area	Newborn	3 years	6 years	12 year
Head	18%	15%	12%	6%
Trunk	40%	40%	40%	38%
Arms	16%	16%	16%	18%
Legs	26%	29%	32%	38%

Diagnostic Evaluation:-

- ❖ Blood serum test
- ❖ Urine specific gravity test
- ❖ X- rays
- ❖ Wound culture

Emergency first Aids-

- 1. Stop burning**
- 2. Protect the burn area**
- 3. Transportation to a medical facility**
- 4. Emotional support**

Immediate management-

(a) Minor burn injury-

- 1. Tetanus immunization**
- 2. Prophylactic antibiotics**

(b) Major burn injury-

1. Emergency care-

I. Establishment of adequate airway

II. Fluid replacement therapy

III. Administration of medication

IV. Wound care

V. Initiating measures to prevent complication

VI. Providing emotional support

❖ Rehabilitation burn care

THANK

YOU