The following is an example of the home care instructions you may receive at discharge. We provide this information so you will be better prepared for discharge. Please let any member of the staff know if you have questions.

**Burn and Wound Care Instructions**

**Wound Care:**
Each time you change your dressings, you should be taking a shower. We recommend using chlorhexidine (Hibiclens®) antibacterial soap for cleansing.

- Pour one capful onto a wet washcloth and repeat as you clean your body. This includes your wounds.
- **Do not use** chlorhexidine near your eyes.
- Rinse well after cleansing. Pat dry and apply dressings as directed.
- Chlorhexidine can be found at most pharmacies over the counter (for example Walgreens, Hy-Vee or Wal-Mart) and may be called by the trade name Hibiclens®.

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**Bacitracin/Vaseline Gauze to ***

- Bacitracin ointment and Vaseline gauze have been ordered for your dressing changes.
- Your dressings should be changed every day.
- Supplies you will need at home are:
  - Bacitracin ointment (may be purchased over the counter or in a prescription if you have prescription insurance coverage)
  - Vaseline (petroleum jelly)
  - Gauze or clean cotton material
  - Something to secure the dressings (ace wrap, Tubigrip, creative bandage of choice)
- Remove your dressings gently. (If they are stuck you may get them wet in the shower until they fall off easily). Do not damage the new skin.
- Watch for signs and symptoms of infection.
- You may shower. Use a clean towel and washcloth daily. Wash with mild soap. Gently wash your wounds to remove buildup of drainage and/or dead tissue.
- Dry the wound and the skin around the wound. Apply the new dressings:
  - Apply a thin layer of Bacitracin to open areas of the wound
  - Cover with Vaseline gauze
  - Cover with a dressing as needed (for example, Tubigrip or creative bandage of choice)
**Biobrane to ***

- Staples are generally removed 3-4 days after the initial application of the Biobrane. At this time you may wash the area with mild soap and water.
- Trim Biobrane as it lifts from the donor site
- Remove any areas that are loose and/or have pus-like drainage underneath and apply Bacitracin ointment to those areas after cleansing.
- Remove Biobrane when donor site is completely healed underneath. Site should be healed within 10-14 days after surgery.
- To remove the Biobrane, start at one corner and pull gently. Biobrane should pull off healed areas easily.
- To ease removal you may apply a petroleum based ointment, mineral oil or soaks to the Biobrane dressing.
- If bleeding occurs or excessive pain occurs, stop and wait 1-2 more days.

**Donor Site Care to ***

- Clear Film
- If the clear film leaks, patch with an additional clear dressing or wrap with gauze.
- If clear film dressing comes completely off before you reach 10 days after surgery OR the leaking becomes too much you may change the clear film completely as follows:
  - Wash your hands
  - Cleanse donor site with soap and water (shower preferred). You may opt not to wash with soap and water if there is minimal drainage or odor. Just cleanse area gently with a dry cloth to remove excess drainage from edges.
  - Pat dry
  - Apply a new clear film dressing if you have supplies. Film should be placed one inch beyond the donor site border.
  - Alternatives to clear film dressing include plastic wrap
- After complete removal/healing of clear film
  - Avoid wearing jeans or other coarse material over the donor site area. Wear shorts or loose fitting pants when possible.
  - If scabbing occurs, apply a thin layer of antibiotic ointment to those areas
  - Blood blisters may form to donor site area. This is normal. Leave them intact. If they do pop, apply antibiotic ointment.
- Once the donor site is completely healed, use moisturizing lotion or mineral oil to keep the area well lubricated. The new skin is very fragile. Be gentle.
- Protect the area from sun exposure.

**Frostbite to ***

- Keep extremity elevated with no pressure to affected area at all
- Keep dry dressings between fingers and toes if affected
- Do not pop blisters if present
- Affected areas may become discolored (dark brown or black)
- Report any signs or symptoms of infection to the Burn Treatment Center staff.
**Mepilex Ag or Acticoat to *****

- *Mepilex Ag* (silver foam) has been ordered for your dressing changes.
- *Acticoat* (black mesh material) has been ordered for your dressing changes.
- Your dressing should be changed every *** days
  - Your first dressing change is due ***
  - Change your dressing before this if wound drainage covers the entire dressing to the edges.
- Supplies you will need at home:
  - *Mepilex Ag or Acticoat*
  - Size ***
  - Order number ***
  - Something to secure the dressing (for example, Tubigrip or creative bandage of choice)
- Remove your dressing by lifting the *Mepilex Ag or Acticoat* at the corner and gently peeling it away from your wound. Do not damage the new skin.
- Watch for signs and symptoms of infection.
- You may shower. Use a clean towel and washcloth daily. Wash with mild soap. Gently wash your wounds to remove buildup of drainage and/or dead tissue.
- Dry the wound and the skin around the wound. Apply the new dressings:
  - Center *Mepilex Ag or Acticoat* over wound
  - Press into place with sticky side down (Mepilex Ag only)
  - Cover with a dressing as needed to hold the *Mepilex Ag or Acticoat* in place (for example, Tubigrip, tape and/or creative bandage of choice)
- Record the date of the dressing change and drainage characteristics

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**Silvadene to *****

- Silvadene has been ordered for your dressing changes.
- Your dressings should be changed every day.
- Supplies you will need at home are:
  - Silvadene (by prescription only)
  - Gauze or creative bandage to cover the Silvadene
  - Something to hold your bandage in place
- Remove your dressings and observe for signs and symptoms of infection
- You may shower. Use a clean towel and washcloth daily. Wash with mild soap. Gently wash your wounds to remove buildup of drainage and/or dead tissue.
- Dry the wound and the skin around the wound. Apply the new dressings:
  - Apply Silvadene to wound
  - Cover with gauze or creative bandage of choice (for example, cotton cloth, clean T-shirt, bed sheet)
  - Cover with a dressing as needed to hold the bandage in place (for example, burn net, tubigrip, tube socks, panty hose, leggings, or other creative bandage of choice)
- **REAPPLY** Silvadene in the evening or 12 hours after dressing change each day.
- Wrap with gauze. Keep clean and dry.
Signs/Symptoms of Infection:
- Redness/warmth at the site of burn or wound
- Swelling
- Red streaking from the burn or wound toward the heart
- Foul odor
- Green drainage from the wound
- Temperature greater than 100.4 degrees F
- Healed areas that start to reopen

General Instructions:
- Avoid injury to burn or wound areas as the healing skin is sensitive and delicate.
- Avoid exposure to sun and to extreme hot or cold temperatures.
- Keep injured areas elevated as much as possible. This will help with pain and reduce swelling.
- Do not drive if you are taking narcotic pain medications.
- Narcotic pain medications can cause constipation. To prevent this take stool softeners as directed. Discontinue use if diarrhea occurs.
- Once your burn is healed:
  - When outside wear protective clothing and use sunscreen. Apply sunscreen 30 minutes prior to sun exposure and reapply every 30 minutes.
  - It is important to keep all healed areas well moisturized with lotion or mineral oil. This includes healed graft areas and donor sites.
  - Lotion should be non-perfumed. High alcohol content and perfumed lotions can cause irritation, itching and skin breakdown.
  - Itching may be a problem. If present talk with the provider who may prescribe a medicine to help you.
- Difficulty coping is a normal response to your injury and hospitalization. Please report any difficulties you have with coping, sleeping or night terrors to the Burn Treatment Center staff.
  - A counseling nurse is available on clinic days by appointment. They can assist you with coping strategies and help you find support systems in your home area.

Diet:
- Eat a well-balanced diet.
- Foods high in protein and calories aid in wound healing.
- Drink plenty of fluids to help prevent constipation.

Follow Up Instructions:
- Pain medication should be taken 30 to 45 minutes prior to dressing changes or scheduled appointments in the Burn Wound Clinic.
- Please return to the Burn Wound Clinic for all return visits. Take elevator F or H to the 8th floor. Please remember to ask for your parking ramp validation.
- Please bring a list of current medications to ALL return appointments.
Creative Dressings:
- You may use creative ways to secure your dressings in place.
- Make sure to keep the dressing clean and dry.
  - It is important to have your burn or wound covered.
- We suggest these items to help secure your dressings:
  - Panty Hose
  - Cotton Gloves
  - Tube Socks or Diabetic Socks
  - Boxer Briefs
  - Snug-fitting Tank Tops
  - Biking Shorts

Web references:
http://www.uihealthcare.org/burn
- Burn and Wound Care Videos can be found by clicking on the Patient Education link.
www.phoenix-society.org

If the Following Occurs:
- Signs/symptoms of infection
- Change in wound color from pink-red to tan, brown or black
- Change in the skin appearance around the wound
- A healed wound starts to reopen in areas and those areas grow in size and number
- You have difficulty coping emotionally and need to set up an appointment to talk with someone.

Call:
- **Burn Wound Clinic:** 319-467-5659 should be used for non-emergent issues (rescheduling an appointment or to request a work release).
  - This is a voice mail tree and you will receive a return phone call within 24-48 hours.
- **Burn Treatment Center:** 319-356-3218 should be used for all urgent issues or questions such as any of the above signs of infection.
- 24 hours a day call Toll-free 1-800-777-8442.