**Burn First Aid**

Burns are extremely painful. Formerly classified as 1st, 2nd and 3rd degree, that has since been changed to partial-thickness and full-thickness. With respect to burn first aid treatment, the two major aspects which need addressing are pain control and infection control. The majority of burns encountered in the home or when out camping are partial-thickness burns, evidenced by reddened areas that are tender to touch. Partial-thickness burns can also blister. Full-thickness burns involve muscle as well as skin, and are extremely painful.

Basic first aid treatment for burns: Cool water is helpful to ease the pain, as well as Aloe Vera gel or Aloe directly from the plant can be used on partial-thickness burns, which has been shown to ease the pain. NEVER put ice on a burn as ice is a vasoconstrictor and burns do need blood flow. Wet cool compresses are helpful in alleviating pain. Acetaminophen (Tylenol) and Ibuprofen (Advil/Motrin) are generally good pain reducers.

The age old question which comes into play which is still debated among healthcare providers is, should the blisters be debrided or taken off? In talking to a few burn experts in the Midwest and ER physicians, we have come to the following consensus: If in the outdoors and you are greater than 24-48 hours from medical attention, leave the blisters on. They make great protective barriers and help prevent infection. Urgent care clinics will routinely debride the blisters since all wounds need air to heal, and after debridement, Silvadene ointment is generally applied. In the home, since you can get medical attention fairly quickly, go ahead and make pain control your greater priority and transport to an urgent care clinic or ER.

**Covering and wrapping burns**

Clearly one wants to use a nonstick or non-adherent dressing. You do not want to use gauze. Telfa is an excellent choice along with a loosely bound wrap. Ace wrap works well over that. In the outdoors, when you are 48 hours or greater from medical attention, it is wise to have an antibiotic cream or topical ointment that you can apply to the burn, and then transport. Please be advised that around 10-12% of the population is allergic to Neomycin which is found in Neosporin, as well as triple antibiotic ointment. We strongly advise against using that topical antibiotic ointment due to running the risk of an allergic dermatitis.