

Nail Bed Taping for Burn Injuries

Nail bed retraction and deformity post burn injury:

- Tightening of the skin on your fingers is common after burns
- When a burn or graft is close to your fingernails, tightness of the skin can lead to pulling on the base of your nails, causing **nail bed retraction** or **deformity** and pain
- Nail bed deformity can impact on your nail's ability to grow normally



Nail bed taping is used to:

- **Prevent** nail bed retraction or deformity post burn injury
- **Reduce** pain / discomfort caused by nail bed deformity
- **Encourage** your nails to grow normally again

Types of tape used:

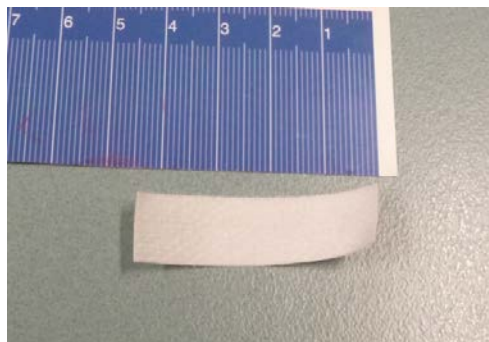
Your therapist will advise you on the type of tape to use based on the condition of your skin. Commonly used tapes include:

- Micropore™
- Hypafix® / Fixomull® / Mefix®
- DuoDERM® / Comfeel®
- Other: _____

Putting on nail bed tape:

How to apply:

1. Cut rectangular pieces of tape (size required differs depending on finger size)



2. Place tape halfway over base of nail.



3. Hold two ends of tape and pull in the direction away from your finger to create slight tension and secure tape on the back of your finger (*ensure that you do not overlap on the back of your finger, as this may cut off your circulation*).



When and how to remove nail bed tape:

The tape is not re-usable and should be discarded after use. The tape can be removed when it starts to naturally peel off. If you need to take it off earlier you can soak it with room temperature cooking oil eg. olive oil. The tape should stay on for several days before starting to peel off.

Precautions:

Sometimes people can get a skin irritation from the tape e.g.:

- Redness on your skin or base of nail
- Rash on your skin or around the nail
- Increased itchiness
- Skin maceration (wrinkled and white)
- Blistered looking skin

If any of these symptoms occur stop using nail bed tape and contact your Occupational Therapist.

When do I stop using nail bed tape?

When the scars on your fingers are mature and no longer pulling on the base of your nails. Your Occupational Therapist will discuss this with you throughout your treatment.

Please contact your therapist if you have any queries or concerns.

Therapist: _____

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