DISCHARGE PLANNING INFORMATION

XEROFORM ON WOUNDS

WHAT YOU SHOULD DO:

- 1. Take your pain medication as prescribed approximately half an hour before your shower. This will help manage any pain associated with the cleansing of wound/s and the change of dressing/s.
- 2. **If you have** burns on lower legs "blood rush" pain may be experienced when lowering feet to ground. If this occurs, 'wriggle' toes and move feet to increase circulation and then gradually lower feet to floor.
- 3. Prior to shower, prepare your melolin, xeroform, tape and bandages. This way, the dressings can be done straight away.
- 4. Dressings and garments need to be removed prior to shower. If any dressings stick to your wound, soak them off with water. Wash gently with non-perfumed soap and water to remove all cream. Unhealed areas should be 'pat-dried' with a towel.
- **5.** Things to be aware of:
- wound becomes hot to touch
- wound has increased pain or swelling
- redness starts to spread where previously skin was pale and healthy
- wound discharge has a change in colour
- wound has offensive odour
- you have a fever

These are signs of infection which you must discuss with your GP or return to the Emergency Department at the hospital, if one or more of these occur.

- 6. Apply moisturising cream to healed burn areas to protect the skin from becoming dry.
- 7. Cut a single layer of Xeroform to the size of the unhealed wound, smear soft white paraffin onto dressing and place on wound. Cover dressings with melolin (shiny surface to wound). Melolin may need to be trimmed, so dressings are less restrictive allow for greater movement of limbs. Dressings are secured with adhesive tape.
- 8. **IF** Kenacomb ointment prescribed, spread a thin smear to raw area before applying Xeroform.
- 9. Apply prescribed ointment to face if needed.
- 10. Itch can be a major problem with burns. It is important NOT to scratch. Scratching can cause skin breakdown in healed areas which will result in more pain and discomfort. Rubbing has similar results to scratching and should also be avoided. Take prescribed medication for itch as given on discharge or see your local GP for a prescription. If itchy area has no dressings, apply extra moisturiser which may also help relieve itch.

THINGS TO REMEMBER ABOUT YOUR CARE AT HOME:

- 1. Dressings/garments can become soiled and you may need to protect your bed linen and mattress from wound discharge.
- 2. If your burns are over a joint such as, elbow, knee, or hand, do your prescribed exercise regime whilst in the bath/shower and also during the day. It is important to maintain full range of movement.
- 3. If you are taking pain relieving medication, sleeping tablets or medication to relieve nerve pain, you may experience drowsiness. Always read the instruction leaflet that is provided with your medication and pay particular attention to any **warnings about driving or operating machinery** while taking this medication. If you feel drowsy or light headed or your pain is worrying you, **you should not drive**. Make arrangements for a family member or friend to drive you or use public transport.
- 4. Ensure burn areas are protected from direct sunlight and glare, at all times. Broad brim hat, long sleeve cotton shirts and long pants are best to cover burn areas as required. PABA-free sunscreen is recommended.
- 5. The skin may be extremely sensitive to skin care products you have used in the past. Before recommencing your usual skin care products, perform a test patch on affected skin and if any concerns, consult your Doctor.

FOLLOW-UP:

- 1. RBWH Burns clinics are held at Specialist Outpatient Services on Level 1 in the Dr. James Mayne Building.
- 2. An appointment will be telephoned through to you.
- 3. Take your pain medication as prescribed approximately half an hour before your appointment. This will help manage any pain associated with the change of dressings in the clinic. Please bring along your medication to the burns clinic, as you may need to take more if required.