RTBC Going Home Discharge Information:

Name:							
Discharge Date:							
Burn Follow-Up Appointment:							
☐ Burn Clinic-D7: Please see your appointment card.							
□ Tele-medicine: A coordinator will call you with an appointment at your nearest hospital. You will see and/or speak to your surgeon over a video screen.							
 Not needed: Call the burn centre or the surgeon's office if you need. The doctor's card with phone number is in your discharge package. 							
Other Appointments: □ See attached appointment card(s)							





Wound Care

- Small areas of bleeding and/or scabs are normal.
- Before you change your dressing, take your pain medication and shower with soap (Dove® or Ivory®) and warm water as directed.

You	ur wound care has been arranged as follows:
	 Burn Clinic: Bandages will be changed at your Sunnybrook Burn Clinic appointment. Take your pain medication before your appointment.
	 LHIN Home and Community Care (CCAC): You will have wound care in your home or at a wound clinic near your home. If you have not met with the LHIN coordinator in hospital, you will get a phone call with information after. Please make sure the team has your current phone number, discharge address, and an emergency contact.
_	Self-Care: You and/or your family have been given supplies and taught to change your dressings as follows: Burn/Grafted Burn Skin: Location: Shower, remove old bandage, and pat dry.
	 Apply in this order: » Greasy Gauze (e.g. Adaptic®/Jelonet®). » Normal Saline moistened gauze. » Dry gauze. » Wrap with roll gauze (Kling®). » Secure with tape. Other:

O Donor Site:

- Location:
- Allevyn® (pink sponge)-leave intact and have this changed by the CCAC nurse or in Burn Clinic, as needed.
- Xeroform® (yellow gauze) DO NOT pull off. It stays on your skin and lifts once wound is healed. Only trim Xeroform® that lifts off.
- Xeroform® may have white gauze on top if wet.
- The white gauze needs to be changed daily in this order:
 - » Remove old gauze.
 - » Apply Normal Saline moistened gauze.
 - » Apply layer of dry gauze.
 - » Wrap with roll gauze (Kling®).
 - » Secure with tape.

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Showering

- Shower (no baths) once daily before dressing change.
- Use lukewarm water (not too hot or too cold).
- Use mild unscented soap (such as unscented Dove® or Ivory®).
- · Pat (don't rub) dry with towel.

For Healed Skin

- After shower and at least two times a day or more, apply unscented water-based moisturizing lotion (e.g. Professional Care Lotion®/Vaseline®).
- <u>Do not</u> use Vaseline Petroleum Jelly® or oil-based lotions (Read labels carefully).
- When you leave the hospital, the burn team will give you lotion and tell you the best lotions to use.

Face Care

- You and/or your family will have been taught face care.
- Please see separate information sheet.

Moisturizer

- Apply lotion once a day and always after you shower.
- Use an <u>unscented water-based lotion</u>
 (e.g. Professional Care Lotion®/Vaseline®).

Heat and Cold Tolerance

- It is normal to feel more sensitive to hot or cold.
- You may need to change:
 - » Your layers of clothing (less or more).
 - » Your activity level.
 - » Time spent in that temperature or environment.
- Ask your surgeon or burn team if you have any questions.

Exposure To Sunlight

- Healing skin is sensitive to sun and can burn easily.
- This does NOT mean you need to stay indoors. Stay in the shade when you can.
- Wear sunscreen on healed wounds and your unburned skin as you normally would.
- Sunscreen should be water-based and a minimum of SPF 30. Put it on 30 minutes before you go outside and re-apply every 30 minutes.
- Wear protective clothing and a wide brimmed hat.

Water Blisters

- · Clear water blisters are normal; do not pop.
- · Do not limit your activities.

Itching

- This is normal as your skin heals.
- Try not to scratch, rub, or use hot water on your wounds.
- Try not to wear tight clothes over your wounds.
- Try to keep away from warm places.
- Apply unscented water-based lotion often.
- Tell your surgeon and/or burn team if this continues.

^{4 •} RTBC Going Home Discharge Information

Scar Management

For leg burns, if you do not have a pressure garment, wear tensors when up out of bed.

Pressure Garments

- The longer you wear the garment each day, the better the effect. We recommend wearing garments 23 hours per day.
- Isotoner[®] gloves to be worn inside out.
- Hand wash and dry flat tensors, Tubigrip[®] or Isotoners[®].
- Follow wearing schedule and care instructions.
- · If your skin breaks down or blisters, clean and cover area with bandage and wait 1-2 days before wearing garments.

Massage

 Use water-based lotion to rub and massage for 30 seconds over healed skin as directed by surgeon/therapist

Exercise

- Exercise is important; start slowly and do more as you are able (e.g. walking, swimming, light cardio, light weights if able).
- · Follow the handouts from your therapist.
- Do your exercises at least 4-6 times a day.
- Hold stretches for at least 30 seconds (the time of 1 TV commercial).
- Your therapist will tell you if you are referred to outpatient (community) rehab.

Splints

Wear as directed by your surgeon or therapist.

Nutrition

- After you leave the hospital, eat a healthy balanced diet with regular meals, unless your surgeon or family doctor gives you other instructions.
- Pain medications may cause constipation. Drink fluids and eat food high in fibre to help you have bowel movements (poo).
- After you leave the hospital, you do not need to take supplements or special vitamins for your recovery unless your surgeon tells you.

Pain Management/Medications

Please see other brochure.

Driving

- You may be told not to drive for a while because of changes to your body from the burn, graft, or other health issues.
- Some medications may make you sleepy and should not be taken if you are going to drive (e.g. opioids/narcotics such as hydromorphone etc. or other medications such as gabapentin or pregabalin etc.).
- Please ask your surgeon, family doctor, or pharmacist if you have any questions.

Emotional Support

- It is normal to feel anxious or have changes in your mood as you cope with different stages of recovery.
- If you want to talk with someone, please ask your surgeon and/or the burn team for more information. Support is available with social work, peer support with another burn survivor, or a referral to psychology or psychiatry.
- The Phoenix Society is also a good resource: phoenix-society.org.

Sexuality & Intimacy

- Medications and body changes from surgery may affect sexual comfort or performance.
- Please speak with your surgeon, burn team, or social worker if you or your partner have any questions.

Body Image

- Changes to the body after a burn can be an adjustment for patients and/or families.
- Please speak with your surgeon, burn team, or social worker if you have any questions.

When To Call 911

- In an emergency.
- For chest pain or difficulty breathing.

When to Call Your Family Doctor/Go to a Walk-In Clinic

 For general medical issues or other health issues not related to the burn.

When to Call the Burn Centre

- · If you have:
 - Wounds that smell bad or have drainage that is new or different.
 - Bleeding that does not stop on its own.
 - New swelling or redness around wounds.
 - · Worse or new pain.
 - · Difficulty coping.
 - Any urgent questions about your burn care after discharge.

Notes:			

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sunnybrook.ca/rtbc



