

Burn Injury: Inpatient Physiotherapy Education Handout

Purpose of Brochure

To provide information and education on what can be done during your hospital stay to enable you to reach your desired goals during recovery.

What happens after a burn injury

Experiencing pain, swelling and oozing wound are common. Pain control medication will be prescribed to relieve pain. If the pain persists, please notify the medical team.

Depending on the severity of burn injuries, surgery may be necessary to prevent further damage to wounds. Surgery helps to remove burnt and dead tissues to allow effective wound healing.

As the wound heals, it results in scarring and may cause skin and soft tissue tightness which may affect your mobility and daily activities. Therefore, it is crucial to engage in physiotherapy rehabilitation from the first day of admission and to be followed up in outpatient services following your discharge.

Role of Inpatient Physiotherapy

Primary goals are to:

- Prevent contractures and stiffness of joints and muscles, while wounds heal.
- Restore movement and function to as near normal as possible

As your burns heal, the care and goals may change over time. Your physiotherapist will discuss your plan of care with you and teach you the best and safest way to move and use the injured area(s). They may also prescribe exercises that you can do on your own during the hospital stay.

Physiotherapy intervention includes:

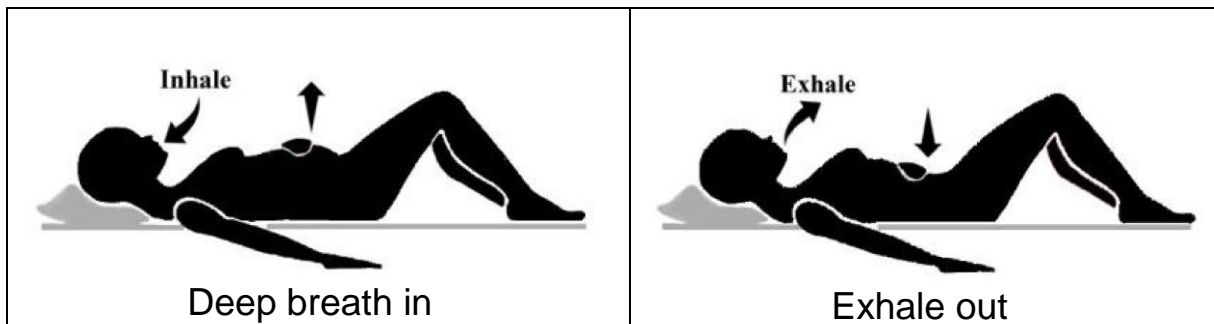
- Prevention of respiratory complications
- Swelling management
- Anti-contracture positioning
- Early mobilisation
- Range of motion and strengthening exercises

Prevention of Respiratory Complications

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Reduced mobility and long bed rest can lead to poor air entry, and contribute to increased chest infections. Deep breathing exercises can increase and maintain your lung expansion to prevent respiratory complications.

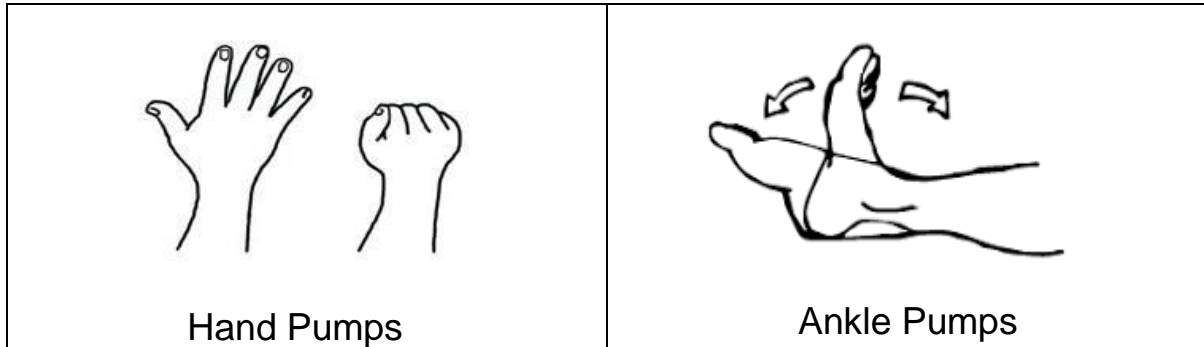
Take a deep breath, hold for 3-5 seconds, 10 times every hour when awake. If there is any phlegm, cough it out.



2

Swelling Management

After a burn injury, swelling in the limbs is common. Swelling can be painful, hinders healing and affects your ability to perform daily activities.



Perform simple hand and ankle pump exercises on your own to promote circulation and elevate the affected limb(s), especially during time of rest or in prolonged position.



Do not perform exercises over burnt or newly grafted areas unless instructed by your Physiotherapist.

3

Positioning

Anti-contracture positioning helps to limit or inhibit loss of range of motion or the tightening of muscles due to the development of scar tissues.

Your physiotherapist will educate and advise on the appropriate positions according to your burn areas and pain.

Early Mobilisation



It is crucial to begin sitting on a chair and walking around as early as possible to prevent deconditioning and regain mobility.

Practise walking in the room or to the toilet and sitting on a chair frequently as tolerated, when your physiotherapist has deemed it safe.

If you are having difficulty walking, your physiotherapist can prescribe appropriate walking aids to help you regain your mobility.



Range of Motion and Strengthening Exercises

Once the wounds/new grafted area(s) are stable and movement is allowed, your physiotherapist will educate and advise you on appropriate exercises to help you recover.

Range of motion and strengthening exercise of unaffected joints should continue to prevent risk of contractures or muscle weakness.

Other useful tips when performing the exercises:

- Apply olive oil before exercising to prevent wound breakdown
- Monitor constantly the response of wounds or new grafts to stretches and mobilisation
- Mild stretching pain is normal, adjust hand hold based on the sensitivity to touch and pain.



Please inform doctors or nurses if you observed any increase in oozing of wounds, bleeding, skin breakage or increased pain over burn injuries or grafted area.

Family members are encouraged to attend your Physiotherapy sessions to learn how to best help you with this part of your recovery.



Frequently Asked Questions

What is a skin graft and why do I need it?

- A skin graft is where healthy skin is removed from an unaffected area of the body and used to cover lost or damaged skin. It helps to decrease risk of wound infection and enhances quick healing for deeper burn wounds.

Why do I need to immobilise the newly grafted area?

- Immobilisation is needed to prevent shearing between the graft and the recipient wound bed in order to facilitate graft take. Early movement can cause the formation of hematoma under the graft, resulting in graft loss.

How long does the newly grafted area need to be immobilised?

- The newly grafted area is usually immobilised for 5 – 7 days post-surgery.

Can I wait for my wounds to be completely healed and pain-free before exercising?

- Delay in rehabilitation may result in decrease range of motion secondary to scarring and prolong immobilisation will lead to muscle weakness and joint stiffness. The above may result in irreversible contractures and deformities which will affect functional ability.