

Fired Up for Payson

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Scald Prevention

IT DOESN'T ALWAYS TAKE A FLAME TO BURN

Every day, 300 young children with burn injuries are taken to emergency rooms. They haven't even been near a flame. The children are victims of scalds.

Scald burns (caused by hot liquids, steam or foods) are the most common burn injury among children age 4 and younger. In 2003, U.S. hospitals treated an estimated 16,000 children under age 5 for scalds, according to the Consumer Product Safety Commission. Mortality rates from scalds are highest for children under the age of 4.

Ninety-five percent of scalds occur at home, and they are typically related to ordinary activities – bathing, cooking and eating – and often happen to children because of a lapse in adult supervision or a lack of protective measures. Youngsters may not understand or even be aware of potential dangers of hot liquids (especially water) and foods; they simply trust adults to keep them safe.

In addition, young children have thinner skin that burns more quickly than adults'. People of all ages can be burned in 30 seconds by a flowing liquid that is 130° F; at 140° F, it takes only five seconds; at 160° degrees, it only takes one second. For children under 5, these temperatures can cause a burn in half the time.

Prevention of scalds is always preferable to treatment and can be accomplished through simple changes in behavior and the home environment. These suggestions may seem obvious and simple, but given the statistics, they can't be repeated too often.

Tap water scalds

- These are often more severe than cooking-related scalds. Nationwide, tap water scalds result in more inpatient hospitalizations, generally cover a larger percent of the person's body, and result in more fatalities than other types of scalds.

The American Burn Association recommends

- Set home water heaters no higher than 120 degrees Fahrenheit / 48 degree Celsius.
- Fill tub to desired level before getting in. Run cold water first, then add hot.
- Mix the water thoroughly and check the temperature by moving your elbow, wrist or hand with spread fingers through the water before allowing someone to get in.
- Provide constant adult supervision of young children.
- Install anti-scald or tempering devices.

Cooking-related scalds

- Establish a “safe area” out of the traffic path between the stove and sink where children can safely play and still be supervised.
- Keep young children in high chairs or play yards, a safe distance from counter or stovetops, hot liquids, hot surfaces or other cooking hazards.
- Cook on back burners when young children are present. Keep all pot handles turned back, away from the stove edge.
- All appliance cords should be coiled and away from the counter edge. Curious children may reach up and grab handles or cords, pulling hot food and liquid down onto themselves.
- During mealtime, place hot items in the center of the table, at least 10 inches from the table edge.
- Use non-slip placemats instead of tablecloths if toddlers are present. Young children may use the tablecloth to pull themselves up, causing hot liquids or food to spill down onto them.
- Never drink or carry hot liquids while carrying or holding a child. Quick motions may cause spilling of the liquid onto the child.

Microwave oven safety tips include:

- Never heat bottles of baby formula or milk, especially if using plastic bottle liners. In the microwave, plastic liners may burst, increasing the scald risk to infants.
- Place microwave ovens at a safe height, within easy reach for all users, to avoid spills.
- Steam, reaching over 200 degrees Fahrenheit, builds rapidly in covered containers and can easily result in burns to the face, arms and hands. Puncture plastic wrap or use vented containers to allow steam to escape while cooking.

Stop the burning process:

Remove all clothing from around the burn area - these will retain heat, increasing the damage to the skin. If material is adherent (stuck) to the skin, cool the area with cool water and seek medical attention. Jewelry and metal such as belt buckles and zippers also need to be removed. Run cool—not cold—over the burn area for 5 minutes.

Do not apply ice to the burn. Ice can make the burn worse.

Do not apply creams, ointments or salves.

Do not break any blisters until seen by a physician.

Cover with a clean, dry cloth. First (redness) and second degree (closed blister) burns smaller than the person’s palm can usually be treated at home. Keep the area clean to prevent infection by gently washing with mild antimicrobial soap several times a day. Rinse thoroughly. Cover open areas with a clean, loose dressing. Consult with your family physician or local burn center if the burn does not heal in two to three days or signs of infection appear.

For larger burns (bigger than the person’s palm), chemical or electrical burns, or a burn that involves the face, airway, hands, feet or genital area call 911 or your local emergency number. Sit down together and discuss these important tips with your family.

Until next time be “ *Fired Up*” about burn prevention in your home.

