

# Burns Dressing - Hands

Burns are a common presentation to the emergency department. It is important that the correct dressings are utilised when managing a burn. All burns must be cleansed prior to dressing. Please see the [Burn Cleansing Skill Sheet](#) for more information on cleaning regimes. Ensure that the appropriate comfort measures are planned for and utilised prior to commencing any burns dressing. This might include pharmacological and non-pharmacological interventions. Remember to check for allergies prior to commencement. Mepilex® Ag and Acticoat™ dressings may be used to treat burns to hands.

Refer to the treating team's care plan for guidance as to which dressing regime is most appropriate. This skill sheet is based on the recommendation of the Queensland Children's Hospital Burns Service. There may be slight variations in practice, depending on factors that influence burns care at each site. Please refer to your local tertiary burns service for more information. For sites Mackay and north this will be Townsville University Hospital. For the Gold Coast, this will be Gold Coast University Hospital.

## Dressing Hands with Acticoat™

### 1 GATHER

Ensure you have the correct dressing for the duration required.



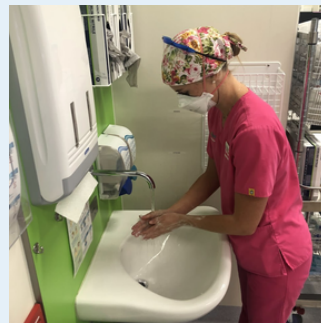
### 2 PREPARE

Ensure that the Acticoat™ and Mepitel® dressing packets are intact and not expired.



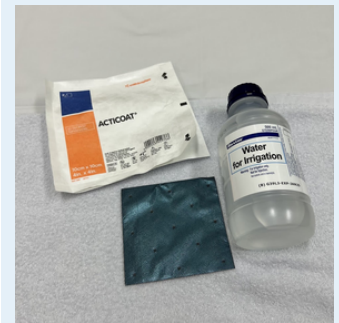
### 3

Perform hand hygiene and don gloves. An aseptic clinical handwash of 60 seconds is sufficient.



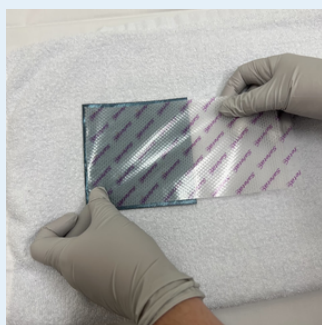
### 4

Open Acticoat™ and wet with water for irrigation. DO NOT use normal saline.



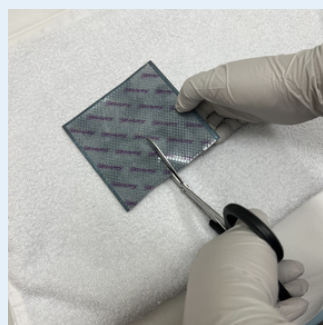
### 5

Remove the plastic from one side of the Mepitel® and place on the blue side of the Acticoat™.



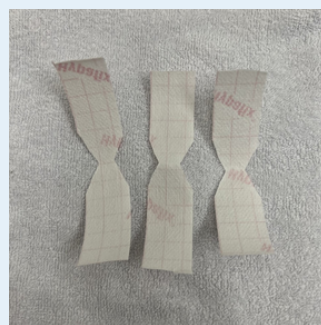
### 6

Cut the Acticoat™ and Mepitel® to cover the burn, leaving at least 1cm overhang outside of the burn area.



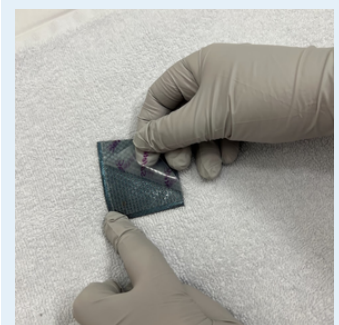
### 7

Cut non-woven adhesive tape to size.



### 8

Remove the remaining plastic from the Mepitel®.



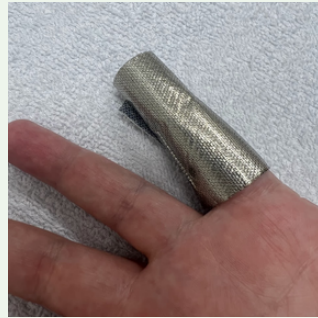
## 9 PROCEDURE

Place dressing on the burn, with the Mepitel® in direct contact with the burn. Remember: "BLUE to BURN, SILVER to SKY".



## 10

Fingers: Ensure the dressing is wrapped around the finger.



## 11

Secure with non-woven adhesive tape. Ensure the finger is not taped too tightly as to not restrict circulation.



## 12

Use the non-woven tape to secure the dressing lengthways along the finger. Do this anteriorly and posteriorly.



## 13

Use the non-woven tape to secure the adhesive tape around the base and tips of fingers.



## 14

Ensure that all the Acticoat™ is covered by the non-woven adhesive tape. Ensure that no Acticoat™ is left visible.



## 15

Palms: After applying Mepitel® and Acticoat™ with non-woven adhesive tape, add a Melolin™ dressing to absorb ooze.



## 16

Apply non-woven adhesive tape through the finger web spaces to secure dressing.



## 17

Ensure all dressings are covered with non-adhesive woven tape. Secure base of dressing at the wrist.



## 18

Cover with a tubular bandage.



## Tips

- If there are multiple areas of burn close together that require dressing, you may cover the entire area with the Acticoat™. The dressing will not harm the uninjured skin.
- If the burn dressing is applied within 24 hours of injury, there is no need to insert irrigation ports as there will be adequate moisture within the wound bed to ensure release of silver into the wound bed.



## Dressing Hands with Mepilex® Ag

### 1 GATHER

Ensure you have the correct dressing for the duration required.



### 2 PREPARE

Ensure that the Mepilex® Ag dressing packet is intact and not expired.



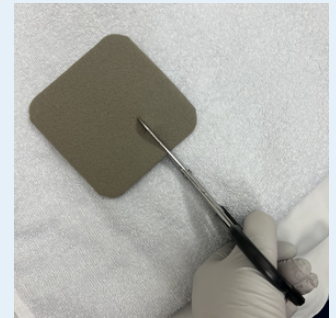
### 3

Perform hand hygiene and don gloves. An aseptic clinical handwash of 60 seconds is sufficient.



### 4

Cut Mepilex® Ag to the correct size to cover the burned area of skin.



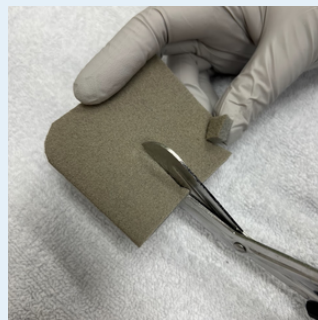
### 5

Cut the required number of non-woven adhesive tapes to secure the Mepilex® Ag.



### 6

Fingers: Cut incisions along one edge of the finger dressings. This allows for the dressing to easily conform to the digit.



### 7

### PROCEDURE

Place dressing on burn sticky-side down. Secure with non-woven adhesive tape.



### 8

Secure the dressing lengthways (both posteriorly and anteriorly) with the non-woven adhesive tape.



### 9

Palm: Place correct to size Mepilex® Ag over palm, sticky-side down.



### 10

Secure dressings with non-woven adhesive tapes.



### 11

Ensure that Mepilex Ag® is fully covered due to the choking risk if the dressing is bitten by the child.



### 12

Cover completed dressing with tubular bandage to further secure and protect.



## Tips

- If there are multiple areas of burn close together that require dressing, you may cover the entire area with the Mepilex® Ag. The dressing will not harm the uninjured skin.
- Mepilex® Ag may not be a suitable dressing for hands for patients under 2 years of age due to the thickness of the dressing.
- In some facilities, Mepilex® Ag Transfer is used instead of Mepilex® Ag in hand dressing as it is thinner. Check with local policy in relation to dressing application.



### ALERT

Manufacturer instructions for Mepilex® Ag do not specify to cover dressing fully, however the potential choking hazard is considered to place the child at risk.

## Education

Ensure that the carer goes home with the appropriate dressing fact sheet. Mepilex® Ag (QH only) and Acticoat™ (QH only) fact sheets are available. The relevant fact sheet and care instructions should be explained prior to discharge.

Key points:

- Dressing to remain dry - do not wet during bathing
- Child is not to go near sand, dirt or water
- Signs of toxic shock syndrome: carers are to return to hospital for review promptly if any fevers, rash, uncontrolled pain or irritability, diarrhoea, vomiting or decreased oral intake

## Documentation

Adequate documentation must be completed to allow for other clinicians to plan for future dressing changes. It should include documentation of:

- Appearance and location of burn
- Analgesia or procedural sedation utilised and its efficacy
- Distraction type utilised
- Cleansing process used
- If debridement or blister de-roofing required
- Type of dressing used
- Education provided to carer

## Referral & Follow Up

All burns in paediatric patients must be followed up by the relevant paediatric burns service. Ensure a referral is made prior to discharging the patient.

Please contact the Surgical/Burns Registrar via hospital switchboard for each referring health service along with photos and referral to the below email addresses:

- For sites inclusive of and north of Mackay, contact Townsville University Hospital at [BurnsNQ@health.qld.gov.au](mailto:BurnsNQ@health.qld.gov.au)
- For sites inclusive of and south of the Gold Coast, contact Gold Coast University Hospital at [GCHChildburns@health.qld.gov.au](mailto:GCHChildburns@health.qld.gov.au) and complete Blue Slip referral form
- For all other sites, contact Queensland Children's Hospital at [CHQ\\_QCHburns@health.qld.gov.au](mailto:CHQ_QCHburns@health.qld.gov.au)



## For further information:

[Skill Sheet: Burn Cleansing](#)

[Skill Sheet: Burns Dressing - Hands](#)

[Video: Burn Cleansing](#)

[Video: Burns Dressing - Mepilex® Ag](#)

[Video: Burns Dressing - Acticoat™](#)

## References:

This Queensland Paediatric Skill Sheet was developed by the Emergency Care of Children working group (funded by the Queensland Emergency Department Strategic Advisory Panel) with the help of the following resources:

Children's Health Queensland. (2021, March 18). Burns - Mepilex Ag Dressing. Accessed 19 March 2025 from [https://gheps.health.qld.gov.au/\\_data/assets/pdf\\_file/0030/714783/proc-06001.pdf](https://gheps.health.qld.gov.au/_data/assets/pdf_file/0030/714783/proc-06001.pdf)

Children's Health Queensland. (2024, March 19). Management of a paediatric burn patient. Accessed 19 March 2025 from <https://www.childrens.health.qld.gov.au/wp-content/uploads/PDF/guidelines/gdl-paediatric-burns.pdf>

Children's Health Queensland. (2025, January 16). Burns - Acticoat™ Dressing. Accessed 19 March 2025 from [https://gheps.health.qld.gov.au/\\_data/assets/pdf\\_file/0026/722933/ns\\_06811.pdf\\_nocache](https://gheps.health.qld.gov.au/_data/assets/pdf_file/0026/722933/ns_06811.pdf_nocache)

Gold Coast Hospital and Health Service. (2024, March 15). Paediatric Burns Referral and Management. Accessed 19 March 2025 from <https://gchweb.sth.health.qld.gov.au/documents/GL1949>

Molnlycke Health Care AB. (2025). Mepilex® Ag. Accessed 19 March 2025 from <https://www.molnlycke.com.au/products-solutions/mepilex-ag/>

Molnlycke Health Care AB. (2025). Mepitel®. Accessed 19 March 2025 from <https://www.molnlycke.com.au/products-solutions/mepitel/>

Smith + Nephew. (n.d.). Acticoat. Accessed 19 March 2025 from <https://www.smith-nephew.com/en-au/health-care-professionals/products/advanced-wound-management/acticoat-global#application>

Smith + Nephew. (n.d.). Melolin. Accessed 19 March 2025 from <https://www.smith-nephew.com/en/health-care-professionals/products/advanced-wound-management/melolin-ppl#reference-materials>

This Queensland Paediatric Emergency Skill Sheet was developed and revised by the Emergency Care of Children working group. Initial work was funded by the Queensland Emergency Department Strategic Advisory Panel.

## Skill Sheet Disclaimer

The information contained in these Queensland Paediatric Emergency Care skill sheets is for information purposes only. It was developed to inform emergency nursing care, but can also be applied by other clinicians acting within their scope of practice. The information has been prepared using a multidisciplinary approach with reference to the best information and evidence available at the time of preparation. No representation, warranty or assurance is given that the information is entirely complete, current, or accurate in every respect. The skill sheets are not a substitute for clinical judgement, knowledge and expertise, or medical advice. Variation from the skill sheets, taking into account individual circumstances may be appropriate. This does not address all elements of standard practice and accepts that individual clinicians are responsible for the following:

- Providing care within the context of locally available resources, expertise, and scope of practice.
- Supporting consumer rights and informed decision making in partnership with healthcare practitioners including the right to decline intervention or ongoing management.

- Advising consumers of their choices in an environment that is culturally appropriate and which enables comfortable and confidential discussion. This includes the use of interpreter services where necessary.
- Ensuring informed consent is obtained prior to delivering care.
- Meeting all legislative requirements and professional standards.
- Applying standard precautions, and additional precautions as necessary, when delivering care.
- Documenting all care in accordance with mandatory and local requirements.

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