

## Case of Burn (child)

A child of 5 years was referred to OT burn unit due to having a 2<sup>nd</sup> degree burn scald type on the chest area, axillar area, and whole left limb (shoulder, arm, hand).

### **Background information:**

The child has 3 siblings and lives in an apartment. He likes playing with his brother hide and seek. He is a KG2 student and he attends online classes.

### **How the injury happened?**

Child was playing around in the kitchen and pour a cooker with boiled water accidentally on himself.

### **Second-degree (partial thickness) burns.**

Involves the epidermis and part of the lower layer of skin, the dermis.

The burn site looks red, blistered, and may be swollen and painful. Painful+++.

### **Family concern:**

The mother wants her child to be able to write

### **Assessment:**

The occupational therapist:

Observed for a scar: there is no scar.

ROM assessment: the child shoulder flexion and adduction, elbow flexion, and wrist flexion and extension were affected.

Edema assessment: the child developed an edema toward the forearm.

Sensory assessment: sensory function was intact.

### **Intervention:**

The intervention included:

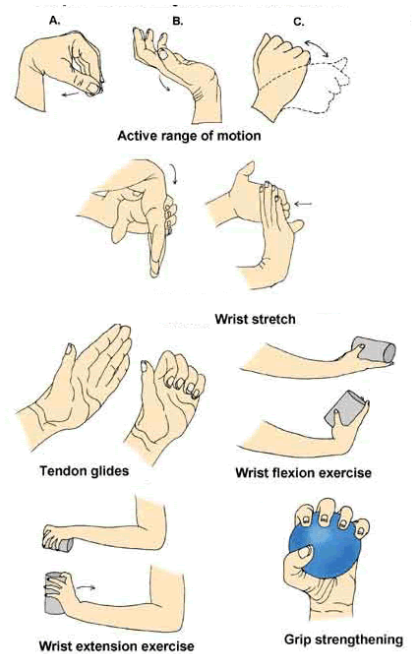
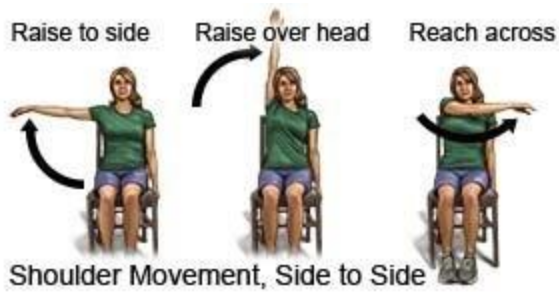
- **Airplane splint** (shoulder is horizontally abducted 90-degree position) to avoid contracture.
  - Like the one in the picture.



Picture 2: Splints may be held in place by Kerlix® or Velcro® straps. Your therapist will tell you which to use.

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- ROM exercises



- Hand function specially reaching:

- Play games such as Connect Four in high side lying
- Ball throwing
- Asked child to use one hand to reach across body to pick up items on the table or on the floor (blocks, Legos etc.)

- Edema management (**Light retrograde massage**):

- Elevate the hand above heart level
- Administer for almost 10 min.
- Use a moisturizer to reduce friction
- Keep the wrist in a neutral position
- Massage from the tips of the fingers down toward the elbow, both the front and back of the hand.