

PATIENT INFORMATION · URGENT CARE

Minor burns and scalds

looking after your burn at home

Most small burns heal well within two weeks and leave little or no mark.

What you do in the first twenty minutes makes the biggest difference, and good dressing care afterwards does the rest.

Go to an emergency department or call 999 if

- the burn is **larger than the palm of the hand**, or goes all the way around an arm, leg, finger or toe;
- the burn is on the **face, ears, eyes, hands, feet, genitals**, or across a joint;
- the skin looks **white, brown, black or leathery**, or the area is **numb** — deep burns often hurt less, not more;
- it is a **chemical or electrical burn**, or the burn was caused by a fire in an enclosed space;
- you have **breathed in smoke or hot air** — a hoarse voice, a cough, soot around the nose or mouth, or any difficulty breathing means call 999 straight away;
- the person burnt is a **baby or young child**, is pregnant, is elderly, or has diabetes or a weakened immune system.

Tower Bridge Hospital London is not an emergency service. The nearest emergency department is the Royal London Hospital, Whitechapel Road, London E1 1FR — a five-minute walk from our front door.

First aid, in order

- 1 Stop the burning.**
Move away from the heat source. If clothing is alight, stop, drop and smother the flames with a blanket — never put yourself at risk.
- 2 Cool the burn under cool or lukewarm running water for at least 20 minutes.**
Start as soon as you can. It is still worth doing up to three hours after the injury.
- 3 Take off clothing and jewellery near the burn**
— including rings and watches, before swelling starts. Leave anything that is stuck to the skin exactly where it is.
- 4 Keep the rest of the body warm**
with a blanket or layers of clothing, avoiding the burn itself. Long cooling can drop body temperature, especially in children.
- 5 Cover the burn loosely with cling film**

, laid over the area in a single layer rather than wrapped around a limb. A clean, clear plastic bag works well for a hand or foot. For a facial burn, use a clean, damp, lint-free cloth instead.

Helps

- Cool running water from a tap or shower.
- Paracetamol or ibuprofen at the dose on the packet.
- Raising the burnt area above heart level to limit swelling.

Never

- Never use ice, iced water or frozen items — they deepen the burn.
- Never apply butter, oil, toothpaste, creams or ointments as first aid.
- Never burst a blister. Intact skin is the best dressing there is.

Looking after the dressing

- If your burn has been dressed, leave the dressing **undisturbed for 24 to 48 hours** and keep it dry and clean.
- Arrange a review at around 48 hours so the burn can be checked and redressed. We can do this here, or you can see your own practice nurse.
- If the dressing becomes soaked, slips off, or starts to smell, do not wait for the review — get it looked at.

Swelling and position

A burn will swell as fluid moves into the area. Keeping the burnt part raised whenever you can lets that fluid drain away.

- **Face:** sit upright during the day and prop yourself up on pillows at night. Lying flat allows fluid to collect around the eyes, which can make them difficult to open.
- **Hand:** if you have been given a burn bag or plastic bag dressing, keep your fingers and hand moving inside it. A stiff hand causes far more long-term trouble than the burn itself.

Signs the burn may be infected

Infection usually shows up after the first day or two. Contact us, your GP or NHS 111 the same day if you notice:

- pain that is getting worse rather than better, or an unpleasant smell;
- the skin around the burn becoming red, swollen and hot to touch;
- fluid or pus leaking through the dressing;
- a temperature, shivering, or generally feeling unwell.

Healing and scarring

Most minor burns heal with little or no scarring. **If your burn has not healed within two weeks, it needs to be reviewed** — burns that take longer than that are more likely to scar and may need specialist input.

- Once the skin has fully healed, moisturise it two to three times a day with a simple emollient such as aqueous cream, emulsifying ointment or liquid paraffin.
- New skin burns easily. Keep the area covered with clothing, or use SPF 30 or higher whenever you are outside, for at least a year.
- Some itching and colour change is normal for several months as the skin settles.

Worried about how it is healing, or about scarring? Book a review with us. We can assess the burn, change the dressing, and refer on to a plastic surgery or dermatology opinion if that is what it needs.

Seen today, not next week

Same-day appointments most days, seven days a week, 9am–7pm, on Whitechapel Road.

Book an appointment

or call 020 7916 0029

Where to get help

Tower Bridge Hospital London

97–99 Whitechapel Road, London E1 1DT

020 7916 0029

WhatsApp **07903 284 189**

info@mhwclinic.co.uk

Open 7 days, 9am–7pm

towerbridgehospital.co.uk

In an emergency

Call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

When we are closed and it is not an emergency

Call NHS 111 or visit 111.nhs.uk.

Also able to advise

Your own GP · Your local pharmacist

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This leaflet is based on current NHS and NICE guidance on the management of burns and scalds. It is general information and does not replace advice from a clinician who has examined your injury. If your burn changes or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.

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