

Actualización en el manejo del paciente quemado en urgencias [

2023

text (article)

Analítica

Loss of skin from a burn will require temporary replacement of these functions until recovery. The WHO defines burns as a global health problem, with a prevalence 7 times higher in developing countries, produced mainly in the domestic environment, with prevention being the intervention that can most reduce mortality. The method-ology used for this research work is part of a documentary bibliographic review. The data collection technique is made up of electronic materials, the latter such as Google Scholar, PubMed, Science Direct, among others, relying on the use of descriptors in health sciences or MESH terminology. The information obtained here will be reviewed for further analysis. The degree of the burn is what determines the management, mild burns do not need hospital management, the use of topical and analgesic creams, help with burning management and can moisturize the skin, these burns usually resolve on their own in a few days. Second degree burns require hospital care, with the application of topical antibiotics, silver sulfadiazine (SSD) and bacitracin, if it is a deep burn it may require graft placement. Third degree burns are the most serious and can cause morbidity and mortality. Their management requires fluid replacement, airway management, breathing and/or ventilation, es-charotomy and grafts, among others. Burns of this degree can reach be disabling due to the degree of injury

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Baratz Innovación Documental

- Gran Vía, 59 28013 Madrid
- (+34) 91 456 03 60
- informa@baratz.es