Skin Cuts and Scrapes

Serious cuts

Cuts that are gushing blood (deep wounds) should be treated with direct pressure: remove clothing around the cut, apply a clean dressing (clean cloth or towel will do) over the cut and push on it. Ideally, a non-stick pad should be put on the wound underneath the dressing, if available. If possible, raise the body part with the wound above the level of the heart. If the dressing soaks through with blood, don't take it off but instead put another dressing on top. Keep pressing until you can get trained clinical or first aid help.

Call an ambulance if you have a deep wound and any of the following:

- You feel faint, short of breath or have chest pain.
- The bleeding continues at more than a slow trickle and you can't stop it.
- You think there is also a new broken bone (fracture).
- The wound goes into your eyeball.
- If you are taking blood thinning medication.

Otherwise, all deep wounds need to be seen promptly by a doctor or nurse, ideally within 2 hours.

Other cuts needing medical attention

You should see a doctor or nurse within 2—6 hours with any of the following:

- Any wound, cut or scrape (abrasion) where you can't stop the bleeding.
- Any wound or cut that is more than a few millimetres deep and where the sides of the cut don't sit together well by themselves (i.e. the wound "gapes"). These may be closed with sutures (stitches), tissue glue or staples.
- Any cut on an eyelid that is deeper than an obviously shallow abrasion.
- Any human or animal bite, or a cut to a hand sustained by punching something.
- A cut where you can't see the bottom of the cut, especially if it is over a joint, e.g. a finger joint or knuckle, or over a knee.
- Any cut or abrasion sustained in dirty water.
- Any cut which continues to get more and more painful after the first hour or so.

Before going to the doctor or nurse:

- If the cut is bleeding, apply a dressing and direct pressure as for a deep wound, and if necessary, elevate the affected area.
- If the wound is not actively bleeding :
  1. Wash it in plenty of clean tap water, and remove any dirt or other visible foreign material (splinters etc.).
  2. Put a clean dressing (or clean cloth or towel) over the cut. Ideally, a non-stick pad if available should used directly on the cut.

Minor cuts and abrasions (scrapes)

More minor cuts and abrasions can usually be treated at home. The steps are as follows:

1. Thoroughly clean the cut and get all visible dirt, or other foreign material (splinters etc.) out of it. Usually the best way to do this is to use plenty of clean tap water and, if necessary, some gauze or a clean washer to loosen the dirt. Do not use antiseptic liquids, soaps, or washes, these provide no cleaning benefit and can damage the already injured tissues. If you are unable to remove all the dirt and foreign material, see a doctor or nurse within 2—6 hours.

2. Apply a clean dressing over the cut or abrasion. For small cuts, a Band-Aid® or similar is often sufficient. For larger areas and odd-shaped body parts like fingers, see your local chemist for a suitable dressing. It may not be practical to apply a dressing to the cut or scrape if it is on a tricky area such as in the hair or near the eye. In such cases, it is usually sufficient to not apply a dressing but instead keep the area as clean and dry as possible.
3. Antiseptic creams are not necessary. The usual cause of an infected cut is dirt in the cut, and an antiseptic cream won't fix this.
4. Keep the dressing clean and dry except for a daily wash, and change it daily, e.g. when you have a shower or bath. Remove the dressing at the end of your shower or bath, lightly clean the cut or abrasion, and apply a new dressing.
5. Otherwise, keep the cut as dry as possible until it heals. Avoid swimming with any cut beyond a minor abrasion.
6. See your doctor if there is increasing pain or redness around a cut, or it starts oozing pus.

Instructions:

You have sustained a cut to_____ managed with_____.

A dressing of _____has been applied. You can shower with this dressing in place in _____days.

See your _____in_____days.

Tetanus

Tetanus is a serious (potentially fatal) infection that enters through dirt in a cut and affects the whole body. It is prevented by tetanus immunisations. The current immunisation schedule is that 3 tetanus immunisations are given to babies in the first 6 months of life, with boosters at 4 years old and at school in Year 7. Different schedules were used in the past.

See a doctor or nurse for a tetanus immunisation within a day if you have had any cut or abrasion and any of the following apply:

- It is more than 10 years since your last tetanus immunisation, or you can't remember when your last immunisation was.
- You have had less than 3 tetanus immunisations in your lifetime, or you are not sure how many you have received.
- It is more than 5 years since your last tetanus immunisation, and there was any dirt at all in in the cut or abrasion, or the cut is deep.

Things to remember:

- If a cut is gushing blood, apply direct pressure and elevate the area above the heart.
- Deep cuts need prompt medical attention.
- Minor cuts and abrasions can usually be treated at home, but get medical attention for cuts that can't be properly cleaned, animal or human bites, cuts to hands from punching something, cuts to eyelids or over joints, or cuts sustained in dirty water.
- Make sure your tetanus immunisations are up-to-date.