OPERATIONAL GUIDELINES: Care of the Amish Patient with a Burn Injury

OBJECTIVE: To ensure that all staff are appropriately trained, prepared and have a clear understanding of the expectations of care for patients of the Amish community. Additionally, this guideline will assist with defining clear expectations of the Amish community members who provide care to patients while under the burn service.

GUIDELINES:

Upstate New York has the fastest growing Amish population, and 5th overall largest in the United States. There are five different settlements within New York state of which three are within the Clark Burn Center’s Service area- Heuvelton, Mohawk Valley, and Mayville/Lowville.

When Amish incur an injury, they will turn to community healers for advice. Community Healers are trained men and women within their community who conduct treatments. Burn treatment often consists of an application of a mixture of honey (one of its main ingredients), olive oil, wormwood, myrrh and other plant-based substances known as B&W ointment. Once the ointment has been applied, the wound is then wrapped in simmered burdock leaves, which are then secured with gauze. This treatment is believed to have anti-infective, anti-inflammatory, and pain-relieving properties. Amish culture prioritizes gentleness, community, and their faith in God’s will when it comes to medical care and the healing process.

Burn injuries that are extremely severe may require a hospital in order to stabilize the patient. Trinkle (2016), makes the point that the Amish only seek healthcare services from an agency that they feel they can trust, and respects their cultural beliefs. Depending on burn severity, a discussion is had with the patient/advocate and often the community healer to determine the wound care for the injuries.

Procedure:

All Patients have the right to self-determination. When treating the Amish patient:

- Accept parallel health care practices using home remedies and folk practitioners in addition to professional care.
- Avoid aggressive legal action to force an Amish family to accept heroic medical care for a family member. Amish values include an acceptance of death as part of God’s plan, and prefer to die at home.
- Recognize the patriarchal nature of Amish society, but also be aware that Amish women will participate in decision making.
- Speak with a soft voice and do not use jargon or slang unless it is commonly used in the local community.
- Allow a comfortable physical space between you and the Amish client/patient.
- Avoid physical touch, especially between genders, unless appropriate and necessary for professional care.
Information for Visitors and Community Healers:

1. All visitors including the community healers will be advised of the number of visitors that are allowed in the patients’ room at a time. (Number of individuals does vary during the care of the wounds).
2. All visitors will be educated on the handwashing and the wearing of gowns and gloves at all times when in the patient room. Education needs to include the removal of gowns and gloves prior to leaving the room and application of new upon re-entry.

Patient receiving care from Community Healers:

1. Clark Burn Center will provide a foundation of standard medical care to ensure the safety of burn patient. With the patient’s (or their advocate’s) consent, this may include intubation, fluid resuscitation, pain control and nutritional support (such as enteral feeding).
2. Community Healers will bring the necessary supplies and equipment for wound care including olive oil, B&W ointment, and burdock leaves. There is an, electric cooking appliance for leaf preparation that is kept on the burn unit for their use only. This can be used in pediatrics, adults, and the burn clinic. The appliance has been approved by clinical engineering for their use. The item must remain in good working order with an intact cord, and must be unplugged when not in use. Hospital supplies for burn dressings, such as debridement kits, scissors, gauze, netting and other necessary supplies will be provided to the Healer on request.
3. A sign will be provided to hang outside the door stating “dressing in progress, no visitors please.”
4. Everyone in the room during the dressing change will wear gowns, gloves, and bouffant caps.
5. Community Healers will perform wound care and apply B&W in areas designated and agreed upon by the burn attending. Wound care typically consists of unwrapped 4x4’s dipped in olive oil. (They do not typically scrub the areas hard, but rather drag the 4x4 over the affected area which acts as a debrider).
6. If a child shows an allergy to the burdock leaves, the leaves will be changed to an organic lettuce leaf or plantain leaves.
7. Community Healers will work with the family and burn attending to ensure the best quality care of the patient.
8. Prior to application of wound care by the community healers, they will be advised as to where a patient’s intravenous lines are and the importance of protecting them. Always provide the suggestion that one individual be in charge of monitoring the lines to ensure they remain undisturbed. This can be a nurse or one of the community healers.
9. Medications (apart from the topical wound treatments discussed here) must be ordered by the medical provider and dispensed by the Upstate pharmacy.
10. An order will also need to be written by the burn team designating the burn/wound location, care, dressing and frequency.
References


Trinkle, Krystal Melich. “Amish Culture and Their Utilization of Burns and Wounds Ointment for the Treatment of Burns” Holistic Nursing Practice: March/April 2016 - Volume 30 - Issue 2 - p 78-87 doi:10.1097/HNP.0000000000000133