with 20-39% TBSA (RR=1.69, p< 0.001) and 40-100% TBSA (RR=1.87, p< 0.001).

**Conclusions:** While methylprednisolone and prednisone decreased the risk of hypertrophic scarring diagnosis among all burn patients identified, dexamethasone showed an increased risk of hypertrophic scarring diagnosis in all burn patients and in each %TBSA stratified group.

## 96 Poly-dl-lactide Copolymer-dressing Use on Burn Wounds and Skin Graft Donor Sites -An Institutional Review

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Introduction: In burn surgical care, wound coverage and the corresponding dressing are paired to maximize the ability to promote re-epithelization, minimize pain and patient discomfort, dressing change frequency and overall cost. This dressing, a copolymer material based on DL lactic acid, has been described as a reliable alternative dressing for partial thickness burns as well as skin graft donor sites with comparable wound-healing quality and duration. Our aim is to assess outcomes results of this copolymer dressing at our institution, as applied to partial thickness burn wounds and graft donor sites.

**Methods:** We performed a retrospective analysis of 55 adult patients admitted between January 1, 2020 to August 25, 2021 for the treatment of partial thickness burns that were managed with a poly-DL-lactide copolymer skin substitute at the burn wound and/or autograft donor site. Three study groups were established based on application site: wound only (group 1), donor site only (group 2), and both (group 3). We assessed operative times, infections rates, complications, length of stay, readmission rates, and mortality.

**Results:** Preliminary data of 40 patients shows clinically similar results for analgesic requirements, operative length, and hospital LOS between group 1 and group 3. Group 2 showed higher analgesic requirements, lower operative times, a lower LOS, and lower readmission rates. Group 3 shows higher pain levels and longer operative times, when compared with groups 1 and 2, but lower readmission rates than group 1.

**Conclusions:** The poly-DL-lactide copolymer skin substitute offers reliable wound coverage for a partial thickness burns while also reducing frequency of dressing changes and associated pain correlating to reduced length of hospital stay and wound healing interval.