facilities often have their own building codes limiting the temperature of hot water supplied to patients. The majority of states also adopt a model plumbing code, developed primarily by one or two standards organisations. Amendments to code result in various code content, code edition used, and individualised state applications. Progress in uniformly standardising codes are impeded by widespread public ignorance regarding the importance of scald burn prevention.

Conclusions Tap water scalds can be easily prevented if public awareness of their dangers is increased and a national standard for tap water temperature regulation is adopted and applied across counties and cities. Tap water scalds remain a serious public health issue that future investigation and legislation should address.

0206 HOT TAP WATER LEGISLATION IN THE U.S.

A Chang, M Pressman, E Blank, M Peck* Correspondence: Arizona Burn Center, Maricopa Medical Center, 2601 East Roosevelt Street, Phoenix, AZ 85254, USA

10.1136/ip.2010.029215.206

Objective Tap-water scalding and its subsequent injuries are often preventable through simple measures such as reducing water heater thermostats to a maximum of 50°C or installing temperature-regulating valves. Yet a lack of public awareness of the risk, prevalence, and severity of scald burn injuries reduces prevention efforts. This study describes the current tap water legislation with the goal of facilitating advocacy groups and policy makers in their future efforts towards scald burn injury prevention.

Methods We gathered and reviewed information from individual state legislative codes, model code organisations, and the CPSC; and conducted a scald-related knowledge, attitudes and behaviours survey of 1003 US adults.

Results Legislation in 47 states and the District of Columbia includes an administrative code concerning the regulation of tap-water temperature. Hospitals and related healthcare