5050 SNAKE BITE GUIDELINE

EMR  EMT/EMT-IV  AEMT  Intermediate  Paramedic

- Assess ABCs, mental status
- Administer oxygen
- Start IV
- Monitor VS

Initiate general care for snake bites

Assess for localized vs. systemic signs and symptoms

Localized Symptoms:
- Pain and swelling
- Numbness, tingling to bitten part
- Bruising/ecchymoses

Systemic Symptoms:
- Metallic or peculiar taste in mouth
- Hypotension
- Altered mental status
- Widespread bleeding
- Other signs of shock

General Care:
- Remove patient from proximity to snake
- Remove all constricting items from bitten limb (e.g.: rings, jewelry, watch, etc.)
- Immobilize bitten part
- Initiate prompt transport
- Do NOT use ice, refrigerants, tourniquets, scalpels or suction devices
- Mark margins of erythema and/or edema with pen or marker and include time measured

Opioid for severe pain

Be prepared to manage airway if signs of airway obstruction develop

Opioid for severe pain

Transport with bitten part immobilized
- Monitor ABCs and for development of systemic signs/sx
- Complete General Care en route

Treat hypotension w. 20cc/kg IV NS bolus
See hypotension/shock guideline

Obtain specific information:
- Appearance of snake (rattle, color, thermal pit, elliptical pupils)
- Appearance of wound: location, # of fangs vs. entire jaw imprint
- Timing of bite
- Prior 1st aid
- To help with identification of snake, photograph snake, if possible. Include image of head, tail, and any distinctive markings.
- Do not bring snake to ED

Specific Precautions:
- The Rattlesnake is the most common venomous snake in our RETAC.
- Exotic venomous snakes, such as pets or zoo animals, may have different signs and symptoms than those of pit vipers. In case of exotic snakebite, contact base and consult zoo staff or poison center for direction.
- If adequate photo can be taken, it is not necessary to bring snake to ED.
- Never pick up a presumed-to-be-dead snake by hand. Rather, use a shovel or stick. A dead snake may reflexively bite and envenomate.
- >25% of snake bites are “dry bites”, without envenomation.
- Conversely, initial appearance of bite may be deceiving as to severity of envenomation.
- Fang marks are characteristic of pit viper bites (e.g. rattlesnakes).
- Jaw prints, without fang marks, are more characteristic of non-venomous species.

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