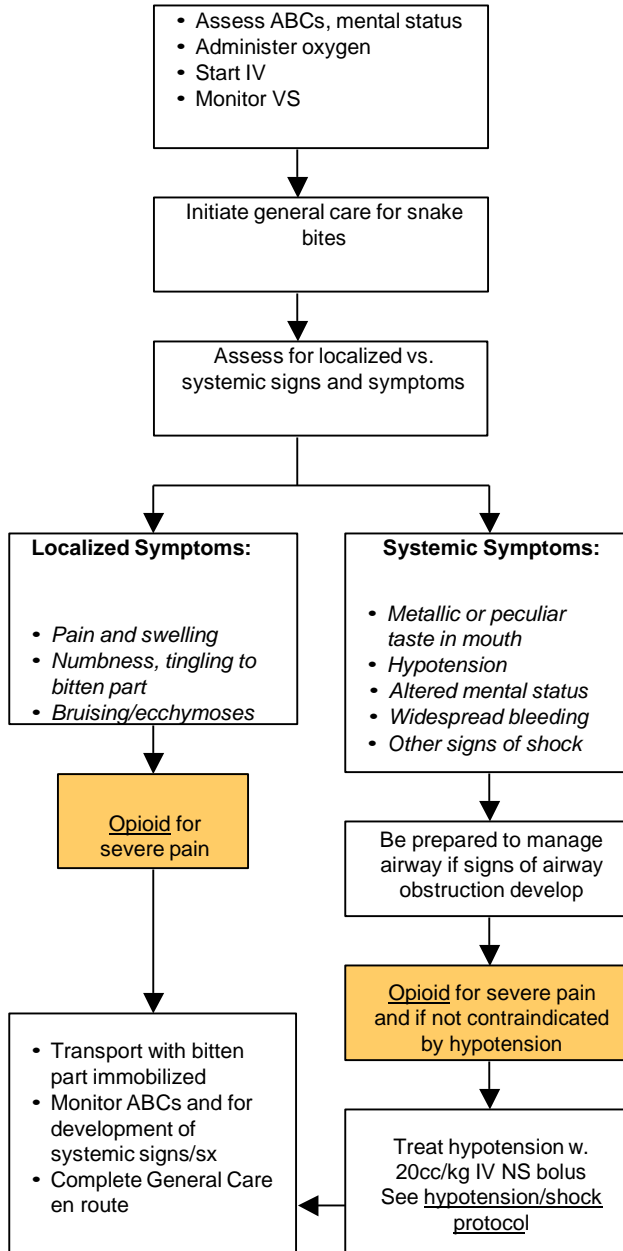


E056 SNAKE BITE PROTOCOL

EMT	AEMT	EMT-I	Paramedic
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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

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:

- Exotic venomous snakes, such as pets or zoo animals, may have different signs and symptoms than those of pit vipers. In case of exotic snake bite, contact base and consult zoo staff or poison center for direction.
- 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's.
- 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.
- **Take a picture of the snake, including images of head and tail.**