



### EMERGENCY DEPARTMENT

Suspected snake bite envenomation clinical pathway

SURNAME	URN	
GIVEN NAME	DOB	GENDER
ADDRESS		
SUBURB	TELEPHONE	
POSTCODE		

Date: \_\_\_/\_\_\_/\_\_\_

Time of suspected snake bite: \_\_\_:\_\_\_

This clinical pathway only applies to suspected Victorian community-acquired snake bites in patients who are not snake handlers. Specific advice regarding bites in snake handlers and from exotic snakes should be obtained from a clinical toxicologist.

If unsure, seek advice from a clinical toxicologist (Victorian Poisons Information Centre (VPIC) 13 11 26)

Emergency department – Suspected snake bite clinical pathway

<b>IMMEDIATE MANAGEMENT</b>	<b>Apply pressure bandage, immobilise limb and immobilise the person</b>	
	<ul style="list-style-type: none"> <li>Use a broad 10–15cm elasticised bandage.</li> <li>Apply the bandage to cover the whole limb. Start the bandage distally (toes/fingers) and continue up the limb to include the bite site, as high as possible. The bandage should be fitted as firm as if bandaging a sprained ankle.</li> <li>Immobilisation of the limb (e.g. splint) and immobilisation of the patient (e.g. bed rest) is essential.</li> <li><b>Time pressure bandage applied ___:___</b></li> </ul>	
<b>ASSESSMENT OF INITIAL BLOODS</b>	<b>Assess for clinical or laboratory evidence of envenomation</b>	
	Initial bloods: INR, APTT, fibrinogen, FBE and film, CK, UEC, quantitative D-dimer.	
	<b>Early discussion with a clinical toxicologist (VPIC 13 11 26) is strongly recommended in the following instances to determine if antivenom is required:</b>	
	<ul style="list-style-type: none"> <li>any patient with significant symptoms (especially headache, vomiting or early collapse) or any patient who appears systemically unwell</li> <li>any abnormality of INR, APTT, fibrinogen, D-dimer, full blood count (leukocytosis) or CK &gt; 1,000 IU/L.</li> </ul>	
	<b>Treat as envenomed if there is:</b>	
	<ul style="list-style-type: none"> <li>History of unconsciousness, collapse, convulsions or cardiac arrest (concurrent with usual emergency care)</li> <li>Neurotoxic paralysis (e.g. ptosis, ophthalmoplegia, limb weakness, respiratory effects)</li> <li>Coagulopathy (e.g. unclottable blood, INR &gt; 1.3, prolonged bleeding from wounds and venepunctures)</li> </ul> <p>Commence <i>Snake bite envenomation clinical pathway</i> and seek advice from a clinical toxicologist (VPIC 13 11 26).</p>	
<b>No clinical or laboratory evidence of envenomation</b>		
Release pressure bandage immobilisation.		
<b>Time: ___:___</b>		
1 hour post removal of pressure bandage immobilisation:		
<ul style="list-style-type: none"> <li>Neurological exam.</li> <li>Repeat bloods: INR, APTT, fibrinogen, CK, FBE, UEC, quantitative D-dimer.</li> </ul>		



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<b>UP TO 6HRS POST SUSPECTED BITE</b>	<b>Clinical or laboratory evidence of envenomation</b>	
	Commence <i>Snake bite envenomation clinical pathway</i> and seek advice from a clinical toxicologist (VPIC 13 11 26).	
	<b>No clinical or laboratory evidence of envenomation</b>	
	6 hours post suspected snake bite: <ul style="list-style-type: none"> <li>Neurological exam.</li> </ul> Repeat bloods: INR, APTT, fibrinogen, CK, FBE and film, UEC, quantitative D-dimer.	

<b>6-12HRS POST SUSPECTED BITE</b>	<b>Clinical or laboratory evidence of envenomation</b>	
	Commence <i>Snake bite envenomation clinical pathway</i> and seek advice from a clinical toxicologist (VPIC 13 11 26).	
	<b>No clinical or laboratory evidence of envenomation</b>	
	12 hours post suspected snake bite: <ul style="list-style-type: none"> <li>Neurological exam</li> <li>Repeat bloods: INR, APTT, fibrinogen, CK, FBE, UEC, quantitative D-dimer.</li> </ul>	

<b>DISCHARGE CONSIDERATIONS</b>	<b>Clinical or laboratory evidence of envenomation</b>	
	Commence <i>Snake bite envenomation clinical pathway</i> and seek advice from a clinical toxicologist (VPIC 13 11 26).	
	<b>No clinical or laboratory evidence of envenomation</b>	
	Criteria for discharge <ul style="list-style-type: none"> <li>Normal neurological exam</li> <li>Normal bloods: INR, APTT, fibrinogen, platelet count, D-dimer, CK and renal function at 12 hours after time of suspected bite.</li> </ul>	

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Pathway completed by:

<b>Name:</b>	<b>Sign:</b>	<b>Designation:</b>
<b>Date:</b> / /	<b>Time:</b> :	

