



**ORANGE COUNTY EMERGENCY MEDICAL SERVICES**  
**BASE HOSPITAL TREATMENT GUIDELINES**  
**SNAKE ENVENOMATION (ADULT/ADOLESCENT)**

#: BH-E-30  
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**BASE GUIDELINES**

1. Determine ALS Standing Order treatments/procedures rendered prior to base hospital contact. Use ALS standing order as guidelines for treatments/procedures not initiated prior to base hospital contact.
2. Determine closest facility with immediate access to antivenin.
3. For continued uncontrolled pain when BP greater than 90 systolic:
  - ▶ May repeat or give Fentanyl 50 mcg IV/IM (or 100mcg IN) or Morphine Sulfate 5 mg IV/IM, repeat once after 3 minutes for continued pain if systolic BP greater than 90 (maximum total dose of Fentanyl 200 mcg, Morphine 20 mcg).
4. It is no longer recommended that a tourniquet be used above the level of the bite or that the affected extremity be held below the level of the heart. These actions are associated with excessive swelling in the area of the bite. Poisonous snakes that are found in the wild in Southern California are not known to have venom that circulates through the blood or lymph systems, rather the venom is a local toxin.
5. If the snake causing the envenomation is imported and not a local variety, consult the Base Physician for direction. Tourniquets to localize venom when the snake is imported (particularly from Australia or Asia) may be of benefit.

**ALS STANDING ORDER**

1. Assure scene is safe and risk of second snake strikes are alleviated. If snake located, take cell phone picture of snake, if can be done safely, to show to receiving facility staff.
2. Make early base contact to determine appropriate receiving hospital that can provide antivenin.
3. Minimize patient movement
4. Splint or otherwise immobilize the affected extremity; keep affected extremity at the level of the heart.
5. Do not use cold packs.
6. For pain:
  - ▶ *Morphine sulfate 5mg (or 4mg carpuject) IV/IM, may repeat once in 3 minutes to control pain*
  - OR*
  - Fentanyl 50 mcg IV/IM or Fentanyl 100mcg IN, may repeat once in 3 minutes to control pain.*
7. ALS escort to nearest ERC identified by Base Hospital (see #2 above).

**TEATMENT GUIDELINES:**

1. Past recommendations for use of tourniquet and keeping affected extremity below the level of the heart is no longer current due to increased risk of edema and subsequent circulatory compromise in the bite area.

Approved:

*Carl Schultz, MD*

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