

This guideline applies only to witnessed or suspected snake bites from venomous snakes found in Victoria (Brown, Tiger and Red-Bellied Black snakes)

Toxicity / Risk Assessment

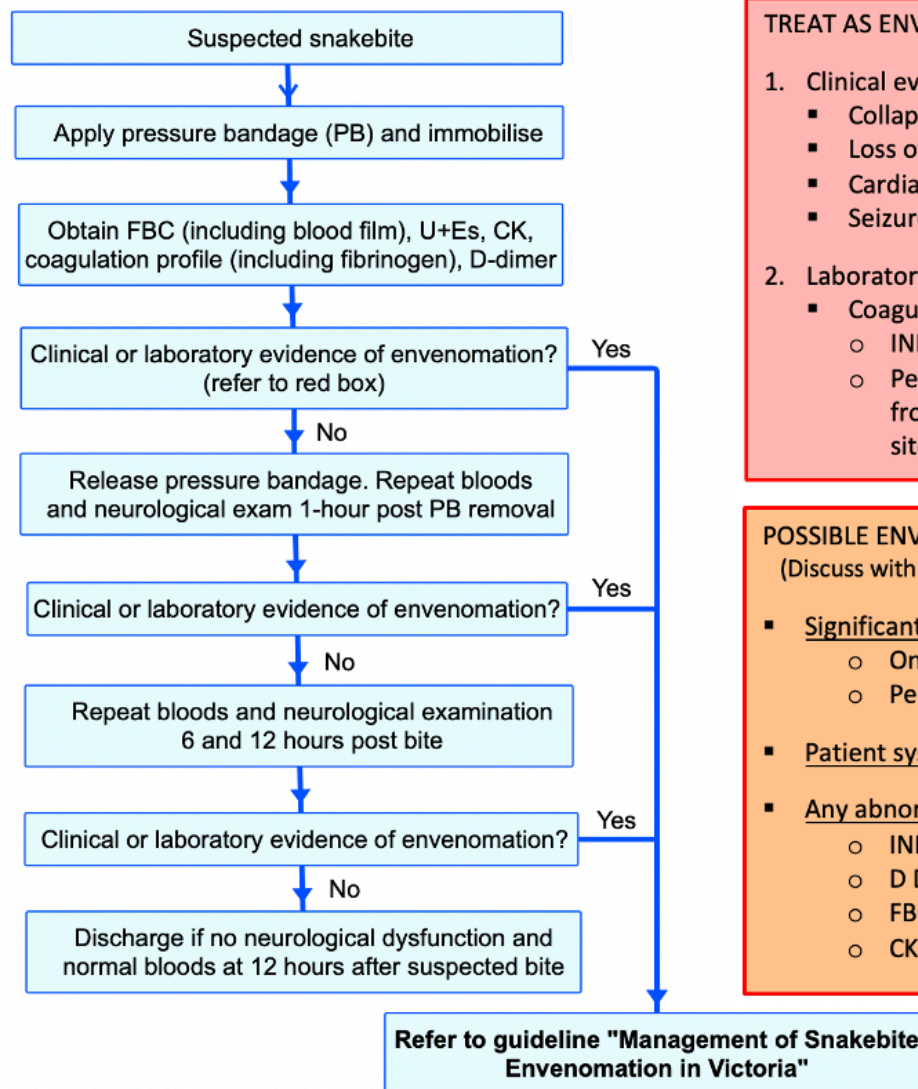
Patients with no bite mark or no symptoms may be envenomed.

All SUSPECTED snake bite victims require admission for lab investigations/neuro exam until a time point at least 12-hours post-bite.

Snakes causing human envenoming in Victoria: Tiger snake, Brown snake, Red-Bellied black snake.

Clinical features of envenoming:

- Patients may be envenomed, but remain asymptomatic
- Early collapse, cardiac arrest (Brown Snake)
- **None-specific:** headache, nausea, vomiting, abdominal pain
- **Neurotoxicity:** ptosis, diplopia/ophthalmoplegia, respiratory or distal limb paralysis, seizures
- **Coagulopathy:** bleeding from bite site, venipuncture, gums, epistaxis, ICH
 - a) Venom Induced Consumptive Coagulopathy (VICC): INR > 1.3,
 - ↓ fibrinogen, elevated d-dimer
 - b) Anticoagulant coagulopathy (Black snake): raised APTT
- **TMA (thrombotic microangiopathy):** renal impairment, ↓ Hb, ↓ platelet
- **Musculoskeletal:** local pain (Black snake), rhabdomyolysis, myoglobinuria (can be delayed)



TREAT AS ENVENOMED IF:

1. Clinical evidence
 - Collapse
 - Loss of consciousness
 - Cardiac arrest
 - Seizure
2. Laboratory evidence
 - Coagulopathy
 - INR >1.3
 - Persistent bleeding from venipuncture sites / wounds

POSSIBLE ENVENOMATION
(Discuss with a clinical toxicologist)

- Significant symptoms
 - Ongoing headache
 - Persistent vomiting
- Patient systemically unwell
- Any abnormality of:
 - INR, APTT, fibrinogen
 - D Dimer
 - FBC
 - CK