Snake Bite Treatment Protocol

FLOW CHART FOR SNAKEBITE MANAGEMENT

Patient attending Emergency Room of any hospital; H/O Bite (Snake or Unknown)

Always admit and Start IV fluid (NS / 5%D); Inj. T .Toxoid.
Remove any ligature
Rapidly assess for any Crisis (Give attention to Crisis 1st).

CPR , Ambu Bag

0.25 ml Inj. Adrenaline S/C before AVS
NO SKIN TEST

Signs of Envenomation Present :
Add 10 vials of AVS in running fluid ;
Start fluid rapidly (less than 1 hr).
If the snake is sure to be S S Viper, start with 5 vials ASV

No Sign of Envenomation.
Reassurance, Continue plain drip slowly
For 24 hours.

DOCTOR MUST BE PRESENT BESIDE ALL ALONG DURING AVS DRIP
Inj. Adrenaline (0.50 ml) IM, if any sign of AVS Reaction is noted

Neurological Signs Present :
Inj. Atropine 1 amp (0.6mg) I V(must).
Inj. Neostigmine 3 ML (1.5mg) I M .
Ptosis and Neck weakness will improve in one hour in Cobra bite only
(No improvement in Krait & R viper bite)

Definite H/O : Viper bite or Signs of Bleeding ;
Do 20WBCT :- Blood in glass Test tube fluid (after 20 mins)
Viper Bite Confirmed
(Must avoid Plastic Syringe and Test tube)

If active abnormal bleeding continues 1 hr after 10 vials, Repeat the 2nd 10 vials of ASV

Neurological Signs not improving
after 1st dose Atropine + Neostigmine ;
(Repeat both Atropine + Neostigmine after one hour)
Infuse 2nd dose of 10 vials of AVS rapidly
2 hr. after 1st dose.
Neurodeficit not improving 1 hr after 2nd A+N:
Transfer for artificial Ventilation

Transfer to Referral Hospital
(where laboratory facility for kidney function test present)
at 2nd Hospital; Repeat 20WBCT
(6 hrs after 2nd 10 vials of AVS inside patient's blood).
2nd 20WBCT Not Clot : Repeat 10 vials of AVS rapidly.

Artificial ventilation SOS
Use Ambu bag at Primary care Center
and on transport.

Never Refer before infusion of 10 vials of AVS

Transfer to Urology for Dialysis
(if Haematuria present
or Kidney function abnormal).

No AVS after 30 Vials.

Discharge only when no Neurodeficit present.

Discharge only when kidney function is stable

1) Crisis may be Shock, Respiratory problem etc.
2) Progressive local swelling and pain are sure signs of envenomation.
3) Ptosis, hoarseness of voice, choking throat are early Neuro. Signs.
4) Bleeding Gum, Haematuria , Blood stained sputum or bleeding from bite mark or old ulcer.

KEEP ADMITTED FOR 48 HRS IF AVS WAS INFUSED

No local pain or swelling in Krait Bite
Only late Neurological Signs like Ptosi

May present with Pain in Abdomen or Throat , arthralgia , Convulsions.
H/O : Open Floor bed Suggestive.

20WBCT

Gently tilt after 20 min

For Children: AVS same dose.
Other drugs according to body weight :
Adrenaline : 0.01 mg/Kg ,
Neostigmine : 0.04 mg/Kg,
Atropine : 0.08 mg/ Kg

AVS Infusion Procedure

Signs of AVS Reaction:
URTICARIA ,Scalp itching, fall of BP
Vomiting,Pain abdomen , Broncospasm