

## FIRST AID

1. THE DEFINITIVE TREATMENT OF A POISONOUS-SNAKEBITE VICTIM CAN ONLY BE PROVIDED BY A PHYSICIAN IN A HOSPITAL. The first priority of care to a snakebite victim is to arrange transportation to an appropriate physician/hospital.
2. While waiting for and during transportation:
  - a. Calm the patient.
  - b. Have the patient lie flat, face up, and explain that remaining quiet will slow the spread of any venom through the system.
  - c. Locate the bite area and clean it gently with soap and water.
  - d. **Do not apply ice.**
  - e. If the bite occurred on an arm or leg, splint the extremity to decrease movement.
  - f. Be alert for vomiting, which may be a sign of anxiety rather than the toxin itself.
  - g. Do not give anything by mouth.
  - h. If the patient was bitten on the trunk, keep the patient supine and quiet and transport as quickly as possible.
  - i. Monitor vital signs and mark the skin with a pen over the area that is swollen.
  - j. If there are any signs of shock, treat the patient for shock.
  - k. Only if the snake has been killed, bring it with you to the hospital.
  - l. Notify the hospital; if possible, describe the snake.
  - m. Transport promptly.
  - n. If the patient shows no signs of envenomation, provide basic life support (BLS) as needed, place a sterile dressing on the suspected bite area, and immobilize the bite area.
3. TRANSPORT VICTIM IMMEDIATELY TO MEDICAL FACILITY. Send the snake, if possible, or its identifications with the victim to aid medical personnel in determining the proper treatment.

**CAUTION:** Do not attempt to capture the snake alive. Try to kill it without damaging too many of its identifying features. Handle it carefully; a freshly killed snake can bite due to reflex action.

## POISONOUS SNAKEBITE TREATMENT

### PIT VIPER/VIPER



### ELAPID

**DISTRIBUTION:** US Army Training Support Centers (TSCs)  
HEADQUARTERS DEPARTMENT OF THE ARMY  
June 2006

## VIPERS

Vipers, one of the two groups of poisonous snakes, have long movable fangs. When not in use, the fangs fold back into a sheath on the roof of the mouth. The fangs are erected when the snake strikes. Examples of vipers include the pit viper, cottonmouth, water moccasin, rattlesnake, copperhead, fer-de-lance, Russell's viper, Korean pit viper, and Gaboon snakes.

### SIGNS AND SYMPTOMS

The venom affects the circulatory system and destroys muscle. The following signs and symptoms usually develop within 5 to 10 minutes and slowly spread:

- Severe pain.
- Swelling.
- Change in skin color.

After several hours, the following signs and symptoms will occur:

- Further swelling, further changes in skin color.
- Bleeding blisters.
- Numbness of the affected area.

Other signs and symptoms which may occur include:

- Weakness.
- Vomiting.
- Shortness of breath.
- Rapid pulse.
- Shock.
- Nausea.
- Sweating.

## ELAPIDS

Elapids, one of the two groups of poisonous snakes, have one pair of immovable fangs. Examples of elapids include coral, cobra, mamba, and krait snakes.

### SIGNS AND SYMPTOMS

The venom affects the central nervous system. Because a snakebite initially produces only slight pain and swelling, the victim may fail to realize that he/she has been bitten or that the wound is serious. The following signs and symptoms usually develop within 1 to 7 hours after the bite occurs:

- Blurred vision.
- Drooping eyelids.
- Slurred speech.
- Drowsiness.
- Increased salivation and sweating.

If the snakebite is not treated promptly, the following signs and symptoms may appear:

- Vomiting.
- Shock.
- Breathing difficulties.
- Paralysis.
- Convulsion.
- Coma.