Snake bite guidance

Clinical guidance supplement

OFFICIAL

### Purpose

Snake bite is uncommon in Victoria and envenomation is rare, but it is a dangerous condition and all snake bites need urgent medical attention. The coordination of services (transport, treating facility and antivenom stockholders) is important to ensure the best possible outcome for the patient. Safer Care Victoria recognises the importance of providing information about how to manage snake bite and developed guidance for the healthcare sector.

### Scope

The snake bite guidance is for use in Victoria only and is aimed at clinicians working in emergency departments and urgent care centres. It can be used for management of suspected or confirmed community-acquired endemic snake bite in both adult and paediatric patients. The information relates to bites from snakes endemic to Victoria (tiger, brown and red-bellied black snake); it does **not** provide advice regarding bites in snake handlers, or bites from exotic snakes (these cases must be discussed with a toxicologist).

### Evidence

Victoria’s snake bite guidance and pathways were originally developed in 2013 and have undergone continual revisions since that time. Given the frequency of the revisions, little new evidence had been published since the previous review. The guidance was updated on consensus of the Snakebite Expert Working Group. The group’s members include emergency physicians, toxicologists, a toxinologist and a paramedic. Several of the members are researchers in their respective fields.

### Methodology

The Snakebite Expert Working Group continually reviews Victoria’s snake bite guidance and pathways to ensure the information remains consistent with current best practice. At a meeting in September 2022, the group discussed and amended the existing guidance. The changes were then reviewed and endorsed by the group.

### Revisions (September 2022)

Changes made by the expert working group were:

* changed information on red back spider antivenom stock holdings- removal of recommended stock holdings
* added recommendation of age appropriate (paediatric) intravenous volume consideration
* changed information for assessing evidence of envenomation- removal of swab recommendation for SVDK testing.

###  Expert Working Group

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| Name | Role | Affiliation |
| Alan Eade (chair) | Chief Paramedic Officer | Safer Care Victoria |
| Gerard O’Reilly | Emergency Care Clinical Lead | Safer Care Victoria |
| George Braitberg | Director of Emergency Medicine Research | Austin Health |
| Peter Cameron | Emergency Medicine Physician | Alfred Health |
| Bart Currie | DirectorTropical and Emerging Infectious Diseases | Menzies School of Health Research,Royal Darwin Hospital |
| Zeff Koutsogiannis | Senior Clinical Toxicologist | Victorian Poisons Information Centre |
| Shaun Greene | Emergency Medicine Physician andClinical Toxicologist | Victorian Poisons Information Centre,Austin Health |
| Geoff Isbister | Emergency Medicine Physician andClinical Toxicologist | University of Newcastle |
| Jeff Robinson | Rural Physician | Mount Beauty Medical Centre |
| Kenneth Winkel | Toxinologist | University of Melbourne |

### Conflicts of Interest

No conflicts of interest were declared by members of the Snakebite Expert Working Group.

### Review Timeframe

The snake bite guidance will be reviewed annually by the Snakebite Expert Working Group, unless the need arises sooner. The next scheduled review will be in September 2023.