

Southeast Arizona EMS Region Standing Order Training Module

DATE: February 1, 2008

STANDING ORDER: Snake Bite

PURPOSE

This SAEMS Standing Order Training Module has been developed to serve as a template for EMS provider training. The intent is to provide consistent and concise information to all providers practicing within the SAEMS Region. The content of the Training Module has been developed by the Protocol Development and Review Committee, and includes the specific Standing Order, resource and reference material, and instructions for completing the Training Module to obtain continuing education credit. One hour of SAEMS continuing education credit may be issued following successful completion of the module.

OBJECTIVES: Upon completion of this learning module the participant will be able to:

1. Discuss the role of medical direction related to the use of Standing Orders.
2. List three benefits of Standing Orders.
3. Outline inclusion and exclusion criteria for this Standing Order.
4. Describe the communication process between the field and the receiving facility when a Standing Order is implemented.
5. List the elements of the dispatch radio relay.
6. List two reasons for direct facility (on-line) contact following implementation of a Standing Order.

INSTRUCTIONS:

1. Read the accompanying information, Standing Order, and any additional reference material as necessary.
2. Complete the attached Posttest by _____, and return with self addressed envelope to:

3. A SAEMS CE Form will be issued to providers scoring greater than ____% on the Posttest.
4. Please contact _____ for questions, suggestions, concerns.

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Post Test

(February 1, 2008)

Name: _____ **Date:** _____

Contact phone number: _____ **Agency:** _____

1. T or F: The term “dry bite” means that no venom has been injected.
2. T or F: Rattlesnake venom is a complex protein that primarily has hemotoxins, neurotoxins, and myotoxins?
3. T or F: Those “toxins” primarily will manifest in local and systemic effects to include: edema, hemorrhage, discoloration, pain, compartment syndrome, shock, renal compromise, hemolysis, permanent muscle and nerve damage.
4. T or F: The most common venomous snakes in Arizona are coral snakes, western diamond back, and mohave rattlesnake.
5. T or F: Emergency Departments must identify the type of venomous snake; therefore it is imperative that the EMT bring the snake with them for identification purposes in the E.D.
6. T or F: Because only the University Medical Center stocks Crofab (rattlesnake antivenom), all patients must be transported or flown to that facility.
7. You are dispatched to a remote desert area to a 21 y.o male with an alleged snakebite. Upon arrival at the scene, you are directed by one of several persons searching the area for the snake, to the patient who is sitting in a car. You notice the patient is lying down and is arousable when you call his name loudly. He is very cool and pale to touch and you note that his radial pulse is very rapid and weak. You also note the strong odor of alcohol on his breath as he mumbles that his left hand is hurting. Your EMT partner is placing the patient on high flow oxygen via non-rebreather mask and cardiac monitor. You have observed the patient’s left hand has two puncture marks on the second finger with redness and swelling to the entire hand/wrist area.

T or F: This patient is exhibiting signs and symptoms of a significant envenomation and needs to be transported immediately with additional emergency interventions initiated enroute.
8. T or F: The patient in question 7 has a watch on his right wrist and a gold colored ring on his left hand. Both of these items should be removed or cut off if necessary and the proximal edge of the edema/dyscoloration marked and timed on the left hand/arm.

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9. T or F: The coral snake is identified by its sequence of colors which can be remembered by the mnemonic: “Red on yellow, kill a fellow; Red on black, venom lack.”
10. T or F: The Arizona coral snake is docile, rarely bites, and no antivenom is made for this species which if significant envenomation occurs, can result in respiratory arrest within 36 hours.