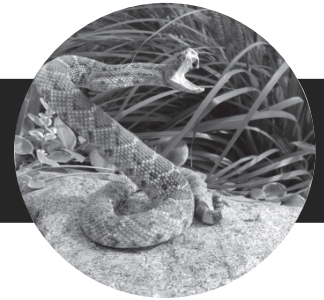


21 – SNAKE BITE, HIKING

NEVADA



THE STORY:

While hiking in a remote area of the Nevada desert, a two person party stopped for lunch in an area of large boulders in order to take advantage of the slightly cooler shady patches offered behind them. A 32 y/o female bent to lean her pack up against a boulder when she was struck by a rattlesnake tucked in a small hollow beneath the stone. The patient stated she heard the snake rattle just as she set the pack down but was unable to locate the source of the sound in the seconds before she was struck on the right ankle. At 1200hrs., the Pt complained of

pain on her right lateral ankle calling her partner's attention to three small puncture wounds with slight bleeding located just forward of her distal fibula. On exam: the Pt appeared to be in some discomfort, on the ground approximately 10' (3m) from the recoiled snake, holding her ankle and very anxious. The patient was assisted further away from the snake and an exam of the ankle was conducted as described above. Vitals were: Pulse: 96, Resp.: 32, Skin: slightly pale and moist, Pt was alert and anxious.

Put the appropriate information from the story above into the correct spaces provided in the SOAP note. Develop an Assessment for 1200hrs. with Anticipated Problems and an appropriate Treatment Plan.

At 1220, after her running shoe and ankle jewelry were removed for examination, the patient's ankle was found to be very tender in the area of the three puncture wounds with an expanding area of purple discoloration around the bite. The Pt's

forefoot and ankle had become swollen and very painful. Pulse: 84, Resp.: 18 and easy, Skin: normal, Pt had calmed considerably although with some evident discomfort.

Put the appropriate information from the story above into the correct spaces provided in the SOAP note. Develop an Assessment for 1220hrs. with Anticipated Problems and an appropriate Treatment Plan considering that this pair of hikers is approx. 1hr. from the trailhead and then approx. 1hr. drive from the nearest paved road with an additional 1/2 hr. to the nearest hospital.

QUESTIONS

1. Would you call this a high risk wound? Besides the puncture wounds themselves, do you think this bite is significantly envenomated? If so, why?
2. What are some of your evacuation options for this patient? How might those options affect the snake bite injury?

ASSESSMENT AND TREATMENT PLAN

A = Assessment (Problem List)	A' = Anticipated Problems	P = Treatment Plan
1200		
snake bite w/ high risk puncture wounds	swelling 2° envenomation / infection	clean / dress / monitor
ASR	cont. ASR	reassurance
1220		
envenomated snake bite	soft tissue injury / swelling / pain	splint / monitor CSM and toxin
		progression evacuation as tolerated

NOTES

What Actually Happened Next ...

The patient was able to hobble with significant discomfort and increasing assistance to the trailhead although it took much of the remainder of the day and the patient's foot was dramatically swollen, purple, and extremely painful with progression of the swelling and discoloration to just below the knee. The patient's companion transported her to the nearest hospital where she was transferred by ambulance to a larger medical center for treatment with antivenom. Her outcome is unknown.
