

# Rapid Lesson Sharing

**Event Type:** Rattlesnake Bite

**Date:** August 13, 2018

**Location:** Cougar Creek Fire, Okanogan-Wenatchee National Forest, Washington

*Concerned that he'd been bitten by the snake, he checked his abdomen and discovered a small area that was pink in color and there were two small puncture wounds.*

## Background

On August 13 a firefighter was bitten by a rattlesnake while working on the Cougar Creek Fire.

Members on the incident quickly initiated the IMT's Incident Within an Incident (IWI) protocols and the firefighter was transported to a local hospital where he was treated and released.



A young western rattlesnake. (Not the young rattler from this incident.)

## Summary of Incident

It was hot and dry on the line and the yellow jackets were aggressive. Several firefighters on the crew had already been stung. Therefore, Firefighter A (FFA) knew it was just a matter of time before it would be his turn.

FFA had just sat down for a break and was moving around to get comfortable when he felt a sharp pain in his abdomen. He was angry as he stood up searching for the guilty bee when he noticed a snake crawling across his pack. Concerned that he'd been bitten by the snake, he checked his abdomen and discovered a small area that was pink in color and there were two small puncture wounds.

The Crew Boss (CB) and FFA quickly identified the snake was a little rattler with only a single button for a rattle. The Crew Boss verified the bite marks and initiated the response for a medical emergency.

*The Firefighter remembered his training and focused on his breathing. He stayed calm and relaxed so the venom would not spread rapidly through his blood stream.*

## Response

CB and FFA were close to the road so they jumped in their truck and headed toward Staging Area #14 (SA14) because they knew the medics were nearby. CB radioed the DIVS and requested to have a Medic meet them at SA14. A Line Medic and two ALS ambulances were also dispatched to SA14. CB and FFA remained calm and focused on the task at hand.

Per direction given over the radio by one of the field Medics, FFA circled the affected area around the bite so it could be monitored for growth. FFA remembered his training and focused on his breathing. He stayed calm and relaxed so the venom would not spread rapidly through his blood stream.

CB and FFA arrived at SA14 approximately five minutes from the time of the snake bite. The incident ambulances and Medics arrived about three minutes later. The Medics assessed FFA and started an IV. Vital signs were normal. FFA was stable and alert. There was localized redness around the bite.

There was a short delay and some confusion about the mode of transportation until the IMT learned their request for an air ambulance had been denied due to smoke.

### ***What would you do if your request for an air ambulance was denied?***

The Line Medic was comfortable with transporting FFA so they loaded him into one of the incident ambulances and headed toward the ICP where they would transfer him to a local ambulance.

The local ambulance was still 15 minutes away when the incident ambulance neared the ICP, so the decision was made to have the incident ambulance continue on to the local hospital. Because the driver was new to the area and didn't know how to get to the hospital, he made a quick stop at the ICP for directions.

The Communications Unit Leader, who was monitoring radio traffic during the response, decided to get in the ambulance and provide directions along the way. As the ambulance was leaving the ICP, a Sheriff who had been contacted by the IMT earlier, got in front of the ambulance and provided a police escort to the hospital.

At the hospital it was determined that no venom had been released into the wound. FFA was monitored for eight hours and was then released from treatment. He was directed to rest for a day, monitor the bite area to make sure the localized redness did not spread, and to watch for other symptoms.

### **Successes**

- ❖ The IMT's response was smooth and efficient and all parties communicated well.
- ❖ FFA and the crew were a local resource on a lend/lease agreement to the IMT and appropriate notifications were made to the local unit.
- ❖ The IMT had previously practiced an Incident Within an Incident that included verifying available resources, contact numbers, and response times. Also, the IMT's Medical Unit Leader had talked to a local 911 Dispatcher to discuss how they would coordinate transferring a patient from an incident ambulance to a local ambulance.
- ❖ The Crew Boss (a local resource on loan to the incident) contacted his unit to request a Hospital Liaison. The Liaison was at the hospital when FFA arrived.
- ❖ The IMT's Communications Unit Leader reacted quickly when directions were needed which prevented an unnecessary delay.
- ❖ FFA remembered his training and focused on his breathing, and staying calm and relaxed.

### **Lessons**

- ✓ Consider ordering air and ground ambulances immediately so you have a backup on the way in case you cannot get an air ambulance. Two air ambulances turned down the flight due to smoke during this incident.
- ✓ Additionally, know that response times provided by local 911 Dispatches may not be accurate. When the IMT was developing their response plans, they were told by the Dispatcher that they could have an air ambulance at the incident in 15 minutes. However, during the incident, the Dispatcher stated the response time would be 36 minutes.

- ✓ The Medical Unit Leader later determined the ambulance was able to transport the patient to the hospital much faster than if they had waited for the air ambulance. Consider mobilization time, air time, shut down/start up time, and time to transfer the patient in your decision making for patient transport.
- ✓ Ensure drivers have contact information and directions to medical treatment facilities.
- ✓ Ask local units for information they may have on medical resources and response times. Information from local emergency response plans may be useful as you are planning how your team will respond to medical emergencies. Most of us come from outside the area and local knowledge is paramount in reactive situations such as getting bit by a rattlesnake.
- ✓ Remember to check the area for snakes and insects before you sit down.

### **Tips for Dealing with a Snake Bite**

1. Get away from the snake, it may try to strike you again.
2. Initiate medical emergency protocols. (Call 911 immediately when not on an incident with established protocols.)
3. Do not elevate the affected area. Keep the bite below the level of the heart.
4. Remove constricting clothing and jewelry from the extremity. The area may swell and constricting items can cause additional complications and tissue damage.
5. Follow the basics of first aid while waiting for first responders. Be especially concerned about the potential for shock.

**You can find this information and additional tips for preventing and dealing with snake bites at:**  
<https://www.verywellhealth.com/how-to-prevent-and-treat-snake-bites-1298266>.

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**This RLS was submitted by:**

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