

# Rapid Lesson Sharing

**Event Type:** Rattlesnake Bite

**Date:** July 24, 2016

**Location:** Kent Fire, Division Whiskey;  
Montana

## NARRATIVE

The Kent Fire was reported on July 23 at 1146 hours. Multiple Volunteer Fire Department engines initial attacked the fire but were unable to contain it. The Bureau of Land Management committed resources to prevent fire spread to BLM lands.

Upon arrival of federal resources, a Unified Command was established with the Carter County Fire Warden and a BLM Type 4 Incident Commander. As complexity increased, a Type 3 IC was ordered.

### **Pre-Established Incident-Within an-Incident Protocol Enacted**

The Kent Fire's progression was halted at approximately 1800 hours on this first day. At approximately 1050 hours the next day, Whiskey Division reported a medical emergency that consisted of a rattlesnake bite to the shin of a crewmember on a Montana Department of Natural Resources and Conservation (DNRC) Engine.

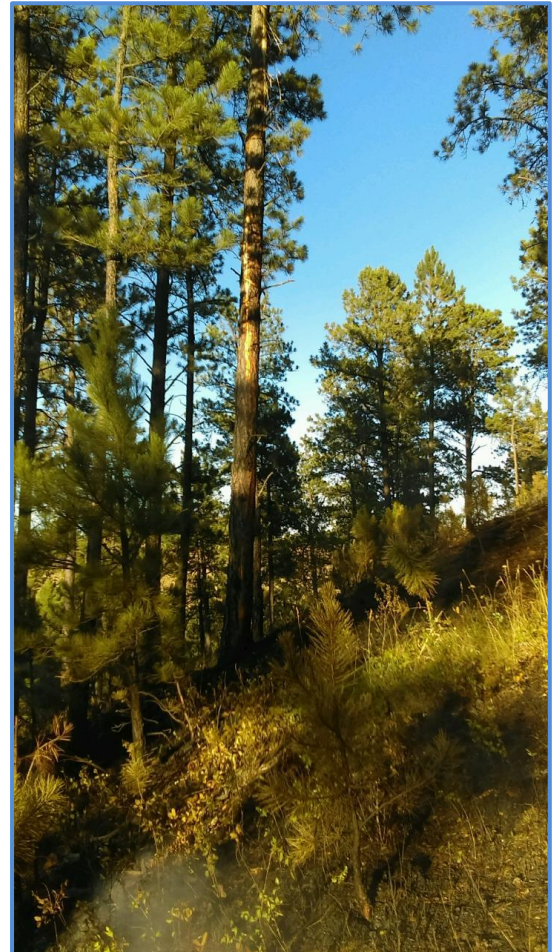
**To ensure that all resources were aware of the situation, the 9-Line was then read over the repeater.**

The crewmember never saw or heard the snake that bit him. Initially, he was unsure if he had even been bitten. First, the crewmember verified with local VFD crews that there were rattlesnakes in that area. This caused a delay in reporting the incident to his supervisor.

Once the bite was reported, pre-established Incident-Within-an-Incident protocol was enacted. The closest qualified individual (DNRC Task Force Leader) took command of the situation until Division Whiskey was able to assume command.

### **Division Whiskey Prepares 9-Line Report**

All communications involving the incident were funneled through Division Whiskey. A team of more than five EMTs were assigned to patient care, with one EMT identified as lead caregiver. The Kent Fire IC activated medical transport (both air and ground) via cell phone with Dispatch while Division Whiskey prepared the 9-Line report.



**An example of the terrain in Division Whiskey where the snake bite occurred.**



**Good working relationships between different agencies proved to be a contributing factor in this incident's positive outcome.**

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To ensure that all resources were aware of the situation, the 9-Line was then read over the repeater. Due to the patient's stable condition, Life Flight was cancelled and the patient was not moved for ambulance intercept. Contact was made with Dispatch to have an agency rep meet the patient in a nearby town, Baker, Mont.

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### **Preseason training on Incident-Within-an-Incident protocols and 9-Line medical reports, made this actual incident run smoothly.**

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#### **Disagreement Involving Interventions and Patient Care**

Once the ambulance arrived on scene, there was a disagreement between the ambulance personnel and onsite EMTs involving interventions and patient care being provided. Because of the dispute and increased level of pain experienced by the patient, Division Whiskey decided not to transport by ambulance. The patient was instead transported via the DNRC helicopter.

The lead caregiver and one other DNRC EMT joined the patient in transit to Baker. The DNRC Task Force Leader followed via ground transport in order to bring the EMTs back once patient care had been transferred.

Upon arrival at the Baker Municipal Airport, the patient was transported to the Fallon Medical Complex emergency room. Medical personnel assessed the bite and cleaned wound.

Because it was determined that side-effects could have adverse effects on this patient, it was decided to hold off on administering antivenin, a biological product used in the treatment of venomous bites and stings. After tissue samples were taken and sent to the lab, it was determined that the bite was nonvenomous.

The patient was monitored and released that evening.

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### **What was Done Well**

- ❖ Throughout this entire medical incident, the patient said he was well taken care of by EMTs and the medical staff at hospital.
- ❖ Preseason training on Incident-Within-an-Incident protocols and 9-Line medical reports, made this actual incident run smoothly.
- ❖ Good working relationships between different agencies also proved to be a contributing factor in this incident's positive outcome.
- ❖ Having a state liaison and the Task Force Leader meet the patient at hospital helped with the necessary paperwork. (The State of Montana has different forms to fill out than its federal partners.)

### **Lessons Learned and Recommendations**

- ✓ When in rattlesnake country, we need more in-depth briefings and protocols on what to do in case of a rattlesnake bite. Most snake bites occur without hearing or seeing the snake. Don't delay medical treatment because you are unsure.
- ✓ For future reference, the doctors at the hospital recommended not cancelling Life Flight because they carry antivenin.
- ✓ The doctors also recommended that in such incidents, the patient be flown directly to a bigger hospital. Smaller hospitals have a limited supply of antivenin. If it is needed, there is only enough to stabilize the patient for transport to a bigger hospital.
- ✓ THANK YOU to the crew for actively sharing their story so others may learn from their experience.

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**This RLS was submitted by:**

**Westside Fire  
Safety Specialist**

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