

Preventing and managing snake bites

Snakes come out of hibernation during the warmer months and may find quiet shelter at your school/workplace whilst the site has been vacant over weekends or holiday breaks. Cool, dark protected areas such as under buildings and near sheds, around rubble, stored materials and in long grass are typical areas that snakes may be found. As with all Australian native animals, snakes are protected under the *Nature Conservation Act 1992 (Qld)* and cannot lawfully be killed or taken from the wild and held in captivity.

Never attempt to catch or kill a snake – snakes are not usually aggressive and do not seek confrontation with humans, but may retaliate if provoked. Call for a professional snake catcher as snake bites can easily occur if inexperienced people interfere with snakes.

Snake bites

- Snake bites in Australia can be potentially fatal so provide immediate first aid and ensure the patient is placed under medical supervision as soon as possible (dial 000). Pressure immobilisation first aid is described on page 2.
- While not all snakes are venomous, they are difficult to identify, so all bites should be treated as dangerous i.e. no case of real or suspected snakebite should be regarded as trivial.
- It is not necessary to try and identify the type of snake if a person is bitten, as this may be determined from residual venom on the skin. Also, for many Australian snakes, a polyvalent antivenom (antivenom that is effective for multiple species of snake) is often used for treatment of snake bites.

Snake bite prevention

- Wear appropriate clothing – e.g. enclosed shoes.
- Be snake aware - never put hands in hollow logs or thick grass or under woodpiles, building material etc without prior inspection.
- When stepping over logs, carefully inspect the ground on the other side.
- Keep buildings and sheds free of mice, rats and frogs as they may attract snakes.
- Keep grass well cut - particularly in playgrounds, around buildings etc.
- Tidy grounds during colder months when snakes are less active.
- Snakes may be active at night. Ensure adequate lighting and wear adequate footwear.
- Educate everyone at the workplace on the above precautions and have contacts for local snake catchers readily available.

If a snake is seen or reported on or near the site:

- Do not approach, confront or otherwise provoke the snake.
- Note the location of the snake and remove all staff and students from immediate area (e.g. evacuate the room and if possible close the doors) until the snake moves away on its own or is removed by a professional snake catcher.

Emergency snakebite action plan

Schools and department workplaces are to consider the risk of snakebite as part of their first aid risk assessment and ensure appropriate first aid resources, training, kits and action plans are in place. Communicate this information so staff are prepared in the event of a snake bite. An action plan should be in place for immediate implementation when necessary and as a reminder / guide for staff assisting the injured person. Risk level will vary dependant on the location of the school, time of year and the activities being undertaken e.g. urban or rural, school camp, excursion.

First aid for snakebite (all land and sea snakes)

- Get the person away from the snake; help them to stay calm and rest.
- Follow the steps of basic first aid — DRSABCD.
- Phone or send for medical assistance, dial 000.
- Have the person remain as still as possible. Do not attempt to catch or kill the snake.
- Apply a pressure bandage to the envenomed limb (see below). If the bite is to the trunk, apply firm pressure to the bitten area. Do not restrict chest movement.
- Splint the limb to restrict movement. Where possible, help should be brought to the person rather than moving the patient. (Reference: [Australian Venom Research Institute University of Melbourne](#))

Pressure immobilisation first aid

The pressure-immobilisation technique is a first aid method for venomous bites. Its purpose is to retard the movement of venom from the bite site into the circulation, thus 'buying time' for the patient to reach medical care. Research with snake venom has shown that very little venom reaches the blood stream if firm pressure is applied over the bitten area and the limb is immobilised. Pressure-immobilisation is recommended for all species of Australian snakes, including sea snakes. The information below is sourced from the [Australian Venom Research Institute University of Melbourne](#).

First aid for bites to the lower limb



- Move the victim away from the snake. Calm and reassure them. Jewellery such as toe rings and ankle bracelets should be removed before the bandage is applied.
- Regardless of where on the limb the bite has occurred, commence bandaging from just above the toes (leave these uncovered so that blood flow to the nail beds can be monitored).
- Crepe bandages are ideal, but any flexible material may be used. Clothing, towels etc may be torn into strips. Panty hose have been successfully used.
- Do not take off clothing, as the movement of doing so will promote the movement of venom into the blood stream. Keep the bitten limb, and the patient, still.
- Bandage upwards from the lower portion of the bitten limb. Even though a little venom may be squeezed upwards, the bandage will be more comfortable, and therefore can be left in place for longer if required.



- Bandage firmly as for a sprained ankle, but not so tight that circulation is prevented. Continue to bandage upward from the lower portion of the bitten limb.
- Apply the bandage as far up the limb as possible to compress the lymphatic vessels.
- Tip: If possible, mark the bandage at the site of the bite/sting with a pen so that medical professionals can examine the affected area without taking the bandage off.



- It is vital to now apply a splint. Bind a stick or suitable rigid item over the initial bandage to splint the limb. Secure the splint to the bandaged limb by using another bandage, (if another bandage is not available, use clothing strips or similar to bind). It is very important to keep the bitten limb still.
- Bind the splint firmly, to as much of the limb as possible, to prevent muscle, limb and joint movement. This will help restrict venom movement. Seek urgent medical assistance now that first aid has been applied.

First aid for bites on the hand or forearm



- Bandage as much of the arm as possible, starting at the fingers.
- Use a splint to the elbow.
- Keep the patient still. Lie the patient down to prevent walking or moving around.
- Note: It is not recommended that the arm be bent at the elbow and placed in a sling as this can create a tourniquet effect at the elbow.

Bites to the trunk/torso

- Call 000 for an ambulance
- If possible, apply firm pressure over the bitten area. Do not restrict chest movement. Keep the patient still. Have the patient taken immediately by ambulance to the emergency department of the nearest hospital.

Bites to the head or neck

- Call 000 for an ambulance
- No first aid for bitten or stung area. Keep the patient still. Have the patient taken immediately by ambulance to the emergency department of the nearest hospital.

Further information

- [Managing aid in the workplace procedure](#)
- Search OnePortal for Key messages – “snakes”