



Poison HOTLINE

1-800-222-1222

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Photo credit Gene Knudsen

Did you know

Venomous snakes have distinguishing characteristics including: triangular shaped heads, elliptical or “catlike” pupils, and a facial pit or depression behind the nostrils used as a heat sensor to locate prey.

Venomous snakes are native to all US states except Maine, Alaska and Hawaii.

The IPCC also receives calls about bites from exotic, non-native snakes, like cobras and coral snakes.

To help identify a coral snake from the non-poisonous milk snake by the pattern of their stripes, remember the saying “Red on yellow kills a fellow; red on black venom lack.”

Venomous Snakes of Iowa

While there are over twenty types of non-venomous snakes in Iowa, there are only four venomous snake species in the state. The three Iowa rattlesnakes are the timber rattlesnake, the prairie rattlesnake and the massasauga. The copperhead is the fourth and rarest venomous snake in Iowa. The severity of poisoning from a snake bite depends on the following factors:

- The location, depth and number of bites
- The amount of venom injected
- The species, size and maturity of snake
- The age and co-morbid conditions of the victim

Venomous snakes do not always inject venom when they bite. Bites without envenomation, known as “dry bites,” occur in about 25% of bites. Effects from rattlesnake bites occur at the site of envenomation (rapid onset of pain, bruising, swelling, tingling, numbness, tissue damage and bleeding), can be systemic (nausea, vomiting, blurred vision, low blood pressure, rapid pulse and weakness), and may also affect the coagulation system (elevated PT and PTT, low platelets, low fibrinogen and bleeding). Copperhead bites are usually painful, cause a lot of local tissue destruction and can cause systemic symptoms, but rarely affect the coagulation system.

The initial management of a snake bite includes immobilization of bitten area just below heart level; removal of bracelets, rings and other constricting items near the site of the bite; rapid transport to a health care facility; monitoring vital signs; washing the bite site and ensuring tetanus immunization is up to date. Indications for antivenom include: progressive swelling, coagulation defects, systemic bleeding, localized fasciculations, hypotension, neuromuscular paralysis or cardiovascular collapse.

Any person who receives antivenom should be monitored for an additional 18-24 hours after the progression of symptoms has stopped, coagulation studies have normalized and neuromuscular effects have resolved. Persons that have no symptoms (a “dry bite”) should be monitored for at least 8-12 hours.

For questions regarding snake bites, call the Iowa Poison Control Center at **1-800-222-1222**.

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1-800-222-1222

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