



TOURNIQUET ALGORITHM

Tourniquet Removal - Snake Envenomations



If new or worsening signs of envenomation, return to appropriate



ALGORITHM or



CYTO

ALGORITHM until control restored.



Snakebite patient presents with inappropriate TQ or constricting bands placed prior to arrival.

ABCs: Assess for Crash Signs

Remove rings, watches, shoes, etc. IV/IO access (non-bitten limb)



RAPID SNAKEBITE EXAM

ASYMPTOMATIC

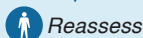
No clear signs of CYTO, HEMO, or NEURO envenomation?

Begin TQ Removal

Keep resuscitation equipment and antivenom nearby during removal.

Slightly loosen TQ (~5 sec)

⌚ Re-tighten, wait 5 minutes



S/Sx of progression?

Slightly loosen TQ (~10 sec)

⌚ Re-tighten, wait 10 minutes



S/Sx of progression?

Slightly loosen TQ (~15 sec)

⌚ Re-tighten, wait 15 minutes



S/Sx of progression?

NO

SYMPTOMATIC

Clear HEMO, CYTO, or NEURO signs of envenomation?

⚡ Do not remove TQ

Determine 1st Dose

Use appropriate HEMO/CYTO or NEURO Treatment Algorithm

⚡ Do not remove TQ

Give AV Dose

⚡ Do not remove TQ

⌚ Wait 30 minutes

Begin TQ Removal

Keep resuscitation equipment and antivenom nearby during removal.

Remove TQ



Return to appropriate Symptomatic Treatment Algorithm for ongoing management

Remove TQ



Return to Control Algorithm for ongoing management



If envenomation S/Sx appear at any point during removal



Consider analgesia to facilitate prolonged removal time.

TOURNIQUETS CONTRAINDICATED:

Tourniquets may worsen local tissue injury, mask progression, or cause rapid cardiac/respiratory arrest after removal due to bolus effect.

CAUTION:

Patients often worsen systemically despite tourniquets as venoms travel through lymphatics. DO NOT assume TQ will delay or prevent life-threatening systemic effects from developing.



RAPID SNAKEBITE EXAM

- 1. NEURO:** Assess top-down from head for ptosis, weakness, descending paralysis, and problems seeing, speaking, swallowing, or breathing.
- 2. HEMO:** Assess bitten limb for persistent local bleeding (oozing), check mouth, nose, other mucosa for systemic bleeding.
- 3. CYTO:** In Sharpie on bitten limb, mark progression + record time
 - Pain (dashed line)
 - Firm Edema (solid line)

TIP: Progression should stop 30–60 min after correct AV dose.



CONTROL ALGORITHM

after control, reassess at:

q30 min: First 2 hours
q60 min: H3, H4, H5, H6
after H6: H12, H24, H48