

Literature Review/Grading

How Should Native Crotalid Envenomation Be Managed in the Emergency Department?

(9/14/2020)

1. Lavonas EJ, Ruha AM, Banner W, Bebarta V, Bernstein JN, Bush SP, Kerns WP, Richardson WH, Seifert SA, Tanen DA, Curry SC. Unified treatment algorithm for the management of crotaline snakebite in the United States: results of an evidence-informed consensus workshop. *BMC emergency medicine*. 2011 Feb 3;11(1):2 **Grade F Outstanding**
2. Frank HA. Snakebite or frostbite: what are we doing? An evaluation of cryotherapy for envenomation. *Calif med*. 1971; 114(5):25. **Grade F Adequate**
3. Anderson VE, Gerardo CJ, Rapp-Olsson M, et al. Early administration of Fab antivenom resulted in faster limb recovery in copperhead snake envenomation patients. *Clin Toxicol (Phila)* 2019; 57(1):25-30. **Grade A Outstanding**
4. CroFab® (crotalidae polyvalent immune Fab (ovine)) [package insert]. West Conshohocken, PA : BTG International Inc; 2018 **Grade F Adequate**
5. Anavip® (crotalidae polyvalent immune F(ab')₂ (equine)) [package insert]. Accessed online on March 24, 2020 **Grade F Adequate**
6. Gerardo CJ, Quackenbush E, Lewis B, Rose SR, Greene S, Toschlog EA, Charlton NP, Mullins ME, Schwartz R, Denning D, Sharma K. The Efficacy of Crotalidae Polyvalent Immune Fab (Ovine) Antivenom Versus Placebo Plus Optional Rescue Therapy on Recovery From Copperhead Snake Envenomation: A Randomized, Double-Blind, Placebo-Controlled, Clinical Trial. *Ann Emerg Med*. 2017; 70(2):233-44. **Grade A Outstanding**
7. Freiermuth CE, Lavonas EJ, Anderson VE, Kleinschmidt KC, Sharma K, Rapp-Olsson M, Gerardo CJ. Antivenom Treatment Is Associated with Fewer Patients using Opioids after Copperhead Envenomation. *West J Emerg Med* 2019; 20(3):497-505. **Grade A Outstanding**
8. Levine M, Offerman S, Rohra V, Wolk B, LaPoint J, Quan D, Spyres M, LoVecchio F, Thomas SH. Assessing the effect of a medical toxicologist in the care of rattlesnake-envenomated patients. *Acad Emerg Med*. 2018; 25(8):921-6. **Grade D Outstanding**
9. August JA, Boesen KJ, Shirazi FM, Klotz SA. Prophylactic antibiotics are not needed following rattlesnake bites. *Am J Med*. 2018;131:1367-71. **Grade C Outstanding**
10. Kerrigan KR, Mertz BL, Nelson SJ, Dye JD. Antibiotic prophylaxis for pit viper envenomation: prospective, controlled trial. *World J Surg*. 1997 May 1;21(4):369-73. **Grade A Outstanding**
11. Toschlog EA, Bauer CR, Hall EL, Dart RC, Khatri V, Lavonas EJ. Surgical considerations in the management of pit viper snake envenomation. *J Am Coll Surgeons*. 2013; 217(4):726-35. **Grade F Adequate**
12. Darracq MA, Cantrell FL, Klauk B, Thornton SL. A chance to cut is not always a chance to cure- fasciotomy in the treatment of rattlesnake envenomation: a retrospective poison center study. *Toxicon*. 2015; 101:23–6. **Grade D Outstanding**