

SNAKES of the Arabian Gulf and Oman s



SNAKEBITE: Prevention and First Aid

PREVENTION

Look and $TAKE\ CARE$ where you put your hands and feet, particularly in wadies gardens, woodland and near rubbish and water.

WEAR good covering for feet and ankles; boot are best

AVOID walking outside at night without light

KNOW snakes and their habits

KNOW first aid

FIRST AID

RE-ASSURE and **CALM** the victim to reduce fright, shock and fear of death Remember: snakebite is rarely fatal even the most venomous snakes

RESTRAIN all movements of the victim to avoid the spread of venom in the blood stream place the patient in a restful position, preferably lying down on the side.

CLEAN and EXAMINE the site. Did a fange penetrate the skin? IF so, or if in doubt, and if a doctor or hospital is not within 30 minutes

BANDAGE the whole limb firmly as for a sprain, starting at the toes or fingers, or press a pad firmly on the bit, and

IMMOBILISE the whole limb, with a sling for an arm, and splints if necessary for a leg, place it in a restful position.

TAKE TO HOSPITAL IMMEDIATELY; on the way continue to re-assure, observe and ensure unrestricted breathinh

DO NOT cut or suck wound

DO NOT apply a tourniquet, or give aspirin or spirits

DO NOT administer anti-venoms; this is for a doctor's decision

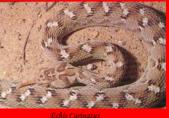
DO NOT handle live or recently dead snakes, but if there is no risk, identify the snake if possible and collect it on the end of a stick

PREVE

DANGEROUS: With hinged front fangs and principally vasculotoxic venom



Echis Coloratus



Ecnis Carmatus

DANGEROUS:

/ith short, fixed, tubular fangs and rincipally neurotoxic venom



Arabian Cobra









Thread Snake



Racer

In case of Emergency Contact: 5555