

Snake Bite victim with Disseminated Intravascular Coagulation

Treating Team

Dr Chhagan Khartode (Physician)

Dr Vijaykumar Khandale (HOD-ICU)

Dr Mahesh Rokade (Nephrology)

- 32 yr / Female, No Comorbidities
- Admitted with history of Snake Bite over left foot. Approached local hospital where she received 32 vials of ASV and shifted to VishwaRaj Hospital in view of Hypotension.
- On Day 1 : Casualty Department - Patient in casualty received fluid resuscitation but did not respond hence she was started with vassopressor support and shifted to ICU for further management.
- ICU - Patient was started with Antibiotics, Anti snake venom, Vassopressor supports.
- Patient's lab investigations suggest of deranged. RFT'S, Leucocytosis, Elevated procalcitonin levels, thrombocytopenia
- Patient was treated on the line of snake bite septic shock with acute kidney injury, disseminated intravascular coagulation.
- Nephrology reference was sought from Dr Rokade. Patient decreased urine output / deranged RFT'S metabolic acidosis so hemodialysis was initiated.
- Patient required intubation and ventilatory support in view of worsening shock on Day 4.
- Patient responded well to treatment (Antibiotic, ASV) on Day 6.
- Patient gradually improved and was extubated on Day 12.
- Patient's urine output gradually improved, metabolic acidosis improved so regular hemodialysis was stopped and diuretics were continued
- Patient's general condition improved and was shifted to wards. Patient was discharged after success full recovery.



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