FACTSHEET

Northern Pacific Rattlesnake (*Crotalis viridis oreganus*) Sub Species of the Western Rattlesnake

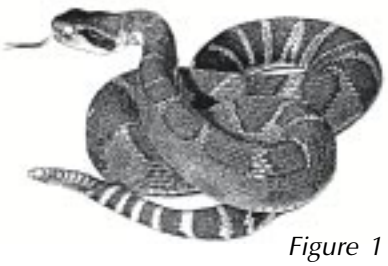

Figure 1
Northern Pacific Rattlesnake

June, 2001

Eight species of snakes have been found in the Southern Interior of British Columbia. **All of these are protected from unnecessary harassment, capture or killing under the BC Wildlife Act. The Northern Pacific Rattlesnake is Blue-listed (under consideration for legislative designation as vulnerable).**

The only species in BC that can pose any danger to humans is the Northern Pacific Rattlesnake. The Northern Pacific Rattlesnake is readily recognized by its broad triangular head, which forms a distinct neck, rattles at the end of the tail, and relatively robust (stout) body. Rattlesnakes also have a deep pit on each side of the face, between the eye and the snout. *(See figure 1)*

Even very young rattlesnakes have a button (rattle) on the end of their tail. Very young rattlesnakes cannot generate a buzz with their single rattle and more mature rattlesnakes will not always rattle when confronted with danger, or the rattle can be broken off. This rattle consists of a series of loosely interlocked horny segments, which produce a characteristic buzzing sound when the tail is vibrated rapidly. A new segment is added each time the snake sheds it's skin, which can happen more than once per year, so the number of segments in a rattle does not give a precise indication of the age of the snake.

Snakes perform valuable ecological roles in controlling rodent populations and providing food for many other species of animals.

Snakes are valuable allies to agricultural operations. The burrowing Gopher Snake is an effective predator of Pocket Gophers and the Northern Pacific Rattlesnake feed primarily on Deer Mice.

The low annual survivorship of all snakes, together with a low rate of reproduction means that snake populations can increase only slowly in size. This makes rattlesnake populations particularly slow to recover and vulnerable to local extinction if populations are reduced through human actions.

Where are they found in BC?

In British Columbia rattlesnakes occur only in the dry southern valleys, in the Bunchgrass, Ponderosa Pine, and lower fringes of the Interior Douglas-fir zones *(see figure 2)*. They have been recorded in the Okanagan, Kettle, Similkameen, Nicola and Thompson River valleys as well as along the Fraser in the Lytton-Lillooet area. Throughout this area they prefer dry, usually rocky, rugged landscapes with sparse or scattered tree cover. In summer, rattlesnakes are mainly crepuscular (active at twilight), but may be found at any time of day or night.

Simple tips when working in rattlesnake country are:

- ▲ never put your hands or feet where a snake might be concealed;
- ▲ keep work sites uncluttered so that snakes moving through an area will not be attracted to stay;
- ▲ be familiar with the different species of snakes;

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- have a container (such as a lidded garbage can) and a blunt, hooked stick readily available for relocating unwanted snakes.

Capture and Relocation Procedures

Care should be taken not to excite the snake or handling it will be much more difficult. Place a garbage can near the snake and then slowly approach the snake from the opposite side. Use the stick to escort the snake into the container. The snake should be immediately relocated to prevent risk of accidents, heat stress, or other harm to the snake. The release point should be in a natural area with lots of cover objects not far from the point of capture (within one kilometre).

Rattlesnake Bites and Procedures

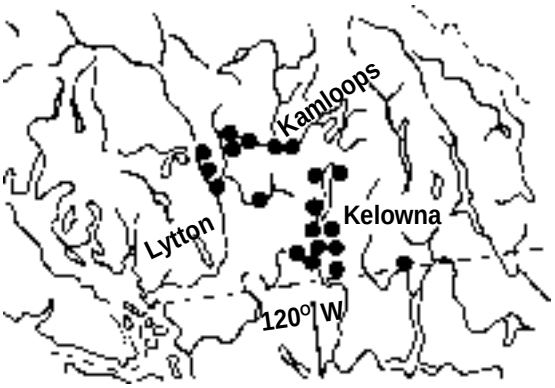
Rattlesnake bites are relatively uncommon in British Columbia and most are avoidable. Rattlesnakes usually only bite when their life is threatened. Right from birth they are capable of delivering a lethal bite so size does not mean a thing. **There is no need to kill the snake for identification, as there is only one venomous snake species.**

The venom, which is produced in a gland, contains some components that destroy proteins and others that interfere with the nervous system. The fangs are like small hypodermic needles and are used to inject the venom into the prey.

The effect of snakebite on people depends on a number of factors:

- size of the person and the snake;
- health and other individual characteristics of the person;
- how recently the snake has fed;
- where on the body the bite has occurred.

Figure 2: Map of general areas where rattlesnakes are found in BC.



Few people die of snakebite any more (bees and wasps account for many more fatalities in North America each year than do snakes), particularly if the victim receives prompt medical care. However, it should be noted that local tissue damage and disfigurement, paralysis, and amputation of bitten limbs are fairly common effects of rattlesnake bites.

Systemic signs of rattlesnake poisoning are variable and may include the following symptoms:

- development of shock-like state;
- decreased respiration;
- vomiting, abdominal cramps and diarrhea;
- fluid in the lungs;
- vascular (blood vessels) collapse.

Treatment of Snakebite:

- lay the patient down and keep him/her quiet;
- reassure and keep comfortably warm;
- remove rings and constrictive items;
- do not allow the patient to have any alcoholic beverages;
- immediately cleanse the wound with soap and water and cover the wound with sterile dressings;
- **do not** apply ice (use of ice has been associated with an increased incidences of amputation);
- **do not** apply a tourniquet or restrictive bandages;
- **do not** excise (cut) area or perform suction. Suction kits are not endorsed by the Worker's Compensation Board;
- lightly immobilize injured part in functional position and keep just below heart level;
- give reassurance;
- transport to medical facility as quickly as possible;
- apply the general principles of shock management.

When working in an area where poisonous snakes may be encountered, the attendant should establish a protocol with the local hospital. The attendant should know if:

- anti-venom is available at the local hospital, or where it is available;
- the patient should be transported to another hospital if anti-venom is not available locally;
- know if a heli-pad is available (if a helicopter is used).

PHONE NUMBERS FOR HOSPITALS IN OUR AREA ASK FOR EMERGENCY

Ashcroft	250-453-2211
Kamloops	250-374-5111
Kelowna	250-862-4000
Lytton (Lillooet)	250-256-7233
Oliver	250-498-3474
Penticton	250-492-4000
Vernon	250-545-2211