



Secretary

Department of Health and Human Services

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Court ref: COR2014005696

eMin ref: e4947237

Sanchia Nigli
Coroner's Registrar
Coroners Court of Victoria
65 Kavanagh Street
SOUTHBANK VIC 3006

Dear Sanchia

Thank you for your letter of 6 September 2018 regarding Coroner Caitlin English's findings into the death of Shane Tatti.

I note in her findings, Coroner English recommends 'DHHS again review the 2017 'Management of snake bite in emergency departments in Victoria clinical guidelines' (recommendation 1).

These guidelines were produced by the Emergency Care Clinical Network. This network is now part of Safer Care Victoria. For this reason, I have directed Coroner English's findings to the attention of Professor Euan Wallace, Chief Executive Officer of Safer Care Victoria.

Please find attached a letter from Professor Wallace responding to this recommendation.

Yours sincerely

Kym Peake
Secretary

31/10/2018

Encl. Letter from Professor Euan Wallace - COR 2014 005696

Sanchia Nigli

Coroner's Registrar
Coroners Court of Victoria
65 Kavanagh Street
Southbank VIC 3000

Dear Sanchia,

Re: Investigation into the death of Shane Tatti

Thank you for your letter dated 6 September 2018 accompanying Coroner English's finding into the death without inquest of Shane Tatti. The Department of Health and Human Services Secretary, Ms Kym Peake, has asked me to respond on her behalf, given the Emergency Care Clinical Network is now part of Safer Care Victoria.

I note that the Coroner's findings include a recommendation (recommendation 1) relevant to Safer Care Victoria:

I recommend DHHS again review the 2017 'Management of snake bite in emergency departments in Victorian clinical guidelines,' in light of this finding.

Within the findings (para 93-94), Coroner English also expressed concern for the following:

- No acknowledgment of divergence of views or how/if they have been reconciled
- No reference to the number of ampoules of antivenom to be administered
- No suggestion or acknowledgment that more than one ampoule of antivenom should be administered in circumstances such as severe envenoming.

In response to Coroner English's request, the Emergency Care Clinical Network reconvened an expert group of emergency physicians, toxicologists, a toxinologist and a paramedic to review the 2017 guidelines in October 2018 (see appendix 1).

In regards to altering the guideline to specify the number of ampoules of antivenom to be administered including in the event of severe envenoming, the expert group believe this is not best practice and is not supported by current evidence. The clinical decision making underpinning the assessment and management of an envenomed patient is a very complex process and requires clinical toxicologists input to advise which antivenom(s) and dosage of antivenom(s) to be administered and there are risks associated with anaphylaxis, in administering more antivenom than clinically indicated. As a safety measure, if there is delay in contacting a clinical toxicologist, the guideline recommends administration of anti-venom that would be expected to cover Victorian venomous snakes (one vial each of tiger and brown snake antivenom).

The Emergency Care Clinical Network acknowledges Coroner English's recommendation to acknowledge the divergent views presented by the expert opinions provided in the investigation. The expert group considered this and decided brief commentary on the limitations in the current research literature on snakebite management to be included in the guidance.

The Emergency Care Clinical Network agree that ongoing research is necessary to further investigate initial anti-venom dosage and how to identify the outliers. Should additional evidence become available that indicates an alternative course of action results in better outcomes, we will update our guideline accordingly.

Whilst the specific content around the management of the envenomed patient will remain the same, the Emergency Care Clinical Network is currently refreshing the guideline to make the information and pathways easier to access, use and follow by clinicians. The revised guideline will be published on the Safer Care Victoria website and promoted through the eNewsletter, social media and sent directly to emergency departments and urgent care centres.

In May 2018 Safer Care Victoria published further guidance for health services regarding the minimum levels of stock holding for anti-venom across the Victorian health system. In addition to minimum recommendations for antivenom stock holdings, this guidance also includes advice for Ambulance Victoria to bypass urgent care centres where appropriate, for urgent care centres to arrange transfer as early as possible for patients who walk in, and for health services to participate in the Victorian Therapeutic Advisory Group register of emergency and life-saving medicines to allow coordination of access to antivenom across the state.

Thank you for bringing this case to our attention.

Yours sincerely,



Professor Euan Wallace

Chief Executive Officer

Safer Care Victoria

20.11.2018

APPENDIX 1.

Table 1. Expert group members

Name	Role	Organisation
Professor Peter Cameron	Clinical Lead Emergency Care Clinical Network	Safer Care Victoria
	Emergency physician	Alfred Health
Alan Eade	Chief paramedic	Safer Care Victoria
	MICA paramedic	Ambulance Victoria
Professor Bart Currie	Director of Infectious Diseases	Royal Darwin Hospital
	Team Leader, Tropical and Emerging Infectious Diseases	Menzies School of Health Research
Professor Geoff Isbister	Clinical toxicologist and emergency physician	Calvary Mater Hospital
	Consultant	National Poison Centre Network
	Researcher	University of Newcastle
Professor George Braitberg	Executive Director of Strategy, Quality and Improvement	Melbourne Health
	Clinical toxicologist and emergency physician	
Jeff Robinson	Pharmacist and manager	Victorian Poisons Information Centre, Austin Health
Dr Shaun Greene	Medical Director and clinical toxicologist	Victorian Poisons Information Centre, Austin Health
	Emergency physician	
Professor Andis Graudins	Clinical toxicologist and emergency physician	Monash Health
	Clinical toxicologist	Victorian Poisons Information Centre, Austin Health
Dr Ken Winkel	Toxinologist and researcher	University of Melbourne