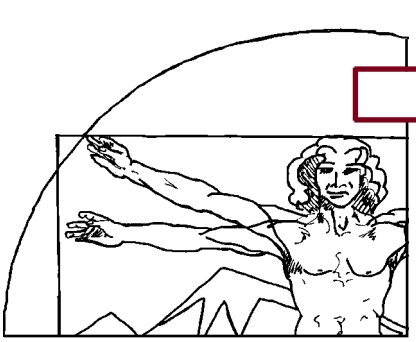

the Wilderness Medicine Training Center

The pain burning pain at the sting site, up his leg, and at his groin is because fire ant venom is a toxic alkaloid (Solenospsin) and travels up the lymph system to the lymph node. His flushed, itchy, and swollen lower legs are due to a systemic allergic reaction (remember, he was stung on his right leg, not both). While the systemic allergic reaction is not life-threatening at the present time, it could progress and he could develop respiratory distress within the next 30-60 minutes. At this point, you have two choices:

1. Administer a 0.3cc injection of epinephrine into his mid-thigh and follow with 50mg of oral Benedryl.
2. Administer 50mg of oral Benedryl and wait to see if he develops respiratory distress before administering the epinephrine.

Either response is appropriate. While epinephrine can be safely administered at the first signs of a systemic allergic reaction, some physician advisors prefer lay people to wait until the patient develops respiratory distress. Not all patients who present or develop hives—or in this case flushed, itchy, and swollen lower legs—will go on to develop respiratory distress, and neither hives or flushed, itchy, and swollen lower legs are life-threatening; and, both will resolve with Benedryl over the next few days. *Ultimately, your decision to administer epinephrine or not will depend on your protocols set forth by your company's physician advisor.* NOTE: that most physician advisors require guides to begin a Level 3 Evacuation for patients who receive epinephrine for physician evaluation and follow-up.

The fire ant envenomation itself is not serious. A small blister (or blisters) will develop at the sting site over the next 24 hours. The fluid in the blister will become cloudy and the blister will rupture, form a crust, and heal over the next few days. Keep the area clean and continue to administer 25-50mg of Benedryl every six hours until a scab forms at the site; scratching may lead to a secondary infection.