

**REGION I EMERGENCY MEDICAL SERVICES
STANDING MEDICAL ORDERS
BLS**

SMO: Plague -- Pneumonic **Revised Date:**

Overview: Plague is caused by *Yersinia pestis*, a naturally occurring pathogen with a long history of profound impact on human life. When the disease occurs from natural infections, it is usually associated with poor sanitary conditions, overcrowding and rodents affected by fleas which bite both humans and rodents. As a biological weapon, plague can potentially be distributed by aerosol of *Y. pestis* or by airborne dispersion of fleas infected with plague. It is assumed that a modern biological attack would involve such a scenario. The ensuing outbreak would be almost entirely pneumonic plague. The incubation period is usually 1 to 6 days after exposure to pathogen after an aerosolized exposure. For the pediatric patient, the incubation period is usually 3 to 4 days, with a range of several hours to 10 days.

INFORMATION NEEDED

- History related to the presenting condition of the patient
- Other members of the family or friends ill with similar signs and symptoms
- What is the patient's living environment like?
- Is the patient coughing up blood?

OBJECTIVE FINDINGS

- Patients primarily manifest fever and respiratory symptoms, including cough, coughing up blood and chest pain. Rapid breathing and shortness of breath and cyanosis may be present. Early coughing up of blood is an important clue in differentiating plague from other inhaled agents of bioterrorism
- Thin, watery, blood-tinged sputum becomes frankly bloody the mucus having pus in it will be demonstrated as the disease rapidly progresses (suggesting plague)
- Sepsis, shock and multi-organ failure
- Gastrointestinal symptoms common (e.g., nausea, vomiting, abdominal pain and diarrhea).

BLS

- Standard isolation techniques to be used by EMS personnel including a mask on the patient and on each EMS person
- Assess the patient for any other medical or trauma issues
- Assess respiratory effort and airway patency
- Provide supplemental oxygenation with a nasal cannula at 2-6 LPM or non-rebreather mask at 10-15 LPM
- Assist ventilations as needed
- Suction as needed
- Vital signs

Documentation of adherence to protocol:

- ___ History related to the incident
- ___ Assessment of respiratory effort
- ___ Oxygen provided

PRECAUTIONS AND COMMENTS

- ___ • Transmission is thought to occur up to 2 meters from a coughing patient, so masking of the patient and all EMS personnel is essential

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Medical Control Contact Criteria

- ___ • Contact Medical Control if there is any suspicion of pneumonic plague exposure by the patient

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