

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

SMO: Plague -- Septicemic

Revised Date:

Overview: Plague is caused by Yersinia pestis, a naturally occurring pathogen with a long history of profound impact on human life and very possibly was the “Black Plague” of medieval times. Septicemic can occur as a primary infection without enlargement and inflammation of a lymph node or as a secondary process from other forms of plague infection. When the disease occurs from natural infections, it is usually associated with poor sanitary conditions, overcrowding, and rodents affected by fleas which bit 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. Incubation period is usually 1 to 8 days after exposure to the pathogen. With 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?

OBJECTIVE FINDINGS

- **Initial presenting symptoms are non-specific and may include sudden high fever, chills, headache, malaise, nausea, vomiting, mental status changes, abdominal pain, cough and chest pain**
- **Spontaneous bleeding occurring in the subcutaneous tissues, causing the appearance of purple patches of the skin, disseminated intravascular coagulation and tissue death may be present; the purple patches beneath the skin may be widespread and cover most of the body. Tissue death is usually on digits, extremities and nose**

BLS

- Standard isolation techniques to be used by EMS personnel
- If the patient also shows signs of respiratory distress, the patient and EMS personnel should be masked
- Vital signs including temperature and notation of whether the fever was of rapid onset
- Assess the patient for any other medical or trauma issues
- Assess the patient’s 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

Documentation of adherence to protocol:

- History related to the incident
- Assessment of skin for purple patches or tissue death
- Oxygen provided
- Precautions taken to maintain isolation of the patient

Medical Control Contact Criteria

- Contact Medical Control if there is any suspicion of septicemic plague exposure by the patient

PRECAUTIONS AND COMMENTS

- It is possible that septicemic plague may be accompanied by pneumonic plague. The use of masks for the patient and EMS personnel is mandatory

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