

# Plague Case Investigation Report



OMB No. 0920-0728

Case ID #: \_\_\_\_\_

Patient History									
<b>Age:</b> _____ years	<b>Sex:</b> Female Male Unknown	<b>Patient Ethnicity:</b> Hispanic or Latino Not Hispanic or Latino Unknown	<b>Patient race:</b> (select all that apply) American Indian/Alaska Native Asian Black or African American Native Hawaiian or Pacific Islander White Unknown/other						
<b>Residence:</b> State: _____ County: _____			<b>Concurrent conditions:</b> Pregnant Immunocompromised (please specify): _____						
Course of Current Illness									
<b>Date of initial symptom onset:</b> _____ mm/dd/yyyy				<b>Was the patient hospitalized?</b> Yes No Unknown					
<b>Date first seen by a medical person:</b> _____ mm/dd/yyyy				<b>Admit date:</b> _____ mm/dd/yyyy		<b>Discharge date:</b> _____ mm/dd/yyyy			
<b>Symptoms at presentation:</b>									
Fever/sweats/chills	Yes	No	Unknown	Cough	Yes	No	Unknown		
Confusion/delirium	Yes	No	Unknown	Chest Pain	Yes	No	Unknown		
Vomiting/diarrhea/abdominal pain	Yes	No	Unknown	Shortness of breath	Yes	No	Unknown		
Sore throat	Yes	No	Unknown	Other: _____					
<b>Localized signs:</b>									
<i>Bubo</i>	Yes	No	Unknown	<i>If yes, specify:</i>	Axillary	Cervical	Inguinal/Femoral	Other	
<i>Insect bites/skin ulcer</i>	Yes	No	Unknown	<i>Location/description:</i>	_____				
<i>Chest X-ray:</i>	Not Done	Unknown	Infiltrates or nodules	Pleural effusion	Clear/normal				
<b>Treatment:</b>					<b>Illness outcome:</b>				
Receipt of effective antibiotics (check all that were administered):					Recovered, no complications				
Aminoglycosides (e.g., streptomycin, gentamicin)	<i>start date:</i> _____ mm/dd/yyyy				Recovered, complications (please specify): _____				
Tetracyclines (e.g., doxycycline)	<i>start date:</i> _____ mm/dd/yyyy				Recovered, unknown complications				
Fluoroquinolones (e.g., ciprofloxacin, levofloxacin)	<i>start date:</i> _____ mm/dd/yyyy				Died (please specify cause and date of death): _____				
					Unknown				
<b>Primary clinical syndrome:</b>							<b>Secondary pneumonic plague:</b>		
Bubonic	Septicemic	Pneumonic	Unknown				Yes	No	Unknown
Pharyngeal	Meningitic	Gastrointestinal							

Public reporting burden of this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30329-4027; ATTN: PRA (0920-0728).

