Plague Case Investigation Form

Case ID |_____|

A Investigator

Name of investigator	Phone	Setting/team	Date of investigation

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B Reporter

Name of reporter	Phone	Health facility	Date of reporting

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C Patient identity

Patient name		Gender	Date of birth	Age
Nationality	Type of residence □Resident □Refugee	Occupation	Institution	Institution address
Residence: caza	Locality	Phone	Detailed address	

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D Clinical picture

Dates	Date on onset		Date of 1st consultation	
Vital signs (currently)	Temperature	□Ye s □No □Unk	Heart rate	□Ye s □No □Unk
	Blood pressure	□Ye s □No □Unk	Respiratory rate	□Ye s □No □Unk
Symptoms at initial presentation	Fever	□Ye s □No □Unk	Abdominal pain	□Ye s □No □Unk
	Sweats/chills	□Ye s □No □Unk	Nausea/vomiting	□Ye s □No □Unk
	weakness	□Ye s □No □Unk	Diarrhea	□Ye s □No □Unk
	Confusion/delirium	□Ye s □No □Unk	Sore throat	□Ye s □No □Unk
	Headache	□Ye s □No □Unk	Dyspnea	□Ye s □No □Unk
	Muscle/joint pains	□Ye s □No □Unk	Chest pain	□Ye s □No □Unk
	Swollen tender glands	□Ye s □No □Unk	Other:	□Ye s □No □Unk
Respiratory	Cough	□Ye s □No □Unk	Date onset of cough	
	Bloody sputum	□Ye s □No □Unk		
Bubo	Presence of bubo	□Ye s □No □Unk		
	Cervical	□Ye s □No □Unk	Femoral	□Ye s □No □Unk
	Axillary	□Ye s □No □Unk	Other:	□Ye s □No □Unk
	Inguinal	□Ye s □No □Unk		
Skin	Insect bite	□Ye s □No □Unk	Skin ulcer	□Ye s □No □Unk
	Location:		Location:	
Clinical presentation	Bubonic	□ I □ II □No □Unk	Pneumonic	□ I □ II □No □Unk
	Pharyngeal	□ I □ II □No □Unk	Gastrointestinal	□ I □ II □No □Unk
	Meningitis	□ I □ II □No □Unk	Ocular	□ I □ II □No □Unk
	Septicemic	□ I □ II □No □Unk	Other:	□ I □ II □No □Unk
Underlying condition	Chronic disease	□Ye s □No □Unk	Specify:	

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E Chest X Radiology findings

Dates:	Clear	□Ye s □No □Unk	Pulmonary abscess	□Ye s □No □Unk
	Hilar adenopathy	□Ye s □No □Unk	Pulmonary nodules	□Ye s □No □Unk
	Unilateral infiltrates	□Ye s □No □Unk	Interstitial changes	□Ye s □No □Unk
	Bilateral infiltrates	□Ye s □No □Unk	Pleural effusion	□Ye s □No □Unk

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F Laboratory findings

Specimens	Date of collection	Test	Laboratory	Result
Blood culture 1				
Blood culture 2				
Bubo aspirate				
Sputum sample				
CSF sample				
Other				

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G Case management

Hospital admission □Ye s □No □Unk	Hospital name	Date admission	Intubation	Isolation (contact, droplet, respiratory)
Antibiotics	Name ATB	Date started	Date stopped	Posology

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H Evolution and outcome

Complications □Ye s □No □Unk	Limb ischemia/amputation	□Ye s □No □Unk	Multisystem organ failure	□Ye s □No □Unk
	Bleeding	□Ye s □No □Unk	Renal failure	□Ye s □No □Unk
	Cardiac arrest	□Ye s □No □Unk	Secondary pneumonia	□Ye s □No □Unk
	Respiratory failure	□Ye s □No □Unk	Shock	□Ye s □No □Unk
Outcome	Recovered	□Ye s □No □Unk	Death	□Ye s □No □Unk
	Complications	□Ye s □No □Unk	Date death	

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I Exposure

Animals	Contact with sick / dead animal	□Ye s □No □Unk
	Exposure to abandoned burrows	□Ye s □No □Unk
	Hunting, including with wild animals	□Ye s □No □Unk
	Flea or insect bites	□Ye s □No □Unk
Ill persons	Contact with ill persons	□Ye s □No □Unk
	Contact with ill person who died last week	□Ye s □No □Unk
	Contact with known plague patient	□Ye s □No □Unk
Pets	Pets at home, specify:	□Ye s □No □Unk
	Ill pets at home, specify:	□Ye s □No □Unk
	Pets brought dead animals at home	□Ye s □No □Unk
Other	Specify:	□Ye s □No □Unk