

Anthrax Exposure

Patient Profile

J.B. is a 56-year-old male victim of a suspected terrorist attack. He is one of several postal workers who inhaled *Bacillus anthracis* (anthrax) spores when a package in the mail sorting room exploded several feet away from him. He did not sustain any visible wounds or trauma from the explosion. He was decontaminated by the biohazard team before transport to the hospital. In the emergency department (ED), he reported a sore throat and cough. He is being admitted for observation to the medical unit. He has a history of hypertension and hyperlipidemia.

Subjective Data

- States throat is sore
- Denies any dyspnea

Objective Data

- Temperature 98.6°F, pulse 88, respirations 20, blood pressure 136/80
- Lungs clear to auscultation
- Posterior oropharynx slightly red
- Occasional, unproductive cough

Questions

1. What, if any, special precautions need to be taken in caring for J.B., who was exposed to inhalation anthrax?

Answer:

Rationale:

2. What clinical manifestations should you assess for in J.B.? When would you expect these symptoms to arise?

Answer:

Rationale:

3. What is the treatment for anthrax exposure?

Answer:

Rationale:

4. J.B. does not develop any further symptoms and is discharged after 48 hours. What will you include in your discharge teaching?

Answer:

Rationale:

5. This incident of exposure to anthrax is considered a mass casualty incident (MCI). What does that mean?

Answer:

Rationale:

6. What is the nurse's role in emergency and MCI preparedness?

Answer:

Rationale: