



## Communicable Disease Case Reporting and Investigation Protocol ***STREPTOCOCCUS PNEUMONIAE*, INVASIVE DISEASE** (Pneumococcal Disease)

### I. IDENTIFICATION AND DEFINITION OF CASES

- A. **Clinical Description:** A serious and sometimes life-threatening disease caused by the bacterium *Streptococcus pneumoniae*. *Streptococcus pneumoniae* can cause many types of illnesses such as meningitis, sepsis, pneumonia and ear infections. Infants, children, the elderly, and persons with immunocompromising conditions are at increased risk of *S. pneumoniae* infections.
- B. **Laboratory Criteria:** Isolation of *Streptococcus pneumoniae* from a normally sterile site (e.g., cerebrospinal fluid [CSF], blood, joint, pleural, pericardial fluid, or another normally sterile site). Isolation from urine, sputum, abscesses or pharyngeal swabs **does not** meet the case definition.
- C. **Wisconsin Surveillance Case Definition:** Confirmed: A clinically compatible case that is laboratory confirmed.

### II. REPORTING

- A. **Wisconsin Disease Surveillance Category II – Methods for Reporting:** This disease shall be reported to the patient’s local health officer or to the local health officer’s designee within 72 hours of recognition of a case or suspected case, per Wis. Admin. Code § DHS 145.04(3)(b). Report electronically through the Wisconsin Electronic Disease Surveillance System (WEDSS), or mail or fax a completed Acute and Communicable Disease Case Report ([F-44151](#)) to the address on the form.
- B. **Responsibility for Reporting:** According to Wis. Admin. Code § [DHS 145.04\(1\)](#), persons licensed under Wis. Stat. ch. [441](#) or [448](#), laboratories, health care facilities, teachers, principals, or nurses serving a school or daycare center, and any person who knows or suspects that a person has a communicable disease identified in [Appendix A](#).
- C. **Clinical Criteria for Reporting:** Clinically compatible illness.
- D. **Laboratory Criteria for Reporting:** Isolation of *Streptococcus pneumoniae* from a normally sterile site (e.g., cerebrospinal fluid [CSF], blood, joint, pleural, pericardial fluid, or another normally sterile site). Isolation from urine, sputum, abscesses, or pharyngeal swabs **does not** meet the case definition.

### III. CASE INVESTIGATION

- A. **Responsibility for case investigation:** It is the responsibility of the local health department (LHD) to investigate or arrange for investigation of suspected or confirmed cases as soon as is reasonably possible. A case investigation may include information collected by phone, in-person, in writing, or through review of medical records or communicable disease report forms, as necessary and appropriate.
- B. **Required Documentation:**
  - 1. Complete the WEDSS disease incident investigation report, including appropriate, disease-specific tabs (e.g., WEDSS Lab Clinical Tab, “Invasive bacteria - Specimen summary” section).
  - 2. Upon completion of investigation, set WEDSS disease incident process status to “Final.”
- C. **Additional Investigation Responsibilities:** Determine whether the case is potentially outbreak-related and notify the Wisconsin Division of Public Health (DPH), Bureau of Communicable Diseases (BCD).

### IV. PUBLIC HEALTH INTERVENTIONS AND PREVENTION MEASURES

- A. In accordance with Wis. Admin. Code § [DHS 145.05](#), local public health agencies should follow the methods of control recommended in the current editions of *Control of Communicable Diseases Manual*, edited by David L.

Heymann, published by the American Public Health Association, and the American Academy of Pediatrics' *Red Book: Report of the Committee on Infectious Diseases*, unless otherwise specified by the state epidemiologist.

**V. CONTACTS FOR CONSULTATION**

- A. Local health departments and tribal health agencies:  
<https://www.dhs.wisconsin.gov/lh-depts/index.htm>
- B. BCD, Communicable Diseases Epidemiology Section: 608-267-9003
- C. Wisconsin State Laboratory of Hygiene: 1-800-862-1013

**VI. RELATED REFERENCES**

- A. Heymann DL, ed. Pneumococcal Meningitis. In: *Control of Communicable Diseases Manual*. 21st ed. Washington, DC: American Public Health Association, 2022: 428-430.
- B. Kimberlin DW, Barnett ED, Lynfield R, Sawyer MH, eds. Streptococcus pneumoniae (Pneumococcal) Infections. In: *Red Book: 2021 Report of the Committee on Infectious Diseases*. 32nd ed. Itasca, IL: American Academy of Pediatrics, 2021: 717-727.
- C. Centers for Disease Control and Prevention Pneumococcal Disease website:  
<https://www.cdc.gov/pneumococcal/index.html>
- D. DPH Streptococcus Pneumoniae, Invasive (Pneumococcal Disease) website:  
<https://www.dhs.wisconsin.gov/immunization/pneumo.htm>