

Wisconsin Department of Health Services Division of Public Health P-01982 (Rev 09/2017)

# Communicable Disease Case Reporting and Investigation Protocol GROUP A STREPTOCOCCUS (GAS), INVASIVE DISEASE

(Streptococcus pyogenes)

## I. IDENTIFICATION AND DEFINITION OF CASES

- A. **Clinical Description:** A severe and sometimes life-threatening disease caused by the bacterium *Streptococcus pyogenes* (group A *Streptococcus*). Invasive GAS disease is associated with many different syndromes, such as pneumonia or bacteremia in association with cutaneous infection (e.g., cellulitis, infection of a surgical or nonsurgical wound) or deep soft-tissue infection (e.g., necrotizing fasciitis or myositis). It can also cause meningitis, peritonitis, osteomyelitis, septic arthritis, postpartum sepsis (i.e., puerperal fever), neonatal sepsis, and non-focal bacteremia.
- B. **Laboratory Criteria:** A laboratory confirmed infection is defined by isolation of group A Streptococcus (Streptococcus pyogenes) from a normally sterile site (e.g., cerebrospinal fluid [CSF], blood, joint, pleural, pericardial fluid, or another normally sterile site).

Note: 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 § <u>DHS 145.04 (3) (b)</u>. Report electronically through the Wisconsin Electronic Disease Surveillance System (WEDSS), or mail or fax a completed Acute and Communicable Disease Case Report (<u>F-44151</u>) to the address on the form.
- B. Responsibility for Reporting: According to Wis. Admin. Code § <u>DHS 145.04(1)</u>, persons licensed under Wis. Stat. ch. <u>441</u> or <u>448</u>, laboratories, health care facilities, teachers, principals, or nurses serving a school or day care center, and any person who knows or suspects that a person has a communicable disease identified in <u>Appendix A</u>.
- C. Clinical Criteria for Reporting: Clinically compatible illness.
- D. Laboratory Criteria for Reporting: Isolation of group A *Streptococcus (Streptococcus pyogenes)* 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

1. 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 § <u>DHS 145.05</u>, 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. Bureau of Communicable Diseases, Communicable Diseases Epidemiology Section: 608-267-9003
- C. Wisconsin State Laboratory of Hygiene: 1-800-862-1013

#### VI. RELATED REFERENCES

- A. Heymann DL, ed. Streptococcal Diseases. In: *Control of Communicable Diseases Manual*. 20th ed. Washington, DC: American Public Health Association, 2015: 581-589.
- B. Pickering LK, ed. Group A Streptococcal Infections. In: *Red Book: 2015 Report of the Committee on Infectious Diseases.* 30th ed. Elk Grove Village, IL: American Academy of Pediatrics, 2015: 732-744.
- C. Centers for Disease Control and Prevention website: https://www.cdc.gov/groupAstrep/index.html
- D. DPH Group A Streptococcal Infections webpage: https://www.dhs.wisconsin.gov/invasive-bacteria/gas.htm