



Communicable Disease Case Reporting and Investigation Protocol
GROUP B *STREPTOCOCCUS* (GBS), INVASIVE DISEASE
(*Streptococcus agalactiae*)

I. IDENTIFICATION AND DEFINITION OF CASES

A. **Clinical Description:** A serious and sometimes life-threatening disease caused by the bacterium *Streptococcus agalactiae* (group B *Streptococcus*). Group B *Streptococcus* is a leading cause of meningitis and sepsis in neonates during their first week of life (early-onset disease). Invasive GBS disease can also occur a week to three months after birth (late-onset disease). The bacterium can also affect pregnant women, the elderly, and persons with immunocompromising conditions. It may produce bacteremia, meningitis, or focal infections, such as osteomyelitis, septic arthritis, or cellulitis.

B. **Laboratory Criteria:** A laboratory confirmed case is defined by isolation of group B *Streptococcus* (*Streptococcus agalactiae*) 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 § [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 day care 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 group B *Streptococcus* (*Streptococcus agalactiae*) 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

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. 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: 590-591.
- B. Pickering LK, ed. Group B Streptococcal Infections In: *Red Book: 2015 Report of the Committee on Infectious Diseases*. 30th ed. Elk Grove Village, IL: American Academy of Pediatrics, 2015: 745-750.
- C. Centers for Disease Control and Prevention Group B Strep (GBS) website: <https://www.cdc.gov/groupbstrep/index.html>
- D. Division of Public Health Group B Streptococcal Infections website: <https://www.dhs.wisconsin.gov/invasive-bacteria/gbs.htm>