

Invasive Group Strep A Infections Rapid Assessment Form

(Please refer to the Disease investigation Guideline for additional guidance.)

Section 1	Type(s) of infection: <input type="checkbox"/> UNKNOWN (Or check all that apply)		
	<input type="checkbox"/> Bacteremia without focus <input type="checkbox"/> Meningitis <input type="checkbox"/> Otitis media <input type="checkbox"/> Pneumonia <input type="checkbox"/> Other (Specify):	<input type="checkbox"/> Cellulitis <input type="checkbox"/> Epiglottitis <input type="checkbox"/> Abscess (not skin)	<input type="checkbox"/> Peritonitis <input type="checkbox"/> Pericarditis <input type="checkbox"/> Septic abortion <input type="checkbox"/> Chorioamnionitis <input type="checkbox"/> Osteomyelitis <input type="checkbox"/> Empyema <input type="checkbox"/> Endocarditis <input type="checkbox"/> Endometritis <input type="checkbox"/> STSS (*) <input type="checkbox"/> Necrotizing fasciitis <input type="checkbox"/> Puerperal sepsis <input type="checkbox"/> Septic shock
<i>* Report as Toxic Shock Syndrome, Streptococcal in KS-EDSS. Refer to the second page for data that will assist in classifying.</i>			
Section 2	Review of Laboratory Culture Reports:		
	Date first positive culture obtained: (Date Specimen Collected) □□/□□/□□□□ Mo. Day Year	Sterile Site from which isolated: <input type="checkbox"/> Blood <input type="checkbox"/> CSF <input type="checkbox"/> Pleural fluid <input type="checkbox"/> Peritoneal Fluid <input type="checkbox"/> Internal body site: <input type="checkbox"/> Other sterile site:	Other sites from which isolated: <input type="checkbox"/> Placenta <input type="checkbox"/> Amniotic fluid <input type="checkbox"/> Wound <input type="checkbox"/> Other (specify): <input type="checkbox"/> Pericardial Fluid <input type="checkbox"/> Joint <input type="checkbox"/> Bone <input type="checkbox"/> Muscle <input type="checkbox"/> Middle ear <input type="checkbox"/> Sinus
Section 3	Additional epidemiological data for special situations and possible outbreak situations:		
	At time of positive culture, was the patient: <input type="checkbox"/> Pregnant <input type="checkbox"/> Postpartum <input type="checkbox"/> Neither <input type="checkbox"/> Unknown		
	If postpartum, what was the outcome of fetus: <input type="checkbox"/> Survived, no apparent illness <input type="checkbox"/> Abortion /stillbirth <input type="checkbox"/> Live birth, but neonatal death <input type="checkbox"/> Survived, clinical infection <input type="checkbox"/> Induced abortion <input type="checkbox"/> Unknown		
	Date of delivery or abortion: □□/□□/□□ Birth weight/gestational age: □□□□(grams) □□(wks)		
	If pregnant, what was the gestational age of the fetus at the time of the first positive culture: □□(wks)		
	If hospitalized, date of admission: □□/□□/□□ Date of hospital discharge: □□/□□/□□		
Did the patient survive the infection? <input type="checkbox"/> Yes <input type="checkbox"/> No If NO, date of death: □□/□□/□□			
Did the patient have surgery 7 days before first positive culture? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, date of surgery: □□/□□/□□ Surgery provider:			
Did the patient have any of the following risks: <input type="checkbox"/> Varicella rash <input type="checkbox"/> Penetrating trauma <input type="checkbox"/> Blunt trauma <input type="checkbox"/> Burn wound(s) <input type="checkbox"/> Surgical wound (Post-operative)			
Underlying Causes or Prior Illnesses: <input type="checkbox"/> NONE <input type="checkbox"/> Unknown, chart unavailable (Or check all that apply)			
<input type="checkbox"/> Current Smoker <input type="checkbox"/> Multiple Myeloma <input type="checkbox"/> Sickle Cell Anemia <input type="checkbox"/> Splenectomy/Asplenia <input type="checkbox"/> Immunoglobulin Deficiency <input type="checkbox"/> Immunosuppressive Therapy (Steroids, Chemotherapy, Radiation) <input type="checkbox"/> Leukemia <input type="checkbox"/> Hodgkin's Disease/Lymphoma <input type="checkbox"/> Bone Marrow Transplant (BMT) <input type="checkbox"/> Solid Organ Malignancy <input type="checkbox"/> Solid Organ Transplant			
<input type="checkbox"/> Diabetes Mellitus <input type="checkbox"/> Nephrotic Syndrome <input type="checkbox"/> Renal Failure/Dialysis <input type="checkbox"/> HIV Infections <input type="checkbox"/> AIDS or CD4 count <200 <input type="checkbox"/> Systemic Lupus Erythematosus (SLE) <input type="checkbox"/> Cirrhosis/Liver Failure <input type="checkbox"/> Alcohol Abuse <input type="checkbox"/> IVDU <input type="checkbox"/> Obesity <input type="checkbox"/> CSF Leak			
<input type="checkbox"/> Cochlear Implant <input type="checkbox"/> Deaf/Profound Hearing Loss <input type="checkbox"/> Asthma <input type="checkbox"/> Emphysema/COPD <input type="checkbox"/> Heart Failure/CHF <input type="checkbox"/> Atherosclerotic Cardiovascular Disease (ASCVD)/CAD <input type="checkbox"/> Cerebral Vascular Accident /Stroke <input type="checkbox"/> Complement Deficiency <input type="checkbox"/> Chronic Skin Breakdown <input type="checkbox"/> Premature (Gestational age (wks): □□ <input type="checkbox"/> Other (specify):			

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Section 4

Additional data to evaluate Streptococcal Toxic Shock Syndrome (STSS):

Onset of initial illness: / / : AM / PM

Onset of first manifestation (**as listed below**): / / : AM / PM

Yes No **Hypotension present** (≤ 90 mmHg in adults or $\leq 5^{\text{th}}$ [percentile in children](#) ≤ 16 years)

Systolic Blood pressure (lowest measurement):

Multi-organ manifestations:

Yes No **Renal impairment present** (≥ 2 mg/dL (177 $\mu\text{mol/L}$) in adults **or** 2x the normal upper limit for age)

Creatinine level:

Yes No **Coagulopathy present** ($\leq 100,000/\text{mm}^3$ platelets **or** disseminated intravascular coagulopathy (DIC))

Platelet level (lowest):

Evidence of DIC indicated by:

- Prolonged clotting time reported, or
- Low fibrinogen level reported, or
- Fibrin degradation products detected

Yes No **Liver involvement present** (ALT, AST or Total bilirubin levels 2x normal upper limit for age)

Alanine aminotransferase (ALT) level:

Aspartate aminotransferase (AST) level:

Total bilirubin level:

Yes No **Acute respiratory disease present** (As shown by one of the following below)

- Acute onset of diffuse pulmonary infiltrates and hypoxemia in absence of cardiac failure, or
- Diffuse capillary leak manifested by acute onset of generalized edema, or
- Pleural / peritoneal effusions with hypoalbuminemia

Yes No **Generalized erythematous macular rash** that may desquamate

Yes No **Soft tissue necrosis** including necrotizing fasciitis or myositis, or gangrene.

Clinical Description of STSS for Public Health Surveillance:

- Hypotension: systolic blood pressure ≤ 90 mm Hg for adults or \leq fifth percentile by age for children aged ≤ 16 years.
- Multi-organ involvement characterized by two or more of the following:
 - Renal impairment: Creatinine ≥ 2 mg/dL ($\geq 177 \mu\text{mol/L}$) for adults or \geq twice the upper limit of normal for age. In patients with preexisting renal disease, a greater than two-fold elevation over the baseline level.
 - Coagulopathy: Platelets $\leq 100,000/\text{mm}^3$ ($\leq 100 \times 10^6/\text{L}$) or disseminated intravascular coagulation, defined by prolonged clotting times, low fibrinogen level, and the presence of fibrin degradation products.
 - Liver involvement: Alanine aminotransferase, aspartate aminotransferase, or total bilirubin levels \geq twice the upper limit of normal for the patient's age. In patients with preexisting liver disease, a greater than two-fold increase over the baseline level.
 - Acute respiratory distress syndrome: defined by acute onset of diffuse pulmonary infiltrates and hypoxemia in the absence of cardiac failure or by evidence of diffuse capillary leak manifested by acute onset of generalized edema, or pleural or peritoneal effusions with hypoalbuminemia.
 - A generalized erythematous macular rash that may desquamate.
 - Soft-tissue necrosis, including necrotizing fasciitis or myositis, or gangrene.

* Clinical manifestations do not need to be detected within the first 48 hours of hospitalization or illness, as specified in the 1996 case definition. The specification of the 48 hour time constraint was for purposes of assessing whether the case was considered nosocomial, not whether it was a case or not.