

TIP SHEET For Local Boards of Health

Follow-up for confirmed cases of **Group A *Streptococcus* (GAS)**



NOTE: A call to the IP/provider is all that is needed to collect clinical and exposure information. For more info: [MDPH GAS Fact Sheet](#), [MDPH Guide to Surveillance](#)

Group A <i>Streptococcus</i> (GAS)	
Initial Steps	Confirmed GAS disease events will flow into the “LBOH Notification for Immediate Disease” workflow for LBOH acknowledgement and follow-up. • Complete Admin Steps 1-3 to begin. • Review instructions or case notes from DPH Epi. • Note if a facility Infection Preventionist (IP) has been notified to complete IP Wizard by the DPH Epi. <u>Investigations should be started within 24 hours.</u> If the LBOH cannot initiate the investigation, they should reach out to the assigned DPH Epi. LBOHs are responsible for ensuring completion of the variables in the IP Wizard; the IP Wizard summarizes key variables from the Demographic, Clinical, Risk/Exposure, and Epi-linked and Outbreak Information Question Packages.
Role of DPH Epi	DPH Epidemiologists are assigned to the case to ensure complete case follow-up and can provide guidance to LBOH as needed. DPH Epi: • Review GAS events prior to LBOH notification to confirm or revoke. If case is revoked by DPH, no LBOH notification or follow-up is needed. • Request specimen isolates be sent to the State Public Health Lab for whole genome sequencing and notify the DPH Healthcare Associated Infections (HAI) Epi Team for further follow-up when LBOH identifies GAS disease events as healthcare associated.
LBOH Case Follow-up	LBOH ensures data completion. It is expected that all question packages in MAVEN be completed for every confirmed case. LBOHs should utilize the IP Wizard to ensure data completion. • Call the provider or IP at the hospital where the patient was seen to collect clinical information (this information can be found under “Ordering Provider” in the Lab Tab in MAVEN). ○ Many healthcare facilities now have IPs on MAVEN. The DPH Epi will note if a notification to the IP has been sent. Please allow 48 hours for the IP to complete the MAVEN IP Wizard. After 48 hours, you may need to follow-up with the IP directly if there is missing information. ○ Obtain the following: ▪ The case’s race/ethnicity and occupation. ▪ Symptoms and symptom onset date, admission and discharge date, type of infection (bacteremia (blood infection), cellulitis, etc.) and if the case has underlying illness or a wound. ▪ If the case had surgery or gave birth where symptom onset is within 7 days of hospital discharge. ▪ If the case lives in a nursing home (“supervised care setting”), is homeless (“current housing status”), or injected drugs not prescribed by a doctor during the incubation period. • Contacting the patient is not indicated because there are no control measures (contact tracing, quarantine, etc.) and all questions should be able to be answered by the provider or IP.
Healthcare Associated Infections (HAI)	The goal of investigation is to determine if the GAS infection is healthcare associated. Cases are potentially healthcare associated if the patient: • Had surgery or gave birth where symptom onset is within 7 days of hospital discharge • Spent time in a long-term care facility 7 days before symptom onset If the LBOH learns that the case is healthcare-associated, they should IMMEDIATELY reach out to the assigned DPH Epi so that DPH can conduct further investigation and provide recommendations and guidance to the healthcare facility.
Closing a Case	The LBOH investigation is complete once the GAS case is determined to be potentially HAI or not and once the Demographic, Clinical, Risk/Exposure, and Epi-linked and Outbreak Information Question Packages have been completed (all questions summarized in the IP Wizard). Complete Steps 4-5 in the Administrative Question Package to sign off on the case.
Please call 617-983-6800 if you have any questions regarding case follow-up	