

Send completed forms to DPHHS CDEpi Program

Fax: 800-616-7460

Case ID		
-		<u> </u>

Reported to DPHHS //

 \square stss ☐ Probable

Toxic Shock Syndrome	☐ Confirmed	□ TSS		
	County			
REPORT SOURCE	,			
LHJ notification date//		Reporter name		
Investigation start date/_/		Reporter phone		
Reporter (check all that apply) \square Lab \square Hospital		Primary HCP name		
☐ HCP ☐ Public health agency ☐ Other		Primary HCP phone		
PATIENT INFORMATION				
Name (Last, First)			Birth date / / Age	
Address		☐ Homeless	Gender □F □M □ Other □ Unk	
City/State/Zip			Ethnicity ☐ Hispanic or Latino	
Phone(s)/Email			□Not Hispanic or Latino □ Unk	
Alt. contact ☐ Parent/guardian ☐ Spouse ☐ Other			Race (check all that apply)	
Name:			☐ Amer Ind/AK Native ☐ Asian ☐ Native HI/other PI ☐ Black/Afr Amer	
Phone:			☐ White ☐ Other ☐ Unk	
LABORATORY INFORMATION				
Specimen Tested			If the specimen is positive for	
Isolate Identified S. pyogenes (GAS) Other None				
Rocky Mountain Spotted Fever Titer			Streptococcus pyogenes or Group A	
Leptospirosis titer ☐ Elevated ☐ Normal ☐ Not performed			Strep, use the STSS criteria below. Otherwise, use the TSS criteria.	
leasles titer			Caroninos, ass are 100 sinona.	
CLINICAL INFORMATION				
	anosis data:	1 1	Illness duration: days	
	_		Outcome Survived Died Unknown	
nospitalized date/ / / Dis	criarge date	1 1	Outcome - Survived - Died - Onknown	
Streptococcal Toxic Shock Syndrome (STSS)	Non	Strep Toxic Shock Syndrome (TSS)	
CASE DEFINITION CRITERI	A Check box	to indicate condition	and case classification	
☐ Probable		☐ Probable		
A case that meets the clinical case definition in the absence		A case which meets the laboratory criteria and in which		
of another identified etiology for the illness and with		four of the five clinical criteria described below are present		
isolation of group A Streptococcus from a nor	n-sterile site.	☐ Confirmed		
□ Confirmed		A case which	meets the laboratory criteria and in which all	
A case that meets the clinical case definition and with		five of the clinical criteria described below are present,		
isolation of group A Streptococcus from a normally sterile		including desquamation, unless the patient dies before		

site (e.g., blood or cerebrospinal fluid or, less commonly,

joint, pleural, or pericardial fluid).

including desquamation, unless the patient dies before desquamation occurs

Streptococcal Toxic Shock Syndrome (STSS)	Non Strep Toxic Shock Syndrome (TSS)			
Laboratory Criteria	Laboratory Criteria			
Isolation of group A Streptococcus.	Negative results on the following tests, if obtained:			
	Blood or cerebrospinal fluid cultures (blood culture may be positive for <i>Staphylococcus aureus</i>)			
	 Negative serologies for Rocky Mountain spotted fever, leptospirosis, or measles 			
Clinical Criteria	Clinical Criteria			
An illness with the following clinical manifestations:	An illness with the following clinical manifestations:			
☐ Hypotension *	☐ Fever ≥ 102.0°F (38.9°C)			
☐ Multi-organ involvement characterized by two or more of the	☐ Rash: Diffuse macular erythroderma			
following:	☐ Desquamation: 1-2 weeks after rash onset			
Renal impairment: Creatinine greater than or equal to	☐ Hypotension (low blood pressure) *			
2mg/dL (greater than or equal to 177 µmol/L) for adults or	☐ Multisystem involvement (three or more of the following):			
greater than or equal to twice the upper limit of normal for	☐ Gastrointestinal: vomiting or diarrhea at onset of illness			
age. In patients with preexisting renal disease, a greater	☐ <u>Muscular</u> : severe myalgia or creatine phosphokinase			
than twofold elevation over the baseline level.	level at least twice the upper limit of normal			
☐ <u>Coagulopathy</u> : Platelets less than or equal to	☐ <u>Mucous membrane</u> : vaginal, oropharyngeal, or			
$100,000/\text{mm}^3$ (less than or equal to $100 \times 10^6/\text{L}$) or	conjunctival hyperemia			
disseminated intravascular coagulation, defined by	☐ Renal: blood urea nitrogen or creatinine at least twice			
prolonged clotting times, low fibrinogen level, and the	the upper limit of normal for laboratory or urinary			
presence of fibrin degradation products.	sediment with pyuria (greater than or equal to 5			
\square <u>Liver involvement</u> : Alanine aminotransferase, aspartate	leukocytes per high-power field) in the absence of			
aminotransferase, or total bilirubin levels greater than or	urinary tract infection			
equal to twice the upper limit of normal for the patient's	\square <u>Hepatic</u> : total bilirubin, alanine, aminotransferase			
age. In patients with preexisting liver disease, a greater	enzyme, or asparate aminotransferase enzyme levels at			
than twofold increase over baseline levels.	least twice the upper limit of normal for laboratory			
\square <u>Acute respiratory distress syndrome</u> : Defined by acute	☐ <u>Hematologic</u> : platelets less than 100,000/mm³			
onset of diffuse pulmonary infiltrates and hypoxemia in	\square <u>Central nervous system</u> : disorientation or alterations in			
the absence of cardiac failure or by evidence of diffuse	consciousness without focal neurologic signs when			
capillary leak manifested by acute onset of generalized	fever and hypotension are absent			
edema, or pleural or peritoneal effusions with				
hypoalbuminemia.	NOTES			
☐ A generalized erythematous macular rash that may				
desquamate.				
☐ <u>Soft-tissue necrosis</u> , including necrotizing fasciitis or myositis, or gangrene.				
* Systolic blood pressure less than or equal to 90 mm Hg				
for adults or less than fifth percentile by age for children				
aged less than 16 years				