Date:

Dear [GP name]

This letter is to inform you that a resident of [insert RCF name] has been diagnosed with invasive Group A Streptococcus (iGAS) infection. Following public health risk assessment, [Patient name] has been identified as a close contact of the iGAS case.

[Patient name] has developed the following symptoms but was well at the time of assessment.

Please tick all that apply

Sore throat [ ]

High temperature (38oC or higher) [ ]

Chills [ ]

Muscle aches [ ]

Minor skin infection [ ]

Scarlet fever rash [ ]

Other (*please specify below*)

We would be grateful for your assessment and management of [patient name] as per national guidance. These guidelines state the following:

Symptomatic close contacts of an iGAS case, with symptoms that could be attributable to non-invasive GAS Infection (e.g., sore throat/impetigo), should be treated with empiric antibiotics. Treatment should not be delayed by awaiting microbiology lab confirmation.

Further details are available here: [Guidance for General Practitioners and Others on the Management of Infections Caused by Group A Streptococcus](https://www.hpsc.ie/a-z/other/groupastreptococcaldiseasegas/guidance/File%2C14035%2Cen.pdf).

We will continue to monitor his/her condition and will inform you of any new or worsening symptoms.

Yours sincerely,

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Name and title of RCF contact person]

[insert RCF name]