

## Management of invasive group A streptococcal infection (iGAS) for Emergency Medicine Physicians

Invasive Group A Streptococcus suspected	Invasive Group A Streptococcus – other considerations
<ul style="list-style-type: none"><li>• Isolate patient if possible and consider ICU admission</li><li>• The patient should be managed in line with the Sepsis Guidelines</li><li>• Antibiotics should be started as soon as possible in accordance with local antibiotic guidance</li><li>• Prompt discussion with local Microbiology/Infectious Diseases/Infection control is required</li></ul>	<ul style="list-style-type: none"><li>• Isolate in a single room if iGAS suspected or confirmed until 24 hours on appropriate antimicrobial therapy</li><li>• Prompt surgical intervention if necrotising fasciitis (NF) is suspected</li><li>• Consider IV immunoglobulin for streptococcal Toxic Shock Syndrome (STSS) or NF if associated with signs and symptoms of organ failure</li></ul>