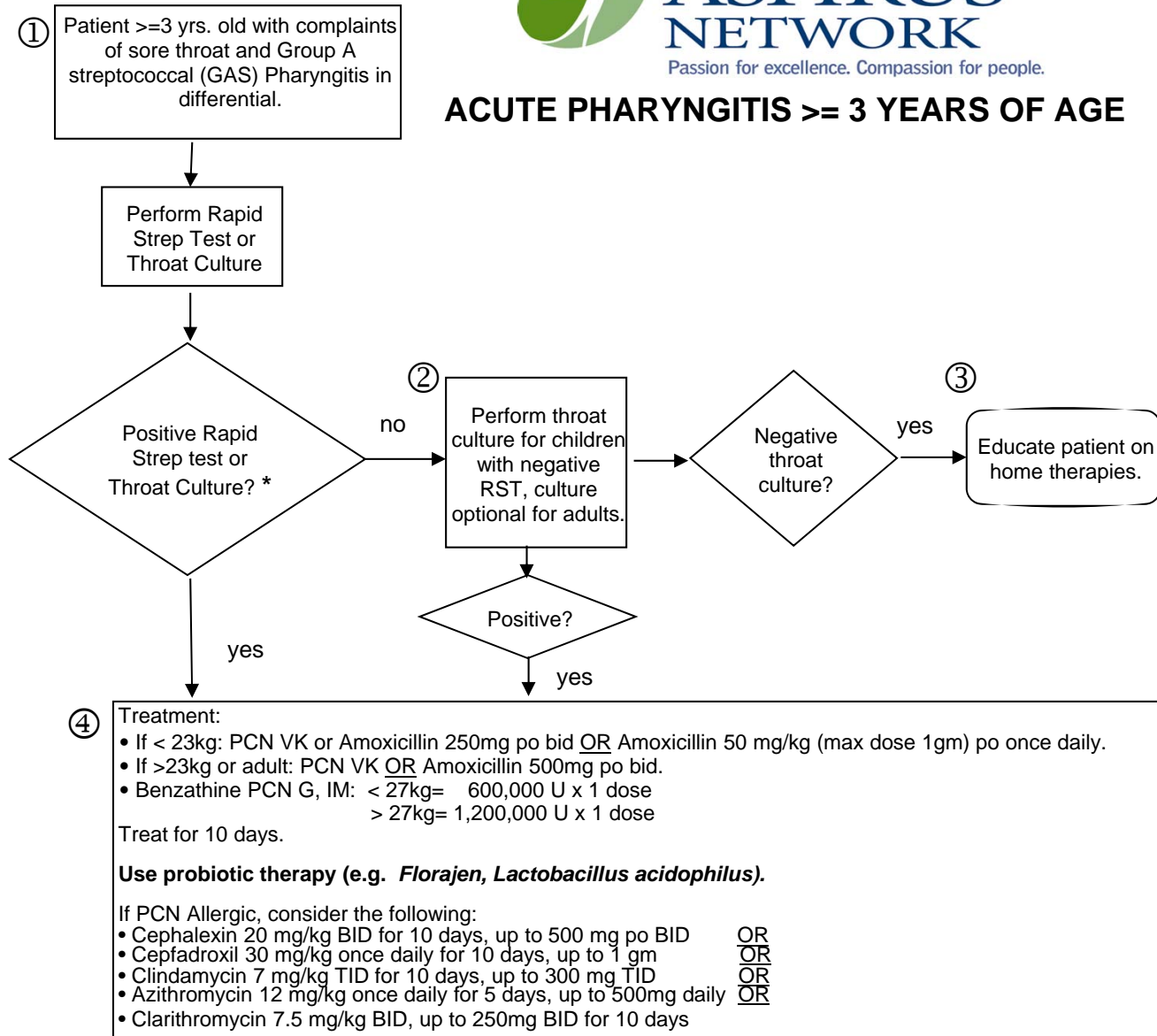


ACUTE PHARYNGITIS \geq 3 YEARS OF AGE



1.

Classic Group A Strep Symptoms:

- Sudden onset sore throat
- Exudative tonsillitis
- Tender anterior cervical adenopathy
- History of fever
- No rhinorrhea, cough, hoarseness, and diarrhea

2.

Throat Culture:

Throat culture advised for children and those at risk for Acute Rheumatic Fever (ARF), and should be considered for adults with suppurative pharyngitis per FDA advisory.

If patient on/will be on appropriate antibiotics for another diagnosis, culture is optional.

3.

Education:

- Take acetaminophen or ibuprofen. Do not use aspirin with children or teenagers.
- Gargle with warm salt water.
- Older children/adults suck on hard candy, lozenges, ice or frozen snacks such as popsicles.
- F/U if sxs worsen or persist $>$ 5-7 days.

4.

Treatment:

PCN is the drug of choice. Empiric antibiotic RX (pending culture results) should be avoided. PCN resistance has not been documented for Group A Strep. Macrolide resistance is 5-8% in the US. Oral Amoxicillin suspension more palatable than PCN for children. Re-evaluate for ongoing or worsening symptoms.

* If recent antibiotic therapy, consider obtaining a throat culture to confirm the presence of viable GAS organisms.

Adapted from: 1) ICSI Health Care Guideline "Acute Pharyngitis" and "Prevention of Rheumatic Fever and Treatment of Acute Streptococcal Pharyngitis" Gerber, et al., Circulation (Journal of the American Heart Association) (2009) 119, 1541-1551.

2) IDSA Guideline for GAS Pharyngitis, Clin Infect Dis. (2012) 55 (10): e86-e102.

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