

## PF Acute Sore Throat Pathway Summary: For 5 years and over

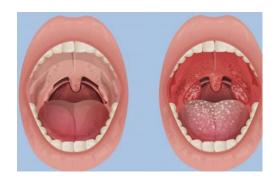
This summary does not replace the PGDs or Clinical Pathway. Please make sure you have read, understood and signed the PGDs.

## To meet Gateway criteria (and be eligible for PGD):

Severe symptoms **AND** 4 or more of the following symptoms:

- Fever over 38°C
- Purulence presence of pus
- Severely inflamed tonsils
- No cough or cold symptoms
- First attendance regarding the sore throat within 3 days of onset

For patients with a score of less than 4 explain that acute sore throats can last for around 1 week, but most people will get better within this time without antibiotics, regardless of cause (bacteria or virus).



Exclusions: If the patient has any of the following, refer them to their GP surgery or other provider

- Patients under 5yrs
- Severe immunosuppressed
- Pregnancy or suspected pregnancy in under 16 years
- Current long-term use of phenoxymethylpenicillin (e.g. prophylaxis in asplenia etc.)
- Patients following a ketogenic diet
- Failed previous antibiotic for this episode of sore throat
- Recurrent sore throat/tonsillitis (7 or more significant episodes in last 12 months or 5 or more episodes in each of the last two years, or 3 or more in each of the last three years)
- Previous tonsillectomy
- Post tonsillar or other throat surgery or procedure
- Symptoms indicating possible epiglottitis including: difficulty breathing, which may improve when leaning forward, muffled or hoarse voice, inspiratory stridor (noisy high pitched sound when breathing)
- Symptoms of Scarlet Fever or Glandular Fever
- Symptoms of Quinsy or Diphtheria
- Individuals currently taking/receiving the following medicines known to cause agranulocytosis (e.g. methotrexate, sulfasalazine, carbimazole, propylthiouracil, cotrimoxazole, valganciclovir, clozapine, carbamazepine, all chemotherapy)
- Patients with known Chronic Kidney Disease (CKD) stages 4 or 5

## Treatment: 5 days supply

1st Choice: Penicillin V tablets/ liquid four time a day for 5 days (Penicillin V can be used in breastfeeding)
Clarithromycin should be used when Penicillin V is contraindicated, Erythomycin should be used when Penicillin V is contraindicated and pregnancy or suspected pregnancy.

## **Advice/Safety Netting:**

- If symptoms worsen rapidly or significantly at any time or do not improve in 5 days the patient should contact their GP surgery or other provider as appropriate.
- Provide TARGET RTI leaflet
- Provide advice on pain management: where appropriate, paracetamol, alone or combination with ibuprofen.
- Medicated lozenges and throat sprays may help with pain, but adverse effects (including taste disturbance, numbness) are common. Regular or repeat purchases = suspected cancer red flag.
- For children: see Healthier Together guidance (tonsillitis/sore throat) for further information on appropriate signposting and parent information sheets.

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