

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, Erythromycin 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.