Acute Pharyngitis in Children >5 years, Adolescents, and Adults

**Suspected uncomplicated acute pharyngitis (recurrent or persistent infection not covered here)**

- Any factors associated with Group A streptococcal pharyngitis present?
  - Fever (>38°C or 100.3°F)
  - Tonsillar swelling or exudates
  - Tender anterior cervical lymph nodes
  - Absence of a cough, coryza, conjunctivitis, diarrhea
  - Palatine petechiae

**Possible Group A streptococcal pharyngitis**

- Perform rapid antigen detection test, if available
  - Positive
    - Initiate antibiotic therapy
  - Negative
    - Perform throat culture
      - Positive
        - Initiate antibiotic therapy
      - Negative

- Viral etiology likely**

**Antibiotic therapy not indicated**

Recommend specific symptomatic therapy:
- Acetaminophen or NSAIDS for fever/pain
- Implement communication tips from page 1

**Other etiologies of acute pharyngitis to consider:**
- *F. necrophorum*
- *C. diphtheriae*
- *M. pneumoniae*
- *N. gonorrhoea*
- Infectious mononucleosis
- Primary HIV infection
- HSV
- Influenza

<table>
<thead>
<tr>
<th>Antibiotic</th>
<th>Adults/Adolescents &gt;60lbs</th>
<th>Children &lt;60lbs</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st line:</td>
<td></td>
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</tr>
<tr>
<td>Penicillin V</td>
<td>500mg TID</td>
<td>50mg/kg divided BID or TID (max 500mg/dose)</td>
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<tr>
<td>Amoxicillin</td>
<td>500mg TID</td>
<td>50mg/kg divided BID or TID (max 1gm BID)</td>
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<tr>
<td>Benzathine PCN G</td>
<td>1.2 million units IM once</td>
<td>600,000 units IM once</td>
</tr>
<tr>
<td>Non-severe PCN allergy: Cephalexin</td>
<td>500mg BID</td>
<td>25-50mg/kg divided BID (max 500mg/dose)</td>
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<tr>
<td>Severe PCN allergy: Azithromycin†</td>
<td>500mg x 1, then 250mg QDay</td>
<td>12mg/kg QDay (max 500mg/day)</td>
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</tbody>
</table>

**Recommended duration of oral therapy:** 10 days†

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**Note:** This is intended only as a guide for evidence-based decision-making; it is not intended to replace clinical judgment. Assess for antibiotic allergies and use alternative agents as appropriate. Suggested antibiotic doses are for normal renal function; adjust for renal impairment when necessary.


† recommended duration of azithromycin is 5 days