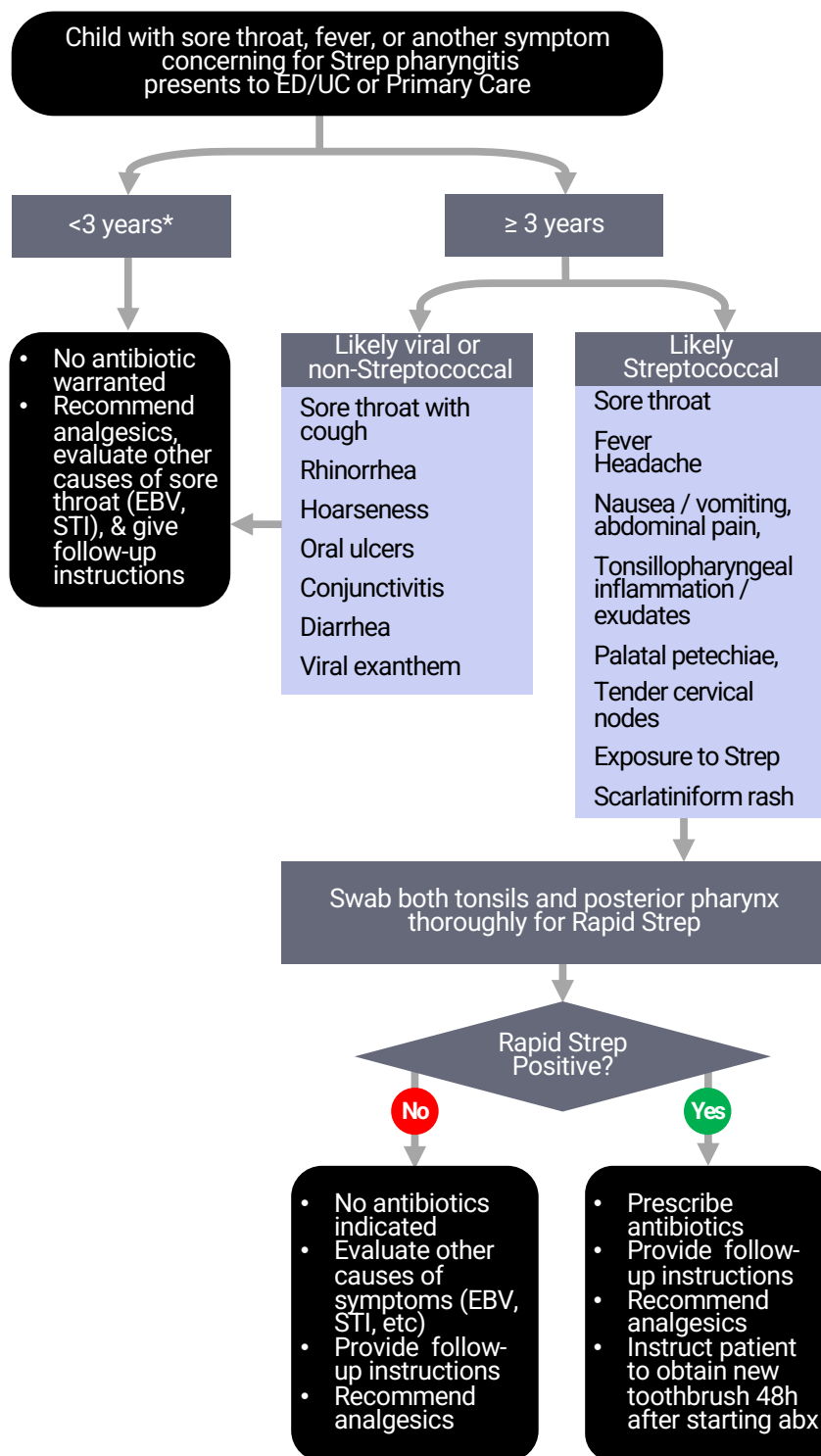


Streptococcal Pharyngitis

Emergency Department / Urgent Care / Primary Care
Age ≥ 3 years



Testing Considerations*

Acute Rheumatic Fever and classic presentation of strep are rare in children <3y; consider testing only if significant exposure (e.g. older siblings are positive).

Preferred treatment - Amoxicillin

50 mg/kg/day given daily or divided BID, max 1000 mg/day for 10 days

Other treatment considerations

IM Benzathine Penicillin G can be considered if adherence is a concern and if the correct dosing form is available at your site. During shortages, IM ceftriaxone 50mg/kg (max 1000mg) q24h X 2 doses is an option but po amoxicillin is strongly preferred (single dose ceftriaxone is inadequate for strep)

PCN allergy (non-anaphylaxis)

- Cephalexin 40 mg/kg/DAY divided BID (max 500 mg BID) or cefixime 8mg/kg/DAY daily or divided BID (max 40 mg/DAY) first line.
- Refer (or e-consult from PCP) to Pediatric Antibiotic Allergy Testing Service (PATS).

PCN AND cephalosporin allergy

- Azithromycin or clindamycin. 30% of strep isolates nationwide are resistant to azithromycin and clindamycin (thus they are last line options).

Recurrence and treatment failure

Treatment failure: no clinical improvement in 48-72 hours. True incidence of treatment failure is rare, and most ongoing symptoms are from a concomitant virus, adherence concerns, or inadequate 1st line treatment (macrolides or < 10 days course of amox). Can consider cephalexin X 10 days instead.

Recurrence - return of symptoms and positive test after completion of a course of antibiotics and clinical improvement. Likely represents new infection (re-treat with 10 days of amoxicillin).

Recurrence and chronic carriage are difficult to distinguish. If concerned about multiple recurrences, consider re-testing when asymptomatic to determine carrier status. Use clinical judgement when determining whether to re-treat potential carriers.

When to involve Otolaryngology

Consult ENT for peritonsillar abscess.

IDSA guidelines do not recommend tonsillectomy

References

Shulman ST, Bisno AL, Clegg HW, et al.; IDSA. Clinical practice guideline for the diagnosis and management of group A streptococcal pharyngitis: 2012 update by the Infectious Diseases Society of America. Clin Infect Dis. 2012 Nov 15;55(10):e86-102.