

SORE THROAT ENCOUNTER FORM

Patient's name: _____ Age: _____ Medical record #: _____

Data collection:

Symptom	Points
<input type="checkbox"/> History of fever or measured temp >100.4°F	1
<input type="checkbox"/> Absence of cough	1
<input type="checkbox"/> Tender anterior cervical nodes	1
<input type="checkbox"/> Tonsillar swelling or exudates	1
Patient's age	
<input type="checkbox"/> <15 years	1
<input type="checkbox"/> 15 to 45 years	0
<input type="checkbox"/> >45 years	-1
Total:	
Score:	
0 to -1 point: Strep throat ruled out (only a 2% risk).	
1 to 3 points: Order rapid strep test; treat accordingly.	
4 to 5 points: Diagnose probable strep throat (52% risk); consider empiric antibiotic therapy.	

Suggestive findings	Diagnostic considerations
<input type="checkbox"/> Palatine petechiae or scarlatiniform rash	Probable strep throat
<input type="checkbox"/> Contact with strep infection in past 2 weeks	Consider strep throat
<input type="checkbox"/> Duration of illness <3 days	
<input type="checkbox"/> Headache <input type="checkbox"/> Petechial rash	Consider meningitis
<input type="checkbox"/> Stiff neck	
<input type="checkbox"/> Hot-potato voice	Consider abscess
<input type="checkbox"/> Sudden/severe symptoms	
<input type="checkbox"/> Posterior cervical adenopathy or teenager	Consider mononucleosis

Rapid strep test: Positive Negative NA
 Mono spot test: Positive Negative NA
 Other history: _____

Diagnosis:

- Probable or confirmed strep throat _____
- Viral pharyngitis _____
- Mononucleosis _____
- Other: _____

Antibiotic treatment:

- None needed _____
- Penicillin V potassium _____
- Cephalexin _____
- Erythromycin _____
- Azithromycin _____

Symptomatic measures:

- NSAID 2% lidocaine gargle
- Sore throat spray Salt water gargles

Follow-up visit:

- prn only
- _____ days

Other treatment: _____

- Patient education handout given.