## **Sore throat pathway**





## **Clinical support tool for community pharmacists**

Clinical findings	Green – low risk	Amber – intermediate risk	Red – high risk
Colour Activity	<ul> <li>Normal colour of skin, lips and tongue</li> <li>Responds normally to social cues</li> <li>Content/smiles</li> <li>Stays awake or wakens quickly</li> <li>Strong normal cry / not crying</li> </ul>	<ul> <li>Pallor</li> <li>Reduced response to social cues</li> <li>Wakes only after prolonged stimulation</li> <li>Infant (under 1 year) not feeding</li> </ul>	<ul> <li>Blue or grey colour</li> <li>Unable to rouse or if roused does not stay awake</li> <li>Clinician concerns about nature of cry in infant (Weak, high pitched or continuous)</li> </ul>
Respiratory	None of amber or red symptoms	<ul> <li>RR 50-60 breaths/min if aged &lt;12 months</li> <li>RR 40-50 breaths/min if age 1-5 years</li> <li>RR 25-30 breaths/min if age 6 -11 years</li> <li>RR 20-25 breaths/min if age ≥12 years</li> <li>Mild/moderate respiratory distress</li> </ul>	<ul> <li>Grunting or severe respiratory distress</li> <li>RR &gt;60 breaths/min if aged &lt;12 months</li> <li>RR &gt;50 breaths/min if age 1-5 years</li> <li>RR &gt;30 breaths/min if age 6 -11 years</li> <li>RR &gt;25 breaths/min if age ≥12 years</li> </ul>
Circulation / hydration	None of amber or red symptoms	<ul> <li>Cold hands and feet in absence of fever</li> <li>Reduced urine output</li> <li>Not tolerating fluids</li> <li>Unable to swallow saliva</li> </ul>	
Other	None of amber or red symptoms     Associated with runny nose/cough with other family	<ul> <li>Difficulty opening mouth</li> <li>Absence of cough/coryza</li> <li>Age 3-6 months with temp ≥39° (102.2°F) with no clear focus of infection</li> <li>Fever for ≥ 5 days</li> <li>Additional parental/carer support required</li> <li>Lower threshold for face to face review if significant chronic co-morbidities</li> <li>Symptoms for &gt;72 hours and getting worse</li> </ul>	• Age 0-3 months with temp ≥38° (100.4°F)



Provide sore throat safety netting advice

Confirm they are comfortable with the decisions/ advice given

Always consider safeguarding issues

## **Amber Action**

Refer to primary care for review.

## **Red Action**

Refer immediately to emergency care – consider whether 999 transfer or parent/taxi most appropriate based on clinical acuity etc.

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