Step 1: **CENTOR criteria:**
(Determine risk of sore throat caused by **Group A Streptococcus** infection)
- Criteria: Fever, no cough, enlarged nodes, exudates on the tonsils.
- How to interpret results based on score (+1 for each criteria met):
  - 4: No swab needed, give antibiotics
  - 2 or 3: Swab patient, if positive, give antibiotics
  - 0 or 1: don’t swab patient
- Criteria can also be remembered using the mnemonic below:
  1. Cough absent (as in, No Cough)
  2. Exudates on tonsils
  3. Nodes enlarged, anterior cervical lymph nodes
  4. Temp > 100.4°F (fever)
  5. OR...+1 if age is < 15, OR, -1 if age is > 45

Step 2: Choose the correct treatment:
- Antibiotics: **Penicillin** or **Amoxicillin**
- Pain control: **Steroids** “turn pain off”
- (Consider Epstein Bar Virus Mononucleiosis: sore throat + splenomegaly → No sports!)

The 4 life threatening causes of sore throat:
1. Ludwig’s angina:
   - Infection under the tongue
   - Examine beneath the jaw, admit to ICU, treat with IV antibiotics
2. Peritonsillar abscess:
   - Trismus (cannot open the jaw)
   - Drain at bedside, discharge with antibiotics
3. Retropharyngeal abscess:
   - Infection in the back of the throat, inside the neck
   - Can extend into the mediastinum
   - Visible on lateral neck Xray
   - Establish airway, give antibiotics
4. Epiglottitis:
   - Triad: drooling, dysphagia, respiratory distress
   - Classically kids (but now adults, too)
   - “Thumbprint sign” on Xray