

ANMC Pediatric Ambulatory Guideline for Cervical Lymphadenitis

	Initial Management	Indication for Consultation with ENT
<p><u>Acute Unilateral</u> Usual presentation: tender swelling of neck lymph node >2 cm in size <u>AND</u> fever or redness/warmth of overlying skin Common organisms: <i>S. aureus</i>, Group A Strep, oral anaerobes if poor dentition</p>	<ul style="list-style-type: none"> ▪ Labs: <ul style="list-style-type: none"> ○ CBC with differential ○ CRP ○ Blood culture ▪ Radiology: <ul style="list-style-type: none"> ○ If fluctuant or size >6 cm, order same day ultrasound and consult ENT ▪ Clindamycin 10mg/kg/dose PO TID (max 600mg/dose) x10 days 	<ul style="list-style-type: none"> • Fluctuant • Size >6 cm • Failure to improve after >48-72h of clindamycin • <i>Afebrile, size >2 cm, <6 yo and without erythema/warmth of node (early concern for nontuberculous mycobacteria)</i>
<p><u>Subacute/Chronic Unilateral</u> Common organisms: Nontuberculous mycobacteria, Tuberculosis, <i>Actinomyces</i>, Cat Scratch Disease</p>	<ul style="list-style-type: none"> ▪ Labs: <ul style="list-style-type: none"> ○ CBC with differential, CRP, blood culture ○ Consider Quantiferon Gold blood draw 	<p>Consultation with ENT recommended</p>
<p><u>Bilateral</u> Common organisms: Viral URI, EBV, CMV, Group A Strep</p>	<ul style="list-style-type: none"> ▪ Labs: <ul style="list-style-type: none"> ○ CBC with differential, CRP, blood culture ○ Consider monospot or EBV antibody testing ○ If pharyngitis, consider Group A Strep PCR ▪ Radiology: <ul style="list-style-type: none"> ○ If fluctuant or size >6 cm, order same day ultrasound and consult ENT ▪ Observation with <u>no antibiotics</u> unless Group A streptococcal positive (See ANMC Group A Streptococcal Guideline for treatment options) 	<ul style="list-style-type: none"> • Fluctuant • Size >6 cm • Afebrile and pharyngitis not present • Failure to resolve after >2-4 weeks observation

REFERENCES: Feigin & Cherry's Textbook of Pediatric ID