

# Acute Sinusitis in Adults

Sinusitis CPM

## Diagnosis

**Purulent nasal discharge AND nasal obstruction or facial pressure**

no — Have the symptoms been present > 4 weeks — yes

**CONSIDER** subacute or chronic sinusitis; REFER to ENT

To diagnose acute bacterial sinusitis (ABS), the patient must fall into at least **ONE** of the following clinical presentation categories:

**SEVERE:** Temperature  $\geq 102.2$  °F (39 °C), facial pain/pressure, and purulent nasal discharge for 3 consecutive days

**PERSISTENT:** Purulent nasal discharge AND facial pain or nasal obstruction without improvement for  $\geq 10$  days

**WORSENING:** New or worsening sinusitis signs and symptoms AFTER initial improvement or following URI that has lasted  $\geq 7$  days

no — Does patient meet one of the 3 ABS presentations? — yes

Acute **VIRAL** sinusitis likely

Acute **BACTERIAL** sinusitis possible

**TREAT acute VIRAL sinusitis symptoms**

- **RECOMMEND** symptomatic therapy\*
- **INSTRUCT** patient to return if symptoms worsen or persist  $\geq 10$  days

**TREAT acute BACTERIAL sinusitis**  
(see page 2)

\*Symptom relief checklists  
Ages (12+) [English](#) / [Spanish](#)

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## Treatment of acute bacterial sinusitis

### Patient with acute bacterial sinusitis

DISCUSS symptom relief (see checklists<sup>†</sup>) and  
TREAT according to clinical presentation

SEVERE

PERSISTENT + WORSENING

#### ANTIBIOTICS\*

1st-line choice  
amoxicillin-clavulanate

2nd-line choice if no improvement  
doxycycline OR cefdinir

Watchful  
waiting  
only

Watchful waiting  
+ Delayed antibiotic  
prescription

INSTRUCT patient to contact doctor or  
fill delayed prescription if worse in 2–3  
days or if no improvement in 5–7 days

\* If patient is allergic to penicillin use  
doxycycline or cefdinir

<sup>†</sup>Symptom relief checklists  
Ages (12+) [English](#) / [Spanish](#)

#### ANTIBIOTICS for use if no improvement or worsens during watchful waiting period\*

1st-line choice

amoxicillin: 1000 mg orally 2 times per day for 7 days

2nd-line choice if no improvement

amoxicillin-clavulanate: 875 mg amoxicillin orally 2 times per day for 7 days

3rd-line choice if no improvement

doxycycline: 100 mg orally 2 times per day for 7 days

OR cefdinir: 600 mg orally once daily for 7 days

\* If patient is allergic to penicillin use doxycycline or cefdinir