

CONSIDER PEOPLE AT HIGH RISK

ACUTE RHEUMATIC FEVER

ARF can be subtle:

- FEVER and
- JOINT PAIN/
LIMITED RANGE
OF MOVEMENT
- HEART MURMUR
- CHOREA

If ARF is possible:

- Contact on call paediatrician,
cardiologist, physician to:
 - > expedite hospital admission
 - > consider alternative diagnoses
- Bloods (FBC ESR CRP ASOT AntiDNase B)
- ECG • CXR • Echocardiogram
- Throat/skin sore swab (Strep A culture)
- Antibiotics

**ALL SUSPECTED or CONFIRMED cases of ARF need HOSPITAL ADMISSION
for ONGOING ASSESSMENT and ECHOCARDIOGRAPHY**

ULN for serum streptococcal antibody titres

Age group (years)	ULN (U/ML)	
	ASO titre	Anti-DNase B titre
1 – 4	170	366
5 – 14	276	499
15 – 24	238	473
25 – 34	177	390
≥ 35	127	265

Anti-DNase B, antideoxyribonuclease B; ASO, antistreptolysin O;
ULN, upper limit of normal.

Upper limits of normal for P-R interval

Age group (years)	Seconds
3 – 11	0.16
12 – 16	0.18
17+	0.20