Provincial Rhinosinusitis Primary Care Clinical Pathway

1. Suspected Acute Rhinosinusitis

Nasal Obstruction or purulent nasal discharge / posterior nasal drainage
PLUS one or more additional PODS:
- **P**- Facial **P**ressure/**P**ain
- **O**- **O**bstruction and/or purulent nasal discharge
- **D**- **D**ischarge: Nasal Purulence / Discolored Posterior Nasal
- **S**- Loss of **S**mell (hyposmia/anosmia)

2. Red Flags
- Altered mental status
- Orbital swelling, redness and/or altered vision
- Neurologic or meningeal findings (e.g., cranial nerve palsy, meningitis)

Refer to Otolaryngology
Call RAAPID for on-call surgeon
Refer to ER or call 911
See referral guideline tab for details.

No Red Flags

Determine duration of symptoms

Less than 7 days

Greater than 7 days

Note: If four (4) or more episodes of acute rhinosinusitis per year requiring treatment, consider referral to Otolaryngology. (CT required for referral)

3. Conservative Management
(Likely viral at this stage)
- NSAIDs
- Consider topical decongestants (3 days maximum to prevent rebound inflammation)
- Saline nasal rinse
- Consider Intranasal corticosteroids

Clinical response after 72 hours?

Yes

No

Continue conservative management as necessary and follow up as required

4. Acute Rhinosinusitis
(Likely evolving into bacterial rhinosinusitis)

Ensure conservative management is initiated (#3). Assess for severity.

Mild/Moderate: Intranasal corticosteroids started?

No

Initiate intranasal corticosteroids

Clinical response after 72 hours?

Yes

Follow up as required

No

Yes but no clinical response after 72 hours

Severe: Intranasal corticosteroids and antibiotics

Clinical response after 72 hours?

Yes

Continue conservative management and follow up as required

No

Initiate second line antibiotics

Clinical response after 72 hours?

Yes

No

Consider specialist advice. See referral guideline tab for details Additionally, consider other contributing factors and/or immunosuppression.

5. Chronic Rhinosinusitis
(6 -12+ weeks of symptoms)

Assess for and confirm chronic rhinosinusitis by ordering a CT scan (referral within 3 months CT).
N.B. If access to CT >6 months, consider specialist advice.

Confirmed and 12+ weeks of symptoms

Continue conservative management while awaiting referral

7. Refer to Otolaryngology. See referral guideline tab for details

Not confirmed or results not definitive

6. Consider specialist advice. See referral guideline tab for details.

If no resolution of symptoms after 6 - 12+ weeks of conservative management, move to box 5 Chronic Rhinosinusitis