Current guidelines for pharyngitis only focus group A beta hemolytic streptococcus. Most guidelines do not distinguish etiology and strategy for different ages. Recent research has shown that pre-adolescent sore throats should focus primarily on group A beta hemolytic streptococcus. However, adolescents and young adults (approximately aged 15-30) have an expanded differential diagnosis.

For many years we have known that groups C and G beta hemolytic streptococci cause pharyngitis in this age group. Recently, a series of studies have identified *Fusobacterium necrophorum* as a cause of endemic pharyngitis in this age group. Our recent research showed that group A strep, group C or G strep, and *F. necrophorum* all present with similar clinical signs and symptoms. These findings suggest that we should think differently about pharyngitis in this age group.
Learning how to think like a clinician

The first responsibility in internal medicine comes with making the proper diagnosis. We cannot provide high quality care without first making the correct diagnosis.

Investigating diagnostic errors has shown that we make many errors due to heuristics and biases. Using patient presentation this talk will demonstrate the cognitive psychology behind several common types of diagnostic errors.

A new field of cognitive psychology has focused on the road to diagnostic excellence. Again using case presentations we will focus on how one teaches and learns diagnostic expertise.