Key questions to consider when assessing suspected respiratory diphtheria cases

Difficulty swallowing? Sore throat?
Changes in voice?
Upper airway obstruction? (Lower airway disease isn't typical of diphtheria)
Severity of illness – toxic appearing?
Pseudomembrane present?
Lymphadenopathy (swollen glands) in neck?
Stridor or wheezing?
Low grade fever? (High grade fever is not typical in diphtheria)
Unvaccinated or partially vaccinated (not up to date)?
Travel to areas with endemic disease within the prior 3 weeks?
On immunosuppressants?
Gram stain that reveals pleomorphic gram positive bacilli?
Rapid strep (group A Streptococcocus)?
Monospot (EBV)?
KOH prep (<i>Candida</i>)?
HIV?