

Understanding the Phase of Infection

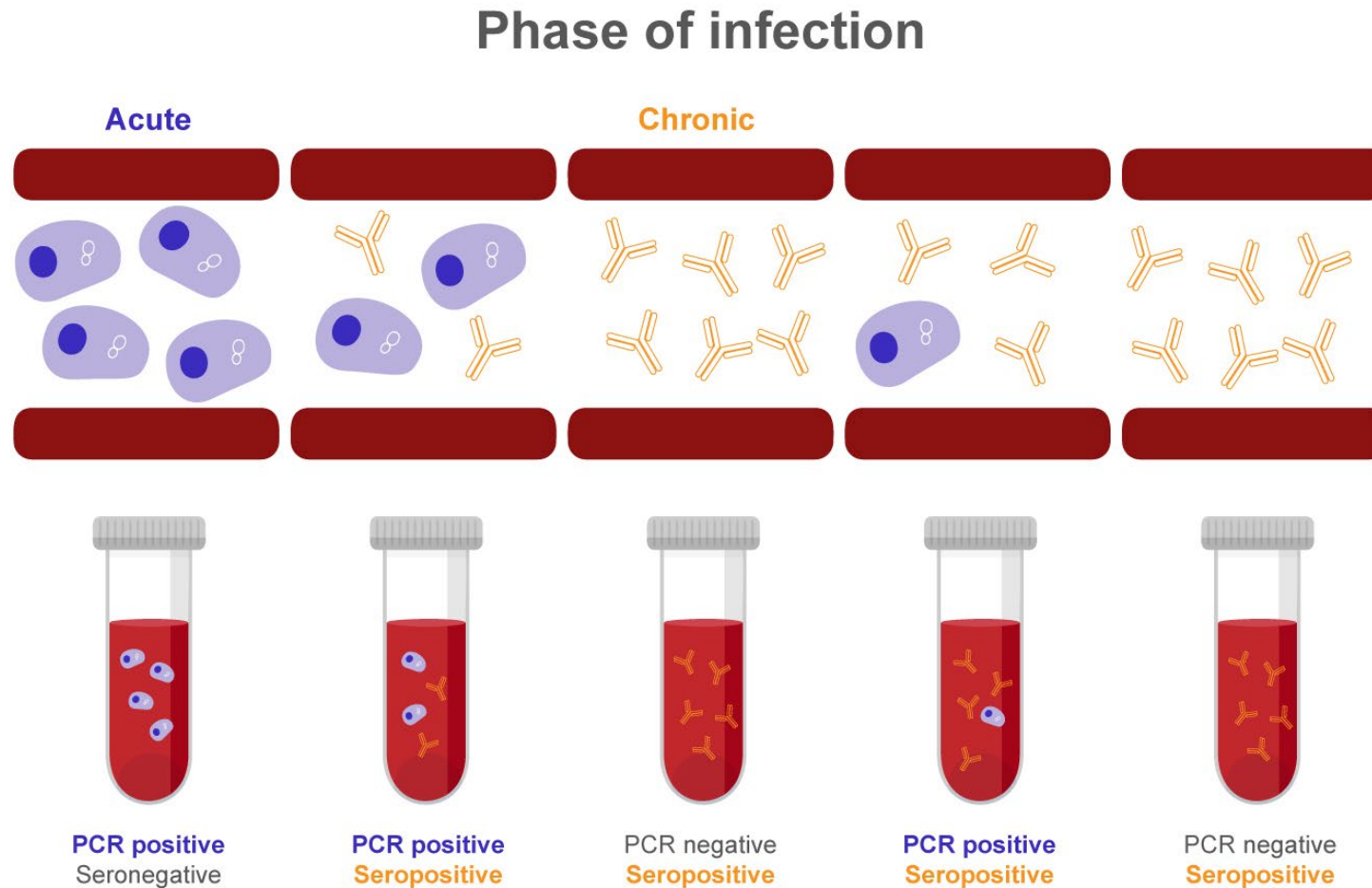
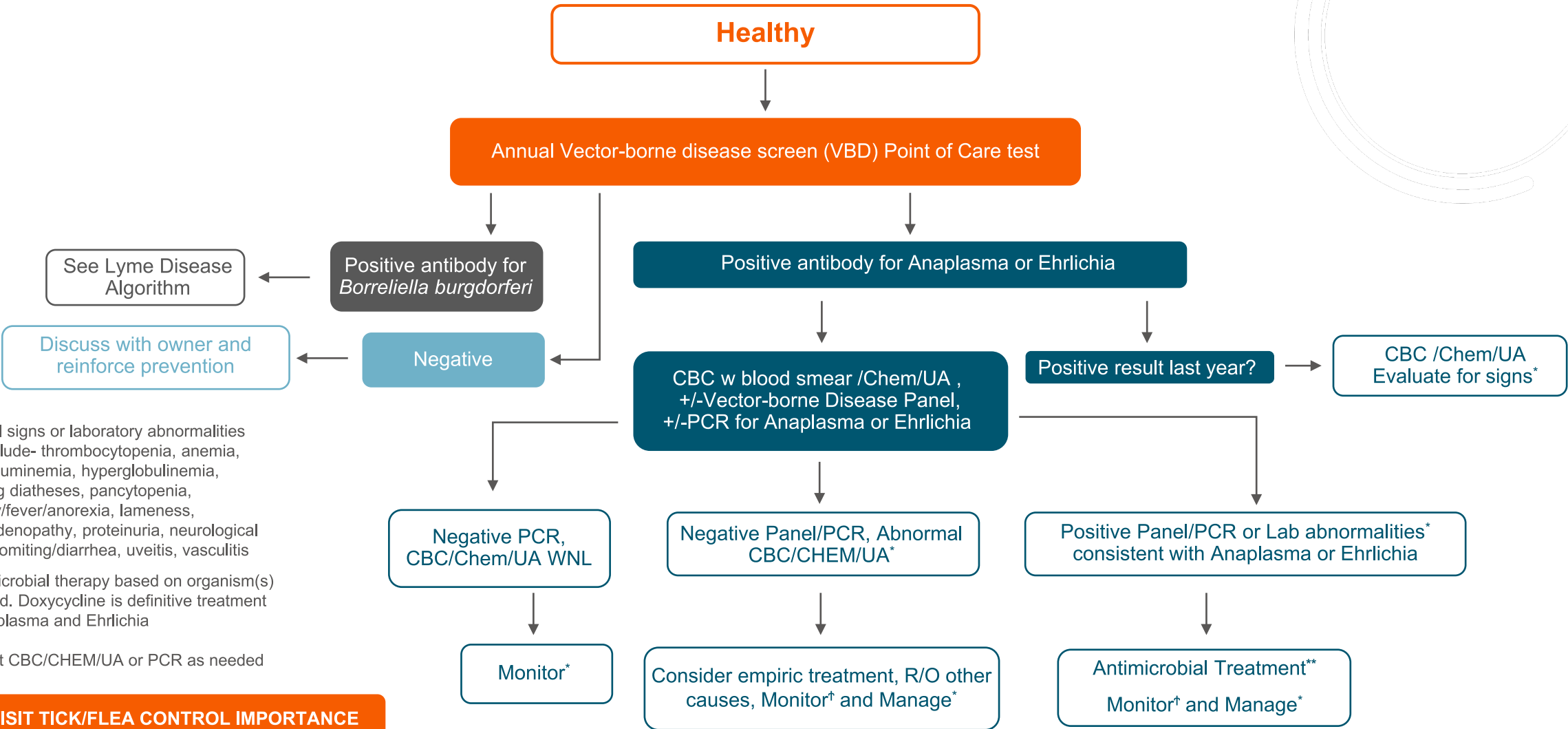


Fig. 1. Theoretical results of PCR and serologic testing for an organism that causes both acute and chronic infection.
(Courtesy of Linda Kidd, DVM, Phd, Pomona, CA.)

Canine Tick-Borne Disease (TBD) Diagnostic Algorithm



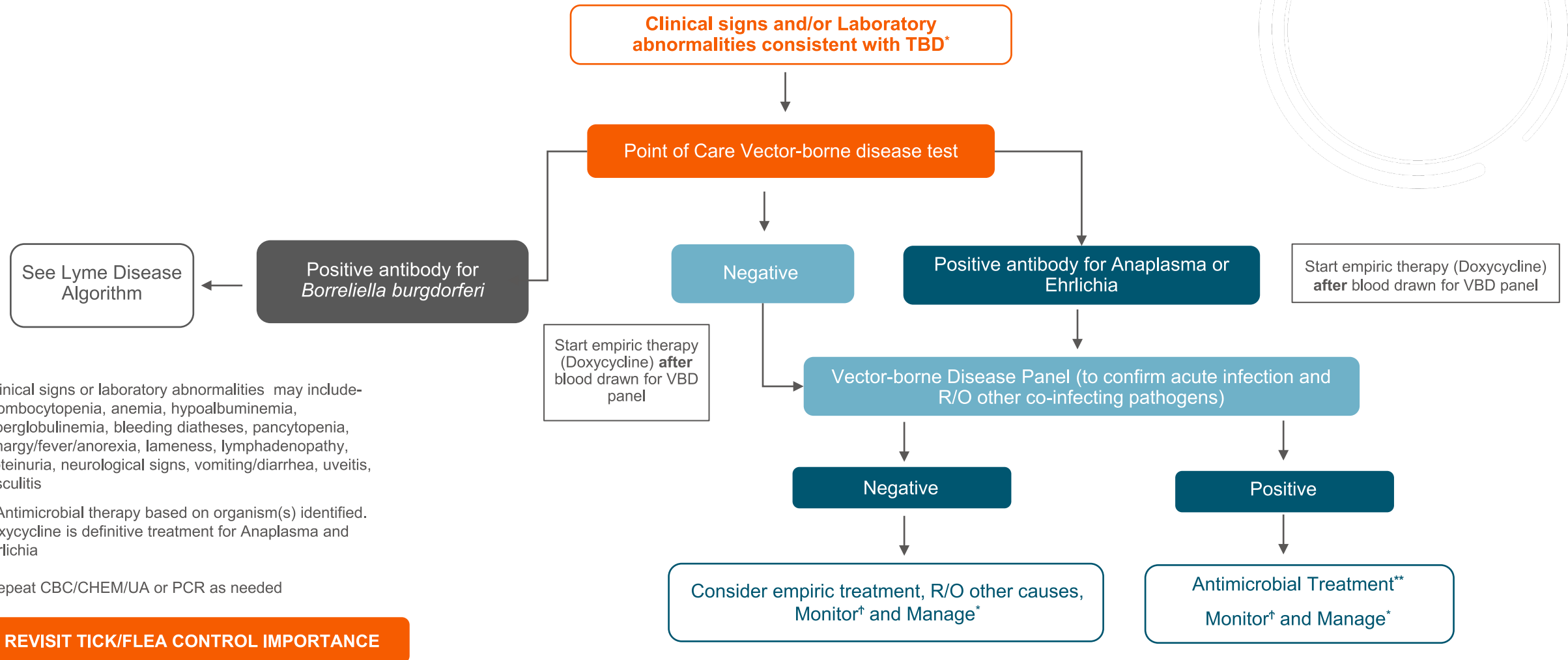
*Clinical signs or laboratory abnormalities may include- thrombocytopenia, anemia, hypoalbuminemia, hyperglobulinemia, bleeding diatheses, pancytopenia, lethargy/fever/anorexia, lameness, lymphadenopathy, proteinuria, neurological signs, vomiting/diarrhea, uveitis, vasculitis

**Antimicrobial therapy based on organism(s) identified. Doxycycline is definitive treatment for Anaplasma and Ehrlichia

†Repeat CBC/CHEM/UA or PCR as needed

REVISIT TICK/FLEA CONTROL IMPORTANCE

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Canine Positive Lyme Disease Screening Algorithm

Consider Vector-Borne Disease panel due to failure of tick/flea control

What if the dog is seropositive next year? May indicate re-exposure. Follow algorithm

LYME Seropositive

CLINICAL SIGNS: lameness, joint swelling, polyarthritis, protein-losing glomerulopathy?

Asymptomatic

UA and Urine Protein Creatinine Ratio

Negative

Follow UA/UPC 2–3 Times
+/- Antimicrobial Therapy

Positive

Antimicrobial Therapy
Follow UA/UPC in 2–3 wks
Quantitative Lyme test if remains Proteinuric after Treatment, see ACVIM reference for additional guidance.

Symptomatic

UA/UPC, Quantitative Lyme test,
Chemistry Panel Antimicrobial Therapy
+/- Repeat qC6 after Therapy
See ACVIM reference for additional guidance