**CIRD Diagnosis and Treatment**

**Effective Date:** 11/1/2021

**Responsible Staff:**
- Vet techs

**Purpose:** This SOP provides vet techs with a step-by-step procedure for diagnosis and treatment of dogs with canine infectious respiratory disease (CIRD) or “kennel cough”.

**CIRD Facts**
- CIRD is caused by a variety of viruses and some bacteria. Viruses are the most common cause.
- Typical clinical signs are sneezing, mucopurulent nasal and/or ocular discharge, and cough.
- CIRD pathogens are highly CONTAGIOUS and are spread by dog-dog contact, droplets emitted by sneezing, aerosols generated by coughing, and contact with pathogen-contaminated surfaces.
- Sick dogs must be promptly moved to Isolation to decrease spread of the pathogen(s) in the kennel.
- The pathogen(s) cannot be diagnosed by clinical signs. Diagnosis requires submission of nasal and pharyngeal swabs to Idexx for the Respiratory Pathogen PCR Panel.
- Diagnosis is not required for every sick dog but should be pursued for dogs with more severe disease, with prolonged disease, or when the numbers of sick dogs increase beyond the typical baseline.
- Start all sick dogs on doxycycline for primary and secondary bacterial infections. Dogs with more progressive disease, including pneumonia, will need additional supportive diagnostics and treatments.
- Shedding of most CIRD viral pathogens stops before day 14 post-infection which correlates with day 10 after onset of clinical signs. Dogs should remain in Isolation for at least 10 days and until clinical signs have resolved.

**Supplies Needed in Isolation**
- Disposable exam gloves
- Tyvek suit and rubber boots
- Thermometer and stethoscope
- Swabs and plain red top tubes
- Doxycycline tablets

**Procedures**
1. Promptly move dogs with sneezing, mucopurulent nasal and/or ocular discharge, or coughing to Isolation.
2. Wear clean exam gloves, Tyvek, and boots while in Isolation.
3. Perform a physical exam and record notes for entering into the dog’s medical record.
4. Collect a nasal swab and pharyngeal swab and place the tips of both swabs into a plain red top tube labeled with the dog’s ID number and date. Store the tube in the refrigerator pending veterinarian’s decision for submission to Idexx.
5. Start the dog on doxycycline 10 mg/kg PO SID for 10 days. and set up a treatment sheet.
7. Monitor attitude, appetite, and clinical signs daily during the morning medication rounds. Enter findings in the dog’s medical record.
8. **Schedule veterinarian recheck exam on day 10** for uncomplicated cases.
   a. If clinical signs have resolved, stop doxycycline and release from isolation unless instructed otherwise by the veterinarian.
   b. If clinical signs are still present, continue doxycycline and daily monitoring. Schedule veterinarian recheck exam when clinical signs resolve and before releasing from Isolation.

9. **Notify the veterinarian if the dog has fever (T>102.8), worsening cough or nasal discharge, labored breathing, lethargy, not eating, bleeding from nose or mouth**
   a. If not already done, collect a nasal and pharyngeal swab and submit to Idexx for the Respiratory Pathogen PCR Panel (test code 2524)
   b. Collect blood samples for CBC and chemistry panel
   c. Veterinarian may prescribe additional treatments such as SQ or IV fluids, addition of enrofloxacin or Simplicef antibiotics, and gabapentin for pain.
   d. Monitor the dog’s clinical condition BID
   e. Schedule veterinarian rechecks as needed
   f. If there is no response to treatment or condition worsens, transfer the dog to a hospital for more intensive care or consider humane euthanasia. If transferred to a hospital, notify the hospital that the dog is contagious so they can plan for biosecurity.
   g. If clinical signs resolve, release from Isolation on Day 10 or when instructed by the veterinarian.