

Heartworm Prevalence Study

RAVS is currently assisting Dr. J. Theis at the University of California, Davis with a study he is conducting on the prevalence of heartworm disease across the US. Our participation in this study will involve obtaining blood samples and data on the dogs we are treating during our clinics. The benefit to our patients is a free heartworm test. The following procedures will be followed to properly obtain and submit samples:

1. **Qualifications:** Only **dogs over 6 months of age** who are **admitted for surgery** will be tested.
2. **Consent/Questionnaire:** At intake, clients will be informed of the study and asked to complete a brief questionnaire (see attached). This information is **very important**, and samples can not be submitted without it. This form should be attached to the animal's medical record,
3. **Client Education:** Many clients have limited knowledge of heartworm disease, so use this time as an opportunity to discuss heartworms and other parasites with your clients. Important topics to cover include transmission (via mosquito), basic lifecycle (adult worms live in heart/lungs and do serious damage) and prevention/treatment (NOT treatable with general dewormers, preventative medication is available, treatment of infected dogs is possible, but can be expensive.)
4. **Test Results:** Clients should be informed that a blood sample will be obtained while the patient is under anesthesia and submitted for testing. Both an antigen and microfilaria test will be performed. The test will be completed in 1-2 weeks and telephone notification will be made **only for dogs testing positive**. Those with **negative tests will not be contacted**.
5. **Sampling:** The surgical team on each case will be responsible for obtaining a blood sample. Sample requirements are **3-5 ml of whole blood** in a lavender top (EDTA) tube. This tube should be **labeled** with the **date**, the patient and owner's **names** and the animal's clinic **identification number**.
6. **Packing:** Properly labeled tubes are immediately packaged in a styrofoam mailer **with the completed questionnaire** and placed in the appropriate shipping box.

**Remote Area Veterinary Service
Heartworm Questionnaire**

Animal # _____

Blood drawn at: _____ Date Sample Taken: _____
(Name of community)

Name of owner: _____

Address: _____
Street #

_____ Phone: (_____) _____
City State Zip Area code Number

Name of Dog : _____

Age: _____ Male: _____ Female: _____ Neutered: _____

Breed: _____

Check those that best describe the management for this dog:

- Outdoors during the night _____
- Outdoors during the day _____
- Always outdoors _____
- Indoors during the night _____
- Indoors during the day _____
- Always indoors _____

Has the dog traveled out of the city of residence? Yes _____ No _____

If yes, where else has the dog lived?: _____

Did this dog move to above address from another area? Yes _____ No _____

If yes, where else had dog lived? _____

Is this dog on heartworm prevention medication? Yes _____ No _____

Do you use flea control products on your dog regularly? Yes _____ No _____

Symptoms present at the time blood sample drawn: _____

Date of last negative heartworm test: _____

Any additional comments: _____

Mail Sample & Questionnaire To: J. H. Theis, DVM, Ph.D.
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