SUPPLEMENTAL FIGURE 16: Diagnostic Work-up of FIP: Diagnostic Approach Ila

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FIP: diagnostic approach IIb

Looking for evidence that confirms FIP as a diagnosis following a high suspicion:

**Neurological findings consistent with FIP**
- In absence of any non-neurological signs or abnormalities that allow sampling of alternative sites, advanced imaging via CT, or preferably MRI, is indicated. Imaging allows for evaluation for neurological system abnormalities & to assess for any potential risk of herniation if subsequent CSF collection is planned.

**Aqueous humor cytology consistent with FIP**
- Aqueous humor sample analysis:
  - FCoV RT-PCR &/or immunocytochemistry for FCoV antigen

- If still suspicious of FIP, continue monitoring for non-neurological changes as abnormalities can develop over time, which can then be sampled for diagnosis by either FNA, trucut or full biopsy

- FIP unlikely
- FIP very likely

- Positive FCoV RT-PCR with high FCoV RNA loads &/or positive immunocytochemistry for FCoV antigen

- FIP unlikely

- Histopathology consistent with FIP & immunohistochemistry positive for FCoV antigen

- FIP very likely

- Confirm FIP

-届毕业生 authors regard a positive immunocytochemistry test for FCoV antigen on a CSF sample (with biochemical & cytology consistent with FIP) adequate to confirm a diagnosis of FIP

- In absence of any non-neuroophthalmological signs or abnormalities that allow sampling of alternative sites, collection of an aqueous humor sample may be indicated

- Referral may be indicated for these procedures if vet is unfamiliar with neurological investigations.

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Image courtesy of European Advisory Board on Cat Diseases

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