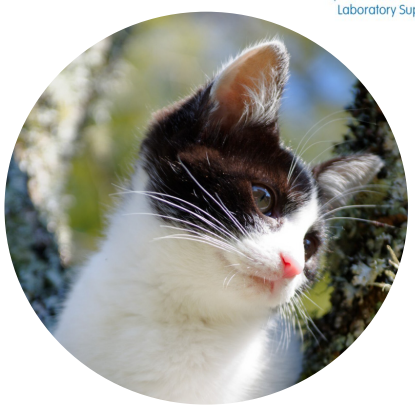
FLASH VetID™ B. bronchiseptica

The cough that spreads through every kennel



Fast test for the qualitative detection of DNA of Bordetella bronchiseptica in conjunctival, nasal, and oropharyngeal swabs of the cat and dog.

35 minutes	Detects bacterial DNA	Room temperature	12 months
TOTAL ASSAY TIME	TEST	STORAGE	SHELF LIFE (FROM MFG)

Aids in antibiotic course duration decision

Sensitivity 92.59% & specificity 99.33% (n=324)

Sample: Oropharyngeal swab (essential); add a nasal swab if respiratory secretions are present

Clinical suspicion:

- Dogs: paroxysmal, harsh "goose-honk" cough, often retching to a foamy end-point
- Dogs: recent boarding, grooming, training class or shelter exposure
- Cats: sneezing, oculonasal discharge, occasional fever, and submandibular lymphadenopathy
- Puppies/kittens or immunocompromised animals: progression to bronchopneumonia, dyspnoea, lethargy
- Outbreak of respiratory signs across a kennel, shelter or multi-pet household

Screening / prevention programs:

- Pre-boarding, pre-grooming, and pre-show screening in high-turnover facilities
- New arrivals into shelters and kennels before group housing
- Outbreak investigation to confirm *Bordetella* involvement before committing to isolation and disinfection protocols in a kennel or shelter
- Post-vaccination breakthrough cases where kennel cough persists despite vaccination



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The Pathogen and Transmission

Bordetella bronchiseptica is a small, Gram-negative, aerobic coccobacillus that adheres to and colonises the cilia of the respiratory epithelium. It is distributed worldwide and spreads efficiently by aerosol and direct contact, making densely housed populations (e.g., boarding kennels, shelters, training classes, multi-pet households) the classic setting for outbreaks. Low-level zoonotic transmission has been reported, chiefly in immunocompromised people.

Species-Specific Manifestations

In dogs, *B. bronchiseptica* produces a characteristic paroxysmal, harsh cough ("kennel cough") that owners often mistake for choking or a foreign body. Illness in healthy adults is usually self-limiting, resolving within one to three weeks. Puppies, brachycephalic breeds, and unvaccinated dogs can progress to bronchopneumonia with fever, lethargy, and inappetence. In cats, infection more often causes upper respiratory signs – sneezing and oculonasal discharge, occasionally with fever and submandibular lymphadenopathy – with pneumonia occasionally developing in kittens.

The Diagnostic Value Proposition

Culture takes 48–72 hours and is less sensitive than molecular methods, particularly after antibiotic pre-treatment or in chronic carriers shedding at low levels. Nucleic-acid detection by FLASH VetID™ B. bronchiseptica is faster and more sensitive, allowing an isolation decision at first presentation rather than waiting on a send-out culture result. Yet, sampling and testing before antibiotic treatment is recommended.

+ Positive Result

Confirms presence of *B. bronchiseptica* DNA. The animal should be isolated from other dogs/cats per your infection-control protocol, and antimicrobial therapy considered based on clinical severity.

– Negative Result

Makes active *B. bronchiseptica* infection unlikely at the sampled site.

Gold-standard confirmation

For outbreak characterisation or antimicrobial susceptibility testing, confirm with laboratory culture and sensitivity alongside qPCR.

Differential diagnostics

In dogs, a cough that fails to resolve with *Bordetella*-directed treatment warrants considering other infectious agents, and non-infectious causes such as tracheal collapse, chronic bronchitis, or cardiac disease. In cats, consider testing in parallel with FLASH VetID™ FCV, FLASH VetID™ FHV, FLASH VetID™ C. felis, and FLASH VetID™ M. felis.