



Overview/description

We're all ears! – Answering some of the most common questions about long-acting otic solutions for canine otitis externa.

Canine otitis externa is a common and frustrating condition for owners, veterinarians, and patients alike. In this talk, Dr. O'Shaughnessy-Hunter will discuss tips for selecting appropriate otic solutions to treat active infections and review the three Ps of otitis externa to help prevent recurrence. The session will conclude with an interactive Q&A session, where Dr. O'Shaughnessy-Hunter will address some of the most common questions regarding long-acting otic solutions and how to incorporate them into your practice to improve patient outcomes and client satisfaction.

Speaker's bio and credentials



Laura O'Shaughnessy-Hunter, BSc., DVM, MSc., Dipl. ACVD

Dr. O'Shaughnessy-Hunter graduated from the Ontario Veterinary College in 2014. After three years in general practice, she completed a rotating internship at the Atlantic Veterinary College followed by a 3-year dermatology residency at Veterinary Allergy Dermatology & Ear referral (VADER) clinic just outside of Guelph, ON. She became a diplomate of the American College of Veterinary Dermatology in 2021 and continues to practice at VADER. Dr. O'Shaughnessy-Hunter is passionate about educating clients and fellow veterinary team members on all aspects of veterinary dermatology to help improve the quality of life of pets with skin

disease. In her spare time, Dr. O'Shaughnessy-Hunter enjoys spending time with her husband and two young children, as well as hiking with her Brittany Spaniel and Aussidoodle.



Questionnaire

- 1. The most important diagnostic tool to determine which otic preparation is most suitable for canine otitis externa is:**
 - Culture
 - Cytology
 - Otoscopic exam
 - Allergy testing
- 2. Canine ear infections are always secondary to an underlying primary cause.**
 - True
 - False
- 3. All of the following are primary causes of canine otitis externa except for:**
 - Food or environmental allergies
 - Swimming
 - Aural mass
 - Hypothyroidism
- 4. A 12-year-old neutered male Shih Tzu presents for evaluation of bilateral ear scratching and discharge. On cytology, you find too numerous to count cocci/OIF bilaterally. The owner notes that she cannot medicate the patient's ears at home. What is the most appropriate treatment?**
 - Prescribe a course of amoxicillin/clavulanate acid 12.5mg/kg twice daily for 10 days
 - Perform a culture and prescribe oral antibiotics based on culture and sensitivity results
 - Instill a dose of long-acting otic solution containing florfenicol, mometasone furoate and terbinafine in each ear in clinic
 - Prescribe a course of an ear solution of polymyxin B, prednisolone and miconazole to be given twice daily for 7 days.
- 5. True or false: Whenever possible, all dogs with atopic dermatitis and a history of recurrent otitis externa should be prescribed long-term preventative topical steroid ear drops once to twice weekly in the affected ears to prevent recurrence.**
 - True
 - False



6. You recheck a 4-year-old spayed female Poodle in whom you instilled a dose of a long-acting otic solution containing florfenicol, mometasone furoate, and terbinafine into both ears 4 weeks prior. The owner notes that there was some initial improvement, but the ears worsened again within 1–2 weeks. Why did this treatment likely fail?
- The patient has Pseudomonas otitis externa
 - The patient has otitis media which is perpetuating the infection
 - The patient has a mass in the horizontal canal
 - All of the above are possible causes for treatment failure
7. True or false: Erythroceruminous otitis externa can often resolve with topical steroid treatment alone.
- True
 - False
8. What is the most common primary underlying cause of canine otitis externa?
- Otodectes cynotis
 - Allergies (food or environmental)
 - Foreign bodies
 - Cushing's disease
9. A 2-year-old neutered male German Shepherd presents with unilateral ear pruritus, pain, and copious black, sticky discharge. On cytology, you see high numbers of rod-shaped bacteria inside inflammatory cells. What is the most likely pathogen?
- Staphylococcus pseudintermedius
 - Malassezia pachydermatis
 - Pseudomonas aeruginosa
 - Otodectes cynotis
10. Which of the following is considered the most appropriate first-line topical antibiotic when cocci are seen on cytology?
- Polymyxin B
 - Marbofloxacin
 - Miconazole
 - Florfenicol



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PERSONAL INFORMATION:

First name:

Last name:

Type:

(Veterinarian, Technician)

Licence number:

Province where you practise:

Email:



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CERTIFICATE OF COMPLETION

Educational webcast

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Presented by

Laura O'Shaughnessy-Hunter, BSc., DVM, MSc., Dipl. ACVD

This document confirms that

Dr. Lorem Ipsum

has viewed the above-mentioned webcast and has answered and submitted the questionnaire meant to evaluate the understanding of the content.

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