



2026

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# WORLD CLASSIC

CELEBRATING THE CHAMPIONS OF CARE

**VMX**  
VETERINARY MEETING & EXPO



# Old dogs, new tricks: Canine hematology secrets

Fred L. Metzger DVM, MRCVS, DABVP

Dennis B. DeNicola DVM, PhD, DACVP

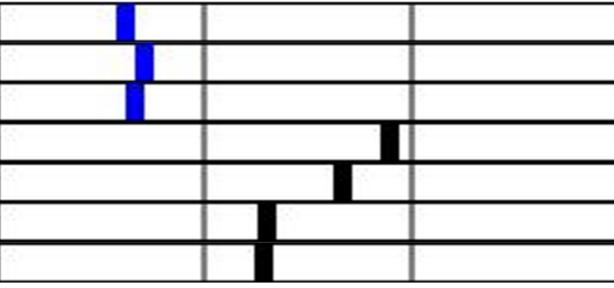
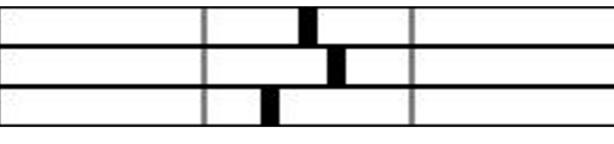
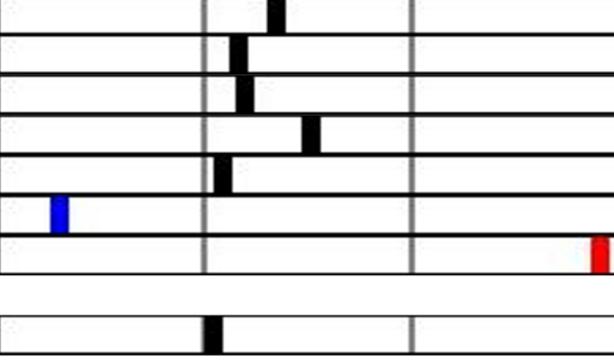
Alan H. Rebar DVM, PhD, DACVP

## **Conflict of Interest Disclosure:**

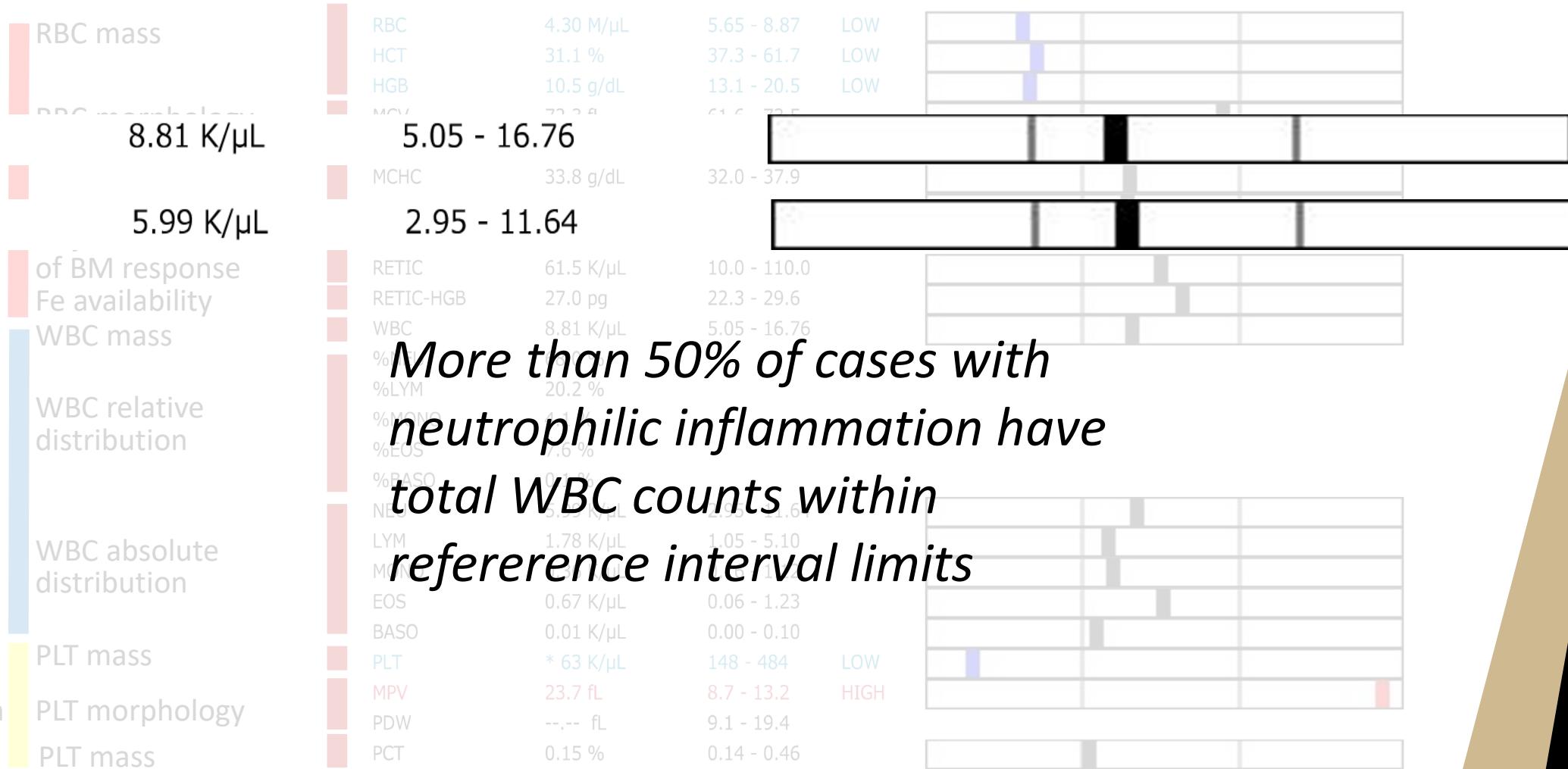
We have financial interest, arrangement or affiliation with:

<b>Speaker</b>	<b>Name of Organization</b>	<b>Relationship</b>
Fred Metzger	IDEXX	Speaker
Dennis B. DeNicola	IDEXX	Speaker

# Complete Blood Count

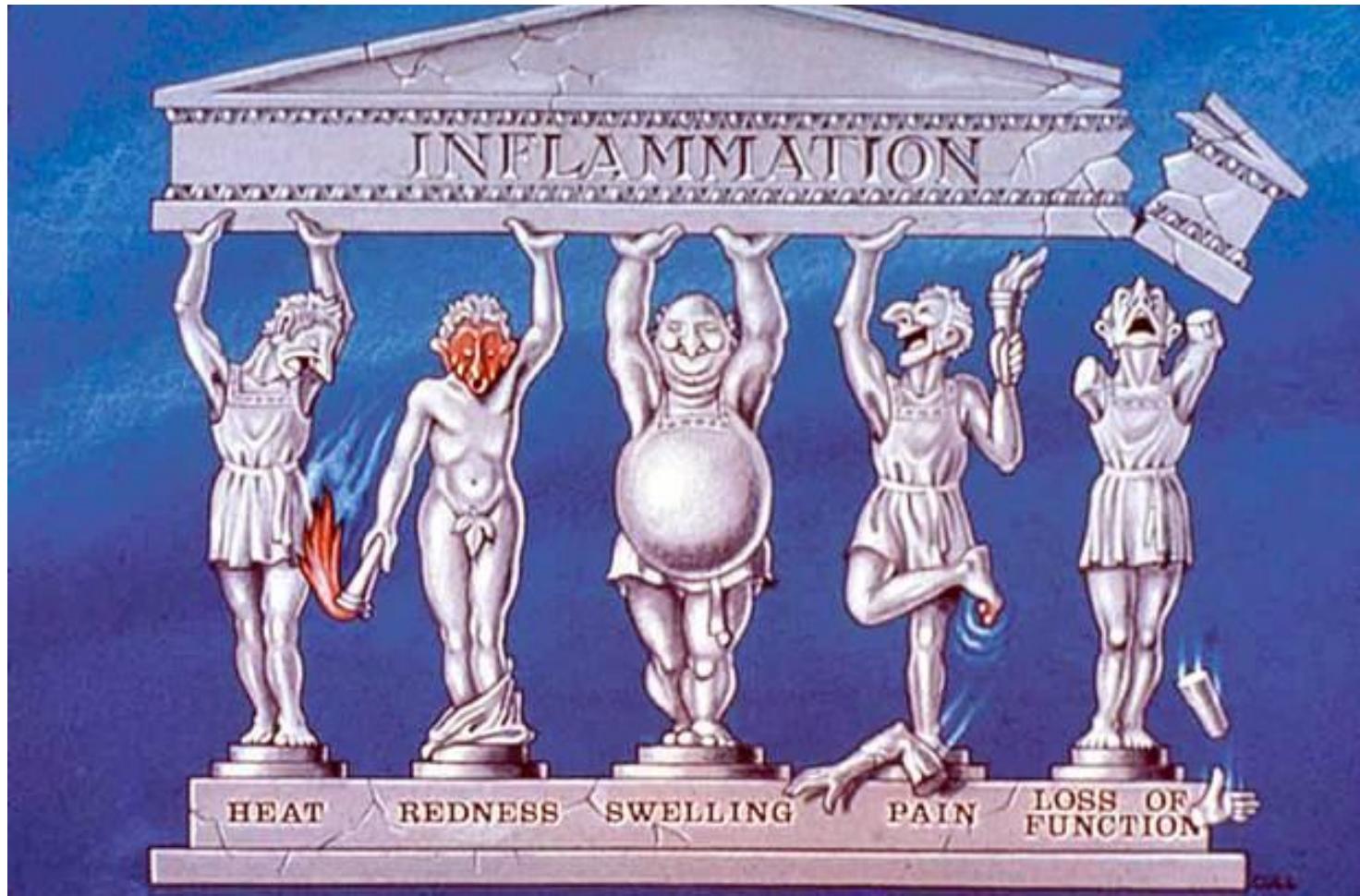
Erythrogram	RBC mass	RBC	4.30 M/ $\mu$ L	5.65 - 8.87	LOW	
	RBC morphology	HCT	31.1 %	37.3 - 61.7	LOW	
	Objective measure of BM response	HGB	10.5 g/dL	13.1 - 20.5	LOW	
	Fe availability	MCV	72.3 fL	61.6 - 73.5		
Leukogram	WBC mass	MCH	24.4 pg	21.2 - 25.9		
	WBC relative distribution	MCHC	33.8 g/dL	32.0 - 37.9		
	WBC absolute distribution	RDW	16.0 %	13.6 - 21.7		
	PLT mass	%RETIC	1.4 %			
Thrombogram	PLT morphology	RETIC	61.5 K/ $\mu$ L	10.0 - 110.0		
	PLT mass	RETIC-HGB	27.0 pg	22.3 - 29.6		
		WBC	8.81 K/ $\mu$ L	5.05 - 16.76		
		%NEU	68.0 %			
		%LYM	20.2 %			
		%MONO	4.1 %			
		%EOS	7.6 %			
		%BASO	0.1 %			
		NEU	5.99 K/ $\mu$ L	2.95 - 11.64		
		LYM	1.78 K/ $\mu$ L	1.05 - 5.10		
		MONO	0.36 K/ $\mu$ L	0.16 - 1.12		
		EOS	0.67 K/ $\mu$ L	0.06 - 1.23		
		BASO	0.01 K/ $\mu$ L	0.00 - 0.10		
		PLT	* 63 K/ $\mu$ L	148 - 484	LOW	
		MPV	23.7 fL	8.7 - 13.2	HIGH	
		PDW	--- fL	9.1 - 19.4		
		PCT	0.15 %	0.14 - 0.46		

# Complete Blood Count



*More than 50% of cases with neutrophilic inflammation have total WBC counts within reference interval limits*

# Clinical signs of inflammation



Calore

Rubor

Tumor

Dalore

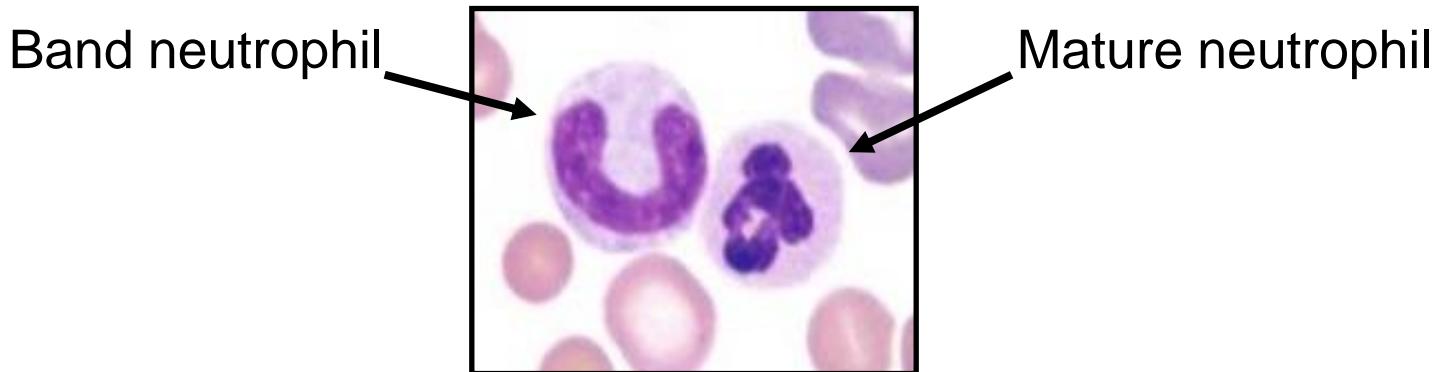
# Old dogs, old tricks

- Identification of band/immature neutrophils - blood cell morphology
- Cytograms/dot plots

# Old dogs, old tricks

- Definitions

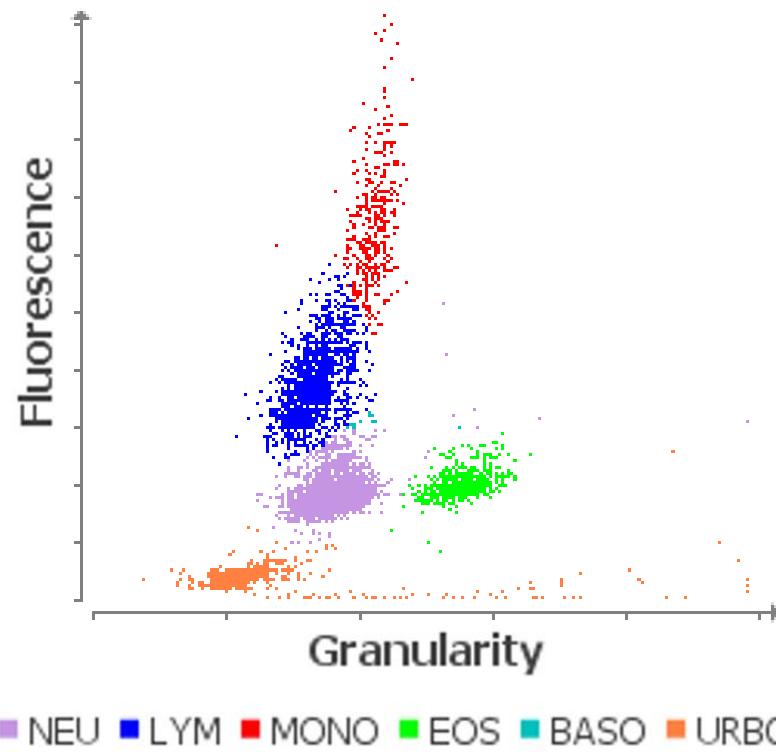
- A neutrophil with a “horseshoe-shaped” nucleus with parallel-sided nuclear membranes
  - “Slight” nuclear indentations are acceptable



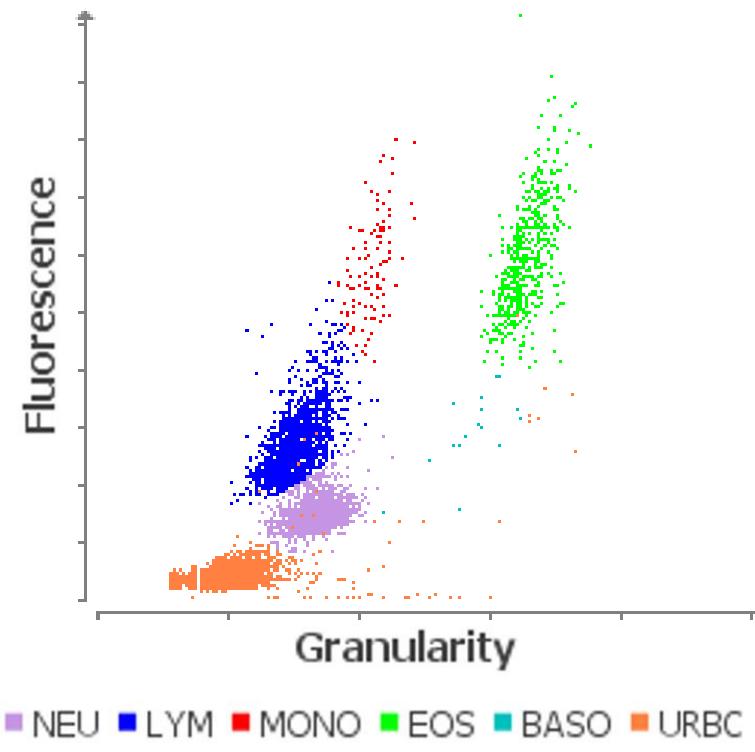
*The immature neutrophil is the “hallmark” of inflammation*

# Normal Canine and Feline WBC Dot Plots

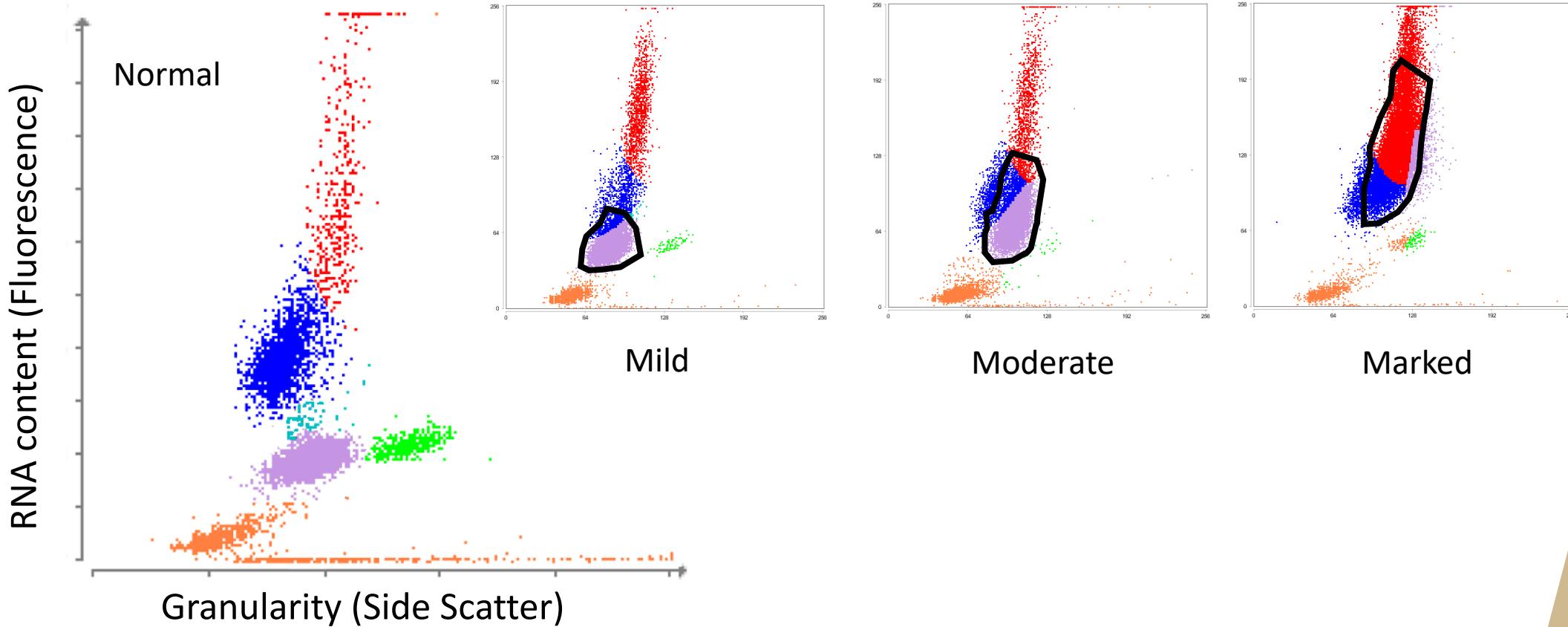
Normal WBC Dot Plot (Canine)



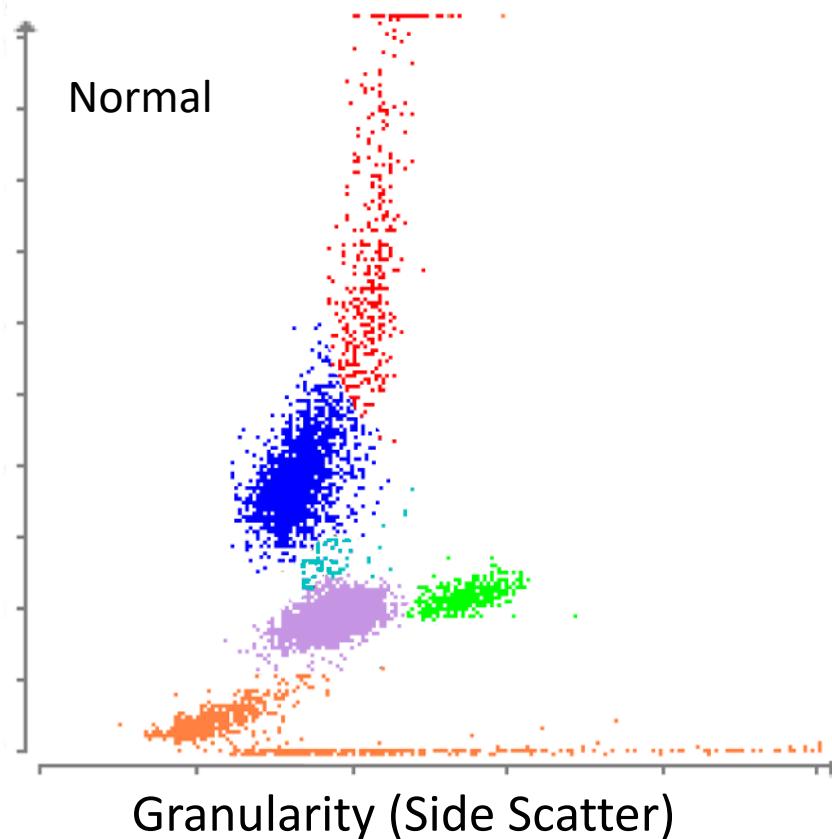
Normal WBC Dot Plot (Feline)



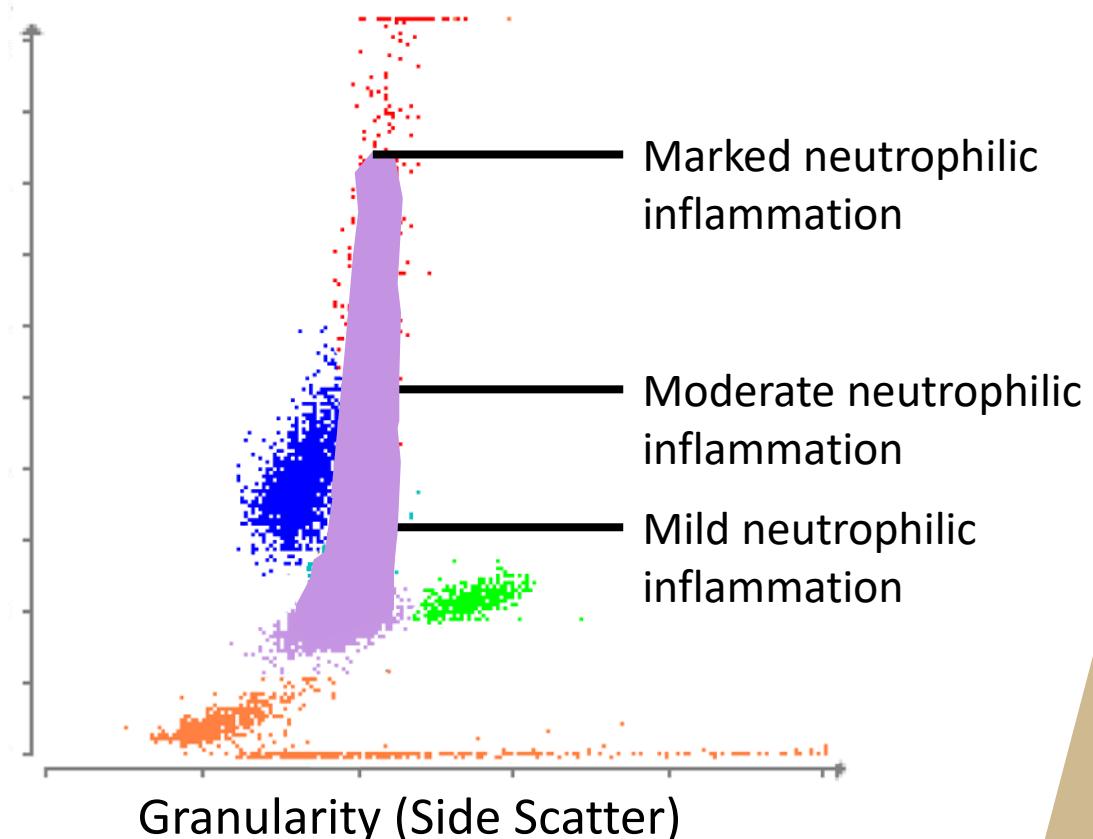
# Immature and/or toxic neutrophils



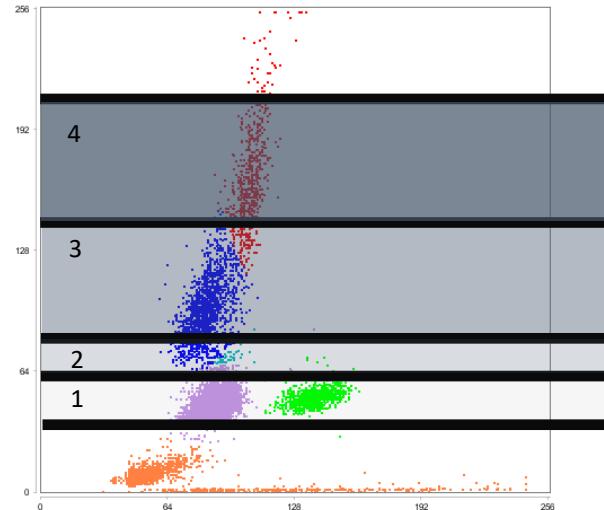
# Immature and/or toxic neutrophils



## Immature and/or toxic neutrophils

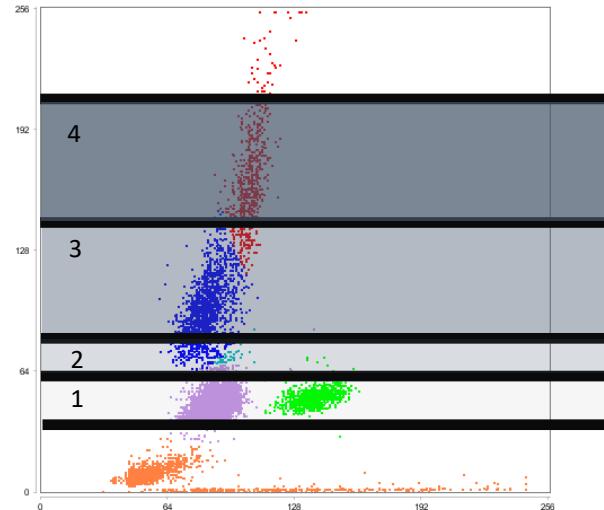


# Degree of immature / toxic neutrophils



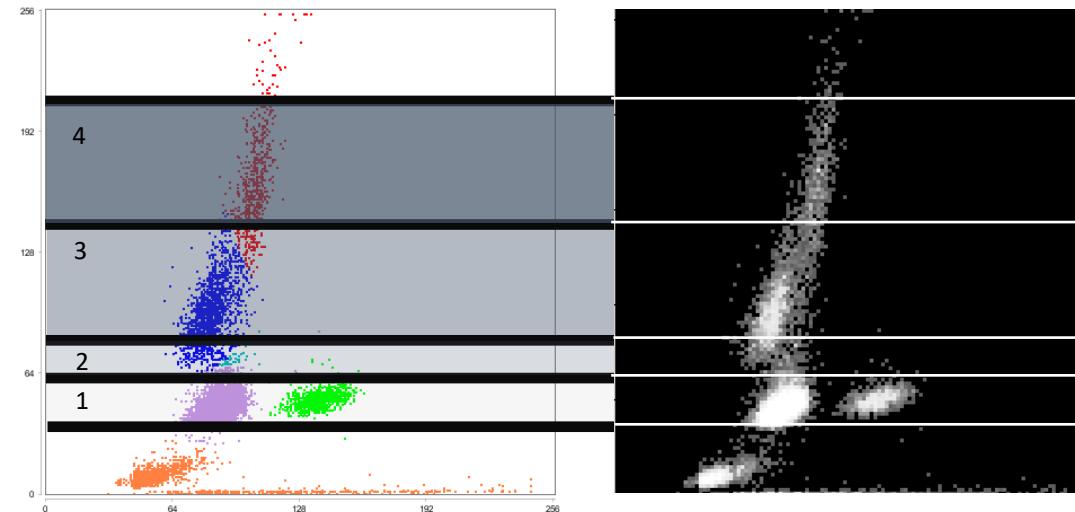
- 4 - Marked inflammation
- 3 - Moderate inflammation
- 2 - Minimal to mild inflammation
- 1 - Normal

# Degree of immature / toxic neutrophils



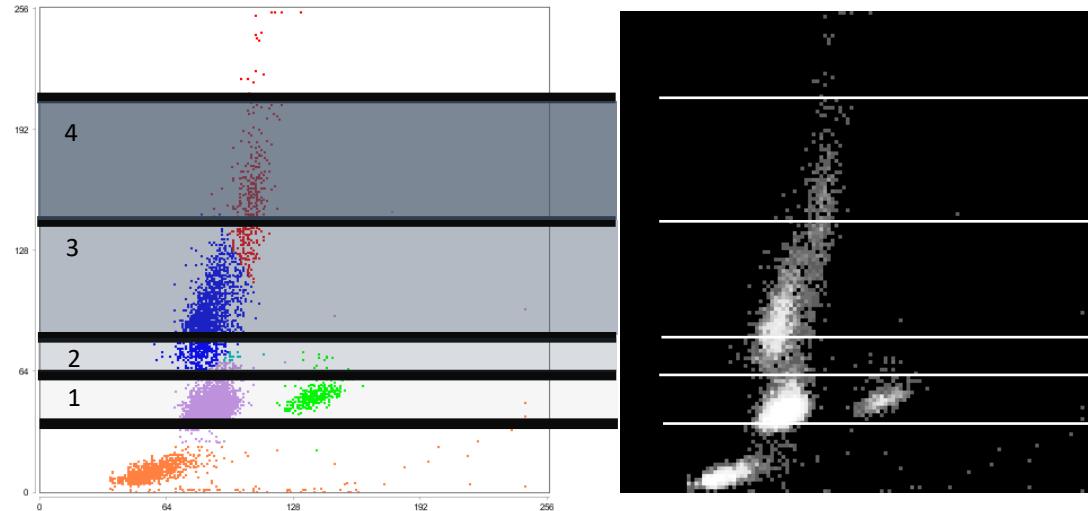
- 4 - Marked inflammation
- 3 - Moderate inflammation
- 2 - Minimal to mild inflammation
- 1 - Normal

# Degree of immature / toxic neutrophils



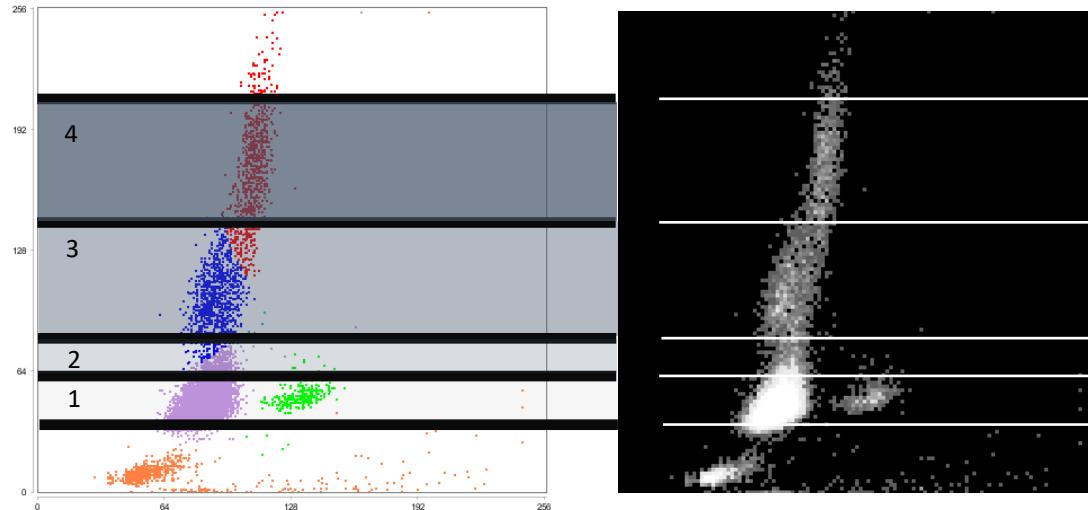
- 4 - Marked inflammation
- 3 - Moderate inflammation
- 2 - Minimal to mild inflammation
- 1 - Normal

# Canine – Ziggy



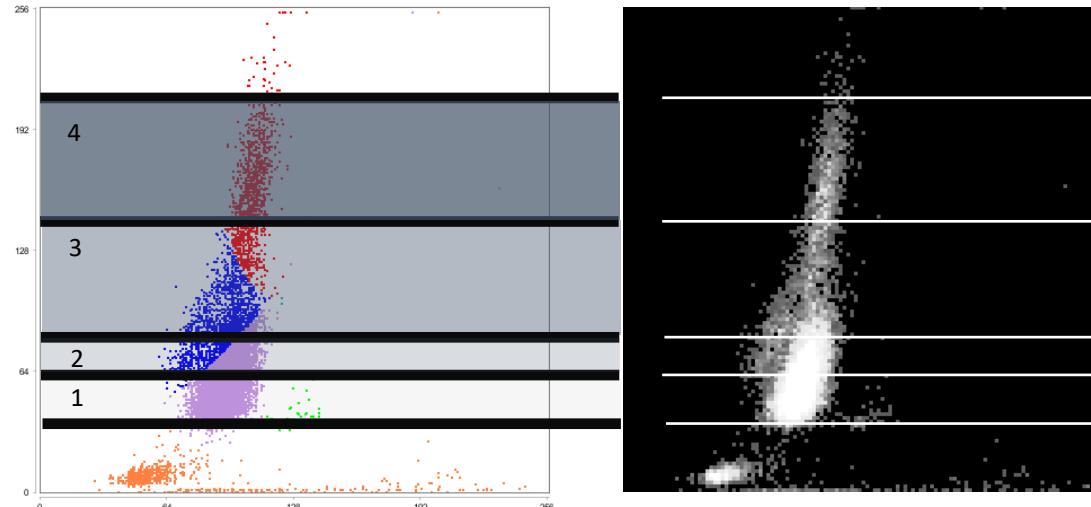
- 4 - Marked inflammation
- 3 - Moderate inflammation
- 2 - Minimal to mild inflammation
- 1 - Normal

# Canine – Sampson – Mild



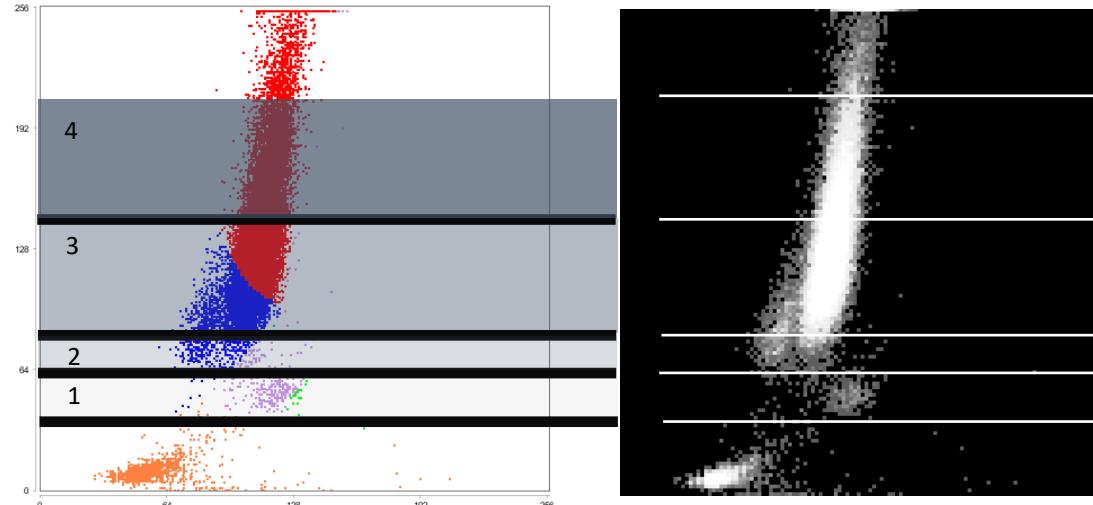
- 4 - Marked inflammation
- 3 - Moderate inflammation
- 2 - Minimal to mild inflammation
- 1 - Normal

# Canine – Lily – Moderate



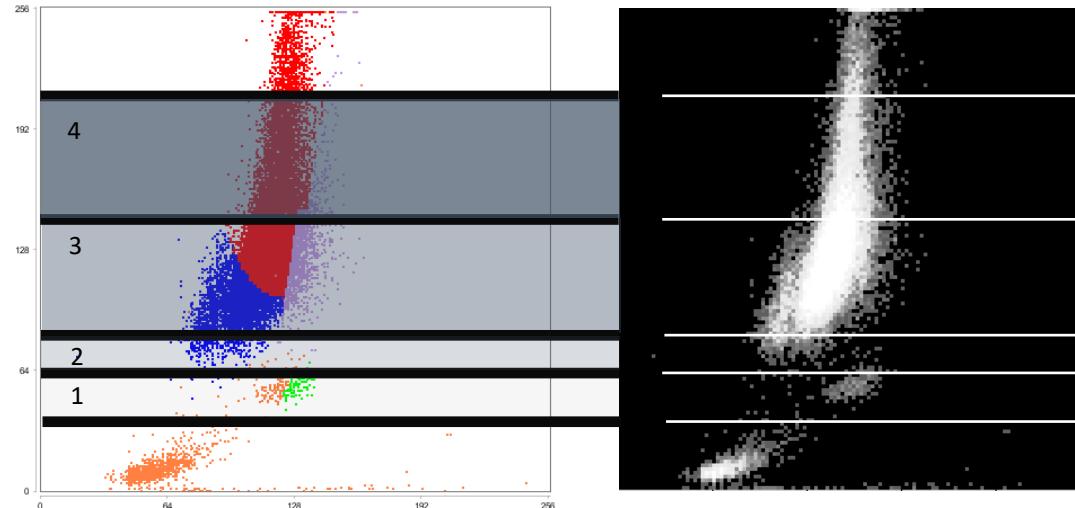
- 4 - Marked inflammation
- 3 - Moderate inflammation
- 2 - Minimal to mild inflammation
- 1 - Normal

# Canine – Penny -Marked



- 4 - Marked inflammation
- 3 - Moderate inflammation
- 2 - Minimal to mild inflammation
- 1 - Normal

# Canine – Duke 2-Marked

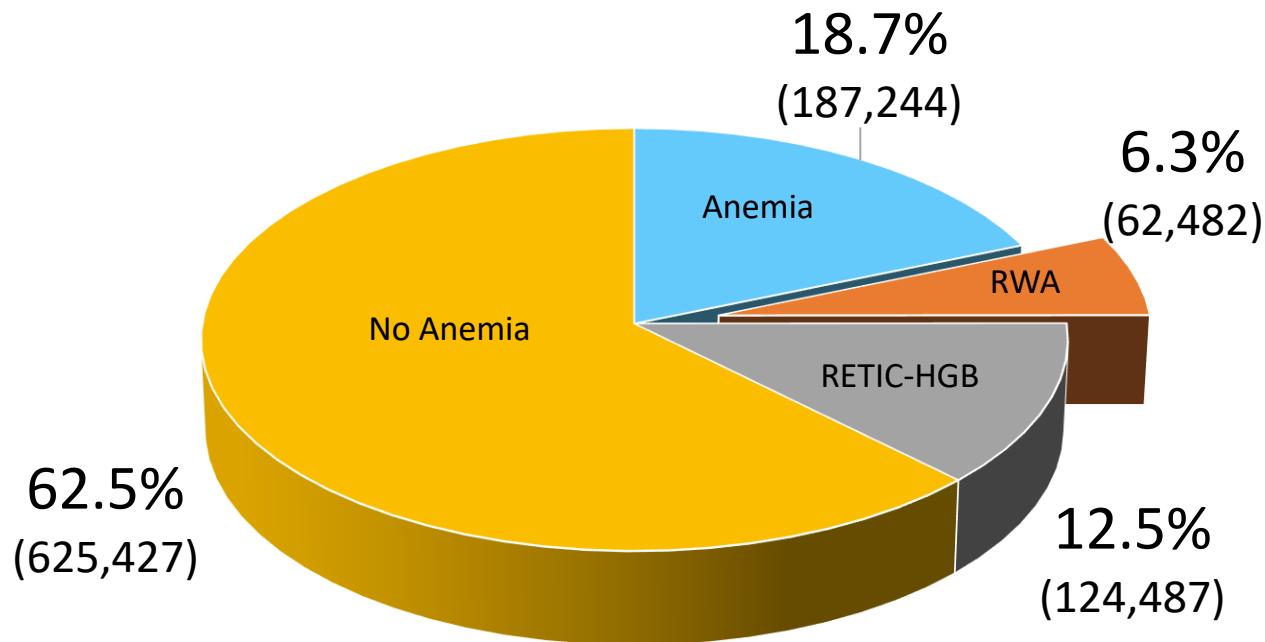




# New Tricks from Old Dogs

- Absolute Reticulocyte Count

# The value of reticulocytes



- Reticulocytosis without anemia (RWA):
  - Potential for identifying underlying and possibly occult serious disease
  - “Compensated” hemolytic or blood loss disease

Data analysis based on 1,000,000 CBCs randomly collected from the global field of ProCyte Dx® Hematology Analyzers in 2017.

# New Tricks from Old Dogs

- Absolute Reticulocyte Count
- Reticulocytes without anemia (RWA)
- Reticulocyte Hemoglobin

# Iron Deficient vs Iron Limited RBC Production



Normal Iron Delivery

Normocytic  
Normochromic

Inflammation



Limited Iron Delivery

Small RETICs with less  
hemoglobin

Chronic blood loss



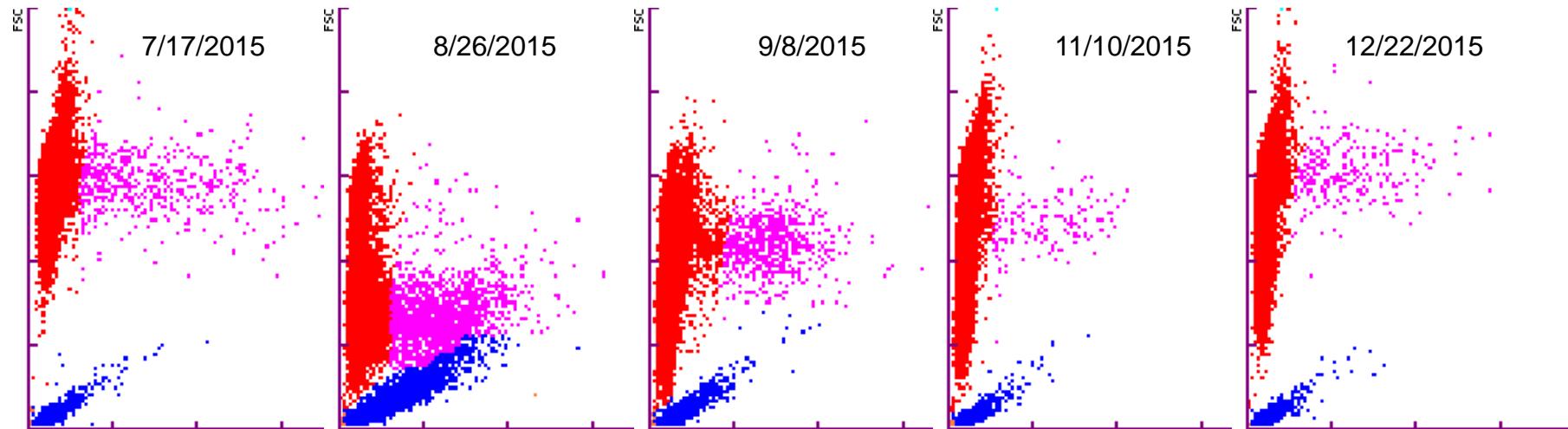
Deficient Iron Delivery

Small RETICs with less  
hemoglobin

Potential microcytosis and  
hypochromasia with  
longstanding inflammation

Eventual microcytic  
and hypochromic RBCs

# Maxi: Serial dot plots and RETIC-HGB



Date	07/17/15	08/26/15	09/08/15	11/10/15	12/22/15
HCT (%) (37.3 – 61.7)	41.1	11.2	25.4	25.4	41.6
MCV (fL) (61.6 – 73.5)	65.9	40.7	44.7	52.2	60.3
RETIC (K/ $\mu$ L) (10 – 110)	141.6	239.5	171.0	51.11	72.5
RETIC-HGB (pg) (22.3 – 29.6)	25.1	13.0	17.5	19.6	26.7

# New Tricks from Old Dogs

- Absolute Reticulocyte Count
- Reticulocytes without anemia (RWA)
- Reticulocyte Hemoglobin
- CRP-C Reactive Protein

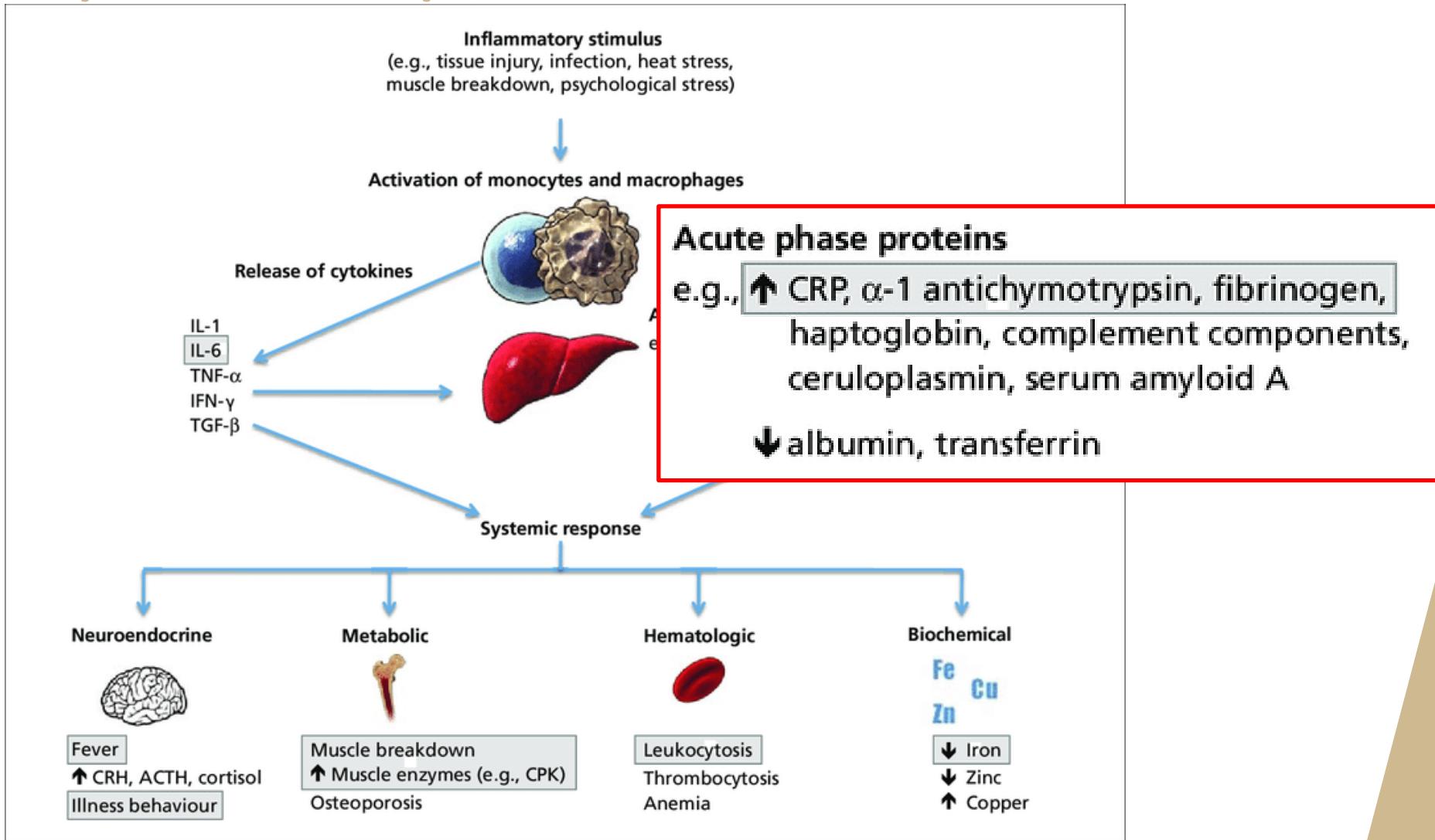
# Cool new tests!



# New Tricks from Old Dogs

- Reticulocytes without anemia (RWA)
- Absolute Reticulocyte Count
- Reticulocyte Hemoglobin
- CRP-C Reactive Protein

# Acute phase response



# In-clinic testing options

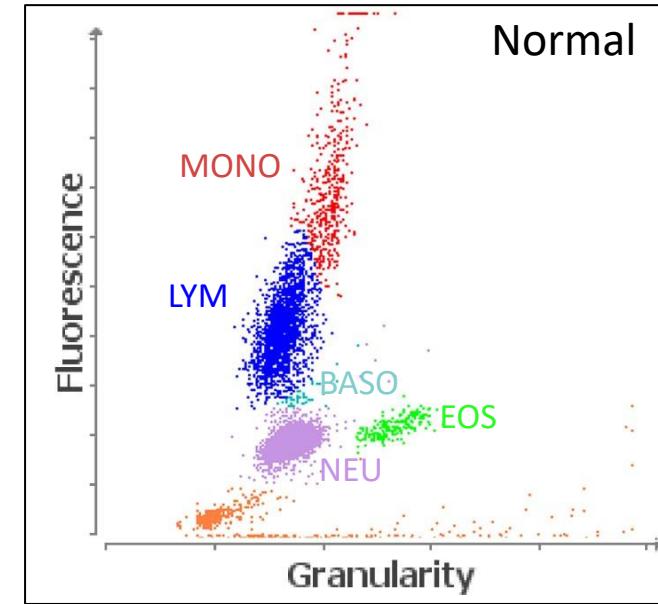
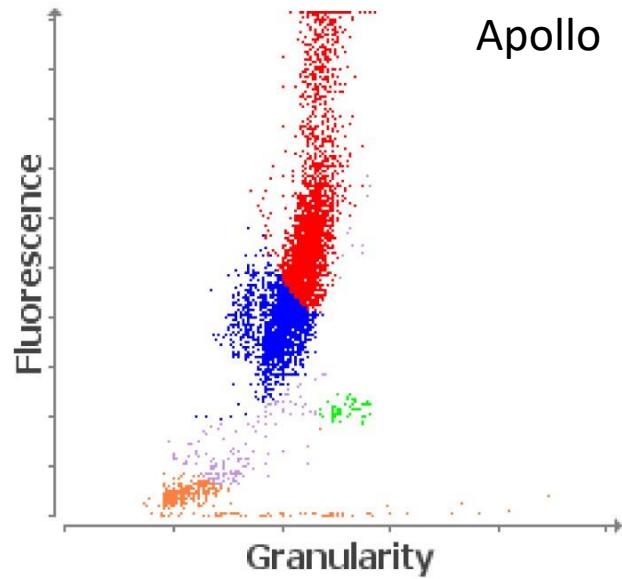
- Various in-house testing options
  - Latex agglutination immunoassay
    - Antibodies bind to latex beads which bind to SAA and precipitate
- Species validated assays
  - Often anti-human antibodies
  - Cross-reactivity across species
- Rapid
  - Can lack accuracy
- Discriminate inflammatory vs non-inflammatory



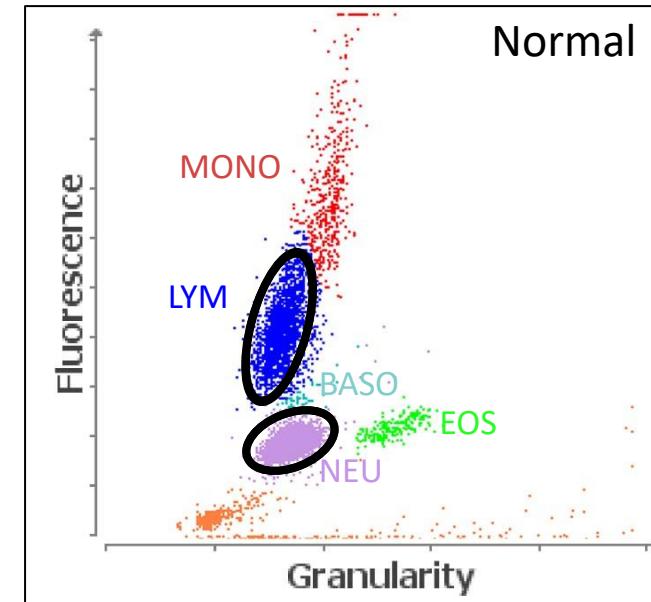
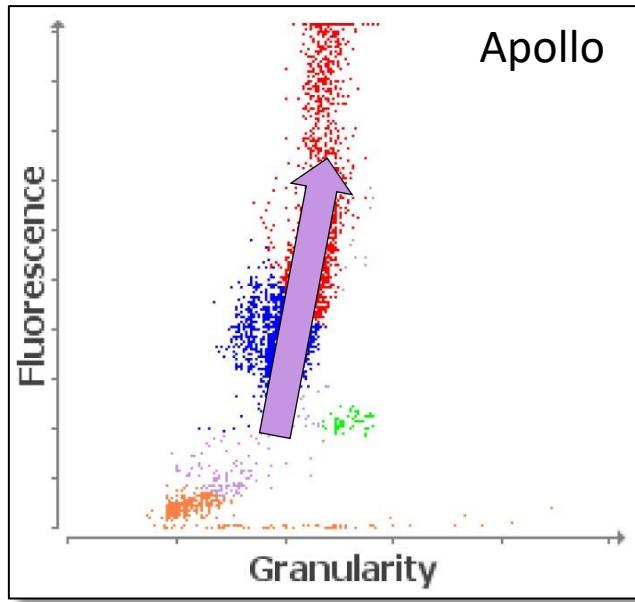
# CRP in diagnosing and managing inflammatory conditions

- Increases within 6 hours of onset systemic inflammation
- CRP increased
  - Supports systemic inflammation – treat, investigate further, monitor frequently
- CRP normal
  - Does not support systemic inflammation - investigate further
- CRP during therapeutic trial
  - Decreases rapidly (short  $t \frac{1}{2}$ ) with successful treatment → supports diagnosis

# Apollo – 6y M/N Great Dane

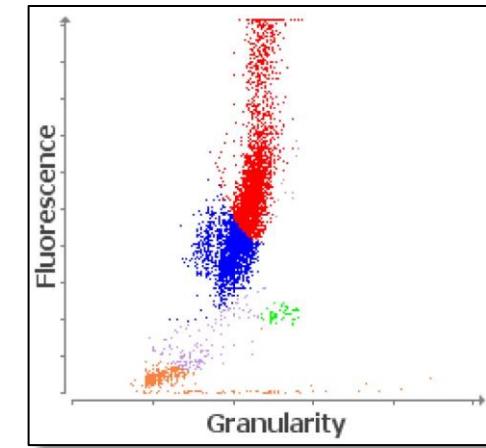


# Apollo – 6y M/N Great Dane



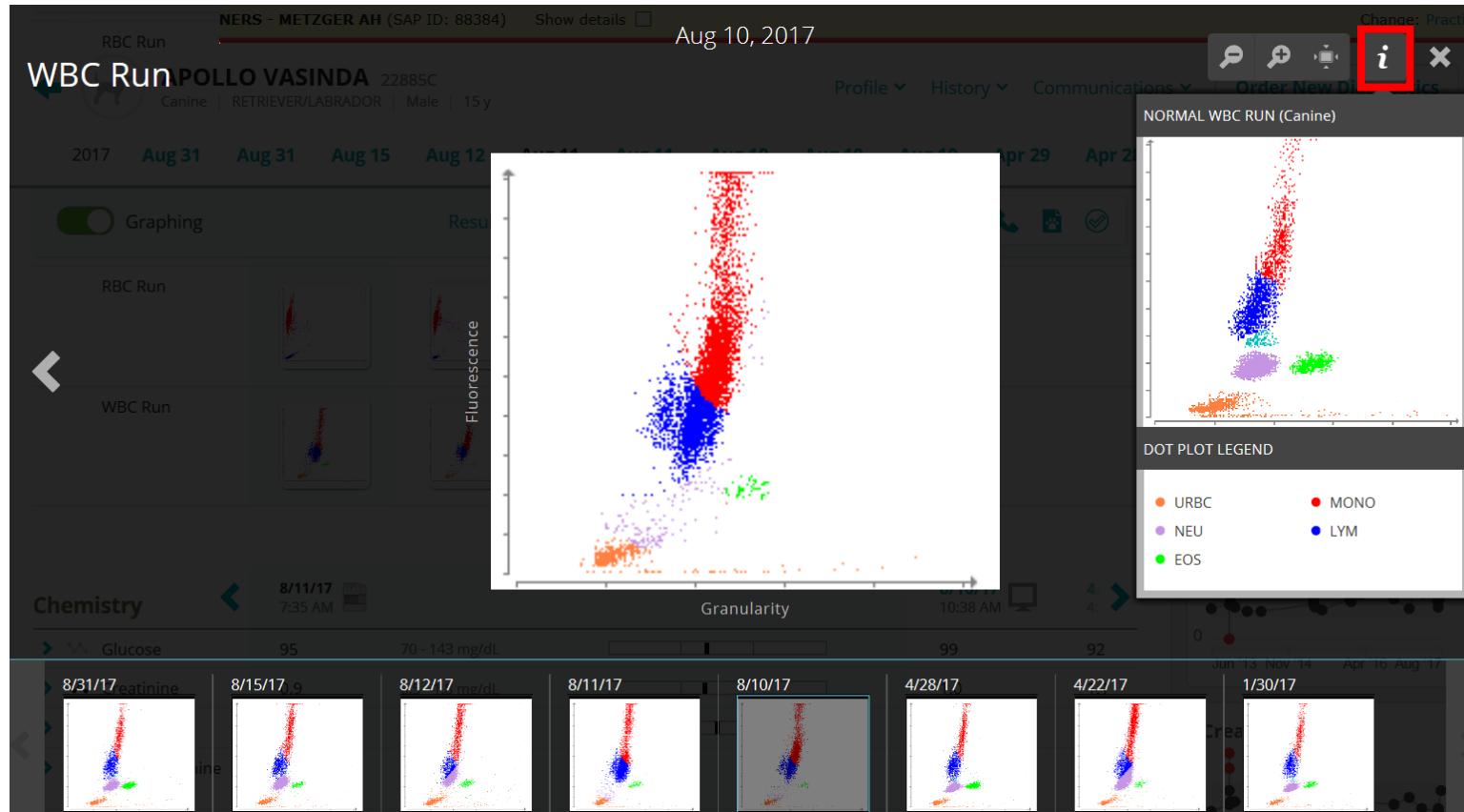
# Apollo – 6y M/N Great Dane

Test	Results	Reference Interval	LOW	NORMAL	HIGH
ProCyte Dx (August 10, 2017 10:27 AM)					
WBC	7.16 K/ $\mu$ L	5.05 - 16.76			
NEU	* 0.16 K/ $\mu$ L	2.95 - 11.64	LOW		
BAND	* Suspected				
LYM	* 2.87 K/ $\mu$ L	1.05 - 5.10			
MONO	* 4.07 K/ $\mu$ L	0.16 - 1.12	HIGH		
EOS	0.06 K/ $\mu$ L	0.06 - 1.23			
BASO	0.00 K/ $\mu$ L	0.00 - 0.10			
Band neutrophils suspected WBC Abnormal Distribution					

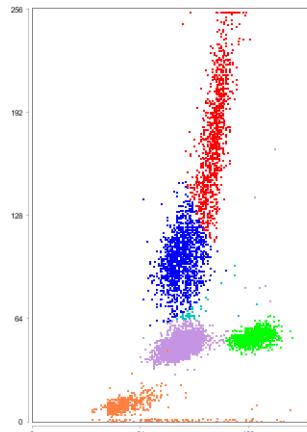


# Apollo

IDEXX **VetConnect** PLUS



# Apollo – 6y M/N Great Dane

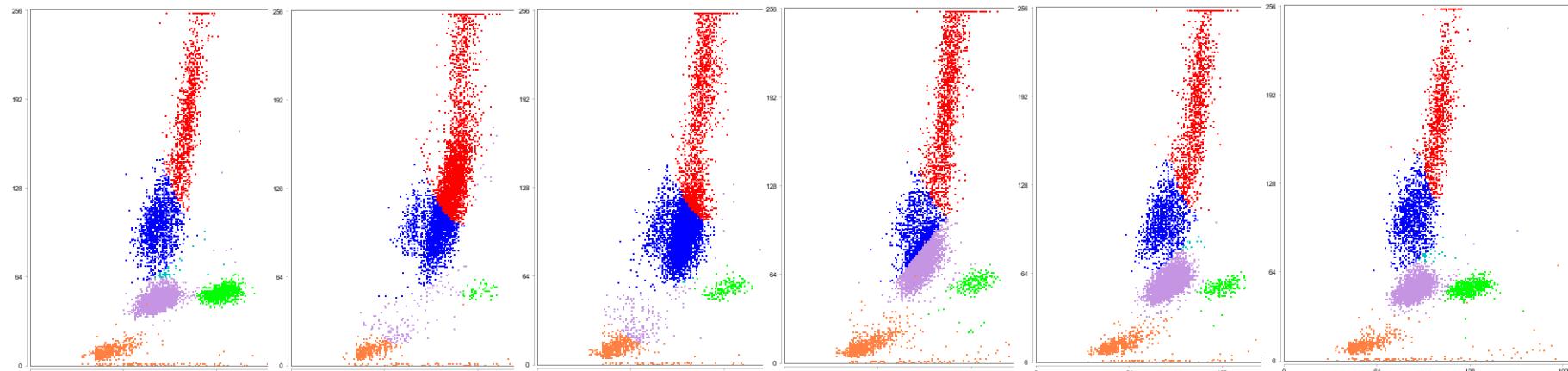


Date	4/28/17
Band	-
WBC (K/ $\mu$ L) (5.05–16.76)	10.58

RED = Abnormal high

Blue = Abnormal low

# Apollo – 6y M/N Great Dane

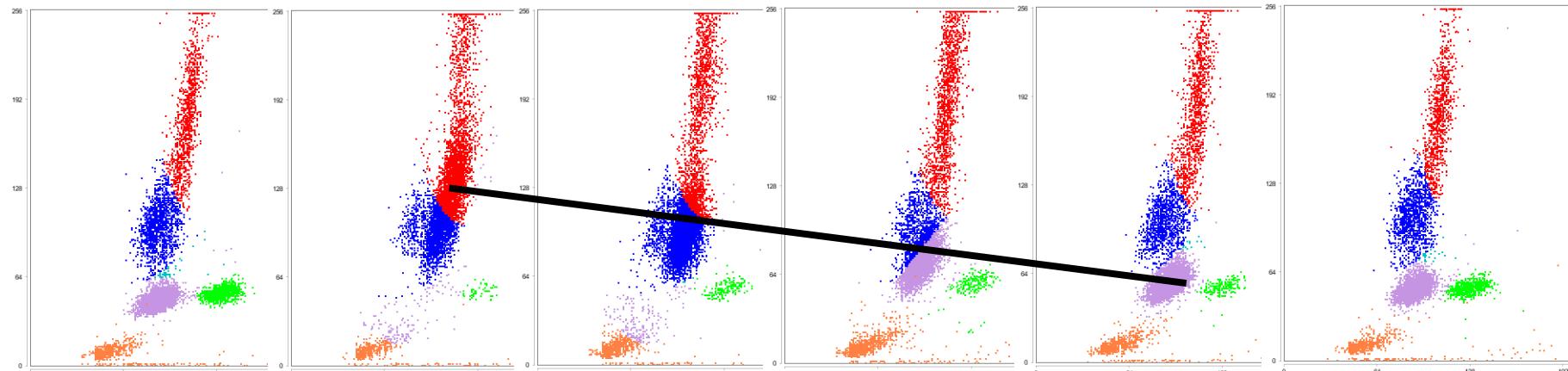


Date	4/28/17	8/10/17	8/11/17	8/12/17	8/15/17	8/31/17
Band	-	+	+	+	+	-
WBC (K/ $\mu$ L) (5.05–16.76)	10.58	7.16	8.72	8.84	11.08	10.23

RED = Abnormal high

Blue = Abnormal low

# Apollo – 6y M/N Great Dane



Date	4/28/17	8/10/17	8/11/17	8/12/17	8/15/17	8/31/17
Band	-	+	+	+	+	-
WBC (K/ $\mu$ L) (5.05–16.76)	10.58	7.16	8.72	8.84	11.08	10.23

RED = Abnormal high

Blue = Abnormal low

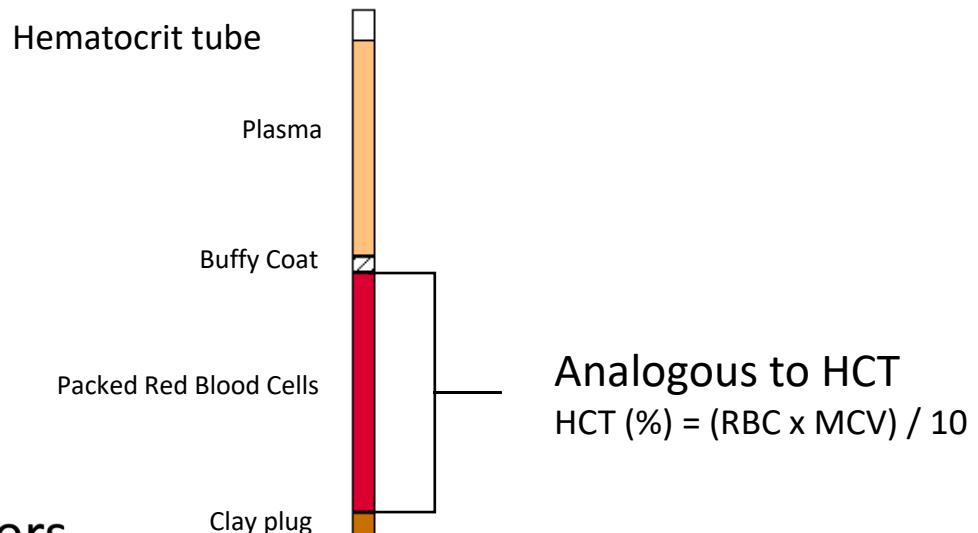
# New Tricks

- Reticulocyte Hemoglobin
- Reticulocytes-with and without anemia
- CRP-C Reactive Protein
- Red Cell and Platelet Indices

# Platelets by the numbers

- Thrombogram
- PLT / PCT – count / mass

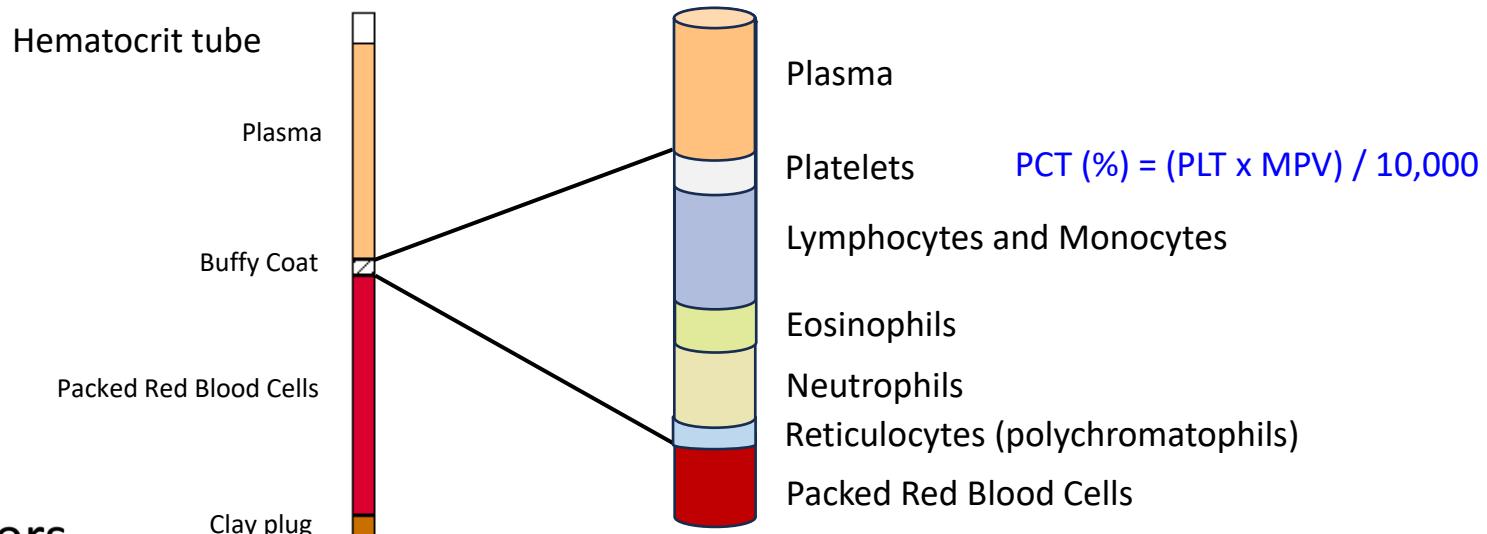
Test	Results	Reference Interval	LOW	NORMAL	HIGH
PLT	225 K/ $\mu$ L	148 - 484		█	
MPV	12.6 fL	8.7 - 13.2		█	
PDW	12.3 fL	9.1 - 19.4	█	█	
PCT	0.28 %	0.14 - 0.46		█	



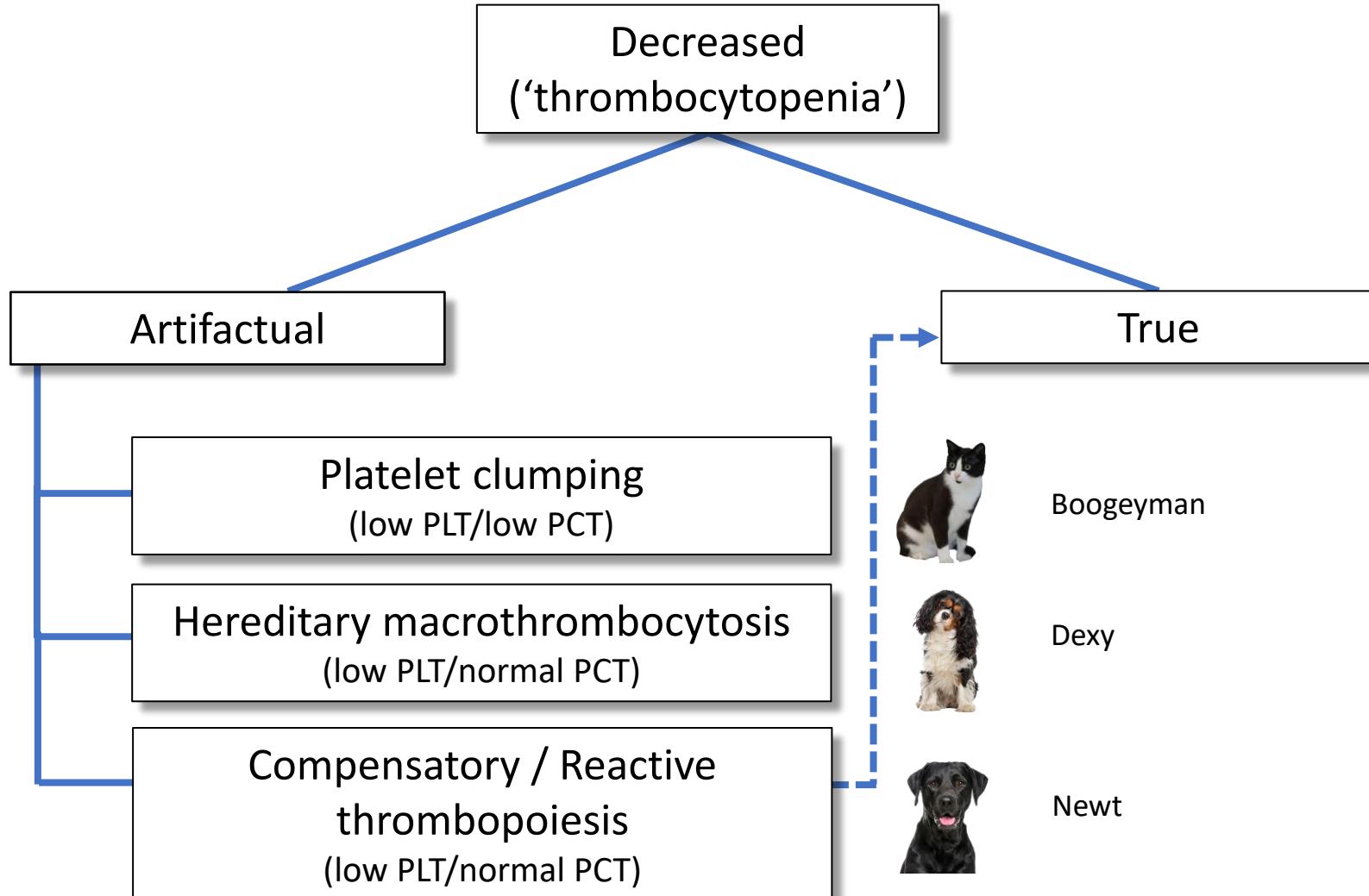
# Platelets by the numbers

- Thrombogram
- PLT / PCT – count / mass

Test	Results	Reference Interval	LOW	NORMAL	HIGH
PLT	225 K/ $\mu$ L	148 - 484		█	
MPV	12.6 fL	8.7 - 13.2		█	
PDW	12.3 fL	9.1 - 19.4	█	█	
PCT	0.28 %	0.14 - 0.46		█	



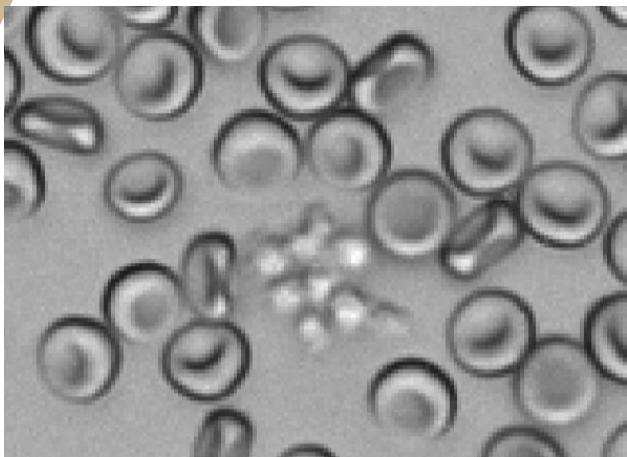
# Approach to the evaluation of platelets



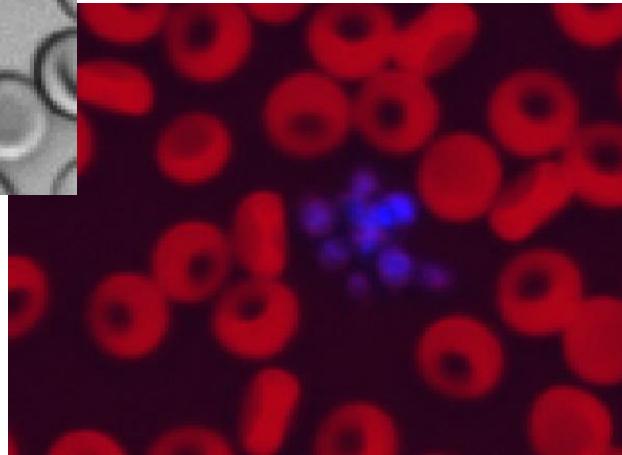
# New Tricks from Old Dogs

- Absolute Reticulocyte Count
- Reticulocytes without anemia (RWA)
- Reticulocyte Hemoglobin
- CRP-C Reactive Protein
- Red Cell and Platelet Indices
- AI blood morphology

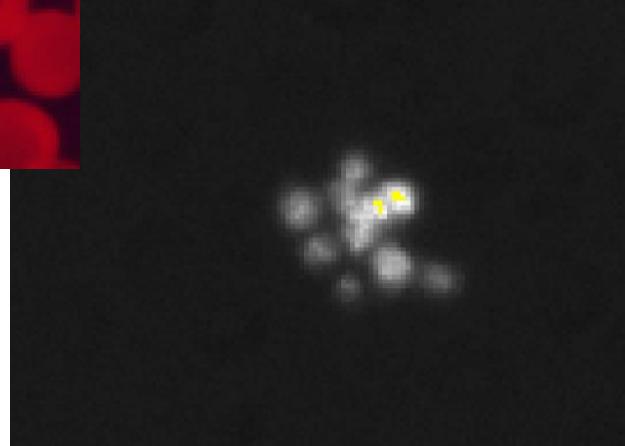
# IDEXX InVue Dx Cellular Analyzer



Platelet Clumping



$$PCT (\%) = (PLT \times MPV) / 10,000$$



# New Tricks from Old Dogs

- Reticulocytes without anemia (RWA)
- Absolute Reticulocyte Count
- Reticulocyte Hemoglobin
- CRP-C Reactive Protein
- Red Cell and Platelet Indices
- AI blood morphology
- Canine Pancreatic Lipsae
- Cortisol
- Canine Cancer Test

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% of **U.S. Catalyst** customers **adopted in the first year of launch\***

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Catalyst® SDMA

Launched January 2018

**>50%**



Catalyst®  
Pancreatic Lipase

Launched September 2024

\*Customers who adopted in first year of launch had run at least one consumable slide on Catalyst Dx® Chemistry Analyzer or Catalyst One® Chemistry Analyzer in the last 30 days of 12 months post-launch for Lyte 4 CLIP, Total T4 and SDMA, and at least one consumable slide on Catalyst Dx® Chemistry Analyzer or Catalyst One® Chemistry Analyzer in the last 30 days as of 7/30/25 for Pancreatic Lipase.

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# The Laboratory Retriever Team



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