### Common conditions

<table>
<thead>
<tr>
<th>Body system</th>
<th>SKIN</th>
<th>RESPIRATORY</th>
<th>UROGENITAL</th>
<th>ORAL</th>
<th>GASTRO-ENTERIC</th>
<th>ABDOMINAL</th>
<th>BLOOD</th>
<th>ORTHOPEDIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Microbial causes

- **Acute moist dermatitis**, **acute pyoderma**, **fold pyoderma**, **bacterial dermatitis**, **acute blepharitis**, **traumatic ulceration**, **chronic periodontal disease**, **chronic pyelonephritis**

#### Antimicrobial therapy

- **Topical**: 
  - **Systemic**: 
    - **Trimethoprim-sulfonamide (TMPS)** and/or **fluoroquinolones**

#### Clinical signs

- **Fever**, **leukocytosis**, **pyrexia**, **obvious signs of infection**

#### Diagnosis

- **Cytology**
- **Culture and antimicrobial susceptibility test**

#### Treatment

- **Topical therapy**
- **Systemic therapy**

#### Follow-up

- **Reassessment**

---

**Note**: This table provides examples and should not be considered comprehensive. Local resistance patterns must be taken into consideration. Use an antimicrobial with shown bioavailability at target organ and use narrow spectrum as possible. Always follow national legislation.