

First case of a dog infected with *Aspergillus (Phialosimplex) caninus* in Australasia

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Supplementary Table 1. Clinical and pathological findings for all reported cases of dogs infected with *Aspergillus (Phialosimplex) caninus*.

Case ^a	History and physical exam	Tissue(s) identified with fungal elements	Haematology	Biochemistry	Urinalysis	Imaging findings	Treatment
1	Non-regenerative IMHA treated for 3.5 months with prednisone, hepatosplenomegaly, enlarged superficial cervical and popliteal LN	Bone marrow	Normocytic, normochromic regenerative anaemia, neutrophilia with a left shift	↑ALP	Normal, culture negative for bacteria and fungi	Hepatomegaly, intra-abdominal lymphadenopathy, heterogenous left pancreatic limb	Itraconazole, changed to amphotericin B and changed back to itraconazole; prednisone for immune-mediated haemolytic anaemia
2	Acute vomiting, abdominal pain, decreased appetite, depression, mid-caudal abdominal mass, moderately enlarged left prescapular LN, decreased mentation, mild dehydration, bradycardia, hypertension	Mesenteric mass, spleen, prescapular LN	Mature neutrophilia, monocytosis	↑TP, ↑globulin, ↑urea, ↓chloride	N/A	Cranial mediastinal mass, abdominal masses, splenomegaly with multifocal hypoechoic nodules	Itraconazole, single dexamethasone dose, tapering prednisone for 9 days, tramadol, maropitant, famotidine
3	Increased liver enzymes, PU/PD, decreased appetite, dull, mild muscle wasting, petechial haemorrhage on the medial aspect of the left fundus	Spleen and liver	Mild left shift, thrombocytopenia	↑ALT, ↑ALP, ↑bilirubin, ↓albumin, ↑globulin, ↑CK, ↑ionised calcium	USG 1.024, 2+ bilirubin, 2+ protein	Diffusely mottled spleen, coarse hepatic parenchyma, intra-abdominal lymphadenomegaly; multifocal vertebral and sternal endplate lysis identified 12 months after initial diagnosis	Itraconazole, changed to posaconazole

The content of this supplementary information has not been edited. All risk and liability rest with the authors.

Supplementary Information

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Case ^a	History and physical exam	Tissue(s) identified with fungal elements	Haematology	Biochemistry	Urinalysis	Imaging findings	Treatment
4	Lethargy, anorexia, weight loss, pyrexia	Cranial mediastinal mass	Mild anaemia, neutrophilia, monocytosis	↑TP, ↓albumin, ↑globulin	USG 1.016, inactive sediment	Cranial mediastinal mass; cervical endplate lysis identified 7 months after initial diagnosis	Thoracotomy, itraconazole, carprofen, tramadol
5	Right forelimb lameness, lethargy, pyrexia, firm superficial LN, hepatosplenomegaly, diffuse pain	Spleen	Mild anaemia, monocytosis	↓albumin, ↑globulin (polyclonal gammopathy)	N/A	Tracheobronchial lymphadenomegaly, lytic lesion in right humerus, hepatomegaly, mesenteric lymphadenomegaly, mottled splenomegaly with multiple hypoechoic nodules	Itraconazole, terbinafine
6	Weight loss, hyporexia, lethargy, generalised peripheral lymphadenopathy, intra-abdominal masses	Liver, popliteal and prescapular LN	Eosinophilia	↑TP, ↑creatinine, ↑urea, ↑ionised calcium	USG 1.014, inactive sediment	Sternal and hilar lymphadenopathy, intra-abdominal lymphadenomegaly, splenomegaly with coarse and lacy echogenicity, small areas of mineralization in kidney cortices, diffusely hyperechoic liver	Itraconazole, terbinafine, intravenous fluids, prednisone, amphotericin B
7	Vitality loss, depression	Iliac LN	Normal	↑creatinine	Normal	Iliac and splenic lymphadenopathy	Fluconazole, changed to itraconazole, changed to voriconazole and changed back to itraconazole
8	Productive cough, weight loss, possible pain, enlarged superficial cervical LN, pendulous abdomen with organomegaly, moderate muscle wasting	Prescapular LN	Macrocytic, normochromic, minimally regenerative anaemia	↑ALT, ↑AST, ↑ALP, ↑GGT, ↓albumin, ↑globulin, ↑cholesterol	USG 1.040, 2+ protein, inactive sediment	Diffuse bronchial pattern, thoracic and abdominal lymphadenomegaly, hepatomegaly, splenomegaly	Itraconazole, s-adenosylmethionine, amoxicillin-clavulanic acid, carprofen

^a As reported in: case 1, Armstrong *et al.* (2012); case 2, Sigler *et al.* (2013); case 3, Allen *et al.* (2018); cases 4–6, Townsell *et al.* (2018); case 7, Kano *et al.* (2019).

ALP=alkaline phosphatase; ALT=alanine aminotransferase; AST=; CK=creatinine kinase; GGT=gamma glutamyltransferase; IMHA=immune-mediated haemolytic anaemia; LN=lymph node; N/A= not assessed; PU/PD=polyuria/polydipsia; TP=total protein; USG = urine specific gravity