



PATIENT

Botas Zaragoza

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

1

WEIGHT

6.42kg

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Dr Laura

HOSPITAL NAME

Wilvet South

REFERRING VET

Dr Daniel

INVOICE

23591

DATE

01/18/2026

PRESENTING CLINICAL SIGNS

Presented 1/17 first offense UO. Azotemic. Urethral plug noted. Marked hematuria with large amounts of clots and debris. No obvious stones on Rads. No obvious acoustic shadowing noted but large amount of hyperechoic debris. P urinating around UCath. Urethral dilation noted.

LIMITED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was normal in size and tone with variably thickened bladder wall and mild asymmetrical lumen surface contour. The ventral urinary bladder wall measured 0.57 cm in width. Significant to marked non-dependent hyperechoic to particulate sediment including suspected area of adhered sediment to debris or possible blood clot in the ventral lumen. Peripheral to dependent lumen mineral with potential mineral adherence to the lumen surface was present. The urethra was normal in structure with mild decreased urethral tone to depth of 2 cm. Mild area of urethral lumen mineral. A catheter was present in the urethra.

Mild pericystic inflammation and scant effusion was present.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and subjective mild decreased corticomedullary echogenicity was present with pinpoint hyperechoic cortical foci. The cortical foci may indicate pinpoint areas of cortical microinfarction, fibrosis, or mineralization. No evidence of pyelectasia or retroperitoneal inflammation.

The left kidney measured 4.7 cm in length. The right kidney measured 4.6 cm in length.

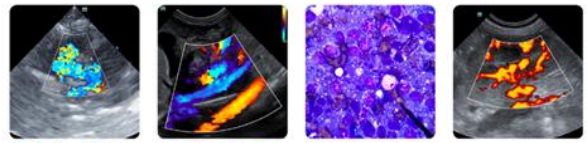
ULTRASONOGRAPHIC FINDINGS

Primary

- Cystitis and possible proximal urethritis with significant urinary bladder sediment, sand, mineral, and potential blood clot
- Minor subjective non-obstructive visible proximal urethral lumen mineral
- Associated mild pericystic inflammation.
- Bilateral acute nephropathy pattern exhibiting pinpoint hyperechoic cortical foci

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urine C/S ideally on sterile urine sample recommended. Continued empirical therapy for cystitis and associated acute nephropathy with monitoring of UA and renal parameters recommended. No evidence of left or right ureter obstruction or obvious pyelonephritis. No evidence of neoplastic criteria. Potential for non-visible to distal additional urethral mineral not excluded. Sonographic monitoring or reassessment indicated if persistent or progressive lower urinary tract signs or azotemia.



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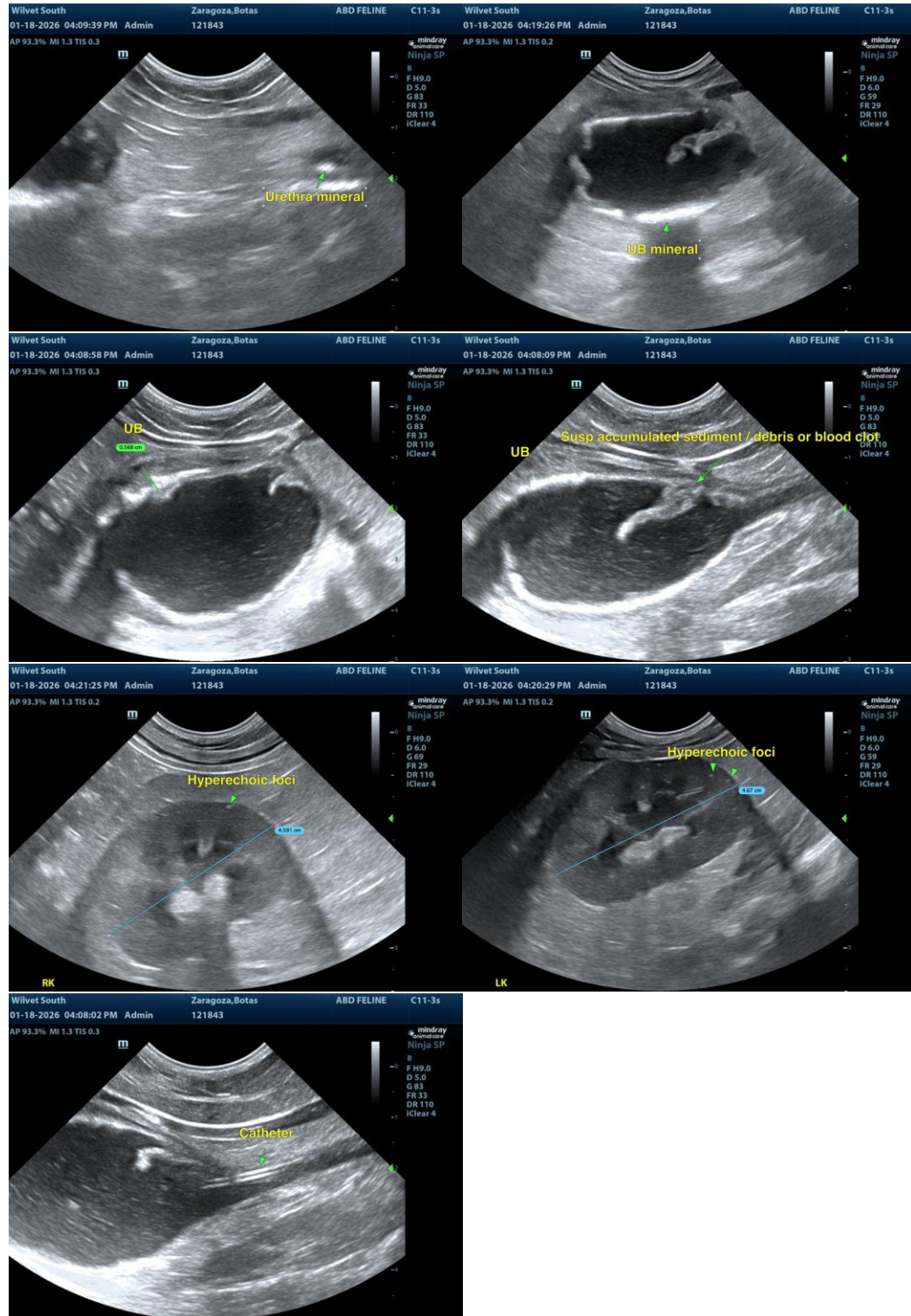
Dr Daniel

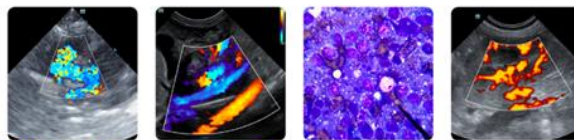
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance, please contact me.

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info@sonopath.com

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