



## PATIENT

Frida Fuego  
Moorehouse

## SPECIES

Feline

## BREED

DSH

## SEX

Female Spayed

## AGE

1 y

## WEIGHT

3.1 kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Brita Kiffney

## HOSPITAL NAME

Northshore VH

## REFERRING VET

Brita Kiffney

## INVOICE

12778

## DATE

11/5/25

## PRESENTING CLINICAL SIGNS

History: presented three weeks ago for hematuria and pollakiuria. Treated by colleague with gabapentin and convenia. Today presented for vomiting since 4 pm liquid and food, not eating

Abnormal PE/Chem/CBC/UA Results: painful abdomen, temp 103.9, Neutrophilia 20K, monocytosis 870 chemistry completely normal UA: submitted for culture, gross hematuria (full ua will be run at lab tonight)

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder exhibited normal size and tone with overall normal wall without evidence of inflammation or tumors. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment, mineral or calculi. Possible indistinct soft tissue echo in the area of distal ureter and ureteral papilla potentially measuring 0.55 cm in diameter.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. A hyperechoic corticomedullary band, consistent with a medullary rim sign, was present. This is a nonspecific finding seen in both normal and abnormal kidneys. It may be associated interstitial renal disease, hypercalcemia, tubular necrosis, lymphoma, and FIP. However, it is a nonspecific finding. The left kidney exhibited no evidence of pyelectasia or hydro ureter. The left kidney measured 3.4 cm length. The right kidney exhibited mild hydronephrosis with hyperechoic renal sinus parenchyma. Right hydro ureter extending from the level of the right kidney caudally approaching the urinary bladder was visualized measuring 0.35 cm right ureter diameter. Mild right retroperitoneal hyperechoic echogenicity and scant retroperitoneal effusion. The right kidney measured 4.1 cm length.

### Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.38 cm. No obvious pathology in the area of the right adrenal gland.

### Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

### Liver

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.



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## Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

## Pancreas

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

## Free Abdomen

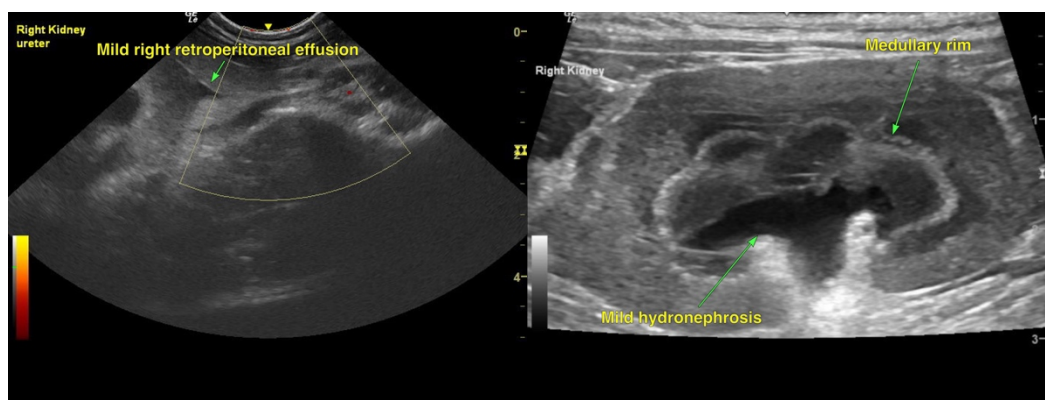
No overt lymphadenopathy or peritoneal effusion was present.

## ULTRASONOGRAPHIC FINDINGS

- Bilateral nonspecific renal medullary rim sign
- Mild right kidney hydronephrosis and increased renal sinus echogenicity, concurrent right hydro ureter extending to approximate level of urinary bladder
- Mild right retroperitoneal effusion and inflammation
- Overall, sonographically unremarkable urinary bladder, possible indistinct soft tissue echo level of distal ureter/ureteral papilla
- Normal empty gastrointestinal tract

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Non-obvious right ureter obstruction, potentially at the level of distal ureter or ureteral papilla with concurrent potential right nephritis and retroperitonitis is evident. Further assessment may include advanced imaging such as contrast urography or Gold Standard CT with contrast. Correlation with pending urinary workup is recommended. Gastrointestinal support indicated.





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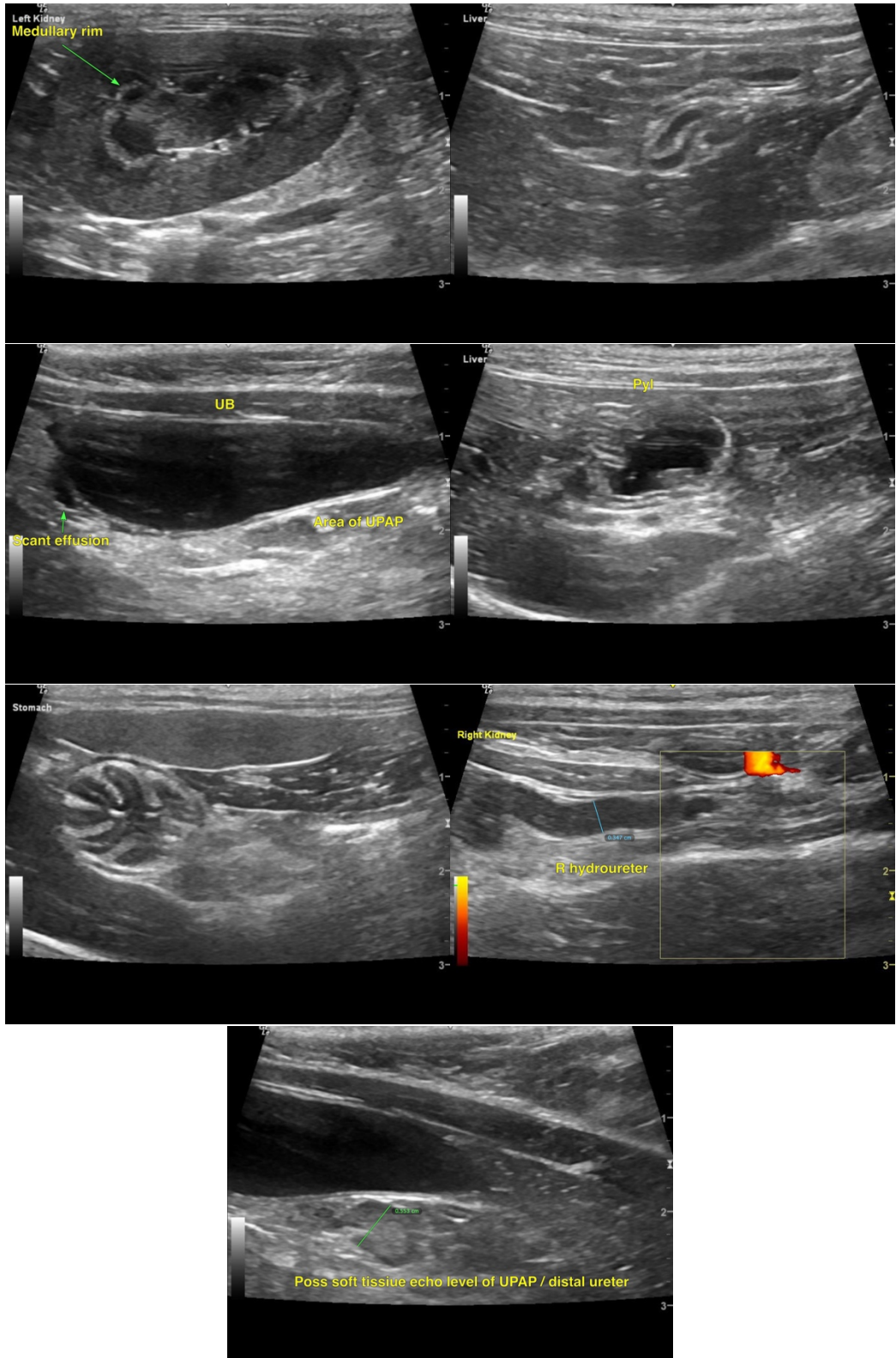
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

[info@sonopath.com](mailto:info@sonopath.com)