



**PATIENT**

Coco Weir

**SPECIES**

Canine

**BREED**

Shih Tzu

**SEX**

FS

**AGE**

8yr

**WEIGHT**

15lb

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Pamela Harrigan,  
RDCS, Certified  
Veterinary  
Sonographer (IVUSS)

**HOSPITAL NAME**

Norfolk County  
Veterinary Service

**REFERRING VET**

Aurora Richards, DVM

**INVOICE**

23165

**DATE**

12/8/2025

**PRESENTING CLINICAL SIGNS**

History 3 UTIs with hematuria. Irregular bladder wall. BRAF negative. Study limited to urinary system

**LIMITED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

The submitted study contained 26 images and videos of the urinary tract system only

**Urinary System**

The urinary bladder was normal in size and tone. Mildly prominent ventroapical to dorsoapical urinary bladder wall exhibiting symmetrical luminal surface contour and normal mural echogenicity was present. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited no evidence of pathology. Primarily anechoic urine was present in the lumen with focal to mild dependent lumen mineral. The apical urinary bladder wall measured 0.20 cm in width.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Bilateral medullary mineral to small renoliths were present. The left kidney measured 3.8 cm in length. The right kidney measured 3.8 cm in length.

**ULTRASONOGRAPHIC FINDINGS**

**Primary**

- Chronic renal changes exhibiting medullary mineral / small renoliths
- Subjective mild cystitis pattern with focal to mild bladder lumen mineral

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

This patient is suspected to be passing small amounts of mineral from the kidneys into the urinary bladder. No evidence of upper or lower urinary tract tumors or neoplastic criteria.

Assessment of the vulva or vaginal vault for evidence of structural abnormality which may predispose to ascending infection is suggested.



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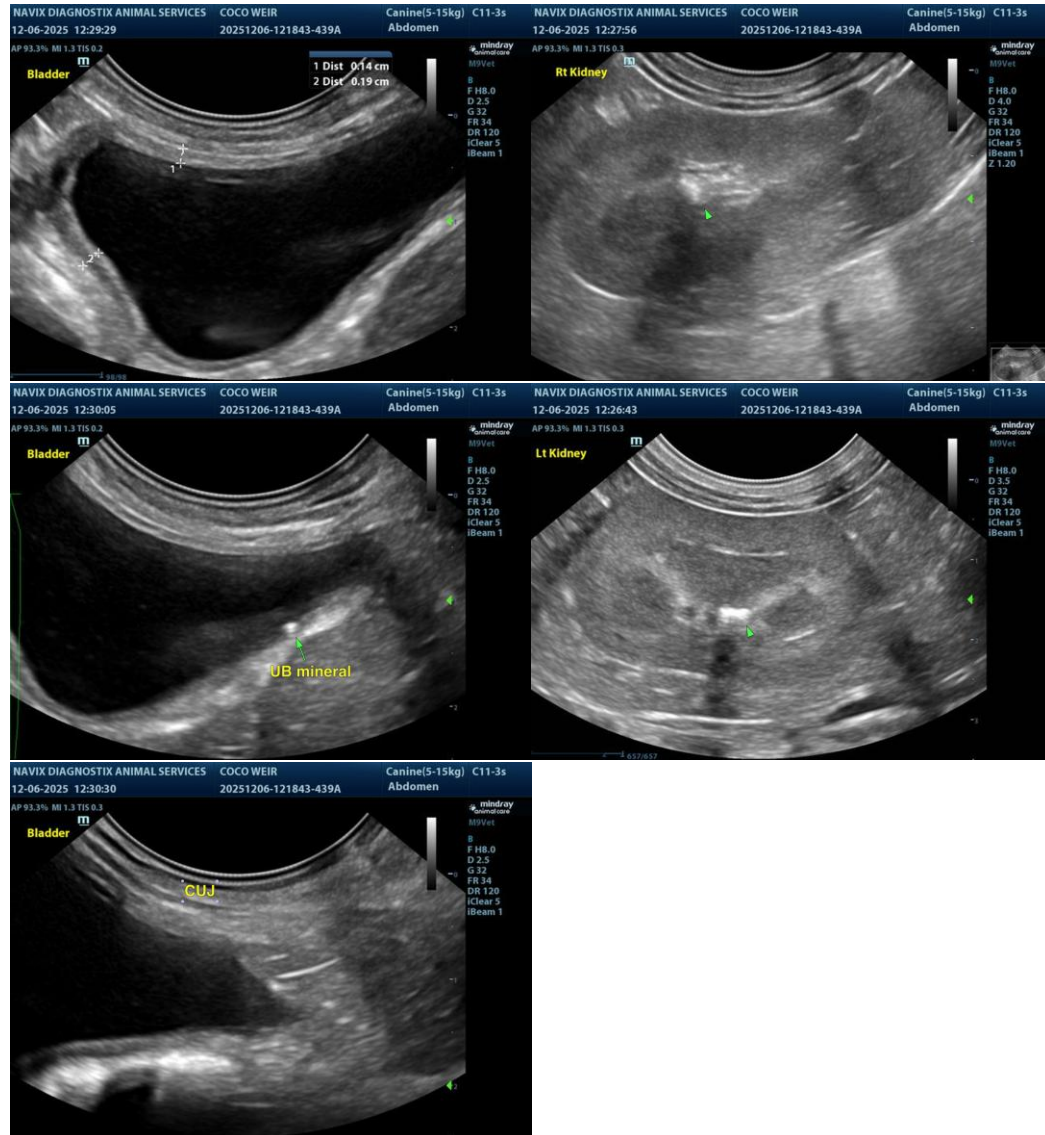
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)