



PATIENT

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

Wasabi Myers

SPECIES

Feline

BREED

DSH

SEX

MN

AGE

1yr

WEIGHT

12.41lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Jasmine Palacios

HOSPITAL NAME

Rivers Edge Pet
Medical

REFERRING VET

Dr Kellee Burns

INVOICE

24449

DATE

04/10/2026

PRESENTING CLINICAL SIGNS

1 yr 8 mo neutered male presented 4/9 for blood in urine and urinating outside the litter box attempted cystocentesis but a large, mineralized debris-filled bladder was seen; concern for mineral plaque. Elected to administer SQ fluids and collect free catch sample overnight (in clinic) P has not urinated; bladder is currently mildly full, soft but painful on palpation P was seen 3/21 for frequent and small urinations; diagnostics were declined; P did well on amoxicillin and prazosin
P currently on gabapentin, alprazolam, and prazosin
Abnormal PE/Chem/CBC/UA Results: See attached rad: no radiopaque stones present in bladder or proximal/distal urethra (cannot evaluate pelvic portion of urethra) normally appearing kidneys; full urinary bladder rest wnl

LIMITED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was normal in size and tone with normal wall. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with moderate dependent lumen hyperechoic to shadowing sand with non-dependent particulate sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted. No evidence of current mechanical obstruction to urine outflow.

Normal size and margination were 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. The left kidney measured 3.9 cm in length. The right kidney measured 4.0 cm in length.

ULTRASONOGRAPHIC FINDINGS

Primary

- Unremarkable non-distended urinary bladder with moderate lumen sand / sediment
- Normal visible proximal urethra
- Normal bilateral kidneys- no evidence of pyelonephritis or dysplasia

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urine C/S if not done on sterile urine sample is recommended. Urinary diet with continued empirical therapy for mild idiopathic cystitis with consideration for encouragement of water intake and clinical / sonographic monitoring is recommended. Recheck sonogram if persistent or progressive dysuria, stranguria or evidence of urethral obstruction.



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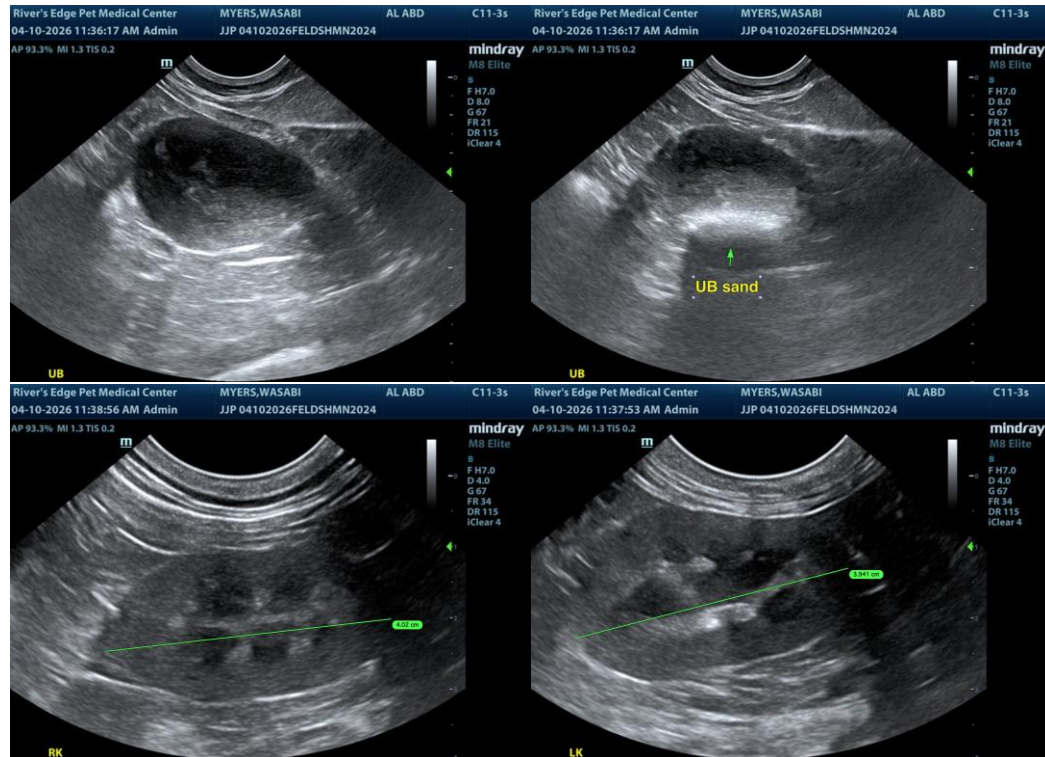
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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