



PATIENT

Athena McFadyen

SPECIES

Canine

BREED

Terrier Mix

SEX

Spayed Female

AGE

8 Years

WEIGHT

27 pounds

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Jasmine Palacios

HOSPITAL NAME

River's Edge Pet
Medical Center

REFERRING VET

Dr. David Gray

INVOICE

15126

DATE

04/15/26

PRESENTING CLINICAL SIGNS

Blood in UR and accidents

Abnormal PE/Chem/CBC/UA Results: See attached UA: Blood and protein in urine

LIMITED ULTRASONOGRAPHIC EXAMINATION

Urinary System

The urinary bladder presented mildly thickened wall isoechoic to the adjacent normal urinary bladder wall primarily visualized the cranial / apical urinary bladder. The luminal margin of the thickened urinary bladder wall was mildly asymmetrical in contour. Urinary bladder wall thickness measured 0.46 cm dorsal apical wall width. Mineralization or echogenic foci within the thickened areas of urinary bladder wall was not present. The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm exhibited normal tone. Anechoic urine was present in the lumen with no urine mineral, calculi or tumors. The ureteral papillae were normal. The ureters were not visible which is normal.

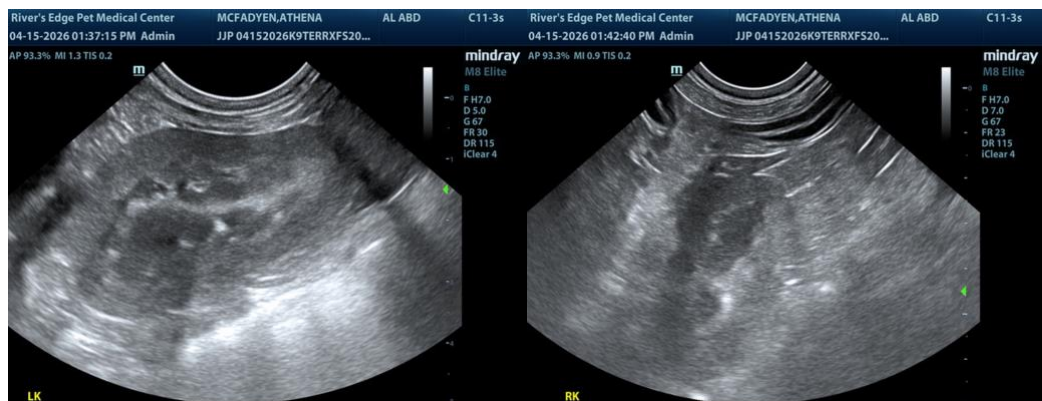
Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pyelectasia. The left kidney measured 5.2 cm in length. The right kidney measured 5.0 cm in length.

ULTRASONOGRAPHIC FINDINGS

- Mild cystitis pattern with sonographically unremarkable visible proximal urethra.
- Normal bilateral kidneys.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of upper or lower urinary tract neoplastic criteria or calculi. Although no evidence of bacteriuria, screening urine culture and sensitivity on sterile urine sample is suggested. UPC may be considered if non-inflammatory proteinuria.





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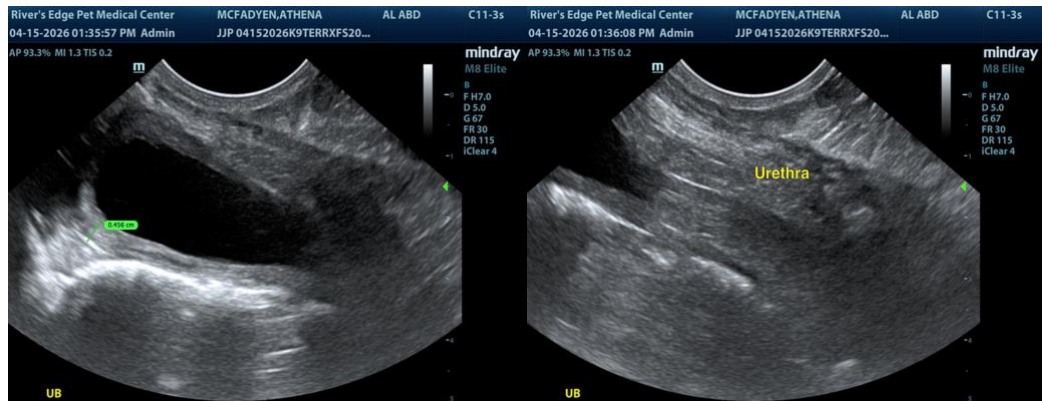
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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