



PATIENT

Myla Risser

SPECIES

Canine

BREED

Schnoodle

SEX

Spayed Female

AGE

3 Years

WEIGHT

16 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. Dana Tsuchida

INVOICE

14821

DATE

04/02/26

PRESENTING CLINICAL SIGNS

Approximately starting 2-3 days before 3/15/26 P showed symptoms of Posturing with little to no production with blood in urine. Treatments started with Carprofen and Amoxicillin along with Hill's U/D. Clinic symptoms improved, however P still posturing with little to no production. P seems improved today. Currently only on Carprofen and urinary diet

Abnormal PE/Chem/CBC/UA Results: Urinalysis from 3/15/26-Results: proteinuria, hematuria, pyuria, crystalluria See attached rads from 3/26/26 - Small urinary bladder, cannot appreciate urinary results on radiograph

LIMITED ULTRASONOGRAPHIC EXAMINATION

Urinary System

The urinary bladder was nondistended in size prohibiting full evaluation of the bladder wall. Subjective generalized mild thickened wall exhibiting maintained symmetrical luminal surface contour and homogenous mural echogenicity. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm exhibited normal tone. Hyperechoic shadowing calculus was present in the dependent lumen. Urinary bladder wall measured 0.25 cm wall width. Mild urine with moderate hyperechoic mildly shadowing sand and nonshadowing particulate sediment.

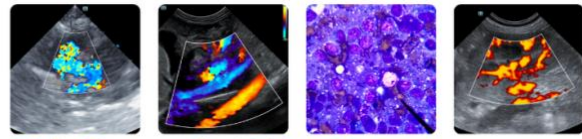
Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pyelectasia. The left kidney measured 4.1 cm in length. The right kidney measured 3.6 cm in length.

ULTRASONOGRAPHIC FINDINGS

- Cystic calculus with cystitis pattern and concurrent moderate urinary bladder sand/sediment.
- Normal bilateral kidneys.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Cystotomy with urinary bladder flush, stone analysis, concurrent urine culture and sensitivity on a sterile urine sample +/- urinary bladder wall biopsy for histopathology and tissue culture and sensitivity is recommended. No evidence of neoplastic criteria or pyelonephritis.



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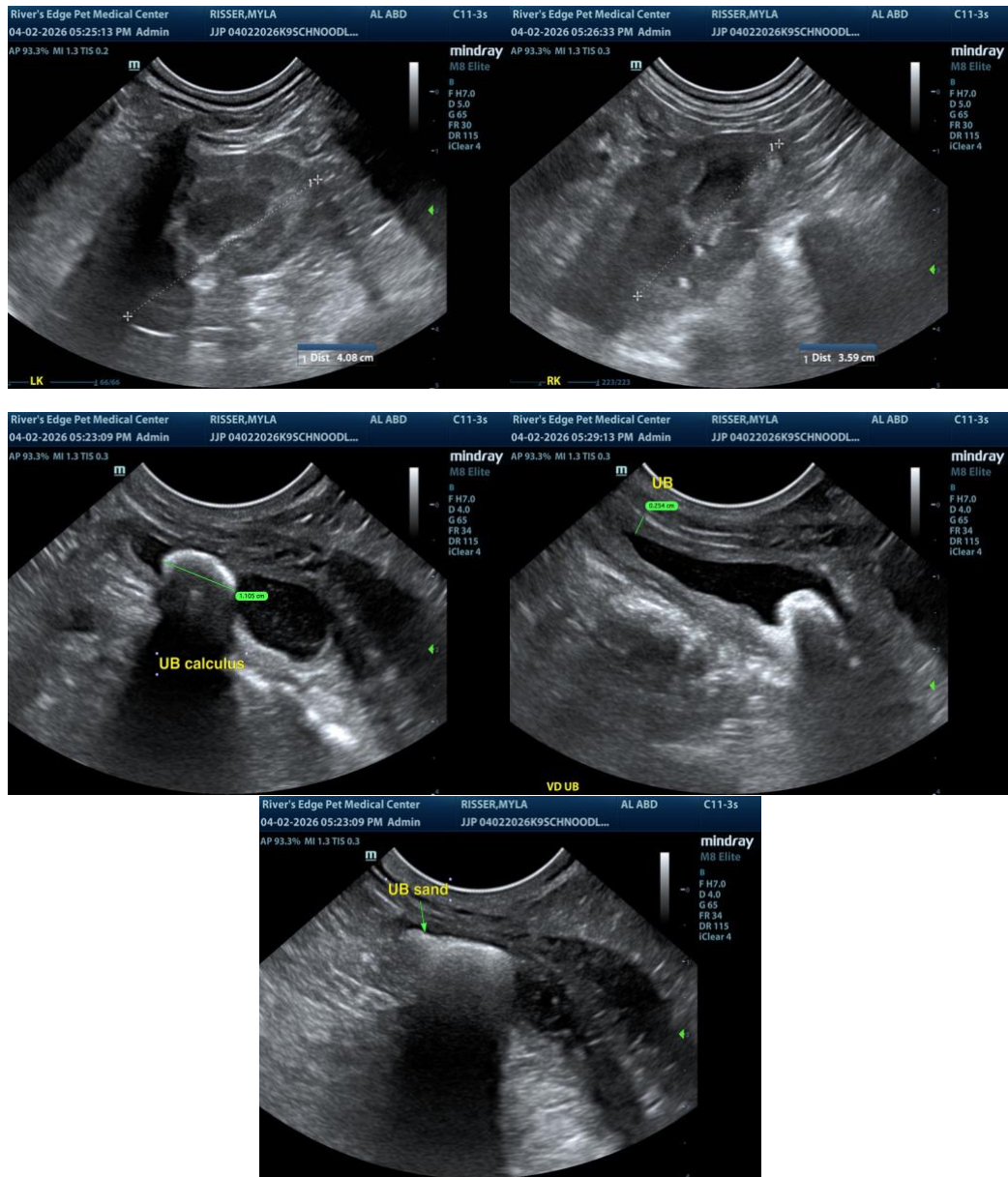
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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