A 63-year-old female with history of hypothyroidism presents to the emergency room with worsening dyspnea and fatigue of 2-week duration. Initial laboratory work showed acute kidney injury with hyperkalemia of 6.7 mEq/L, blood urea nitrogen of 295 mg/dL, and serum creatinine of 24.90 mg/dL. Computerized tomography of the abdomen and pelvis showed moderate to severe bilateral hydronephrosis with two proximal right ureteric obstructing calculi (1.8 and 1.6 cm) situated adjacent to each other below the ureteropelvic junction along with several right sided intrarenal calculi (Panel A; blue arrow), and numerous distal left ureteric calculi situated in a row up to the level of the left ureterovesicular junction (Panel B; blue arrow). She received emergent hemodialysis and placement of bilateral nephrostomy tubes. However, her renal function failed to recover and she remained oligoanuric requiring intermittent hemodialysis. Severe bilateral obstructive renoureteral calculi may have led to renal parenchymal damage.

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None.

**Footnote**

Conflicts of Interest: The authors have no conflicts of interest to declare.