A 44-year-old male underwent live related allograft renal transplantation three years ago for stage V chronic kidney disease secondary to unknown cause. The immunosuppression was with cyclosporine, azathioprine and prednisolone and the nadir creatinine of 1.5 mg/dl was reached one week postoperatively. This remained stable for 30 months when the creatinine began to fluctuate intermittently between 1.5 mg/dl and 2.2 mg/dl. He noticed a reducible swelling in the lower third of the transplant scar that was confirmed to be an incisional hernia. Ultrasonogram showed graft hydro-ureteronephrosis. Magnetic resonance urogram revealed an incisional hernia involving the lower third of the transplant scar, containing the mid-portion of the transplant ureter and compressing the distal ureter at the neck of the hernial sac, causing hydrouroteronephrosis. At exploration, the ureter was found to be in the wall of the hernial sac compressed by the adjacent omentum. The ureter was released from the adherent sac and found to be draining freely. The hernia was repaired using a prolene mesh. After surgery, the serum creatinine returned to 1.5mg/dl and a follow up diuretic renogram showed free drainage. Ureteral obstruction is a known complication after renal transplantation, often resulting in obstructive uropathy. This requires re-do reimplantation, percutaneous diversion, or dilatation and stenting. Ureteroinguinal hernias are rare, with about 130 cases reported in the world literature 1. Sliding inguinal hernias containing the ureters have been reported in renal allografts with six reports in literature 2. We report a case of obstructive uropathy secondary to ureteral herniation into an incisional henia sac following renal allograft transplantation. To our knowledge this is the first such report in medical literature. 1. Michelle Elizabeth Brand, MD, Steven Brooks, CST, CFA, Karen Brooks-Searle, MD, Robert M. Esterl, Jr., MD. Ureteroinguinal hernia: a rare cause of ureteral obstruction. Case report March 2006, surgicalroundsonline.com. 2. Leandro H. Otani, MD, Shri K. Jayanthi, PhD, Rodrigo S. Chiarantano, MD, Andre M. Amaral, MD, Marcos R. Menezes, PhD and Giovanni G. Cerri, PhD. Sonographic Diagnosis of a Ureteral Inguinal Hernia in a Renal Transplant. J Ultrasound Med. 2008 Dec; 27(12):1759-65.