**Proteinuria on Urinalysis at the Emergency Department**

**Follow-up in Primary Care**

Your patient has had a urine dipstick test at the Royal Hospital for Children which has shown proteinuria (2+ or more of protein). **We have requested they hand in a repeat urine sample 1-2 weeks after their attendance at their GP surgery to ensure this has resolved.**

**As per local renal guidelines, we recommend the following:**

* Please send a formal urine sample for a protein:creatinine ratio to the lab. (This is more accurate than a urinalysis). This should be done 1-2 weeks after the initial sample obtained in ED.
* This should be sent in a universal container and can be requested under biochemistry lab requests.
* To be most useful it is best to have 2 consecutive early morning urine tests in a 2-week period at the GP practice.
* Please refer to paediatric nephrology outpatients as per your usual referral platform if there is a laboratory measured protein:creatinine ratio of:
	+ >20mg/mmol in an otherwise well child aged 2 years and over
	+ >50mg/mmol in an otherwise well child less than 2 year of age
* If the formal protein:creatinine ratio is >200mg/mmol at any point, please refer to nephrology outpatients urgently.

**References**

Renal guidelines for Greater Glasgow and Clyde

* <https://www.clinicalguidelines.scot.nhs.uk/ggc-paediatric-guidelines/ggc-guidelines/kidney-diseases/idiopathic-nephrotic-syndrome-in-children-management/>

This is a quality improvement initiative to improve follow-up for incidental proteinuria during times of intercurrent illness. Referral pathways are unchanged. Continue to seek renal advice as needed.