Table 3

Indications for urgent referral in those with an ACR >70 (PCR >100)

Nephrotic range proteinuria	With or without nephrotic syndrome (oedema, serum albumin <30 g/L)
Acute kidney injury or eGFR <30 ml/min/1.73m^2	Stop any nephrotoxic drugs at this stage
Haematuria	Either microscopic or macroscopic could be secondary to glomerulonephritis. Red flag referral to urology first if >50 years old and macroscopic haematuria to exclude urological malignancy (if ACR <70 and renal function normal/unchanged)
Hypertension	Malignant hypertension (>220/120 mmHg) or with end-organ damage (rising serum creatinine, heart failure, visual disturbance, headache)
Pregnancy	Those with new onset proteinuria after 20 weeks gestation or an increase >2 above baseline may be developing pre-eclampsia — discuss urgently with obstetric team
Multisystem disorder	If alarm features present suggestive of vasculitis or connective tissue disorder such as rash, joint pain, eye signs, unexplained anaemia, haemoptysis