



# Urine Total Protein : Creatinine Ratio

<b>Synonyms</b>	UTPR, PCR
<b>Clinical Indication</b>	<p>Investigation, assessment and monitoring of chronic kidney disease (NICE guidance CG107).</p> <p>Assessment of pre-eclampsia in pregnancy (NICE guidance CG62)</p> <p>Urine Total Protein:Creatinine Ratio has replaced 24hr Urine Total Protein except in a minority of patients under the care of renal and obstetric physicians.</p>
<b>Part of Profile / See Also</b>	
<b>Request Form</b>	Combined Pathology request form or ICE request
<b>Availability / Frequency of Analysis</b>	On request.
<b>Turnaround Time</b>	Same day
<b>Patient Preparation</b>	
<b>Sample Requirements</b>	
<b>Specimen Type</b>	Early morning urine preferred
<b>Volume</b>	2 ml
<b>Container</b>	 <p>White Capped Universal</p>
<b>Reference Range &amp; Units</b>	<p>Normal: less than 15 mg/mmoL</p> <p>Reference: Renal Association Guidelines Proteinuria.</p>
<b>Interferences</b>	
<b>Interpretation &amp; Clinical Decision Value (if applicable)</b>	<p>Interpret in line with local renal (CKD) guidelines.</p> <p>Routine referral: UTPR <math>\geq</math>100 mg/mmoL or <math>\geq</math>50 mg/mmoL with microscopic haematuria.</p> <p>Urgent referral: Heavy proteinuria (<math>\geq</math>300 mg/mmol) with low serum albumin (nephrotic syndrome).</p> <p>Assessment of proteinuria in pregnancy: significant proteinuria is defined as UTPR &gt; 30 mg/mmol. If patient is diabetic then a 24hr urine collection to assess severity of proteinuria is recommended.</p>
<b>References</b>	NICE guidance CG107 and NICE guidance CG62
<b>Test code</b>	UPCR
<b>Lab Handling</b>	Aliquot sample in to RT30 tube and centrifuge the aliquot before analysis.

Urine samples are stable for 7 days at 2-8°C.