You are presented with a cat which gives you an index of suspicion for underlying chronic kidney disease (CKD).

**USG < 1.035**: Initiate further kidney work up.

Request a free catch urine sample, and perform a **dipstick analysis and urine specific gravity** (USG). Ask the CP representative to record how much the cat is drinking per day (in mls).

- **Creatinine < 140µmol/l - Stage 1**
  - Declare on medical summary, but no further kidney work up.
  - If still in care in 1 month, repeat USG and if still < 1.035, repeat creatinine. Consider checking blood pressure in these patients.

**USG ≥ 1.035**: Assume normal kidney function, no further kidney work up.

Declare on medical summary, but no further kidney work up. If still in care in 1 month, repeat USG and if still < 1.035, repeat creatinine. Consider checking blood pressure in these patients.

**Creatinine > 250µmol/l - Stage 3-4**: Euthanasia.

If creatinine 250-300µmol/l a work up maybe appropriate in certain cases, but this is case dependent. Please contact your FVO or the Veterinary Department to discuss further.

**Blood Pressure**:  
- **≥160mmHg**: High risk of target organ damage. Advise treatment if appropriate. Check-ups q2-4wks initially until stable, then q2 months. Declare on medical summary the presence of hypertension.  
- **<160mmHg**: Low to moderate risk of target organ damage. No treatment, but advise regular 2monthly checks, and declare on medical summary the current level of hypertension.

**Assess for proteinuria**: Obtain a cystocentesis sample from the cat.

- If there is less than 1+ protein evident on dipstick evaluation, then don’t assess for a UPCR.
- If there was protein evident on the dipstick, run an in-house sediment examination (if possible). If the infection is not resolving, consider a C&S. Once resolved, repeat dipstick evaluation and if still positive for protein, perform a UPCR.
- If in-house sediment examination is not possible and there is an index of suspicion for proteinuria, perform a UPCR:
  - < 0.2 non-proteinuric - declare on medical summary but no treatment.
  - > 0.4 proteinuric - discuss euthanasia.
  - 0.2-0.4 borderline proteinuric - re-test in 2 weeks, if still borderline consider euthanasia.

**Sub-stage the kidney disease**

- If the cat is confirmed FIV positive, and has underlying CKD, we would advise contacting the FVO/Veterinary Department for guidance.
- If the cat is found to have CKD with concurrent marked anaemia, we would also advise euthanasia.
- If the cat has stage 2 kidney disease and significant comorbidities, please contact your FVO or the Veterinary Department to discuss this further.
- We would recommend that cats diagnosed with CKD are placed on a prescription diet for CKD, and have repeat USG +/- bloods q2months (whilst still in CP care). If marked deterioration is present then euthanasia needs to be considered on welfare grounds.