## PROTEINURIA (PROTEIN IN URINE)



CLIENI	NAME:
	Submit the Client Information Questionnaire with this form
1.	How long has this abnormality been present? years
2.	Has a specific cause for the proteinuria been found? no yes, give details
3.	Give the date and results of the most recent urinalysis: a. protein b. Red blood cells (RBCs) c. White blood cells (WBCs) d. Protein/creatinine ratio
4.	Give the dates and results of the most recent kidney function tests:  a. BUN  b. Serum creatinine
5	i. If any of the following urinary tests have been completed, give the date and result a. Microalbumin b. 24-hr. protein c. 24-hr. creatinine clearance d. Other:
5.	Is client taking any medication? (accurate name, dosage, and reason)
6.	Does client have any other health issues? (additional questionnaires may be required)

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