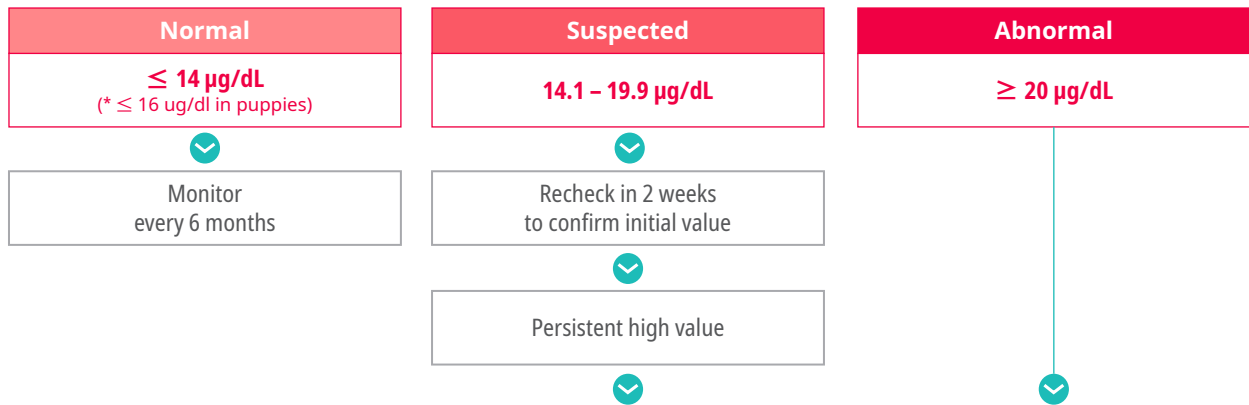


Vcheck SDMA Diagnostic Algorithm



Check other evidences of low GFR ¹		
Clinical sign	Biochemistry	Complete urinalysis
<ul style="list-style-type: none"> · Polyuria/polydipsia · Inappetence · Lethargy · Weight loss 	<ul style="list-style-type: none"> · BUN ↑ · Creatinine ↑ · Phosphorus ↑ 	<ul style="list-style-type: none"> · Urine specific gravity (USG) · Urine protein:creatinine (UPC) ratio · Urine sediment · Diagnostic imaging

IRIS Staging of CKD (modified 2019)²

CKD Staging should be based on fasting creatinine or SDMA concentration or both measured (recommended) on at least 2 occasions in a hydrated and stable patient, preferably after 12h of fasting with free access to water.

IRIS International Renal Interest Society CKD Staging	Stage 1 (No azotemia)	Stage 2 (Mild azotemia)	Stage 3 (Moderate azotemia)	Stage 4 (Severe azotemia)
CANINE				
Creatinine mg/dL (μmol/L)	< 1.4 (< 125)	1.4 – 2.8 (125 - 250)	2.9 – 5.0 (251 - 440)	> 5.0 (> 440)
SDMA μg/dL	< 18	18 - 35	36 - 54	> 54
UPC ratio	< 0.2 (Non-proteinuric) 0.2–0.5 (Borderline) > 0.5 (Proteinuric)			
Blood pressure	< 140 (Normotensive) 140-159 (Prehypertensive) 160-179 (Hypertensive) ≥ 180 (Severely hypertensive)			
FELINE				
Creatinine mg/dL (μmol/L)	< 1.6 (< 140)	1.6 – 2.8 (140 - 250)	2.9 – 5.0 (251 - 440)	> 5.0 (> 440)
SDMA μg/dL	< 18	18 - 25	26 - 38	> 38
UPC ratio	< 0.2 (Non-proteinuric) 0.2–0.4 (Borderline) > 0.4 (Proteinuric)			
Blood pressure	< 140 (Normotensive) 140-159 (Prehypertensive) 160-179 (Hypertensive) ≥ 180 (Severely hypertensive)			

*In case of discrepancies in the interpretation of creatinine and SDMA, follow the result indicating a higher stage, and set the treatment methods accordingly.

Reference: 1. Sparkes, A. H., Caney, S., Chalhoub, S., et al. (2016) ISFM consensus guidelines on the diagnosis and management of feline chronic kidney disease. Journal of Feline Medicine and Surgery 18, 219-239 2. IRIS (International Renal Interest Society) Staging of CKD (Modified 2019).