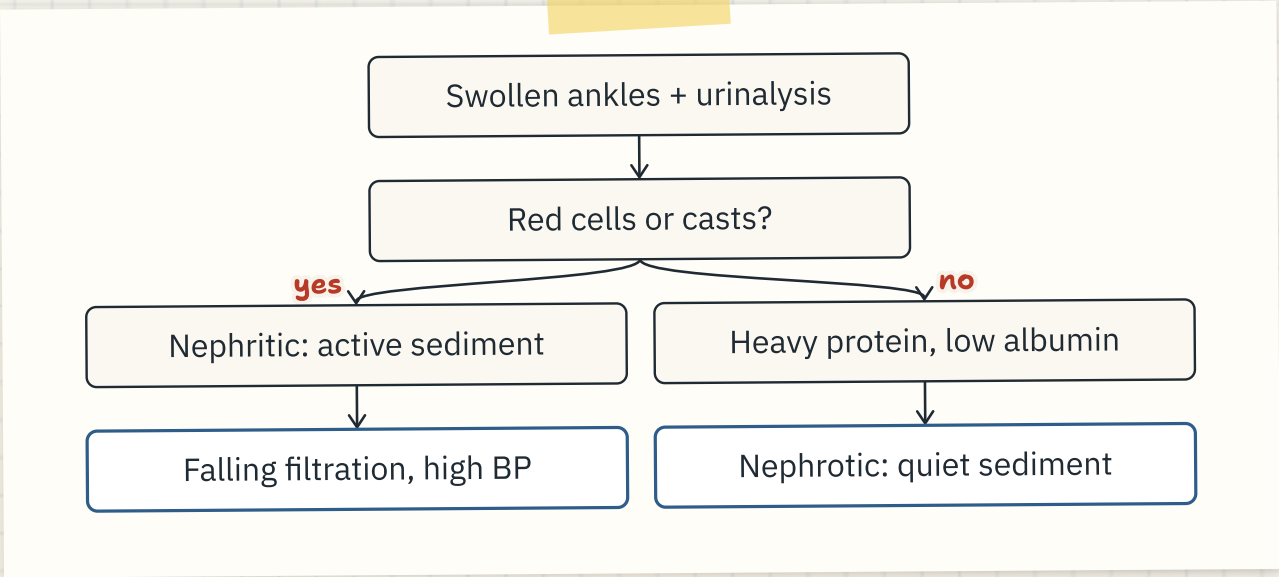
Nephritic vs nephrotic

Read the urinalysis first



Step by step

1. Red cells or casts in the urine?
2. Heavy protein, low albumin, bland urine: nephrotic
3. Blood, high pressure, falling filtration: nephritic
4. Then match the cause and the C3 clue

	Nephrotic	Nephritic
Problem	Protein leak	Inflammation
Protein	3.5 g/day or more	Variable, less
Sediment	Quiet	Red cells, casts
Oedema	Classically eyes, genitals	Often legs; face in some children
Filtration	Not the defining issue	Falls

Nephrotic versus nephritic

Rule of thumb

Nephrotic: heavy protein, quiet sediment

Nephritic: active sediment, falling filtration

C3: low in PSGN, normal in IgA, C3 and C4 low in lupus

Exam traps

- Features overlap: heavy protein can come with blood in the urine.
- IgA nephropathy is nephritic, with a normal C3.
- Membranous nephropathy is mainly an adult disease; minimal change is the commonest cause in children.

Nephritic vs nephrotic syndrome: urinalysis, protein loss and causes

Video, written lesson, practice question and sources: medservatory.com/usmle-step-2-ck/nephrology-electrolytes/nephritic-vs-nephrotic-syndrome-urinalysis-proteinuria-causes

For exam study only, not medical advice. Follow local guidelines and your lab's ranges.
© 2026 Medservatory, a project of ADMR Solutions Ltd. Free to print and share for personal study.