

A 45-year-old male presents with persistent fatigue, decreased appetite, and occasional nausea. He reports noticing foamy urine and increased frequency of urination, especially at night. The patient has a history of hypertension and diabetes, both poorly controlled. Physical examination reveals mild swelling in his ankles and feet. Laboratory tests show elevated serum creatinine (2.8 mg/dL) and blood urea nitrogen (45 mg/dL). Urinalysis indicates the presence of protein. Renal ultrasound reveals bilateral small, echogenic kidneys. The patient is advised to strictly control his blood pressure and blood sugar, started on an ACE inhibitor, and referred to a nephrologist for further management and monitoring of kidney function.