Introduction: Transient proteinuria in the absence of underlying renal disease was detected in children with an acute febrile illness. Proteinuria resolves spontaneously after cessation of causal factor. This study was designed to identify the association of transient proteinuria with fever.

Materials and Methods: Two hundred thirty children with fever who referred to hospital were studied. Proteinuria was noted only in children whose fever was higher than 38°C. Patients with renal disease were excluded. The blood sample test and urine analysis was done for each patient. To determine whether the proteinuria was persistent in patients with proteinuria, a urine sample was obtained within one week after recovery of the febrile episode.

Results: Transient proteinuria was detected in 19 of 230 children (8.26%). 47.4% were male and 52.6% were female. Ages ranged from 3 months to 5.5 years and whose temperatures ranged from 38.2-40.5°C. The most common clinical diagnosis for patients with proteinuria was gastroenteritis, viral infection and pneumonia.

Conclusion: Prevalence of transient proteinuria was 8.26% in febrile children. Gastroenteritis, viral infection and pneumonia were the most common causes.