



**ADULT MEDICAL
AM-17**

HYPERKALEMIA

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Last Revision:
12-5-2018

History and Physical:

Historical Findings	Physical Findings
<ul style="list-style-type: none">History of renal failure/dialysisSevere hyperglycemia/DKAExcited Delirium Syndrome	<ul style="list-style-type: none">General weaknessNausea/VomitingAMSCan progress to hemodynamic instability

Assessment:

- Medical Assessment
- Differential Diagnoses: Ventricular tachycardia, ACS/MI, Overdose, Withdrawals, Unknown Etiology
- Classic ECG changes seen in hyperkalemia are peaked T waves, QRS widening or unstable bradycardia
- Initiation of treatment requires **CLINICAL CONCERN AND ECG CHANGES**

Clinical Management Options:

Interventions	Pharmacology
<ul style="list-style-type: none">ECGVascular access	<ul style="list-style-type: none">Calcium Chloride 1gm IV/IOSodium Bicarbonate 100mEq IV/IOAlbuterol 2.5mg continuously<ul style="list-style-type: none">Max 15mg

Considerations:

- Continuously monitoring EKG and anticipate cardiac arrest. Repeat 12-lead 5 minutes after medication administration