Hyperkalemia With ECG Changes

Emergency membrane stabilization and potassium shift

Electrolytes & ABG | PHYSICIAN REFERENCE

Immediate

- IV calcium for significant ECG changes to stabilize myocardium; it does not lower serum potassium.

Shift K intracellularly

- Insulin with glucose; nebulized beta-agonist can be adjunctive. Bicarbonate may help selected patients with significant metabolic acidosis.

Remove K

- Diuresis, potassium binders in selected settings, or dialysis when severe/refractory or with renal failure. Recheck potassium and glucose.

Clinical safety note

Use this as a memory aid, not a prescription. Verify current guidelines, local protocols, contraindications, renal/hepatic dosing, pregnancy status, interactions and patient-specific factors before treatment.