

Potassium Chloride – ITU

CAUTION: High Administration Risk Rating		
Form & Storage	Potassium Chloride strong ampoules containing 2mmol potassium and 2mmol chloride per ml (20mmol potassium and 20mmol chloride per 10mL ampoule)	Concentrated potassium ampoules must be stored in the Controlled Drug press.
Reconstitution	Ampoules: Already in solution. MUST be further diluted before administration. Bolus injection can be <u>fatal</u> .	
Compatibility & Stability	Sodium Chloride 0.9% Glucose 5% (may cause a decrease in the plasma-potassium concentration)	
Administration	<p><u>Central IV Infusion ONLY</u></p> <p>Dilute 20-40mmol (10-20mL) in 100mL maintenance fluid, and administer over 1-2 hours, with ECG monitoring.</p> <p>All potassium infusions must be thoroughly mixed before administration. If adding concentrated potassium to an infusion bag, it is essential to ensure careful and thorough mixing by inverting repeatedly as the potassium chloride solution is 'heavier' than the infusion fluid.</p> <ul style="list-style-type: none"> ○ Rate control is essential. Administer using a rate-controlled infusion pump. ○ DO NOT EXCEED a rate of 20mmol per hour due to risk of asystole. 	
Monitoring	<ul style="list-style-type: none"> • ECG monitoring required 	
Extravasation	Because of risk of thrombophlebitis, solutions containing >30mmol/L should be given via the largest vein available.	
Additional Information	If magnesium levels are low, it may not be possible to correct potassium levels without first correcting magnesium.	

This information has been summarised to act as a guide for those administering IV medication. The monograph should be used in conjunction with the drug data sheet and BNF for information on dose, adverse effects, cautions and contra-indications. Further information is available from pharmacy on 22142 or 22546.