

# Hyperkalemia

## Definition

Serum potassium > 5.5mEq/L, associated with lethal arrhythmias and hemodynamic compromise.

## History/Physical Exam

Hx of renal failure, rhabdomyolysis, burns, potassium-sparing diuretics, NSAIDs,  $\beta$ -blockers.

Often presents with fatigue, weakness, or paresthesia. May present with paralysis, dyspnea, or chest pain.

## Key 12-Lead Features

Flattened P waves, prolonged PR intervals, borderline widened QRS complexes and pointed, narrow, and tall tented T waves.

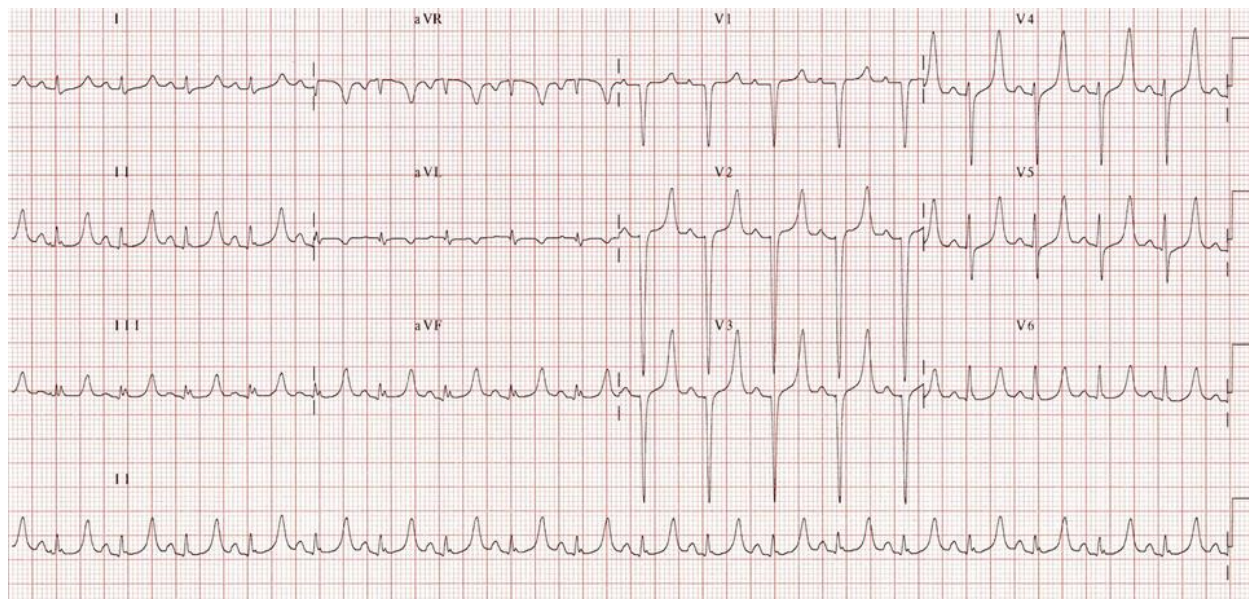
May progress to bradycardia, bizarre and wide QRS complexes, or sine waves.

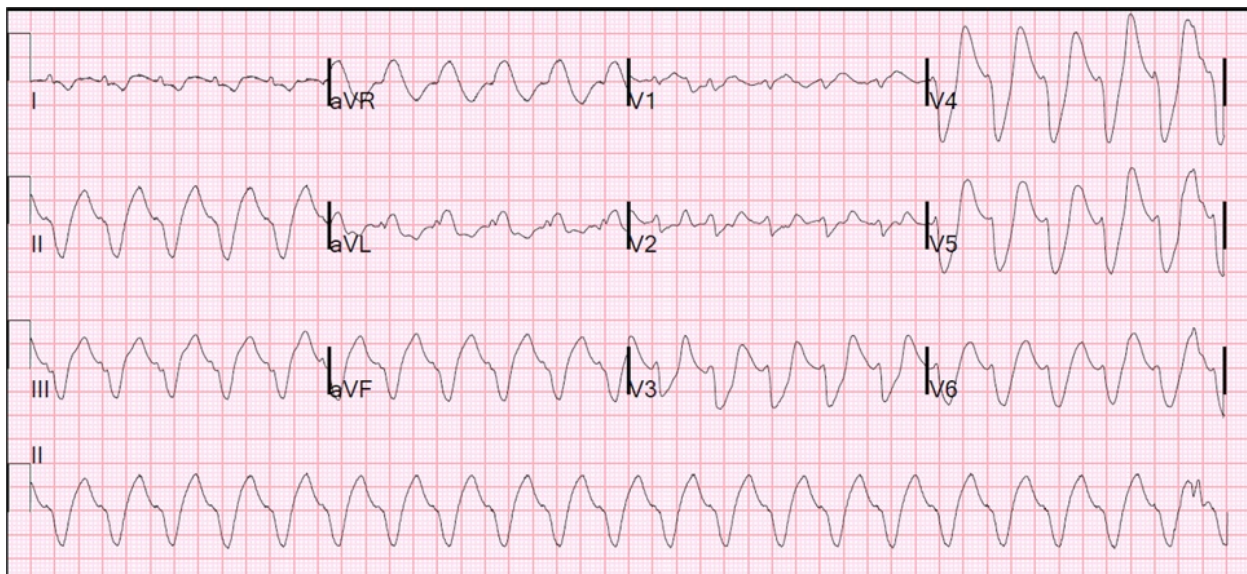
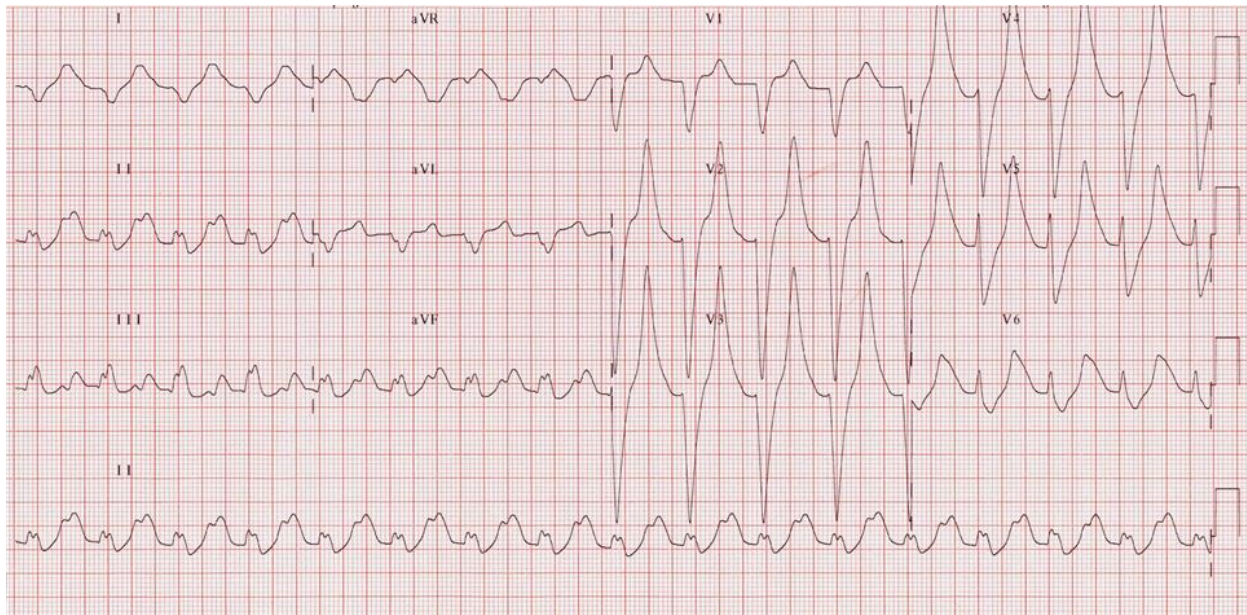
## Key Treatment Points

If patient is in arrest, front-load with Calcium Chloride and Sodium Bicarbonate

Salbutamol - 10-20mg nebulized may reduce serum K+ 0.5-1.5mEq

## 12 Lead ECG Samples





[Further Reading](#)

## References

Heidari, S. F. (2016). Life-Threatening Severe Hyperkalemia Presenting Electrocardiographic Changes. *Journal of Intensive and Critical Care*, 02(03). doi:10.21767/2471-8505.100045.

