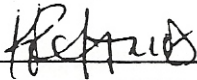


Subject: Scope of Practice/Procedure – Paramedic  
**Monitoring Potassium Chloride (KCl)**

Associated Policies:

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- I. Actions
  - A. Maintains electrolyte balance.
  - B. Regulates nerve conduction and muscle contraction, especially cardiac.
  - C. Participates in carbohydrate utilization and protein synthesis.
- II. Indication
  - A. Treatment of potassium deficiency.
- III. Contraindications
  - A. Renal failure.
  - B. Hyperkalemia (high potassium).
- IV. Adverse Effects
  - A. Cardiovascular: dysrhythmias, especially bradycardias, cardiac arrest.
  - B. Respiratory: depression/arrest.
  - C. Gastrointestinal: nausea/vomiting, diarrhea, abdominal pain.
  - D. Neurological: paresthesias of extremities, muscular paralysis, confusion.
  - E. Local pain with rapid infusion.
- V. Administration
  - A. Infusions containing KCl may only be monitored by EMT-P's. KCl may not be started or added to an IV solution.
  - B. Maximum concentration of KCl that can be monitored is less than or equal to 40 meq/l of IV solution, with rate of administration not to exceed 10 meq/hour.
- VI. Precautions
  - A. Monitor ECG rhythm to detect dysrhythmias. Potassium toxicity is manifested by peaked in T waves, loss of P wave.
  - B. Monitor IV site as infiltration may cause necrosis.
  - C. If patient complains of burning or irritation at the insertion site, the IV should be checked for patency and the infusion rate slowed.
  - D. Monitor respiratory rate.

Approved: 

Approved as to Form: 