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|  | 1703 | Potassium Chloride Infusion |
| Nor-Cal EMS Policy & Procedure Manual | | Treatment Guidelines |
| Effective Date: 05/01/2021 | | Next Revision: 05/01/2024 |
| Approval: Jeffrey Kepple MD – MEDICAL DIRECTOR | | SIGNATURE ON FILE |

Authority

Health and Safety Code Division 2.5, California Code of Regulations, Title 22, Division 9.

Signed transfer order from the transferring physician must provide for maintaining a specified infusion rate via pump or in line flow control device (Dial-a-flow) that the Paramedic is trained and comfortable operating

Prior to transport confirm:

The Potassium shall be started prior to transport
 The '5 rights' of medication administration
 Verify infusion rate

Potassium chloride concentration may not exceed **40meq per liter** of IV fluid. Infusion rate may not exceed **10meq per hour**.

Required during transport:

Continuous ECG, SPO₂, required with vital signs being obtained, IV site examined for infiltration at a minimum of every 15 minutes throughout the duration of the transfer.

If Paramedic feels that level of care is out of his/her ability to safely transport, they may refuse transfer.

If medication administration is interrupted (infiltration, accidental disconnection, malfunctioning pump, etc.), the paramedic may restart the line and continue potassium chloride as delineated in the transfer orders.

If a pump failure occurs and cannot be corrected, the paramedic is to discontinue the potassium chloride infusion and **consult physician**.