

ACTIVE LEARNING TEMPLATE: *Medication*

STUDENT NAME _____

MEDICATION **Potassium**

REVIEW MODULE CHAPTER _____

CATEGORY CLASS **Mineral and Electrolyte Replacement/Supplement**

PURPOSE OF MEDICATION

Expected Pharmacological Action

Maintain acid-base balance, isotonicity, and electrophysiologic balance of the cell.

Activator in many enzymatic reactions; essential to transmission of nerve impulses; contraction of cardiac, skeletal, and smooth muscle; gastric secretion; renal function; tissue synthesis; and carbohydrate metabolism

Therapeutic Use

Treatment/prevention of potassium depletion.

Complications

CNS: confusion, restlessness, weakness.

CV: Arrhythmias, ECG changes.

GI: abdominal pain, diarrhea, flatulence, nausea, vomiting (tablets, capsules only) GI ulceration, and stenotic lesions.

Neuro: paralysis, and paresthesia.

Medication Administration

Oral

Contraindications/Precautions

Contraindicated in: Hyperkalemia; Severe renal impairment; Untreated Addison's disease; Some products may contain tartrazine (FDC yellow dye #5) or alcohol; avoid using in patients with known hypersensitivity or intolerance; Hyperkalemic familial periodic paralysis.

Use Cautiously in: Cardiac disease; Renal impairment; Diabetes mellitus (liquids may contain sugar); Hypomagnesemia (may make correction of hypokalemia more difficult); GI hypomotility including dysphagia or esophageal compression from left atrial enlargement (tablets, capsules); Patients receiving potassium-sparing drugs.

Interactions

Drug-Drug: Use with potassium-sparing diuretics or ACE inhibitors or angiotensin II receptor antagonists may lead to hyperkalemia.

Anticholinergics may increase GI mucosal lesions in patients taking wax-matrix potassium chloride preparations.

Nursing Interventions

Assess for signs and symptoms of hypokalemia which include weakness, fatigue, U wave on ECG, arrhythmias, polyuria, polydipsia) and hyperkalemia.

Evaluation of Medication Effectiveness

Prevention and correction of serum potassium depletion.

Cessation of arrhythmias caused by digoxin toxicity

Client Education

Explain purpose of the medication and the need to take as directed, especially when concurrent digoxin or diuretics are taken.

Emphasize correct method of administration. GI irritation or ulceration may result from chewing enteric-coated tablets or insufficient dilution of liquid or powder forms.

Avoid salt substitutes or low-salt milk or food unless approved by health care professional.

Advise to read all labels to prevent excess potassium intake. Advise patient regarding sources of dietary potassium. Encourage compliance with recommended diet.

Instruct to report dark, tarry, or bloody stools; weakness; unusual fatigue; or tingling of extremities. Notify health care professional if nausea, vomiting, diarrhea, or stomach discomfort persists. Dosage may require adjustment.

Emphasize the importance of regular follow-up exams to monitor serum levels and progress.