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Flowchart for low potassium

(GP)

Low potassium
(Ref range in adults 3.6 - 5.3 mmol/l)

Check drugs

Diuretics - thiazide / loop
Laxative (chronic abuse)
Salbutamol
Theophylline
Insulin
Nifedipine
Penicillins

(There are others, so if in doubt discuss with Medicines Information in Pharmacy)

Check simple serum biochem

Bicarbonate
Magnesium

(Acidosis may suggest renal tubular acidosis)
(Low Mg causes renal loss of K)

Look for possible routes of loss eg fluid from gut

Check

Urine potassium (random, off any drugs causing hypokalaemia)

Urine potassium > 20 mmol/l suggestive of renal loss

Consider referral for more specialised tests

Urine screen for laxatives
Dexamethasone Suppression Test
Renin / aldosterone
Urine steroid profile
Urine biochem - for tubular disorder
Gut hormones

Consider potassium supplements if there is established potassium depletion with muscle weakness or on digoxin. Dose of Sando K depends on serum potassium level and renal function. If serum potassium < 2.0 mmol/l then will need iv therapy