

A safer next potassium decision

Clinical takeaway | HEART RESERVE | HR6

Evelyn · CONFIRM & RESPOND

Triage the patient, verify uncertain results and name the result owner. Severe or symptomatic hyperkalemia needs emergency assessment; a reassuring ECG cannot exclude danger.

Sofia · FIND CONTRIBUTORS & PRESERVE BENEFIT

Review why the medicine is indicated, remove reversible contributors, individualize potassium management and reassess. If a hold is needed, document a deliberate review and restart decision.

Margaret · APPRAISE EVIDENCE & CLOSE THE LOOP

Keep biochemical efficacy, treatment optimization and clinical outcomes separate. Match the binder to safety and daily life, and make every test and medication reassessment someone's responsibility.

Before you close the encounter

Confirm the current result and clinical stability. Review the medication indication and contributors. Specify the next test and date, named result reviewer and backup, patient contact and urgent escalation route. For a held medicine, document who reassesses restart and the criteria.

Use current local emergency protocols and product-specific labels. This educational tool is not a dosing protocol. Sources: UKKA 2023; KDIGO 2024; AHA/ACC/HFSA 2022; current US binder labels. Full references are in the learner guide.