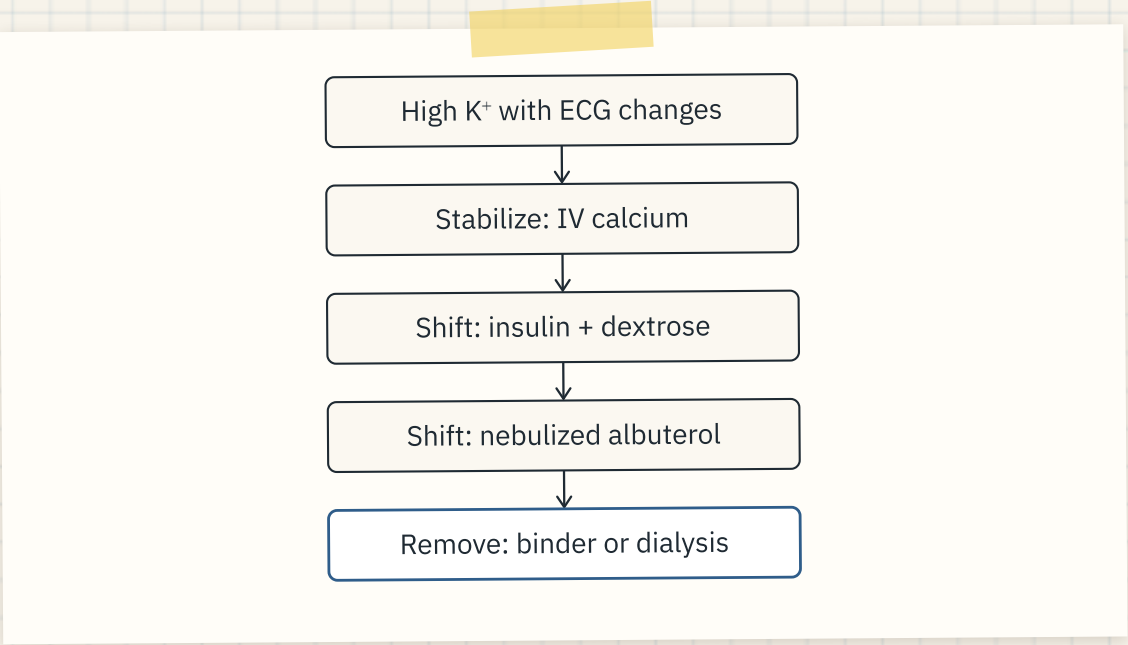
Hyperkalemia: ECG and treatment order

Stabilize, shift, remove



Step by step

1. Peaked T waves
2. P flattens, PR lengthens
3. QRS widens, blocks
4. Sine wave
5. VF or asystole

Step	Treatment	Key point
Stabilize	IV calcium gluconate	Minutes; lasts 30–60 min; no K^+ lowering
Shift	Insulin + dextrose; albuterol	Albuterol is an adjunct only
Remove	Binder (SZC); dialysis	Dialysis is most effective

Emergency order

DEXTROSE IN THE INSULIN BOLUS

`50 mL × 50% = 25 g`

Alternative: 250 mL × 10% = 25 g; 10 units regular insulin IV in both

Rule of thumb

Stabilize, shift, remove

Calcium buys time; it does not lower potassium

Glucose checks for up to 6 h after insulin

Exam traps

- A near-normal ECG does not exclude sudden arrest.
- Calcium does not lower potassium: insulin follows.
- Albuterol is never the only treatment.
- Watch for hypoglycemia after insulin.

Hyperkalemia ECG changes and the emergency treatment order

Video, written lesson, practice question and sources: medservatory.com/usmle-step-2-ck/nephrology-electrolytes/hyperkalemia-ecg-changes-emergency-management

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