



Supply and Management of Potassium Ampoules Procedure

1. Purpose

The use of Intravenous potassium across the WA Country Health Service (WACHS) Midwest is conducted in accordance with the WA Health [Mandatory Standard for intravenous potassium](#).

The management of hypokalaemia with intravenous potassium is described in the WA Health MP 0131/20 [High Risk Medication Policy](#) and the WACHS [Potassium Supplementation Policy](#).

The purpose of this procedure is to enhance the safe use, storage and distribution of intravenous potassium chloride.

Potassium chloride ampoules are only available at two sites in the Midwest. These are Geraldton Hospital and Carnarvon Hospital. All other sites in the Midwest are only to stock premixed bags of potassium chloride.

This procedure limits the availability of potassium ampoules and provides guidance to accessing these during and outside the pharmacy opening hours at the Geraldton Hospital and Carnarvon Hospital.

Potassium ampoules are not on imprest in any patient care area in the Geraldton and Carnarvon hospitals and are always stored in the pharmacy.

2. Procedure

Standard premixed bags containing intravenous potassium chloride are to be utilised whenever possible in all areas of the hospital.

Prescription of non-standard potassium chloride solutions is permitted only in exceptional circumstances and with the agreement of the supervising consultant responsible for that patient. The name of the Consultant on the ward or Senior Medical Officer (SMO) in the Emergency Department must be recorded on an intravenous [MR176 WACHS Intravenous Fluid Treatment](#) chart (i.e. 'approved by Dr given name, surname'). It should clearly identify the intravenous solution, volume and the amount of potassium in mmol.

Potassium ampoules are only to be sourced from the pharmacy if a standard premixed bag is not able to be used. The potassium ampoules are to be provided for a specific patient and the exact amount prescribed is to be supplied. Any unused ampoules, due to a change in dose are to be returned directly to the pharmacy immediately upon cessation of therapy.

Details of each issue are to be recorded on a tracking card ([Appendix A](#)) that is to be kept with the potassium ampoules in the pharmacy or pharmacy unit.

3. Roles and Responsibilities

For Site with Staffed Pharmacy Departments

During pharmacy hours, the pharmacy staff are responsible for the distribution of ampoules after confirmation that the standard premixed bag is inappropriate. The issuing pharmacist must sign the tracking card.

Outside pharmacy hours, the After-Hours Nurse Manager (AHNM) is responsible for the distribution of the ampoules after confirmation that a standard premixed bag is inappropriate and in accordance with the WA Health Mandatory Standard for Intravenous Potassium. All issued stock is to be recorded on the tracking card and signed for by the AHNM in addition to the standard after hours recording requirements.

Only the dose required at the time is to be issued to the ward. No extra stock is to be issued.

All staff are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

4. Monitoring and Evaluation

4.1 Monitoring

Monitoring compliance with this document is carried out by the following:

- At the time of supply there will be oversight by a clinical pharmacist or After-Hours Nurse Manager.

4.2 Evaluation

- Regular auditing of potassium supply with a target of 100% compliance with the current policy for handling of potassium ampoules.
- The number of clinical incidents relating to intravenous potassium target is zero.

5. Compliance

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to Section 26 of the [Health Services Act 2016](#) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies and procedures is mandatory.

6. References

1. Government of Western Australia, Health Department. [Mandatory Standard for intravenous potassium](#). Perth: 2020
2. Government of Western Australia, Western Australian Country Health Service. [Handling and Supply of Potassium Ampoules Procedure](#). WACHS South West: 2016
3. Government of Western Australia, Western Australian Country Health Service. [Management of Potassium Ampoules Procedure](#). Albany Hospital, Great Southern: 2021

7. Definitions

Term	Definition
Potassium ampoules	Refers to ampoules or vials containing concentrated potassium solution, including potassium chloride 10 mmol in 10 mL ampoules and potassium dihydrogen 10 mmol in 10 mL vials.
Standard premixed (diluted) bags containing potassium chloride	Commercially prepared bags containing potassium chloride at concentrations no greater than 1 mmol of potassium in 10 mL. Available in various solutions (including sodium chloride, glucose and Hartman's solution).
Pharmacy	WACHS Midwest, Geraldton Hospital Pharmacy Department. WACHS Gascoyne Carnarvon Hospital Pharmacy Department.
Pharmacy Hours	Geraldton: Monday to Friday 8am to 4 pm, closed weekends and public holidays. Carnarvon: Monday to Friday 8am to 4.30pm, closed weekends and public holidays.

8. Document Summary

Coverage	WACHS Midwest
Audience	Clinical staff
Records Management	Clinical: Health Record Management Policy
Related Legislation	Medicines and Poisons Act 2014 (WA) Medicines and Poisons Regulations 2016 (WA)
Related Mandatory Policies / Frameworks	MP 0131/20 High Risk Medication Policy Clinical Governance, Safety and Quality Framework
Related WACHS Policy Documents	Medication Prescribing and Administration Policy High Risk Medications Procedure Potassium Supplementation Policy Specialised Medication – Intravenous Phosphate Supplementation in Adults Guideline
Other Related Documents	Nil
Related Forms	MR176 WACHS Intravenous Fluid Treatment
Related Training Packages	Nil
Aboriginal Health Impact Statement Declaration (ISD)	ISD Record ID: 2132
National Safety and Quality Health Service (NSQHS) Standards	4.01, 4.02, 4.14, 4.15
Aged Care Quality Standards	Nil
National Standards for Mental Health Services	Nil

9. Document Control

Version	Published date	Current from	Summary of changes
3.00	13 June 2023	13 June 2023	<ul style="list-style-type: none"> • Minor changes to reflect the WA Health Mandatory Potassium Policy • Minor changes to wording in the Appendix

10. Approval

Policy Owner	Regional Director, Midwest
Co-approver	Executive Director Clinical Excellence
Contact	Regional Chief Pharmacist, Midwest
Business Unit	Pharmacy
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This document can be made available in alternative formats on request.

Appendix A: Potassium containing Ampoule Tracking Sheet (Potassium Chloride 10 mmol / 10 mL)

Standard premixed bags containing potassium chloride are to be utilised in preference to non-standard solutions requiring preparation in all areas. May be authorised by Pharmacist or After Hours Nurse Manager only.

DATE	TIME	WARD	PATIENT (Full Name and URMN)	MEDICATION ORDER (Including fluid type and volume)	QTY of Amps	Authorised By: Name, Signature / Designation	Prescriber of Ampoules