



7880
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ISO 15189:2012

Potassium

Synonyms

K+

Clinical Indication

Diagnosis of hypokalaemia and hyperkalaemia or monitoring patients at risk of developing hypokalaemia or hyperkalaemia.

Part of Profile / See Also

Urea and Electrolytes (UE)

Request Form

Combined Pathology manual Blood form or ICE request

Availability / Frequency of Analysis

On request

Turnaround Time

Same day

Patient Preparation

Sample Requirements

Specimen Type

Serum and plasma

Volume

2 ml

Acceptable Containers



Yellow top (SST) tube



Green top (lithium-heparin) tube



paediatric orange top (lithium-heparin)



paediatric green top (lithium-heparin)

Plain serum samples may also be used.

Reference Range & Units

Age	Potassium (mmol/L)
Neonate (< 1 month)	3.4 - 6.0
1 - 12 months	3.5 - 5.7
1 - 16 years	3.5 - 5.0
Adult	3.5 - 5.3

Plasma potassium levels are slightly lower than serum potassium levels

Reference: Pathology Harmony Group, Clinical Biochemistry Outcomes, January 2011 (www.pathologyharmony.co.uk)

Interferences

Haemolysis or a prolonged delay in separation of serum from red cells can cause an artefactual increase in potassium concentration. In patients with thrombocythaemia potassium is released from platelets leading to a falsely elevated potassium.

Interpretation & Clinical

Decision Value (if applicable)

Critical Difference 14%

References

Beckman kit insert.

Test code

UE

Lab Handling

Analysed from primary tube and stored at 4°C.
Sample must be separated within 6 hours.
Serum and plasma stable for 7 days at 2-25°C.