

Supplementary Materials:

Table S1. Univariable linear regression of potassium lowering on independent variables ($n = 410$).

Parameter	Coefficient (95% C.I.)	<i>p</i> Value
Age, per 20-year increase	-0.11 (-0.21 to -0.01)	0.036
Female sex	0.00 (-0.17 to 0.17)	0.98
Obese (BMI >30 kg/m ²)	0.04 (-0.13 to 0.21)	0.67
Lean body mass, per 5 kg increase ¹	-0.00 (-0.02 to 0.01)	0.75
Diabetes mellitus	-0.04 (-0.21 to 0.13)	0.64
Active malignancy	-0.25 (-0.48 to -0.03)	0.024
High risk of malnutrition	0.03 (-0.19 to 0.325)	0.79
Chronic kidney disease	-0.13 (-0.31 to 0.05)	0.16
Chronic dialysis	0.30 (-0.04 to 0.64)	0.089
Acute kidney injury	0.07 (-0.09 to 0.24)	0.39
Cirrhosis	-0.56 (-0.92 to -0.20)	0.002
Beta-blocker use	0.08 (-0.09 to 0.24)	0.37
RAS blocker use	-0.01 (-0.18 to 0.16)	0.91

¹ Estimated by the Boer formula. Abbreviations: BMI, body mass index; RAS, renin-angiotensin system.

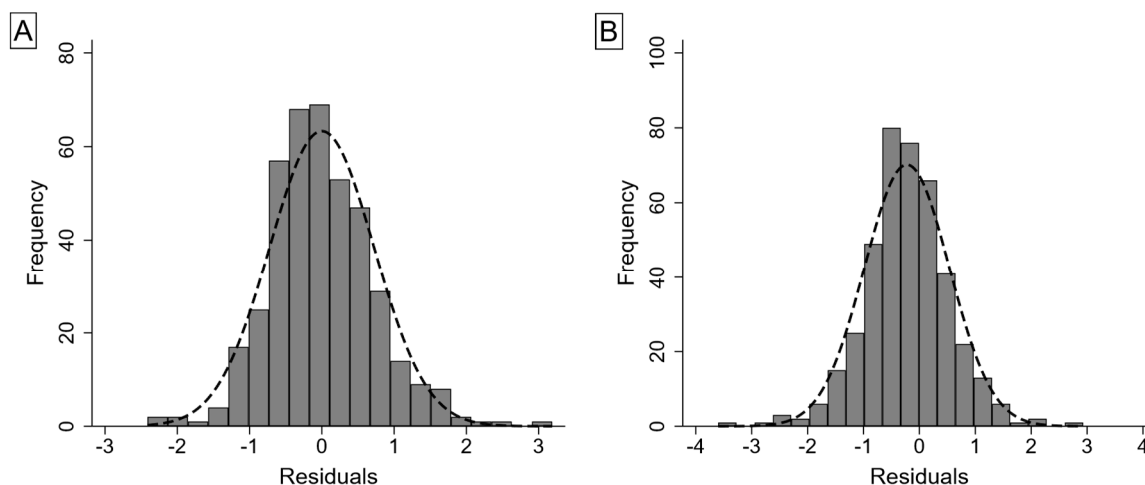


Figure S1. Histograms showing the (A) distribution of residuals from linear regression of the change in serum K⁺ (mmol/L) after insulin-glucose/dextrose treatment on baseline serum K⁺ for all patients ($n = 410$; regression equation, $y = 0.7x - 3.3$), and (B) for patients treated only with insulin-glucose/dextrose without any cotreatments ($n = 109$; regression equation, $y = 1.1x - 5.8$), with a normal distribution curve superimposed (dashed line).