



# REGIONAL ADULT PARENTERAL DRUG MONOGRAPH

GENERIC NAME  
**desmopressin**

<b>Effective Date:</b> May 2013 <b>Revised Date:</b> Nov 2024	<b>CLASSIFICATION</b> <b>Pituitary Hormone Analogue</b>	<b>OTHER NAMES</b> <b>DDAVP</b>	<b>PAGE</b> 1 of 2
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### ADMINISTRATION POLICY:

IV Bolus – May be administered by a nurse  
IV Intermittent – May be administered by a nurse  
IM Injection – May be administered by a nurse  
Subcutaneous - May be administered by a nurse

### RECONSTITUTION/DILUTION/ADMINISTRATION:

**Available as:** 4 mcg/mL-1mL (IV/IM/subcut)  
15 mcg/mL-1mL (for bleeding disorders only-IV/subcut)  
Store in Refrigerator.

**IV Bolus (for diabetes insipidus/hyponatremia adjunctive):** Undiluted or dilute in 10 mL normal saline and administer over 2 to 3 minutes

**IV Bolus (Cushing’s diagnostic test):** Undiluted and administer over 2 to 3 minutes

### IV Intermittent (bleeding disorders):

*DO NOT give IV Bolus due to potential hypotension. Administer over 10 to 30 minutes.*

Dose	Dose Preferred Diluent Volumes Bag size NaCl 0.9%
Ordered dose	50 mL

**IM/Subcutaneous:** Administer undiluted.

**Maximum Rate:** **IV Bolus:** 2 minutes  
**IV Intermittent:** 10 minutes

**Maximum Concentration:** 4 mcg/mL

### DOSAGE:

**Diabetes Insipidus:** 1 to 4 mcg/day IV/IM/subcutaneous once daily or BID  
OR  
1/10<sup>th</sup> of the maintenance intranasal dose.

**Bleeding Disorders:** 0.3 mcg/kg IV/Subcutaneous. May repeat dose if needed

**Hyponatremia (adjunctive):** 1 to 2 mcg IV/Subcutaneous every 6 to 8 hours

**Cushing’s Diagnostic test:** 10 mcg IV once

**Maximum single dose:** **Diabetes Insipidus/hyponatremia adjunctive:** 4 mcg  
**Bleeding Disorders:** 40 mcg  
**Cushing’s Diagnostic test:** 10 mcg

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**STABILITY/COMPATIBILITY:**

**Stability of Final Admixture:** 24 hours at room temperature.

**Compatibility:** Compatible with normal saline  
Unknown compatibility with Ringer’s lactate and D5W

**PRECAUTIONS, POTENTIAL ADVERSE REACTIONS:**

- Hypotension during rapid administration of large doses. Blood pressure and heart rate should be monitored during IV infusion.
- Avoid over hydration especially if being used for hemostatic effect.
- Use with caution in patients with serious cardiovascular disease.

**ADDITIONAL NOTES AND NURSING CONSIDERATIONS:**

- For hemophilia, tachyphylaxis may occur if given more often than every 48 hours.
- Pre-op desmopressin should be administered 30 minutes prior to procedure.
- There is an inverse relationship between desmopressin dosage and its antidiuretic effect
- Elderly patients: caution not to increase their fluid intake beyond that sufficient to satisfy their thirst in order to avoid intoxication and hyponatremia. May have decreased responsiveness to desmopressin in respect to its effect on water homeostatis.