



Desmopressin Administration Checklist (Children's Neuroscience Centre)

Weight (Kg)

UR NUMBER
SURNAME
GIVEN NAME
DATE OF BIRTH

Affix patient label

Please complete strictly 6 hourly

Do NOT administer Desmopressin without prior approval by Endocrine or Neurosurgery fellow or consultant

Result Reviewed		Current Weight (KG)	Serum Sodium Level (mmol/L)	Urine Output (ml/kg/hr)	Urine Specific Gravity	Desmopressin Given? Yes or No	Dose of Desmopressin Given	Next Sodium Level Due (Exact Time & Date)	Name & Signature	Designation (Dr <u>or</u> RN)
Date	Time									

Desmopressin is only to be administered by 2 accredited RN's (AUM, CNS, TSN) or parent(s) who are competent and confident, ensuring the following 3 criteria have been achieved;
 - Serum Sodium is >145mmol/L (reference range 135 – 145mmol/l)
 - Urine output exceeds 4ml/kg/hr (calculated 6 hourly)
 - Urine Specific Gravity is 1.005 or less (dilute urine output)

This is NOT a prescription chart