

# Guidelines for Over-the-Counter (OTC) and Prescription Medications

## General Guidelines

Both Over-the-Counter and Prescription medications may be required from time to time and can accompany your child to Camp as well as Campouts. Please follow the guidelines below regarding their packaging and labeling when sending medications. Once at Camp, medications are securely stored and administered by an adult designated by the Troop.

- ALL medication, OTC and prescription, must be in its original packaging (No pillboxes or non-original containers will be accepted).
- Clear labeling indicating the person for whom it is intended, dosage, and administration must be on the packaging (Do not cover any of the package labeling).
- Place ALL medication in a Ziploc bag marked with the Scout's name.
- Please complete the Prescription Medication Dosing Form and enclose it in the Ziploc bag with the medication.
- Send only enough medication for the doses to be administered during the trip.
- ***At no time is a minor permitted to carry or self-administer medication of any sort, including OTC, unless it falls under the guidelines below for Emergency Medications.***

## Emergency Medications

Rescue inhalers, EpiPens, and other similar emergency medication ARE PERMITTED to be carried on a Scout's person and CAN BE self-administered at any time. Please make certain your child understands the circumstances under which this may be necessary.

If you or your child carries emergency medications, please notify the person designated by the Troop to administer medications and explain the underlying medical condition. Instruct your child to also notify this designee of any and all possible circumstances requiring emergency medications.

## As-Needed Medications (prn)

If you will be sending any medication that is only needed occasionally (headaches, indigestion, or seasonal allergies, etc.) please follow the general guidelines above for sending medications to camp. Provide clear instructions regarding dosage and circumstances under which prn medication becomes necessary.

# Prescription Medication Dosing Form

Scout Name:				Unit #:	
Dates:				Campsite:	

<b>Medication Name &amp; Dosing Information</b> <b>NOTE: List each medication separately</b>				
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<b>THIS AREA TO BE INITIALED BY ADULT GIVING MEDICATIONS</b>				
	Medications to be given around <b>Breakfast</b> (7-8 AM)	Medications to be given around <b>Lunch</b> (12-1 PM)	Medications to be given around <b>Supper</b> (6 PM)	Medications to be given at <b>Bedtime</b>
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				

	Sunday			
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				

**NOTE: If a scout is receiving more than three medications, use an additional form.**