

# *Westchester County Department of Health*

## **Children's Camp Medication Administration**



# Agenda

## **1. Types of Medications**

- **Prescription**
- **Non-prescription**

## **2. Medication Collection**

## **3. Medication Storage**

## **4. Medication Administration**

- **Written Orders**
- **Camp Health Staff**
- **Self Administration**
- **Camp Trip**
- **Epinephrine Auto-Injector Program**
- **Record Keeping**

# Prescription Medications

**Issued by a licensed prescriber (i.e., physician, dentist, podiatrist, nurse practitioner, physician assistant or special assistant, optometrist, midwife)**



# Prescription Medications

**Must be in original container and labeled with:**

- **Patient's complete name**
- **Date prescription filled**
- **Expiration date**
- **Direction for use**
- **Precautions (if any)**
- **Storage requirements (if any)**
- **Dispensing pharmacy (name & address)**
- **Name of physician prescribing medication**

# Prescription Medications

- Bulk supplies may not be maintained at camp unless in conjunction with a licensed prescriber's practice at the camp.
- Repackaging or relabeling is prohibited.

# Non-prescription Medications (over-the-counter)

- Aspirin
- Pepto-Bismol
- Calamine Lotion
- Vitamins
- Herbal preparations

# **Non-prescription Medications (over-the-counter)**

- Bulk supplies may be maintained by the camp.
- An individual's medication (sent to camp with the patient) should be labeled with his/her complete name.

# Medication Collection

- Collect prescription and OTC medications
  - Upon arrival at camp
  - Prior to departing from pick-up location (when transportation is provided by the camp)
- Cross-reference health records and rectify inconsistencies with parent/guardian and physician.
- Individual prescribed emergency medication (i.e., epi-pens, Asthma Inhalers) should be carried by the individual.



# Medication Storage

- Locked area accessible to only health director/designated staff
- Controlled substances (narcotics) and syringes must be “double-locked” (i.e., locked in a box, locked in a cabinet)
- Per product directions (i.e., refrigerated)

# Medication Administration

- Includes prescription and over-the-counter (OTC) medication
- Requires a written order from a health care provider
- Medication administration may be avoided at day camps if the schedule can be adjusted to non-camp times (parents should consult the physician)

# Written Orders

- An order from a medical provider which specifies a medication or a treatment
- Must be patient specific
- Required for all medications (prescription and OTC) that are administered by a RN, LPN or self-administered

# Written Orders

## Minimally must include:

- Patient's name and date of birth
- Name of medication
- Dosage and route
- Frequency and time
- For PRN (as needed) medications, conditions under which they should be administered
- Date written
- Prescriber's name, title and signature
- Prescriber's telephone number

# Written Orders

- Renewed annually or when there is a change in medication or dosage
- Pharmacy labels are not a substitute for written orders
- Camps may distribute generic orders for OTC medications and have camper medical providers authorize for each camper

# Example of an Order for Routine OTC/PRN Medications

Drug Name	Route (please circle preferred formulation(s))	Dosage	Schedule and Indications	Camper Health Care Provider Order		Comments
<b>Tylenol</b>	PO (chewable tabs, elixir or tabs)	Per label instructions by age/weight	Q 4 hr pm for pain or fever > _____ °F	Yes	No	
<b>Ibuprofen</b>	PO (chewable tabs, suspension, or tabs)	Per label instructions by age/weight	Q 6 hr pm for pain or fever > _____ °F	Yes	No	
<b>Robitussin</b>	PO (syrup)	Per label instructions by age/weight	Q 4 hr pm for cough	Yes	No	
<b>Pepto-Bismol</b>	PO (liquid, or chewable tabs)	Per label instructions by age/weight	Q 30 min to 1 hr pm for diarrhea (no > 8 doses/24 hr)	Yes	No	
<b>Children's Mylanta</b>	PO (chewable tabs)	Per label instructions by age/weight	BID-TID pm for stomach upset	Yes	No	
<b>Dramamine</b>	PO (chewable tabs-50mg)	Per label instructions by age/weight	Q 6-8 hrs pm for motion sickness	Yes	No	
<b>Dimetapp</b>	PO (elixir or tabs)	Per label instructions by age/weight	Q 6-8 hr pm for nasal congestion /drainage	Yes	No	
<b>Benadryl</b>	PO (elixir, chewable tabs or pills)	Per label instructions by age/weight	Q 6 hr pm for allergic reaction (hives, insect bite)	Yes	No	

# Example of a Written Order for Prescription Medications

Drug	Route	Dosage	Schedule and Indications	Comments

# Camp Health Staff

Duties and responsibilities of camp staff must not exceed individuals “scope of practice” (allowed by law through training and/or NYS licensure)

- Physician
- Nurse Practitioner (NP)
- Physician Assistant (PA)
- Registered Nurse (RN)
- Licensed Practical Nurse (LPN)
- Emergency Medical Technician (EMT)





# Medication Administration

## *Physician, NPs, and PAs:*

- Can assess patient health
- Can prescribe and administer all prescription and OTC medications

# Medication Administration

## *Registered nurse (RN)*

- Can assess patient health
- Following a patient specific order, can administer all medication
  - prescription
  - OTC
  - PRN (as needed)



# Medication Administration

## *Registered nurse (RN)*

- May not administer non-patient specific medical orders, except for:
  - anti-anaphylactic agents (i.e., epi-pens, antihistamines)
  - certain immunization agents

# Medication Administration

## *Licensed Practical Nurse (LPN)*

- Cannot assess patient health
- Must work under the direction of a physician or RN
- Can administer scheduled medications following patient specific orders
- Can administer a PRN (as needed) order, only after the LPN has conferred with a physician or RN



# Medication Administration

## *Emergency Medical Technician (EMT):*

- May only implement EMT protocols as part of an established emergency medical service (EMS) system
- Cannot administer medication
- May witness self-administration

# Medication Administration

## *First aid staff & other staff:*

- May not administer medications
- May witness self-administration

# Medication Administration

## *Self-Administration:*

- Campers may “self-administer” scheduled medications when determined to be "self-directed"
  - identify correct medication (color, shape)
  - purpose
  - dosage
  - time to be taken
  - know consequences if not taken
  - able to refuse to take if concerned
- Based on cognitive and/or emotional development, not age.

# Medication Administration

## *Self-Administration Procedures:*

- Identify and track campers that need medications
- Establish and train staff in self- administration procedure
- Staff should not remove a medication from its container because it is considered to be “administering the medication.”
- Camper confirms medication



# Medication Administration

## *Self-Administration Procedures (cont.):*

- Verify dosage/use instructions
- Return medication to storage
- Document the self-administration (i.e. camper's name, medication, amount taken, witness, date, time and dosage)

# Camp Trip

## Medication Administration

- Medication carried in original container by the trip leader or designee
- Administered by a licensed health care practitioner or self administered
  - Follow self-administration procedures
  - Report to health director upon return
- Document administration

# Medication Administration

## *Epinephrine Auto-Injector Program:*

- Allows specially trained camp employees to administer epinephrine via an auto-injector (Epi-pen)
  - Requires a physician to oversee program and collaborative agreement
- Patient specific orders are not required
- See DOH fact sheet “Epinephrine Auto-Injector Use by Children’s Camps” for additional information/procedures



# Medication Administration

## *Record Keeping:*

- For all medication administered, you must document the following:
  - Individual's name
  - Medication
  - Administrator or self-administered witness
  - Date
  - Time
  - Dosage