



EASTER SEALS WISCONSIN CAMPS MEDICATION FORM 2018-2019

Please review the medication requirements listed below and bring this completed form along with all of the camper's medications with you to each camp session.

CAMP MEDICATION REQUIREMENTS

1. All medications (including over-the-counter medications) **MUST** come in original, pharmacy-packed containers, and need to be clearly labeled with:
 - a. Camper Name
 - b. Drug Name and Strength
 - c. Current Dosage and Times given
2. ****The camp medical staff STRONGLY SUGGEST that you arrange for camper medications to be packaged in bubble-packed, pill -packed, or other pre-packaged forms from your pharmacy for their session at camp.** Please request this at the time of your camp physical, and if you have already had your physical, please make a simple call to your Primary Care Physician (PCP) to request **"your prescription and regularly taken over-the-counter medications/supplements be filled for the camp sessions of (dates) in bubble or pill packs."** Most pharmacies are used to packaging medications in this manner, and will be able to do so for dates requested.
3. All medications (prescription, over-the-counter, vitamins, supplements), will be turned in and reviewed by the nurse during check-in.
4. Please provide enough medication for the duration of camp **plus 2 extra days.**
5. Please supply any specialty medication supplies necessary for the camper.
6. Unused medications/supplies will be returned on the day of departure.
7. If possible, please adjust camper's medication schedule to match camp's medication schedule.

ALL CAMPERS MUST HAVE THIS SECTION COMPLETED

Camper: _____ **Age:** _____ **Session:** _____

Please list who to contact for emergency and/or medical questions in order of importance:

1	Name:		Relationship:
	Home Phone:	Cell Phone:	Other Phone:
2	Name:		Relationship:
	Home Phone:	Cell Phone:	Other Phone:
3	Name:		Relationship:
	Home Phone:	Cell Phone:	Other Phone:

How does the camper take medications?

CRUSHED WHOLE G-TUBE OTHER: _____

w/ WATER w/ APPLESAUCE w/ PUDDING (If you take medications in something other than applesauce or pudding, please bring it to camp.)

May the following over-the-counter medications be given on an as-needed (PRN) basis, if the need arises? Camp has these OTC medications available per camp standing orders.

OTC Medications	YES	NO	OTC Medications	YES	NO
Acetaminophen			Anti-diarrheal		
Ibuprofen			Antacid		
Antihistamine			Milk of Magnesia		
Decongestant			Glycerin Suppository		
Cough Syrup			Fleets Enema		
Miralax					

Please complete opposite side.

