



**Northwest Kiwanis Camp  
Adult O.T.C Authorization Sheet, page 1 of 2**

**Name:** \_\_\_\_\_ **DOB** \_\_\_\_\_  
**Allergies:** \_\_\_\_\_

I authorize the use of the following OTC medications to be used for their intended purposes on an as needed (prn) basis. A check has been placed before each of the medications that may be administered. All medications are to be given for a maximum of two consecutive days.

**Headache/Pain/Fever Medication (choose one only):**

- Acetaminophen (Tylenol) 325mg 1-2 tabs po q4h prn for headache, pain or fever >100.5.
- Acetaminophen (Tylenol) 500mg 1- 2 tabs OR LIQUID EQUIVALENT po q4-6h prn for headache, pain or fever >100.5.
- Ibuprofen (Advil/Motrin) 200mg 1-2 tabs po OR LIQUID EQUIVALENT q4h prn for headache, pain or fever >100.5.

**Antihistamine/Allergy Medication:**

- Diphenhydramine (Benadryl) 25 mg 1-2 tablets OR LIQUID EQUIVALENT q4-6h prn itching, rash, allergic reaction

**Menstrual Cramps (choose one only):**

- Acetaminophen (Tylenol) 325mg 1-2 tabs po q4h prn for menstrual cramps.
- Acetaminophen (Tylenol) 500mg 1-2 tabs po OR LIQUID EQUIVALENT q4-6h prn for menstrual cramps.
- Ibuprofen (Advil/Motrin) 200mg 1-2 tabs OR LIQUID EQUIVALENT po q4h prn for menstrual cramps.

**Cough Medication (choose one only):**

- Non-Narcotic cough suppressant/expectorant (Robitussin) 2 tsp (10 cc) po q4h prn for cough.
- Non-Narcotic Sugar Free cough suppressant/expectorant (Safetussin, Diabetic Tussin) 2 tsp (10cc) po q4h prn for cough.

**Sore Throat:**

- Cough Drops (Cepacol/Sucrets/Chloraseptic) 1 lozenge q2h prn for sore throat (up to 10 drops per day)

**Nasal Congestion:**

- Pseudoephedrine HCL (Sudafed) 30mg 2 tabs po QID prn for nasal congestion due to colds, sinusitis.

**Nausea/Upset stomach/Acid Indigestion/Gas:**

- Alum/Magnesium Hydroxide Liquid w/Simethicone (Mylanta) 2 TBSP (30 cc) po QID prn for indigestion/upset stomach/gas.
- Magnesium and Aluminum Suspension (Maalox) 2 TBSP (30 cc) po QID prn for indigestion/upset stomach.
- Simethicone (Gas-X, Mylanta Gas) 1-2 tabs po after meals prn gas. Do not exceed 4 tabs per day.

**Constipation:**

- Milk of Magnesia 2 TBSP (30 cc) po (followed by 8 ounces of water) qHS prn for constipation for a maximum of 2 consecutive days.

**Diarrhea (choose one only):**

- Kao-pulgite (Kaopectate) 2 TBSP (30cc) po prn for diarrhea. Give a dose after each loose bowel movement for a maximum of 8 tablespoons in a 24 hour period.
- Loperamide HCL (Imodium) liquid 4 tsps (20 cc) po prn for first loose bowel movement and 2 tsps (10 cc) po after each other loose bowel movement for a maximum of 8 teaspoons (40 cc) within a 24 hour period.

**Water in Ear:**

- Swim Ear (or like product) 2-4 drops prn for water in ears

**Eye Irritation:**

- Visine eye drops (or like product) 1-2 drops per eye q4-6h prn for red, itchy eyes

**Other OTC meds:** \_\_\_\_\_  
\_\_\_\_\_

**Northwest Kiwanis Camp- Adult O.T.C Authorization Sheet, page 2 of 2**

**First Aid Topicals:**

**Anti-bacterial:**

- Bacitracin 500units TID prn for minor abrasions.
- Triple antibiotic cream prn for minor abrasions.

**Anti-infective:**

- Hydrogen Peroxide full strength as a cleaning agent for minor cuts and abrasions on the skin. May be used TID prn.

**Anti-septic:**

- Betadine solution. Apply full strength (paint/spray) for wound disinfection, abrasions, and emergency lacerations.

**Minor Skin Irritations/Itching:**

- Hydrocortisone 1%. Apply to affected area TID prn for the temporary relief of minor itching.
- Anti-itch lotion (Caladryl). Apply to affected area TID prn for relief of itching due to minor skin irritations.
- Calamine lotion (topical protectant): apply to affected area freely TID prn for itching due to insect bites/poison ivy/poison oak.

**Minor Burns:**

- Anesthetic spray (Dermoplast). Apply to affected area TID prn for relief of minor burn discomfort.

**Chapped/Cracked lips:**

- Blistex. Apply to chapped/cracked lips q1h prn.
- Vaseline. Apply to chapped/cracked lips q1h prn.

**Muscle Relaxer:**

- Mineral Ice/Ben Gay. Apply to affected muscles up to TID prn for sore muscles.

**OTC MEDICATIONS NOT SUBJECT TO 2 CONSECUTIVE DAY LIMIT:**

- Sunscreen (SPF 30 or greater). Apply lotion/spray liberally to exposed skin prn 30 minutes prior to exposure to sun when deemed necessary by nursing and/or counselor staff. May be reapplied as needed after swimming/exercising/perspiring heavily.
- Insect Repellant. Apply spray/lotion to exposed skin prn prior to outdoor activities when deemed necessary by nursing and/or counselor staff.

Signature of licensed practitioner: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Parent/Guardian consent: By signing, I give permission for the above named camper to receive the medications and dosages listed above for the symptoms specified.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Northwest Kiwanis Camp Nurse Review: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_