



**Storage and Administration of Medication
(105CMR430.160)**

- (A)
- Medication prescribed for campers shall be kept in original containers bearing the pharmacy label, which shows the date of filling, the pharmacy name and address, the filling pharmacist's name, the serial number of the prescription, the name of the patient, the name of the prescribing practitioner, the name of the prescribed medication, directions for use and cautionary statements, if any, contained in such prescriptions or required by the law, and if tablets or capsules, the number in the container.
- (B)
- Most medication will be kept under lock in the office or if needed be locked in the refrigerator or cooler used for the sole purpose of storing medications, with the sole exception of the following medications:
 - Epi-Pen or Inhaler and the parent/guardian and health care consultant has given written approval, the camper may be allowed to carry these devices with him/her at all times in order to self administer
- (C)
- Child's records will be checked for parent consent form included in mail-out packet
 - No medication will be given if child does not have authorization to administer medication form filled out
 - Directions will be read on label prior to administering the drug
 - All doses will be logged in Medical Log
 - Robert Barletta or Robert Reilly will administer medication
- (D)
- Campers may be allowed to do the following self-medication:
 - If a child is capable of self-medicating using an Epi-Pen or inhaler and the parent/guardian and the camp health care consultant give written approval, the camper may be allowed to carry these devices with him/her at all times in order to self-administer when necessary.
- (E)
- At the end of camp day or week if residential camp, any medication not used will be given back to the parents.
 - If medication cannot be returned to parent the medication shall be destroyed by the health care consultant witnessed by a second person and recorded in log maintained by camp for this purpose. Log shall include the name of the camper, the name of the medication, the quantity of the medication destroyed, and the date and method of the destruction. The health care consultant and witness shall sign each entry in the medication destruction log.
 - Any serious illness, contagious disease and reportable disease will be documented and sent to the Board of Health and the health care consultant. The director of camp will also be notified.

Health Care Consultant: _____ **Date:** _____

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