Nurses Standing Orders - Camper Medication and Care

Introduction:

The standing orders or nurse-initiated orders are medications and/or activities approved by a camp-consulting physician. Medications listed are PRN (as needed) and exemptions to the medication administration of the said drug(s) include the following:

- 1) Those with allergies, sensitivities or questionable reactions
- 2) Is currently taking a medication that is contraindicated with the said drug
- 3) Has been prescribed a medication by a physician for the symptom being treated
- 4) Causes extreme drowsiness or any other side effect that is less desirable then the reason for taking the drug
- 5) Parents, guardians, family physician may reject the standing orders for any reason or cause.

A "12 hour period" refers to continuous administration during a 12-hour period ex. q 4-6 h. med given every 4 or 6 h. in 12 hours.

"Guardians" refers to traditional definition and may include any institutional or Adult Residential Centre facility etc. where the camper may reside.

Please read and sign as applicable to the specific camper. If not applicable for camper, put a diagonal line through the order and sign the page.

Adult Standing Orders

Schedule A - Adult Camper

- Activity as tolerated
- Diet as tolerated
- Acetaminophen 325-650mg po/pr q4-6hr for pyrexia (fever) x2
 - Acetaminophen 325-650mg po/pr for minor aches and pains, menstrual cramps, headache
 - ASA 325-975mg po/pr for pyrexia if unable to take acetaminophen
 - Solarcaine cream/spray or equivalent for sunburn
 - Calamine/Caladryl for itchiness due to insect bites
 - Ibuprofen 200mg for muscle strain or aches

- Benadryl 25mg po for symptoms of hay fever
- Gravol 50-100mg po/pr for nausea/vomiting q6hr x 12hr
- Over the counter antibiotic preparations for infected wounds with no previous treatment plan
- Pepto-Bismol 30ml or Immodium 4mg for indigestion
- Kaopectate 1200mg for diarrhea or loose, malodorous bowel movement
- Stock cough syrup at recommended dosage

Schedule B - Adult Bowel Care Regimen

- Consistency with plans at home/facility or requested by family physician. If no plan is given, the following will be followed and adjusted to individual needs.
- If no bowel movement x 2 days, and is abnormal per usual pattern, then: push fluids, encourage activity, and eat dried or fresh fruit.
- If no bowel movement x 3 days, previously prescribed oral laxative; if no prescription then continue with fluid push, Restoralax 17gms (adult) with 240ml of water or juice.

- If no bowel movement x 4 days, then rectal check, glycerine or Dulcolax suppository, repeat laxative.
- If no bowel movement x 5 days, rectal check, abdominal assessment, disimpaction (action depends on camper, assess and rectal touch).

| How often does client have a normal bow | /el |
|---|-----|
| movement on average? | |

| Are aggressive measures e.g. suppositories, |
|---|
| axatives, enemas etc. necessary to achieve this? |
| Yes No No |

Please read and sign as applicable to the specific camper. If not applicable for camper, put a

diagonal line through the order and sign the page.

Child Standing Orders

Schedule A - Child Camper

- Activity as tolerated
- Diet as tolerated
- *Acetaminophen 10-15 mg/kg (not to exceed 65mg/kg in 24 h.) po for pyrexia (fever), minor aches and pains q 4-6h x 12h. (po means per mouth or chewable)
- Gravol (or equivalent) for nausea and vomiting x12h
 Dosages: po 2-6yr 15-25mg q6-8h.
 6-12yr 25-50mg q6-8h.
 - Solarcaine cream/spray for sunburn or equivalent as needed.
 - Sunblock daily when exposed to the sun
 - Advice of poison control or MSDS sheets

- Calamine/Caladryl cream for itchiness due to insect bites
- Anakit for reaction to bee stings
- Pepto-Bismul 15-30cc for indigestion heartburn
- Antibiotic ointment to infected wounds if no previous treatment is ordered
 - Kaopectate 600mg for diarrhea-1 tab after each loose, malodorous bowel movement
 - Bowel care regimen at Camp Tidnish
 - Stock cough medicine at recommended dose for age/weight
 - *Children with shunts & pyrexia (fever) will be taken to physician for assessment immediately

Schedule B - Child Bowel Care Regimen

- Consistency with plans at home/facility or requested by family physician. If no plan is given, the following will be followed and adjusted to individual needs.
- If no bowel movement x 2 days, and is abnormal per usual pattern, then: push fluids, encourage activity, dried or fresh fruit.
- If no bowel movements x 3 days, use previously prescribed oral laxative; if no prescription then continue with fluid push, Restoarlax 7.5 gms (child), followed by or mixed with 240 cc water or juice.

- If no bowel movement x 4 days, then inform Primary Guardian.
- How often does client have a normal bowel movement on average?
- ◆ Are aggressive measures e.g. suppositories, laxatives, enemas etc necessary to achieve this?
 Yes □ No □

| Consent Camper Name: | |
|---|--|
| I have read the attached and consent to the Nurses Initiated C Schedule B. | Orders and authorize <u>Schedule A</u> and |
| Camp Physician's Signature: | |
| Camper's Physician's Signature: | |
| Guardian Signature | Date: |
| Comp Nurso: | |

^{*} Please read and sign as applicable to the specific camper. If not applicable for the camper, put a diagonal line through the order and sign under the schedule.