



WELCOME TO 2019 SUMMER CAMP

Unit Nurses

Brittany Coon • Pat Binns • Abbie Goodman
Jacqueline Scott • Kari Overstreet • Kaitlin Campbell

Night Shift Nurse • Casey Kalica

- ▶ We allow campers to keep “rescue meds” on them or a counselor with them as long as the meds are clearly labelled with camper’s name, cabin, and color. Rescue meds include: EpiPens, anti-epileptic (Diasat), Albuterol inhaler, or Benadryl (in extreme cases).
- ▶ Campers receiving scheduled home meds will have those meds poured and double checked on Sunday, meds will be administered by medical personnel and documented via Campsite throughout the week, mostly at meal times; Practice 5 rights of administration with every med delivery.
- ▶ PRNs: many of our campers will become fatigued/sore throughout the week. If a camper asks for pain medication for HA or other muscle/joint pains, and they have a PRN on their MAR, go ahead and administer and document in Campsite.
- ▶ If a camper asks for a PRN, and they do NOT have anything listed on their MAR, first assess their forbidden OTCs and allergies; Notify Unit nurse, Medical Director, or Nursing Director of intervention, and create log.
- ▶ During this week, we encourage you to be present with your campers for high-risk activities (i.e. barn, waterpark, zip line, tower, etc).
- ▶ Use GENERAL precautions (gloves for anything that is bodily substances).
- ▶ Please be at the Body Shop 10-15 minutes before meals to gather up medications, iPads, and supplies for mealtime med pass.
- ▶ When you head to bed for the night, please check in with your Unit Nurse, just so we can say ,“Thank you and goodnight.” ;)



CEREBRAL PALSY

- ▶ In the event of a seizure:
 - Make sure the camper is in a safe position (safely in a chair, on the ground, or held by staff member). Ensure airway is clear and unrestricted (no tight collars). Ensure airway is clear (turn on side if camper begins to vomit).
 - Time the seizure. Most campers with a history of seizures will only take an rescue anti-epileptic after 2-5 minutes.
 - Notify additional medical staff for backup (radio on channel #2, have counselor call #2000 -> Who, where, what's going on, etc).
 - Ask counselors if they are carrying a rescue med for that camper, and have it nearby in case seizure continues past the 2-5 minute mark.
 - If at any time, you feel that camper is becoming medically unstable, radio for help, and call 911 on the gray phones.
 - Once seizure is resolved, Unit Nurse or Medical Director will assess camper for either return to activities or monitoring in Body Shop.
 - A follow-up phone call will be made to parents by the Unit Nurse, Emily or Courtney.
- ▶ Many of our campers will use products for incontinence. Counselors are trained on ADL care, so we'll just be involved in assessing for any skin break down in relationship to AFOs, SMAs, or contact dermatitis. If any wound/break down is noted, please document a log in Campsite, and we will call to notify parents.
- ▶ Campers may have speech deficits/communication devices. Counselors are responsible for communication and entertainment, however, we can be an additional resource if we feel that medical intervention/assistance may be necessary.
- ▶ Campers should wear socks in the pool to prevent foot injury due to decreased sensation.
- ▶ If a camper has an overnight tube feed or bolus feeds, all supplies can be kept in the cabin or Body Shop, whichever is most convenient.
- ▶ Assess g-tube site for skin breakdown at check-in.
- ▶ For water flushes, tap water may be used unless camper family provides sterile water.
- ▶ RNs must initiate all tube feeds, but counselors can be trained to do bolus feeds as well as disconnect g-tube extensions from campers (please monitor the first time this happens to ensure counselor competence).



CYSTIC FIBROSIS

- ▶ There will only be one camper with cystic fibrosis/week (unless said campers are siblings sharing the same diagnosis).
- ▶ These campers will have breathing treatments 1-3x/day.
- ▶ These breathing treatments can be done in the cabin or Body Shop.
- ▶ At check-in ask parents for a detailed description of their breathing treatment schedule.
- ▶ (i.e 1st Albuterol, 2nd pulmozyme (only in AM), 3rd 3% NaCl, use vest for 30 min in AM/PM).
- ▶ These campers have high caloric needs and should have access to snacks and be encouraged to eat food.
- ▶ They will need medications with all food intake (meals and snacks).

