



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.” ;)



NEUROLOGICAL/ GENETIC DISORDERS

- ▶ Sarah Trigg and your Unit Nurse are your behavior resources. If a camper is having a difficult time being involved or handling the high-noise environment, utilize these people to develop a success plan.

▶ **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).
 - Begin timing the seizure. Most campers with a history of seizures will only take a rescue anti-epileptic after 2-5 minutes.
 - Notify additional medical staff for backup (radio on channel #2, have counselor call #2000).
 - 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.
- ▶ Our campers may find the camp schedule tiring. If you feel that a camper would benefit from an additional rest period, earlier bedtime, or later morning time, please talk to your Unit Nurse, Emily or Courtney, and we'll try and make some arrangements.
 - ▶ Your campers may communicate differently. Please have a conversation with parents about their communication and potential "triggers" which will stress them out.
 - ▶ Some sound-muffling headphones are in the Body Shop to be utilized as needed.
 - ▶ 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. 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.

