## MVSR MEDICATION ADMINISTRATION RECORD

Scout/Scouter's Name	Troop Number	NEEDS TO E	BE ADMINISTE	NEEDS TO BE ADMINISTERED, AND INCLUDE ANY SPECIAL INSTRUCTIONS FOR THE MEDICATION. THE PERSON	IDE ANY SPECI	AL INSTRUCTIO	NS FOR THE ME	DICATION. THE	PERSON
		ADMINISTERI	NG THE MEDIO	ADMINISTERING THE MEDICATION AT CAMP SHOULD INITIAL ON THE DAY AND TIME THAT THE MEDICATION WAS ADMINISTERED.	P SHOULD INITIAL ON ADMINISTERED.	IAL ON THE DAY TERED.	Y AND TIME TH	AT THE MEDIC,	ATION WAS
		TIME (X ALL THAT APPLY)	NUS	MON	TUES	WED	THURS	FRI	SAT
MEDICATION NAME	DOSAGE	MORNING							
8		NOON							
	±	EVENING							
SPECIAL INSTRUCTIONS:		BEDTIME							
		AS NEEDED							
MEDICATION NAME	DOSAGE	MORNING							
		NOON							
		EVENING							
SPECIAL INSTRUCTIONS:		BEDTIME							
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		AS NEEDED							
MEDICATION NAME	DOSAGE	MORNING							
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SPECIAL INSTRUCTIONS:		BEDTIME							
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MEDICATION NAME	DOSAGE	MORNING							
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	90.8	EVENING							
SPECIAL INSTRUCTIONS:		BEDTIME							
		AS NEEDED							
MEDICATION NAME	DOSAGE	MORNING							
		NOON							
		EVENING							
SPECIAL INSTRUCTIONS:		BEDTIME							
		AS NEEDED							
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COMPLETED BY: SIGN/DATE:

Unit #	Medication Check-In	Week #

Camper Name	Unit #	Medication	l.	Š
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## **MVSR MEDICATION CHECK-IN FORM**

Scouts and Scouters are to be checked by the Health Officer, at the Welcome Center, during check-in. All Medications must be turned in at time of check-in!

All medications, that need to be taken during camp, must be in the original container, with instruction label attached and accompanied with this "Medication Instructions" form. This form must be signed by a parent/legal guardian!

Medications are given out 3 times a day, at each meal; breakfast, lunch and dinner. If a Scout or Scouter needs to take medication at a different time, please indicate below.

## **MEDICATION INSTRUCTIONS**

OF	P/CREW/PACK:	CAMPSITE:
	INSTRUCTIONS (Include h	low much, how often and when medications are needed
2.		
		ow much, how often and when medications are needed
3.		
		ow much, how often and when medications are needed
ı.		
	INSTRUCTIONS (Include ho	ow much, how often and when medications are needed
- NIT		
		DATE SIGNED: