NORTHERN STAR SCOUTING
TOMAHAWK
SCOUT RESERVATION

MEDICATION ADMINISTRATION RECORD

Complete the fields below for each medication a Scout is taking at camp. If medication is being administered by a parent or guardian they do not need to be tracked on this record. Turn this record in at Central Services at check out. Medications should be locked unless used for emergency purposes (inhalers, EpiPens). Medications should be stored in original bottles and include all prescription information.

Designated Adult: _____ **Unit Number:** _____ **Year**: _____

The designated adult needs to initial for each day and time that medication has been administered.

Medication Details	**Time**	**Date**						
Name: _____								
Medication: _____								
Frequency: _____								
Dosage: _____								
Name: _____								
Medication: _____								
Frequency: _____								
Dosage: _____								
Name: _____								
Medication: _____								
Frequency: _____								
Dosage: _____								
Name: _____								
Medication: _____								
Frequency: _____								
Dosage: _____								
Name: _____								
Medication: _____								
Frequency: _____								
Dosage: _____								

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Complete the fields below for each medication a Scout is taking at camp. If medication is being administered by a parent or guardian they do not need to be tracked on this record. Turn this record in at Central Services at check out. Medications should be locked unless used for emergency purposes (inhalers, EpiPens).

Designated Adult: *Jane Scoutmaster* **Unit Number:** *9999* **Year**: *2022*

The designated adult needs to initial for each day and time that medication has been administered.

Medication Details	Time	Date						
		7/10	7/11	7/12	7/13	7/14	7/15	7/16
Name: Jennifer Scout	8AM		JS	JS	JS	JS	JS	JS
Medication: Adderall								
Frequency: Take twice, daily								
Dosage: 10mg	Bed	JS	JS	JS	JS	JS	JS	
Name: Jennifer Scout	8AM		JS	JS	JS	JS	JS	JS
Medication: Mometasone								
Frequency: Once a day								
Dosage: 1 spray per nostril								
Name: Bobby Scout	8AM		JS	JS	JS	JS	JS	JS
Medication: Oxybutynin								
Frequency: Take twice, daily	6PM	JS	JS	JS	JS	JS	JS	
Dosage: 20mg								
Name: Timmy Scout	8AM		JS	JS	JS	JS	JS	JS
Medication: Lisdexamfetamine								
Frequency: Take twice, daily								
Dosage: 20mg	9PM	JS	JS	JS	JS	JS	JS	
Name: _____								
Medication: _____								
Frequency: _____								
Dosage: _____								

EXAMPLE