



Pre-set Medications Instructions

True Friends requires all medications (including over-the counter medications) come pre-packaged. If medications are not brought pre-set this will drastically slow down your check-in process (up to 4 hours).

If medications are not pre-set, you will be asked to pre-set your medications before getting into the health care check-in line.

All pill form medications must be brought to check in **PRE-SET**. Having medications pre-set means all Monday morning medications are packed in one single pack and there are not multiple packs to work with. Then, all Monday lunch time medications are in one single pack and so on for the day and week.

There are two options to pre-set your medications:

Option 1 – Contact Your Pharmacy

Contact your pharmacy to request your prescriptions and regularly taken over-the-counter medication(s)/supplement(s) to be filled for your registered sessions. Medication would need to be packaged per medication administration time, NOT by medication.

Non-pill form medication should be brought in their original containers. Liquid, powders and lotions do not need to be pre-set. They will be reviewed and turned in at the time of check in.

Option 2 – Do It Yourself

Using a pill organizer (left) or envelope (center) fill each compartment/envelope with the medication that will be given for each day/time at camp. Create a label (right) and attached to the back of the pill organizer or label each envelope with participant name, date of birth, and list of medications enclosed.



Example

Doe, John		MON. AM
Tylenol	500 mg	2 tabs
Calcium	500 mg	1 tab
Total		3 tabs
give meds crushed in applesauce		

Medications will be administered at meal times and bedtime, which are generally around 8 a.m. (AM), 12:30 p.m. (AFT), 5:30 p.m. (PM) and 8:30 p.m. (HS). If a participant's medication time differs, please ask your doctor if they may be adjusted to fit the above schedule. Use AM, AFT, PM and HS to identify the time of day the medication should be passed for your pre-set medications (see example above). Please send an adequate supply of medications to include two extra days.

Please supply any specialty medication supplies necessary for the camper. For example, syringes, “special” foods to promote medication administration.

Unused medications/supplies will be returned on the day of departure.

The pre-set medications should match the medication list from your health care professional, as well as the True Friends’ Medication Administration Record (see excerpt below). This form is a writable PDF, the form can be found [here](#). It must be completed and returned to our office. Please email the completed form to Registration@truefriends.org.



Form Instructions: Please fill out the form below per the examples given. All greyed out boxes and text are for staff use only.

Name: _____ Age/DOB: _____ Session: _____

Medication Name & Strength (E.g. Ibuprofen 500mg)	Quantity (E.g. # of pills/ drops/sprays)	Frequency (E.g. 2x/day)	Dispensation (E.g. What time(s) during the day?)	Route	Reason/Comments (E.g. I take it for headaches)	See HC Notes	Date 2020				
							1	2	3	4	
			8 a.m. (AM) 12:30 p.m.(AFT) 5:30 p.m. (PM) 8:30 p.m. (HS)				8 a.m. (AM) 12:30 p.m.(AFT) 5:30 p.m. (PM) 8:30 p.m. (HS)				
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			8 a.m. (AM) 12:30 p.m.(AFT) 5:30 p.m. (PM) 8:30 p.m. (HS)				8 a.m. (AM) 12:30 p.m.(AFT) 5:30 p.m. (PM) 8:30 p.m. (HS)				
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			8 a.m. (AM) 12:30 p.m.(AFT) 5:30 p.m. (PM) 8:30 p.m. (HS)				8 a.m. (AM) 12:30 p.m.(AFT) 5:30 p.m. (PM) 8:30 p.m. (HS)				
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			8 a.m. (AM) 12:30 p.m.(AFT) 5:30 p.m. (PM) 8:30 p.m. (HS)				8 a.m. (AM) 12:30 p.m.(AFT) 5:30 p.m. (PM) 8:30 p.m. (HS)				