

## **Medication Plan and Administration Record (H.3)**

_ocation/dates of activity/event/camp:										Participant's name:						
1. 2.	The information on this form may be used by GGC representatives or medical personnel to administer or authorize appropriate health care or medical attention for the participant, if needed <b>PARENTS</b> : All medications should be placed in a resealable bag (e.g., Ziploc) with the participant's name on the outside of the bag. Medications must be in original packaging, clearly labelled with the participant's name and dosage instructions. Medications are to be self-administered by the participant except in cases where supervisors may need to assist younger girls or when an Epi- pen needs to be used. Medications are to be given to the first aider or designated Guider upon arrival at the activity. The first aider or Guider will supervise participants when they are taking their medication.															rly er girls
	edication Column –Write in all This includes all te Box –Write in the date of eac	prescription or c	over-the-co	unter med	lications (o	ral or topic	cal). To be	complete	by paren	t/guardian	or Girl Gu	ides of Ca	nada repre	esentative.		
	Medication (name, dosage & instructions)	Scheduled times to be taken:	Date:		Date:		Date:		Date:		Date:		Date:		Date:	
			Actual Time	Initials	Actual Time	Initials	Actual Time	Initials	Actual Time	Initials	Actual Time	Initials	Actual Time	Initials	Actual Time	Initials
			1													
			1													
۷a	me of Guider supervising	medications:	<u> </u>					Signa	ture							
	daughter/ward is 12 years		hae –					_ Oigila								
	permission to carry her o			Custodial F	Parent/guard	dian name		Sig	gnature				Date			

We protect and respect your privacy. Your personal information is used only for the purposes stated on or indicated by the form. For complete details, see our Privacy Statement at <a href="www.girlguides.ca">www.girlguides.ca</a> or contact your provincial office or the national office for a copy.

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## **About Medications**

All medication must be provided by participants. All medications should be placed in a resealable bag (e.g., Ziploc) with the participant's name on the outside of the bag. Medications must be in original packaging, clearly labelled with the participant's name and dosage instructions. Medications are to be given to the first aider or designated Guider upon arrival at the activity. Medications are to be self-administered by the participant except in cases where supervisors may need to assist younger girls.

In the case of life-threatening conditions, supervisors are obligated to provide the girls they supervise the 'standard of care' of a careful or prudent parent adults and will need to administer an Epi-pen or assist with an inhaler if the girl is incapacitated. Anaphylaxis Canada has information on living with anaphylaxis at <a href="http://www.safe4kids.ca/">www.anaphylaxis.org</a>. Safe4Kids at <a href="http://www.safe4kids.ca/">http://www.safe4kids.ca/</a> is their site specifically for children with anaphylaxis.