



Medication Policy

Delegate's name _____

All medications, both prescription and non-prescription, and all supplements must be housed in the ALA Virginia Girls State infirmary except for one day's worth, which delegates may keep with them. These may be replenished each day by a visit to the infirmary. It is recommended that a pill box or similar container be used for this purpose.

Delegates may keep specific medicines with them, such as with epi-pens, asthma inhalers, insulin, glucagon, and sucrose or glucose tablets. Insulin and topical medicines can be kept as well. There may be others, and this can be addressed individually at check in or via email in advance of the program by contacting nurse@vagirlsstate.org

Any medications requiring refrigeration can be stored in the ALA Virginia Girls State infirmary refrigerator and will be accessible as needed.

Medications and supplements for any individual will be housed for their sole use and will be accessible only to that individual.

All medications brought to ALA Virginia Girl State must be in their ORIGINAL CONTAINERS with the delegate's name on the label or container.

Any container other than the original, or containers with someone else's name are not acceptable.

The dose and frequency should appear on the container or label. If there has been a change in what has been prescribed, please enclose a note with the current dose and frequency; this must be signed by the parent or guardian.

The delegate should bring with them any items needed such as dose cups, spoons or droppers for measuring, needles and syringes, glucose monitoring devices, nebulizers, scales, or other specific item needed, as these are not provided by the ALA Virginia Girls State infirmary.

This policy is for the safety of all, adheres to current best practices, and is in compliance with regulations governing camps and similar programs that include persons under the age of 18 years.

Note: The delegate should pick up ALL medications, etc. from the clinic prior to departure on Saturday at the end of the program session.

This delegate does / does not have medications or supplements to be taken during the ALA Virginia Girls State session.

I have read and understand this policy.

Signature or Parent/Guardian

Date

BRING THIS COMPLETED FORM WITH YOU TO LONGWOOD UNIVERSITY TO CHECK IN