# MARYLAND 4-H CAMPS TREATMENT PLAN

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### EMERGENCY PROTOCOL

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ABRASIONS

An abrasion occurs when the surface of the skin is scraped, scratched, or rubbed away. Seek medical aid immediately if an eye or a large area of the body is affected, if dirt or foreign substances have been imbedded into the wound, or if there are signs of infection.

**Symptoms:** The affected area is reddened; the area may or may not bleed, depending on the severity of the abrasion. Abrasions can be quite painful.

**Treatment:**
1) Wearing gloves, place the affected area under running water to lose and wash away dirt. If necessary, gently remove foreign material with a sterile gauze pad or clean cloth.
2) Clean area with water and first aid wash. Gently blot area dry with clean/sterile gauze.
3) Cover with sterile non-adhering gauze pad, adhesive tape and antibiotic ointment.
4) Give acetaminophen for pain as needed.

ALLERGIES

Seek medical attention if allergic reactions are severe.

**Symptoms:** May include itching, rash, sneezing, cough, runny nose, watery eyes, wheezing, trouble swallowing, loss of consciousness.

**Treatment:**
1) Limit contact to allergen.
2) Have camper change clothes, suggest shower, if allergen on clothing.
3) Encourage rest.
4) Acetaminophen and Diphenhydramine for comfort.
5) If loss of consciousness, consider use of Epi-pen if provided for this camper; use as directed on p. 18 for standard epi-pen directions. Seek immediate medical attentions (Call 911)
ANAPHYLACTIC SHOCK

Anaphylactic Shock is a life-threatening emergency caused by a sudden severe allergic reaction to an insect bite or certain foods or medications. Seek immediate medical attention. Call 911.

**Symptoms:** Include extreme weakness, pale or bluish skin, coughing, wheezing, difficulty breathing, hives, intense itching, swelling at site of bite, stomach cramps, nausea, vomiting, anxiety, convulsions, collapse, loss of consciousness.

**Treatment:**
1) Monitor ABC’s. Observe for shock. Do not place a pillow under the head or give anything by mouth if the victim is having difficulty breathing.
2) Calm and re-assure the victim. Lay victim on a flat surface. If vomiting, turn their head to the side. If experiencing shortness of breath, allow victim to sit up.
3) Elevate their feet about 8-12 inches to decrease risk of shock. Keep victim warm by covering with a blanket or coat.
4) If Epi-pen has been provided, use as directed. See page 18 for standard Epi-pen directions. Seek immediate medical attention (call 911)

ASTHMA

Seek immediate medical attention if the attack is severe or occurring for the first time. Call 911.

Asthma attacks are a narrowing of the lung passage resulting in decreased ability of the victim to breath effectively. Such attacks may be triggered by allergies, stress, or illness.

**Symptoms:** Include respiratory discomfort resembling a cold, coughing, nasal congestion. These may progress to labored breathing with whistling or wheezing sounds, sweating, and anxiety. In advanced cases, the victim may have feelings of suffocation, pale or bluish lips, gums, skin, and fingernails. Symptoms may progress to respiratory failure.

**Treatment:**
1) As soon as symptoms are noticed, take victim to a quiet area and help them find a comfortable position (Usually sitting up, leaning slightly forward).
2) Provide good ventilation, if available. Help take prescription medication, if available.
3) Move victim to an air conditioned area if available.
4) If Inhaler has been provided, use as directed. See page 18 for standard inhaler directions.

SEEK IMMEDIATE MEDICAL ATTENTION IF ATTACK IS SEVERE OR NOT IMPROVING WITH MEDICATION --- CALL 911.

BACK AND NECK INJURIES
SEEK IMMEDIATE MEDICAL ATTENTION – CALL 911.
DO NOT bend or twist the neck or body. Do not move the victim unless absolutely necessary.

Treatment:
1) Immobilize the head in the position found by placing rolled up clothing, blankets, etc. around the head and sides of the neck and shoulders. For back injuries, also immobilize the torso.
2) If the victim is on their back, slide a small towel or pad under the neck without moving the head. Do not place anything under the head.
3) Help keep the victim warm and calm, cover with blanket.

SEEK IMMEDIATE MEDICAL ATTENTION – Call 911.

BITES (HUMAN AND ANIMAL)
SEEK IMMEDIATE MEDICAL ATTENTION IF SKIN IS PENETRATED. Bites can be very dangerous. If possible, confine the animal, but keep everyone away from the animal. DO NOT TRY TO CAPTURE THE ANIMAL. Call the police or Animal Control to capture and examine for rabies.

Treatment:
1) Put on gloves before starting first aid.
2) Control bleeding (if present).
3) Wash the wound thoroughly with soap and water, or sterile saline.
4) Apply a sterile non-adhesive dressing and adhesive tape.

Notify doctor of bite to be monitored for rabies. Watch bite mark for signs of infection, which may include increased pain or tenderness, redness, swelling, throbbing, drainage, red streaks from the wound, fever, or swollen glands. Medical attention should be sought should there be signs of infection.
**BITES AND STINGS (INSECTS)**

- **SEEK IMMEDIATE MEDICAL ATTENTION** -- FOR BITES AND STINGS FROM BLACK WIDOW OR BROWN RECLUSE SPIDERS AND SCORPIONS.
- **SEEK IMMEDIATE ATTENTION** if the victim is subject to hay fever, asthma, or allergic reaction or if there is severe swelling anywhere on their body.
- Monitor for Anaphylactic Shock.

**Types of Bites:**

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<tr>
<td>Bedbug</td>
<td>Welt, swelling</td>
<td>Wash with soap/ H2O</td>
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| Honeybee                | Pain, swelling, burning, itching, nausea, shock, severe swelling, unconsciousness | · SEEK IMMEDIATE MEDICAL ATTENTION IF ALLERGIC. IF NEEDED USE EPI-PEN FOR SEVERE REACTION IF PROVIDED. See page 18 for standard Epi-Pen directions.
| Hornet                  |                                                                         | · Remove stinger, wash with soap and water, apply ice. Apply antihistamine cream. Give diphenhydramine as needed for itching and acetaminophen as needed for Pain. |
| Wasp (leaves no stinger)|                                                                         |                                                                                                                     |
| Yellow Jacket           |                                                                         |                                                                                                                     |
| Black Widow Spider      | Slight redness, swelling, severe pain, profuse sweating, muscle and stomach cramps, nausea, difficulty breathing | · SEEK IMMEDIATE MEDICAL ATTENTION.
<p>|                         |                                                                         | · Check Airway, Breathing, Circulation.                                                                                     |
|                         |                                                                         | · Provide calm environment.                                                                                               |
|                         |                                                                         | · Avoid unnecessary movement.                                                                                             |
|                         |                                                                         | · Remove restrictive clothing.                                                                                            |
|                         |                                                                         | · Try to keep affected parts                                                                                              |
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<td>Brown Recluse Spider</td>
<td>The bit may hardly be noticed, but hours later severe pain, swelling, and blisters occur.</td>
<td>Same as for Black Widow.</td>
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<tr>
<td>Chigger, Flea, Gnat, Mosquito</td>
<td>Itching, irritation, local pain, welts.</td>
<td>Wash with soap and water. Apply ice or calamine lotion for irritation. Diphenhydramine as needed.</td>
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<td>Scorpion</td>
<td>Excruciating pain at sting site. Fever, swelling, nausea, stomach cramps, difficulty speaking, convulsions, coma</td>
<td>Same as for Black Widow.</td>
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<tr>
<td>Tarantula</td>
<td>May vary from pinprick to severe wound</td>
<td>Wash with soap and water. Cover with light sterile dressing. For severe reaction, same as for Black Widow.</td>
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**BLEEDING**

- **SEEK MEDICAL ATTENTION FOR SERIOUS BLEEDING. Call 911**
- **DO NOT APPLY PRESSURE ON PROTRUDING BONES OR SUSPECTED FRACTURES, INJURIES TO THE EYE OR HEAD, OR WOUNDS THAT CONTAIN EMBEDDED OBJECTS.**
- Observe for shock -- pale or blue lips, gums, or fingernails. Clammy skin, weakness, changes in breathing, anxiety, thirst, nausea.

**Treatment:**
1) Wearing gloves, press thick gauze pad or cloth directly over wound.
2) Continue applying pressure until bleeding is controlled.
3) Elevate injured limb higher than heart unless fracture is suspected or it causes pain.
4) After bleeding is controlled, bandage area firmly. Use tourniquet only in extreme cases when bleeding is impossible to control by applying pressure. (*Using a tourniquet for more than 5 minutes can lead to irreparable damage.)

**NOSE BLEEDS:**

* **Treatment:**
1) Wearing gloves, lean victim slightly forward and gently apply pressure to the lower soft part of the nose for five-ten minutes. Release gradually, if bleeding reoccurs repeat again.
2) Apply ice against that part of the nose until bleeding stops.
3) Have camper sit quietly.
4) Tell camper not to blow nose or participate in strenuous exercise for 3 hours.

☐ SEEK MEDICAL ATTENTION IF BLEEDING PERSISTS OR NOSE BLEED RECURS.

**BUMPS AND BRUISES**

☐ SEEK MEDICAL ATTENTION IF YOU SUSPECT BROKEN BONES (ex: Difficulty in moving area or extreme pain.)

* **Symptoms:** Reddish or purple discoloration under the skin that first turns black and blue, then may turn yellowish-green with time; can have swelling and/or tenderness at the site.

* **Treatment:**
1) Apply ice or cold compresses to area for comfort and to decrease swelling.
2) Acetaminophen as needed for comfort.

**BURNS**

☐ SEEK IMMEDIATE MEDICAL ATTENTION.

☐ DO NOT BREAK BLISTERS.
☐ DO NOT REMOVE ANYTHING STICKING TO BURN.
☐ DO NOT PUT PRESSURE ON BURNED AREAS.
☐ DO NOT USE ANTISEPTIC SPRAYS, OINTMENTS, OR HOME REMEDIES.
☐ SEEK ATTENTION FOR BURNS INVOLVING EYES, FACE, HANDS, FEET, AIRWAY, OR FOR ANY BURN LARGER THAN A QUARTER.
☐ SEEK ATTENTION IF SIGNS OF INFECTION DEVELOP AROUND BURNS.

* **Symptoms:** Superficial (First Degree) -- Red or discolored skin, swelling, pain,
Partial thickness (Second Degree) -- Blisters and red or mottled skin, severe pain.
Full thickness (Third Degree) -- White or charred skin, no pain.

_Treatment – Superficial and Partial thickness (First and Second Degree):

1) Immerse in cold water, remove restrictive clothing or jewelry.
2) Apply cold compresses every 10-15 minutes.
3) Blot area dry. Apply burn gel. Cover with sterile, non-adhesive dressing.
4) Separate toes/fingers with dry sterile non-adhesive dressing.
5) Acetaminophen as needed for pain.

_Treatment – Full thickness (Third Degree):

1) Apply cool compresses to surrounding area.
2) Remove only clothing that is easily removed and restrictive clothing or jewelry.
3) Cover lightly with dry, sterile, non-adhesive dressing. Separate burned toes/fingers as above, if possible.
4) Elevate burned arms or legs higher than the heart -- avoid friction or pressure.
5) Monitor for shock, keep person calm.

COMMUNICABLE DISEASES

☐ The following should be considered suggestive of communicable diseases:
   Temperature of 100 degrees or more
   Sore throat
   Runny nose
   Vomiting
   Rash
   Inflamed eyelids
   Skin lesions including impetigo
   Scabies
   Lice

_Treatment:

1) Isolate child from others
2) Treat symptoms
3) Notify parents
4) Seek medical treatment as needed.
5) See reportable diseases section for reporting guidelines.
CONSTIPATION

SEEK MEDICAL ATTENTION IF CONSTIPATION PERSISTS MORE THAN 48 HOURS OR IF SEVERE PAIN IS NOTED WHILE TRYING TO HAVE A BOWEL MOVEMENT.

Symptoms: Infrequent bowel movements, dry or hard stools, pain or difficulty in having a bowel movement.

Treatment:
1) Encourage fluids, fruit, high-fiber well-balanced diet, exercise.

DIARRHEA

SEEK MEDICAL ATTENTION IF DIARRHEA PERSISTS MORE THAN 24 HOURS, IF BLOOD IS NOTED IN THE STOOLS, OR IF SYMPTOMS OF DEHYDRATION OCCUR.

Symptoms: Frequent liquid bowel movements, fever, cramps, occasional blood in stools.

Treatment:
1) Encourage frequent clear liquids (no milk, dairy, or high-fiber foods) to prevent dehydration (Ex: Pedialyte or Gatorade).
2) Children’s Mylanta or Pepto Bismal (if over 12yrs old).
3) Advance diet as tolerated as diarrhea eases.
4) Encourage rest and good hygiene.
5) Notify parents, send camper home if necessary.
6) Refer promptly if diarrhea is accompanied by vomiting of 3 or more campers who have similar symptoms.

DYSMENORRHEA

SEEK MEDICAL ATTENTION IF SEVERE PAIN OR BLEEDING NOTED DURING MENSTRUAL CYCLE.

Symptoms: Cramps, headache, lower back pain, nausea, and vomiting associated with menstrual cycle.

Treatment:
1) Encourage rest.
2) Warm compresses for comfort.
3) Acetaminophen or Ibuprofen as needed for comfort.
EAR ACHE
SEEK MEDICAL ATTENTION IF EAR ACHE PERSISTS MORE THAN 24 HOURS OR IF DRAINAGE IS NOTED FROM THE EARS.

**Symptoms:** Pain in ear, itching, tenderness, hearing loss, swelling around ear.

**Treatment:**
1) Warm compresses to affected ear for comfort.
2) Have child lay on opposite side.
2) Acetaminophen as needed for comfort.

ENURESIS

**Treatment:**
1) Clean child, clothing, bedding.
2) Psychological support by staff to child.

FOREIGN BODY IN EYE

SEEK MEDICAL ATTENTION IF THE FOREIGN OBJECT IS ON THE IRIS OR PUPIL OR SEEMS EMBEDDED IN THE EYE. DO NOT TRY TO REMOVE.

SEEK MEDICAL ATTENTION IF UNABLE TO REMOVE THE OBJECT OR IF IRRITATION PERSISTS.

FOR OBJECT DEEPLY IMBEDDED IN EYE-DO NOT TOUCH IT OR APPLY PRESSURE, TELL PATIENT NOT TO MOVE EITHER EYE. COVER BOTH EYES. KEEP PATIENT CALM UNTIL EMERGENCY ASSISTANCE ARRIVES.

FOR CHEMICAL BURN TO EYE-CONTINUALLY FLUSH EYE FOR AT LEAST 20 MINUTES WHILE AWAITING MEDICAL ASSISTANCE TO ARRIVE.

**Symptoms:** Pain, burning, itching sensation, tearing, reddened eye, blurred vision, sensitivity to light.

**Treatment:**
1) Tell patient not to rub eye.
2) Gently pull upper eyelid down over lower eyelid and hold it there a minute until the flow of tears has a chance to wash the object away.
3) Tilt head to side, try to flush the object out with saline or eye wash.
4) If object is visible, remove it with a sterile cotton swab or gauze pad if irrigation does not flush object out.
5) If unable to remove, cover eye loosely with dry, sterile gauze pad and seek immediate medical attention. Since it may be difficult to attach anything to the eye in a way that is loose and without pressure, it may be best to simply ask the patient to keep eyes closed.
FRACTURES
SEEK IMMEDIATE MEDICAL ATTENTION.
DO NOT TRY TO RE-SET FRACTURE.
FOR SEVERE INJURY-DO NOT move patient unless absolutely necessary, monitor ABC’s, and check for other injuries.

Symptoms: Pain, bruising, swelling of area, decreased mobility, obvious deformity of affected area.

Treatment:
1) Keep affected areas as still as possible until medical attention is available.
2) Remove clothing near injury.
3) Cover open fracture wound loosely with clean, sterile non-adherent dressing.
4) Support area with sling or splints, keep patient comfortable.
5) Apply ice to area for comfort and to decrease swelling (15mins on/15mins off)
6) Monitor circulation in fingers/toes -- if they become blue or swollen, loosen sling or splint.

HEAD INJURIES
SEEK IMMEDIATE MEDICAL ATTENTION FOR ALL HEAD INJURIES.
DO NOT MOVE VICTIM IF NECK OR BACK INJURIES ARE SUSPECTED, UNLESS ABSOLUTELY NECESSARY. CALL 911.
DO NOT Give patient anything to eat or drink.

Symptoms: unequal pupils, double vision, weak pulse, shallow or labored breathing, cuts or bruises on head, loss of memory.

Treatment:
1) Monitor ABC’s – airway, breathing, circulation.
2) Observe for vomiting, dizziness, loss of consciousness, blurred vision, nose bleeds, headache, or confusion.
3) Keep victim in calm, quiet place until able to seek medical attention.
4) Do not administer anything for pain till evaluated by a doctor.
HEAT EXHAUSTION
SEEK IMMEDIATE MEDICAL ATTENTION.
DO NOT GIVE MEDICATIONS OR BEVERAGES WITH ALCOHOL OR CAFFEINE.
OBSERVE FOR SHOCK OR SEIZURES.

Symptoms: Pale, cold, moist skin, profuse sweating, extreme thirst, muscle cramps, normal temperature, nausea, vomiting, weakness, dizziness, fast but weak pulse, fainting.

Treatment:
1) Take person to a cool, shaded, well-ventilated area or room, loosen clothing and have them lie down. Elevate feet 8-12 inches. Apply cool moist cloths.
2) Give sips of cool water or Gatorade -- ½ glass every 15 minutes for one hour.
3) Encourage rest.

HYPERGLYCEMIA-HIGH BLOOD SUGAR
SLOW ONSET

Symptoms: Increase thirst and urination, weakness, abdominal pains, generalized aches, loss of appetite, nausea and vomiting, heavy labored breathing

Treatment:
1) Call doctor
2) Give patient fluids without sugar if able to swallow.
3) Test blood sugar if personal equipment has been provided.
4) Give insulin as prescribed for patient.

HYPOGLYCEMIA-LOW BLOOD SUGAR
RAPID ONSET

Symptoms: Excessive sweating, faintness, headache, pounding of heart, trembling, impaired vision, hunger, not able to awaken, irritability, personality change

Treatment:
1) Give sugar or food containing sugar--honey, candy, fruit, if conscious.
2) Call doctor if symptoms persist.
3) Test blood sugar if personal equipment has been provided.
4) Encourage more carbohydrates and more frequent meals.
HYPOTHERMIA

- SEEK IMMEDIATE MEDICAL ATTENTION
- DO NOT massage the victims limbs.
Symptoms: Temp below 95°F, shivering, cool to touch, mental confusion.
Treatment:
  1) Move patient to warm area.
  2) Lay person down.
  3) Wrap patient in warm blankets.
  4) Give patient warm fluids if conscious.

IMPALED OBJECT

- SEEK IMMEDIATE MEDICAL ATTENTION. CALL 911

Treatment:
  1) Immobilize object with gauze wrapping or soft cloth.
  2) DO NOT ATTEMPT to remove object.
  3) Monitor for bleeding or shock.

INFECTIONS

- Refer all immediately for medical attention.

  Symptoms: Pain, fever, drainage, redness at area of wound or abrasion

  Treatment:
  1) All Camp Staff should wear gloves to evaluate all skin infections.
  2) Clean area with first aid wash.
  3) Cover with sterile dressing and antibiotic ointment.
  4) Acetaminophen as needed for comfort.

ITCHING/RASH

- Seek medical attention if rash develops after taking medication, if rash persists or worsens, or is accompanied by fever or severe itching.

  Symptoms: Raised, reddened area to skin -- may or may not itch

  Treatment:
  1) Apply cool compresses or calamine lotion to ease itching.
  2) Acetaminophen or diphenhydramine for comfort.
LICE
☐ Small oval grayish-white nits are seen fixed to the hair shaft. Unlike flakes of dandruff, they cannot be easily dislodged. Lice may be seen around the back of the head and behind the ears.

Treatment:
1) SEND CAMPER HOME FOR TREATMENT. (Shampoo hair with approved louse formula. Use nit comb to remove all nits.)
2) Launder clothes and bed linen in hot water.
3) Vacuum living quarters.
4) Check and shampoo all persons in close contact with affected person. Launder clothes and bed linen.
5) Camper must return to nurse to be checked prior to going back to program.

LOSS OF CONSCIOUSNESS
☐ Seek medical attention. (Call 911)
☐ DO NOT MOVE PATIENT IF NECK OR BACK INJURY MAY HAVE OCCURRED.
☐ If no injury has occurred, turn patient on side, and await ambulance.

Treatment:
1) Assess ABC’s
2) Take vital signs.
3) Loosen tight clothing.
4) Continue to reassess ABC’s until EMS arrive.

PAIN
☐ Seek medical attention for severe pain that lasts more than 30 minutes or is accompanied by fever, nausea, vomiting.

Treatment:
1) Encourage rest.
2) Acetaminophen or Ibuprofen as needed for comfort.
3) Warm compresses as needed for comfort.
PLANT POISONING -- (POISON OAK, IVY, SUMAC)

- Seek medical attention for severe reaction, trouble breathing, or extreme case of rash.
- Do not break blisters.

    Symptoms: Rash, raised welts, itching, swelling at area of reaction

    Treatment:
    1) Wash area with soap and water.
    2) Acetaminophen as needed for comfort.
    3) Calamine lotion and Diphenhydramine as needed for itching.

POISONING -- INTERNAL

- CALL POISON CONTROL CENTER -- 1-800-222-1222 And Call 911.
- Monitor airway, breathing, circulation.
- DO NOT induce vomiting unless instructed to do so.
- DO NOT give anything to drink unless instructed to do so.
- Administer antidotes as instructed to do so by Poison Control.
- SEEK IMMEDIATE MEDICAL ATTENTION.

    Symptoms: Burning around mouth, lips, tongue, coughing, gagging, headache, nausea, dizziness, drowsiness, slurred speech, lack of coordination, difficulty swallowing, trouble breathing, cold, clammy skin, thirst, convulsions, coma.
SEIZURES
- Instruct staff on management as camper need demands.

Management:
- DO NOT leave unattended.
- Note how long seizure lasts.
- Prevent injury by assisting person to the floor.
- Clear area of furniture
- DO NOT insert any object in the mouth.
- Loosen clothing at neck if possible.
- Cushion head if possible.
- Turn head to side if vomiting occurs.
- If no history of seizures or for prolonged seizure, call 911. Call parents even if camper has a history of seizures.

SHOCK
- Shock symptoms may be due to the shock state or to underlying disease process.

Symptoms: Lethargy, somnolence, hands and feet are often cyanotic and pale, also cold and moist, pulse is weak and rapid, respirations are elevated, BP is low.

Treatment:
1) Call 911, Monitor ABC’s.
2) Keep patient warm and dry, elevate legs, keep patient calm.

SNAKE BITE
- SEEK IMMEDIATE MEDICAL ATTENTION FOR ANY SNAKE BITE.
- Remove restrictive clothing items around the area.
- Do not cut through the bite and draw out venom unless you are trained in the procedure and are more than several hours away from medical aid.
- Do not apply a constricting band around the bite unless you are trained in the procedure and medical help is more than 2 hours away.
- Snakebite kits should only be used by trained personnel and only when medical help is not available.
- Identify if the snake is poisonous or non-poisonous before administering first aid.

Signs of poisonous snakebite: Pain, swelling, discolored skin, dizziness, nausea, drowsiness, sweating, headache, drooling, thirst, weakness, slurred speech, blurred vision, vomiting, difficulty breathing, shock, delirium, paralysis
Treatment of POISONOUS SNAKE BITE:

SEEK IMMEDIATE MEDICAL ATTENTION.
Monitor ABC’s.

1) Keep the affected part at or below heart level.
2) Wash the wound with soap and water.  DO NOT APPLY COLD COMPRESS OR ICE.
3) Do not move the affected part unless absolutely necessary, limit victims movement-Carry victim if necessary.
4) Keep the victim warm, and calm.
5) Do not give food or drink

Observe for shock

Treatment of NON-POISONOUS SNAKE BITE:
1) Wash the wound with soap and water or sterile normal saline.
2) Contact doctor to see if further treatment is needed.

MONITOR for signs of infection --increased pain or tenderness, swelling, throbbing, redness, drainage, red streaks leading from the wound, fever, or swollen glands.

SORE THROAT
Seek medical attention : *If pain persists more than 24 hours.
*If pain is severe or is accompanied by rash, pus in throat, difficulty in swallowing
*If the child has been exposed to strep throat.

Symptoms: Pain in throat, occasional trouble swallowing; may have fever, swollen glands, headache

Treatment:
1) Encourage fluids
2) Encourage rest
3) Salt water gargle
4) Acetaminophen and throat lozenges as needed for comfort
5) Notify parents if patient not improving with treatments.
SPLINTERS
☐ Seek medical attention if the splinter is deeply embedded, if you are unable to remove it at all, or if signs of infection develop.

Treatment:
1) Wash around area with soap and water
2) If the splinter is protruding from the skin, remove the splinter at the same angle which it entered with sterilized tweezers.
3) If the splinter is just under the skin, loosen the skin around the splinter with sterilized needle and remove it at the same angle which it entered with sterilized tweezers.
5) Wash the area with first aid wash, apply antibiotic cream and a clean bandage.
6) Monitor for signs of infection.
7) Check to make sure patient has had tetanus in last 10 years.

SPRAINS AND STRAINS
☐ SEEK MEDICAL ATTENTION IF YOU SUSPECT BROKEN BONES, IF PAIN IS SEVERE, IF PAIN OR SWELLING DO NOT DECREASE AFTER 24 HOURS, OR IF THE INJURED PART DOES NOT FUNCTION.

Symptoms: A sprain is a stretched or torn ligament or muscle tendon in the region of a joint.
A strain is a pulled or stretched muscle.
Symptoms may include pain, swelling, tenderness when touched; bruising and decreased range of movement is possible.

Treatment:
1) Apply cold compresses or ice as needed the first 24 hours after injury (15mins on/ 15mins off).
2) Immobilize the area with elastic bandage to prevent further injury.
3) Rest affected area and elevate it if possible.
5) After initial 24 hours, apply warm compresses as needed for comfort. Acetaminophen as needed for comfort OR Ibuprofen for swelling.

SUNBURN
☐ Seek medical attention for severe sunburn OR if a rash, chills, or fever develop, or if victim is pale, dizzy, or nauseous.
☐ Do not break blisters.

Symptoms: Reddened, tender skin, pain, swelling, blisters, burning sensation.
Treatment:
1) Get victim out of the sun.
2) Apply cool compresses to relieve pain.
3) Apply Aloe liberally.
4) Encourage fluids.
4) Acetaminophen as needed for comfort.
5) Avoid tight clothes that may rub area.
6) Encourage patient to stay out of sun until symptoms disappear.

SUNSTROKE/HEAT STROKE
☐ SEEK IMMEDIATE MEDICAL ATTENTION.
☐ DO NOT GIVE ANY MEDICATIONS OR ALCOHOL RUB.
☐ OBSERVE FOR SHOCK AND SEIZURES.

Symptoms:  Red, hot, dry skin, extremely high temperature, no sweating, rapid pulse, disorientation, convulsions, loss of consciousness.

Treatment:
1) Place in a cool shower and sponge until temperature is reduced or wrap in wet, cold towels or sheets.
2) Apply cool compresses to neck, groin, arm pits until temperature is reduced.
3). Encourage fluids only after temperature is reduced.

TICKS
☐ The tick may be visible on the skin as a dark spot.
☐ DO NOT use petroleum jelly, a hot match, or nail polish to remove tick.

Treatment:
1) Grab the tick by the head with tweezers as close to skin as possible and pull it straight out slowly.
2) Clean the bite mark with first aid wash, soap and water or alcohol, cover area with antibiotic cream and band aid.
3) Seek medical aid if the tick is deeply embedded.
4) Notify parents to monitor for signs of Lyme's Disease or Rocky Mountain Spotted Fever; usually appears within 2-4 weeks after exposure.

☐ Monitor for signs of Lyme’s Disease or Rocky Mountain Spotted Fever:
Rash, fever, chills, headache, swollen glands, stiff neck, fatigue, restlessness, muscle and joint pain, dizziness, loss of appetite, swollen hands and feet, swelling around the eyes or in the inner eyelids measles-like spots on the palms and soles, bulls-eye rash.
TOOTH ACHE
□ Seek medical attention if pain persists more than 24 hours or if abscessed tooth is suspected.

   Symptoms: Pain around tooth, swelling or redness around area, headache
   Treatment:
   1) Warm saline rinses as needed for comfort.
   2) Acetaminophen as needed for comfort.

TOOTH INJURY
□ SEEK IMMEDIATE MEDICAL ATTENTION

   Treatment:
   1) Assess airway and control bleeding
   2) If possible place tooth back in patient’s mouth in socket without damaging tooth or touching roots.
   3) If not possible, place tooth in “save a tooth system” or in container of whole milk.

UPSET STOMACH
□ Seek medical attention for extreme pain that lasts more than 30 minutes, or if stomach ache persists, worsens, recurs, or is accompanied by nausea, vomiting, fever.

   Symptoms: Pain in abdominal area -- may be accompanied by fever, cramps, nausea, vomiting, diarrhea, constipation.
   Treatment:
   1) Encourage rest.
   2) Encourage clear liquids as tolerated.
   3) Calcium Carbonate (if over 12 years old)
   4) Warm Compresses to area as needed for comfort.
ACETAMINOPHEN
(REGULAR STRENGTH TYLENOL (325mg))
(Pain reliever)

INDICATIONS: Fever, minor aches and pains, headaches, muscle aches, common cold, toothaches, and menstrual cramps.

RECOMMENDED DOSEAGES:
ADULTS/CHILDREN OVER 12 YEARS:
2 tablets by mouth every 4-6 hours
Maximum dosage: 12 tablets in 24 hours.

Children 6-11
1 tablet every 4-6 hours
Max dose: 5 tablets in 24 hours.

JUNIOR TYLENOL MELTAWAYS (160mg)
-Dissolve in mouth or chew
-No more than 5 tablets in 24 hours
RECOMMENDED DOSAGES:
Ages:
6-8yrs 2 tablets
9-10 yrs 2 ½ tablets
11yrs 3 tablets
12 yrs 4 tablets

SIDE EFFECTS: rash

INTERACTIONS: caffeine, alcohol
ALKA SELTZER

INDICATIONS FOR USE: Indigestion and gas

RECOMMENDED DOSAGE:
Dissolve original Alka-Seltzer in 4 oz. of water before taking.

ADULTS (12yrs and older):
2 Tablets every 4 hours not to exceed 6 tablets in 24 hours

DO NOT GIVE TO CHILDREN UNDER 12 DUE TO RISK OF REYE SYNDROME.
DO NOT GIVE IF ALLERGIC TO ASPIRIN.

SIDE EFFECTS: heartburn, nausea, thirst, fever, dimness of vision

DRUG INTERACTIONS: anticoagulants, hypoglycemics, insulin,

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CALCIUM CARBONATE
(TUMS and Tums EX -(Acid reducer)

INDICATIONS: Indigestion, nausea, upset stomach, and gas.

RECOMMENDED DOSEAGE:
Adults 12 and over 1-4 tablets every hour as needed no more than 10 tablets in 24 hours.

SIDE EFFECTS: constipation, nausea, flatulence

INTERACTIONS: antibiotics (Tetracycline, Cipro, PCN), Iron

DO NOT GIVE WITH MILK OR OTHER FOODS HIGH IN VITAMIN D or with high calcium diet.
DEXTROMETHORPHAN HYDROBROMIDE  
(Robitussin)

INDICATIONS FOR USE: Symptomatic relief of nonproductive cough due to colds or inhaled irritants.

RECOMMENDED DOSAGE:  
GELCAPS:  
ADULTS AND CHILDREN 12 YEARS AND OLDER –  
30 mg every 6-8 hrs, not to exceed 120 mg/24 hrs. Do not use in children less than 12 years old.

LOZENGES:  
ADULTS AND CHILDREN 12 YEARS AND OLDER-  
5-15 mg every 1-4 hrs, up to 120 mg/day.

CHILDREN, 6-12 YEARS OF AGE –  
5-10 mg every 1-4 hrs, not to exceed 60 mg/day. Do not give to children under 6 years of age.

LIQUID AND SYRUP:  
ADULTS AND CHILDREN 12 YEARS AND OLDER –  
10-20 mg every 4hrs or 30 mg q 6-8 hrs, not to exceed 120 mg/day.

CHILDREN, 6-12 YEARS OF AGE –  
15 mg every 6-8 hrs, up to 60 mg/day.

ORAL SUSPENSION, EXTENDED – RELEASE  
ADULTS AND CHILDREN 12 YEARS AND OLDER –  
60 mg every 12 hrs, up to 120 mg/day.

CHILDREN, 6-12 YEARS OF AGE –  
30 mg every 12 hrs, up to 60 mg/day.

USE WITH CAUTION IN CLIENTS WITH NAUSEA, VOMITING, HIGH FEVER, RASH, OR PERSISTENT HEADACHE.

SIDE EFFECTS: CNS – Dizziness, drowsiness; GI – nausea, vomiting, stomach pain

DRUG INTERACTIONS: Grapefruit juice, MAO inhibitors, quinidine, silbutramin
DIMETAPP COLD AND ALLERGY ELIXIR -
Antihistamine/Nasal decongestant

INDICATIONS FOR USE: Nasal congestion, runny nose, sneezing, itchy, watery eyes.
RECOMMENDED DOSAGES:

ELIXIR:

ADULTS AND CHILDREN OVER 12 YEARS:
10 ml every 4 hr
Not to exceed 60 ml daily

CHILDREN 6 - 12 YEARS:
5 ml (1 teaspoon) every 4 hr
Not to exceed 30 ml daily

SIDE EFFECTS: dizziness, restlessness, nausea, vomiting, diarrhea, constipation, palpitations, insomnia, excitability in children.

INTERACTIONS: Anticoagulants, Antidepressants, CNS depressants, MAO inhibitors

REGULAR STRENGTH DIPHENHYDRAMINE (BENADRYL)
(Antihistamine)

INDICATIONS FOR USE: Runny nose, itchy/watery eyes, sneezing, allergic reactions

RECOMMENDED DOSAGE:

Chewables
Ages 6-12yrs 1-2 tablets every 4-6 hours
Ages 12 and over 2-4 tablets every 4-6 hours

Liquid
Ages 6-12 yrs 1-2 teaspoons every 4-6 hours
Ages 12 and over 2-4 teaspoons every 4-6 hours
*Do Not exceed 6 doses in 24 hours.

Kapseals
Ages 12 and over 1-2 kapseals every 4-6 hours
*Do Not exceed 6 doses in 24 hours
SIDE EFFECTS: drowsiness, headache, dizziness, palpitations, nasal stuffiness, nausea, vomiting, diarrhea, dry mouth, constipation, rash, excitability in children.

INTERACTIONS: CNS depressants

TAKE WITH: food or milk to decrease stomach upset

EPI-PEN

INDICATIONS FOR USE: SEVERE, LIFE THREATENING ALLERGIC REACTIONS

Signs and Symptoms: Swelling of the throat, lips and or mouth, trouble breathing,

STANDARD USAGE:

1) Pull off gray safety cap.
2) Place black tip on thigh at right angle to leg. Always apply to thigh.
3) Using a quick motion, press hard into thigh until auto injector mechanism functions, and hold in place for several seconds. The Epi-pen unit should then be removed and discarded. Massage the injection area for 10 seconds.
4) CALL 911
5) Keep patient warm and avoid exertion.
6) Give second dose if needed.

Side Effects: Increased heart rate, nausea, irregular heart beat, vomiting, cardiac arrythmias

Contraindications: Heart problems, MAOI’s, tricyclic antidepressants.
REGULAR STRENGTH IBUPROFEN (ADVIL/MOTRIN)
(Pain reliever/fever reducer)

INDICATIONS FOR USE: Minor aches and pains, headaches, toothaches, backaches, menstrual cramps, muscle aches, arthritis, and fever.

RECOMMENDED DOSAGES:

ADULT/CHILDREN OVER 12 YEARS -
200-400 mg by mouth every 4-6 hours

CHILDREN UNDER 12 YEARS -
20-40 mg/kg by mouth 3-4 times per day

SIDE EFFECTS: headache, drowsiness, ringing in ears, upset stomach, nausea, rash

INTERACTIONS: Aspirin

Take With: food or milk to decrease risk of upset stomach.

INHALERS
*Read each drugs package insert*

STANDARD USAGE FOR A PRESSURIZED METERED-DOSE INHALER:

1) Remove the cap and shake the inhaler (attach to spacer, if used).
2) Breathe out slowly and steadily.
3) Hold the inhaler in the mouth or 2 inches from the open mouth, tilt head back slightly. If using a spacer, place the spacer mouthpiece in the mouth.
4) Press the canister once to release a dose of the medicine while you breathe in very slowly and as deeply as possible.
5) Hold the breath for about 10 seconds or as long as possible.
6) Breathe out slowly and steadily.
7) Wait 30-60 seconds before repeating, if ordered.
8) Replace cap.
MYLANTA antacid/Anti-gas

Indications: Heart burn, indigestion, sour stomach, gas and bloating.

RECOMMENDED DOSEAGE:  
Adults and children 12 and over 2-4 teaspoons after meals and at bedtime  
(No more than 12 teaspoons in 24 hours)

SIDE EFFECTS: nausea, constipation

INTERACTIONS: antibiotics (Tetracycline, PCN, Cipro), Iron

Children’s Mylanta chewables

Recommended dosage:  
6-11yrs 2 tablets up to 3 times a day

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NEBULIZER
*Read each drugs package insert*

A nebulizer, also known as a breathing machine, changes asthma medication from a liquid to a mist, so that it can be more easily inhaled into the lungs. Home nebulizer therapy is particularly effective in delivering asthma medications to infants and small children and to anyone who is unable to use inhalers with spacers.

Once you have the necessary supplies:

- Place the air compressor on a sturdy surface that will support its weight. Plug the cord from the compressor into a properly grounded (three-prong) electrical outlet.
- Before treatment, wash your hands with soap and water and dry completely.
- Carefully measure medications exactly as you have been instructed and put them into the nebulizer cup. Most medications today come in premeasured unit dose vials so measuring is not necessary. If you do measure use a separate, clean measuring device for each medication.
- Assemble the nebulizer cup and mask or mouthpiece.
- Connect the tubing to both the aerosol compressor and nebulizer cup.
- Turn on the compressor to make sure it is working correctly. You should see a light mist coming from the back of the tube opposite the mouthpiece.
• Sit up straight on a comfortable chair. If the treatment is for your child, he or she may sit on your lap. If you are using a mask, position it comfortably and securely on your or your child's face. If you are using a mouthpiece, place it between your or your child's teeth and seal the lips around it.
• Take slow, deep breaths. If possible, hold each breath for 2-3 seconds before breathing out. This allows the medication to settle into the airways.
• Continue the treatment until the medication is gone (an average of 10 minutes). The nebulizer will make a sputtering noise, and the cup will have just a little medication remaining. If dizziness or jitteriness occurs, stop the treatment and rest for about 5 minutes. Continue the treatment, and try to breathe more slowly.
• If dizziness or jitteriness continues to be a problem with future treatments, inform your doctor. During the treatment, if the medication sticks to the sides of the nebulizer cup, you may shake the cup to loosen the droplets.

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PEPTO-BISMOL

Indications: Heartburn, indigestion, upset stomach, nausea, and diarrhea.

RECOMMENDATION DOSAGES:
ADULTS/CHILDREN OVER 12 YEARS:
2 TBSP OR 30 ml (shake well)

REPEAT ABOVE DOSAGE EVERY ½ TO 1 HOUR AS NEEDED, TO A MAXIMUM OF 8 DOSES IN A 24 HOUR PERIOD. DRINK PLENTY OF CLEAR FLUIDS TO HELP PREVENT DEHYDRATION WHICH MAY ACCOMPANY DIARRHEA.

SIDE EFFECTS: temporary darkening of tongue or stool

DRUG INTERACTION PRECAUTION:
IF TAKING MEDICINES FOR ANTICOAGULATION, DIABETES, OR GOUT CONSULT A DOCTOR BEFORE GIVING. IF TAKEN WITH ASPIRIN AND RINGING IN THE EARS OCCURS, STOP USING. IF ALLERGIC TO ASPIRIN DO NOT USE AS AN AdVERSE REACTION MAY OCCUR.

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