Routine Drug Administration Record

Name: _____ Campsite: _____

Troop No.: _____ Date of birth: _____ Classification: _____

Drug hypersensitivity: _____ Weight: _____

Prescribing Physician: _____
Medications: _____ Rx: ☐ No ☐ Yes Number(s): _____
Dosage: _____ Date filled: _____
Route: ☐ P.O. ☐ I.M. ☐ S.C. ☐ S.L. ☐ Topical ☐ Inhalation ☐ Rectal
Times: ☐ PRN ☐ Daily ☐ B.I.D. ☐ T.I.D. ☐ Q.I.D. ☐ A.C. ☐ P.C. ☐ H.S.
Amount in bottle: _____ Comments: _____

Med Time	S	M	T	W	T	F	S

Prescribing Physician: _____
Medications: _____ Rx: ☐ No ☐ Yes Number(s): _____
Dosage: _____ Date filled: _____
Route: ☐ P.O. ☐ I.M. ☐ S.C. ☐ S.L. ☐ Topical ☐ Inhalation ☐ Rectal
Times: ☐ PRN ☐ Daily ☐ B.I.D. ☐ T.I.D. ☐ Q.I.D. ☐ A.C. ☐ P.C. ☐ H.S.
Amount in bottle: _____ Comments: _____

Med Time	S	M	T	W	T	F	S

Prescribing Physician: _____
Medications: _____ Rx: ☐ No ☐ Yes Number(s): _____
Dosage: _____ Date filled: _____
Route: ☐ P.O. ☐ I.M. ☐ S.C. ☐ S.L. ☐ Topical ☐ Inhalation ☐ Rectal
Times: ☐ PRN ☐ Daily ☐ B.I.D. ☐ T.I.D. ☐ Q.I.D. ☐ A.C. ☐ P.C. ☐ H.S.
Amount in bottle: _____ Comments: _____

Med Time	S	M	T	W	T	F	S

Prescribing Physician: _____
Medications: _____ Rx: ☐ No ☐ Yes Number(s): _____
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Route: ☐ P.O. ☐ I.M. ☐ S.C. ☐ S.L. ☐ Topical ☐ Inhalation ☐ Rectal
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Prescribing Physician: _____
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Times: ☐ PRN ☐ Daily ☐ B.I.D. ☐ T.I.D. ☐ Q.I.D. ☐ A.C. ☐ P.C. ☐ H.S.
Amount in bottle: _____ Comments: _____

Med Time	S	M	T	W	T	F	S

P.O. = by mouth
PRN = as needed
A.C. = before meals
I.M. = intermuscular
B.I.D. = two times a day
P.C. = after meals
S.C. = sub-cutaneous
T.I.D. = three times a day
H.S. = hours of sleep (taken at bedtime)
S.L. = sub-lingual-under-tongue
Q.I.D. = four times a day

Initial	Signature	Name	Position

INSTRUCTIONS: Sheet is for reproduction as needed. It should be three-hole punched and kept in a binder during camp week. Use one sheet for each camper with a prescription. Record all medicines brought to camp (up to FIVE medications per sheet). The medication, dosage and dosage schedule should be copied from the prescription. Record dispensing times and days in the blocks provided for each medication as they are dispensed. After camp, place sheet(s) inside the first aid log.