

Guardian Signature Sheet

Takamune, Lisa

JEMS Special Camp 2019

Page 1

Camper will receive the following medications/supplements at the indicated times:

<i>Time</i>	<i>Days</i>	<i>Medication</i>	<i>Purpose</i>	<i>Dosage</i>	<i>Frequency</i>	<i>Special Instructions</i>	<i>Initial</i>
9:00 am	Mo Tu We Th Fr Sa	Clopidogrel	anti platelet action; promotes heart and blood circulation	75 mg/tablet--dose is 1 tablet	daily in AM	SE--confusion, fatal intracranial bleeding, hypotension, hemorrhage, bronchospasm, respiratory tract bleeding, epistaxis, hematuria, dyspepsia, gastritis, ulcers AVOID USE OF GRAPEFRUIT OR GRAPEFRUIT JUICE. May take longer than usual to stop bleeding. REfrain from activities in which trauma and bleeding may occur. Notify if unusal bleeding or bruising occurs.	
9:00 am	Mo Tu We Th Fr Sa	Vitamin B-12	nutritional supplement	500 mg/tablet--dose is 1 tablet	daily after breakfast		
9:00 am	Mo Tu We Th Fr Sa	Vitamin C	nutritional supplement	500 mg/tablet--dose is 1 tablet	daily after breakfast		
6:00 pm	Su Mo Tu We Th Fr	L-Arginine	nutritional supplement for the heart	500 mg/tab--dose is 2 capsules	daily after dinner	SE--indigestion, nausea, headache, bloating, diarrhea, gout, blook abnormalities, allergies, airway inflammation, worsening of asthma, low blood pressure, decreased insulin sensitivity.	

2019-06-27

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Page 2

Camper will receive the following medications/supplements at the indicated times:

Time	Days	Medication	Purpose	Dosage	Frequency	Special Instructions	Initial
9:00 pm	Su Mo Tu We Th Fr	Zioptan	glaucoma treatment	one drop both eyes	daily at bedtime	SE--headache, ocular stinging or irritation. DRUG COMES IN SINGLE USE CONTAINERS AND UNUSED PORTIONS MUST BE DISCARDED BECAUSE CONTAINERS DO NOT CONTAIN A PRESERVATIVE.	

I acknowledge that the above medications listed are complete and accurate for the above camper.

signed: _____ relationship to camper: _____ date: _____

2019-06-27