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**For 2024, please note the following update has been made in regards to volunteer medications:**

## **Volunteer Medication Policy**

To ensure camper health and safety, adult volunteers (ages 18+) are responsible for securely storing their medications in a manner inaccessible to campers. **This policy applies to both prescription and over-the-counter medications, as well as vitamins and supplements.** Volunteers may opt to turn their medications in with the volunteer nurse of their camp session for storage. They may also choose to utilize a medication lock box or other storage option where medications cannot be accessed by campers.

If a minor volunteer (ages 0-17) is attending with their parent/legal guardian, the parent/legal guardian is responsible for securely storing the medication of the minor volunteer in accordance with the above policy.

Any minor volunteers (ages 0-17) attending without a parent/legal guardian fall under the Camper Medication Policy and must adhere to the same procedures as campers in relation to medications.

# Form Timeline

## Form

## Due Date/Instructions

### 1. Camper Routine & PRN Forms

Have parents complete during check-in.  
File in your Nurse's Binder for reference.

### 2. "Pick Up Meds with Nurse" Stickers

Place on appropriate Consent to Release Forms the night of check-in. Turn forms in to Camp Office upon completion and no later than noon the following day.

### 3. Nurse's Camp Health Record

Immediately following incident. Leave in your binder. The entire log will be turned in to the Camp Office at the conclusion of your session.

### 4. Individual Camper Health Report

Fill out immediately following incident. Turn in to office at end of session.

### 5. Supply Restock Request

Fill out if needed and leave in the Nurse's Binder when you turn it in at the end of your session.

## Introduction

Thank you for serving at Round Lake! Our staff is deeply appreciative of your commitment to making this a safe session for our campers. Yours is an important role and we are glad to have you join our team.

Our staff looks forward to partnering with you as we all strive towards the same goal-making Round Lake a “unique place where the Gospel of Jesus Christ is experienced.” We hope to share God’s love with each and every camper, and you are a part of that mission. Thank you for serving our campers in this way.

This manual is intended to help you navigate your role as Camp Nurse. Please read it carefully and follow the instructions provided. If you have any questions or concerns, please do not hesitate to contact first your dean and then the Round Lake Staff. The camp’s Main Office may be reached during business hours at 419-827-2017 or at [office@roundlake.org](mailto:office@roundlake.org). Your dean should be available at all times during your session.

Thank you again for serving as a Volunteer Camp Nurse at Round Lake!

The Round Lake Staff

## Job Description

- Work on a team with the dean as well as the volunteer and paid staff.
- Oversee safe and accurate storage and distribution of campers’ medications.
- Provide emergency support for children.
- Produce an accurate written record of any medical or health-related incidents.
- Communicate thoroughly with parents.
- Follow all camp guidelines.

## Prior to Camp

- Complete all required online volunteer staff training and registration.
- Communicate with the dean to familiarize yourself with the campers to have an idea of any health scenarios you may be dealing with.
- Thoroughly read and understand this manual. Should you have any questions, please contact your dean or the Camp Office.

## Safety Reminders

- 1) **Never be alone with a camper.** This is for your safety. Always have another volunteer staff and a camper present when working with a camper. Stress to the other volunteer staff that they cannot send campers to the Nurse’s Quarters alone. Should a camper come to the Nurse’s Quarters alone, either have them go back for a volunteer staff and camper or administer the medication outside. **DO NOT BE ALONE WITH A CAMPER INSIDE THE NURSE’S QUARTERS.** Strive to be above reproach. Never place yourself in a situation that appears questionable. If you are uncertain, err on the side of caution.
- 2) **Diligently follow all instructions on campers’ forms.** Administer medications correctly and on time. If you have any questions, do not guess. Contact the camper’s parents.

- 3) **Contact parents for anything out of the ordinary.** It is better to over-communicate with parents than to fail in informing them of an incident which may or may not be serious. You have been provided with phone numbers and email addresses. Use them. Contact parents even for things which appear small, such as poison ivy or a bee sting. If a camper is injured or falls ill, check-out should **NOT** be the first time the parents find out about it. When in doubt, make the phone call to discuss the incident with the parents more immediately. Ask parents how they would like their child to be treated.
- 4) **Know where AEDs are located.** There is an AED on the porch outside the Main Office on Camp Side as well as another in the hallway just outside the Nurse's Quarters on Lodge Side.
- 5) **Be aware of what medications campers are carrying.** Campers should **NOT** carry their own medications. This even includes over-the-counter medications, such as Midol or Tums. All medications must be turned in to the nurse during check-in. A few potential exceptions to this policy are Epi-pens and inhalers as they may be needed in an emergency situation. You must give permission for campers to carry these items. You must also be sure you know who is carrying them in event of an emergency. Communicate with campers' family, leaders and dorm parents regarding this matter.

## Check-In Procedures

During check-in, your sole duty is to check in camper's medications and to speak with parents regarding any medical concerns. Before arriving at camp, each student will have already filled out medical and emergency contact information. You will be provided with this information as a reference at the start of check-in. Please follow these steps:

### Summer Camp Check-In

- 1) Attend your volunteer staff meeting (scheduled by your dean).
- 2) Go to volunteer staff check-in.
- 3) Settle in at the Nurse's Quarters. Familiarize yourself with the area and contact a paid staff member should you have any concerns or questions.
- 4) Arrive at the camper check-in area 30 minutes prior to camper check-in. For most camps, this means you arrive at 5:00 pm.
- 5) The Registrar will give you the Medical Information Sheet along with your Nurse's Binder and all other relevant materials.
- 6) A line of campers will have already formed before check-in starts. Walk through this line, collecting medications and instructions from parents. Place each camper's medications in a zip-lock bag (provided) and label with the camper's full name. All medications should be in original packaging with instructions. Ask parents if any medical information has changed since their child registered for camp. If a child has medications, the parent will fill out a form detailing administration instructions.
- 7) After check-in, return to the Nurse's Quarters to sort and store medications. All medications should remain locked in the Nurse's Quarters at all times for safety.

- 8) After check-in and once all campers have been accounted for, the paid staff will give you the Consent to Release Forms. This will already be alphabetized for you. Place reminder stickers (found in your Nurse's Binder) on the forms of any campers with medications so that they will remember to pick those up at the end of the session.
- 9) Return Consent to Release Forms to the Main Office upon completion. If the office is closed at this point, please return them before noon the following day.

### **Retreat Check-In**

- 1) Arrive at the camper check-in area 30 minutes prior to camper check-in.
- 2) The Registrar will give you the Medical Information Sheet along with your Nurse's Binder and all other relevant materials.
- 3) Sit at the nurse's table located just after the check-in line. Paid camp staff will direct campers with medications or medical concerns to you.
- 4) Collect medications and instructions from parents. Place each camper's medications in a zip-lock bag and label with the camper's full name. All medications should be in original packaging with instructions. Ask parents if any medical information has changed since their child was registered for the retreat. If a child has medications, the parent will fill out a form detailing administration instructions.
- 5) After check-in, return to the Nurse's Quarters to sort and store medications. All medications should remain locked in the Nurse's Quarters at all times for safety.

## **Daily Tasks**

### **Distributing Medications from Home**

Meet with your dean ahead of time to discuss when and where you will distribute camper medications. These are regularly scheduled medications the campers brought from home. Generally speaking, you will be administering medicine at meals and right before bed. Be careful to never place yourself in a situation where you are alone with a camper, even for a minute or two. For this reason, **we strongly discourage dispensing medications from the Nurse's Quarters.** Instead, set up a Nurse's Station in a public area around meal times and before bed. For example, on Camp Side you may set up a station in the lobby of the Retreat Center at night for evening medications. That way, volunteer staff can bring their campers to you on their way to the dorms for bedtime, avoiding a camper being sent alone to the Nurse's Quarters. Discuss options with your dean. Ultimately, where you distribute medications from will be determined by you and the dean to best meet the needs of your session.

### **Distributing Other Medications**

Campers will fall ill or have injuries. When this happens, volunteers need to know where you are at all times. Magnets with common locations are in the Nurse's Quarters. Whenever you leave that area, please place the magnet with your location on the outside door of the Nurse's Quarters so volunteers know where to find you.

Again, **NEVER BE ALONE WITH A CAMPER**. At least one other volunteer staff and a camper should accompany the injured or ill camper to the Nurse's Quarters. This is for your protection.

**WHENEVER A SITUATION IS QUESTIONABLE, ALWAYS CALL THE PARENTS.**

### **Recording Incidents**

Everything you do during your session must be recorded. The **Camper Routine & PRN Form** will be one of your greatest resources. Please follow these instructions exactly. The form the parents filled out will count as your record as long as it is followed exactly. If for some reason this form is not followed exactly, contact the parents immediately to inform them of the changes. Make a note on the **Camper Routine & PRN Form** of what differed from the instructions and why.

When dealing with something not included on the **Camper Routine & PRN Form**, you will need to fill out two forms. The first is the **Nurse's Camp Health Record**. This is a log of everything you do during camp that is not mandated by the **Camper Routine & PRN Form**. You must also fill out the **Individual Camper Health Report Form** for each camper individually which will be included in the camper's records, and a copy may be sent to the parents. It is the Nurse's responsibility to ensure this form is completed. At the end of your session, leave any completed forms in your Nurse's Binder and turn in to the Camp Office.

### **Contacting Parents**

Communication with parents is critical to a successful week. Each parent views health and injury scenarios differently, so you must strive to understand and accommodate these differences. While poison ivy may seem small and harmless to one parent, it may cause panic and concern for another. This is why you must always communicate with parents. Even if something seems small to you, it may seem large to a parent. When in doubt, **ALWAYS** call the parent before making a decision concerning their child's health. Parents should be making these decisions, not the Camp Nurse. Protect yourself by calling parents and following their decisions.

Furthermore, document each incident with a camper on the Individual Camper Health Report Form. A copy of this form may be sent to the parents if necessary.

## **Check-Out Procedures**

- 1) Station yourself in the Nurse's Quarters until all campers have left the grounds.
- 2) Volunteer staff will send campers with medications to you so that they may pick those up. It is your responsibility to check-out medications to the parents.
- 3) Once campers have left, place any left-behind medications into the medication bin along with your nurse's binder and keys. Give to your dean to turn into the office.

## **Directions to Wooster Community Hospital**

- Exit the camp by turning left onto State Route 3
- Continue on State Route 3 to Wooster for about 14 miles and cross over State Route 30
- Continue to Liberty Street (first stoplight) and **turn right on Liberty Street**
- Go through several stoplights to Beall Avenue and **turn left on Beall Avenue**
- Travel up through the college area until the hospital is on your right

**Wooster Community Hospital  
1761 Beall Avenue  
Wooster, OH 44691**

**Hospital Phone: 330-263-8100**

**Emergency Room: 330-263-8446**

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# General Guidelines for Lice

**If you suspect lice, please contact your Dean and the Camp Manager IMMEDIATELY.**

Treatment for head lice is recommended for persons diagnosed with an active infestation. All household members and other close contacts should be checked; those persons with evidence of an active infestation should be treated. Some experts believe prophylactic treatment is prudent for persons who share the same bed with actively-infested individuals. All infested persons (household members and close contacts) and their bedmates should be treated at the same time.

Some pediculicides (medicines that kill lice) have an ovicidal effect (kill eggs). For pediculicides that are only weakly ovicidal or not ovicidal, routine retreatment is recommended. For those that are more strongly ovicidal, retreatment is recommended only if live (crawling) lice are still present several days after treatment (see recommendation for each medication). To be most effective, retreatment should occur after all eggs have hatched but before new eggs are produced.

When treating head lice, supplemental measures can be combined with recommended medicine (pharmacologic treatment); however, such additional (non-pharmacologic) measures generally are not required to eliminate a head lice infestation. For example, hats, scarves, pillow cases, bedding, clothing, and towels worn or used by the infested person in the 2-day period just before treatment is started can be machine washed and dried using the hot water and hot air cycles because lice and eggs are killed by exposure for 5 minutes to temperatures greater than 53.5°C (128.3°F). Items that cannot be laundered may be dry-cleaned or sealed in a plastic bag for two weeks. Items such as hats, grooming aids, and towels that come in contact with the hair of an infested person should not be shared. Vacuuming furniture and floors can remove an infested person's hairs that might have viable nits attached.

Treat the infested person(s): Requires using an Over-the-counter (OTC) or prescription medication.

**Follow these treatment steps:**

## **CALL PARENT AND EXPLAIN THE SITUATION BEFORE PROVIDING TREATMENT.**

- 1) Before applying treatment, it may be helpful to remove clothing that can become wet or stained during treatment.
- 2) Apply lice medicine, also called pediculicide, according to the instructions contained in the box or printed on the label. If the infested person has very long hair (longer than shoulder length), it may be necessary to use a second bottle. Pay special attention to instructions on the label or in the box regarding how long the medication should be left on the hair and how it should be washed out.  
**WARNING:** Do not use a combination shampoo/conditioner, or conditioner before using lice medicine. Do not re-wash the hair for 1–2 days after the lice medicine is removed.

- 3) Have the infested person put on clean clothing after treatment.

- 4) If a few live lice are still found 8–12 hours after treatment, but are moving more slowly than before, do not retreat. The medicine may take longer to kill all the lice. Comb dead and any remaining live lice out of the hair using a fine-toothed nit comb.
- 5) If, after 8–12 hours of treatment, no dead lice are found and lice seem as active as before, the medicine may not be working. Do not retreat until speaking with your health care provider; a different pediculicide may be necessary. If your health care provider recommends a different pediculicide, carefully follow the treatment instructions contained in the box or printed on the label.
- 6) Nit (head lice egg) combs, often found in lice medicine packages, should be used to comb nits and lice from the hair shaft. Many flea combs made for cats and dogs are also effective.
- 7) After each treatment, checking the hair and combing with a nit comb to remove nits and lice every 2–3 days may decrease the chance of self-reinfestation. Continue to check for 2–3 weeks to be sure all lice and nits are gone. Nit removal is not needed when treating with spinosad topical suspension.
- 8) Retreatment is meant to kill any surviving hatched lice before they produce new eggs. For some drugs, retreatment is recommended routinely about a week after the first treatment (7–9 days, depending on the drug) and for others only if crawling lice are seen during this period. Retreatment with lindane shampoo is not recommended.

### **Supplemental Measures**

Head lice do not survive long if they fall off a person and cannot feed. You don't need to spend a lot of time or money on housecleaning activities. Follow these steps to help avoid re-infestation by lice that have recently fallen off the hair or crawled onto clothing or furniture.

- 1) Machine wash and dry clothing, bed linens, and other items that the infested person wore or used during the 2 days before treatment using the hot water (130°F) laundry cycle and the high heat drying cycle. Clothing and items that are not washable can be dry-cleaned OR sealed in a plastic bag and stored for 2 weeks.
- 2) Soak combs and brushes in hot water (at least 130°F) for 5–10 minutes.
- 3) Vacuum the floor and furniture, particularly where the infested person sat or lay. However, the risk of getting infested by a louse that has fallen onto a rug or carpet or furniture is very small. Head lice survive less than 1–2 days if they fall off a person and cannot feed; nits cannot hatch and usually die within a week if they are not kept at the same temperature as that found close to the human scalp. Spending much time and money on housecleaning activities is not necessary to avoid reinfestation by lice or nits that may have fallen off the head or crawled onto furniture or clothing.
- 4) Do not use fumigant sprays; they can be toxic if inhaled or absorbed through the skin.

### **Over-the-Counter Medications**

Many head lice medications are available "Over-the-counter" without a prescription at a local drug store or pharmacy. Each Over-the-counter product approved by the FDA for the treatment of head lice contains one of

the following active ingredients. If crawling lice are still seen after a full course of treatment contact your health care provider.

1) Pyrethrins combined with piperonyl butoxide;

Brand name products: A-200\*, Pronto\*, R&C\*, Rid\*, Triple X\*.

Pyrethrins are naturally occurring pyrethroid extracts from the chrysanthemum flower. Pyrethrins are safe and effective when used as directed. Pyrethrins can only kill live lice, not unhatched eggs (nits). A second treatment is recommended 9 to 10 days after the first treatment to kill any newly hatched lice before they can produce new eggs. Pyrethrins generally should not be used by persons who are allergic to chrysanthemums or ragweed. Pyrethrin is approved for use on children 2 years of age and older.

2) Permethrin lotion, 1%;

Brand name product: Nix\*.

Permethrin is a synthetic pyrethroid similar to naturally occurring pyrethrins. Permethrin lotion 1% is approved by the FDA for the treatment of head lice. Permethrin is safe and effective when used as directed. Permethrin kills live lice but not unhatched eggs. Permethrin may continue to kill newly hatched lice for several days after treatment. A second treatment often is necessary on day 9 to kill any newly hatched lice before they can produce new eggs. Permethrin is approved for use on children 2 months of age and older.

## When Treating Head Lice

- 1) Do not use extra amounts of any lice medication unless instructed to do so by your physician and pharmacist. The drugs used to treat lice are insecticides and can be dangerous if they are misused or overused.
- 2) All the medications listed above should be kept out of the eyes. If they get onto the eyes, they should be immediately flushed away.
- 3) Do not treat an infested person more than 2–3 times with the same medication if it does not seem to be working. This may be caused by using the medicine incorrectly or by resistance to the medicine. Always seek the advice of your health care provider if this should happen. He/she may recommend an alternative medication.
- 4) Do not use different head lice drugs at the same time unless instructed to do so by your physician and pharmacist.

## Individual Camper Health Report (Sample)

**Instructions:** To be filled out by the Camp Nurse for any and every illness or injury while child is at Round Lake Christian Camp. A copy of this form may be sent to the parents at the end of the session.

**Date and Time of Incident:** July 3, 2024 at 4:00 pm

**Nurse:** Janice Lee

**Camp Session:** 5<sup>th</sup>-6<sup>th</sup> Grade Camp 4

**Dean:** Robert Swartzentruber

**Camper Name:** Julia Patterson

**Camper's Dorm:** Retreat Center 108

**Who Accompanied the Camper:** Faculty Angie Jordan and camper Faith Taylor

### Description of Illness or Injury and Assessment:

Julia stepped on a bee getting out of the Lake during rest time. The stinger was not in her foot and the affected area had swollen to the size of a dime. Julia was crying and saying it hurt.

**Parents Contacted:** ☒ Yes/☐ No

**Parental Response:** Spoke to Julia's mom. She says Julia has been stung before and that this is normal. She would like the nurse to give Julia Benadryl.

**Treatment or Other Decision:** Benadryl administered.

**Location of Treatment:** Nurse's Quarters

**Follow-Up (If Applicable):** Checked on Julia at dinner at 6:30 pm and then later at 10:00 pm just before bedtime. The swelling had decreased. No more swelling by morning.

# Individual Camper Health Report

**Instructions:** To be filled out by the Camp Nurse for any and every illness or injury while child is at Round Lake Christian Camp. A copy of this form may be sent to the parents at the end of the session.

**Date and Time of Incident:**

**Nurse:**

**Camp Session:**

**Dean:**

**Camper Name:**

**Camper's Dorm:**

**Who Accompanied the Camper:**

**Description of Illness or Injury and Assessment:**

**ALWAYS CONTACT THE PARENT PRIOR TO TREATMENT OR GIVING MEDICATION**

**Parents Contacted:** Yes/No

**What You Communicated:**

**Parental Response:**

**Treatment or Other Decision:**

**Location of Treatment:**

**Follow-Up (If Applicable):**

# Supply Restock Request

**Instructions:** Please fill this out before the conclusion of your session to help our staff best meet the needs of our camp nurses.

**Date:**

**Camp Session:**

**Dean:**

**Nurse:**

**Supplies starting to run low:**

**Supplies that are entirely out:**

**Other Comments:**