



HEALTH CENTER POLICIES

Camp (978) 402-2222, Fax (978) 402-2210

- **Over the Counter Medications**

The nurse will call you to obtain verbal permission if a non-emergent need arises for over the counter medications that we stock such as Acetaminophen, Ibuprofen, and Benadryl. You may write a letter giving permission ahead of time if you choose. We also stock an EpiPen for campers with *unknown* severe allergic reactions.

- **Sun Protection**

Please apply sunscreen prior to your child's arrival. Counselors will remind campers to re-apply after swimming and will assist younger age campers. Please label their hat, water bottle, and sunscreen. Light colored clothing will help keep your child cooler.

- **Head Lice**

Please inspect your child's scalp and hair on a weekly basis and report any lice occurrence to the nurse. We will send a notice home to you if there is a case in your child's group.

- **Mildly Ill Campers**

Campers who are mildly ill will be brought to the Health Center. The camper may remain at camp if they are determined not to be contagious and can participate in the daily program activities. If a child's condition worsens, or it is determined that the child poses a threat to the health of other campers, parents will be contacted and asked to pick up their child. The camper will remain in the Health Center until the parent arrives.

- **Influenza-Like Illness**

Persons who currently have or have had an influenza-like illness (fever plus at least either cough or sore throat) should not attend camp for at least 24 hours after their fever has resolved. They should not have any symptoms that would require limitation in their participation of camp activities.

NOTE: The nurse will call home if your child experiences fever, nausea, vomiting, rashes, a bump to the head, or any other injury that would require further observation. If you have questions, please do not hesitate to contact the camp office.

Campers Taking Medications and Special Medical Conditions

- **Administering of Medications**

Prescription medications must be in original pharmacy containers. We require a written order from the prescriber, signed consent from parent, and photograph of child. The parent should deliver medication directly to the nurse each Monday. If you would like to provide specific over-the-counter medication for the nurse to keep on hand for your child, please have it in the original packaging, and provide written consent and specific instructions re: dosage and frequency.

- **Campers with Special Health Conditions**

Notify the nurse of any chronic illness such as asthma, diabetes, seizure disorder or any **life-threatening allergy**. An **Emergency Care Plan** signed by parents and doctor must be provided to the camp nurse. This outlines measures to be taken in the event of emergency, including medication and dosage to be administered. A photograph of the camper must be attached. If a camper has a severe allergy or asthma that may require an inhaler, parents must provide camp with two EpiPens and/or inhalers, one of which will be carried by the camper's Head Counselor, and one that will be kept in the Nurse's Office and used in the event of an emergency.

- **Administration of Medications During Off-Campus Trips**

Campers in the Teen Adventure Camp will be off campus on field trips at various times. Counselors will be carrying and dispensing their routine medications.

Confidentiality

All information is confidential and will only be shared with the appropriate camp personnel who will be responsible for the care of your child.

Meningococcal Disease and Camp Attendees: Commonly Asked Questions

What is meningococcal disease?

Meningococcal disease is caused by infection with bacteria called *Neisseria meningitidis*. These bacteria can infect the tissue (the “meninges”) that surrounds the brain and spinal cord and cause meningitis, or they may infect the blood or other organs of the body. Symptoms of meningococcal disease can include fever, severe and constant headache, stiff neck or neck pain, nausea and vomiting, and rash. In the US, about 350-550 people get meningococcal disease each year and 10-15% die despite receiving antibiotic treatment. Of those who survive, about 10-20% may lose limbs, become hard of hearing or deaf, have problems with their nervous system, including long term neurologic problems, or have seizures or strokes.

How is meningococcal disease spread?

These bacteria are passed from person-to-person through saliva (spit). You must be in close contact with an infected person’s saliva in order for the bacteria to spread. Close contact includes activities such as kissing, sharing water bottles, sharing eating/drinking utensils or sharing cigarettes with someone who is infected; or being within 3-6 feet of someone who is infected and is coughing and sneezing.

Who is most at risk for getting meningococcal disease?

People who travel to certain parts of the world where the disease is very common, microbiologists, people with HIV infection and those exposed to meningococcal disease during an outbreak are at risk for meningococcal disease. Children and adults with damaged or removed spleens or persistent complement component deficiency (an inherited immune disorder) are at risk. Adolescents, and people who live in certain settings such as college freshmen living in dormitories and military recruits are at greater risk of disease from some of the serotypes.

Are camp attendees at increased risk for meningococcal disease?

Children attending day or residential camps are **not** considered to be at an increased risk for meningococcal disease because of their participation.

Is there a vaccine against meningococcal disease?

Yes, there are 2 different meningococcal vaccines. Quadrivalent meningococcal conjugate vaccine (Menactra and Menveo) protects against 4 serotypes (A, C, W and Y) of meningococcal disease. Meningococcal serogroup B vaccine (Bexsero and Trumenba) protects against serogroup B meningococcal disease, for age 10 and older.

Should my child or adolescent receive meningococcal vaccine? That depends. Meningococcal conjugate vaccine (Menactra and Menveo) is routinely recommended at age 11-12 years with a booster at age 16. In addition, this vaccine may be recommended for children with certain high-risk health conditions, such as those described above. Otherwise, meningococcal vaccine is **not** recommended for attendance at camps. Meningococcal serogroup B vaccine (Bexsero and Trumenba) is recommended for people with certain relatively rare high-risk health conditions (examples: persons with a damaged spleen or whose spleen has been removed, those with persistent complement component deficiency (an inherited disorder), and people who may have been exposed during an outbreak). Adolescents and young adults (16 through 23 years of age) who do not have high risk conditions **may** be vaccinated with a serogroup B meningococcal vaccine, preferably at 16 through 18 years of age, to provide short term protection for most strains of serogroup B meningococcal disease. Parents of adolescents and children who are at higher risk of infection, because of certain medical conditions or other circumstances, should discuss vaccination with their child’s healthcare provider.

How can I protect my child or adolescent from getting meningococcal disease? The best protection against meningococcal disease and many other infectious diseases is thorough and frequent handwashing, respiratory hygiene and cough etiquette. Individuals should:

1. wash their hands often, especially after using the toilet and before eating or preparing food (hands should be washed with soap and water or an alcohol-based hand gel or rub may be used if hands are not visibly dirty);
2. cover their nose and mouth with a tissue when coughing or sneezing and discard the tissue in a trash can; or if they don’t have a tissue, cough or sneeze into their upper sleeve.
3. not share food, drinks or eating utensils with other people, especially if they are ill.
4. contact their healthcare provider immediately if they have symptoms of meningitis.

If your child is exposed to someone with meningococcal disease, antibiotics may be recommended to keep your child from getting sick. You can obtain more information about meningococcal disease or vaccination from your healthcare provider, your local Board of Health (listed in the phone book under government), or the Massachusetts Department of Public Health Division of Epidemiology and Immunization at (617) 983-6800 or on the MDPH website at www.mass.gov/dph.