

PNR FOR OVER THE COUNTER MEDICATIONS

Community Care Licensing regulations preclude foster parents from administering medications on a PRN basis without prior approval and instruction from a medical professional. This includes Over the Counter medications. This form is provided to indicate those medications that are not appropriate for the child. Any category removed will require phone or office contact prior to administration.

Child's Name: _____ Age: _____ DOB: _____

Medical Professional's Name: _____

Office Phone: _____ After Hours: _____

**In each category please CROSS OFF the medication that is NOT acceptable for this child.
Please use medication per label instructions.**

1) Analgesics & Antipyretics for Pain and Fever reducer

- a) (Tylenol, Liquiprin, Panadol, Tempra)
- b) For Menstrual cramp (Pamprin or Midol)
- c) Ibuprofen (Motrin, Advil, or generic)

2) Cough Preparations

- a) (Vicks' pediatric Formula 44, Robitussin DM, or Triminicol)
- b) LONG-ACTING DEXTROMETHORPHAN (Deslym)

3) Decongestant for cough or stuffy nose

- a) PSUEDOEPHENDRINE (Pediapcare infant drops, Sudafed Liquid or tablets)
- b) PHENYLPROPANOLAMINE (Allerest, Doricidin, Dimetapp, Naldecon, Robitussin CFR, St. Joseph's cold tablets, Triminic, Triminic DM)

4) Antihistamines For skin and nasal symptoms

- a) CHLOPHIRAMINE (Allerest, Chlortrimeton, Comtrex, Contac, Dorcol, Pediapcare Prescriptions, Tyna, Tyna-C-Sudafed Plus, Triaminc preparations. Children's Tylenol cold preparations, Vick's children's Nyquil, Vick's pediatric Formula 44, preparations)
- b) BROMPHENIRAMINE (Bromfed, Dimetane preparations, Dimetapp preparations, Dristan preparations, Drixoral)
- c) DIPHENHYDRAMINE (Benadryl preparations, Benylin)
- d) TRIPROLIDINE (Actified preparations)

5) Sore Throat Preparations PHENOL AND SODIUM

- a) PHENOLATE (Cepacol, Cepastat, Chloraseptic, Halls, Lozenges, Sucrets)

6) EYE DROPS For irritations due to allergies

- a) TETRAHYDROZOLINE HYDROCHLORIDE (Alcon, Clear eyes, Murine, Visine)

7) TOPICAL SKIN PREPARATION for itching

- a) CALAMINE OR CHALADRYL LOTION
- b) 0.5% or 1.0 % HYDROCORTISONE CREAM (Caldecort, Cortaid, Cortezone 5, Cortezone 10)
- c) Tropical Antibiotics (Bactine, Mycitracin, Neosporin, Nupercinal, Polysporin)
- d) Fungicides for athlete's foot or yeast infection on skin (Cyrex, Desenex, Lotrimin, Mycelex, Tinactin, Clotrimazole, Miconazole, Tolnaftate)
- e) Muscle Strain (Ben gay, Icy Hot, Mineral Ice)
- f) Acne (Avon Clean & Clear, Clearskin 2, Noxema, Oxy10)
- g) Lice Treatment (Nix, Rid)

8) ANTI-DIARRHEAL

- a) (Immodium, Immodium AD, Kaopectate, Pepto-Bismal)

9) ANTI_FLATULENTS

- a) (Simethicone)

10) VITAMINES

Medical Professional's Signature

Date