Updated 8/2023



Pharmacy Training Guide Learn How to Pack and Dispense Medicine

Use with our Pharmacy Training Video - https://www.youtube.com/watch?v=C7mEmiPzpnE

A few notes to begin...



Patients

Before coming to Pharmacy, patients will have 3 things:

- a wrist band,
- a paper bag and an exam form

They will get those 3 things at registration (the

first station they go to when they come to clinic.)

The same Patient Identification Number will be on all 3 things.





Pharmacy Suitcases

Meds are organized in suitcases in alphabetical order.

The primary meds are in suitcases marked M1, M2, M3.

When you are on the field, open the primary medicine suitcases and make sure they are in alpha order.

There are also "overflow med" suitcases. If you run out of a certain medicine, look in one of the overflow suitcases.

A few notes to begin...

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Our Exam Form

Every patient will have an exam form (see Appendix for 2 examples of an Exam Form). Every station that the patient goes to in clinic will use the exam form.

Page 1:

- Registration fills in Name, Age, Birth date
- Nutrition fills in Height, Weight, etc. for children
- Examiners fill in the rest of page 1 Medical History, Chief Complaint, Findings, Notes and the correct Worm treatment/ Vitamins

Page 2:

Filled in by CSI - evaluates the patient's emotional health and fills in notes

Page 3 & 4:

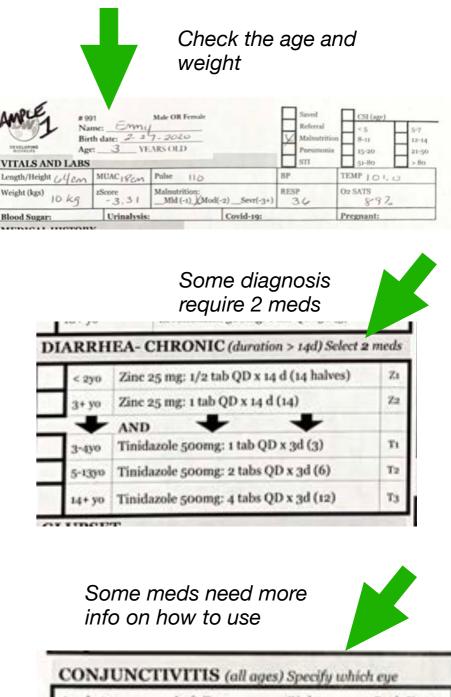
- Examiners mark diagnosis and prescribed medicine
- Pharmacy fills prescriptions marked on these pages and dispenses to the patient
- Note: Pages 3&4 of the exam form are always changing based on the medicine we can get. So the one you use on your trip may be slightly different.

01 Packing Meds - Step 1 - Review the Form

Step 1 for Packing Meds - Get the form from the patient and Review the Form

- 1.Collect forms from the patients as they come to pharmacy and then have them wait while we get their meds ready
- 2.Take a minute BEFORE filling the meds and look over the exam form. Things to check:
 - Check the age/weight of the patient and make sure the meds ordered look correct for the age of the patient
 - Are any meds missing? If yes, go ask the examiner if that is correct. For example:
 - Chronic diarrhea 2 meds should be prescribed
 Cellulitis with abscess 2 meds should be prescribed
 - Periodontitis with abscess 2 meds should be prescribed
 - Are any "directions" missing? Ask examiner if you can't find specifics in notes on the 1st page. For example:
 - •Eye/ear drops apply to Right? Left? Both?
 - •Creams apply to what area?

If you asked an examiner for more clarification, make additional notes on the patient exam form so the person dispensing the meds also sees the correct information.



Ap	ply to:	Left Eye	Right	Both	Eyes
1	infectious	Gentamicin/	Cipro: 1 drop Q	IDx5d	GI
	dry eyes	Eyedrops: 1-:	2 drops Q4h PH	IN	E3
cc	INSTIPAT	TON	-		Ш.



Stop the Training Video Look at the 2 sample Exam Forms (See Appendix)

Do you have any questions for the examiner? Does everything look correct? (See next page for answers)

01 Sample 1 Exam Form - page 1

Birth date: $2 - \frac{1}{2} - 2020$ Age: $3 - \frac{1}{2} - 2020$ Age: $3 - \frac{1}{2} - \frac{1}{2} - 2020$ VITALS AND LABS Birth date: $2 - \frac{1}{2} -$		# 991 Name: E		Male OR	Female	Saved Referral	CSI (age)	
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How old is Emmy?

How much does Emmy weigh?

What is her chief complaint?

ANSWER:

From this front page, we know this patient is 3 years old, weighs 10kg and has a cough, fever and a runny nose with watery eyes. She also has a rash on her right arm.

01 Sample 1 Exam Form - page 3

ALL PROPERTY	GIES			ITUDD		
3-4yo		izine 10mg: 1/2 tab QDx30d (30 halve	s) C7		RTENSION (> 150/90 Follow up 1 mo	-
X 5+ yo		izine 10mg: 1 tab QD x 30d (30)	C8	adu	Amlodipine 5mg: 1 tab QD x 90d (90)	AI
any age	-	n Nasal Spray (Saline) (PRN)	01	adu	Amlodipine 10mg: 1 tab QD x 90d (90)	AI
ANEMIA		n Nasai opray (Janne) (r KK)				-
2-4 yo		us Sulfate 1 tsp QD until gone (1)	F1	INSOM	INIA	_
5+ yo		usSulfate(65mg)1 tab QD x 6od (60)	F2	11+	Melatonin 5mg: 1 at bedtime PRN (30)	M
STHMA	A (Give	spacer to new users)		LICE (d	osage done in Pharmacy)	
Mild/ Interm	nittent	Salbutamol (rescue) inhaler: 1-2 puffs Q6 hrs PRN	S1	7+ 3	And the state of the second of the second state of	_
	tent or	Consult Physician/SVN		MALAF	RIA	1.
Exacer	rbation	consult r hysician/ SVN		All	Test if possible and Refer, Treat fevers	
CONJUN	NCTIV	TTIS (all ages) Specify which eye		OTITIS	EXTERNA	
Apply to: _		eft Eye RightBoth E	yes	Apply to:	Left Ear RightBoth Ears	
infecti	ious (Gentamicin/Cipro: 1 drop QIDx5d	G1	all	Gentamicin/Cipro: 1 drop in infected	
dry ey	res I	Eyedrops: 1-2 drops Q4h PRN	E3	ages		G2
CONSTI	PATIC	ON		OTITIS	MEDIA	
5+ yo	Docu	sate 100mg: 1-2 cap QD PRN(40)	D2	< 2y	Amoxicillin 250mg/5ml: 1 tsp BID x 5d (1)	Ai
DEHYDRATION (< 6mo may add infant formula)			100	X 2-8y	Amoxicillin 250mg: 2 chew tabs BID x 5d (20)	Ais
all ages Oral Rehydration: 1/2 packet Q 6hr (2)			05			Ait
an age	o Ora			9+ y	Amoxicillin 500mg: 1 cap TID x 5d (15)	AIG
DIARRH	EA (0)	RS for all diarrhea. See other meds for	_			Alc
LARRH cute or Chi	IEA (O) ronic)	RS for all diarrhea. See other meds for	-	PAIN/F	EVER (Specify reason)	Alc
DIARRH	IEA (O) ronic)		_	PAIN/F		Ale
DIARRH cute or Chi all ages	IEA (O. ronic) s Ora	RS for all diarrhea. See other meds for	05	PAIN/F	EVER (Specify reason)	
DIARRH cute or Chi all ages	IEA (O. ronic) s Ora EA- A	RS for all diarrhea. See other meds for l Rehydration: 1/2 packet Q6hr (2)	05	PAIN/F	EVER (Specify reason) itis HA Fever Body Cramps	Iı
DIARRH cute or Cha all ages IARRH	IEA (O. ronic) s Ora EA- A <25kg	RS for all diarrhea. See other meds for l Rehydration: 1/2 packet Q6hr (2) CUTE (bloody w/fever & duration<	o ₅	PAIN/F	EVER (Specify reason) itis HA Fever Body Cramps Ibuprofen 200mg:1 tab Q8h PRN (20)	I1 I2
IARRH cute or Chi all ages IARRH 1-17 yo &	IEA (O. ronic) s Ora EA- A <25kg	RS for all diarrhea. See other meds for l Rehydration: 1/2 packet Q6hr (2) CUTE (bloody w/fever & duration< Azithromycin 250mg: 1 tab QDx3d (3)	05 14d) A23	PAIN/F Arthr Other 7-12y0 13+ y0	EVER (Specify reason) itis HA Fever Body Cramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60)	I1 I2 I3
DIARRH cute or Chi all ages IARRHI 1-17 yo & 1-17 yo & 18+ yo	IEA (O. ronic) s Ora EA- AC <25kg > 25kg	RS for all diarrhea. See other meds for l Rehydration: 1/2 packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3)	05 14d) A23 A25 L2	PAIN/F Arthr Other 7-12y0 13+ y0 13+ y0	EVER (Specify reason) itis HA Fever Body Cramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60)	I1 I2 I3 A2
IARRH cute or Chi all ages IARRH 1-17 yo &: 1-17 yo &: 18+ yo IARRH	IEA (O. ronic) s Ora EA- AQ <25kg > 25kg EA- C	RS for all diarrhea. See other meds for I Rehydration: 1/2 packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2	r 05 14d) A23 A25 L2 meds	PAIN/F Arthu Other 7-12yo 13+ yo 13+ yo 3-11m	EVER (Specify reason) itis HA Fever Body Cramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1)	I1 I2 I3 A2 A3
IARRH cute or Chi all ages IARRH 1-17 yo &: 1-17 yo &: 18+ yo IARRH < 2yo	IEA (O. ronic) s Ora EA- A <25kg > 25kg EA- C Zinc 2	RS for all diarrhea. See other meds for I Rehydration: 1/2 packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 5 mg: 1/2 tab QD x 14 d (14 halves)	05 14d) A23 A25 L2 meds Z1	PAIN/F Arthr 7-1290 13+ 90 13+ 90 3-11m 1-390	EVER (Specify reason) itis HA Fever Body Cramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60)	I1 I2 I3 A2 A3 A4
IARRH cute or Chi all ages IARRH 1-17 yo &: 1-17 yo &: 18+ yo IARRH	EA (0) ronic) s Ora EA- AC <25kg > 25kg EA- C Zinc 25 Zinc 25	RS for all diarrhea. See other meds for I Rehydration: 1/2 packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2	r 05 14d) A23 A25 L2 meds	PAIN/F → Arthr Other 7-12y0 13+ y0 13+ y0 3-11m 1-3y0 7 3-5y0	EVER (Specify reason) itisHAFeverBodyCramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60)	I1 I2 I3 A2 A3 A4 A5
IARRH cute or Chi all ages IARRH 1-17 yo &: 1-17 yo &: 1-17 yo &: 18+ yo IARRH < 2yo	EA (O. ronic) s Ora EA- AC <25kg > 25kg EA- C Zinc 24 Zinc 24 AND	RS for all diarrhea. See other meds for I Rehydration: 1/2 packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 5 mg: 1/2 tab QD x 14 d (14 halves) 5 mg: 1 tab QD x 14 d (14)	05 14d) A23 A25 L2 meds Z1	PAIN/F → Arthr Other 7-12yo 13+ yo 13+ yo 3-11m ↓ 1-3yo 7 3-5yo 6-11yo 12+ yo	EVER (Specify reason) itisHAFeverBodyCramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60)	I1 I2 I3 A2 A3 A4 A5
LARRH cute or Chi all ages IARRHI 1-17 yo &: 1-17 yo &: 1-27 yo &: 1-2	EA (O) s Ora EA- A <25kg > 25kg EA- C Zinc 2 Zinc 2 AND Tinidaz	RS for all diarrhea. See other meds for I Rehydration: 1/2 packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 5 mg: 1/2 tab QD x 14 d (14 halves) 5 mg: 1 tab QD x 14 d (14) tab QD x 3d (3)	05 14d) A23 A25 L2 meds Z1 Z2 T1	PAIN/F Arthu Other 7-1290 13+ yo 13+ yo 3-11m 1-3yo 3-5yo 6-11yo 12+ yo 12+ yo	EVER (Specify reason) itisHAFeverBodyCramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60)	I1 I2 I3 A2 A3 A4 A5 A6
LARRH cute or Chi all ages IARRH 1-17 yo &: 1-17	EA (O) $ronic)$ s Ora $EA - A(C)$ $<25kg$ $EA - C$ Zinc 2g Zinc 2g Zinc 2g AND Tinidaz Tinidaz	RS for all diarrhea. See other meds for I Rehydration: $1/2$ packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 5 mg: 1/2 tab QD x 14 d (14 halves) 5 mg: 1 tab QD x 14 d (14) \swarrow zole 500mg: 1 tab QD x 3d (3) zole 500mg: 2 tabs QD x 3d (6)	05 14d) A23 A25 L2 meds Z1 Z2 T1 T2	PAIN/F Arthu Other 7-1290 13+ yo 13+ yo 3-11m 1-3yo 3-5yo 6-11yo 12+ yo 12+ yo	EVER (Specify reason) itisHAFeverBodyCramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60)	I1 I2 I3 A2 A3 A4 A5 A6
LARRH cute or Chi all ages IARRH 1-17 yo &: 1-17 yo &: 1-27	EA (O) s Ora EA- A Zinc 25kg EA- C Zinc 25kg Zinc 25kg AND Tinidaz Tinidaz	RS for all diarrhea. See other meds for I Rehydration: 1/2 packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 5 mg: 1/2 tab QD x 14 d (14 halves) 5 mg: 1 tab QD x 14 d (14) tab QD x 3d (3)	05 14d) A23 A25 L2 meds Z1 Z2 T1 T2	PAIN/F → Arthr Other 7-1290 13+ y0 13+ y0 3-11m 1-3y0 7 3-5y0 6-11y0 12+ y0 12+ y0 PERIOD	EVER (Specify reason) itisHAFeverBodyCramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:2 tabs Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60)	I1 I2 I3 A2 A3 A4 A5 A6 A7
DIARRH cute or Chi all ages IARRH 1-17 yo &: 1-17 yo &: 1-1	EA (O) s Ora EA- AC <25kg >25kg EA- C Zinc 25 Zinc 25 AND Tinidaz Tinidaz Tinidaz	RS for all diarrhea. See other meds for I Rehydration: $1/2$ packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 5 mg: 1/2 tab QD x 14 d (14 halves) 5 mg: 1 tab QD x 14 d (14) \checkmark zole 500mg: 1 tab QD x 3d (3) zole 500mg: 2 tabs QD x 3d (6) zole 500mg: 4 tabs QD x 3d (12)	05 14d) A23 A25 L2 meds Z1 Z2 T1 T2 T3	PAIN/F Arthr Other 7-12yo 13+ yo 13+ yo 3-11m 1-3yo 7 3-5yo 6-11yo 12+ yo 12+ yo PERIOD (Select 2 M	EVER (Specify reason) itisHAFeverBodyCramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:2 tabs Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60)	I1 I2 I3 A2 A3 A4 A5 A6 A7 A14
LARRH <i>cute or Chi</i> all ages IARRH 1-17 yo &: 1-17 yo &: 1-	EA + (O) $ronic)$ s Ora $EA - A$ $25kg$ $25kg$ $EA - C$ Zinc 2g Zinc 2g Zinc 2g Zinc 2g Tinidaz Tinidaz Tinidaz Tinidaz Tinidaz Tinidaz Tinidaz Tinidaz	RS for all diarrhea. See other meds for I Rehydration: $1/2$ packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 5 mg: 1/2 tab QD x 14 d (14 halves) 5 mg: 1 tab QD x 14 d (14) \swarrow sole 500mg: 1 tab QD x 3d (3) zole 500mg: 2 tabs QD x 3d (6) zole 500mg: 4 tabs QD x 3d (12) muth 262mg: 2 tabs QID PRN (18)	05 14d) A23 A25 L2 meds Z1 Z2 T1 T2	PAIN/F Arthr Other 7-1290 13+ 90 13+ 90 3-11m 1-390 7 3-590 6-1190 12+ 90 12+ 90 PERIOD (Select 2 M	EVER (Specify reason) itis HA Fever BodyCramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:1 tab Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60)	I1 I2 I3 A2 A3 A4 A5 A6 A7 A14 A17
IARRHI cute or Chi all ages IARRHI 1-17 yo &: 1-17 yo &: 1-17 yo &: 1-17 yo &: 18+ yo OIARRHI < 2yo	EA (O) s Ora EA- A 25kg > 25kg EA- C Zinc 25 Zinc 25 Zinc 25 AND Tinidaz Tinidaz Tinidaz Tinidaz C	RS for all diarrhea. See other meds for I Rehydration: $1/2$ packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 5 mg: $1/2$ tab QD x 14 d (14 halves) 5 mg: 1 tab QD x 14 d (14) 4 zole 500mg: 1 tab QD x 3d (3) zole 500mg: 2 tabs QD x 3d (6) zole 500mg: 4 tabs QD x 3d (12) muth 262mg: 2 tabs QID PRN (18) - Intermittent	05 14d) A23 A25 L2 meds Z1 Z2 T1 T2 T3	PAIN/F Arthr Other 7-12yo 13+ yo 13+ yo 3-11m ↓ 1-3yo 7 3-5yo 6-11yo 12+ yo 12+ yo PERIOD (Select 2 M 2-4yo 5-8yo	EVER (Specify reason) itis	I1 I2 I3 A2 A3 A4 A5 A6 A7 A14 A17
LARRH <i>cute or Chi</i> all ages IARRH 1-17 yo &: 1-17 yo &: 1-	EA + (O) $ronic)$ s Ora $EA - A(C)$ $25kg$ $25kg$ $EA - C.$ $Zinc 25kg$ $Zinc 25kg$ $Zinc 25kg$ $Tinidaz$ $Tinidaz$ $Tinidaz$ $Tinidaz$ $Tinidaz$ $Calcium$	RS for all diarrhea. See other meds for I Rehydration: $1/2$ packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 5 mg: 1/2 tab QD x 14 d (14 halves) 5 mg: 1 tab QD x 14 d (14) \checkmark zole 500mg: 1 tab QD x 3d (3) zole 500mg: 2 tabs QD x 3d (6) zole 500mg: 4 tabs QD x 3d (12) muth 262mg: 2 tabs QID PRN (18) - Intermittent n Carbonate: 1 tab TID PRN (20)	05 14d) A23 A25 L2 meds Z1 Z2 T1 T2 T3	PAIN/F Arthu Other 7-1290 13+ yo 13+ yo 3-11m 1-3yo 6-11yo 12+ yo 12+ yo 12+ yo PERIOD (Select 2 M 2-4yo 9+ yo	EVER (Specify reason) itis HA Fever BodyCramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophen 80mg:chew 2tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60) ONTITIS W/ABSCESS - See MD Meds Amoxicillin 250mg/5ml: 1 tsp/5ml BIDx10d (1) Amoxicillin 250mg: 2 chew tabs BIDx10d (40) Amoxicillin 500mg: 1 cap TID x 10d (30) AND	I1 I2 I3 A2 A3 A4 A5 A6 A7 A14 A17 A19
LARRH cute or Chi all ages IARRHI 1-17 yo &: 1-17 yo &: 1-27 yo &: 1-2	EA + (O) $ronic)$ s Ora $EA - A(C)$ $25kg$ $25kg$ $EA - C.$ $Zinc 25kg$ $Zinc 25kg$ $Zinc 25kg$ $Tinidaz$ $Tinidaz$ $Tinidaz$ $Tinidaz$ $Tinidaz$ $Calcium$	RS for all diarrhea. See other meds for I Rehydration: $1/2$ packet Q6hr (2) CUTE (bloody w/fever & duration < Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 5 mg: $1/2$ tab QD x 14 d (14 halves) 5 mg: 1 tab QD x 14 d (14) 4 zole 500mg: 1 tab QD x 3d (3) zole 500mg: 2 tabs QD x 3d (6) zole 500mg: 4 tabs QD x 3d (12) muth 262mg: 2 tabs QID PRN (18) - Intermittent	05 14d) A23 A25 L2 meds Z1 Z2 T1 T2 T3	PAIN/F Arthr Other 7-12yo 13+ yo 13+ yo 3-11m ↓ 1-3yo 7 3-5yo 6-11yo 12+ yo 12+ yo PERIOD (Select 2 M 2-4yo 5-8yo	EVER (Specify reason) itis HA Fever Body Cramps Ibuprofen 200mg:1 tab Q8h PRN (20) Ibuprofen 200mg:1 tab Q8h PRN (60) Ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophen 300g:2 chew 2tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:2 tabs Q6h PRN (60) Acetaminophen 500mg:2 tabs BIDx10d (1) Amoxicillin 250mg: 2 chew tabs BIDx10d (40) Amoxicillin 500mg: 1 cap TID x 10d (30) AND Metronidazole 250mg 1/2 tab TID x10d (30h)	I1 I2 I3 A2 A3 A4 A5 A6

What diagnosis did the examiner make?

Do you have any questions about the diagnosis that was made?

ANSWER:

Emmy has allergies, otits media (ear infection) and body pain.

For allergies - Emmy is 3 yrs old. Why did the examiner prescribe meds for a 5+ year old?

For Otitis Media - On the front page, it says that Emmy is allergic to amoxicillin. What alternate med should we use since she is allergic to amoxicillin?

T	· ABT: exudate/painful nodes, fever, & no coug			Soap & Anti-fungal cream: apply to area* B	ID A2
< 2yo	Amoxicillin 250mg/5ml: 1 tsp/5ml BIDx10d (1)	A14		Apply to:	-
2-8yo	Amoxicillin 250mg: 2 chew tabs BID x 10d (40)	A17	TINEA -	On head or moderate/severe on body	
9+ yo	Amoxicillin 500mg: 1 cap TID x 10d (30)	A19	<2 yo	Soap & Anti-fungal cream: apply to are	a* A2
NEUM	ONIA		-	BID *Apply to:	
< 2yo	Amoxicillin 250mg/5ml: 1 tsp BID x 5d (1)	A13	2-8yo (17+kg	Soap & Griseofulvin 125mg: 2 tabs QD : 6 od (120)	G4
2-8yo	Amoxicillin 250mg: 2 chew tabs TID x 5d (30)	A16		Soap & Griseofulvin 125mg: 4 tabs QD	K Ge
9-12y	Amoxicillin 500mg: 1 cap TID x 5d (15)	A18	9+ yo	6od (240)	00
13+ yo	Azithromycin 250mg: 2 tabs now (500mg), then 1 tab 250mg QD x 4d (6)	A24	UTI-Sim	ple (Burning, Frequency, Urgency)	
CABIE	\mathbf{S} (Examiner start teaching. Pharmacy contin	ue)	2-4yo	Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1) C4
< 15kg	Permetherin Cream	P1	5-8yo	Cephalexin 250mg: 1 cap Q 6h x 5d (20)	C5
15+kg	Ivermictin 6mg: Dose by weight in Pharmacy. Give Soap, Scabies handout & black bag	14	9+ yo	Cephalexin 500mg: 1 cap Q 6h x 5d (20)	C6
KIN - C	ELLULITIS W/ABSCESS - See MD		UTI-Con back/pelvic	plicated - See MD (Pyelo, fever, flank pain)	., ,
-		C4	< 50 kg	Levofloxacin 500mg: 1 /2 tab QD x 5d (5 L1
2-4yo 5-8yo	Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1) Cephalexin 250mg: 1 cap Q 6h x 5d (20)	C5	50+ kg	halves) Levofloxacin 500mg: 1 tab QD x 5d (5)	L3
9+ yo	Cephalexin 250mg: 1 cap Q 6h x 5d (20) Cephalexin 500mg: 1 cap Q 6h x 5d (20)	C6			
9+ y0	AND		VAGINIT	IS - Yeast Infection	-
1	Metronidazole 250mg 1/2 tab TID x 5d (15h)	Ma	10+ yo	Fluconazole 200mg: PO x 1 (NOW)	F
5-8yo	Metromdazore 200mg 1/2 tub rib rib a (-0/	M5			-
5-8y0 9-12y0	Metronidazole 250mg 1 tab TID x 5d (15)		Part Parts	TIS - Bacterial	
-			Part Parts	The second s	
9-12yo 13+ yo KIN - II	Metronidazole 250mg 1 tab TID x 5d (15)	M6 M7	VAGINI'I 14+ yo	TIS - Bacterial	T3
9-12yo 13+ yo KIN - II	Metronidazole 250mg 1 tab TID x 5d (15) Metronidazole 250mg 2 tabs TID x 5d (30) NFECTION, IMPETIGO, NON- SED CELLULITIS	M6 M7	VAGINIT 14+ yo EXTRA M	TIS - Bacterial Tinidazole 500mg: 4 tabs QD x 3d (12) MEDS - See MD(MD in	T3
9-12y0 13+ y0 KIN - II BSCES 2-4y0	Metronidazole 250mg 1 tab TID x 5d (15) Metronidazole 250mg 2 tabs TID x 5d (30) NFECTION, IMPETIGO, NON-	M6 M7	VAGINITI 14+ yo EXTRA M Take	TIS - Bacterial Tinidazole 500mg: 4 tabs QD x 3d (12) MEDS - See MD(MD in	T3 itals
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9-12y0 13+ y0 KIN - II BSCES 2-4y0 5-8y0 9+ y0 KIN - R All ages	Metronidazole 250mg 1 tab TID x 5d (15) Metronidazole 250mg 2 tabs TID x 5d (30) NFECTION, IMPETIGO, NON- SED CELLULITIS Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1) Cephalexin 250mg: 1 cap Q 6h x 5d (20) Cephalexin 500mg: 1 cap Q 6h x 5d (20) CASH/ALLERGIC (Specify where to appl) Hydrocortizone 1% cream: apply to area* BID	M6 M7 C4 C5 C6 W) H1	Acyclov Acyclov Aspirin Beclom Co-Trin Ceftria: Dexam	TIS - Bacterial Tinidazole 500mg: 4 tabs QD x 3d (12) MEDS - See MD(MD in (qty) QD/BID/TID/QID/PRN ford vir 200mg (Zoster w/in 24 hours) 81mg eethasone inhaler - 1-2 buffs BID nx(Bactrim)400/80mg800/160mg zone injection250mg500mg1g ethasone 2mg	T3 itals, ays A8 A22 B1 C9/10
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9-12y0 13+ y0 KIN - II BSCES 2-4y0 5-8y0 9+ y0 KIN - R all all	Metronidazole 250mg 1 tab TID x 5d (15) Metronidazole 250mg 2 tabs TID x 5d (30) NFECTION, IMPETIGO, NON- SED CELLULITIS Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1) Cephalexin 250mg: 1 cap Q 6h x 5d (20) Cephalexin 500mg: 1 cap Q 6h x 5d (20) Cephalexin 500mg: 1 cap Q 6h x 5d (20) ASH/ALLERGIC (Specify where to apple *Apply to: ASH/BACTERIAL (Specify where to apple Antibiotic cream: apply to area* BID *Apply to:	M6 M7 C4 C5 C6 W) H1 H1 A20	VAGINIT 14+ yo EXTRA M Take Acyclov Aspirin Beclom Co-Trin Ceftria: Dexam Diphen Doxycy Erythro Lisinop Nystati Prednis DTHER S	TIS - Bacterial Tinidazole 500mg: 4 tabs QD x 3d (12) MEDS - See MD(MD in (qty) QD/BID/TID/QID/PRN for d vir 200mg (Zoster w/in 24 hours) 8 Img tethasone inhaler - 1-2 buffs BID nx(Bactrim)400/80mg800/160mg zone injection250mg1g tethasone 2mg hydramine 25mg cline 100mg omycin 250mg wril 5mg n Oral sone 10mg: tab(s) BID x 5d UPPLIES	T3 T3 itals; ays A8 A22 B1 C9/10 D1a D1 D3 E4 L4
9-12y0 13+ y0 KIN - II BSCES 2-4y0 5-8y0 9+ y0 KIN - R all ages KIN - R CI/PID RI	Metronidazole 250mg 1 tab TID x 5d (15) Metronidazole 250mg 2 tabs TID x 5d (30) NFECTION, IMPETIGO, NON- SED CELLULITIS Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1) Cephalexin 250mg: 1 cap Q 6h x 5d (20) Cephalexin 500mg: 1 cap Q 6h x 5d (20) Cephalexin 500mg: 1 cap Q 6h x 5d (20) CASH/ALLERGIC (Specify where to apple Hydrocortizone 1% cream: apply to area* BID *Apply to: ASH/BACTERIAL (Specify where to apple Antibiotic cream: apply to area* BID *Apply to:	M6 M7 C4 C5 C6 W) H1 H1 A20	VAGINIT 14+ yo EXTRA M Take Acyclov Aspirin Beclom Co-Trin Ceftria: Dexam Diphen Doxycy Erythro Lisinop Nystati Prednis DTHER S	TIS - Bacterial Tinidazole 500mg: 4 tabs QD x 3d (12) TEDS - See MD(MD in (qty) QD/BID/TID/QID/PRN ford (qty) QD/BID/TID/QID/P	T3 iitals ays A8 A22 B1 C9/1 D1a D1a D1a D1 D1 D3 C9/1 C9/1 C9/1 C9/1 C9/1 C9/1 C9/1 C9/1

What diagnosis did the examiner make?

Do you have any questions about the diagnosis that was made?

ANSWER:

Emmy has pneumonia and a skin rash.

For pneumonia, what alternate med should we use since Emmy is allergic to amoxicillin. And should we give double this med (once for otitis media and once for pneumonia?)

For the skin rash, the examiner didn't mark where to apply the cream, but we know "right arm" from the notes on page 1.

01 Side Note...

Keeping Track of Diagnoses

On the first page of the exam form, on the top right corner, we have a chart to keep track of the certain diagnoses.

Examiners should mark this for Referrals, Malnutrition, Pneumonia and STI.

Pharmacy - If you notice that a patient has one of these and it was not marked on the front, please mark it.

AMPLE, "	991		Male OR	Female		Saved		CSI (age)	
T B	ame: irth date: ge:3	my	1-202	0	¥	Referral Malnutrition Pneumonia		< 5 8-11 15-20	5-7 12-14 21-50
VITALS AND LAB	S					STI	5	51-80	> 80
Length/Height 64 cm	MUAC	Ren	Pulse	110	BP		TEMI	P101.	0
Weight (kgs) 10 kg	zScore		Malnutr Mld (ition: -1)Mod(-2)Sevr(-3+)	RES	SP 34	02 SA	TS 897	
Blood Sugar:	Urina	alysis:		Covid-19:			Preg	nant:	
MEDICAL HISTO	RY	-							
		Yes	No	Describe		. C			1.1.4.2
		11/		A					

01 Sample 2 Exam Form - page 1

AMPLE	# 992 Name:	Dales	Male OI	R Female		Saved		CSI (age)	1	-
L L	Name: Birth date			1/0	H	Referral Malnutrition		< 5	\vdash	5-7
DEVELOPING	Age:	Y	EARS OI	LD	H	Pneumonia		8-11 15-20	F	21-50
VITALS AND LA	/			and the second		STI		51-80		> 80
ength/Height	MUAC		Pulse	82	BPIO	0/61	TEM	P 98	- (0
Weight (kgs)	zScore		Malnutrit	(and the second s	RESP		O2 SATS			
14kg	-	1		-1)Mod(-2)Sevr(-		12		997	-	
Blood Sugar:	Urin	alysis:		Covid-19			Preg	nant:		
MEDICAL HIST	ORY		A PORT						_	
		Yes	No	Describe	18.30	The Bar		1	1	
Allergies	1 2 2		~		163.2	-			_	
resently taking med	ications:		1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Carlo and		-	-	
		-	1 1						-	-
Any ongoing medical	1	-			1	100	-		-	-
mmunizations up to	date?	-		Last Deworming Date	: upac	A.C.	-		-	-
FINDINGS	-	13 60				REFERR	ALS	(1=asar), 2=	w/in
	Section of	C	ardiovasci	ular		REFERF 30 days, 3				w/in
Gen. Condition			ardiovascu							
Gen. Condition Ears		G		stinal		30 days, 3		n possib	ole)	3
Gen. Condition Ears Eyes		G G	astrointes	stinal nary		30 days, 3 Dental Nutrition STI		n possib 1 1 1	2 2 2	3 3 3
Gen. Condition Ears Eyes Mouth/Dental		G G M N	astrointes enito-urin Iusculoske eurologica	stinal nary eletal		30 days, 3 Dental Nutrition STI TB		n possib 1 1 1 1	2 2 2 2 2	3 3 3 3
Gen. Condition Ears Eyes Mouth/Dental Nose		G G M N Sl	astrointes enito-urin Iusculoske eurologica kin	stinal		30 days, 3 Dental Nutrition STI TB Vision		n possib 1 1 1 1 1 1	2 2 2 2 2 2 2	3 3 3 3 3 3
Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs		G G M N SI B	astrointes enito-urin Iusculoske /eurologica kin ehavorial	stinal nary eletal al Health		30 days, 3 Dental Nutrition STI TB Vision Other	=whe	n possib 1 1 1 1	2 2 2 2 2 2 2	3 3 3 3 3 3
Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES:	Check	G G M N SI B COP	astrointes enito-urin fusculoske eurologica kin ehavorial offs y E option i	stinal nary eletal al Health W/ Second odar in each of the 3 s	bry n	30 days, 3 Dental Nutrition STI TB Vision Other	=whe	n possib 1 1 1 1 1 1	2 2 2 2 2 2 2	3 3 3 3 3 3
FINDINGS Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TR Prophylaxis (> 290		G G M N SI B COP OF A W K ONE C OR PRC Treat	astrointes enito-urin fusculoske eurologics kin ehavorial Diffs J = C option i ophyla ment (> 2	stinal hary eletal al Health W/ Scoord odar in each of the 3 s XIS eyo): Mebendazole	Rections I	30 days, 3 Dental Nutrition STI TB Vision Other Other Other Delow:	=whe	n possib 1 1 1 1 1 1	22222222222222222222222222222222222222	3 3 3 3 3 3 3
Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TR Prophylaxis (> 290 Mebendazole chew	Check EATMENT (): / 1 tab now	G G M N SI B CO D CO Trainie k one o DR PRO Treat chew	astrointes enito-urin fusculoske eurologics kin ehavorial $rac{1}{2}$ $rac{1}{2}$ $rac{1}{2}$ $rac{1}{2}$	stinal hary eletal al Health ω / Second adar in each of the 3 s XIS zyo): Mebendazole x 3d (5)	Sections I	30 days, 3 Dental Nutrition STI TB Vision Other Other Other Delow: n Med - Recesser) or < 2	=whe	n possib 1 1 1 1 1 1	22222222222222222222222222222222222222	3 3 3 3 3 3 3
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Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TR Prophylaxis (> 290 Mebendazole chew VITAMINS Ifant	Check EATMENT (): 1 tab now Normal I Infant Mult 30 d Childr	G G M N SI B COT OT A W COT OT OT OT OT OT OT OT OT OT OT OT OT OT OT O	astrointes enito-urin fusculoske eurologics kin ehavorial Diffs J = C option i option i option i option i option i option i option i option i	stinal hary eletal al Health $\omega/$ $\omega/$ ω/ω in each of the 3 state axIIS zyo): Mebendazole x 3d (5) Severe steel go d Ch	Sections l No Worr (1st trim e Malnutr nildren's Vita	30 days, 3 Dental Nutrition STI TB Vision Other Other Other other other other Other oth	=whe	n possib 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3
Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TR Prophylaxis (> 290 Mebendazole chew OVITAMINS ofant hildren 2-10	Check EATMENT (b): 1 tab now Normal I Infant Mulu 30 d Childr 30 d Adult	G G M N SI B B COP OT A W K ONE O OR PRO Treat chew Exam tivitamins	astrointes enito-urin fusculoska feurologica kin ehavorial rachter s rachter s rachter s rachter s option i option i o	stinal hary eletal al Health $\omega/$ Scoond adar in each of the 3 s XIS eyo): Mebendazole x 3d (5) Severe cted 90 d Ch 90 d Ad	sections l No Worr (1st trim e Malnutr nildren's Vita	30 days, 3 Dental Nutrition STI TB Vision Other Other Other other other other Other oth	=whe	n possib 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3
Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TR Prophylaxis (> 290 Mebendazole chew OVITAMINS Infant hildren 2-10 dult 11+ regnant	Check EATMENT (b): 1 tab now Normal I Infant Mult 30 d Childr 30 d Adult 90 d Adult	G G M N SI B B COP OT A W K ONE O OR PRO Treat chew Exam tivitamins	astrointes enito-urin fusculoska feurologica kin ehavorial rachter s rachter s rachter s rachter s option i option i o	stinal hary eletal al Health $\omega/$ $\omega/$ ω/ω in each of the 3 state axIIS zyo): Mebendazole x 3d (5) Severe steel go d Ch	sections l No Worr (1st trim e Malnutr nildren's Vita	30 days, 3 Dental Nutrition STI TB Vision Other Other Other other other other Other oth	=whe	n possib 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3
Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TR Prophylaxis (> 290	Check EATMENT (b): 1 tab now Normal I Infant Mult 30 d Childr 30 d Adult 90 d Adult	G G M N SI B B COP OT A W K ONE O OR PRO Treat chew Exam tivitamins	astrointes enito-urin fusculoske eurologics kin ehavorial $rac{1}{2}$ $rac{1}$	stinal hary eletal al Health $\omega/$ Scoond adar in each of the 3 s XIS eyo): Mebendazole x 3d (5) Severe cted 90 d Ch 90 d Ad	sections l No Worr (1st trim e Malnutr nildren's Vita	30 days, 3 Dental Nutrition STI TB Vision Other Other Other of ection n Med - Recesser) or < 2 ition umins s	cently 2yo	n possib 1 1 1 1 1 1	2 2 2 2 2 2 2 2 2	3 3 3 3 3 3 3

How old is Peter?

How much does Peter weigh?

What is his chief complaint?

ANSWER:

From this front page, we know this patient is 7 years old, weighs 14kg and has tinea capitis (a fungal infection on the head) with draining and a odor

D1 Sample 2 exam form - page 3

-	IES			HYPERT	TENSION (> 150/90 Follow up 1 me	onth
3-4yo		zine 10mg: 1/2 tab QDx30d (30 halves)	C7	adult	Amlodipine 5mg: 1 tab QD x 90d (90)	A
5+ yo		zine 10mg: 1 tab QD x 30d (30)	C8	uuuu		
any age	Ocean	Nasal Spray (Saline) (PRN)	01	adult	Amlodipine 10mg: 1 tab QD x 90d (90)	A
NEMIA			_	INSOMN	ПА	
2-4 yo		is Sulfate 1 tsp QD until gone (1)	F1	11+ yo		1
5+ yo	1.4257	usSulfate(65mg)1 tab QD x 6od (60)	F2			-
1	(Give s	pacer to new users)		and the owner of the owner	age done in Pharmacy)	
Mild/ Interm	ittent	Salbutamol (rescue) inhaler: 1-2 puffs Q6 hrs PRN	S1	7+ yo	Lice Treatment	
Persiste		Consult Physician/SVN		MALARI	Contraction of the Contraction o	
Exacer	bation	,		All	Test if possible and Refer, Treat fevers	_
ONJUN	ICTIV	ITIS (all ages) Specify which eye		OTITIS F	EXTERNA	
pply to: _	Tatistics.	eft Eye Right Both Eye	es	Apply to:	Left Ear Right Both Ears	s
infectio	ous G	entamicin/Cipro: 1 drop QIDx5d	G1	all	Gentamicin/Cipro: 1 drop in infected	
dry eye	es E	yedrops: 1-2 drops Q4h PRN	E3	ages	ear(s) BID x 10 days	G
ONSTI	PATIO	N		OTITIS N	IEDIA	
5+ yo	Docus	ate 100mg: 1-2 cap QD PRN(40)	D2	< 2yo	Amoxicillin 250mg/5ml: 1 tsp BID x 5d (1)	A
EHYDE	RATIO	N (< 6mo may add infant formula)		2-8yo	Amoxicillin 250mg: 2 chew tabs BID x 5d (20)	A
all ages	Ora	Rehydration: 1/2 packet Q 6hr (2)	05	9+ yo	Amoxicillin 500mg: 1 cap TID x 5d (15)	A
IARRH	EA (OF	S for all diarrhea. See other meds for		DAIN/FE	VER (Specify reason)	
ute or Chr	onic)			and the second se	A REAL PROPERTY AND A REAL	
all ages	Oral	Rehydration: 1/2 packet Q6hr (2)	05	Other	s HA FeverBody Cramps	
ADDIT				Other	the second se	
AKKHI	A-AC	CUTE (bloody w/fever & duration< 14			buprofen 200mg:1 tab Q8h PRN (20)	I
1-17 yo &<		CUTE (bloody w/fever & duration< 12 Azithromycin 250mg: 1 tab QDx3d (3)		7-12yo 1	(buprofen 200mg:1 tab Q8h PRN (20) (buprofen 200mg:1 tab Q8h PRN (60)	
	25kg		(d)	7-12yo 1 13+ yo 1		I
1-17 yo &<	25kg .	Azithromycin 250mg: 1 tab QDx3d (3)	4d) A23	7-12yo 1 13+ yo 1 13+ yo 1	buprofen 200mg:1 tab Q8h PRN (60)	I: I:
1-17 yo &< 1-17 yo &> 18+ yo	25kg	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3)	(d) A23 A25 L2	7-12yo 1 13+ yo 1 13+ yo 1 3-11m 4	buprofen 200mg:1 tab Q8h PRN (60) buprofen 200mg:2 tabs Q8h PRN (60)	I: I: A:
1-17 yo &< 1-17 yo &> 18+ yo	25kg 25kg EA- CI	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 n	(d) A23 A25 L2 Meds	7-12yo 1 13+ yo 1 13+ yo 1 3-11m 4 1-3yo 4	buprofen 200mg:1 tab Q8h PRN (60) buprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1)	I: I: A: A:
1-17 yo &< 1-17 yo &> 18+ yo IARRHI < 2yo	25kg 25kg EA- CI Zinc 25	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) IRONIC (duration > 14d) Select 2 n mg: 1/2 tab QD x 14 d (14 halves)	(d) A23 A25 L2 needs Z1	7-12yo 1 13+ yo 1 13+ yo 1 3-11m 2 1-3yo 2 3-5yo 4	buprofen 200mg:1 tab Q8h PRN (60) buprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60)	I: I: A: A: A
1-17 yo &< 1-17 yo &> 18+ yo	EA- CI Zinc 25 Zinc 25	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 n	(d) A23 A25 L2 Meds	7-12yo 1 13+ yo 1 13+ yo 1 3-11m 4 1-3yo 4 3-5yo 4 6-11yo 4	ibuprofen 200mg:1 tab Q8h PRN (60) ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60)	I: I: A: A: A: A:
1-17 yo &< 1-17 yo &> 18+ yo ARRHI < 2yo 3+ yo	25kg 25kg EA- CI Zine 25 Zine 25 AND	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 m mg: 1/2 tab QD x 14 d (14 halves) mg: 1 tab QD x 14 d (14)	(d) A23 A25 L2 needs Z1	7-12yo 1 13+ yo 1 13+ yo 1 3-11m 2 1-3yo 2 3-5yo 2 6-11yo 2 12+ yo 2	buprofen 200mg:1 tab Q8h PRN (60) buprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20)	
1-17 yo &< 1-17 yo &> 18+ yo ARRHI < 2yo 3+ yo 3-4yo	EA- CI Zinc 25 Zinc 25 AND Tinidaz	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 m mg: 1/2 tab QD x 14 d (14 halves) mg: 1 tab QD x 14 d (14) \swarrow ole 500mg: 1 tab QD x 3d (3)	d) A23 A25 L2 needs Z1 Z2 T1	7-12yo 1 13+ yo 1 13+ yo 1 3-11m 2 1-3yo 2 3-5yo 2 6-11yo 2 12+ yo 2 12+ yo 2	Chuprofen 200mg:1 tab Q8h PRN (60) Chuprofen 200mg:2 tabs Q8h PRN (60) Cetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Cetaminophn80mg:chew 2tabQ6h PRN(60) Cetaminophn80mg:chew 3tabQ6h PRN(60) Cetaminophen 325mg:1 tab Q6h PRN (20) Cetaminophen 500mg:2 tabs Q6h PRN (60)	
1-17 yo &< 1-17 yo &> 18+ yo ARRHI < 2yo 3+ yo 3-4yo 5-13yo	EA- CI Zine 25 Zine 25 AND Tinidaz	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 n mg: 1/2 tab QD x 14 d (14 halves) mg: 1 tab QD x 14 d (14) \checkmark \checkmark \checkmark \checkmark \checkmark ole 500mg: 1 tab QD x 3d (3) ole 500mg: 2 tabs QD x 3d (6)	(d) A23 A25 L2 L2 Reds Z1 Z2 T1 T2 T2	7-12yo 1 13+ yo 1 13+ yo 1 3-11m 2 1-3yo 2 3-5yo 2 6-11yo 2 12+ yo 2 12+ yo 2	Chuprofen 200mg:1 tab Q8h PRN (60) Chuprofen 200mg:2 tabs Q8h PRN (60) Chuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60)	
1-17 yo &< 1-17 yo &> 18+ yo ARRHU 3+ yo 3-4yo 5-13yo 14+ yo	EA- CI Zinc 25 Zinc 25 AND Tinidaz Tinidaz	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 m mg: 1/2 tab QD x 14 d (14 halves) mg: 1 tab QD x 14 d (14) \swarrow ole 500mg: 1 tab QD x 3d (3)	(d) A23 A25 L2 L2 needs Z1 Z2 T1 T2	7-12y0 1 13+ y0 1 13+ y0 1 3-11m 4 1-3y0 4 3-5y0 4 6-11y0 4 12+ y0 4 12+ y0 4	Chuprofen 200mg:1 tab Q8h PRN (60) Chuprofen 200mg:2 tabs Q8h PRN (60) Chuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60)	12 13 A3 A4 A4 A4 A4 A4
1-17 yo &< 1-17 yo &> 18+ yo IARRHI < 2yo 3+ yo 3-4yo 5-13yo 14+ yo I UPSE	EA- CI Zine 25 Zine 25 Zine 25 AND Tinidaz Tinidaz Tinidaz	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 n mg: 1/2 tab QD x 14 d (14 halves) mg: 1 tab QD x 14 d (14) \checkmark \checkmark \checkmark \checkmark ole 500mg: 1 tab QD x 3d (3) ole 500mg: 2 tabs QD x 3d (6) ole 500mg: 4 tabs QD x 3d (12)	(d) A23 A25 L2 Reds Z1 Z2 T1 T2 T3	7-12y0 1 13+ y0 1 13+ y0 1 3-11m 4 1-3y0 4 3-5y0 4 6-11y0 4 12+ y0 4 12+ y0 4 Select 2 Me 4	ibuprofen 200mg:1 tab Q8h PRN (60) ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60)	
1-17 yo &< 1-17 yo &> 18+ yo IARRHI < 2yo 3+ yo 3-4yo 5-13yo 14+ yo IUPSET 12+ yo	EA- CI Zinc 25 Zinc 25 Zinc 25 AND Tinidaz Tinidaz Tinidaz	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 m mg: 1/2 tab QD x 14 d (14 halves) mg: 1 tab QD x 14 d (14) \checkmark ole 500mg: 1 tab QD x 3d (3) ole 500mg: 2 tabs QD x 3d (6) ole 500mg: 4 tabs QD x 3d (12) uth 262mg: 2 tabs QID PRN (18)	(d) A23 A25 L2 L2 Reds Z1 Z2 T1 T2 T2	7-12y0 1 13+ y0 1 13+ y0 1 3-11m 1 1-3y0 1 3-5y0 1 6-11y0 1 12+ y0 1 12+ y0 1 Select 2 Me 2-4y0	Amoxicillin 250mg/5ml: 1 tsp/5ml BIDx10d (1)	
1-17 yo &< 1-17 yo &> 18+ yo IARRHI < 2yo 3+ yo ✓ 3-4yo 5-13yo 14+ yo IUPSET 12+ yo EARTB	EA- CI Zine 25 Zine 25 Zine 25 AND Tinidaz Tinidaz Tinidaz Tinidaz URN -	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 n mg: 1/2 tab QD x 14 d (14 halves) mg: 1 tab QD x 14 d (14) \checkmark \checkmark \checkmark \checkmark \checkmark \checkmark \diamond ole 500mg: 1 tab QD x 3d (3) ole 500mg: 2 tabs QD x 3d (6) ole 500mg: 4 tabs QD x 3d (12) uth 262mg: 2 tabs QID PRN (18) Intermittent	(d) A23 A25 L2 Reds Z1 Z2 T1 T2 T3 (7-12y0 1 13+ y0 1 3-11m 4 3-11m 4 3-5y0 4 6-11y0 4 12+ y0 4 12+ y0 4 2-4y0 5-8y0	ibuprofen 200mg:1 tab Q8h PRN (60) ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60) Acetamino	
1-17 yo &< 1-17 yo &> 18+ yo IARRHI < 2yo 3+ yo 3-4yo 5-13yo 14+ yo IUPSET 12+ yo EARTB 3-12yo	EA- CI Zinc 25 Zinc 25 Zinc 25 AND Tinidaz Tinidaz Tinidaz C Bism URN - Calciur	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 m mg: 1/2 tab QD x 14 d (14 halves) mg: 1 tab QD x 14 d (14) \downarrow ole 500mg: 1 tab QD x 3d (3) ole 500mg: 2 tabs QD x 3d (6) ole 500mg: 2 tabs QD x 3d (12) uth 262mg: 2 tabs QID PRN (18) Intermittent n Carbonate: 1 tab TID PRN (20)	(d) A23 A25 L2 (d) Z1 Z2 T1 T2 T3 B3 C1	7-12y0 1 13+ y0 1 3-11m 4 3-11m 4 3-5y0 4 6-11y0 4 12+ y0 4 12+ y0 4 2-4y0 5-8y0	ibuprofen 200mg:1 tab Q8h PRN (60) ibuprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60) Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60) Acetaminophen 500mg:1 tab Q6h PRN (60) Ace	12 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15
1-17 yo &< 1-17 yo &> 18+ yo IARRHI < 2yo 3+ yo 3-4yo 5-13yo 14+ yo IUPSET 12+ yo EARTB 3-12yo 13+ yo	EA- CI Zinc 25 Zinc 25 Zinc 25 AND Tinidaz Tinidaz Tinidaz Tinidaz C Bism URN - Calciur	Azithromycin 250mg: 1 tab QDx3d (3) Azithromycin 500mg: 1 tab QDx3d (3) Levofloxacin 500mg: 1 tab QDx3d (3) HRONIC (duration > 14d) Select 2 m mg: 1/2 tab QD x 14 d (14 halves) mg: 1 tab QD x 14 d (14) 4 1 1 1 1 1 1 1 1	(d) A23 A25 L2 Reds Z1 Z2 T1 T2 T3 (7-12y0 1 13+ y0 1 13+ y0 1 3-11m 4 1-3y0 4 3-5y0 4 6-11y0 4 12+ y0 4 12+ y0 4 2-4y0 5-8y0 9+ y0 9+ y0	Acetaminophen 325mg:1 tab Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1) Acetaminophn80mg:chew 2tabQ6h PRN(60) Acetaminophn80mg:chew 3tabQ6h PRN(60) Acetaminophen 325mg:1 tab Q6h PRN (20) Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:2 tabs PRN (60)	In I2 I3 I4 I5 I5

What diagnosis did the examiner make?

Do you have any questions about the diagnosis that was made?

ANSWER:

There are no meds needed from page 3

01 Sample 2 exam form - page 4

11111111	a for ART: exudate/	sider pain control; likely viral painful nodes, fever, & no coug		1	Small/limited	second second lines (second second se	-
		pmg/5ml: 1 tsp/5ml BIDx10d (1)	A14		ap & Anti-tuni	gal cream: apply to area* BID	As
-		omg: 2 chew tabs BID x 10d (40)	A17 T	INEA - O	n head or mod	lerate/severe on body	-
-				IIIIII O		and the second	-
9	+ yo Amoxicillin 500	omg: 1 cap TID x 10d (30)	A19	<2 yo	Soap & Anti- BID *Appl	-fungal cream: apply to area*	Λ:
PNE	UMONIA			-		eofulvin 125mg: 2 tabs QD x	
<	2yo Amoxicillin 250	mg/5ml: 1 tsp BID x 5d (1)	A13	2-8yo (17+kg)		coluivin 125mg, 2 tabs QD x	G
2.	-8yo Amoxicillin 250	mg: 2 chew tabs TID x 5d (30)	A16 7	-	Soap & Grise	eofulvin 125mg: 4 tabs QD x	G
9	12y Amoxicillin 500	omg: 1 cap TID x 5d (15)	A18	9+ yo	60d (240)		-
13 ye		50mg: 2 tabs now (500mg), then 0 x 4d (6)	A24 U	TI-Simp	le (Burning, I	Frequency, Urgency)	-
SCAL	BIES (Examiner sto	art teaching. Pharmacy contin	nue)	2-4yo	Cephalexin 250	omg/5ml: 1 tsp Q 6h x 5d (1)	C
< 15		and the second se	P1	5-8yo	Cephalexin 250	omg: 1 cap Q 6h x 5d (20)	C.
15+	kg Ivermictin 6mg	: Dose by weight in Pharmacy. vies handout & black bag	14	9+ yo	Cephalexin 500	omg: 1 cap Q 6h x 5d (20)	ce
	- CELLULITIS	W/ABSCESS - See MD		TI-Com		ee MD (Pyelo, fever, flank,	
	2 Meds) tyo Cephalexin 250r	ng/5ml: 1 tsp Q 6h x 5d (1)	C4	< 50 kg	and all the second second	500mg: 1 /2 tab QD x 5d (5	Lı
5-1	Byo Cephalexin 250r	ng: 1 cap Q 6h x 5d (20)	C5	50+ kg	Levofloxacin	500mg: 1 tab QD x 5d (5)	L3
9+	yo Cephalexin 5001	mg: 1 cap Q 6h x 5d (20)	C6 V	AGINITI	S - Yeast Int	fection	
	AND	+ +		and the second se	A REAL PROPERTY AND A REAL	oomg: PO x 1 (NOW)	F
× 5-8		50mg 1/2 tab TID x 5d (15h)	M5	_	S - Bacteria		
9-1	2yo Metronidazole 2	50mg 1 tab TID x 5d (15)	M6 V.	AGINITI	5 - Dacteria		
	1 2 2 4 1 2 2 4 1 4 1 4 1 4 1 4 1 4 1 4	1 mm -1(aa)	Ma				1400
-		50mg 2 tabs TID x 5d (30)	M7	14+ yo	Tinidazole 500	omg: 4 tabs QD x 3d (12)	T3
KIN		IMPETIGO, NON-		XTRA M	EDS - See I	MD(MD init	-
KIN BSC	- INFECTION, ESSED CELLU	IMPETIGO, NON- LITIS	E	XTRA M	EDS - See I		als
KIN BSC	- INFECTION, ESSED CELLU 4y0 Cephalexin 25	IMPETIGO, NON-	E	XTRA M	EDS - See I aty) QD/BID/	MD(MD init	als
KIN BSC 2- 5-	- INFECTION, ESSED CELLU 4y0 Cephalexin 25 8y0 Cephalexin 25	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20)	E C4 Ta	XTRA M	EDS - See I hty) QD/BID/ r 200mg (Zoste	MD(MD init	als s
KIN BSC 2- 5- 94	- INFECTION, ESSED CELLU 4y0 Cephalexin 25 8y0 Cephalexin 25 y0 Cephalexin 50	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20)	C4 Ta C5 C6	XTRA M ake (o Acyclovi Aspirin a	EDS - See I hty) QD/BID/ r 200mg (Zoste Bimg	MD(MD init	als /s A8
KIN BSC 2- 5- 94	- INFECTION, ESSED CELLU 4y0 Cephalexin 25 8y0 Cephalexin 25 y0 Cephalexin 50	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20)	C4 Ta C5 C6	Acyclovi Aspirin a Beclome	EDS - See I hty) QD/BID/ r 200mg (Zoste 81mg thasone inhale	MD(MD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID	A8
KIN BSC 2- 5- 94 KIN	- INFECTION, ESSED CELLU 4y0 Cephalexin 250 8y0 Cephalexin 250 - y0 Cephalexin 500 - RASH/ALLEI	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20) RGIC (Specify where to appl	E C4 T4 C5 C6 y)	XTRA M ake (o Acyclovi Aspirin Beclome Co-Trim	EDS - See I http://QD/BID// r 200mg (Zosta 81mg thasone inhale x(Bactrim)	MD(MD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID	A8 A22 B1
2	- INFECTION, ESSED CELLU 4y0 Cephalexin 250 8y0 Cephalexin 250 - y0 Cephalexin 500 - RASH/ALLEI	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20)	E C4 T4 C5 C6 y)	XTRA M ake (c Acyclovi Aspirin Beclome Co-Trim Ceftriazo	EDS - See I http://QD/BID/ r 200mg (Zosta 81mg thasone inhale x(Bactrim)	MD(MD init IID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID 400/80mg800/160mg	A8 A22 B1 C9/1
SKIN 2- 5- 94 SKIN all ag	- INFECTION, ESSED CELLU 4y0 Cephalexin 250 8y0 Cephalexin 250 - y0 Cephalexin 500 - RASH/ALLEI Hydrocortizone *Apply to:	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20) RGIC (Specify where to appl 1% cream: apply to area* BID	E C4 C5 C6 y)	XTRA M ake (o Aspirin 1 Beclome Co-Trim Ceftriazo Dexame	EDS - See I hty) QD/BID/ r 200mg (Zosta Simg thasone inhale x(Bactrim) one injection	MD(MD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID 400/80mg800/160mg 250mg500mg1g	rals 78 A8 A22 B1 C9/1 D1a
SKIN 2- 5- 94 SKIN all ag	- INFECTION, ESSED CELLU 4y0 Cephalexin 250 8y0 Cephalexin 250 - y0 Cephalexin 500 - RASH/ALLEI Hydrocortizone *Apply to:	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20) RGIC (Specify where to appl	E C4 C5 C6 y)	XTRA M ake (o Acyclovi Aspirin Beclome Co-Trim Ceftriazo Dexame Diphenh	EDS - See I hty) QD/BID/ r 200mg (Zosta Bimg thasone inhale x(Bactrim) one injection thasone 2mg	MD(MD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID 400/80mg800/160mg 250mg500mg1g	als 78 A8 A22 B1 C9/1 D1a D1a
KIN BSC 2- 5- 9+ KIN all ag KIN	- INFECTION, ESSED CELLU 4y0 Cephalexin 259 8y0 Cephalexin 259 y0 Cephalexin 500 - RASH/ALLEI Hydrocortizone *Apply to: - RASH/BACTI	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20) RGIC (Specify where to appl 1% cream: apply to area* BID ERIAL (Specify where to appl	E C4 C5 C6 y) H1	XTRA M ake (o Aspirin 1 Beclome Co-Trim Ceftriazo Dexame Diphenh Doxycyc	EDS - See I htty) QD/BID// r 200mg (Zosta Bimg thasone inhale x(Bactrim) one injection thasone 2mg hydramine 25m	MD(MD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID 400/80mg800/160mg 250mg500mg1g	als 78 A8 A22 B1 C9/1 D1a D1a D1a D3
KIN BSC 2- 5- 9+ KIN all ag KIN	- INFECTION, ESSED CELLU 4y0 Cephalexin 259 8y0 Cephalexin 259 y0 Cephalexin 500 - RASH/ALLEI Hydrocortizone *Apply to: - RASH/BACTI	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20) RGIC (Specify where to appl 1% cream: apply to area* BID	E C4 C5 C6 y)	XTRA M ake(o Acyclovi Aspirin Beclome Co-Trim Ceftriazo Dexame Diphenh Doxycyc Erythroi	EDS - See I (ty) QD/BID/ r 200mg (Zosta Bimg thasone inhale x(Bactrim) one injection thasone 2mg ydramine 25mg line 100mg nycin 250mg	MD(MD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID 400/80mg800/160mg 250mg500mg1g	rals 78 A8 A222 B1 C9/11 D1a D1a D1a C9/11 D13 E4
KIN BSC 5- 94 KIN all ag KIN al ag	 INFECTION, ESSED CELLU Cephalexin 25: Cephalexin 25: Cephalexin 25: Cephalexin 50: Cephalexin 50: RASH/ALLEI Hydrocortizone *Apply to: RASH/BACTI Antibiotic cream *Apply to: 	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20) RGIC (Specify where to appl 1% cream: apply to area* BID ERIAL (Specify where to appl	E C4 C5 C6 y) H1	XTRA M ake (o Aspirin 4 Beclome Co-Trim Ceftriazo Dexame Diphenh Doxycyc Erythron Lisinopr	EDS - See I aty) QD/BID/ r 200mg (Zoste Bimg thasone inhale x(Bactrim) one injection thasone 2mg aydramine 25m line 100mg mycin 250mg il 5mg	MD(MD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID 400/80mg800/160mg 250mg500mg1g	A8 A22 B1
KIN BSC 5- 94 KIN all ag KIN al ag	 INFECTION, ESSED CELLU Cephalexin 250 Cephalexin 250 Cephalexin 500 RASH/ALLEI Hydrocortizone *Apply to: RASH/BACTI Antibiotic cream *Apply to: Antibiotic cream *Apply to: 	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20) RGIC (Specify where to appl 1% cream: apply to area* BID ERIAL (Specify where to appl h: apply to area* BID	E C4 C5 C6 y) H1	XTRA M ake(o Aspirin a Beclome Co-Trim Ceftriazo Dexame Diphenh Doxycyc Erythron Lisinopr Nystatin	EDS - See I aty) QD/BID/ r 200mg (Zosta Bing thasone inhale x(Bactrim) one injection thasone 2mg aydramine 25m line 100mg nycin 250mg il 5mg Oral	MD(MD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID 400/80mg800/160mg 250mg500mg1g	A8 A22 B1 C9/1 D1a D1 D1 C9/1 D1a D1 D1 D1 A D1 D1 A D1 A D1 A D1 A
KIN BSC 2- 5- 9+ KIN all ag KIN al ag TI/P	 INFECTION, ESSED CELLU Cephalexin 25: Cephalexin 25: Cephalexin 25: Cephalexin 50: Cephalexin 50: RASH/ALLEI Hydrocortizone *Apply to: RASH/BACTI Antibiotic cream *Apply to: 	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20) RGIC (Specify where to appl 1% cream: apply to area* BID ERIAL (Specify where to appl h: apply to area* BID	E C4 C5 C6 y) H1 A20	XTRA M ake (o Aspirin 4 Beclome Co-Trim Ceftriazo Dexame Diphenh Doxycyc Erythron Lisinopr Nystatin Predniso	EDS - See I aty) QD/BID/ r 200mg (Zoste Bimg thasone inhale x(Bactrim) one injection thasone 2mg aydramine 25m line 100mg mycin 250mg il 5mg	MD (MD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID 400/80mg800/160mg _250mg500mg1g g	A8 A22 B1 C9/1 D1a D1a D1 D3 E4 L4
KIN BSC 2- 5- 9+ KIN all ag KIN al ag TI/P	 INFECTION, ESSED CELLU Cephalexin 250 Cephalexin 250 Cephalexin 500 RASH/ALLEI Hydrocortizone *Apply to: RASH/BACTI Antibiotic cream *Apply to: Antibiotic cream *Apply to: 	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20) RGIC (Specify where to appl 1% cream: apply to area* BID ERIAL (Specify where to appl h: apply to area* BID	E C4 C5 C6 y) H1 A20	XTRA M ake(a Acyclovi Aspirin a Beclome Co-Trim Ceftriaza Dexame Diphenh Doxycyc Erythron Lisinopr Nystatin Prednisc CHER SU	EDS - See I aty) QD/BID/ r 200mg (Zosta Bing thasone inhale x(Bactrim) one injection thasone 2mg thasone 2mg athasone 2mg a	MD (MD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID 400/80mg800/160mg _250mg500mg1g g	A8 A22 B1 C9/1 D1a D1 D1 A C9/1 D1a C9/1 D1a L1 C9/1 D1a D1 D1a D1 N1
SKIN all ag SKIN all ag	INFECTION, ESSED CELLU 4y0 Cephalexin 250 8y0 Cephalexin 250 y0 Cephalexin 500 - RASH/ALLEI Hydrocortizone *Apply to: - RASH/BACTI Antibiotic crean *Apply to: ID Refer to extra Ocean Nasal Spi	IMPETIGO, NON- LITIS omg/5ml: 1 tsp Q 6h x 5d (1) omg: 1 cap Q 6h x 5d (20) omg: 1 cap Q 6h x 5d (20) RGIC (Specify where to appl 1% cream: apply to area* BID ERIAL (Specify where to appl h: apply to area* BID	E C4 C5 C6 y) H1 A20	XTRA M ake (o Aspirin 4 Beclome Co-Trim Ceftriazo Dexame Diphenh Doxycyc Erythron Lisinopr Nystatin Predniso	EDS - See I aty) QD/BID/ r 200mg (Zosta Bing thasone inhale x(Bactrim) one injection thasone 2mg athasone 2mg	MDMD init TID/QID/PRN for day er w/in 24 hours) r - 1-2 buffs BID 400/80mg800/160mg _250mg500mg1g g tab(s) BID x 5d	A8 A22 B1 C9/1 D1a D1 D1 A C9/1 D1a C9/1 D1a L1 C9/1 D1a D1 D1a D1 N1

What diagnosis did the examiner make?

Do you have any questions about the diagnosis that was made?

ANSWER:

Peter has cellulitis (a skin infection), and tinea (a fungal infection on his head)

Tinea - examiner marked medicine for 2-8yo, which is correct, however Peter is only 14kg so he is too small to take the Griseofulvin. Ask examiner what they would like to use instead.

Skin - Cellulitis with Abscess - sometimes an examiner may mark the incorrect box and then cross it out. Look for the highlighted med that is correct. On the last page of the exam form on the bottom right, there are a list of "extra meds" that we bring with us and are not part of a specific diagnosis.

Examiners:

- If you are prescribing one of these meds, be sure to consult with the lead MD first.
- Indicate how often and for how long
- Write a note of what this med is being prescribed for
- If you are prescribing a med that is under a diagnosis but you want the patient to take the med for a different diagnosis, indicate that on the form

Pharmacy:

 Look for the correct label to use. If we don't have a label for the med, simply hand write the info on the med bag

EXTRA MEDS - See MD _	(MD ini	tals)				
Take (qty) QD/BID/TID/Q	ID/PRN for da	ys				
Acyclovir 200mg (Zoster w/in	24 hours)	A8				
Aspirin 81mg	No. P. A.	A22				
Beclomethasone inhaler - 1-2	Beclomethasone inhaler - 1-2 buffs BID					
Co-Trimx(Bactrim)400/80	omg800/160mg	C9/10				
Ceftriazone injection250m	g1g	122				
Dexamethasone 2mg		Dia				
Diphenhydramine 25mg		Dı				
Doxycycline 100mg		D3				
Erythromycin 250mg		E4				
Lisinopril 5mg		L4				
Nystatin Oral	12.70	N1				
Prednisone 10mg: tab(s)	BID x 5d	P2/P3				

01 Packing Meds - Summary of Step 1

So far we've looked at Step 1 of Packing the Meds -

Review the form!

That was a lot of information for something that takes less than a minute to do.

As you become more familiar with the exam form and the meds that we use, it will become easier and easier.

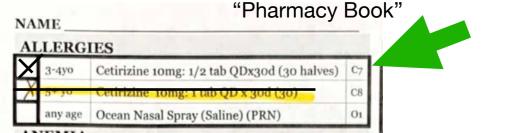
Next up in this training - Step 2 for Packing the Meds...

01 Packing Meds - Step 2 - Get the Meds Ready

Step 2 for Packing Meds - Get the meds ready for the patient.

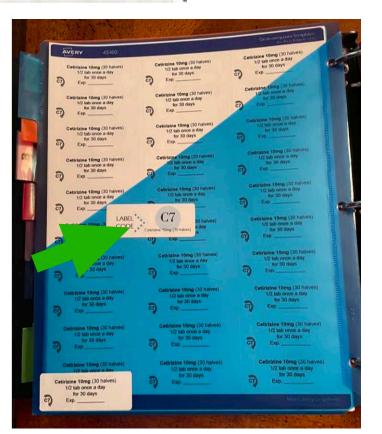
Now that you've reviewed the form and have all your questions answered (if any), you are ready to find the correct medicine for the patient.

- 1. Look at the exam form to see what was prescribed. **Find the correct meds in the med suitcases**.
 - Look in the med suitcases and find the correct bottle of the med. Look for:
 - Correct NAME of med, and
 - Correct Mg
 - Next, go to the Pharmacy book to get the correct label. (Note: Please DO NOT pull label sheets all the way out of the pockets/sleeves)
 - Make sure the label matches the label code on the meds ordered. (e.g.There are 2 different labels for cetirizine C7 and C8. There are 3 different labels for Ibuprofen - I1, I2, I3. Always match to the label code)



The "Pharmacy Book" has labels for all meds and is in alphabetical order. Use the label that matches what was prescribed on the exam form.

In this example, "C7" was prescribed so you should use the "C7" label.



Label Code on the exam form

the label you get from the

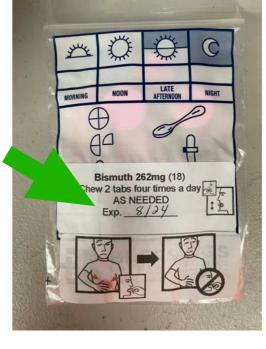
should match the label code on

- 2. Once you have the correct label, **put the label on a med bag.**
- Place near the bottom of the bag so you don't cover the Sun, Moon, Stars columns
- If the medicine is too big to fit in a med bag, use a small ziplock bag. For example, tubes of cream, inhalers, ORS packets don't fit well in a med bag
- You can add a "Sun, Moon, Star" label to the ziplock bag so the person dispensing has something to mark

Med bag

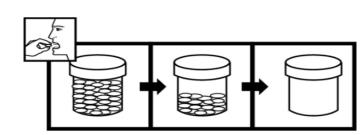


Put the correct label(s) on a med bag. And write the expiration date

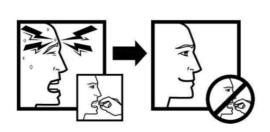


- 3. When labeling a med bag, look at the sample in the Pharmacy book and **make sure you have all of the correct labels** for the med that was ordered.
- Some only need one label
- Some need multiple labels for example, some also need a label for PRN ("as needed") or "Take until Gone". If you need one of these extra labels, you can find it in the back of the sleeve with the med labels in the Pharmacy Book.

"Take until Gone" label

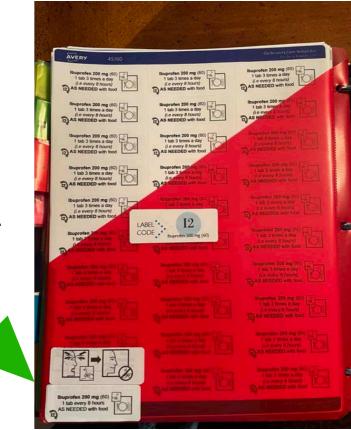


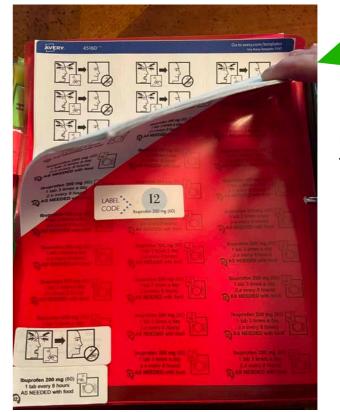
"Take as needed for pain" label



Look at the "sample" in the Pharmacy Book. Make sure the med bag has all the labels needed.

This example needs 2 labels

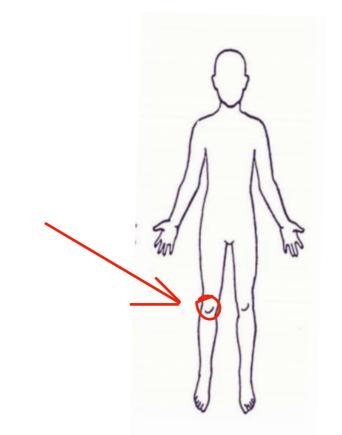




PRN labels are in the back of the sleeve

Besides the "as needed" labels and "take until gone" label, we also have body stickers.

- Body stickers are helpful when a patient is receiving multiple creams
- You can add a body sticker to the med bag and mark (with a sharpie) where the cream should go
- If the patient is only getting one cream, you don't need to use a body sticker. Simply tell the patient what the cream is for.



Use body stickers if the patient is getting multiple creams

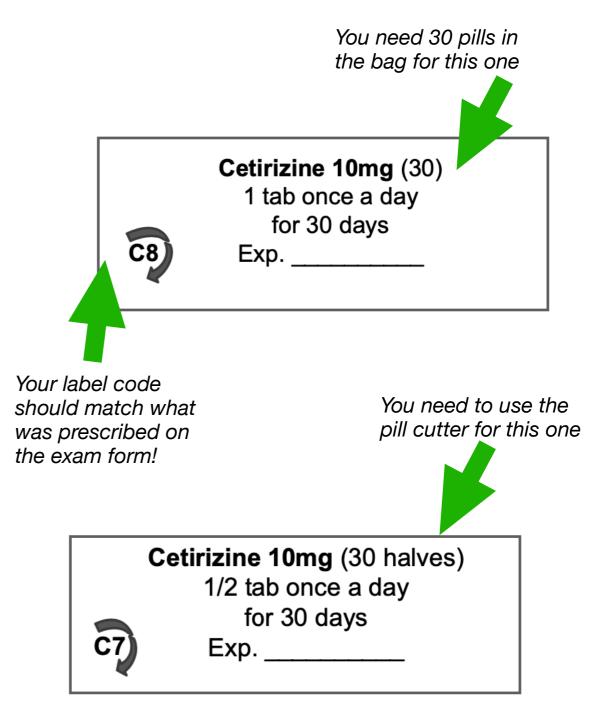
- 4. If the meds are already prepackaged, simply put the packaged med in the patient's basket
- 5. Remember to always look for the correct NAME and correct Mg when you're looking for the correct medicine for a patient
- 6. Write the correct **expiration date** on the label that you put on the med bag.
- When you take pills out of a bottle and put them in a bag we want to let the patient know the expiration date.
- Writing out the expiration date is optional if the date is on the blister pack, tube, or bottle that you are giving the patient.



Medicine that comes in a blister pack or a bottle or a tube has the expiration date on the packaging so you don't need to write the date on the label too.

5. Count the correct # of pills using a pill tray

- The label shows the correct # of pills needed
- Some pills need to be cut in half. We have a pill cutter that you can use
- If you're giving a tube of cream, be sure to break the seal (i.e. make sure it's open) before putting in a ziplock bag
- If you're giving a bottle of "suspension" medicine, you need to mix with water first. Pour in a small amount of water, shake really well and then pour in the rest of the water to the line on the bottle. Shake until all powder is mixed with the water.
 - 6. Put the packed med in a basket so we keep all of the patient's meds together



(Note: in the video Sue mistakenly says to put 30 cetirizine pills on the pill counter tray. To get 30 halves you should count out 15 pills and then cut them in half to get 30 halves.)

A few extra notes about filling meds:

7. If we run out of a med and start using a substitute, be sure the label is correct for that new med.

For example, if we run out of Gentamicin drops and start using Cipro drops, the label should say Cipro. Look under "C" in the Pharmacy Book for the correct label.

If you don't have a label for something, simply hand write it on the med bag

- 8. Some meds have short expiration dates (and are flagged with duct tape). Be sure to use those first.
- 9. DO NOT WRITE THE MED NAME ON BOTTLE CAPS. Tops of bottles can easily get mixed up so do not write names on top. You can write "OPEN" if trying to mark bottles that are open. Or write on the side of the bottle.

If we run out of Gentamicin, we can use Cipro instead. The label code is not listed, but look under "C" in the Pharmacy Book for a Cipro label

CO	NJUNCT	IVITIS (all	Specify w	hich eye	
App	oly to:	_ Left Eye	_ Right _	Both l	Eyes
	infectious	Gentamicin/Ci	pro: 1 drop Q	G1	
	dry eyes	Eyedrops: 1-2 drops Q4h PRN			

A few extra notes about filling meds:

- 10.When you are cleaning up at the end of the day, Do NOT combine ziplock bags of meds with different expiration dates into the same bag. KEEP SEPARATE or refer to your Pharmacy lead.
- 11.Once the patient's meds are ready/packed and are in a basket along with the patient's exam form, you can put the basket in "line" for the person dispensing the meds.

Note: If the person dispensing meds is falling behind, and there is an extra translator, the person filling the meds can also jump in and help dispense the meds.



To summarize...

If you are the person filling the prescriptions, you need to:

Step 1: Collect the forms from the patient and take a minute to review the formStep 2: Get the meds ready for the patient

Put the packed meds and the patient's exam form in a basket for the person dispensing the meds

Next Up... The next part of this document looks at what you do if you are dispensing the meds to the patient.



Step 1 for Dispensing Meds - Review the Form & Meds

- Get the "basket" that is next in line and just like the person who packed the meds, take a minute to review the exam form. Check the age/weight of the patient and make sure the meds ordered look correct for the age of the patient
- 2. Check the exam form and the prescribed meds compared to meds in the patient's "basket". Make sure you have all of the correct meds **before** you start dispensing.
- 3. Make sure extra labels are added if needed. For example:
 - Pain stickers
 - Take Until Gone stickers
 - Take as needed stickers
- 4. Do pills in med bags look correct? (Right drug, right number)



Step 2 for Dispensing Meds - Check your Patient

- 1. Be sure to greet the patient. Smile! Connect with the person. Show the love of Jesus!
- 2. Make sure you have the right patient (compare the number on the exam form to number on their wrist band).
- 3. If a young child (e.g under 7 years old), ask for a parent or teacher

Make sure the # on the exam form matches the # on the patient's wrist band

# 991	Male OR Female	
Name:	Emy	
Birth date	2-27-2020	
Age:	3 YEARS OLD	-
LABS		

Step 3 for Dispensing Meds - Explain the meds to the Patient

- Start by looking in the patient's bag and making sure they have their correct vitamins. Look what vitamins were prescribed on the exam form and if they are getting a worm treatment. Check if these meds are in their bag. (If not, they make have gotten out of "line" and missed the worm station.) Ask if they know how to take their vitamins/worm treatment.
- 2. Explain the meds to the patient using **non medical terms** explaining **WHAT** the med is for and **HOW** to take it.
- For example, "This medicine is for allergies (watery eyes, runny nose). Take 1 pill every day."
- Refer to the Pharmacy "cheat sheet" for notes on meds. (Note: in America we may say additional things about a med, but in the countries we serve we omit some things. We are trying to make the instructions as simple as possible so the patient will take the med. For example, in America we may say "take with food", but if the patient doesn't have food we still want them to take the medicine so we omit the instructions "take with food".)

1. Check the front page of the exam form - is the patient getting a worm treatment? What vitamins are they getting? Then make sure all of these are in their bag already.

In this example, there should be a pack of 30 day Children's Vitamins in the patient's bag

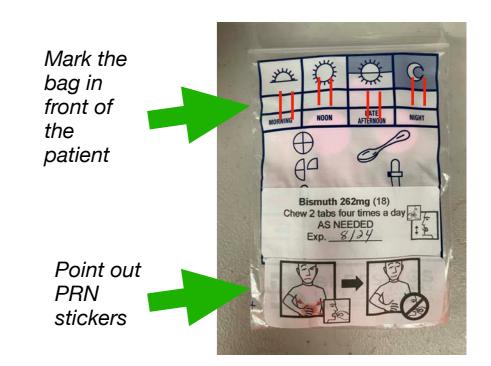
спескопе орнов и сиској не TMENT OR PROPHYLAXIS 1) DE-WORM Treatment (> 2yo): Mebendazole chew 1 tab BID x 3d (5) No Worm Med - Recently treated or pregnant Prophylaxis (> Mebendazole d (1st trimester) or < 2vo Severe Malnutrition Normal Exam 2) VITAMINS Infant Multivitamin, As Directed 30 d Children's Vitamins oo d Children's Vitamins Children 2-10 30 d Adult Vitamins Adult 11+ 90 d Adult Vitamins + Folic Acid or Prenatal Vita Pregnant 3) EXAM RESULTS Pharmacy Needed No other diagnosis/meds Normal Exam

2. Use our Pharmacy "cheat sheet" for guidelines of what to say about each med

Medication	Key Points:
Acetaminophen	CHECK AGE AND THEN CHECK DOSE and TAKE AS NEEDED (show pain sticker). If taking with Ibuprofen, separate time by a few hours.
Acyclovir	Extra med - need examiner to specify how many pills to give and how to take (commonly given 5 times a day)
Albendazole	CHECK DOSE (1 pill v. treatment). Do not give to child under 1 year old, or pregnant woman in 1st trimester. For Children 12 months - 24 months crush and give 1/2 tablet.
Amlodipine	CHECK AGE (Adults only) Show blood pressure #s today and explain that it's higher than normal. Take this med every day to keep blood pressure lower. Keep taking this medication even if feeling well. Recheck blood pressure in 30 days and refill medicine at local pharmacy. (Note: send home reminder note with today's blood pressure and name of med)
Amoxicillin	CHECK AGE AND THEN CHECK DOSE Finish all medicine even if feeling better. (Note - For suspension, be sure med was mixed with water before dispensing. Tell patient not to store in direct sunlight and shake before using).
Antibiotic Cream	Explain where to apply. Do not swallow.
Antifungal Cream	Explain where to apply. Do not swallow. (Make sure tube of cream is open. i.e. foil seal is broken
Aspirin	Extra med - need examiner to specify how many pills to give and how to take (commonly given 1 time a day)
Azithromycin	CHECK AGE AND THEN CHECK DOSE Finish all medicine even if feeling better.
Beclomethasone	Extra med - need examiner to specify how often to take. Demonstrate how to use (shake inhaler, empty lungs, mouth around inhaler, press and deep breath in). Take every day. Rinse month with water after each use.

Step 3 for Dispensing Meds - Explain the meds to the Patient

- 3. Mark the med bag (with hash marks) in front of the patient as you explain what it is and how often they take it
- In most countries, we use hash marks when explaining the meds. However some countries prefer that we use numbers. Ask the translator that you're working with what is preferred in the community.
- In the example on the right for the medicine 'Bismuth', we used hash marks. But if the community prefers numbers, you would write 2, 2, 2, 2 under the sun, moon, stars to indicate the patient can take 2 of this medicine 4 times a day.
- 4. Also point out pain stickers when explaining PRN (i.e. "take as needed") meds
- In our example of the medicine Bismuth, we would point to the pain sticker and explain "You only need to take this medicine if your stomach hurts. If you are feeling good, you don't need to take the medicine."
- For medicine that is NOT "take as needed", be sure to reiterate that they need to take every day even if feeling better.



Step 3 for Dispensing Meds - Explain the meds to the Patient

- 5. If a parent is getting meds for multiple children, use blank stickers and write the child's name on their med bags.
- 6. Demonstrate how to open a med if necessary e.g. eye drops, or tubes of cream that are sealed, etc.
- 7. If they have a lot of meds (i.e. more than 3), lay all of the meds on the table and ask them to explain back to you

To summarize...

If you are the person dispensing the prescriptions, you need to:

Step 1: Take a minute to review the form and look at the meds in the patient's basket

Step 2: Check that you have the right patient and make sure they have their correct vitamins in their bag **Step 3:** Explain the meds to the patient in easy to understand instructions and be sure you tell them what the medicine is for. It's your job to educate the patient so they know what medicine to take for a headache v. what medicine to take for allergies, etc.

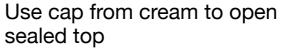
Next Up... The rest of this document looks at some special tips for certain meds.



03 Notes about Specific Meds

Some meds take a little extra prep:

- New tubes of cream with foil closure demonstrate how to open (or person filling can just open these before putting in a ziplock bag)
- Nystatin drops prepare dropper and replace lid
- Amoxicillin or cephalexin suspension mix with water first, mark dropper with sharpie so parent can see how much to give each time
- Eye drops demonstrate how to open if child proof lid
- Inhaler use spacer, demonstrate how to use
- ORS explain how to mix powder in liter bottle (collect empty water bottles that we can send home with patients)
- **Scabies** ask if patient is ready to follow all the steps or if they want to take the medicine home and do another day





Be sure to mix powdered medicine with water before dispensing. Add a *small* amount of water first Shake well. Then fill water to line on bottle. Shake again to mix.



Mark cup (or dropper) with black sharpie so the parent knows how much to give the child

03 Appendix

Pages 27-28	Sample 1 Exam Form
Pages 29-30	Sample 2 Exam Form
Page 31	Ivermictin Dosing Chart
Page 32	Pharmacy Abbreviations
Page 33	Pharmacy "Cheat Sheet"

Sample 1 Exam Form - pages 1-2

ANPLE	# 991	1		Male OR			Saved	CSI (a)	ge)	
	Nam	e: En	my				Referral	< 5	L	5-7
-	Birth	date:	2 2'	7-202	20	¥	Malnutrition	8-11		12-14
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TTALS AND L					The second		STI	51-80		> 80
ength/Height 64		MUAC	cm	Pulse	110	BP		TEMP C	1,0	
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Blood Sugar:	_	Urina	lysis:		Covid-1	9:		Pregnant	-	_
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NAME: EMMY			ID #:			
DOB:	AGE:	A. C. C.	PHONE #:			
QUESTIONS:						
1. Who lives in your he	ome? (Check and circle)					
Mother	Husband		Daughter(s)		Male Cousin/Nephew	
Y Father	Wife		Son(s)		Female Cousin/Niece	
V Grandmother	Aunts					
Grandfather	Uncles	2	Older Brother		Older Sisters	
Other:		1	Younger Brother		Younger Sisters	
other.			1.1.2.			
2. Do you have a favor	ite person in your home?	Why?	-			
3. Is there anyone you Why?	wish didn't live in your h	iome?	-			
4. Are you ever afraid	at home?		-	-		
5. Are you ever afraid	in your community?	The Tar	-			
IF YES ON #4 OR #5, 0	CONTINUE BELOW:	T. Jak	17 4 18		E. S.	
6. If you do something By whom?	g wrong, what might happ	en to you?	11 2 19	2	2	
	ouch you in a way that ma t home or in your commu					
8. Is there a person yo	ou can go to for help? Who	o?	a faith and	1		
9. Is there a safe perso bother you or upset yo	on you can talk to about th ou? Who?	nings that		3		
10. Are there things th very upsetting or frigh	nat have happened to you to the tening?	that were				
FOR ADULTS ONLY:	A CONTRACTOR OF THE OWNER		and the second	4		
Is there someone you	worry about at home?	1000	-			
Do you worry for some out in the community?	eone from your home who ?	en they are	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
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		A. C. M.	They are and			
RATING: (Circle one)						

CSI Interviewer

CSI Hero

Sample 1 Exam Form - pages 3-4

ALLERG	IES			HYPERTENSION (> 150/90 Follow up 1 month					
3-4yo		zine 10mg: 1/2 tab QDx30d (30 halve	s) C7		-	And the rest of the second s	A		
X 5+ yo		zine 10mg: 1 tab QD x 30d (30)	C8	adu	int	Amlodipine 5mg: 1 tab QD x 90d (90)	^		
any age	Ocear	n Nasal Spray (Saline) (PRN)	01	adı	ult	Amlodipine 10mg: 1 tab QD x 90d (90)	A		
ANEMIA				INSON	AN	UTA.	-		
2-4 yo	Ferro	us Sulfate 1 tsp QD until gone (1)	F1		vo		T,		
5+ yo		usSulfate(65mg)1 tab QD x 6od (60)	F2	11+	yo	Melatonin 5mg: 1 at bedtime PRN (30)	1		
	Give :	spacer to new users)		LICE (dos	age done in Pharmacy)	_		
Mild/ Interm	ittent	Salbutamol (rescue) inhaler: 1-2 puffs Q6 hrs PRN	S1	7+	yo	Lice Treatment	_		
Persist Exacer		Consult Physician/SVN	11	MALA	RL	A			
Exacer	Dation			All		Test if possible and Refer, Treat fevers			
		TTIS (all ages) Specify which eye	_	OTITIS	S E	EXTERNA			
Apply to: _	I	eft Eye RightBoth F		Apply to:	_	Left Ear RightBoth Ears	;		
infecti	22232 J.C.	Gentamicin/Cipro: 1 drop QIDx5d	G1	all		Gentamicin/Cipro: 1 drop in infected	G		
dry eye	es E	Cyedrops: 1-2 drops Q4h PRN	E3	age	s	ear(s) BID x 10 days			
CONSTI	PATIC)N	1	OTITIS	S N	IEDIA			
5+ yo	Docus	sate 100mg: 1-2 cap QD PRN(40)	D2	< 23	yo	Amoxicillin 250mg/5ml: 1 tsp BID x 5d (1)	1		
DEHYDI	RATIC	DN (< 6mo may add infant formula)	100	X 2-8	yo	Amoxicillin 250mg: 2 chew tabs BID x 5d (20)	1		
all age	s Ora	l Rehydration: 1/2 packet Q 6hr (2)	05	9+3	vo	Amoxicillin 500mg: 1 cap TID x 5d (15)	1		
DIARRH		RS for all diarrhea. See other meds fo	r	PAIN/I	FE	VER (Specify reason)			
all ages		Rehydration: 1/2 packet Q6hr (2)	05		riti	sHAFeverBodyCramps	7		
		CUTE (bloody w/fever & duration<	14d)	Other		human fan angement tek Ook BBN (ag)			
1-17 yo &-	1	Azithromycin 250mg: 1 tab QDx3d (3)	A23	7-12y0		buprofen 200mg:1 tab Q8h PRN (20)			
1-17 yo &		Azithromycin 500mg: 1 tab QDx3d (3)	A25	13+ yo		buprofen 200mg:1 tab Q8h PRN (60)	1		
18+ yo		Levofloxacin 500mg; 1 tab QDx3d (3)	1.2	13+ yo 3-11m	1	buprofen 200mg:2 tabs Q8h PRN (60) Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1)	1		
A PROVIDE AND	_		made	¥ 1-3yo			1		
IARRH	-	HRONIC (duration > 14d) Select 2		1		Acetaminophn80mg:chew 2tabQ6h PRN(60)	1		
< 2yo	Contraction in the second	5 mg: 1/2 tab QD x 14 d (14 halves)	Zı	3-5yo			1		
3+ yo		; mg: 1 tab QD x 14 d (14)	7.2	6-11yo		acetaminophen 325mg:1 tab Q6h PRN (20)	1		
-			T .	12+ yo	-	Acetaminophen 500mg:1 tab Q6h PRN (60) Acetaminophen 500mg:2 tabs Q6h PRN (60)	1		
3-4yo		cole 500mg: 1 tab QD x 3d (3)	Ti	12+ yo			1		
5-13yo		cole 500mg: 2 tabs QD x 3d (6)	T2	(Select 2)		NTITIS W/ABSCESS - See MD			
14+ yo	Tinidaz	cole 500mg: 4 tabs QD x 3d (12)	T3	2-4y		Amoxicillin 250mg/5ml: 1 tsp/5ml BIDx10d (1)	1		
I UPSE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		5-8y	0	Amoxicillin 250mg: 2 chew tabs BIDx10d (40)			
12+ yo	11 5 3 4	uth 262mg: 2 tabs QID PRN (18)	B3	9+ yo		Amoxicillin 500mg: 1 cap TID x 10d (30)			
EARTB		Intermittent				AND + +	A		
3-12yo		n Carbonate: 1 tab TID PRN (20)	Cı	5-8yc	-	Metronidazole 250mg 1/2 tab TID x10d (30h)			
13+ yo	Calciur	n Carbonate: 2 tabs TID PRN (40)	C2	9-12y	-	Metronidazole 250mg 1/2 tab TID x tod (30)	N		
EARTB	URN -	Persistent		9-12y 13+ y		Metronidazole 250mg 1 tab TID x 10d (30) Metronidazole 250mg 2 tabs TID x 10d (60)	N		
							M		

iteria foi	NGITIS (Consider pain control; likely viral r ABT: exudate/painful nodes, fever, & no coug	gh	all	Soap & Anti-fungal cream: apply to area* B	ID A
< 2yo	Amoxicillin 250mg/5ml: 1 tsp/5ml BIDx10d (1)	A14	ages	*Apply to:	^^
2-8yo	Amoxicillin 250mg: 2 chew tabs BID x 10d (40)	A17	TINEA	- On head or moderate/severe on body	
9+ yo	Amoxicillin 500mg: 1 cap TID x tod (30)	A19	<2 y	o Soap & Anti-fungal cream: apply to are	a* ^
NEUM	IONIA		H	BID *Apply to:	
< 2yo	Amoxicillin 250mg/5ml: 1 tsp BID x 5d (1)	A13	2-8y (17+		X G
2-8yo	Amoxicillin 250mg: 2 chew tabs TID x 5d (30)	A16	H	Soan & Griseofulvin 125mg: 4 tabs OD	x c
9-12y	Amoxicillin 500mg: 1 cap TID x 5d (15)	A18	9+ y	60d (240)	-
13+ yo	Azithromycin 250mg: 2 tabs now (500mg), then 1 tab 250mg QD x 4d (6)	A24	UTI-Si	mple (Burning, Frequency, Urgency)	
CABIE	S (Examiner start teaching. Pharmacy contin	nue)	2-4y	Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (() C
< 15kg	Permetherin Cream	P1	5-8y	Cephalexin 250mg: 1 cap Q 6h x 5d (20)	C
15+kg	Ivermictin 6mg: Dose by weight in Pharmacy. Give Soap, Scabies handout & black bag	14	9+ y	o Cephalexin 500mg: 1 cap Q 6h x 5d (20)	c
KIN - C	ELLULITIS W/ABSCESS - See MD		UTI-Co back/pelv	mplicated - See MD (Pyelo, fever, fland	¢,
elect 2 M	STATE STATE STATES		< 50	kg Levofloxacin 500mg: 1/2 tab QD x 5d (5 L
2-4yo	Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1)	C4 C5	H	halves)	L
5-8yo	Cephalexin 250mg: 1 cap Q 6h x 5d (20)	C6	50+1	kg Levofloxacin 500mg: 1 tab QD x 5d (5)	-
9+ yo	Cephalexin 500mg: 1 cap Q 6h x 5d (20)	0	VAGIN	TTIS - Yeast Infection	
	AND				
5-8vo		M5	10+	yo Fluconazole 200mg: PO x 1 (NOW)	1
5-8yo 9-12yo	Metronidazole 250mg 1/2 tab TID x 5d (15h)	M5 M6	distantial and a second	yo Fluconazole 200mg: PO x 1 (NOW) TTIS - Bacterial	1
	Metronidazole 250mg 1/2 tab TID x 5d (15h) Metronidazole 250mg 1 tab TID x 5d (15)		VAGIN	ITIS - Bacterial	
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9-12yo 13+ yo KIN - I	Metronidazole 250mg 1/2 tab TID x 5d (15h) Metronidazole 250mg 1 tab TID x 5d (15) Metronidazole 250mg 2 tabs TID x 5d (30) NFECTION, IMPETIGO, NON- SED CELLULITIS	M6 M7	VAGINI 14+ y EXTRA	TTIS - Bacterial Tinidazole 500mg: 4 tabs QD x 3d (12) MEDS - See MD(MD in	T: tal:
9-12yo 13+ yo KIN - I	Metronidazole 250mg 1/2 tab TID x 5d (15h) Metronidazole 250mg 1 tab TID x 5d (15) Metronidazole 250mg 2 tabs TID x 5d (30) NFECTION, IMPETIGO, NON- SED CELLULITIS Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1)	M6 M7 C4	VAGINI 14+ y EXTRA Take	TTIS - Bacterial Tinidazole 500mg: 4 tabs QD x 3d (12) MEDS - See MD(MD in(qty) QD/BID/TID/QID/PRN for0	T; ital: ays
9-12yo 13+ yo KIN - I BSCES	Metronidazole 250mg 1/2 tab TID x 5d (15h) Metronidazole 250mg 1 tab TID x 5d (15) Metronidazole 250mg 2 tabs TID x 5d (30) NFECTION, IMPETIGO, NON-SED CELLULITIS Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1) Cephalexin 250mg: 1 cap Q 6h x 5d (20)	M6 M7 C4 C5	VAGIN 14+ y EXTRA Take Acycl	TTIS - Bacterial Tinidazole 500mg: 4 tabs QD x 3d (12) MEDS - See MD(MD in(qty) QD/BID/TID/QID/PRN for0 lovir 200mg (Zoster w/in 24 hours)	T; ital: ays
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9-12y0 13+ y0 KIN - I BSCES 2-4y0 5-8y0 9+ y0	Metronidazole 250mg 1/2 tab TID x 5d (15h) Metronidazole 250mg 1 tab TID x 5d (15) Metronidazole 250mg 2 tabs TID x 5d (30) NFECTION, IMPETIGO, NON- SED CELLULITIS Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1) Cephalexin 250mg: 1 cap Q 6h x 5d (20) Cephalexin 500mg: 1 cap Q 6h x 5d (20)	M6 M7 C4 C5 C6	VAGINI 14+ y EXTRA Take Acycl Aspin Beclo	TTIS - Bacterial Tinidazole 500mg: 4 tabs QD x 3d (12) MEDS - See MD(MD in _ (qty) QD/BID/TID/QID/PRN for0 lovir 200mg (Zoster w/in 24 hours) rin 81mg omethasone inhaler - 1-2 buffs BID	T; ital: ays As A2 B1
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Sample 2 Exam Form - pages 1-2

AMARY	# 992		Male O	OR Female	Saved	CSI (age)	
AMPLE	Name: 1	ets		11	Referral Malnutrition	< 5	5-7
-	Birth date: _2/1/2010					H	12-1
DEVELOPING		Pneumonia	15-20	21-5			
VITALS AND LA		-		ALC: NOT			hannah
.ength/Height	MUAC			82	BP100/61		1.6
Weight (kgs) 14kg	zScore		Malnutr X Mld (ition: [-1]Mod(-2)Sevr(-3+)	RESP 1Z	02 SATS 99 7	
Blood Sugar:	Urina	lysis:		Covid-19:		Pregnant:	
MEDICAL HIST	ORY		1.11		the second second		
		Yes	No	Describe	1. M. 1. M.		
Allergies	1. 2	-	~				
Presently taking medie	cations:	-	10	and it are	and the state		-
		1	Tre		The state of the state		
Any ongoing medical I	Contraction of the second s	-	1	Last Deworming Date: 9	11051NR	7	-
mmunizations up to o	late?	_	-	Last Deworming Date: 9	(Asur C		And in case of the
	April Provide and		and the second	ALLON BURNING BURNING AND			o
FINDINGS					REFERI	RALS(1=asap	, 2=w/m
		C	ardiovas	cular		RALS(1=asap 3=when possib	
Gen. Condition			ardiovaso astrointe			3=when possib	
Gen. Condition Ears		G		estinal	30 days, 3	3=when possib	le) 2 3 2 3
Gen. Condition Ears Eyes		Ga Ga M	astrointe enito-uri usculosk	estinal inary keletal	30 days, 3 Dental Nutrition STI	3=when possib	le) 2 3 2 3 2 3
Gen. Condition Ears Eyes Mouth/Dental		Ga Ga M Na	astrointe enito-uri usculosk eurologio	estinal inary keletal	30 days, 3 Dental Nutrition STI TB	3=when possib	le) 2 3 2 3 2 3 2 3 2 3
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Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TRI Prophylaxis (> 2yo, Mebendazole chew VITAMINS ofant	Check EATMENT O : 1 tab now Normal E	Ga Ga M Sk Be Cop- Cop- Cop- Cop- Cop- Cop- Cop- Cop-	astrointe enito-uri usculosk eurologie cin ehavorial rites	estinal inary (eletal cal 1 Health ω / Secondary odar in each of the 3 secondary (AXIS 2yo): Mebendazole D x 3d (5) Severe Market	30 days, 3 Dental Nutrition STI TB Vision Other Wision Other	3=when possib	le) 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3
Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TRI Prophylaxis (> 290) Mebendazole chew OVITAMINS ofant hildren 2-10	Check EATMENT O : 1 tab now Normal E: Infant Multi	Ga Ga M Na Sh Be Copponent	astrointe enito-uri usculosk eurologic cin ehavorial $\Sigma + S$ T = C ption ption n (> 1 tab BII , As Dire mins	estinal inary (eletal cal 1 Health ω / Secondary odar in each of the 3 secondary (AXIS 2yo): Mebendazole D x 3d (5) Severe Market	30 days, 3 Dental Nutrition STI TB Vision Other -y Theefs tions below: No Worm Med - Re(1st trimester) or (alnutrition ren's Vitamins	3=when possib	le) 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3
Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TRI Prophylaxis (> 2y0) Mebendazole chew) VITAMINS offant hildren 2-10 dult 11+	Check EATMENT O 1 tab now Normal E2 Infant Multi 30 d Childre 30 d Adult V	Ga Ga M Na Sh Be COT COT COT COT COT COT COT COT COT COT	astrointe enito-uri usculosk eurologic cin rhavorial $rhavorialrha$	estinal inary (eletal cal 1 Health ω / Secondar adar in each of the 3 sect AXIS 2yo): Mebendazole D x 3d (5) Severe M exted 90 d Childr 90 d Adult	30 days, 3 Dental Nutrition STI TB Vision Other Vision Other T TB Vision Other TB Vision S C C Vision S C C C C C C C C C C C C C C C C C C	3=when possib	le) 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3
Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TRI Prophylaxis (> 2y0, Mebendazole chew) VITAMINS offant hildren 2-10 dult 11+ regnant	Check EATMENT O): 1 tab now Normal E2 Infant Multi 30 d Childre 30 d Adult V 90 d Adult V	Ga Ga M Na Sh Be COT COT COT COT COT COT COT COT COT COT	astrointe enito-uri usculosk eurologic cin rhavorial $rhavorialrha$	estinal inary (eletal cal 1 Health ω / Scondar adar in each of the 3 sect AXIS 2yo): Mebendazole D x 3d (5) Severe M ected 90 d Childr	30 days, 3 Dental Nutrition STI TB Vision Other Vision Other T TB Vision Other TB Vision S C C Vision S C C C C C C C C C C C C C C C C C C	3=when possib	le) 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3
Gen. Condition Ears Eyes Mouth/Dental Nose Throat Lungs NOTES: DE-WORM: TRI Prophylaxis (> 290)	Check EATMENT O): 1 tab now Normal E2 Infant Multi 30 d Childre 30 d Adult V 90 d Adult V	Ga Ga M Na Sh Be COT COT COT COT COT COT COT COT COT COT	astrointe enito-uri usculosk eurologic in ehavorial ritorial $ritorial (ritorial)ritorial (ritorial)rito$	estinal inary (eletal cal 1 Health ω / Secondar adar in each of the 3 sect AXIS 2yo): Mebendazole D x 3d (5) Severe M exted 90 d Childr 90 d Adult	30 days, 3 Dental Nutrition STI TB Vision Other Wision Other Theefs tions below: No Worm Med - Re (1st trimester) or < talnutrition ren's Vitamins (90)	3=when possib	le) 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3

DEVELOPING WORKERS CSI SCREENING

			ID #:	-	Conception in the second	
DOB:		AGE:	PHONE #:			
OUESTIONS.	-					
QUESTIONS: 1. Who lives in your ho	mol (Chao	k and circle)				
	mer (Chec		Daughtor(s)	1	Male Cousin/Nephew	
Mother		Husband Wife	Daughter(s) Son(s)		Female Cousin/Niece	
Father V Grandmother	1	Aunts	501(5)		Territice county in the	
Grandfather	p	Uncles	Older Brother	3	Older Sisters	
orunanuter	1.1.1		Younger Brother		Younger Sisters	
Other:	2					
2. Do you have a favori	te person i	in your home? Why?	1/15 - Gran	ad	mother -1	
			Makes	S	od tood	
3. Is there anyone you Why?	wish didn'	t nve m your nome?	-	0.0		
4. Are you ever afraid a	at home?		-		1-1.	
5. Are you ever afraid i	n your cor	nmunity?	-			
IF YES ON #4 OR #5, 0	ONTINUE	BELOW:	23			
		at might happen to you?		-		
7. Does anyone ever to feel uncomfortable, at			13			
8. Is there a person you	u can go to	for help? Who?	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		1. 2	
9. Is there a safe perso bother you or upset yo	n you can t u? Who?	talk to about things that				
10. Are there things the very upsetting or fright	at have hay tening?	opened to you that were			and the second	
FOR ADULTS ONLY:			Notice -	- 1.	and the second second	
Is there someone you v	vorry abou	it at home?		1		
	one from	your home when they are			States Au	
out in the community?						

CSI Interviewer

CSI Hero

Sample 2 Exam Form - pages 3-4

NAME						#SCRIPTS	
ALLER	GIES			НУРЕ	RI	TENSION (> 150/90 Follow up 1 ma	onth
3-4ye	Cetir	izine 10mg: 1/2 tab QDx30d (30 halves) C7	ad	ult	Amlodipine 5mg: 1 tab QD x 90d (90)	A11
5+ yo	Cetir	izine 10mg: 1 tab QD x 30d (30)	C8		.1.	turb diving commutate OD y and (ap)	A12
any a	ge Ocea	n Nasal Spray (Saline) (PRN)	01	ad	ult	Amlodipine 10mg: 1 tab QD x 90d (90)	114
ANEM				INSO	MIN	VIA	
2-4 y		us Sulfate 1 tsp QD until gone (1)	F1 F2	11-	+ yo	Melatonin 5mg: 1 at bedtime PRN (30)	Ma
5+ yo		usSulfate(65mg)1 tab QD x 6od (60) spacer to new users)	12	LICE	dos	age done in Pharmacy)	6.7
Mild		Salbutamol (rescue) inhaler: 1-2	S1	Provide State	yo	Lice Treatment	
_	rmittent	puffs Q6 hrs PRN			-		-
	istent or rerbation	Consult Physician/SVN		MALA	-	A Test if possible and Refer, Treat fevers	-
CONH	NOTIS	TTIS (all ages) Specify which ave			-		
Apply to:		ATTIS (all ages) Specify which eye Left Eye Right Both Eye	205	-		EXTERNA	
		Gentamicin/Cipro: 1 drop QIDx5d	G1	Apply to	:	Left Ear RightBoth Ear	S
dry		Eyedrops: 1-2 drops Q4h PRN	E3	all		Gentamicin/Cipro: 1 drop in infected ear(s) BID x 10 days	G2
CONST	IPATIO	ON		OTITI	SN	MEDIA	
5+ y	o Docu	sate 100mg: 1-2 cap QD PRN(40)	D2	< 2	yo	Amoxicillin 250mg/5ml: 1 tsp BID x 5d (1)	A13
DEHYI	ORATIO	ON (< 6mo may add infant formula)		2-8	yo	Amoxicillin 250mg: 2 chew tabs BID x 5d (20)	A15
all a	ges Ora	al Rehydration: 1/2 packet Q 6hr (2)	05	9+	yo	Amoxicillin 500mg: 1 cap TID x 5d (15)	A18
		RS for all diarrhea. See other meds for	1	PAIN/	FE	VER (Specify reason)	
Acute or C	Sector Constant	l Rehydration: 1/2 packet Q6hr (2)	05	Arth		isHAFeverBodyCramps	
		CUTE (bloody w/fever & duration < 1	4d)	Other 7-12y	0 1	Ibuprofen 200mg:1 tab Q8h PRN (20)	Iı
	&<25kg	Azithromycin 250mg: 1 tab QDx3d (3)	A23	13+ y		[buprofen 200mg:1 tab Q8h PRN (60)	I2
-	&> 25kg	Azithromycin 500mg: 1 tab QDx3d (3)	A25	13+ y		(buprofen 200mg:2 tabs Q8h PRN (60)	13
18+ yo		Levofloxacin 500mg: 1 tab QDx3d (3)	1.2	3-110	-	Acetaminophen 160mg/5cc elxr:2.5cc Q6h(1)	A2
1.00	IFA-C	HRONIC (duration > 14d) Select 2 1	neds	1-3yo		Acetaminophn8omg:chew 2tabQ6h PRN(60)	A3
DIAKK	Carries and			3-5yo		Acetaminophn8omg:chew 3tabQ6h PRN(60)	A4
< 2yo	-	5 mg: 1/2 tab QD x 14 d (14 halves)	Zı	6-11y		Acetaminophen 325mg:1 tab Q6h PRN (20)	As
3+ yo	Zinc 2	5 mg: 1 tab QD x 14 d (14)	7.2	12+ y		Acetaminophen 500mg:1 tab Q6h PRN (60)	A6
		zole 500mg: 1 tab QD x 3d (3)	TI		-	Acetaminophen 500mg:2 tabs Q6h PRN (60)	Α7
3-4yo		zole 500mg: 2 tabs QD x 3d (6)	T2	PERIO	DC	ONTITIS W/ABSCESS - See MD	
5-13y	20 00 00 00 00 00 00 00 00 00 00 00 00 0	zole 500mg: 4 tabs QD x 3d (12)	T3	(Select 2			
14+ ye		zole 500mg: 4 tabs QD x 30 (12)	13	2-4y	0	Amoxicillin 250mg/5ml: 1 tsp/5ml BIDx10d (1)	A14
GI UPS			Re	5-8y	0	Amoxicillin 250mg: 2 chew tabs BIDx10d (40)	A17
12+ 3		nuth 262mg: 2 tabs QID PRN (18)	B3	9+ y	0	Amoxicillin 500mg: 1 cap TID x 10d (30)	A19
	Service 201	- Intermittent	0		-	AND 🔶 🔸	
3-12y	04	m Carbonate: 1 tab TID PRN (20)	C1 C2	5-8y	0	Metronidazole 250mg 1/2 tab TID x10d (30h)	M8
13+ y	1.000	m Carbonate: 2 tabs TID PRN (40)	62	9-12		Metronidazole 250mg 1 tab TID x 10d (30)	M9
-	-	- Persistent	0.	13+	yo	Metronidazole 250mg 2 tabs TID x 10d (60)	M10
17+ y	o Omep	razole 20mg 1 tab QD x 6od (60)	04		100	Contraction of the Contraction o	

P	HARY	NGITIS (Consider pain control; likely viral,)3	TINEA - Small/limited on body	
cr	1	ABT: exudate/painful nodes, fever, & no coug		all Soap & Anti-fungal cream: apply to a	rea* BID A21
	< 2yo	Amoxicillin 250mg/5ml: 1 tsp/5ml BIDx10d (1)	A14	ages *Apply to:	
	2-8yo	Amoxicillin 250mg: 2 chew tabs BID x 10d (40)	A17	TINEA - On head or moderate/severe on bod	y
	9+ yo	Amoxicillin 500mg: 1 cap TID x 10d (30)	A19	<2 yo Soap & Anti-fungal cream: apply BID *Apply to:	to area* Azi
1	NEUM		4.0	2-8yo Soap & Griseofulvin 125mg: 2 tal	os QD x G4
	< 2yo	Amoxicillin 250mg/5ml: 1 tsp BID x 5d (1)	A13	(17+kg) 60d (120)	64
	2-8yo	Amoxicillin 250mg: 2 chew tabs TID x 5d (30)	A16	9+ yo Soap & Griseofulvin 125mg: 4 tal	os QD x G6
	9-12y	Amoxicillin 500mg: 1 cap TID x 5d (15)	A18	60d (240)	
	13+ yo	Azithromycin 250mg: 2 tabs now (500mg), then 1 tab 250mg QD x 4d (6)	A24	UTI-Simple (Burning, Frequency, Urgency,	A DESCRIPTION OF THE OWNER OWNER OF THE OWNER
	CABIE	S (Examiner start teaching. Pharmacy contin	ue)	2-4yo Cephalexin 250mg/5ml: 1 tsp Q 6h	x 5d (1) C4
	< 15kg	Permetherin Cream	P1	5-8yo Cephalexin 250mg: 1 cap Q 6h x 5d	(20) C5
		Ivermictin 6mg: Dose by weight in Pharmacy. Give Soap, Scabies handout & black bag	14	9+ yo Cephalexin 500mg: 1 cap Q 6h x 5d	(20) C6
	IN - C	ELLULITIS W/ABSCESS - See MD		UTI-Complicated - See MD (Pyelo, fever back/pelvic pain)	•, flank,
	lect 2 Me		C.	< 50 kg Levofloxacin 500mg: 1 /2 tab QD	x 5d (5 L1
	2-4¥0	Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1) Cephalexin 250mg: 1 cap Q 6h x 5d (20)	C4 C5	halves)	5d (5) L3
	5-8yo	Cephalexin 250mg: 1 cap Q 6h x 5d (20) Cephalexin 500mg: 1 cap Q 6h x 5d (20)	C6	50+ kg Levofloxacin 500mg: 1 tab QD x 5	u (5) 13
	9+ yo	AND	00	VAGINITIS - Yeast Infection	
	5-8yo	Metronidazole 250mg 1/2 tab TID x 5d (15h)	M5	10+ yo Fluconazole 200mg: PO x 1 (NOW)) F3
	9-12y0	Metronidazole 250mg 1 tab TID x 5d (15)	M6	VAGINITIS - Bacterial	
	13+ yo	Metronidazole 250mg 2 tabs TID x 5d (30)	M7	14+ yo Tinidazole 500mg: 4 tabs QD x 3d	(12) T3
E	IN - IN	NFECTION, IMPETIGO, NON- SED CELLULITIS		EXTRA MEDS - See MD(M	
	2-4y0	Cephalexin 250mg/5ml: 1 tsp Q 6h x 5d (1)	C4	Take (qty) QD/BID/TID/QID/PRN for	days
	5-8yo	Cephalexin 250mg: 1 cap Q 6h x 5d (20)	C5	Acyclovir 200mg (Zoster w/in 24 hours)	A8
	9+ yo	Cephalexin 500mg: 1 cap Q 6h x 5d (20)	C6	Aspirin 81mg	A22
				Beclomethasone inhaler - 1-2 buffs BID	B1
	IN-R	ASH/ALLERGIC (Specify where to apply	y)	Co-Trimx(Bactrim)400/80mg800/1	60mg C9/10
	all	Hydrocortizone 1% cream: apply to area* BID	Hı	Ceftriazone injection250mg500mg _	_1g
	ages	*Apply to:		Dexamethasone 2mg	Dia
		16. A 19.		Diphenhydramine 25mg	Dı
	IN - R	ASH/BACTERIAL (Specify where to app	ply)	Doxycycline 100mg	D3
	all	Antibiotic cream: apply to area* BID	A20	Erythromycin 250mg	E4
	ages	*Apply to:	1120	Lisinopril 5mg	L4
	I/PID		1	Nystatin Oral	N1
		Refer to extra med list		Prednisone 10mg: tab(s) BID x 5d	P2/P3
				OTHER SUPPLIES	Berlin Press
Í	u	a state of the sta		A&D Ointment Rice Cereal	
1					
-	all ages	Ocean Nasal Spray (Saline) & Soap	01	Chapstick Soap	

Ivermictin Dosing Chart

Ivermictin (6mg tabs) Dosing by Weight

Each tablet = 6mg; 0.2mg/kg Doses rounded up to nearest half tablet

Do NOT give to patients under 15kg / 33lbs

Weight (kg)	Oral Dose (6mg tabs)	Weight (lbs)
15-18 kg	1/2 tab (3mg)	33-40 lbs
18-25 kg	3/4 tab (4.5 mg)	41-57 lbs
25-32 kg	1 tab (6mg)	58-69 lbs
32-40 kg	1 1/2 tabs (9mg)	70-90 lbs
41-50 kg	1 3/4 tabs (10mg)	91-111 lbs
51-59 kg	2 tabs (12mg)	111-130 lbs
60-68 kg	2 tabs (13.5mg)	131-150 lbs
69-77 kg	2 1/2 tabs (15mg)	151-170 lbs
78-86 kg	2 3/4 tabs (16mg)	171-190 lbs
87-95 kg	3 tabs (18mg)	191-210 lbs
96-104 kg	3 1/2 tabs (20mg)	211-230 lbs
105-113 kg	3 3/4 tabs (22mg)	231-250 lbs
114-122 kg	4 tabs (24mg)	251-270 lbs
123-131 kg	4 1/2 tabs (26mg)	271-290 lbs
132-140 kg	4 3/4 tabs (28mg)	291-310 lbs

Pharmacy Abbreviations

BID - twice a day cap - capsule d - days hr - hour PO - orally (by mouth) PRN - as needed Q4 hrs - every 4 hours Q6 hrs - every 6 hours QD - every day QID - four times a day SOB - shortness of breath tab - tablet TID - three times a day yo - years old

Explain WHAT the m	ned is for and HOW to take. Note: Key points may not include everything we say in USA.
Medication	Key Points:
Acetaminophen	CHECK AGE AND THEN CHECK DOSE and TAKE AS NEEDED (show pain sticker). If taking with Ibuprofen, separate time by a few hours.
Acyclovir	Extra med - need examiner to specify how many pills to give and how to take (commonly given 5 times a day)
Albendazole	CHECK DOSE (1 pill v. treatment). Do not give to child under 1 year old, or pregnant woman in 1st trimester. For Children 12 months - 24 months crush and give 1/2 tablet.
Amlodipine	CHECK AGE (Adults only) Show blood pressure #s today and explain that it's higher than normal. Take this med every day to keep blood pressure lower. Keep taking this medication even if feeling well. Recheck blood pressure in 30 days and refill medicine at local pharmacy. (Note: send home reminder note with today's blood pressure and name of med)
Amoxicillin	CHECK AGE AND THEN CHECK DOSE Finish all medicine even if feeling better. (Note - For suspension, be sure med was mixed with water before dispensing. Tell patient not to store in direct sunlight and shake before using).
Antibiotic Cream	Explain where to apply. Do not swallow.
Antifungal Cream	Explain where to apply. Do not swallow. (Make sure tube of cream is open. i.e. foil seal is broken)
Aspirin	Extra med - need examiner to specify how many pills to give and how to take (commonly given 1 time a day)
Azithromycin	CHECK AGE AND THEN CHECK DOSE Finish all medicine even if feeling better.
Beclomethasone	Extra med - need examiner to specify how often to take. Demonstrate how to use (shake inhaler, empty lungs, mouth around inhaler, press and deep breath in). Take every day. Rinse month with water after each use.
Bismuth	TAKE AS NEEDED (Show sticker). Chewable tablets. Take if upset stomach.
Calcium Carbonate	TAKE AS NEEDED (Show sticker). Chewable tablets. Take after eating if heartburn.
Cephalexin	CHECK AGE AND THEN CHECK DOSE Finish all medicine even if feeling better. (Note - For suspension, be sure med was mixed with water before dispensing. Tell patient not to store in direct sunlight and shake before using).
Cetirizine	CHECK AGE AND THEN CHECK DOSE Take every day.
Co-Trimoxazole (Bactrim)	Extra med - need examiner to specify how many pills to give and how to take. Finish all medicine even if feeling better.
Diphenhydramine	Extra med - need examiner to specify how many pills to give and how to take. May cause drowsiness
Docusate Sodium	TAKE AS NEEDED until relief from constipation. Take with full glass of water/juice. Relief usually in 1-3 days.
Doxycycline	Extra med - need examiner to specify how many pills to give and how to take. Not for pregnant women or children under 8 years old. Do not take with milk. Avoid excessive exposure to sun.
Erythromycin	Extra med - need examiner to specify how many pills to give and how to take. Take with full glass of water. Do not chew or crush. Finish all medicine even if feeling better.
Eye Drops	TAKE AS NEEDED (show sticker) for eye irriatation. Keep dropper clean - do not touch. Demonstrate how to open (i.e. press down and twist for child safety lids)
Ferrous Sulfate	CHECK AGE AND THEN CHECK DOSE Take every day with food
Fluconazole	CHECK AGE Swallow 1 tab now
Folic Acid	Take every day (like a vitamin)
Gentamicin	CHECK IF EYE (conjunctivitis) OR EAR (otitis externa). Check for correct sticker. Take for the prescribed number of days. Keep tip of the dropper clean - do not touch.

 CHECK AGE AND THEN CHECK DOSE Finish all medicine even if feeling better. (Takes a long ime to finish! keep taking until gone) Do not give to pregnant women. CHECK AGE (Adults only) Not for pregnant women. Take every morning. Keep taking this medication even if feeling well. Recheck blood pressure in 30-60 days and refill medicine at local bharmacy. Normal to go to the bathroom more often with this medicine. Send home reminder note with today's blood pressure and name of med. Should not be used on open wounds. Do not swallow. Explain where to apply (Make sure tube of cream is open. i.e. foil seal is broken) CHECK AGE AND THEN CHECK DOSE Take with food. TAKE AS NEEDED (show pain sticker). Not for pregnant women. If taking with Actaminophen, separate time by a few hours. DOSE BY WEIGHT - look at Ivermectin chart and make sure you're looking at the correct kilograms or pounds. Give with soap, black bag and scabies handout. Ask if patient wants to take med now? (Can they wash everything today? or do they want to take med tomorrow and wash everything then?)
 medication even if feeling well. Recheck blood pressure in 30-60 days and refill medicine at local obarmacy. Normal to go to the bathroom more often with this medicine. Send home reminder note with today's blood pressure and name of med. Should not be used on open wounds. Do not swallow. Explain where to apply (Make sure tube of cream is open. i.e. foil seal is broken) CHECK AGE AND THEN CHECK DOSE Take with food. TAKE AS NEEDED (show pain sticker). Not for pregnant women. If taking with Actaminophen, separate time by a few hours. DOSE BY WEIGHT - look at Ivermectin chart and make sure you're looking at the correct kilograms or pounds. Give with soap, black bag and scabies handout. Ask if patient wants to take med now? (Can they wash everything today? or do they want to take med tomorrow and wash everything then?)
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Not for pregnant women. If taking with Actaminophen, separate time by a few hours. DOSE BY WEIGHT - look at Ivermectin chart and make sure you're looking at the correct kilograms or pounds. Give with soap, black bag and scabies handout. Ask if patient wants to take med now? (Can they wash everything today? or do they want to take med tomorrow and wash everything then?)
kilograms or pounds. Give with soap, black bag and scabies handout. Ask if patient wants to take med now? (Can they wash everything today? or do they want to take med tomorrow and wash everything then?)
CHECK AGE AND THEN CHECK DOSE Finish all medicine even if feeling better.
Extra med - need examiner to specify how many pills to give and how to take
CHECK DOSE (1 pill v. treatment). Do not give to child under 2, or pregnant woman in 1st rimester.
CHECK AGE AND THEN CHECK DOSE (5mg or 10mg). Take before bed to help sleep.
CHECK AGE AND THEN CHECK DOSE Finish all medicine even if feeling better. May experience metalic taste in mouth - drink lots of water.
Extra med - need examiner to explain how to take. Show how to open and apply
TAKE AS NEEDED Wipe clean after each use.
CHECK IF EYE (conjunctivitis) OR EAR (otitis externa). Take for prescribed number of days even f feeling better. Keep dropper clean, do not touch tip
CHECK AGE Take once a day before lunch. Take every day to get the most benefit from this medicine (at least 14 days)
Explain how to mix (1 packet with 1 liter of clean water). May add flavor packets for taste.
CHECK AGE For children under 15kg who cannot take Ivermectin. Before bed, apply to whole body (skin only, do not swallow, and avoid contact in eyes). After 12-14 hours, wash off with soap. Also give patient soap, scabies handout and black bag.
Extra med - need examiner to explain how to take. Finish all medicine even if feeling better. Not for pregnant women.
FAKE AS NEEDED (show sticker) For immediate relief of asthma. Demonstrate how to use shake inhaler, empty lungs, mouth around inhaler, press and deep breath in)
CHECK AGE AND THEN CHECK DOSE Finish all medicine even if feeling better. Not for pregnant or breast feeding women.
One time dose to help with vision
CHECK FOR CORRECT TYPE OF VITAMIN
CHECK FOR CORRECT TYPE OF VITAMIN
CHECK FOR CORRECT TYPE OF VITAMIN For 11+ year olds
CHECK AGE AND THEN CHECK DOSE Can be crushed and mixed with food for toddlers.