

## Over-the-Counter Medicine at DEEP

DEEP Residence Staff are trained in Standard First Aid and CPR-C; they are not registered health professionals. As such, they will not dispense medication without the written authorization of the student's legal parent/guardian. This optional form provides information about the Over-the-Counter (OTC) medications that are stocked in residence.

The Outreach Coordinator and/or the (Assistant) Residence Life Coordinators may provide the following checked  medications for my child, \_\_\_\_\_ (child's name), for the purpose, dosage and frequency (as per package instructions) stated.

Please note that medications left blank will not provided to your child.

Analgesic and antipyretic: Acetaminophen ([Tylenol](#))

Dosage: 1 pill of TYLENOL® Regular Strength (325 mg) every 4-6 hours. If pain or fever does not respond to 1 pill, 2 pills at the next dose.

Purpose: Discomfort/fever, headache, pain relief

Anti-inflammatory: Ibuprofen ([Advil](#))

Dosage: 1-2 pill of Advil® Regular Strength (200 mg) every 4 hours or 2 pills every 6-8 hours.

Purpose: Discomfort/fever, menstrual cramps, headache, muscle aches

Anti-inflammatory: Naproxen ([Aleve](#))

Dosage: 1 pill of Aleve® (220 mg) every 8-12 hours.

Purpose: Discomfort/fever, menstrual cramps, headache, muscle aches

Antihistamine: Diphenhydramine Hydrochloride ([Benadryl](#))

Dosage: 1-2 of BENADRYL® Caplets (25 mg) every 4-6 hours.

Purpose: Mild allergic reaction (Itchy mouth, some hives around mouth/face, mild itch, mild nausea/discomfort)

Antacid: Calcium carbonate ([Tums](#))

Dosage: chew 2-4 Tums (Peppermint flavour) tablets (500 mg) as needed. Daily maximum: 16 tablets.

Purpose: Heartburn, sour stomach, acid indigestion, upset stomach

Antiemetic: Dimenhydrinate ([Gravol](#))

Dosage: 1 of Gravol™ Immediate Release & Long Acting Caplets (100 mg) every 8-12 hours.

Purpose: Nausea, vomiting

Cough suppressant: Dextromethorphan Hydrobromide ([Benylin](#))

Dosage: 10 mL of Benylin DM Cough Syrup (15 mg) every 8 hours.

Purpose: Throat irritation, cough

Decongestant: Pseudoephedrine ([Sudafed](#))

Dosage: 1-2 caplet of SUDAFED Sinus Advance® (30 mg) every 4-6 hours, up to 6 caplets per day. Purpose:

Sinus congestion, cold symptoms

Antidiarrheal: Loperamide hydrochloride ([Imodium](#))

Dosage: 2 tablets of Imodium® Quick Dissolve (4 mg). Then, 1 capsule after each episode of diarrhea up to a daily maximum of 8 capsules.

Purpose: Diarrhea

To the best of my knowledge, my child does not have any allergies or medical conditions that contraindicate the medications selected. I will notify the DEEP Residence staff in writing ([residence@engineeringoutreach.ca](mailto:residence@engineeringoutreach.ca)) if there are any changes.

Parent/Guardian name: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_