



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Basic Medication Awareness & Infection Control Training for Certified Family Homes



Attention CFH Provider/Substitute Caregiver:

By accepting the delegated responsibility for assisting a resident with medications, the CFH provider/substitute caregiver is acknowledging that they are willing and capable to provide the skills required. The CFH provider/substitute caregiver is also accepting responsibly for their actions or failures to act.

CFH Provider/Substitute Caregiver Name Printed

CFH Provider/Substitute Caregiver Signature

Date Passed - Trainer Signature

This course satisfies the requirements of
IDAPA 16.03.19.400.04.a

Table of Contents

Introduction

Purpose of Course.....	1
Department Disclaimer.....	1

Unit 1 - Basic Understanding of Medications

Assistance Includes.....	2
Requirements.....	2
Limitations.....	3

Unit 2 - Storing & Caring for Medications

Medication Packaging.....	4
Safe Storage.....	5
Chemical Compounds.....	5
Cautions.....	5

Unit 3 - Prescriptions & Pharmacy

Things to Know.....	6
Warning Labels.....	6
Label Information.....	7
Information Sheets.....	8
Filling New Medications.....	8
10 Key Questions.....	8
Refilling Medication.....	9
Non Prescription Medications.....	10

Unit 4 - Medication Oversight

6 Rights of Medications.....	11
Incoming Medications.....	11
The Importance of MEASURING.....	11
Recognizing Good Responses.....	12
Recognizing Bad Responses.....	12
Alcohol & Illicit Drug Use.....	12
Vitamin, Herbs and Home Remedy Use.....	12
When to Contact the Doctor.....	13
Disposal of Medications.....	13

Controlled Substances.....	14
Unit 5 - Infection Control	
General Recommendations	15
Hand Washing.....	15
Alcohol Based Hand Sanitizers	17
Home Cleanliness.....	17
Hygiene Issues	17
Gloves.....	18
Unit 6 - Vocabulary & Abbreviations	
Vocabulary	19
Medical Abbreviations.....	21
Medication Forms	
Medication Authorization Form	23
Authorization for OTC Medication Form.....	24
Unused Medication Form	25
Medication Log	26
Resources	
Websites.....	27
Allergies & Unfavorable Responses Chart	27
Emergency Numbers	28

Introduction

The purpose of this course is to educate Certified Family Home (CFH) providers and substitute caregivers regarding medication safety and infection control.

If a resident's needs exceed the curriculum in this training, the CFH provider/substitute caregiver may be required to complete and pass the "Assistance with Medication Course" available through the Idaho Professional Technical Education Program.

Successful completion of this course will consist of participation in classroom training and a written test with the passing rate of 80% or greater.

This course satisfies the requirements of IDAPA 16.03.19.400.04.a. Each person assisting with resident medications must be an adult who successfully completed and follows the "Assistance with Medications" course available through the Idaho Professional Technical Education Program approved by the Idaho State Board of Nursing, or other Department-approved training. Family members previously exempted from this requirement must complete this course before July 1, 2006.

By accepting the delegated responsibility for assisting a resident with medications the CFH provider/substitute caregiver is acknowledging that they are willing and capable to provide the skill required. The CFH provider/substitute caregiver is also accepting responsibly for their actions or failures to act.

Unit 1 - Basic understanding of Medications

Assistance with medications may include:

- Breaking a scored tablet
- Crushing a tablet (**With a physician's written orders**)
- Instilling eye, ear or nose drops
- Giving medication through a pre-mixed nebulizer inhaler or gastric (non nasogastric) tube (**With written delegation**)
- Assisting with oral or topical medications
- Insertion of suppositories

A Certified Family Home provider must:

- Report to the appropriate licensed medical professional when a medication was not taken
- Understand the proper use and side effects of prescribed and over the counter medications
- Know which medication containers are appropriate
- Use proper measuring devices
- Keep accurate records regarding medications. Examples are:
 - Inventory of narcotics
 - Record of medications taken including date, time and dosage
- Know what to report and document. Examples are:
 - Any medication dosages not taken
 - Adverse side effects
 - A decrease in resident's ability to self-administer medications

A Certified Family Home Provider Cannot:

- Prepare or administer injections
- Adjust or withhold medication dosage without **written** directions to do so by the resident's physician
- Start, stop or adjust any IV therapy
- Transfer resident's medications to a mediset

Unit 2 - Storing and Caring for Medications

- All medications **MUST** be kept in the original packaging, **UNLESS** a mediset (a daily plastic dispenser) is filled by a licensed nurse or pharmacy **OR** a blister pack (pills individually packaged on a sealed card) is filled by a pharmacy.

*IDAPA 16.03.19.400.02.

a. "The medication must be in the original - dispensed container, or in an original over-the-counter container, or placed in a unit container by a licensed nurse and be appropriately labeled with the name of the medication, dosage, time to be taken, route of admission, and any special instructions. Each medication must be packaged separately unless in a mediset, blister pack or similar system."

B. Evidence of the written or verbal order for the medication from the physician or other practitioner of the healing arts must be maintained in the resident's record. Medisets filled and labeled by a pharmacist or licensed nurse may serve as written evidence of the order. An original prescription bottle labeled by a pharmacist describing the order and instructions for use may also serve as written evidence of an order from the physician or other practitioner of the healing arts.

c. The home is responsible to safeguard the resident's medications.



Original
Prescription
Bottles

Blister/Bubble
Pack



Mediset filled by a
pharmacy or RN



Storage of Medications

Medications MUST be stored safely at all times!

- All medications must be stored separately for each individual in the home.
- All medications must be stored in a safe place away from children, teens and visitors.
- Depending on the medication and/or resident, medications may need to be in a locked container or cabinet.
- **ALWAYS** read the "storage directions" on each medication for specific storage instructions.

Medications are chemical compounds; their composition and strength can be affected by the way they are stored.

- Store medications in a cool, dry place. Avoid excessively lit areas.
- Avoid storing medications in bathrooms because of the steam created in the bathroom.
- Avoid medication exposure to extreme cold or hot temperatures unless medication is required to be refrigerated. Designate a specific area in the refrigerator as a medication area.

No Can Do!

- **NEVER** combine different medications into one bottle or vial.
- **NEVER** store or combine loose medications in a plastic bag.
- Any pill or capsule that is not recognizable can be taken into the pharmacy for identification. **NEVER** put it back into a bottle or vial.

Unit 3 - Prescriptions and Pharmacy

A **Prescription Medication** is ordered by a licensed medical professional.

THINGS to know about prescription medications:

- Once a medication is prescribed, it is the provider's responsibility to make sure the medication is obtained from the pharmacy.
- A prescription medication is ordered by the licensed professional to treat symptoms, diseases, or medical conditions.
- The prescription medication is to be taken **ONLY** by the person for whom it was prescribed.
- Utilizing a prescription medication for anyone other than for whom it was prescribed, is at best negligence, *and in some cases could be criminal depending upon the medication involved.*
- **BE ALERT** to medication names that are similar. Make certain the right medication is being taken.
- **WARNING LABELS** will be on medications that require special instructions.



Important information on a medication label:

1. Patient's name
2. Physician's name
3. Date filled
4. Expiration date
5. Number of refills
6. Names of the medication - Most have 2: the name brand & the generic
7. Dose of medication
8. Directions for use and how often to take the medication
9. Any precautions
10. Storage information
11. Pharmacy contact information

This is the prescription number.

This is the date of the original prescription

This is the expiration date of the prescription and how many more times it can be refilled.

This is the expiration date of the drug within this container.

Huggan
2900 WOBURN BELLINGHAM WA 98226
(360) 715-5320
09/25/2000
RX **292614N** DR. WALSH, JAMES R.Ph. MH
DOE, JOHN
1234 5TH ST BELLINGHAM WA 98226
TAKE 1 TABLET EVERY 4 HOURS AS NEEDED
ASPIRIN 325MG TABLET EC UTR TA
NDC# 00677077101 DW: 09/25/2000 QTY: 30
REFILL 0 TIMES BY 09/25/2001 EXP: 09/25/2001

Medication Information Sheets

All medications come with information sheets. **ALWAYS** keep these sheets in your resident records. The following important information is found within the medication information sheet:

1. Purpose of the medication
2. Expected effect of medication
3. Possible side effects
4. Adverse reactions
5. What to do if a dose is missed
6. What to do in case of an emergency

Filling New Medications

- When a **new medication** is prescribed, it is **extremely important** that the medication is filled **immediately** or as soon as reasonably possible.
- Written prescriptions must be kept in a safe place until given to your pharmacist.
- It is best to use the **SAME PHARMACY** for filling all prescriptions.
- **Utilizing the same pharmacy** makes it easy for the PHARMACIST to identify medications that are not recommended for use together.
- The pharmacist has an individual medication profile to review for drug interactions.
- If you need to fill a **MEDICATION PRESCRIPTION after hours** and your normal pharmacy is not open, you may need to use a 24-hour pharmacy.

10 KEY Questions to ask the pharmacist when leaving with the new prescription:

1. Prescription medications have two (2) commonly used names; what are the brand and generic names for the medication?
2. What is the medication being used for?

3. How much is taken and how often?
4. What to do if a dose is missed?
5. How long will the medication need to be taken?
6. What side effects could occur?
7. What to do if side effects happen?
8. Does this medication interfere with other medications? Can certain foods interfere with this medication?
9. Does this medication replace any other medication currently being taken?
10. Where and how should the medication be stored?

Refilling an Existing Prescription

- Do not run out of a daily prescription medication. Medications cannot be stopped when ordered to be taken on a daily basis.
- Allow time to contact the doctor/pharmacy or authorization agencies.
- When a daily prescription medication needs to be refilled, several issues must be considered:
 - Did the doctor write the prescription for refills?
 - Are refills available at the pharmacy? Or does the doctor need to be contacted to re-order the medication?
 - Does the medication require prior authorization from the insurance company or Medicaid?
- Occasionally, physicians will want to see the resident in their office prior to refilling medications.
- When there are **seven (7) days** of medication remaining, contact the doctor or pharmacy for a refill of the prescription medication.

Non Prescription Medications

A Non-prescription Medication is medication purchased "over the counter" or off the shelf. Non-prescription medications do not require a special written prescription by the doctor. However, they do require a prescriber's order.

THINGS to know about non-prescription medications:

- Utilizing non-prescription or "OTC" (over-the-counter) medications may aggravate other conditions or create unwanted side effects.
- When using non-prescription/over-the-counter medications, residents and/or providers overseeing resident's medication needs should **CHECK with the doctor or local pharmacist for possible drug interaction.**

Read Instructions on NON-Prescription or Over-the-Counter Medications

Due to the high risk of drug interaction, when using OTC medications, special care must be taken with their use.

- Directions for the use of medication and dosage are printed on the medication labels. Pay special attention to the warnings associated with these types of medications.
- You must dispose of all expired medication within 30 days. A medication may lose its potency and chemical stability. If chemically altered, a medication could have an unintended impact, which could lead to serious health problems.
- When overseeing residents with OTC medications, it is **REQUIRED** that you record these medications on your medication log sheets.
- The supervising Physician needs to be aware of all medications taken by your resident.

Unit 4 - Medication Oversight

The "6 RIGHTS" of Medication Oversight

When overseeing medications for a resident, it is **MANDATORY** to follow the 6 **RIGHTS** of medication oversight:

1. The **RIGHT MEDICATION** is being given
2. Medication is being given by the **RIGHT ROUTE**
3. The **RIGHT DOSE** of the medication is being taken
4. The medication is being taken at the **RIGHT TIME**
5. The medication is being given to the **RIGHT PATIENT**
6. The **RIGHT DOCUMENTATION** was completed to show the date and time the medication was taken by the resident

When accepting a resident, document all medications coming into your home

- **Do not allow any expired medications into your home**
- **Do not allow any medications not currently prescribed into your home**

The Importance of MEASURING Devices for Overseeing Medication Measurements

- **Never guess when measuring medication dose. Use an accurate measuring device.**
- **Household measuring devices are not always accurate.**
- **If a liquid medication comes with a measuring cup, use only the cup that came with the medication.**
- **Purchase a special oral syringe or measuring spoon for accurate measuring of liquids.**

Knowing How to Recognize "Positive" Medication Responses

- When a resident starts a new medication, it is the provider's responsibility to know what to watch for. In order to recognize the desired response, the provider must understand the purpose of the prescription. This information is found on the information sheets given when prescriptions are filled.

Knowing How to Recognize "Negative" Medication Responses

- When a new medication is started, watch for adverse responses. If any occur, you **must** contact the medical professional and document the incident.

Know There are Risks with Using Alcohol and/or Illicit Drugs While Taking Medications

- There are **MAJOR** dangers associated with drinking alcoholic beverages or taking illicit drugs while using prescribed and over-the-counter medications.
- **REPORT** to the medical professional and **DOCUMENT** any drug and/or alcohol use by the resident.

Know There are Risks with Using Vitamins, Herbs, and Home Remedies

- Vitamins, herbs, and home remedies must be written and documented on the medication log sheets.
- The doctor must be advised of vitamins, herbs, and home remedy use.
- Vitamins, herbs, and home remedies may increase or decrease medication effects.

Contacting the Resident's Doctor

- **Call the doctor for the following concerns:**
 - Refusal to take medications
 - Missed medications
 - Resident vomits medication within 20 minutes of taking
 - Resident is nauseated, vomiting, or having diarrhea
 - Resident has pills or coated tablets in stool/feces/bowel movements
 - Resident shows changes in mental status—confusion or stupor
 - Any other concerns/problems noticed

Disposal of Medications

Managing Discontinued or Expired Medications

- The disposal of medications needs to be documented and witnessed.

Expired or unused medications may not be stored in your CFH for longer than 30 days, unless it is ordered by your physician that the resident may need to resume this medication at a later date.

***IDAPA 16.03.19.400.02.d:** Medications that are no longer used by the resident must not be retained by the certified family home for longer than 30 calendar days.

***IDAPA 16.03.19.400.06:** A written record of all disposals must be maintained in the home and will include:

- a. A description of the drug, including the amount
- b. The resident for whom the medication was prescribed
- c. The reason for disposal
- d. The method of disposal; and
- e. Signatures of responsible home personnel and a witness or the resident's family

Responsible Ways to Dispose of medications:

- **Pharmacy** - Although pharmacies are not legally required to accept these medications from consumers, the majority of pharmacies will take them and send them to a registered disposal company.

- **Hazardous Waste Facility** - Many cities and towns have household hazard waste facilities that will take medications that need to be disposed.

Less Desirable Practices:

- It is best not to throw any medications in the trash. Residents, children and animals could gain access to it, even after the garbage has been hauled away.
- It is best not to flush any medication down the toilet. Many chemicals are not filtered out of our drinking water.

Controlled Substances

Understand that **narcotics** (controlled substances), **psychotropic** (mind-altering drugs) and **anti-anxiety medications** may require careful monitoring on the number of pills/tablets being taken. **Observe that these medications are being taken correctly and visitors and/or family members are not at risk for accessing these types of medications.** These types of medication should be kept under lock and key. **YOU MUST ASK THE PHARMACIST IF THE MEDICATION IS IN THE COUNTING MEDICATION CATEGORY.**

Unit 5 – Infection Control

At times, during care, providers and residents may be exposed to infectious diseases.

Here are some general recommendations that can help prevent or minimize the likelihood of infection.

- Practice good personal hygiene
- Make sure any open wounds are covered
- Keep immunizations up to date
- Use standard precautions
- Follow good hand-washing practices
- Promote a healthy immune system by:
 - Eating a proper diet
 - Exercising
 - Getting adequate rest
 - Reducing stress

Hand washing is....

- Absolutely essential in the prevention and control of infection.
- The single most effective means of controlling infectious disease.
- A habit that must be practiced!

When hand washing is required:

- Before assisting with medications
- After personal use of the toilet
- After blowing/wiping your nose, or touching your face
- Before eating
- After providing personal care to resident
- When obviously dirty
- After coming in contact with body secretions
- After handling dirty equipment
- Before and after removing gloves
- Before food preparation
- After switching between working with raw food and working with ready-to-eat food

Procedures for washing your hands:

1. Wet your hands with warm water
2. Apply a generous amount of soap
3. Vigorously rub together all surfaces of the lathered hands for twenty (20) seconds. Friction helps remove dirt and microorganisms. Wash around and under rings, around cuticles, and under fingernails
4. Rinse hands thoroughly under a stream of water. Running water carries away dirt and debris. Point fingers down so water and contamination won't drip toward elbows
5. Dry your hands completely with a clean towel

What about alcohol-based hand sanitizers?

- If water and soap are NOT available, use an ethanol alcohol-based (a minimum 62%) hand sanitizer, preferably in a gel form

Home Cleanliness

- Housekeeping - all providers are responsible for ensuring the home is kept sanitary and clean. Appropriate cleaning materials need to be available for use
- Counters, tables and floors - any food spilled should be cleaned in a timely manner and not allowed to dry
- Linens and clothing - laundering of linens and clothing should occur frequently on a regular basis and immediately if soiled with blood or any body secretions

Hygiene Issues

- Peri-care - Some residents may need assistance with toileting. Proper hygiene techniques includes wiping front to back to prevent cross contamination and infection
- Bathing - all bathing and shower areas need to be thoroughly cleaned after each use
- Personal care items - all residents must have their own hygiene items. These items are not shared with other residents (i.e. hair brush, toothpaste)

Hepatitis B, Hepatitis C and Acquired Immunodeficiency Syndrome (AIDS) are all diseases caused by viruses. These viruses are spread via contact with blood and body fluid of infected individuals. A vaccine is available for Hepatitis B virus, but there is currently no known vaccine or cure for AIDS or Hepatitis C. Standard Bloodborne Precautions reduce the risk of transmission of these diseases.

Standard Precautions:

Gloves

- *Wear gloves when coming in contact with blood, body fluids or open wounds*
- *Wear gloves when coming in contact with contaminated items*
- *Change gloves between tasks and procedures*
- *Change gloves after contacting matter that may be contaminated*
- *Remove gloves promptly after use*
- *Remove gloves before touching uncontaminated items and surfaces*
- *Wash hands after removing gloves*

Unit 6- Vocabulary

Allergic Reactions - Can range from mild to severe: Hives, redness, itching, swelling and difficulty breathing

Analgesic - a pain reliever

Antibiotic - given to treat an infection

Contamination - A condition of being soiled, stained, touched, or otherwise compromised by harmful agents

Controlled Substances - medications that could be habit-forming or addictive that are used to control pain, anxiety or promote sleep

Diabetes - a disease of metabolism; problems with utilizing sugar and starches

Dietary Supplement - taken by mouth; has a type of ingredient that is intended to supplement the diet

Discharge - Excretion of fluid, puss or other drainage from an orifice/body opening or wound

Dosage - the amount of pills or liquid medication to be taken

Drug Interactions - When one drug increases or decreases the action of another

Gastric Tube - A tube inserted directly into the stomach for the instillation of nutrition and medications

Household Measurements -Should never be used for measuring resident's medications

Infection - The invasion of the body by virus or bacteria that cause illness

Medication Label - Label affixed to a prescription medication explaining: who the medication is for, name and dose of medication, directions for use, physicians name, precautions, expiration date, pharmacy name and phone number, amount of refills remaining, storage instructions

Metered dose inhaler - A device designed to deliver a measured dose of an inhalation drug

Minerals - supplemental forms of essential minerals in a pill or tablet form used as a supplement to the diet

Narcotic Medication - Used to control pain, anxiety or promote sleep

Nebulizer - A device for producing a fine spray, reducing a liquid or powder to a fine spray for induction into the airway

Over-the-Counter Medication (OTC) - Medication that may be purchased off the shelf in a retail setting

PRN Medication (Per Required Need) - A medication or treatment ordered by a professional to an individual allowing the medication or treatment to be given as needed and directed

Prescription Medication - A medication available only after the doctor writes a formal prescription and must be obtained through a pharmacy

Recording Medications/Recordkeeping - making a written entry that a medication was taken or not taken

Scored Medications - Medications that have a groove across the tablet that enables them to be broken

Side Effects - A secondary and usually adverse effect caused by a medication. Examples are: nausea, weight loss or gain, diarrhea

Suppository - Medication compounded in an easy melted medium for insertion into the rectum, urethra, or vagina

Topical - medication that is applied to the top of the skin; such as a lotion, or medication patch that absorbs into the skin

Medical Abbreviations

BID: 2 times a day

TID: 3 times a day

QID: 4 times a day

PRN: Per required need

HS: Hours of sleep, bed time

D/C: Discontinue, Discharge

TSP: Teaspoon

QD: Everyday

Q: Every

NKA: No known allergies

OD: Right eye

OS: Left eye

OU: Both eyes

PO/P.O.: By mouth

NPO: Nothing by mouth

GTT: Drop

TBSP: Tablespoon

MG: milligram

CC (ML): Cubic centimeter, milliliter

C: With

S: Without

OTC: Over the counter

Pc: After meals

Ac: Before meals

STAT: Immediately

Q AM: Every morning

Q HS: Every night (bedtime)

Q _h: Every ___ hours (e.g., Q 4h= every 4 hours)

Resident's Medication Forms and Documentation

Forms

1. **Medication Authorization Form** - It is MANDATORY to have a signed Medication Authorization Form from the resident's doctor when entering your CFH.
2. **Authorization for Over the Counter Medication Form** - It is MANDATORY to have a written consent from the resident's doctor before giving OTC medications.
3. **Unused Medication Form** - It is Mandatory to document the disposal of any prescribed medications.
4. **Medication Log Form** - It is MANDATORY to record on the Medication Log Form when prescription medications and OTCs are taken.
5. **Medication Information Forms** - It is MANDATORY to have a current list of the resident's medications (prescription and non-prescription) and the purpose of each medication when the resident enters your CFH.



Date _____ Resident Name _____

RE: Medication Authorization

Dear Physician:

I am considering into a Certified Family Home. Certified Family Homes are homes certified by the State of Idaho as safe and effective. The homes accept only one or two residents to participate as a member of their family. The provider may or may not have any special training.

The rules governing Certified Family Homes specify that I must obtain certain directions from my physician regarding the administration of medication. I would appreciate your completion of the following questions:

Yes **No** **1. This patient is able to self-administer all medication.** The patient understands the purpose of the medication; knows appropriate dosage and times to take the medication; understands expected side effects, adverse reactions or side effects, and action to take in an emergency; and is able to take the medication without assistance*.

Yes **No** **2. This patient requires assistance with taking both routine and non-routine medications.**

*For these purposes, assistance means reminders, assisting with removal from container and observing the taking of the medications. No other functions of medication administration are allowed unless the provider meets requirements of the Board of Nursing.

Comments _____

Physician's Signature _____

Address: _____



Authorization for Over the Counter Medications

The listed resident lives in a Certified Family Home. This is a home certified by the State of Idaho to care for disabled adults. The certified family home provider is required to obtain written consent by the resident's licensed medical professional before giving any medications.

Resident's Name: _____

Standard OTC Medications

- **Pain Reliever:** _____
- **Antacid:** _____
- **Cold/Sinus:** _____
- **Anti Diarrhea:** _____
- **Stool Softener:** _____
- **Other:** _____

Supplements/Herbs:

Physician signature: _____ **Date:** _____



Unused Medication Form

Medications that are expired or no longer used by the resident must not be retained by the certified family home for longer than thirty (30) calendar days. A written record of all disposals of drugs must be maintained in the home and will include:

Client Name:	
Drug Name AND Dosage:	
Number of Pills Disposed:	
Reason for Disposal:	
Method of Disposal:	
Provider Signature:	Date: / /
Witness Signature:	Date: / /
DHW Review:	Date: / /
Signature of Reviewer:	

MEDICATION LOG – Prescription and Non-Prescription

Participant's Name _____

Drug Allergies _____

Physician's Name _____

Food Allergies _____

Month/Year _____

		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Medication & Dosage	Time																																
	A.M.																																
	Noon																																
	P.M.																																
	Bed Time																																
	A.M.																																
	Noon																																
	P.M.																																
	Bed Time																																
	A.M.																																
	Noon																																
	P.M.																																
	Bed Time																																

Resources

Dale Carnegie Training

<http://www.cdc.gov/nceh/vsp/pub/handwashing/handwashingtips.htm>

<http://www.stanford.edu/dept/EHS/prod/researchlab/lab/handwashing.html>

Recognizing Severe and Common Medication Allergies and Unfavorable Drug Responses

Any known allergies to medications should be WRITTEN on the resident's medication record keeping sheets and always reported to the doctor and pharmacist.

Symptoms/Responses	Drug Allergy may include:	Unfavorable Drug Response may include:
Mild to Moderate in Nature	Rash; Itching; Hives;	Nausea; vomiting; diarrhea; muscle aches; headache; tired; drowsy; unable to sleep
Severe to Emergency care required	Facial swelling; Difficulty breathing to rapid closing of the windpipe; Drop in blood pressure causes dizziness; Faintness; Heart beats irregularly	Abnormal bleeding; Kidney problems; Liver damage; Confusion

FIRE - POLICE - SHERIFF - AMBULANCE - PARAMEDICS

EMERGENCY

911

POISON CONTROL 1-800-860-0620
IDAHO CARELINE 211 OR 1-800-926-2588
ADULT PROTECTIVE SERVICES 1-800-859-0324

OTHER IMPORTANT NUMBERS

_____	_____
_____	_____
_____	_____
_____	_____

If you know or suspect that someone has ingested an unknown medication or taken an overdose of medication, contact poison control IMMEDIATELY; prior to contacting the Physician.

Poison Control/Idaho Poison Center 1-800-222-1222 or 800-860-0620