

Psychotropic Medication Rapid Reference

A Guide for Camping Professionals

Prepared by Christopher Thurber, PhD and Joshua Gear, MD

This guide is not a substitute for professional medical, psychiatric, or psychological assessment, diagnosis, or treatment. It is intended solely as a reference to provide basic information about some of the most common psychotropic medications campers take.

To fully understand an individual camper's medical or psychological diagnosis and treatment, you must have a thorough history and consultation with a qualified mental health professional. Use this reference as a way to understand basic pediatric psychopharmacology, not as a way to assess, diagnose, or treat an individual child. Always consult parents and a qualified professional to answer questions, resolve problems regarding a camper's mental health or medical treatment, and get up-to-date information.

Medications Typically Prescribed for Mood and Anxiety Disorders

| Brand Name (usually called) | Generic Name (also called) | Indications (What it's for) | Most common side effects | When a dose is missed... |
|-----------------------------|----------------------------|-----------------------------|--------------------------|------------------------------------|
| Zoloft | sertraline | Depression & anxiety | GI upset, insomnia | Take it at the next scheduled time |
| Prozac | fluoxetine | Depression & anxiety | GI upset, insomnia | Take it at the next scheduled time |
| Paxil | paroxetine | Depression & anxiety | GI upset, insomnia | Take it at the next scheduled time |
| Celexa | citalopram | Depression & anxiety | GI upset, insomnia | Take it at the next scheduled time |
| Lexapro | escitalopram | Depression & anxiety | GI upset, insomnia | Take it at the next scheduled time |
| Effexor | venlafaxine | Depression & anxiety | GI upset, insomnia | Take it at the next scheduled time |
| Cymbalta | duloxetine | Depression & anxiety | GI upset, insomnia | Take it at the next scheduled time |
| Wellbutrin | bupropion | Depression & ADHD symptoms | GI upset, insomnia | Take it at the next scheduled time |

Notes:



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Medications Typically Prescribed for Anxiety Disorders, Agitation, or Insomnia

| Brand Name (usually called) | Generic Name (also called) | Indications (What it's for) | Most common side effects | When a dose is missed... |
|--|---------------------------------------|--|-------------------------------------|---------------------------------------|
| Ativan | lorazepam | Anxiety, agitation, insomnia | sedation | Take it at the next scheduled time |
| Valium | diazepam | Anxiety, agitation, insomnia | sedation | Take it at the next scheduled time |
| Klonopin | clonazepam | Anxiety, agitation, insomnia | sedation | Take it at the next scheduled time |
| Xanax | alprazolam | Anxiety, agitation, insomnia | sedation | Take it at the next scheduled time |

Medications Typically Prescribed for Enuresis

| | | | | |
|------------|-------------------------|----------------------------|----------|---------------------------------------|
| Imiprimine | imiprimine | Bedwetting & depression | sedation | Take it at the next scheduled time |
| DDAVP | desmopressin acetate | bedwetting | headache | Take it at the next scheduled time |

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Medications Typically Prescribed for ADHD

| | | | | |
|------------------------|-------------------|--|---------------------------------|------------------------------------|
| Ritalin | methylphenidate | ADHD symptoms Attention, impulse control | Appetite suppression | Take it at the next scheduled time |
| Adderall & Adderall XR | amphetamine salts | ADHD symptoms Attention, impulse control | Appetite suppression | Take it at the next scheduled time |
| Concerta | methylphenidate | ADHD symptoms Attention, impulse control | Appetite suppression | Take it at the next scheduled time |
| Vyvanse | lisdexamfetamine | ADHD symptoms Attention, impulse control | Appetite suppression | Take it at the next scheduled time |
| Metadate | methylphenidate | ADHD symptoms Attention, impulse control | Appetite suppression | Take it at the next scheduled time |
| Strattera | atomoxetine | ADHD symptoms | GI upset, insomnia | Take it at the next scheduled time |
| Provigil | modafanil | Sedation due to sleep apnea or narcolepsy, ADHD symptoms | Headaches, appetite suppression | Take it at the next scheduled time |

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Medications Typically Prescribed for Mood Stabilization or Aggression

| Brand Name (usually called) | Generic Name (also called) | Indications (What it's for) | Most common side effects | When a dose is missed... |
|--|---------------------------------------|--|-------------------------------------|-------------------------------------|
| Risperdal | risperidone | Aggression, mood stabilization, psychosis, sleep | Sedation, weight gain | Take it at the next scheduled time |
| Seroquel | quetiapine | Aggression, mood stabilization, psychosis, sleep | Sedation, weight gain | Take it at the next scheduled time |
| Zyprexa | olanzapine | Aggression, mood stabilization, psychosis, sleep | Sedation, weight gain | Take it at the next scheduled time |
| Abilify | aripiprazole | Aggression, mood stabilization, psychosis, sleep | Sedation, weight gain | Take it at the next scheduled time |
| Geodon | ziprasidone | Aggression, mood stabilization, psychosis, sleep | Sedation, weight gain | Take it at the next scheduled time |
| Lithium, Eskalith, Lithobid | lithium carbonate | Mood stabilization | Sedation, tremor | Take it at the next scheduled time |
| Depakote | divalproic acid | Mood stabilization, epilepsy | sedation | Take it at the next scheduled time |
| Tegretol | carbamazepine | Mood stabilization, epilepsy | sedation | Take it at the next scheduled time |
| Lamictal | lamotrogine | Mood stabilization, epilepsy | sedation | Take it at the next scheduled time |
| Neurontin | gabapentine | Mood stabilization, epilepsy | sedation | Take it at the next scheduled time |
| Topamax | topirimate | Mood stabilization, epilepsy | Sedation, appetite suppression | Take it at the next scheduled time |



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Top Ten Med Management Tips at Camp

Notes for parents...from the desk of Dr. Thurber

1. Have your son or daughter stay on any medications they take during the school year. If it's helpful at home or school, it will be helpful at camp.
2. Don't make major medication changes just prior to camp. The transition to camp is enough of an adjustment without further complications from medication discontinuance or prescription switches. Make any adjustments a few months before opening day.
3. Discuss dosing and the camp's daily schedule with your child's prescribing physician to ensure smooth administration of all medications. The timing of doses at home or school may have to be adjusted at camp because of how the camp's daily schedule works.
4. Clearly label everything with your child's name. Prescription bottles are already labeled, but be sure inhalers, nebulizers, Advair discs, and *everything else* your child brings to camp is clearly labeled with his or her name.
5. Openly discuss any medication your child takes with him or her. A surprising number of children don't understand why they take certain medications and/or why their dosing schedule is designed the way it's designed. Campers' adherence to prescription directions will be much better—and any shame will be greatly reduced—if the prescriber and parents have had honest discussions with the child about the medication's purpose and dosing.
6. Share your child's medical history with the camp's health care providers, both on the camp's health form and in person. Each detail about a child's assessment, diagnosis, and treatment that parents provide to the camp's health care providers puts those professionals in a better position to care for that child. Leaving the camp nurse or doctor in the dark about some medical or psychological condition greatly compromises the quality of care they can provide. Trust that the information you provide will be treated confidentially.
7. Meet the camp nurses and doctors on opening day. It's nice to put a face with a name in case you need to be in contact during the session.
8. Meet your child's cabin leader on opening day. Share helpful information with him or her about your child and his treatment. (Or, if your child travels to camp on a bus, be sure to write a personal letter to the cabin leader about your child and his or her treatment.)
9. Provide the camp with all your contact information (cell, home, work, vacation home, etc.)
10. Relax...camp will take good care of your child.



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Three Important Medication Reminders

Notes for Camp Health Care Providers...from the desk of Dr. Gear

Side Effects

All medications have the potential for side effects. When they occur, side effects typically happen within the first few days of starting a medication or within the first few days after a dosage increase. They are usually transient and resolve after a few days.

If a camper has been doing well on a medication for the several weeks preceding camp, and then develops symptoms (e.g., stomach upset, insomnia) that are included in the potential side effects profile of the medication, then it is important to consider that these new symptoms may not be due to the medication but could be due to other variables (e.g., change in diet, adjustment to camp).

If a side effect does occur and does not resolve, decisions should be made about how to manage those side effects, including whether or not to discontinue the medication. Always consult with your camp's prescriber or the prescribing physician / nurse practitioner / physician's assistant before discontinuing a helpful medication.

Stimulant Medications

Stimulant medication is classified by the Food and Drug Administration as a Category II medication or a "Controlled drug." The reason for this is the relatively high potential for abuse. These include methylphenidate and amphetamine products. These are sold on the street as "speed" and adolescents have been known to trade and sell them. They are abused by being taken in high doses or snorted to get a "rush" and also to increase energy and stay up for longer periods of time. Be sure that campers take stimulant medications at the camp's health center and in the presence of a health care professional. This practice helps prevent abuse or unlawful distribution of these medications.

Because they are classified in this way, most states will only fill a written prescription one month at a time (no refills allowed on the script and they cannot be called in to a pharmacy by the prescribing physician / nurse practitioner / physician's assistant). This results in considerable inconvenience if or when the medication runs out without due preparation. Therefore, the camp's health care providers should coordinate with parents and prescribers to ensure an adequate supply of medication for the duration of the camp session.

Stimulant medications may be stopped abruptly, so withdrawal is not an issue. However, if they are not taken, the symptoms they are meant to address recur almost immediately. As with any prescription at camp, the best practice is to administer stimulant medications as prescribed.

Off-label Prescribing

Most psychotropic medication prescriptions for children and adolescents (with the exception of stimulants) are written "off label." That simply means the medication is not recognized by the FDA for use in children. This does not mean the medication is not safe or has not been studied or used extensively in children. If you have questions about a medication, always consult the prescriber.



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