

Camp Nursing



(An on-line course)

Otterbein College
Department of Nursing

This course explores the role of the camp nurse.

Objectives

Upon completion of this course, the participant will:

- Identify accreditation agencies that impact camps
- Discuss qualifications of the camp nurse
- Identify medical training for the camp nurse
- Identify growth & development issues of children
- List common fears of campers and alleviating strategies
- Discuss appropriate developmental activities in camp
- Identify potential hazards for campers & counselors
- Discuss strategies to manage common camp illnesses
- Discuss management of emergency situations at camp
- Discuss chronic illnesses in children
- Identify management of illness such as diabetes at camp
- Discuss impact of increased activity & changes in diet on child's management of chronic illness at camp
- Using carbohydrate counting-insulin as an example, identify ways that medication may need to be adjusted at camp
- List appropriate interventions for emergencies associated with select chronic illnesses (such as hypoglycemia)

Faculty

Ruth Chavez, MS, RN

Barbara Schaffner, PhD, CNP

Marjorie Vogt, PhD, CNP

Accreditation

This continuing nursing education activity for 8.0 contact hours was approved by the Ohio Nurses Association (OBN-001-91), an accredited approver by

the American Nurses Credentialing Center's Commission on Accreditation.

Approval valid through 3/31/10. ONA 13.637-I

Course Requirements

Participants will receive a CD power-point presentation with audio related to course content. In order to successfully complete the course and receive a certificate of completion, participants must:

- Complete the Post-test (77%)
- Complete the Course Evaluation
- Return the CD

Conflict of Interest

Commercial support is not utilized for this course. Faculty and planners affirm that there are no conflicts of interest .



Camp Nursing

Registration Form

Name: _____

Address: _____

Phone: _____

Email: _____

Date of Birth: _____

Special needs/requirements: _____

Cost: \$100.00

Send this form & check (payable to:)

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