

# OTC Meds in the SCA

Based on a recent discussion on the SCA-Chirurgion mailing list, it would appear that there is significant confusion about how over-the-counter (OTC) medications can be used by Chirurgions in the SCA.

Apparently, it is common in many corners of the Known World for Chirurgions to act as if they don't know that they are providing OTC meds. Scenarios described go something like this:

“Good Chirurgion, dost thou have an aspirin for a headache?”

“M’Lord, I cannot give out medications. However, I think there is something in yon box marked ‘lost-and-found’ that you might find interesting. Please excuse me whilst I examine this tent seam.”

This gives the impression that the Chirurgion is doing something shady and less than legal. Let's see what the Society Chirurgion's Handbook (Jan 2004) has to say about medications:

### ***III.8. Medications***

*No medications of any kind will be administered by any Chirurgion.*

We can't 'administer' medications. This means we cannot give pills, shots, poultices, enemas, or aromatherapy massages. Anything above and beyond letting a gentle choose the medicine and dosage on their own is beyond the scope of practice for the Chirurgion. In a related vein, we cannot give advice on which medications and what dosages to take. This is prescribing and therefore practicing medicine. This is a no-no. The section continues:

*If anyone requests an over-the-counter medication from a Chirurgion, the Chirurgion may provider the container of that medication to the requester and advise the requester to follow the label directions for taking that medication. The requester should dispense the medication themselves. Under no circumstances will a Chirurgion recommend or dispense a medication or recommend a dosage.*

This gives us a mechanism to provide a supply of OTC medications – the patient does all the selecting and procuring of the medication with no input from the Chirurgion on what specific medicine or how much to take.

The rules do allow you to hand them a specifically requested bottle of a specific medication, but you need to be extremely careful about this route. If someone asks for a Tylenol, don't hand them a bottle of aspirin. I prefer to keep a box with all my meds available, and when asked for something, I just hand them the box and say “Help yourself. Make sure you read and follow the directions on the label.”

The medication rule concludes:

*If a Chirurgeon can dispense medication under his or her medical certification or license, such an action does not have the sanction of the SCA and Section III.4 wholly applies.*

This part says that just because you are a pill-pusher in your mundane job, you cannot push pills in the SCA as a Chirurgeon. If you do so, you are practicing strictly under your mundane license.

We are allowed to maintain a supply for the use of guests at events. There is no reason to hide medications or pretend you don't see a person taking meds. Doing so can only give the impression that Chirurgeons are being less than on the level with those we serve.

## Appendix I

### Care and feeding of OTC medications.

1. The downside to the person getting their own medication is a greater likelihood of contaminating the bottle. How many times have you had a sweaty fighter come over, dump out a dozen ibuprofen into their grimy hand, pop two in their mouth and dump the rest back in the bottle? Yuck!

The best way to give out individual doses of medications is to have unit-dose packaging. This is commonly used in hospitals because unused medication can be returned to the pharmacy. Loose, unpackaged pills are considered non-returnable. The downside is the extra packaging costs more money. They are also not as easily obtainable as the el-cheapo bottles of generics from the corner discount store. (Yes, generics are just as good as the brand name when it comes to common OTC meds.)

The proper way to hygienically dispense loose pills from a bulk bottle is to gently shake some pills into the bottle lid. You can then pour back any extra without ever touching a pill. Since we can't do this for the patient, the ideal would be to teach them all how to properly dispense meds. Unfortunately, this is the real world. If someone dumps out a handful, I usually ask them to give me the extras and toss them. Wasteful? Yes, but much cleaner (and safer).

2. Keep meds away from environmental extremes: Too hot, too cold, too moist, or too dry can all be bad. Direct sunlight can damage some medications. A cooler (even without ice) in the shade can be a good place to keep meds.
3. Check the expiration dates before events, and before anyone takes a bottle to get meds. I usually write the expiration date in large numbers on the label with a Sharpie marker.
4. Look at the meds before the event. I've seen bottles of pills that have turned to mush or a solid rock.
5. Always keep the medications in their original containers. Don't mix bottles, even if they are the same med.

6. Use bottles with child-proof caps when available. Make sure you keep a child handy to open them for you. (Just kidding!!!). If someone has difficulty opening a bottle, you can open it for them, then hand them the bottle back to dispense the med.
7. Avoid liquid meds. They are messy, harder to measure out in the field, and less stable in heat and light. Most liquid medications are available in pill or gel-cap forms.

## Appendix II

### Common OTC Meds for an SCA kit

Generic names with example of brand names in parenthesis: These are simply suggestions of the types of medicines that could be commonly requested at events. It is by no means exhaustive, nor should it be considered a 'minimal' list. **There is no requirement that a Chirurgeon provide any medication.**

Pain and fever meds:

- Ibuprofen
- Acetaminophen (Tylenol)
- Aspirin
- Children's Acetaminophen (chewable tabs) Avoid children's aspirin

Cold and Allergy meds:

- Pseudoephedrine (decongestant)
- Diphenhydramine (Benadryl)
- Guaifenesin (Robitussin Gel-caps – almost always has a decongestant mixed in)

Stomach meds:

- Antacid tablets
- Anti-diarrheal (Immodium AD tablets)

Topicals

- 1% Hydrocortisone cream
- Diphenhydramine (Benadryl) cream
- Antibiotic ointment
- Calamine lotion

Sunscreen (not really a med, but something commonly asked for and can prevent the need for coming back to see you later with a nasty burn). Use at least SPF30, UVA and UVB blocker, PABA-free.

DEET (bug repellent) – cream is better than sprays.

Saline (without thimerosal) for contacts and eye-wash.

## Appendix III

### Special Situations

#### Children's medications

Don't give meds to children. Period. By children, I mean anyone under the legal age of majority (usually 18). Anyone below that magic age must have a responsible adult at the event. Let that person obtain the med for the child.

#### Disabled persons

If someone needs help getting a medicine, you can help them get it out of the container. They must tell you what medicine and how many they want. You can read the label to them. Under no circumstances can you suggest a medication or dosage.

## Friar Galen