

## **Ruth Gottscho Dialysis and Children's Kidney Program at Frost Valley YMCA**

[www.frostvalley.org/kidney](http://www.frostvalley.org/kidney)

**Camper Name:** \_\_\_\_\_ **Camp session** \_\_\_\_\_

Your child has been accepted to the Ruth Gottscho Dialysis and Children's Kidney Program at Frost Valley YMCA

**In the month prior to camp**, please have your healthcare team complete the transfer forms and emailed to our coordinator, [mdoyle@montefiore.org](mailto:mdoyle@montefiore.org).

### **Other important notes!**

- We must receive transfer forms in the month of JUNE prior to arrival at camp, along with recent/June labs and all transient dialysis forms.
- Children without complete information will not be accepted. We will also be contacting your healthcare team.
- Children should arrive with a **14-day supply** of all medications, which should be in the original labelled containers or packets from the pharmacy, **NOT pre-poured or in a med box.**
- Please double-check ALL meds before your child boards the bus! Medications and any additional paperwork should be carried in a separate bag and brought immediately to the Wellness Center upon arrival at camp or given to counselors on the bus. We suggest you include an extra copy of insurance or prescription coverage cards in med carrier, along with your child's name and parent's contact info, and a copy of their med list.

The main camp number is **845-985-2291**, then ask for the Gottscho Dialysis Unit **x227**.

We do our best to accommodate every child's needs, so please let us know if you have any special concerns. We hope your child has an enjoyable experience and we rely on your assistance in these preparations. Feel free to contact us if you have questions prior to camp!

Maya Doyle, LCSW, Social Work Coordinator (347) 665 8662

[mdoyle@montefiore.org](mailto:mdoyle@montefiore.org)

Elena Cotillo, RN, Dialysis/Nurse Coordinator

[ecotillo@montefiore.org](mailto:ecotillo@montefiore.org)

Alpa Patel, Camp Registrar (845) 985-2291

[campregistration@frostvalley.org](mailto:campregistration@frostvalley.org)

Shawn Blagmon, Partnerships Director (845) 985-2291

[sblagmon@frostvalley.org](mailto:sblagmon@frostvalley.org)



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**Transfer Summary**

This form must be completed and signed by child's doctor ONE MONTH prior to arrival at camp. Any additional paperwork, and all medications, should be carried in a separate piece of luggage and brought directly to the Wellness Center/Dialysis Unit. Meds from bus campers will be delivered to us from the buses.

**Name of Camper:** \_\_\_\_\_ **Camp Session:** \_\_\_\_\_

Type of Camper:  Hemo  PD  Transplant  CKD >Stage

Kidney Diagnosis/Other Conditions: \_\_\_\_\_

Allergies: \_\_\_\_\_

Bedwetting  GU Catheterization  Injectable Meds (Epogen, Insulin, Growth Hormone)

Vital Signs (date): \_\_\_\_\_

Weight (dry) \_\_\_\_\_ Temperature \_\_\_\_\_ Blood Pressure \_\_\_\_\_ Heart Rate \_\_\_\_\_

For Dialysis: Please sign this form and complete med list. Attach transient dialysis forms, recent flow sheets, recent care plan, Montefiore dialysis consents, and recent labs. All forms available at [frostvalley.org/kidney](http://frostvalley.org/kidney).

|                        |  |
|------------------------|--|
| Dialysis Prescription: |  |
|------------------------|--|

For CKD and Transplant: Please sign this form and complete medication list. Attach recent labs and notes detailing any recent changes, particularly rejection episodes.

Please FAX or email to camp coordinator at 718-652-3136 / [mduoye@montefiore.org](mailto:mduoye@montefiore.org)

AND give family a copy to pack with 14-day supply of ALL medications

Contact us at (718) 655-1120 or (845) 985-2291 x227 if there are any acute changes in child's condition or medications.

**Notes:**

**Medical Clearance: It is my professional opinion that the above named child is medically stable, and suitable to participate in resident camp activities.**

Name & Title: \_\_\_\_\_



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**Reminders for Everyone**

The main camp number is **(845) 985-2291**, then ask for the Gottscho Dialysis Unit (x227).

**Medications**

- Kidney campers must BRING THEIR MEDS to camp. (Do not order meds as other campers do). This includes pills, liquid medications, and any injectables (growth hormone, Epogen, insulin, etc.). Children should arrive with at least a 14-day supply of all medications, which should be in the original labelled containers from the pharmacy, NOT pre-poured.
- Children with unlabeled meds cannot stay at camp!
- We recommend packing in a separate carrier or cooler bag, labelled with their name. Include an extra copy of insurance or prescription coverage cards in the medication carrier, along with child's name and parent's contact info, and a copy of their med list.
- Medications and any related paperwork should be brought immediately to the Wellness Center or given to counselors on your child's bus. Please doublecheck ALL meds before your child boards the bus!
- When your child returns from camp, meds will be packed in their luggage whenever possible, but please check with bus counselors for anything required special arrangements (liquids, cooler bags, etc).
- If you have any questions about bringing/transporting meds to camp, please contact our coordinators ASAP (below)

Maya Doyle, LCSW, Social Work Coordinator  
Elena Cotillo, RN, Dialysis Nurse Coordinator

347-665-8662

[mduoye@montefiore.org](mailto:mduoye@montefiore.org)

[ecotillo@montefiore.org](mailto:ecotillo@montefiore.org)

**We can't wait to see your camper!**