

Central Venous/Indwelling Catheter Form
To be completed by a Medical Professional Only

Camper Name

Date of Birth

Dear Medical Provider,

The camper listed above has applied to attend camp at The Painted Turtle. In order to consider their application we need the following information completed for any camper that has a **central venous catheter or an Indwelling Catheter**.

Please return all completed forms to:

Email: admissions@thepaintedturtle.org or **Fax:** 661-724-1566

If there are any questions about this form or camper, please feel free to contact our Medical Team at (661) 724-1768.

Central Venous/Indwelling Catheter Care Information

Instructions for Catheter Care. Please notify us if there has been a change in this campers line before the session.

Type of Catheter (Single /Double Lumen;
Hickman, Broviac, PICC, Portacath, other)

Date of Insertion:

Specific instructions for Catheter care:

How often is it flushed?:

With what? Amount & Strength?:

How often is dressing changed?

When is cap changed? (Days of week)

Special Instructions:

All necessary supplies (dressing kits, heparin, syringes, access needles, EMLA, etc.) must be sent to Camp with each child. Children will need 1 dressing kit per day and equivalent supplies.

Provider's Signature:

Date