

# Recommended Medications For Survival

Survival medical stockpile and dosage guide - educational reference only.

**Reminder: This content is for educational purposes only. Always consult a licensed healthcare provider before stockpiling. Explain your specific preparedness context to them.**



## Why a Medicine Stockpile Matters

In a prolonged crisis - natural disaster, infrastructure collapse - access to pharmacy may be delayed by weeks. Having the right medications can be the difference between managing calmness and a life-threatening emergency.

## Prescription Medications (Rx)

Adult Stockpile - reference per person/day

### Amoxicillin / Clavulanate (Augmentin)

875/125 mg tablet - 2 tablets/day

HIGH PRIORITY

Broad-spectrum antibiotic - covers bacterial infections, abscesses, respiratory, skin, and ear infections. More effective than plain Amoxicillin. Take with food.

### Ciprofloxacin

500 mg tablet - 2 tab/day for 3-14 days

SITUATIONAL

Reserved for severe GI and urinary tract infections. Also effective for anthrax prophylaxis. Do not use as first choice.

**Doxycycline** 100 mg tablet - 2 tablets/day

HIGH PRIORITY

Covers respiratory infections, vector-borne diseases (Lyme). Take with food and plenty of water. Avoid sun exposure.

**Prednisolone** 5-25 mg tablet - 1-2 tablets/day

SITUATIONAL

Corticosteroid for severe asthma attacks and serious allergic reactions when epinephrine is unavailable. Short course only.

**Tramadol** 50 mg tablet - Up to 4 tablets/day

LAST RESORT

Opioid-type analgesic for severe pain management when OTC options are insufficient. Risk of dependence - strict rationing. Not for children.

### Pediatric Stockpile - under 12 years (weight-based)

**Amoxicillin / Clavulanate (Augmentin)**

45-90 mg/kg/day - Split into 2 doses

MUST-HAVE

Weight-based dosing is critical. Use lower range for mild and upper range for severe. Available as suspension.

**Ondansetron (Zofran)** 2-8 mg (weight-based) - Every 8 hours

HIGH PRIORITY

Anti-nausea medication. Critical for gastroenteritis to allow rehydration. Wait 15-30 min after dose before fluids.

**Prednisolone (Dispersible)**

1-2 mg/kg/day - For 3-5 days

SITUATIONAL

Used for severe asthma and serious allergies. Dispersible form preferred for children. Calculate by exact weight.

# Over-the-Counter (OTC) Medications

Adult Stockpile - reference per person/day

**Ibuprofen 400 mg** 3-4 tablets/day with food

**MUST-HAVE**

Anti-inflammatory and fever. Effective for muscle pain. Apply Rule of Three: stock 3x estimate. Avoid with stomach ulcers.

**Paracetamol 500 mg** 3-4 tablets/day (max 4g/day)

**MUST-HAVE**

First-line for pain and fever. Safe for those with GI issues. Stacks well with Ibuprofen when alternated.

**Loperamide (Imodium) 2 mg** 2-4 tabs/day (max 8mg/day)

**MUST-HAVE**

Anti-diarrhoeal - critical in crisis to prevent dehydration. Do NOT use if blood in stool or high fever present.

**Cetirizine 10 mg** 1-2 tablets/day

**MUST-HAVE**

Second-generation non-drowsy antihistamine for allergies, stings, hives. Safe for prolonged use.

**Aspirin 75-300 mg** 1 tab/day or stat dose in cardiac MI

**SITUATIONAL**

Primarily for cardiac emergency first response (chew 300mg immediately). Never give to anyone under 12 (Reye system).

**Oral Rehydration Salts (ORS)** 1 sachet per 1L water

**MUST-HAVE**

WHO-formula superior to plain water. Essential for any vomiting/diarrhoea scenario. Stock generously.

## Critical Safety Rules for Children

- \* NO ASPIRIN < 12y (Reye)
- \* NO LOPERAMIDE < 6y (Bowel side effects)
- \* NO IBUPROFEN < 6 months
- \* Always dose by weight, not age
- \* Use oral syringes

**Paracetamol (Weight-Based)** 10-15 mg/kg per dose

**MUST-HAVE**

Most important fever medication for children. Always use oral syringe for accurate measurement.

**Ibuprofen (Weight-Based)** 5-10 mg/kg per dose

**MUST-HAVE**

Anti-inflammatory for high fevers. Do not use if chickenpox suspected.

**ORS (Weight-Based)** 50-100 mL/kg over 4 hours

**MUST-HAVE**

If vomiting, give Ondansetron first. Sip slowly by spoon or syringe.

# Pediatric Dosage Reference Tables

## Table A - Common Medications by Weight

WEIGHT	PARACETAMOL	IBUPROFEN	ORS VOL
5 kg	60-75 mg	25-50 mg	250-500 ml
10 kg	120-150 mg	50-100 mg	500-1000 ml
20 kg	240-300 mg	100-200 mg	1-2 L
30 kg	360-450 mg	150-300 mg	1.5-3 L
40 kg+	500 mg	400 mg	As tolerated

## Table B - Ondansetron for Vomiting

Wait 15-30 min after dose before fluids.

WEIGHT (KG)	DOSAGE (MG)	FREQUENCY
8-15 kg	2 mg	Every 8 hours
15-30 kg	4 mg	Every 8 hours
Over 30 kg	8 mg	Every 8 hours

## Personal Chronic & Prescription Medications

Chronic meds are far more critical than OTC meds listed above. Stockpile first.

<b>Levothyroxine</b>	Hypothyroidism - missing doses causes fatigue/cognitive impairment.
<b>Insulin</b>	Diabetes - requires cold storage. Critical to plan conditions.
<b>Hypertension</b>	Untreated high blood pressure during stress is a serious risk.
<b>Asthma / COPD</b>	Always have at least 2 spare inhalers per member.
<b>Severe Allergy</b>	Carry two pens. Prednisolone is secondary only.

# Beyond Medication: Advanced First Aid Kit (IFAK)

While medications cover internal issues, trauma requires mechanical intervention. Stop deep hemorrhages.

## Tourniquet (CAT)

Stop arterial limb bleeding.

## Israeli Bandage

All-in-one pressure dressing.

## Packed Gauze

Wound packing for deep trauma.

## Trauma Shears

Quickly remove clothing.

## Mylar Blanket

Prevents shock/hypothermia.

## NPA Airway

Ensures open airway.

## Nitrile Gloves

Pathogen protection.

## Duct Tape

Securing splints.

## Strategic Survival Principles

### Storage

Airtight, dark, < 25C.

### Syringes

Essential for peds dosing.

### Rotation

Inspect every 12 months.

### Rehydration

Wait 15-30m after Zofran.

### Rule of 3

Stock 3x what you expect.

### Security

Lock controlled meds.

### Documentation

Keep laminated health cards.