

El Paso Veterans Treatment Court  
Program  
Participant's Handbook



**Presiding Judges**

**Honorable Patricia C. Baca**

**Honorable William E. Moody**

**346<sup>th</sup> State District Court**

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## **I. What is the El Paso Veterans Treatment Court Program?**

The El Paso Veterans Treatment Court Program (hereinafter EPVTC) is modeled after the Houston Veterans Court and the El Paso Drug Courts.

It represents a fresh and innovative approach to diverting Veterans and active service members from incarceration into treatment. EPVTC relies on the cooperation and collaboration between the criminal justice system, our Courts', Veteran's Affairs, community agencies and the offenders. The Court requires the Judge, prosecutor and defense counsel to collaboratively pursue a path that will help solve the offender's issues.

The El Paso Veterans Treatment Court handles misdemeanor and felony cases. These cases can be transferred from the various Courts to the EPVTC.

## **II. Who Can Be a Part of Veterans Treatment Court?**

Not everyone can be a part of the EPVTC. A defendant is eligible to participate in a the EPVTC if the District Attorney's office consents to their participation and if the court in which the criminal case is pending finds that the defendant: 1) is a veteran or current member of the United States armed forces, including the reserves, national guard or state guard; who 2) suffers from a brain injury, mental illness, or mental disorder including PTSD, TBI, or was a victim of military sexual trauma that occurred during or resulted from the defendant's military service.

If you choose to participate in the EPVTC after you are approved for admission, you will be instructed to appear in the Court for an Entry of Plea.

When you arrive at Court for your Entry of Plea, either your Attorney, or a Public Defender will advise you of your rights and discuss the EPVC rules and requirements with you. After you plea into the EPVTC, the Public Defender will represent you throughout your participation in the EPVTC until successful graduation or termination.

## **III. Participant Understanding**

As participant in the EPVTC, you will be required to follow the instructions and conditions given to you in court by the Judge, and you will comply with the Participant Contract developed by the EPVTC Team. The purpose is to help you:

- 1) Get the treatment you have rightfully earned and deserved,
- 2) Help you get treatment quickly and without barriers,
- 3) Stay engaged in treatment, and

4) Help you regain control of your life so you can enjoy the quality of life and become a productive citizen. It is important that you review *all* of the information included in your Participant Contract with your attorney. You are advised that this is a voluntary program and you may opt out at any time. It is the policy of the EPVTC that a termination hearing will be promptly scheduled and held.

**IV. What are the Expectations of the Participant?**

The EPVTC Team will develop treatment recommendations based on an assessment of your needs for treatment, services, resources, housing, VA benefits & services and other needs.

To participate in the EPVTC, you will agree to sign all necessary releases, comply with treatment recommendations, and comply with all terms and conditions of probation. You must agree to sign the Participant Phase Contracts, which are an agreement between you and the program.

**V. How Long is the Term of El Paso Veterans Treatment Court Program?**

The EPVC is a minimum of eighteen (18) months and maximum three (3) year commitment; however, the amount of time you spend in the EPVTC is determined by your plea agreement and your individual progress in treatment. While participating in the EPVTC, the Judge and representatives of the EPVTC Team will closely monitor your participation and progress in the recommended and agreed upon treatment.

If you are on probation, you will be expected to meet with your Community Supervision Officer (CSO) and follow all of the terms and conditions of your sentence of probation. Discharge, termination or involuntary withdrawal from the program will result in a sentence in accordance to the full range of punishment for your offense. Participant's successful completion of the program will receive a certificate of completion and given public recognition during graduation.

**VI. What's in it For Me?**

*Services*

The EPVTC Team will help you access identified treatment, counseling, supportive housing and other services; services are contingent upon your specific needs, and treatment recommendations.

*Recognition of Progress*

As you progress through treatment and your involvement with the program, your achievements will publicly be recognized by the Judge and the Team. We will celebrate with you your accomplishments.

## *Opportunities*

The program offers you a chance to address your problems or issues and to avoid incarceration on your current charge(s). You will have the opportunity to move forward in your life and potentially increase quality of life for you and your family. The EPVTC Team is there to assist you and wants to see you succeed. If you take advantage of the assistance offered, you will discover many ways to make a better life for yourself. Change is never easy; it will take commitment, dedication, self-control, perseverance and hard work. The EPVTC Team will provide you with the support, opportunity, assistance and referrals necessary to help you begin making positive changes in your life.

## **VII. What are the Rules and Phases of the El Paso Veterans Treatment Court Program?**

To remain in the EPVTC, you must follow all recommendations made by the Team and the rules contained in your Participant Phase Contracts.

The EPVTC program is a five (5) phase, highly structured and supervised program using primarily outpatient treatment. Treatment is designed to last 12 months, followed by 6 months of community transition (aftercare). Your progress through the treatment phases will depend upon your completion of treatment goals and compliance with drug testing and other program rules. Less sanctions often means faster promotions. Participants must also make significant progress in treatment and other program requirements to be promoted. Each phase consists of specified treatment objectives, therapeutic and rehabilitative activities and specific requirements for “promotion” into the next phase. The required 6 months of aftercare is a supervision phase where you can practice your sobriety without active treatment in place. It is six months (6) of clean time to be eligible to graduate.

- **Phase I “Stabilization and Orientation” / Minimum of 4 weeks**

Participant must complete treatment orientation including but not limited to any other treatment as required. In Phase I, you will attend court once per week. The EPVTC is held on Wednesday afternoons at 4:00pm in the **346<sup>th</sup> District Court, room 701.**

- **Phase II “Intensive Treatment” / Minimum of 8 weeks**

Participant must complete including but not limited to any and all treatment as required. During Phase II, you will attend court once every two (2) weeks.

- **Phase III “Recovery Skills Development” / Minimum of 20 weeks**

Participant must complete including but not limited to any and all treatment as required. In Phase III, court attendance will be scheduled once every three (3) weeks.

- **Phase IV “Practical Application” / Minimum of 16 weeks**

Participant must complete including but not limited to any and all treatment as required. In Phase IV court attendance will be scheduled once every four (4) weeks.

- **Phase V “Community Transition/Aftercare”/Minimum 24 weeks**

Treatment is not required in the aftercare phase but may be ordered by the Court and/or requested by the participant. In Phase V, court attendance will be scheduled once every four (4) weeks. Participant must meet minimum sobriety requirements and complete the volunteer service requirements in order to be eligible for graduation.

### **VIII. Report to your Community Supervision Officer (CSO)**

Your participation in the EPVTC includes reporting to your CSO who will provide an orientation and will discuss your rules and conditions of probation, including: curfew, employment, law enforcement contact and change of address. You must provide verification of employment to your CSO and also bring it to court. The CSO will make random field and home visits to assess and observe your home and verify your job. Drug testing may be conducted randomly during home visits or scheduled during office visits or court appearances.

### **IX. Appear in Court as Scheduled**

You will be required to appear in front of the EPVTC Judge and Team on a regular basis; an initial weekly appearance will be required. The Judge and the EPVTC Team will be given progress reports regarding your attendance and participation in your treatment program and the other components of your treatment plan --housing, VA benefits, etc. The Judge and Team will discuss your progress and address any problems that you may have. As you make progress in treatment, your court appearances and treatment appointments will be reduced.

### **X. Follow Your Treatment Plan**

Your treatment plan will include some or all (not inclusive) of the following components (understand that your treatment recommendation may change as your treatment needs change):

- Abstinence from illegal drugs, alcohol, and Spice/K-2 or any other smoking herbal blend

- Medication compliance
- Participation in a substance abuse treatment program
- Participation in a behavioral health treatment program
- Participation in a self-help group or program
- Intensive or Supportive services
- Supported or Structured housing
- Education services
- Employment or Vocational Rehabilitation
- Regular appointments with a VA case manager
- Regular appointments with a psychiatrist
- Psycho-social or Recreational program

**XI. Specific rules about areas of your treatment plan are outlined below**

***Substance Abuse Treatment***

If your treatment plan requires that you participate in a substance abuse treatment program, you must follow through with recommendations. While in treatment, your treatment provider will regularly report to the EPVTC regarding your attendance, level of participation and overall compliance with the program. You must attend all scheduled treatment appointments and follow all rules of your treatment program to include random drug testing. Failure to attend scheduled appointments with your treatment provider, will require you to appear in court the first Wednesday following your missed appointment.

***Mental Health Treatment***

All participants of the EPVTC will be evaluated for mental illness. If mental health treatment is recommended, you must attend all scheduled appointments and follow the rules and policy of the program. Your mental health treatment provider will regularly report your status and progress. Failure to attend scheduled appointments with your treatment provider, will require you to appear in court the first Wednesday following your missed appointment.

***Community Supervision Officer (CSO)***

You will have a Community Supervision Officer (CSO). The CSO will visit with you weekly and monitor your overall progress. Your CSO may visit you at your

home, place of business or treatment program facility. Your CSO will report back to the Court on progress, concerns and accomplishments outside of treatment. Your CSO will assist you in obtaining a variety of community services. The information is used to assist you to stay on the path of treatment and/or recovery.

### *Housing*

Some participants of the EPVTC will be required to live in a particular type of housing or in a particular housing facility. If you are required to live in a specified residence such as a VA Domiciliary or a halfway house, you must reside there and follow all of the housing provider's rules.

## **XII. Policy Pertaining to the EPVTC Participants and the use of Prescribed Addictive Substance**

The expectation is that participants in the EPVTC will remain abstinent from all non-prescribed mood-altering substances while enrolled in the program. It is understood that there may be circumstances in which a participant may need to take addictive substances for medical or psychiatric reasons.

In order to ensure that participants remain in compliance with EPVTC and treatment expectations, the EPVTC requires that ***prior to*** filling the prescription and/or taking the medication the participants do the following:

Inform their treatment provider.

Inform the CSO.

Participants with a substance abuse diagnosis must obtain a note(s) from your prescribing physician(s) verifying their knowledge of your active abuse or dependence diagnosis and your enrollment in an abstinence-based chemical dependency treatment program as well as the EPVTC.

Sign a consent form in accordance with the requirements of 42 Code of Federal Regulations Part 2 which authorizes the release of patient identifying information between their CSO, treatment provider(s), physician, physician assistance or nurse practitioner who prescribes the drug or substance to the patient.

Should information be received from the physician which supports the participant's continued use of a control substance, the CSO will consult with the prescribing professional to verify their knowledge and awareness of the individual's history of chemical dependence, and if the prescribing professional is unaware of the individual's history of chemical dependence, inform the prescribing professional accordingly; and after the required information is received, if the prescribing professional believes that the individual should be permitted to continue to use the drug or substance prescribed, the individual must be permitted to continue to use the drug or substance. If there is insufficient

information to support continued use, the participant must safely cease use of that substance(s) and seek alternative treatment options.

### **XIII. What is Meant by Infractions and Sanctions?**

While in the EPVTC, if you fail to comply with your treatment recommendations, program regulations or commit a legal offense, you will be sanctioned. The EPVTC applies a Sanction Matrix for infractions and sanctions that include but are not limited to:

#### ***INFRACTIONS***

- Missed treatment appointments
- Missed probation appointments
- Missed court appearances
- Abuse of drugs and/or alcohol
- Refusal to provide urine screens
- Positive urine screens
- Failure or refusal to take prescribed medications
- Violation of rules of the treatment program
- Violation of rules of housing provider, including curfew
- Threatening behavior, including verbal threat of violence
- Other non-compliance with treatment recommendations
- Violation of probation terms and conditions

#### ***SANCTIONS***

- Assign you to write an essay
- Verbal warning
- Increase frequency of urine screens
- Increase frequency of court appearances
- Increase frequency of probation reporting

- Increase 12 step or support groups meetings
- Loss of privileges at treatment
- Loss of privileges at housing
- Serving time in the El Paso County Jail
- Impose a curfew
- Community service
- Restarting your current phase

The EPVTC Team will respond to all infractions. The Team wants you to succeed; however, you must be motivated, be in the center of your own treatment or recovery and also want yourself to succeed. Sometimes the Team will require you to increase your treatment related activities or will direct you to accept a change in your level of care after consulting with your treatment team. Other examples of responses to infractions include but not limited to the following:

- Journaling, Letter to the Court
- Mandatory AA/NA/support group attendance
- Mandatory group attendance (Anger Management, Depression, DBT, etc.)

#### **XIV. What is Meant by Rewards?**

While in the EPVTC, if you comply with your treatment recommendations, the terms of the Participant's Contract and live a crime-free lifestyle, you will be publicly acknowledged and rewarded in a number of different ways. Rewards can include but not limited to:

- Public recognition
- Fewer court appearances
- Fewer office visits with CSO
- Phase promotion
- Referrals to vocational and/or educational services
- Immediate release from status hearing
- Less frequent drug testing

- Gift certificates (upon availability)
- Graduation

**XV. What Else is Expected of you?**

Other expectations of the EPVTC include:

**SHOW UP, BE COMPLETELY HONEST, TRY HARD AND BE ACCOUNTABLE FROM THE START.**

Treat others with the deepest respect; this includes the opinions and feelings of other participants and the EPVTC Team.

Verbal or physical threats to anyone will not be tolerated.

Any inappropriate behavior will be immediately reported to the EPVTC and may result in a severe sanction or your termination from the program.

Avoid all drugs, related activities and the use of alcohol

You must not possess, sell or use alcohol or illegal drugs

Any relapse involving drug and/or alcohol must be reported to your treatment provider(s) and the EPVTC immediately.

Be law-abiding

You must refrain from any further violation of the law.

Additional offenses may result in additional charges and your termination from the program.

**XVI.**

**MY IMPORTANT CONTACT INFORMATION**

My Attorney \_\_\_\_\_

Phone Number \_\_\_\_\_

My Community Supervision Officer CSO Victor Martinez

Phone Number 771-8500

My VA Treatment Provider \_\_\_\_\_

Phone Number \_\_\_\_\_

My AA/NA Sponsor/Mentor \_\_\_\_\_

Phone Number \_\_\_\_\_

My Housing Provider \_\_\_\_\_

Phone Number \_\_\_\_\_

Veterans Court Program Yvonne Whitaker

Phone Number 546-2119 Ext. 4478

Veterans Justice Outreach \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

## **PARTICIPANT AGREEMENT AND PERFORMANCE CONTRACT**

I wish to participate in the El Paso Veterans Treatment Court Program (EPVTC). Before I may be admitted into the program, I \_\_\_\_\_ (print name), understand and agree that I will assume certain obligations and responsibilities. I also understand and agree that I will have to follow orders given to me by the Presiding Veterans Court Judge, Veterans Court personnel, Veterans Court CSO and other people involved in the Veterans Court Program.

### **MY RESPONSIBILITIES AND DUTIES ARE AS FOLLOWS:**

I must remain drug/ alcohol free and refrain from Spice/K-2 or any other smoking herbal blend.

I must not consume or purchase alcoholic beverages or illegal drugs.

I must not visit places where alcohol or illegal drugs are sold, dispensed, or used.

I understand that I am not to go into bars, liquor stores, taverns, clubs, parties or places where alcohol is the main item for sale or consumption.

I must attend all court sessions as ordered.

I must not attend any required activity or program if I am under the influence of alcohol or any illicit drug.

I must not attend any required activity or program while in possession of an illegal drug or weapon of any kind, including firearms and knives.

I must contact my CSO as directed.

I must submit to any rehabilitative, medical, psychological, psychiatric, educational, vocational, alcohol or other drug treatment program, including residential treatment as directed by the EPVC.

I must submit to any rehabilitative, medical, psychological, psychiatric, educational, vocational, alcohol or other EPVC aftercare program.

I understand that, if required to attend residential treatment, I may have to remain in custody until such time as the treatment facility admits me.

I will promptly and truthfully answer all inquiries directed to me by all EPVTC Team members.

I will comply with all lawful directives issued by the EPVTC or its representative.

I will not perpetrate any falsehood or deception, or misrepresent any truth to any branch of government or a government representative.

I must obey all laws.

I understand that if I engage in any criminal act, I may be removed from the EPVTC program and prosecuted for any new charge(s).

I must not commit acts of violence or threats of violence. I must not engage in verbal violence.

I must submit to urinalysis or drug testing upon request of the EPVTC.

I understand that if, at the time of request, I refuse, alter, or fail to provide a specimen for urinalysis, the EPVC will consider my action to constitute a positive test result and I will be sanctioned.

I will comply with all program requirements, including, but not limited to:

Being on time and attending all counseling sessions.

Being on time and attending all EPVC appearances.

Participating in all counseling sessions.

Completing all counseling assignments.

Making satisfactory progress in the program as measured by phase requirements.

I shall notify my treatment provider and CSO of any drugs prescribed for me by a physician before I begin taking them.

If I have a substance abuse diagnosis, I must provide written notification to my physician that I am in the EPVC and am subject to random drug testing.

I will keep all appointments and be on time as required of me by the EPVC and all program resource providers in the areas of:

Treatment programs;

Counseling programs;

Educational programs;

Vocational programs;

Day reporting centers;

To my Probation Officer/;

Community service hours; and

Other reasonable rehabilitation requirements, including, but not limited to aftercare.

I understand that I must exhibit courtroom behavior and obey courtroom rules, including but not limited to, the following:

I will not talk in the courtroom during EPVC proceedings.

I will dress appropriately for court:

I will keep my shirttails tucked in.

I will not wear any tank tops, muscle shirts, crop-tops, or shirts with obscene words or pictures.

I will not wear any clothing that displays any drug related symbols or themes.

I will not wear baggy or sagging pants, including jeans that sag below waistline.

I will wear my shirts buttoned.

I will not wear any hats, caps or bandanas in the courtroom.

I will not wear any gang attire of any kind.

I will turn my telephone or pager off before entering the courtroom.

I will not wear shorts in the courtroom.

I will avoid obscene or abusive language.

I will avoid racial, ethnic, social, sexist, and / or sexual slurs and derogatory language.

I will stand on my own two feet and not lean against the Judge's bench.

I will not bring food or beverages into the courtroom.

I will remain in the courtroom until the EPVTC Judge dismisses me.

I will not curse or use profanity of any kind in the courtroom.

I will speak clearly and directly when addressing the EPVTC Judge, the District Attorney, or any other officer of the Court.

I will be on time and attend all scheduled court appearances.

When I enter the courtroom, I will immediately take a seat.

I will not leave Texas or the county in which I reside without written permission from the EPVTC.

I will not change my address, telephone number or employment without first consulting with appropriate EPVTC personnel.

I understand that I must be employed, in school, or in treatment care as required by the EPVTC Judge.

If I am physically able, I will remain gainfully employed.

I understand that I must maintain employment unless I am involved in an approved educational/vocational program or inpatient treatment program.

I understand that if I am unemployed, I will be required to actively search for employment and provide verification of my search to the Judge.

I will maintain full-time employment unless the EPVTC gives me permission to work part-time.

If I change jobs, I must tell the EPVTC within 48 hours

I understand that if I fail to obtain employment or remain unemployed I may be removed from the program.

I understand that if I am not in school and /or fail to remain in school, I may be removed from the program.

I will allow any representative of the EPVTC to visit my home, place of employment, or any other location I am located at any time.

I agree to allow myself to be searched at any time or place by the EPVTC or representative(s) of the EPVTC or any law enforcement agency.

I agree to allow my vehicle, residence and / or property under my control searched if the EPVTC Judge or EPVTC representative(s) deems it necessary.

I will not associate with persons having a criminal record or on probation/parole UNLESS the EPVTC approves of me associating with the individual before contact takes place.

I will not act as a Confidential Informant (CI) for any law enforcement agency.

I agree to sign all authorizations for release of information requested by the EPVC and / or treatment provider(s) and / or other resource providers.

I realize that my authorization of release of information is necessary to allow cross reporting of my compliance with program conditions.

I understand that I cannot revoke my authorization for release of information until I complete or am dismissed from the EPVTC.

I understand that my failure to sign an authorization for release of information may make me ineligible for participation in the program.

I agree that, if *I fail to keep any program appointment* (in the absence of an explanation satisfactory to my Treatment Provider or a member of the EPVTC Team), my treatment provider or a member of the EPVTC Team may immediately make necessary adjustments prior to staffing with the EPVTC.

I agree that, if *I fail to comply with any reasonable requests or requirements* of my treatment provider, a member of the EPVTC Team, and / or resource providers, my treatment provider or a member of the EPVTC Team may immediately make necessary adjustments prior to staffing with the EPVTC.

I agree that, if I *test positive for any non-prescribed drug and / or alcohol* my Treatment Provider or a member of the EPVTC Team may immediately make necessary adjustments prior to staffing with the EPVTC.

If I do not agree that I committed an alleged breach of this agreement, I shall continue to follow program guidelines until the next EPVC docket; I also agree to continue to obey all lawful orders of my treatment provider or members of the EPVC Team.

While I understand that I have the right to be heard at the next EPVTC Docket, I am aware that the EPVTC can support and in some cases impose additional sanctions in the event of a finding that this agreement has been violated.

I acknowledge that I have been informed that if the EPVTC, in its sole discretion, finds that I willfully failed to comply with any treatment and / or rehabilitation requirements, I may be revoked from the program and the Court may proceed to impose sentence.

I agree to pay all fees, court costs, treatment fees, restitution costs, victim compensation, attorney fee, mental health assessment fee, and laboratory fee as ordered by the Court.

I understand that all of my payments are to be made by cash, cashier's check or money order made out to the West Texas Community Supervision and Corrections Department (WTCSCD).

I will not own, possess, or carry any type of weapon, including firearms.

I waive extradition to the State of Texas from any jurisdiction in or outside the United States where I may be found.

I will not contest any effort by any jurisdiction to return to the State of Texas.

I will perform any and all community service hours including a required EPVTC community service project as directed by the EPVTC.

If, 1) the court sanctions me by sending me to jail, or 2) I am arrested on a EPVTC warrant, or 3) I am arrested on a new offense, I **must** notify the jail of my mental health diagnosis if applicable, and my current medications.

If I do not, 1) take my medication or 2) inform the jail of my mental health diagnosis and / or current medications, **I place my recovery and health at risk and violate the conditions of my probation.**

I agree to the special condition(s) as follows:

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I understand if I fail to follow the terms of my agreement, the EPVTC may impose sanctions, add or change assigned tasks or conditions, and / or modify or change my treatment program. These changes may include, but are not limited to:

Increased frequency of urinalysis testing.

Increased frequency of court appearances.

Require attendance at additional support meetings.

Order me to write an essay on a recovery or EPVTC related topic.

Impose participation in community service hours.

Incarcerate me in the El Paso County Jail.

Re-start my current phase.

Increase my level of supervision.

Re-evaluate my treatment plan.

Issue a Bond Forfeiture or Alias Warrant (BFAW) for me.

Terminate my status as a program participant.

Revoke my deferred adjudication or community supervision, allowing the court to then convict and sentence me within the full range of punishment.

I understand and agree to remain under the supervision of the Veteran's Treatment Court Program UNTIL FURTHER ORDERS OF THIS COURT.

I acknowledge, by my signature below, that I have read and understood my responsibilities and duties as listed above. I agree to abide by each and every rule.

## Approved Over The Counter (OTC) Medication List

The following medications are approved for Veterans Treatment Court participants to take without prior permission from their treatment provider and/or probation officer.

**ONLY THE VETERANS PROGRAM DIRECTOR CAN APPROVE MEDICATION. PLEASE CONTACT YOUR VETERANS PROGRAM COURT FOR ALL MEDICATION APPROVALS!!** These medications must be taken at the appropriate dosage listed on the drug's label or a positive urine test could result. **DO NOT TAKE MORE THAN THE DOSAGE INDICATED ON THE LABEL!**

If you have any questions, please contact your probation officer and/or treatment provider for clarification. **EACH DRUG LISTED BELOW MUST BE TAKEN AS LISTED AND WITHOUT ANY OTHER ADDITIVES (i.e. NO TYLENOL COLD OR TYLENOL NIGHTTIME).**

**PAIN:** (none of the following can be the PM formula)  
Acetaminophen 500 mg, 1 or 2 tablets every 4-6 hrs  
Ibuprofen 200-800mg, every 4-6 hours as needed  
Aspirin  
Excedrin Migraine

**ANTACIDS:**

Zantac  
Pepcid  
Prilosec  
Tums/Roloids

**COUGH/COLD:**

Delsym (non-alcoholic/pediatric)  
Mucinex (cannot be D or DM)

**ALLERGIES:** (none of the following can be the D or DM formula)

Claritin  
Allegra  
Benadryl

**STOMACH:**

Mylanta  
Milk of Magnesia  
Pepto Bismol

**FLU SYMPTOMS:**

Theraflu  
Alka-Seltzer

**JOINT PAIN:**

Tylenol Arthritis  
Ben Gay muscle rub  
& thermal patches  
Icy Hot muscle rub &  
thermal patches

**VITAMINS:**

Multivitamins  
Prenatal vitamins