

#### Restore the body. Refresh the spirit.

His Hands has been serving the medical needs in Cedar Rapids since 1992. As a faith based clinic, we offer spiritual support to our patients as well as health services. We are completely free: no patient pays anything to receive the services they need. His Hands relies on the financial and in-kind support of individuals, volunteers, churches, and fundraising events.





#### **Our Mission**

To glorify God by meeting the **physical**, **emotional**, and **spiritual** needs of those without adequate resources.

www.hishandsclinic.org 319-862-2636

# **Unaccepted Medications**

Unfortunately, we cannot accept any controlled substances or narcotic pain medications, and most Attention Deficit Disorder medications.

#### Please do not 'round up' the following:

- ▲ Liquid medications of ALL types
- ▲ Hydrocodone combinations
- ▲ Oxycodone and Oxycodone combinations
- ▲ Zolpidem and other controlled substance sleep medications
- ▲ Morphine
- ▲ Lorazepam
- ▲ Alprazolam
- ▲ Clonazepam

- ▲ Adderall
- ▲ Amphetamine Salts
- ▲ Amphetamine
- ▲ Dextroamphetamine
- ▲ Ritalin
- ▲ Methylphenidate
- Fentanyl patches or other narcotic pain patches
- ▲ Codeine and codeine combinations
- ▲ Concerta

#### Home Disposal of These Medications

The GOAL is to make these meds *un-usable*.

- **1. Liquids:** mix with shredded paper, kitty litter, or sawdust and then throw in the garbage.
- 2. Tablets and Capsules:
  - ▲ Mix with *coffee grounds* or *kitty litter* and throw away, OR
  - ▲ Put in a ziplock bag, add *water* or *vinegar* until the pills are covered, reseal the bag, and throw it into the garbage.

Be sure that your destroyed medications kept away from kids and pets!!!





# Let us help you dispose of these!



# Medication Round Up

PILL DRIVE & FUNDRAISER

### Safer World, Safer Families.

When you look into your medicine cabinet, you see your medical history. Small bottles half-filled with potent medicine and elixirs are no good to anybody - but what to do with them? Like nuclear waste, nobody wants the leftovers back.

Most people toss unwanted medications in the garbage or flush them down the toilet; but these medicinal compounds filter into the groundwater and end up in our lakes and streams. Their affect on the environment, plants, and marine life is still unknown.

A greater threat, right in our backyard, is abuse. Even here in Cedar Rapids, more teens are abusing prescription drugs. According to the Iowa Youth Survey, 16% of Linn County 11th graders see little risk in using medication prescribed for someone else. 21% of 6th graders responded the same.

By participating with our annual Medication Roundup and fundraiser, we are removing elements of temptation and danger for our families.

# **Common Questions**

#### What happens to my donated meds?

This program is for **disposal** of your unused medications. His Hands contracts with a medication disposal company for our general use – your medications will be sent to them for disposal.

#### Will my information be protected?

Protection of your medical information is our top priority. We need to know what medication is being donated for proper disposal. If you wish, you may scratch out the name on your bottle. The medication is locked during transportation to keep our volunteers and your meds—safe.

I missed the Round Up at my Church. Can I still participate?

Yes! Simply bring your medications to the clinic. Please do not take them to your church's office.



# **How to Participate**

- 1. Fill the collection bag with your excess medications.
- 2. Do not remove medication labels—we need to identify your donated pills. If you do not want your name identified, simply scratch out or scribble over your name. Leave the medication information intact so that we can properly dispose of it. Your identity will be protected.
- 3. Give a donation in the envelope provided! ©
- 4. Bring this collection bag and give it to the volunteer at the medication collection bin. They will make sure it is taken to His Hands Free Clinic for proper disposal.





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We appreciate your tax deductible gift!

Please fill out the below form if you would like a tax receipt or other information about His Hands.

Naı	me
Ad	dress
	yStateZip
	one (home)
	(cell)
Em	ail:
	<b>Details</b> Please make this donation <i>in memory of</i> or <i>in honor of</i> :
	I want to give on a monthly basis at: \$
	(to give automatically from your bank account, please contact the office.)
	Please send me information about adding His Hands Ministries to my will.
	Please send me information about volunteering:
	☐ Medical
	☐ Chiropractic
	☐ Dental
	☐ Pharmacy
	☐ Administrative
	☐ Other
	Please contact me about your services.
	Please send me your e-newsletter. My email address is above.