PHF
DRUG FORMULARY
2016

Date Approved: _____

The Santa Barbara Psychiatric Health Facility's Formulary is the publication that outlines the medications that have been approved for use. This document is divided into three sections (Alphabetical Listing, Therapeutic Classification/Cost Index, and Alphabetical Index) to facilitate usage.

1. ALPHABETICAL LISTING:

This section lists all the medications alphabetically by all the medications alphabetically by generic (nonproprietary) name. Trade (proprietary) names and abbreviations are listed in parenthesis after the generic name. In this section, all approved dosage forms and strengths are also listed

2. THERAPEUTIC CLASSIFICATION/COST INDEX:

This section groups the medications by therapeutic class. The cost of bulk items is listed per unit (tab, cap, gram, ml). The prices will fluctuate drastically, so this only serves as a guide. For example:

Mood Stabilizers	
Carbamazepine (Tegretol)	$$$
Divalproex (Depakote)	$$ - $$$
Lithium Carbonate (Eskalith, Lithonate, Lithobid)	$
Lithium Citrate (Cibalith-S)	$$
Valproate (Depakene)	$$

3. ALPHABETICAL INDEX:

The Alphabetical Index lists all the medications alphabetically by trade name, generic name, and abbreviations.

INTRODUCTION

On August 22nd, 2016, The Pharmacy and Therapeutics Committee, or P&T Committee, approved the Santa Barbara Psychiatric Health Facility (PHF) Formulary.

This *Formulary* is not intended to be a reference for drug use. Rather it is to serve the clinician as a listing of drugs, which are approved for use within the Department. Approval of a drug entity for inclusion in the Formulary does not imply approval of all formulations containing that entity.

Two copies of the *36th Edition Nursing 2016 Drug Handbook* by *Wolters Kluwer Publishing* will be available at the facility for reference for more detailed drug information. One copy of this handbook should be available at all times in the on site drug room. This information is to be utilized by on staff nurses and medical staff.

If a member of the medical staff desires to have a drug added to the *Formulary*, he or she should complete and submit the appropriate form (New Drug Application, see Appendix 1) to Dr. Leslie Lundt, Medical Director and chairwoman of the Pharmacy and Therapeutics Committee. Requests received at least 30 days prior to the quarterly meeting will be considered at that meeting. Requests received less than 30 days before the meeting will not be considered until the following meeting. Clinicians and facilities are encouraged to submit supporting documents with their formulary request. The Committee will evaluate the submission's appropriateness based upon the efficacy and safety of the proposed drug compared with existing formulary items and cost effectiveness of the new agent. When appropriate, the Committee will add the new drug or replace old agents in the same pharmacological/therapeutic category with the new agent.

The *Formulary* has incorporated TALL MAN characters to assist in distinguishing look-alike drug names as suggested by FDA.

For Example:

Chlorpromazine ***ChlorproMAZINE***

When a patient's condition requires a drug not listed in the *Formulary*, limited quantities can be obtained for use in that particular patient. However, documentation (Non-Formulary Drug Justification Form, see Appendix 2) should be submitted to the facility Medical Director and the Nursing Supervisor where it will be reviewed by the Committee to assure reasonable compliance with the *Formulary*.

If facility clinicians have topics for committee consideration, these requests should be sent to Dr. Leslie Lundt at llundt@co.santa-barbara.ca.us to be added on Committee agenda.

_____

Approved by: Dr. Leslie Lundt
Medical Director
P&T Committee Chairwoman

08/22/2016
Date

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PROCEDURE FOR ADDITION OF DRUGS TO THE FORMULARY

A physician, nurse or pharmacist desiring that a new drug be added to the *Formulary* should submit a new drug application (see appendix 1) to the facility's Committee. If approved, the new drug application should be forwarded to the Committee. The following information should accompany the application:

(1) published articles in the biomedical literature that substantiate the efficacy and safety of the proposed new drug;
(2) advantages of the proposed new drug compared with similar therapeutic agents presently in the *Formulary*;
(3) drugs in the *Formulary* which the proposed agent will replace or supplement;
(4) cost effectiveness data.

New drug applications should be received by the committee thirty days prior to the committee's scheduled meeting date. Applications received after this time will be considered at the next meeting.

The Nursing Supervisor will assign a committee member to present recommendations concerning the proposed to new drug to the Committee. The committee may decide to approve or deny the drug's inclusion, approve the drug on a trial basis, or postpone a decision until the following meeting of the committee. The committee, at its discretion, may approve a drug's inclusion in the *Formulary* subject to specific limitations (e.g., recommendation by qualified specialists or consultants) .f

PSYCHOTROPIC DOSAGE GUIDELINES

The following is a list of psychotropic drug dosages. These guidelines are not intended to establish rigid standards of treatment but to assist in monitoring the pharmacotherapy of the patient. Furthermore, guidelines for special patient populations are not intended to be absolute. For those medications that have a well-established therapeutic serum range, the dosage should be based upon the desired serum range and response rather than a specific maximum administered daily dosage. These guidelines should be used in conjunction with sound clinical judgment and the prescriber's experience.

Different dosage requirements are usually necessary in the geriatric population. Since there is no standard definition for "geriatric", the arbitrary age of 65 has been chosen to identify geriatric patients. In general, geriatric patient dosing guidelines should reflect a "go low, go slow" approach. Standard reference books should be consulted if needed for appropriate dosages when treating this population.

In general, when treating patients with intellectual disabilities, a "go low, go slow" approach is recommended when increasing or decreasing psychotropic medication. The use of psychotropic medication can be therapeutic and empowering for a person with both intellectual disabilities and mental illness. The primary goal is to obtain an accurate diagnosis of behavioral and psychiatric symptoms so that the patients' treatment is appropriate. A functional analysis by a psychologist is vital prior to starting any psychotropic medication except in an emergency.

ADULT TREATMENT OF BEHAVIORAL EMERGENCIES INTRAMUSCULAR SHORT-ACTING AGENTS

DRUG	MAXIMUM SINGLE DOSE (MG)	MINIMUM INTERVAL (HRS)	MAXIMUM TOTAL DOSE PER DAY (MG)
IM ARIPiprazole[1]	15	2	30
IM chlorproMAZINE[2]	100*	2	400
IM diphenhydrAMINE[3-4]	100	1	400
IM Haloperidol[2]	10	1	40
IM hydrOXYzine[3,4]	100	1	400
IM LORazepam[2,6]	4	1	12
IM OLANZapine[7]	10	2	30
IM Ziprasidone[8]	10	2	40
	20	4	40

*Initial dose is not recommended to be greater than 50mg if tolerability is unknown
^ Use doses exceeding 10 mg daily with caution

1. *Product Information: Abilify®, aripiprazole injection. Otsuka Pharmaceutical Co. Ltd., Tokyo, Japan, 2014.*
2. *Allen MH, Currier GW, Carpenter D, et al. Treatment of Behavioral Emergencies Expert Consensus Guideline Series. Journal of Psychiatric Practice 2005;11 [Suppl 1]:1-108.*
3. *Lexicomp® Online (cited 10-27-15)*
4. *Micromedex® 2.0 [electronic version]. Truven Health Analytics, Greenwood Village, CO, USA (cited 10-27-15)*
5. *Product Information: Fluphenazine hydrochloride injection. App Pharmaceuticals LCC, Schaumburg, IL, 2010.*
6. *Lukens TW, Wolf SJ, Edlow JA, et al. Clinical Policy: Critical Issues in the Diagnosis and Management of the Adult Psychiatric Patient in the Emergency Department. From the American College of Emergency Physicians Clinical Policies Subcommittee (Writing Committee) on Critical Issues in the Diagnosis and Management of the Adult Psychiatric Patient in the Emergency Department. Ann Emerg Med 2006;47:79-99.*
7. *Product Information: Zyprexa®, olanzapine intramuscular injection. Eli Lilly and Company, Indianapolis, IN, USA, 7-23-15.*
8. *Product Information: GEODON® ziprasidone mesylate IM injection. Pfizer,Inc, New York, NY, 8-20-15*

ANTIPSYCHOTICS

Suggested Maximum Dose
(mg/day)

Drug	Adult
ARIPiprazole (Abilify)	30
Asenapine (Saphris)	20
chlorproMAZINE (Thorazine)	2,000
cloZAPine (Clozaril, Fazaclo, Versacloz) -	900
fluPHENAZine(oral) (Prolixin)	60
Haloperidol (oral) (Haldol)	40
Iloperidone (Fanapt)	24
Loxapine (Loxitane)	250
Lurasidone (Latuda)	160
OLANZapine (ZyPREXA, ZyPREXA Zydis)	30
OLANZapine pamoate (ZyPREXA Relprevv)	300 per 2 weeks 405 per 4 weeks
Paliperidone (Invega) Paliperidone palmitate (Invega Sustenna)	12 234 per 4 weeks
Perphenazine (Trilafon)	64
QUEtiapine (SEROquel)	800

Thiothixene (Navane)	60
Ziprasidone (Geodon)	240

[1] A boxed warning has been added to advise clinicians of prolongation of the QTc interval

[2] Risperidone doses >6 mg/day have increased risk of EPS

[3]Bipolar Disorder

[4]Tourette's

Disorder ID – insufficient data

Lit – Literature Support

Drug	Therapeutic reference range/ Recommended drug concentration
Clozapine	350 – 600 ng/mL
Fluphenazine	1 – 10 ng/mL
Haloperidol	1 – 10 ng/mL
Olanzapine	20 – 80 ng/mL
Perphenazine	0.6 – 2.4 ng/mL

ANTIDEPRESSANTS

Suggested Maximum Dose (mg/day)

Drug	Adult
Amitriptyline (Elavil)	300[6]
Citalopram** (celeXA)	40
clomiPRAMINE (Anafranil)	250
Desipramine (Norpramin)	300*[1]
Doxepin (SINEquan)	300[7]
DULoxetine (Cymbalta)	120
Escitalopram (Lexapro)	20
FLUoxetine** (PROzac)	80
fluvoxaMINE (Luvox)	300
Imipramine (Tofranil)	300*[2]
Mirtazapine (Remeron)	45
Nortriptyline (Pamelor, Aventyl)	150*[3]
PARoxetine (Paxil)	60
Phenelzine (Nardil)	90
Sertraline** (Zoloft)	200
traZODone (Desyrel)	600
Venlafaxine (Effexor)	375

*Plasma concentration monitoring is recommended if these doses are exceeded

**Dose varies with diagnosis

[1]Desipramine Therapeutic = 100-300 ng/mL

[2]Imipramine Therapeutic Concentration = 150-250 ng/mL

[3]Nortriptyline Therapeutic Concentration = 50-150 ng/mL

[4] For ADHD

[5] For sedative hypnotic

[6]Amitriptyline Therapeutic Conc. = 120-250 ng/mL

[7]Doxepin Therapeutic Concentration = 150 ng/mL

Lit – Literature Support

ID = Insufficient data to suggest support regarding its efficacy or to provide maximum dose guidelines in this patient group

MOOD STABILIZERS

Suggested Maximum Dose
(mg/day)

Drug	Therapeutic Serum Concentration	Adult
carBAMazepine (TEGretol, TEGretol XR, Carbatrol)	4 - 12 mcg/mL Adol – Max 12 mcg/ml	1,600
lamoTRIgine (LaMICtal)	nd	• With VPA 100 • Mono-therapy 200 • With EIAED 400
Lithium (Lithobid, Eskalith)	Adult – 0.6-1.5 mEq/L Elderly – 0.6-1.0 mEq/L Child – 0.6 mEq/L Adol – Max 1.2 mEq/L	3,600 (<65 years old) 1,800 (≥65 years old)
OXcarbazepine (Trileptal)	nd	2,400
Valproic Acid, Valproate, Divalproex (Depakene, Depakote)	50 - 125 mcg/mL Adol – Max 125 mcg/ml (Lit)	60 mg/kg

* Plasma concentration monitoring is recommended if these doses are exceeded
nd = not yet determined
# - Maximum daily dose typically determined by drug serum concentration and individual patient tolerability.
Lit – Literature support
EIAED – Enzyme inducing anti-epileptic drugs (e.g., carbamazepine, phenobarbital, phenytoin, primidone)
VPA – valproic acid-valproate

STIMULANTS

Suggested Maximum Dose
(mg/day)

Drug	Adult
Methylphenidate, immediate release (Ritalin, Methylin, Metadate	60
Methylphenidate, sustained release (Ritalin SR, Concerta, Metadate CD)	72 (Concerta)

MISCELLANEOUS DRUGS USED FOR PSYCHOTROPIC PURPOSES

Suggested Maximum Dose
(mg/day)

Drug	Adult
atoMOXetine (Strattera)	100
cloNIDine (Catapres)	0.4
guanFACINE (Tenex)	4
Naltrexone (ReVia)	200
Propranolol (Inderal)	160 (anxiety)***

*** Maximum dose has not been determined for aggression or self-injurious behavior (SIB).

For ADHD

* Lit – Literature support

ANXIOLYTICS

Drug	Suggested Maximum Dose (mg/day)	
	Under 65 years (mg/day)	Over 65 years (mg/day)
ALPRAZolam (Xanax)	4	2
(exception: for panic disorder)	10	N/A
chlordiazePOXIDE (Librium)	100*	40*
Clorazepate[1] (Tranxene)	60	30
Diazepam[1] (Valium)	60	20
LORazepam (Ativan)	10*	3*
Oxazepam (Serax)	90	60

*Larger doses may be necessary in some cases of alcohol-substance withdrawal.
[1] Long acting benzodiazepines are not recommended in the geriatric population.
^ doses up to 20 mg have been used to treat seizure disorders

HYPNOTICS

Suggested Maximum Dose (mg/day)

Drug	Under 65 years (mg/day)	Over 65 years (mg/day)
diphenhydrAMINE (Benadryl)	300	300
hydrOXYzine (Atarax, Vistaril)	400	300
Temazepam (Restoril)	30	15
traZODone (Desyrel)	200	150
Triazolam (Halcion)	0.25	0.125
Zaleplon (Sonata)	10	5
Zolpidem (Ambien)	10 (Males) 5 (Females)	5

NR – Not Recommended
ID – Insufficient data to suggest support regarding its efficacy or to provide maximum dose guidelines for this patient population.

Drugs with Special Considerations

Drug	Guidelines for Use
cloZAPine (Clozaril, Fazaclo, Versacloz)	1) For use in patients with refractory schizophrenia or schizoaffective disorder [defined as failure on two
Esomeprazole (NexIUM)	Patients who have Medicare Part D coverage for esomeprazole
Iloperidone (Fanapt)	1) For use in patients that have failed on two antipsychotics
Lisdexamfetamine	1) Continued therapy on admission; or
OLANZapine pamoate (ZyPREXA Relprevv)	Written approval by the PHF Medical Compliance with the Risk Evaluation and Mitigation Strategy (REMS)
Olmesartan (Benicar)	Prior failure to ACE inhibitor therapy due to intolerable side effects

THERAPEUTIC SERUM CONCENTRATIONS OF SOME ANTICONVULSANTS

Drug	(mcg/mL)
carBAMazepine (TEGretol, TEGretol XR, Carbatrol	4-12
PHENobarbital (Luminal)	15-40
Phenytoin (Dilantin)	10-20
Valproic Acid, Valproate, Divalproex (Depakene, Depakote, Depakote ER)	Seizure Disorder: 50-100
	Bipolar Disorder: 50-125
	Aggression: not established
	Depakote ER
	Seizure Disorder: 50-100
	Bipolar Disorder: 85-125

Serum concentrations are useful in the evaluation of therapy. However, they should only be considered as a guide to treatment, not the sole criterion for determination of dosage regimens.

The following anticonvulsants do not have an established therapeutic serum concentration range. Routine monitoring of these anticonvulsants is not warranted as serum concentrations cannot be correlated with clinical efficacy.

cloBAZam
Gabapentin
lamoTRIgine
LevETIRAcetam
OXcarbazepine
Pregabalin
tiaGABine
Topiramate

*Source: Lexicomp® Online (cited 10-28-15)

Acetaminophen (Tylenol)
Tablet: 325 mg, 500 mg

Acetaminophen-Codeine C-III
Tablet: #2: Acetaminophen 300 mg-Codeine 15 mg
#3: Acetaminophen 300 mg-Codeine 30 mg

Activated Charcoal
Oral suspension, activated: 15 g, 30 g, 40 g, 120 g, 240 g

Acyclovir (Zovirax)
Capsule: 200 mg

Albuterol (Proventil, Ventolin,)
Aerosol, inhalation, chlorofluorocarbon free: 90 mcg/dose

Albuterol-Ipratropium (Combivent,)
Inhaler, oral: Albuterol 103 mcg-Ipratropium 18 mcg

Allopurinol (Zyloprim)
Tablet: 100 mg, 300 mg

ALPRAZolam (Xanax, Xanax XR) C-IV
Tablet: 0.25 mg, 0.5 mg, 1 mg, 2 mg
Tablet, sustained release: 0.5 mg, 1 mg, 2 mg, 3 mg

Aluminum Chloride Hexahydrate (Drysol)
Liquid

Aluminum Hydroxide (Amphojel)
Suspension, oral: 320 mg/5 mL, 600 mg/5 mL

Aluminum Hydroxide-Magnesium Hydroxide-Simethicone (Mylanta) Liquid, oral: containing Aluminum Hydroxide-Magnesium Hydroxide-Simethicone

Amantadine
(Symmetrel)
Capsule: 100 mg

Amitriptyline (Elavil)
Tablet: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg

amLODIPine (Norvasc)
Tablet, extended release: 2.5 mg, 5 mg, 10 mg

Amoxicillin (Amoxil, Polymox)
Capsule: 250 mg, 500 mg
Amoxicillin-Clavulanate (Augmentin)
Tablet : 500 mg (contains Clavulanate 125 mg)
875 mg (contains Clavulanate 125 mg)
Ampicillin (Polycillin, Omnipen)
Capsule: 250 mg, 500 mg Capsule

Antipyrine-Benzocaine (Allergen, Auralgan)
Solution, otic

ARIPiprazole (Abilify, Abilify discmelt, Abilify Maintena)
Injection: 9.75 mg
Injection, extended release: 300 mg, 400 mg
Tablet: 2mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg
Asenapine (Saphris)
Tablet, sublingual: 5 mg, 10 mg

Aspirin
Tablet, chewable: 81 mg
Tablet, enteric coated: 81 mg, 162 mg, 325 mg, 500 mg, 650 mg

Aspirin-Acetaminophen-Caffeine (Excedrine Migraine)
Tablet: Aspirin 250 mg-Acetaminophen 250 mg-Caffeine 65 mg

Atenolol (Tenormin)
Tablet: 25 mg, 50 mg, 100 mg

atoMOXetine (Strattera)
Capsule: 10 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg, 100 mg

atorvaSTATin (Lipitor)
Tablet: 10 mg, 20 mg, 40 mg, 80 mg

Azithromycin (Zithromax)
Tablet: 250 mg

Bacitracin (Baciguent)
Ointment, topical: 500 units/g

Baclofen (Lioresal)
Tablet: 10 mg, 20 mg

Benazepril (Lotensin)
Tablet: 5 mg, 10 mg, 20 mg, 40 mg

Benzonatate (Tessalon
Perle) Capsule:
100 mg, 200 mg

Benztropine (Cogentin)
Injection: 1 mg/mL
Tablet: 0.5 mg, 1 mg, 2 mg

Birth Control Agents
commercially available

Bisacodyl (Dulcolax)
Tablet, enteric coated: 5 mg

Bismuth Subsalicylate (Pepto-Bismol, Bismatrol, Kaopectate)
Tablet, chewable: 262 mg

Bromocriptine (Parlodel)
Capsule: 5 mg
Tablet: 2.5 mg

Budesonide-Formoterol (Symbicort)
Aerosol, inhalation, oral: 160 mcg/4.5 mcg, 80 mcg/4.5 mcg

buPROPion (Budeprion, Wellbutrin, Zyban)
Tablet: 75 mg, 100 mg
Tablet, sustained release: 100 mg, 150 mg, 200 mg
Tablet, extended release: 150 mg, 300 mg

Calcium Carbonate-Vitamin D (Os-Cal + D,
Calcium 600 mg-Vitamin D 200 units

Captopril (Capoten)
Tablet: 12.5 mg, 25 mg, 50 mg, 100 mg

carBAMazepine (TEGretol, TEGretol XR, Carbatrol)
Capsule, extended release: 100 mg, 200 mg, 300 mg
Tablet: 200 mg
Tablet, chewable: 100 mg
Tablet, extended release: 100 mg, 200 mg, 400 mg

Carbidopa-Levodopa (Sinemet)
Tablet: Carbidopa 10 mg-Levodopa 100 mg
Carbidopa 25 mg-Levodopa 100mg
Carbidopa 25 mg-Levodopa 250 mg
Tablet, Sustained release: Carbidopa 25 mg-Levodopa 100 mg
Carbidopa 50 mg-Levodopa 200 mg

Carvedilol (Coreg)
Tablet: 3.125 mg, 6.25 mg, 12.5 mg, 25 mg

cefTRIAxone (Rocephin)
Powder for injection: 250 mg, 500 mg, 1 g,

Cephalexin (Keflex)
Capsule: 250 mg, 500 mg

Cetirizine (ZyrTEC)
Tablet: 5 mg, 10 mg

Cetirizine-Pseudoephedrine (ZyrTEC D)
Tablet, 12hr: Cetirizine 5 mg-Pseudoephedrine 120 mg

chlordiazePOXIDE (Librium) - oral form only - C-IV
Capsule: 5 mg, 10 mg, 25 mg

Chlorpheniramine (Chlor-Trimeton, Teldrin)
Tablet: 4 mg, 8 mg, 12 mg

chlorproMAZINE (Thorazine)
Tablet: 10 mg, 25 mg, 50 mg, 100 mg, 200 mg

Chlorthalidone (Hygroton)
Tablet: 15 mg, 25 mg, 50 mg, 100 mg

Citalopram (celeXA)
Tablet: 10 mg, 20 mg, 40 mg

Clarithromycin (Biaxin)
Tablet, film coated: 250 mg, 500 mg

Clindamycin (Cleocin, Cleocin T)
Capsule: 150 mg, 300 mg
Lotion: 1% [10 mg/mL]

cloBAZam (Onfi) C-IV
Tablet: 5 mg, 10 mg, 20 mg

clomiPRAMINE (Anafranil)
Capsule: 25 mg, 50 mg, 75 mg

clonazePAM (KlonoPIN) C-IV
Tablet: 0.5 mg, 1 mg, 2 mg
Tablet, oral disintegrating: 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg

cloNIDine (Catapres)
Patch, transdermal: 1, 2, and 3 (0.1, 0.2, 0.3 mg/day, 7 day duration)
Tablet: 0.1 mg, 0.2 mg, 0.3 mg

Clopidogrel (Plavix)
Tablet: 75 mg

Clorazepate (Tranxene) C-IV
Tablet: 3.75 mg, 7.5 mg, 15 mg

Clotrimazole (Lotrimin, Mycelex, Gyne-Lotrimin, Fungoid)
Cream, topical: 1%
Cream, vaginal: 1%, 2%

cloZAPine (Clozaril, Fazaclo, Versacloz)
Tablet: 25 mg, 50mg, 100 mg, 200mg
Tablet, oral disintegrating: 12.5 mg, 25 mg, 100 mg, 150 mg, 200 mg

Cyproheptadine (Periactin)
Tablet: 4 mg

Darifenacin (Enablex)
Tablet: 7.5 mg, 15mg

Desipramine (Norpramin,)
Tablet: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg

Desmopressin (DDAVP, Stimate)
Tablet: 0.1 mg, 0.2 mg

Desonide (Desowen, Lokara, Tridesilon)
Cream: 0.05%
Ointment: 0.05%

Dexamethasone (Decadron)
Tablet: 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg

Dextromethorphan
Liquid, oral: 3.5 mg/5 mL, 7.5 mg/5 mL, 10 mg/15 mL, 15 mg/5 mL
Liquid, oral, sustained release: 30 mg/5 mL

Diazepam (Valium, Diastat) C-IV
Gel, rectal: 2.5 mg, 10 mg, 20 mg
Injection: 5 mg/mL
Tablet: 2 mg, 5 mg, 10 mg

Dicyclomine (Bentyl)
Capsule: 10 mg
Injection: 10 mg/mL
Tablet: 20 mg

Digoxin (Lanoxin)
Tablet: 125 mcg, 250 mcg,

Diltiazem (Cardizem)
sustained release:
120 mg, 180 mg, 240 mg, 300 mg
Tablet: 30 mg, 60 mg, 90 mg, 120 mg

diphenhydrAMINE (Benadryl)
Capsule: 25 mg, 50 mg
Cream, topical: 2%
Injection: 50 mg/mL

Disulfiram (Antabuse)
Tablet: 250 mg, 500 mg

Divalproex (Depakote, Depakote ER)
Capsule, sprinkles: 125 mg
Tablet, delayed release: 125 mg, 250 mg, 500 mg
Tablet, extended release: 250 mg, 500 mg

Docusate Sodium (Colace)
Capsule: 50 mg 100 mg, 250 mg

Docusate Sodium-Sennosides (Peri-Colace)
Tablet: Docusate 50 mg-Sennosides 8.6 mg

Donepezil (Aricept)
Tablet: 5 mg, 10 mg, 23 mg
Tablet, oral disintegrating: 5 mg, 10 mg

Doxepin (SINEquan, Zonalon)
Capsule: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg
Concentrate, oral: 10 mg/mL

Doxycycline (Vibramycin)
Capsule: 50 mg, 100 mg

DULoxetine (Cymbalta)
Capsule, delayed release: 20 mg, 30 mg, 60 mg

Emollient Ointment (Lanolin, Aquaphor)
Ointment, topical

Enalapril (Vasotec)
Tablet: 2.5 mg, 5 mg, 10 mg, 20 mg

EPINEPHrine (Adrenalin)
Auto-injector: 1:2000 [0.15 mg], 1:1000 [0.3 mg]

Escitalopram (Lexapro)
Tablet: 5 mg, 10 mg, 20 mg

Esomeprazole (NexIUM)
Capsule: 20 mg, 40 mg

Famotidine (Pepcid)
Tablet: 10 mg, 20 mg, 40 mg

Felodipine (Plendil)
Tablet, extended release: 2.5 mg, 5 mg, 10 mg

Fenofibrate (Tricor)
Tablet: nanocrystallized: 48 mg, 50 mg, 145 mg, 160 mg

Ferrous Sulfate (Feosol, Fer-In-Sol) [contains 20% elemental iron]
Tablet: 160 mg [32mg], 300 mg [60 mg], 325 mg [65 mg]

Fexofenadine (Allegra)
Tablet: 30 mg, 60 mg, 180 mg

Fexofenadine-Pseudoephedrine (Allegra-D)
Tablet, extended release: 60 mg Fexofenadine-120 mg Pseudoephedrine

Finasteride (Proscar)
Tablet: 5 mg

Fluconazole (Diflucan)
Tablet: 100 mg, 150 mg, 200 mg, 250 mg, 500 mg

FLUoxetine (PROzac)
Capsule: 10 mg, 20 mg
Tablet: 10 mg, 20 mg

fluPHENAZine (Prolixin)
Injection, as decanoate: 25 mg/mL
Tablet: 1 mg, 2.5 mg, 5 mg, 10 mg

Fluticasone (Flonase, Flovent)
Aerosol, inhalation, oral: 44 mcg/actuation, 110 mcg/actuation, 220 mcg/actuation
Inhalation, nasal: 50 mcg/actuation

Fluticasone-Salmeterol (Advair)
Powder, inhalation: fluticasone 100 mcg/ salmeterol 50 mcg
fluticasone 250 mcg /salmeterol 50 mcg
fluticasone 500 mcg /salmeterol 50 mcg

fluvoxaMINE (Luvox)
Tablet: 25 mg, 50 mg, 100 mg

Folic Acid (Folvite)
Tablet: 0.4 mg, 0.8 mg, 1 mg

Furosemide (Lasix)
Tablet: 20 mg, 40 mg, 80 mg

Gabapentin (Neurontin)
Capsule: 100 mg, 300 mg, 400 mg
Tablet: 400 mg, 600 mg, 800 mg

Galantamine (Razadyne)
Capsule, 24hr: 8 mg, 16 mg, 24 mg
Tablet, film coated: 4 mg, 8 mg, 12 mg

Gemfibrozil (Lopid)
Tablet, film coated: 600 mg

Glucagon
Powder for injection: 1 mg (Approved 8/22/16)

Glucose
Gel, oral
Tablet

glyBURIDE (Micronase, DiaBeta)
Tablet: 1.25 mg, 2.5 mg, 5 mg
Tablet, micronized: 1.5 mg, 3 mg, 6 mg

Griseofulvin (Fulvicin, Grifulvin V, Gris-Peg)
Tablet: 500 mg
Ultramicrosize:
Tablet: 125 mg, 250 mg

guaiFENesin (Robitussin Mucinex)
Caplet, sustained release: 600 mg
Liquid, oral: 100 mg/5 mL, 200 mg/5 mL
Tablet: 100 mg, 200 mg, 400mg
Tablet, sustained release: 600 mg

guaiFENesin-Codeine (Robitussin AC) C-V
Syrup: guaiFENesin 100 mg-codeine 10 mg per 5mL

guaiFENesin-Dextromethorphan (Robitussin DM)
Liquid, oral: guaiFENesin 100 mg-Dextromethorphan 10 mg per 5 mL,
guaiFENesin 100 mg-Dextromethorphan 15 mg per 5 mL,
guaiFENesin 66.7 mg-Dextromethorphan 6.7 mg per 5 mL
Tablet, sustained release: guaiFENesin 300 mg-Dextromethorphan 30 mg

guaiFENesin-Pseudoephedrine (Mucinex D)
Tablet: guaiFENesin 600 mg-Pseudoephedrine 60 mg

guanFACINE (Tenex)
Tablet: 1 mg, 2 mg

Haloperidol (Haldol)
Concentrate, oral: 2 mg/mL
Injection, as decanoate: 50 mg/mL, 100 mg/mL
Injection, as lactate: 5 mg/mL
Tablet: 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg

hydrALAZINE (Apresoline)
Tablet: 10 mg, 25 mg, 50 mg, 100 mg

Hydrochlorothiazide (HydroDIURIL, Esidrix)
Capsule: 12.5 mg
Tablet: 12.5 mg, 25 mg, 50 mg, 100 mg

Hydrocortisone
Tablet, oral: 5 mg, 10 mg, 20 mg
Hydrocortisone, topical (Lanacort, Corticaine):
Cream, topical: 0.5%, 1%, 2.5%
Lotion, topical: 0.5%, 1%, 2%, 2.5%
Ointment, topical: 0.5%, 1%, 2.5%

Hydrogen Peroxide
Solution, topical: 3%

hydrOXYzine (Atarax, Vistaril)
Capsule: 25 mg, 50 mg, 100 mg
Injection, as hydrochloride: 25 mg/mL, 50 mg/mL
Tablet: 10 mg, 25 mg, 50 mg

Ibuprofen (Motrin)
Tablet: 200 mg, 400 mg, 600 mg, 800 mg

Iloperidone (Fanapt)
Tablet: 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg

Imipramine (Tofranil)
Tablet: 10 mg, 25 mg, 50 mg

Influenza Virus Vaccine (Fluzone, Fluviron)
Injection

Insulin, Aspart (NovoLog)
Injection: 100 units/mL

Insulin, Glargine (Lantus)
Injection: 100 units/mL

Ipratropium (Atrovent)
Inhalation: 18 mcg/actuation
Solution, nasal: 0.03%, 0.06%

Isoniazid (INH)
Tablet: 100 mg, 300 mg

Isosorbide Mononitrate (Imdur, ISMO, Monoket) Tablet, extended release: 30 mg, 60 mg, 120 mg

Ivermectin (Stromectol)
Tablet: 3 mg

Ketoconazole (Nizoral)
Cream, topical: 2%
Shampoo: 2%
Tablet: 200 mg

Ketorolac (Toradol)
Injection: 15 mg/mL, 30 mg/mL

Ketotifen (Zaditor)
Solution, ophthalmic: 0.025%

Labetalol (Normodyne)
Tablet: 100 mg, 200 mg, 300 mg

Lactobacillus Acidophilus (Lactinex, Bacid)
Capsule

Lactulose (Enulose)
Syrup: 10 g/15 mL

lamoTRIgine (LaMICtal)
Tablet: 25 mg, 100 mg, 150 mg, 200 mg
Tablet, dispersible/chewable: 2 mg, 5 mg, 25 mg

Lansoprazole (Prevacid)
Capsule, enteric coated granules: 15 mg, 30 mg

LevETIRAcetam (Keppra)
Tablet: 100 mg, 250 mg, 500 mg, 750 mg, 1,000 mg

Levofloxacin (Levaquin)
Tablet: 250 mg, 500 mg, 750 mg

Levothyroxine (Synthroid, Levoxyl)
Tablet: 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 150 mcg
175 mcg, 200 mcg, 300 mcg

Lidocaine (Lidoderm, Xylocaine)
Patch: 5%

Lisinopril (Prinivil, Zestril)
Tablet: 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg

Lithium Carbonate (Eskalith, Lithonate, Lithobid)
Capsule: 150 mg, 300 mg, 600 mg
Tablet: 300 mg
Tablet, controlled release: 450 mg
Tablet, slow release: 300 mg

Lithium Citrate
Syrup: 300 mg/5 mL

Loperamide (Imodium)
Capsule: 2 mg
Tablet: 2 mg

Loratadine (Claritin)
Tablet: 10 mg

Loratadine-Pseudoephedrine (Claritin D)
Tablet, sustained release: loratadine 5mg - pseudoephedrine 120 mg (12hr),
loratadine 10mg – pseudoephedrine 240 mg (24hr)

LORazepam (Ativan) C-IV
Injection: 2 mg/mL, 4 mg/mL
Tablet: 0.5 mg, 1 mg, 2 mg

Loxapine (Loxitane)
Capsule: 5 mg, 10 mg, 25 mg, 50 mg

Lurasidone (Latuda)
Tablet: 20 mg 40 mg, 60 mg, 80 mg, 120 mg

Magnesium Citrate
Solution, oral: 300 mL

Magnesium Hydroxide (Milk of Magnesia)
Liquid, oral: 400 mg/5 mL
Liquid, oral, concentrate: 1200 mg/5 mL
Tablet, chewable: 311 mg

Meclizine (Antivert, Bonine)
Tablet: 12.5 mg, 25 mg, 50 mg

medroxyPROGESTERone (Provera)
Injection, suspension: 100 mg/mL, 150 mg/mL, 400 mg/mL
Tablet: 2.5 mg, 5 mg, 10 mg

Melatonin NUTRITIONAL SUPPLEMENT
Capsule: 10 mg
Tablet: 1 mg, 3 mg, 5 mg, 10 mg
Tablet, sublingual: 5 mg
Tablet, sustained release: 3 mg

Meloxicam (Mobic)
Tablet: 7.5 mg, 15 mg

Memantine (Namenda)
Tablet: 5 mg, 10 mg

metFORMIN (Glucophage, Glucophage XR)
Tablet: 500 mg, 850 mg, 1000 mg
Tablet, extended release: 500 mg, 750 mg

Methimazole (Tapazole)
Tablet: 5 mg, 10 mg

Methocarbamol (Robaxin)
Tablet: 500 mg, 750 mg

Methyldopa (Aldomet)
Tablet: 125 mg, 250 mg, 500 mg

Methylphenidate, immediate release (Ritalin, Methylin, Metadate) C-II
Tablet: 5 mg, 10 mg, 20 mg

Methylphenidate, sustained release (Ritalin SR, Concerta, Metadate CD) C-II
Tablet, extended release: 18 mg, 36 mg, 27 mg, 54 mg
Tablet, sustained release: 20 mg

methylPREDNISolone (Medrol)
Tablet: 4 mg

Metoclopramide (Reglan)
Tablet: 5 mg, 10 mg

Metoprolol (Lopressor, Toprol XL)
Tablet: 25 mg, 50 mg, 100 mg
Tablet, extended release: 25 mg, 50 mg, 100 mg, 200 mg

metroNIDAZOLE (Flagyl)
Tablet: 250 mg, 500 mg

Miconazole (Monistat)
Cream, topical: 2%
Cream, vaginal: 2%

Mirtazapine (Remeron, Remeron SolTab)
Tablet: 7.5 mg, 15 mg, 30 mg, 45 mg
Tablet, rapid dissolving: 15 mg, 30 mg, 45 mg

Misoprostol (Cytotec)
Tablet: 100 mcg, 200 mcg

Modafinil (Provigil)
Tablet: 100mg, 200mg

Montelukast (Singulair)
Tablet, chewable: 4 mg, 5 mg
Tablet: 10 mg

Multivitamin

Multivitamin-Minerals
Tablet: each tablet contains a minimum of USDA requirements

Mupirocin (Bactroban)
Cream, topical: 2%
Ointment, intranasal: 2%
Ointment, topical: 2%

Nabumetone (Relafen)
Tablet: 500 mg, 750 mg

Naloxone (Narcan)
Injection: 0.4 mg/mL, 1 mg/mL

Naltrexone (Trexan, ReVia)
Tablet: 50 mg

Naphazoline (Naphcon, AK-Con)
Solution, ophthalmic: 0.012%, 0.1%

Naproxen (Naprosyn)
Tablet: 220 mg, 250 mg, 275 mg, 375 mg, 500 mg, 550 mg
Tablet, delayed release: 500 mg

Neomycin
Tablet: 500 mg

Neomycin-Polymyxin B-Bacitracin (Triple Antibiotic Ointment)
Ointment, topical: Neomycin 3.5 mg-Polymyxin B 5000 units-Bacitracin 400 units

Neomycin-Polymyxin B-Hydrocortisone (Cortisporin)
Solution, otic: Neomycin-Polymyxin B-Hydrocortisone
Suspension, otic: Neomycin-Polymyxin B-Hydrocortisone

Nicotine (Nicoderm, Habitrol, ProStep, Nicotrol, Nicorette)
Patch, transdermal:
Habitrol: 21 mg/day, 14 mg/day, 7 mg/day
Nicoderm: 21 mg/day, 14 mg/day, 7 mg/day
Nicotrol: 15 mg/day (gradual release over 16 hours)
Pieces, chewing gum, as polacrilex: 2 mg/square, 4 mg/square

Nitrofurantoin (Macrodantin)
Capsule, macrocrystal: 25 mg, 50 mg, 100 mg
Capsule, macrocrystal/monohydrate: 100 mg

Nitroglycerin
Tablet, sublingual: 0.3 mg, 0.4 mg, 0.6 mg

Non-Soap Cleanser (Cetaphil)
Bar
Lotion

Nortriptyline (Aventyl, Pamelor)
Capsule: 10 mg, 25 mg, 50 mg, 75 mg

Nystatin (Mycostatin)
Cream, topical: 100,000 units/g
Ointment, topical: 100,000 units/g
Powder, topical: 100,000 units/g
Tablet, oral: 500,000 units

OLANZapine (ZyPREXA, ZyPREXA Zydis ZyPREXA Relprevv)
Injection: 10 mg/2 mL
Injection as pamoate: 210 mg, 300 mg, 405 mg
Tablet: 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg
Tablet, rapid dissolving: 5 mg, 10 mg, 15 mg, 20 mg

Olmesartan (Benicar) - Tablet: 5 mg, 20 mg, 40 mg

Olopatadine (Patanol)
Solution, ophthalmic: 0.1%

Omeprazole (PriLOSEC)
Capsule, delayed release: 10 mg, 20 mg, 40 mg

Ondansetron (Zofran, Zofran ODT)
Tablet: 4mg, 8mg
Tablet, oral disintegrating: 4mg, 8mg

Ophthalmic Irrigating Solution (**BSS**, **Eye Stream**, **AK-Rinse**)
Solution, ophthalmic

Ophthalmic Lubricant (Artifical Tears)
Ointment, ophthalmic
Solution, ophthalmic

Oseltamivir (Tamiflu)
Capsule: 75 mg

Oxazepam (Serax) C-IV
Capsule: 10 mg, 15 mg, 30 mg
Tablet: 15 mg

OXcarbazepine (Trileptal) Tablet:
150 mg, 300 mg, 600 mg

Oxybutynin (Ditropan, Ditropan XL)
Tablet: 5 mg
Tablet, extended release: 5 mg, 10 mg, 15 mg

oxyCODONE (OxyCONTIN) C-II
Tablet: 15mg, 30mg

Oxymetazoline (Afrin)
Solution, nasal, drops: 0.025%, 0.05%
Solution, nasal, spray: 0.05%

Paliperidone (Invega, Invega Sustenna)
Injection, long acting: 39 mg, 78 mg, 117 mg, 156 mg, 234 mg
Tablet, extended release: 1.5 mg 3 mg, 6 mg, 9 mg

Pantoprazole (Protonix)
Tablet: 20 mg, 40 mg

PARoxetine (Paxil)
Tablet: 10 mg, 20 mg, 30 mg, 40 mg
Tablet: controlled release: 12.5 mg, 25 mg, 37.5 mg

Penicillin V Potassium (Pen-Vee K, V-Cillin K)
Tablet: 250 mg, 500 mg

Permethrin (Acticin, Elimite, NIX)
Cream, topical: 5%
Lotion: 1%
Shampoo: 1%

Perphenazine (Trilafon)
Tablet: 2 mg, 4 mg, 8 mg, 16 mg

Petrolatum, White (Vaseline)
Ointment, topical: 430 g

Phenazopyridine (Pyridium)
Tablet: 95 mg, 100 mg, 200 mg

Phenelzine (Nardil)
Tablet: 15 mg

PHENobarbital (Luminal) C-IV
Injection: 65 mg/mL, 130 mg/mL
Tablet: 8 mg, 15 mg, 16 mg, 30 mg, 32 mg, 60 mg, 65 mg, 100 mg

Phenytoin (Dilantin)
Capsule, extended release:100 mg

Pioglitazone (Actos)
Tablet: 15 mg, 30 mg, 45 mg

Polycarbophil (Fibercon, Fiber-Lax)
Tablet: 500 mg, 625 mg

Polyethylene Glycol (MiraLax)
Powder for oral solution

Polymyxin B-Bacitracin (Polysporin)
topical: Polymyxin B 10,000 units-Bacitracin 500 units

Polymyxin B-Neomycin (Neosporin)
Cream: Polymyxin B 10,000 units-Neomycin 3.5 mg

Polymyxin B-Trimethoprim (Polytrim)
Solution, ophthalmic: Polymyxin B 10,000 units-Trimethoprim 1 mg/mL

Potassium Chloride
Capsule, sustained release: 10 mEq
Tablet, controlled release (microencapsulated): 750 mg [10 mEq], 1500 mg [20 mEq]
Tablet, controlled release (wax matrix): 500 mg [6.7 mEq], 600 mg [8 mEq], 750 mg [10mEq]

Povidone-Iodine (Betadine)
Cleanser, topical: 60 mL, 240 mL
Solution, prep: 30 mL, 60 mL, 240 mL, 473 mL, 1000 mL, 4000 mL
Solution, topical: 10%

Pramipexole (Mirapex)
Tablet: 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 1.5 mg

Pramoxine – Hydrocortisone (Analpram HC)
Cream, Rectal: Pramoxine 1% - Hydrocortisone 2.5%

Pravastatin (Pravachol)
Tablet: 10 mg, 20 mg, 40 mg, 80 mg

Prazosin (Minipress)
Capsule: 1 mg, 2 mg, 5 mg

predniSONE (Deltasone)
Tablet: 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg

Pregabalin (Lyrica) C-V
Capsule: 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg

Primidone (Mysoline)
Tablet: 50 mg, 250 mg

Prochlorperazine (Compazine)
Injection: 5 mg/mL Tablet: 5 mg, 10 mg, 25 mg

Promethazine (Phenergan)
Injection: 25 mg/mL, 50 mg/mL
Tablet: 12.5 mg, 25 mg, 50 mg

Propranolol (Inderal)
Capsule, sustained release: 60 mg, 80 mg, 120 mg, 160 mg
Tablet: 10 mg, 20 mg, 40 mg, 60 mg, 80 mg

Propylthiouracil
Tablet: 50 mg

Pseudoephedrine (Sudafed)
Tablet, immediate release: 30 mg, 60 mg

Pyrethins 0.33%-Piperonyl Butoxide 4% (Pronto, RID)
Liquid, topical: 0.18%, 0.3%
Shampoo: 0.3%, 0.33%

Pyridoxine (Vitamin B_6)
Tablet: 25 mg, 50 mg, 100 mg

QUEtiapine (SEROquel) and XR (all doses)
Tablet: 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg

Raloxifene (Evista)
Tablet: 60 mg

Ranitidine (Zantac)
Tablet: 75 mg, 150 mg, 300 mg
Tablet, effervescent: 25 mg

Rectal Hemorrhoidal Suppositories-Hydrocortisone (Anusol-HC)
Suppository, rectal: see Hydrocortisone

Repaglinide (Prandin)
Tablet: 0.5 mg, 1 mg, 2 mg

Rifampin (Rifadin)
Capsule: 150 mg, 300 mg

RisperiDONE (RisperDAL, RisperDAL M-Tab, RisperDAL Consta)
Injection, long acting: 12.5 mg/2 mL, 25 mg/2 mL, 37.5 mg/2 mL, 50 mg/2 mL
Tablet: 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg
Tablet, orally disintegrating: 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg

Rivastigmine (Exelon, Exelon Patches)
Capsule: 1.5 mg, 3 mg, 4.5 mg, 6 mg
Patch, transdermal: 4.6 mg/24 hours, 9.5 mg/24 hours

Saliva
Substitute
Gel
Mouthwash
Spray
Toothpaste

Selenium Sulfide (Selsun)
Shampoo: 1%, 2.5%

Senna (Senokot)
Tablet: 8.6 mg

Sertraline (Zoloft)
Concentrate, oral: 20 mg/mL
Tablet: 25 mg, 50 mg, 100 mg

Silver Sulfadiazine (Silvadene)
Cream, topical: 1%

Simethicone (Mylicon)
Tablet, chewable: 80 mg, 125 mg

Simvastatin (Zocor)
Tablet: 5 mg, 10 mg, 20 mg, 40 mg, 80 mg

Sodium Chloride
Drops, nasal: 0.9%
Injection, bacteriostatic: 0.9%

Spironolactone (Aldactone)
Tablet: 25 mg, 50 mg, 100 mg

Sucralfate (Carafate)
Tablet: 1 g

Sulfacetamide Sodium (Sulamyd, Sebizon)
Ointment, ophthalmic: 10%
Solution, ophthalmic: 10%

Sulfamethoxazole-Trimethoprim (Bactrim)
The 5:1 ratio of Sulfamethoxazole to Trimethoprim is constant in all dosage forms
Sulfamethoxazole 800 mg-Trimethoprim 160 mg

sulfaSALAzine (Azulfidine)
Tablet: 500 mg
Tablet, delayed release: 500 mg

Sulindac (Clinoril)
Tablet: 150 mg, 200 mg

SUMAtriptan (Imitrex)
Injection: 12 mg/mL
Nasal Spray: 5 mg, 20 mg
Tablet: 25 mg, 50 mg, 100 mg

Tamsulosin (Flomax)
Capsule, sustained release: 0.4 mg

Temazepam (Restoril) C-IV
Capsule: 7.5 mg, 15 mg, 30 mg

Terbinafine (LamISIL)
Cream, topical: 1%
Tablet: 250 mg

Terbutaline (Brethine)
Tablet: 2.5 mg, 5 mg

Tetracycline
Capsule: 250 mg, 500 mg

Tetrahydrozoline (Visine Allergy Relief, Visine Moisturizing)
Solution, ophthalmic: 0.05%

Thiamine (Vitamin B_1)
Tablet: 50 mg, 100 mg, 250 mg, 500 mg

Thiothixene (Navane)
Capsule: 1 mg, 2 mg, 5 mg, 10 mg

Tioconazole (Vagistat-1)
Ointment, vaginal: 6.5%

Tiotropium (Spriva)
Cap: 18 mcg (with device)

Tolnaftate (Tinactin)
Powder, topical: 1%

Tolterodine (Detrol, Detrol LA)
Capsule, extended release: 2 mg, 4 mg
Tablet: 1 mg, 2 mg

Topiramate (Topamax)
Capsule, sprinkle: 15 mg, 25 mg
Tablet: 25 mg, 50 mg, 100 mg, 200 mg

traMADol (Ultram) C-IV
Tablet: 50 mg

traZODone (Desyrel)
Tablet: 50 mg, 100 mg, 150 mg, 300 mg

Triamcinolone (Aristocort, Kenacort, Azmacort, Nasacort)
Aerosol, oral, inhalation: 100 mcg/metered spray
Aerosol, topical: 0.2 mg/2 second spray
Cream, topical: 0.025%, 0.1%, 0.5%
Lotion, topical: 0.025%, 0.1%
Ointment, topical: 0.025%, 0.1%, 0.5%
Spray, intranasal: 55 mcg/actuation [100 sprays/canister]

Triamterene-Hydrochlorothiazide (Dyazide, Maxzide)
Capsule (Dyazide): Triamterene 37.5 mg-Hydrochlorothiazide 25 mg
Triamterene 50 mg-Hydrochlorothiazide 25 mg
Tablet (Maxzide): Triamterene 37.5 mg-Hydrochlorothiazide 25 mg
Triamterene 75 mg-Hydrochlorothiazide 50 mg

Triazolam (Halcion) C-IV
Tablet: 0.125 mg, 0.25 mg

Trifluoperazine (Stelazine)
Tablet: 1 mg, 2 mg, 5 mg, 10 mg

Trihexyphenidyl (Artane)
Tablet: 2 mg, 5 mg

Tuberculin, Purified Protein Derivative (P.P.D.)
Intermediate test strength: 5 TU/0.1 mL

Valproic Acid/Valproate (Depakene)
Capsule: 250 mg

Valsartan (Diovan)
Tablet: 40 mg, 80 mg, 160 mg, 320 mg

Vancomycin (Vancocin)
Capsule: 125 mg, 250 mg

Venlafaxine (Effexor)
Capsule, sustained release: 37.5 mg, 75 mg, 150 mg
Tablet: 25 mg, 37.5 mg, 50 mg, 75 mg, 100 mg
Tablet, extended release: 37.5 mg, 75 mg, 150 mg, 225 mg

Verapamil (Calan)
Tablet: 40 mg, 80 mg, 120 mg
Tablet, sustained release: 120 mg, 180 mg, 240 mg

Vitamin A&D Topical
Cream
Ointment

Vitamin D (Ergocalciferol, Calciferol, Drisdol)
Capsule: 0.25 mcg, 0.5 mcg, 400 units, 2,000 units, 10,000 units, 50,000 units
Tablet: 400 units, 2,000 units

Vitamin E (Aquasol E)
Capsule: 100 units, 200 units, 400 units, 1,000 units
Tablet: 200 units, 400 units, 2,000 units

Warfarin (Coumadin)
Tablet: 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg

Water for Injection

Zaleplon (Sonata) C-IV
Capsule: 5 mg, 10 mg

Zinc Oxide
Ointment, topical: 20% in white ointment
Paste, topical: 25% in white petrolatum

Ziprasidone (Geodon)
Capsule: 20 mg, 40 mg, 60 mg, 80 mg
Injection: 20 mg

Zolpidem (Ambien) C-IV
Tablet: 5 mg, 10 mg

Zonisamide (Zonegran)
Capsule: 25 mg, 50 mg, 100 mg

THERAPEUTIC CLASSIFICATION/COST INDEX

ANTIDIABETIC AGENTS

INSULINS, HUMAN

Insulin, Aspart (NovoLog)	$$$$$$$
Insulin, Glargine (Lantus)	$$$$$$$

SULFONYLUREAS

glyBURIDE (Micronase, DiaBeta)	$$

MISCELLANEOUS ANTIDIABETICS

metFORMIN (Glucophage, Glucophage XR)	$
Pioglitazone (Actos)	$$-$$$
Repaglinide (Prandin)	$$ - $$$$

GLUCOSE ELEVATING AGENTS

Glucose	$ - $$$

ANTIDOTES-DETERRENTS-POISON CONTROL AGENTS

Activated Charcoal	
Disulfiram (Antabuse)	
Glucose, oral	
Naloxone (Narcan)	$$ - $$
Naltrexone (Trexan, ReVia)	$$$
Nicotine (Nicoderm, Habitrol, ProStep, Nicotrol, Nicorette)	$$$

ANTIHISTAMINES

Cetirizine (ZyrTEC)	$
Chlorpheniramine (Chlor-Trimeton, Teldrin)	$ - $
Cyproheptadine (Periactin)	$
diphenhydrAMINE (Benadryl)	$
Fexofenadine (Allegra)	$$
hydrOXYzine (Atarax, Vistaril)	$ - $$
Loratadine (Claritin)	$$

ANTINEOPLASTIC AGENTS

All commercially available oncologic agents used in the treatment of cancer are considered to be formulary agents, if prescribed by an oncologist for the active treatment of cancer. . All commercially available oncologic agents prescribed by field specialists are considered to be on formulary.

BLOOD MODIFYING AGENTS

ANTIPLATELET

Aspirin	$
Clopidogrel (Plavix)	$$$

ANTICOAGULANT

Warfarin (Coumadin)	$

MISCELLANEOUS BLOOD MODIFYING AGENTS

Ferrous Sulfate (Feosol, Fer-In-Sol) [20% elemental iron]	$

CARDIOVASCULAR AGENTS

DIURETICS

Thiazides & Related Diuretics

Chlorthalidone (Hygroton)	$
Hydrochlorothiazide (HydroDIURIL, Esidrix)	$

Loop Diuretics

Furosemide (Lasix)	$

Potassium-Sparing Diuretics

Spironolactone (Aldactone)	$

Combination Diuretics

Triamterene-Hydrochlorothiazide (Dyazide, Maxzide)	$ - $

Cardiac Glycosides

Digoxin (Lanoxin)	$

Antianginals

Isosorbide Dinitrate (Isordil, Sorbitrate)	$
Isosorbide Mononitrate (Imdur, ISMO, Monoket)	$
Nitroglycerin	$ - $

Calcium Channel Blockers

amLODIPine (Norvasc)	$$
Diltiazem (Cardizem)	$ - $$
Felodipine (Plendil)	$ - $$
Verapamil (Calan)	

Beta-Adrenergic Blockers

Atenolol (Tenormin)	$
Carvedilol (Coreg)	$-$$
Labetalol (Normodyne)	$ - $$
Metoprolol (Lopressor, Toprol XL)	$ - $$
Propranolol (Inderal)	$ - $$$

Antihyperlipidemics

atorvaSTATin (Lipitor)	$-$$$$
Fenofibrate (Antara, Lofibra, Tricor, Triglide)	$-$$$$
Gemfibrozil (Lopid)	$
Pravastatin (Pravachol)	$$
Simvastatin (Zocor)	$

Angiotensin Converting Enzyme Inhibitors

Benazepril (Lotensin)	$
Captopril (Capoten)	$
Enalapril (Vasotec)	$
Lisinopril (Prinivil, Zestril)	$

MISCELLANEOUS ANTIHYPERTENSIVES

cloNIDine (Catapres)	$ - $$$$$$
hydrALAZINE (Apresoline)	$
Methyldopa (Aldomet)	$ - $$$$$$$
Olmesartan (Benicar	$$
Valsartan (Diovan)	$$

CENTRAL NERVOUS SYSTEM AGENTS

ANALGESICS

Nonsteroidal Anti-Inflammatory Agents

Aspirin	
Tablet: 325 mg	$
Ibuprofen (Motrin)	
Tablet: 200 mg, 400 mg, 600 mg, 800 mg	$
Ketorolac (Toradol)	
Injection: 15 mg/mL, 30 mg/mL	$ - $$$
Meloxicam (Mobic)	
Tablet: 7.5 mg, 15 mg	$
Nabumetone (Relafen) -	
Tablet: 500 mg, 750 mg	$$ - $
Naproxen (Naprosyn)	
Tablet: 220 mg, 250 mg, 275 mg, 375 mg, 500 mg, 550 mg	$
Tablet, delayed release: 500 mg	$$
Sulindac (Clinoril)	
Tablet: 150 mg, 200 mg	$$ - $

Opiate Agonists

oxyCODONE (OxyCONTIN) C-II	*
Tablet: 15mg, 30mg	

*Opiate agonists include a range of dosage forms and strengths. Dosing of each is dependent on the individual patient and condition(s) treated.

Miscellaneous Analgesics & Antipyretics

Acetaminophen (Tylenol)	
Tablet: 325 mg, 500 mg	$
Acetaminophen-Codeine C-III	
Tablet: #2: Acetaminophen 300 mg-Codeine 15 mg	$ - $
TraMADol (Ultram) C-IV	
Tablet: 50 mg	$

ANTIEMETIC-ANTIVERTIGO AGENTS

diphenhydrAMINE (Benadryl)	$
hydrOXYzine (Atarax, Vistaril)	$ - $$
Meclizine (Antivert, Bonine)	$
Metoclopramide (Reglan)	$ - $$$
Ondansetron (Zofran, Zofran ODT)	$ - $$$
Prochlorperazine (Compazine)	
Promethazine (Phenergan)	$ - $$$$$

PSYCHOTROPIC AGENTS

Benzodiazepine Anxiolytics and Hypnotics

ALPRAZolam (Xanax, Xanax XR) C-IV	
Tablet: 0.25 mg, 0.5 mg, 1 mg, 2 mg	$
Tablet, sustained release: 0.5 mg, 1 mg, 2 mg, 3 mg	$$ - $
chlordiazePOXIDE (Librium) oral only C-IV	
Capsule: 5 mg, 10 mg, 25 mg	$
clonazePAM (KlonoPIN) C-IV	
Tablet: 0.5 mg, 1 mg, 2 mg	$
Tablet, oral disintegrating: 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	$$
Clorazepate (Tranxene) C-IV	
Tablet: 3.75 mg, 7.5 mg, 15 mg	$$
Diazepam (Valium) C-IV	
Injection: 5 mg/mL	$$ - $$$$$
Tablet: 2 mg, 5 mg, 10 mg	$
LORazepam (Ativan) C-IV	
Injection: 2 mg/mL, 4 mg/mL	$ - $$^
Tablet: 0.5 mg, 1 mg, 2 mg	$
Oxazepam (Serax) C-IV	
Capsule: 10 mg, 15 mg, 30 mg	$$ - $$$$
Tablet: 15 mg	
Temazepam (Restoril) C-IV	
Capsule: 7.5 mg, 15 mg, 30 mg	$
Triazolam (Halcion) C-IV	
Tablet: 0.125 mg, 0.25 mg	$

^ per dose

Miscellaneous Anxiolytics and Hypnotics

diphenhydrAMINE (Benadryl)	
Capsule: 25 mg, 50 mg	$
Injection: 50 mg/mL	$ - $$^
hydrOXYzine (Atarax, Vistaril) Cap	
Capsule: 25 mg, 50 mg, 100 mg	$ - $$
Injection, as hydrochloride: 25 mg/mL, 50 mg/mL	$$ ^
Tablet: 10 mg, 25 mg, 50 mg	$ - $
Prazosin (Minipress)	
Capsule: 1 mg, 2 mg, 5 mg	$ - $$
traZODone (Desyrel)	
Tablet: 50 mg, 100 mg, 150 mg, 300 mg	$
Zaleplon (Sonata) C-IV	
Capsule: 5 mg, 10 mg	$$ - $
Zolpidem (Ambien) C-IV	
Tablet: 5 mg, 10 mg	$

^ per dose

Antidepressants

Monoamine Oxidase Inhibitors

Phenelzine (Nardil)	
Tablet: 15 mg	$ - $

Serotonin Selective Reuptake Inhibitors (SSRIs)

Citalopram (celeXA)	
Tablet: 10 mg, 20 mg, 40 mg	$
Escitalopram (Lexapro)	
Tablet: 5 mg, 10 mg, 20 mg	$
FLUoxetine (PROzac)	
Capsule: 10 mg, 20 mg	$
Tablet: 10 mg, 20 mg	$$ - $$$
fluvoxaMINE (Luvox)	
Tablet: 25 mg, 50 mg, 100 mg	$ - $$
PARoxetine (Paxil)	
Tablet: 10 mg, 20 mg, 30 mg, 40 mg	$
Tablet: controlled release: 12.5 mg, 25 mg, 37.5 mg	$$$ - $$$$
Sertraline (Zoloft)	
Concentrate, oral: 20 mg/mL	$$ - $$$$
Tablet: 25 mg, 50 mg, 100 mg	$

Serotonin Norepinephrine Reuptake Inhibitors (SNRIs)

DULoxetine (Cymbalta)	
Capsule, delayed release: 20 mg, 30 mg, 60 mg	$ - $$
Venlafaxine (Effexor)	
Capsule, sustained release: 37.5 mg, 75 mg, 150 mg	$ - $
Tablet: 25 mg, 37.5 mg, 50 mg, 75 mg, 100 mg	$
Tablet, extended release: 37.5 mg, 75 mg, 150 mg, 225 mg	$$$ - $$$$

Tricyclic Agents

Amitriptyline (Elavil)	
Tablet: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	$$ - $$
clomiPRAMINE (Anafranil) - for OCD	
Capsule: 25 mg, 50 mg, 75 mg	$$$$ - $$$$$$$
Desipramine (Norpramin)	
Tablet: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	$$$ - $$$$
Doxepin (SINEquan)	
Capsule: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	$
Concentrate, oral: 10 mg/mL	$
Imipramine (Tofranil)	
Tablet: 10 mg, 25 mg, 50 mg	$ - $
Nortriptyline (Aventyl, Pamelor)	
Capsule: 10 mg, 25 mg, 50 mg, 75 mg	$

Miscellaneous Antidepressant Agents

buPROPion (Budeprion, Wellbutrin, Zyban)	
Tablet: 75 mg, 100 mg	$ - $$
Tablet, sustained release: 100 mg, 150 mg, 200 mg	$ - $$
Tablet, extended release: 150 mg, 300 mg	$ - $$
Mirtazapine (Remeron, Remeron SolTab)	
Tablet: 7.5 mg, 15 mg, 30 mg, 45 mg	$
Tablet, rapid dissolving: 15 mg, 30 mg, 45 mg	$$
traZODone (Desyrel)	
Tablet: 50 mg, 100 mg, 150 mg, 300 mg	$ - $$$$

Antipsychotics

ARIPiprazole (Abilify, Abilify discmelt)	
Injection: 9.75 mg	+ ^
Injection, extended release: 300 mg, 400 mg	+ - ++
Tablet: 2mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg	$$$$$$$ - +
Asenapine (Saphris)	
Tablet, sublingual: 5 mg, 10 mg	$$$$$$
chlorproMAZINE (Thorazine)	
Tablet: 10 mg, 25 mg, 50 mg, 100 mg, 200 mg	$$ - $$$$
cloZAPine (Clozaril)-	
Tablet: 25 mg, 50mg, 100 mg, 200mg	$$ - $$$
Tablet, oral disintegrating: 12.5 mg, 25 mg, 100 mg, 150 mg, 200 mg	+
fluPHENAZine (Prolixin)	
Injection, as decanoate: 25 mg/mL	$ - $$
Tablet: 1 mg, 2.5 mg, 5 mg, 10 mg	$$ - $
Haloperidol (Haldol)	
Concentrate, oral: 2 mg/mL	$ - $$
Injection, as decanoate: 50 mg/mL, 100 mg/mL	$$$$$$ - + ^
Injection, as lactate: 5 mg/mL	$$$$ ^
Tablet: 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg	$ - $$
Iloperidone (Fanapt)	
Tablet: 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	+
Loxapine (Loxitane)	
Capsule: 5 mg, 10 mg, 25 mg, 50 mg	$ - $$
Lurasidone (Latuda)	
Tablet: 20 mg, 40 mg, 60 mg, 80 mg, 120 mg	$$$$$$ - +
OLANZapine (ZyPREXA)	
Injection: 10 mg/2 mL	$$$$$$$ - + ^
Injection as pamoate: 210 mg, 300 mg, 405 mg	++++ - +++++
Tablet: 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg	$ - $$
Tablet, rapid dissolving: 5 mg, 10 mg, 15 mg, 20 mg	$ - $$
Paliperidone (Invega)	
Injection, long acting: 39 mg, 78 mg, 117 mg, 156 mg, 234 mg	+ - ++
Tablet, extended release: 1.5 mg 3 mg, 6 mg, 9 mg	$$$$$$$ - +
Perphenazine (Trilafon)	
Tablet: 2 mg, 4 mg, 8 mg, 16 mg	$$-$$$$$

Mood Stabilizers

carBAMazepine (TEGretol)	
Capsule, extended release: 100 mg, 200 mg, 300 mg	$$ - $$$$
Tablet: 200 mg	$$ - $$$
Tablet, chewable: 100 mg	$$ - $$$
Tablet, extended release: 100 mg, 200 mg, 400 mg	$$$ - $$$$
Divalproex (Depakote)	
Capsule, sprinkles: 125 mg	$$$ - +
Tablet, delayed release: 125 mg, 250 mg, 500 mg	$$ - $
Tablet, extended release: 250 mg, 500 mg	$$$ - $$$$$$$
lamoTRIgine (LaMICtal)	
Tablet: 25 mg, 100 mg, 150 mg, 200 mg	$ - $$
Tablet, dispersible/chewable: 2 mg, 5 mg, 25 mg	$$$$$$ - $$$$$$$
Lithium Carbonate (Eskalith, Lithonate)	
Capsule: 150 mg, 300 mg, 600 mg	$
Tablet: 300 mg	$$ - $
Tablet, controlled release: 450 mg	$
Tablet, slow release: 300 mg	$
Lithium Citrate	
Syrup: 300 mg/5 mL	$$ - $
OXcarbazepine (Trileptal)	
Tablet: 150 mg, 300 mg, 600 mg	$$ - $$
Topiramate (Topamax)	
Capsule, sprinkle: 15 mg, 25 mg	$$ - $$$$
Tablet: 25 mg, 50 mg, 100 mg, 200 mg	$ - $$
Valproic Acid (Depakene)	
Capsule: 250 mg	$$ - $$

Stimulants

AtoMOXetine (Strattera)	
Capsule: 10 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg, 100 mg	$$$$ - $$$$$
Rarely used in adults Methylphenidate, immediate release (Ritalin, Methylin, Metadate) C-II	
Tablet: 5 mg, 10 mg, 20 mg	$ - $$
Rarely used in adults Methylphenidate, sustained release (Ritalin SR, Metadate CD Concerta) C-II	
Tablet, extended release: 18 mg, 36 mg, 27 mg, 54 mg	$$$$ - $$$$$$

Other ADHD Agents

cloNIDine (Catapres)	
Patch, transdermal: 1, 2, and 3 (0.1, 0.2, 0.3 mg/day, 7 day duration)	$$ - $$$$
Tablet: 0.1 mg, 0.2 mg, 0.3 mg	$
guanFACINE (Tenex)	
Tablet: 1 mg, 2 mg	$$$$

Chemical Dependency Adjuncts

Disulfuram (Antabuse)	
Tablet: 250 mg, 500 mg	$$ - $$$$
Naltrexone (Trexan, ReVia)	
Tablet: 50 mg	$ - $$
Topiramate (Topamax)	
Capsule, sprinkle: 15 mg, 25 mg	$$ - $$$$
Tablet: 25 mg, 50 mg, 100 mg, 200 mg	$ - $$

ANTICONVULSANTS

Barbiturates

PHENobarbital (Luminal) C-IV	
Injection: 65 mg/mL, 130 mg/mL	$$$$ - +
Tablet: 8 mg, 15 mg, 16 mg, 30 mg, 32 mg, 60 mg, 65 mg, 100 mg	$ - $$
Primidone (Mysoline)	
Tablet: 50 mg, 250 mg	$

Benzodiazepines

cloBAZam (Onfi) C-IV	
Tablet: 5 mg, 10 mg, 20 mg	$$$$$$ - +
clonazePAM (KlonoPIN) C-IV	
Tablet: 0.5 mg, 1 mg, 2 mg	$ - $
Tablet, oral disintegrating: 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	$$ - $$$$
Clorazepate (Tranxene) C-IV	
Tablet: 3.75 mg, 7.5 mg, 15 mg	$$ - $$
Diazepam (Valium, Diastat) C-IV	
Gel, rectal: 2.5 mg, 10 mg, 20 mg	++
Injection: 5 mg/mL	$$$$ - +
Tablet: 2 mg, 5 mg, 10 mg	$ - $$
LORazepam (Ativan) **Inj** C-IV	
Injection: 2 mg/mL, 4 mg/mL	$$
Tablet: 0.5 mg, 1 mg, 2 mg	$

Hydantoins

Phenytoin (Dilantin)	
Capsule, extended release: 100 mg	$$

Miscellaneous Anticonvulsants

carBAMazepine (TEGretol)	
Capsule, extended release: 100 mg, 200 mg, 300 mg	$$ - $$$$$
Tablet: 200 mg	$$ - $$$
Tablet, chewable: 100 mg	$$ - $$$
Tablet, extended release: 100 mg, 200 mg, 400 mg	$$ - $$$$
Divalproex (Depakote)	
Tablet, delayed release: 125 mg, 250 mg, 500 mg	$$ - $$
Tablet, extended release: 250 mg, 500 mg	$$$ - $$$$$$$
Gabapentin (Neurontin)	
Capsule: 100 mg, 300 mg, 400 mg	$ - $
Tablet: 400 mg, 600 mg, 800 mg	$$
LamoTRIgine (LaMICtal)	
Tablet: 25 mg, 100 mg, 150 mg, 200 mg	$
Tablet, dispersible/chewable: 2 mg, 5 mg, 25 mg	$$$$$ - ++
LevETIRAcetam (Keppra)	
Tablet: 100 mg, 250 mg, 500 mg, 750 mg, 1,000 mg	$ - $
OXcarbazepine (Trileptal)	
Tablet: 150 mg, 300 mg, 600 mg	$$ - $$

Pregabalin (Lyrica) C-V	
Capsule: 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg,	$$$$$
Rufinamide (Banzel)	
Tablet: 200 mg, 400 mg	$$$$$ - ++
Topiramate (Topamax)	
Capsule, sprinkle: 15 mg, 25 mg	$$$ - $$$$
Tablet: 25 mg, 50 mg, 100 mg, 200 mg	$ - $$
Valproic Acid (Depakene)	
Capsule: 250 mg	$$ - $$
Zonisamide (Zonegran)	
Capsule: 25 mg, 50 mg, 100 mg	$ - $

MUSCLE RELAXANTS

Antispasticity Agents

Baclofen	
Tablet: 10 mg,	$ -
Dantrolene	
Capsule:	$$ -
Diazepam	
Injection: 5 mg/mL	$$
Tablet: 2 mg,	$$

Muscle Relaxant Agents

Diazepam (Valium) C-IV	
Injection: 5 mg/mL	$$
Tablet: 2 mg, 5 mg, 10 mg	$$
Methocarbamol (Robaxin)	
Tablet: 500 mg, 750 mg	$ - $

ANTIPARKINSON AGENTS

Amantadine (Symmetrel)	$$
Benztropine (Cogentin)	$ - $$$$
Bromocriptine (Parlodel)	$$ - $$$$$$$
Carbidopa-Levodopa (Sinemet)	$$ - $$$$
Pramipexole (Mirapex)	$$ - $$$
Trihexyphenidyl (Artane)	$ - $$

AGENTS FOR MIGRAINE

Aspirin-Acetaminophen-Caffeine (Excedrine Migraine)	$
Atenolol (Tenormin)	$
Divalproex (Depakote, Depakote ER)	$$ - $$$$
FLUoxetine (PROzac)	$
Metoprolol (Lopressor, Toprol XL)	$ _ $$
Naproxen (Naprosyn)	$$

Propranolol (Inderal)	$ - $$$
SUMAtriptan (Imitrex)	$$$$$ - $$$$$$$
Topiramate (Topamax)	$
Valproate (Depakene)	$ - $$$$
Verapamil (Calan)	$ - $$

DEMENTIA AGENTS

Donepezil (Aricept)	$$$-$$$$
Galantamine (Razadyne)	$$ - $$$
Memantine (Namenda)	$$ - $$$
Rivastigmine (Exelon, Exelon Patches)	$$$-$$$$

ENDOCRINE AGENTS

PROGESTERONES

medroxyPROGESTERone (Provera)	$ _ $$

ADRENAL CORTICAL STEROIDS

Dexamethasone (Decadron)	$ - $$
Hydrocortisone	$$ - $$$$$
methylPREDNISolone (Medrol)	$ - $$$$
predniSONE (Deltasone)	$ - $$$$
Triamcinolone (Aristocort, Kenacort)	$ - $$$$$

THYROID AGENTS

Levothyroxine (Synthroid, Levoxyl)	$
Methimazole (Tapazole)	$$ - $$
Propylthiouracil	$

MISCELLANEOUS ENDOCRINE AGENTS

Allopurinol (Zyloprim)	$
Desmopressin (DDAVP, Stimate)	$$$ - $$$$

GASTROINTESTINAL AGENTS

ANTACIDS

Aluminum Hydroxide (Amphojel)	
Suspension, oral: 320 mg/5 mL, 600 mg/5 mL	$ - $$
Aluminum Hydroxide-Magnesium Hydroxide-Simethicone (Mylanta, Aludrox)	
Liquid, oral: containing Aluminum Hydroxide-Magnesium Hydroxide-Simethicone	$

ANTISPASMODICS/ANTICHOLINERGIC AGENTS

Dicyclomine (Bentyl)	
Capsule: 10 mg	$$ - $$$$
Tablet: 20 mg	$$ - $

HISTAMINE (H_2) ANTAGONISTS

Preferred Agent:	
Famotidine (Pepcid)	
Tablet: 10 mg, 20 mg, 40 mg	$
Ranitidine (Zantac)	
Tablet: 75 mg, 150 mg, 300 mg	$ - $$
Tablet, effervescent: 25 mg	

PROTON PUMP INHIBITORS

Preferred Agent:	
Lansoprazole (Prevacid)	
Capsule, enteric coated granules: 15 mg, 30 mg	$ - $
Pantoprazole (Protonix)	
Tablet: 20 mg, 40 mg	$
Esomeprazole (NexIUM)	
Capsule: 20 mg, 40 mg	*$$$$*
Omeprazole (PriLOSEC)	
Capsule, delayed release: 10 mg, 20 mg, 40 mg	*$- -$$*

ANTIFLATULENTS

Simethicone (Mylicon)	
Tablet, chewable: 80 mg, 125 mg	$

STIMULANTS

Metoclopramide (Reglan)	
Tablet: 5 mg, 10 mg	$

LAXATIVES

Saline Laxatives

Magnesium Citrate	
Solution, oral: 300 mL	$
Magnesium Hydroxide (Milk of Magnesia)	
Liquid, oral: 400 mg/5 mL	$
Liquid, oral, concentrate: 1,200 mg/5 mL	$ - $$
Tablet, chewable: 311 mg	$$- $

^ Per Dose

Irritant/Stimulant Laxatives

Bisacodyl (Dulcolax)^	
Tablet, enteric coated: 5 mg	$
Senna (Senokot)	
Tablet: 8.6 mg	$

^ Per Dose

Bulk Laxatives

Polycarbophil (Fibercon, Fiber-Lax)	
Tablet: 500 mg, 625 mg	$ - $

Osmotic Laxatives

Lactulose (Enulose)	
Syrup: 10 g/15 mL	$ - $$
Polyethylene Glycol (MiraLax)	
Powder for oral solution	$$

^ Per Dose

Combination Laxatives

Docusate Sodium-Sennosides (Peri-Colace)	
Tablet: Docusate 50 mg-Sennosides 8.6 mg	$

Surfactants

Docusate Sodium (Colace)	
Capsule: 50 mg, 100 mg, 250 mg	$

^ Per Dose

ANTIDIARRHEALS

Bismuth Subsalicylate (Pepto-Bismol, Bismatrol, Kaopectate)	
Tablet, chewable: 262 mg	$ - $$
Lactobacillus Acidophilus (Lactinex, Bacid)	
Capsule	$$
Granules: 1 g/packet	$$
Tablet, chewable	$$
Loperamide (Imodium)	
Capsule: 2 mg	$$
Tablet: 2 mg	$

^ Pricing per Gram/supp

RECTAL AGENTS^

Pramoxine – Hydrocortisone (Analpram HC)^	
Cream, rectal: Pramoxine 1% - Hydrocortisone 2.5%	$$$$$ - $$$$$$$
Rectal Hemorrhoidal Cream-Hydrocortisone^	
Cream, rectal: 1%, 2.5%	$$

Rectal Hemorrhoidal Ointment (Anusol)^	
Ointment	$

^ Pricing per Gram

MISCELLANEOUS GASTROINTESTINAL AGENTS

Activated Charcoal	
Oral suspension, activated: 15 g, 30 g, 40 g, 120 g, 240 g	$$$$$ - +
Bismuth Subsalicylate (Pepto-Bismol, Bismatrol, Kaopectate)	
Tablet, chewable: 262 mg	$ - $$
Misoprostol (Cytotec)	
Tablet: 100 mcg, 200 mcg	$$$
Sucralfate (Carafate)	
Tablet: 1 g	$$ - $
sulfaSALAzine (Azulfidine)	
Tablet: 500 mg	$
Tablet, delayed release: 500 mg	$

GENITOURINARY AGENTS

INTERSTITIAL CYSTITIS AGENTS

Phenazopyridine (Pyridium)	$ _ $$

MEDICATIONS FOR BPH

Finasteride (Proscar)	$$
Tamsulosin (Flomax)	$$

URINARY ANTICHOLINERGICS

Darifenacin (Enablex)	$$$
Oxybutynin (Ditropan, Ditropan XL)	$$ - $$
Tolterodine (Detrol, Detrol LA)	$$ - $$$

VAGINAL ANTIFUNGALS

Clotrimazole (Gyne-Lotrimin, Mycelex)	$$$$ - $$$$$
Miconazole (Monistat)	$$$$ - $$$$$
Tioconazole (Vagistat-1)	$$$$

MISCELLANEOUS GENITOURINARY AGENTS

Nitrofurantoin (Macrodantin)	$$ - $$$$

IMMUNOLOGICAL AGENTS

IN-VIVO DIAGNOSTIC BIOLOGICALS

Tuberculin, Purified Protein Derivative (P.P.D.)	$$ - $$$$$$$

INFECTIOUS DISEASE AGENTS

ANTIBIOTICS

Penicillins

Amoxicillin (Amoxil, Polymox)	
Capsule: 250 mg, 500 mg	$
Amoxicillin-Clavulanate (Augmentin)	
Tablet: 500 mg (contains Clavulanate 125 mg)	$$
875 mg (contains Clavulanate 125 mg)	$$
Ampicillin	
Capsule, 250 mg, 500 mg	
Penicillin V Potassium (Pen-Vee K, V-Cillin K)	
Tablet: 250 mg, 500 mg	$ - $$

Cephalosporins

cefTRIAxone (Rocephin)	
Powder for injection: 250 mg, 500 mg, 1 g, 2 g, 10 g	$$
Cephalexin (Keflex)	
Capsule: 250 mg, 500 mg	$ - $$

Macrolides

Azithromycin (Zithromax)	
Tablet: 250 mg, 500 mg, 600 mg	$$
Clarithromycin (Biaxin)	
Tablet, film coated: 250 mg, 500 mg	$$$$

Tetracyclines

Doxycycline (Vibramycin)	
Capsule: 50 mg, 100 mg	$$ - $$$
Tetracycline	
Capsule: 250 mg, 500 mg	

Quinolones

Levofloxacin (Levaquin)	
Tablet: 250 mg, 500 mg, 750 mg	$ - $$

Miscellaneous Antibiotics

Clindamycin (Cleocin)	
Capsule: 75 mg, 150 mg, 300 mg	$ - $$
metroNIDAZOLE (Flagyl)	

Tablet: 250 mg, 500 mg	$ - $$
Sulfamethoxazole-Trimethoprim (Bactrim)	
The 5:1 ratio of Sulfamethoxazole to Trimethoprim is constant in all	
Tablet: Sulfamethoxazole 400 mg	$
Sulfamethoxazole 800 mg	$$
Vancomycin (Vancocin)	
Capsule: 125 mg, 250 mg	+ - +

ANTIFUNGALS

Fluconazole (Diflucan)	
Tablet: 100 mg, 150 mg, 200 mg, 250 mg, 500 mg	$$ - $$$
Griseofulvin (Fulvicin, Grifulvin V, Gris-Peg)	
Tablet: 500 mg	$$$$ - $$$$$
Ultramicrosize:	
Tablet: 125 mg, 250 mg	$$$$ - $$$$$
Ketoconazole (Nizoral)	
Tablet: 200 mg	$
Nystatin (Mycostatin)	
Tablet, oral: 500,000 units	$$ - $$$
Terbinafine (LamISIL)	
Tablet: 250 mg	$ - $$

ANTITUBERCULARS

Isoniazid (INH)	
Tablet: 100 mg, 300 mg	$
Rifampin (Rifadin)	
Capsule: 150 mg, 300 mg	$

ANTIVIRALS

All commercially available* Antiviral Agents *used in the treatment of AIDS/HIV are considered to be formulary agents	
Acyclovir (Zovirax)	
Capsule: 200 mg	$$ - $$
Oseltamivir (Tamiflu)	
Capsule: 75 mg	$$$$$$$

ANTIHELMINTICS

Ivermectin (Stromectol)	
Tablet: 3 mg	$$$$$ - +

URINARY ANTI-INFECTIVES

Nitrofurantoin (Macrodantin)	
Capsule, macrocrystal: 25 mg, 50 mg, 100 mg	$$ - $$$
Capsule, macrocrystal/monohydrate: 100 mg	$$$

INTRAVENOUS SOLUTIONS AND ADDITIVES

INTRAVENOUS SOLUTIONS

Sodium Chloride Intravenous Solution	$$$$ - $$$$$
Water for Injection	$$ - $$$$

NUTRITIONAL AGENTS

VITAMINS

Folic Acid (Folvite)	$ - $$$$
Phytonadione (Vitamin K_1, Mephyton, Konakion)	$$ - $$$
Pyridoxine (Vitamin B_6)	$ - $$
Thiamine (Vitamin B_1)	$ - $
Vitamin D (Ergocalciferol, Calciferol, Drisdol)	$-$
Vitamin E (Aquasol E)	$ - $$$$$$$

COMBINATION PRODUCTS

Calcium Carbonate-Vitamin D (Os-Cal + D)	$
Multivitamin-Minerals	$ - $

RESPIRATORY AGENTS

BRONCHODILATORS

Albuterol (Proventil, Ventolin)	$ - $$$
Ipratropium (Atrovent Inhaler)	$$$$$$$
Terbutaline (Brethine)	$ - $$$$$$
Tiotropium (Spriva)	$$$$$$$

BRONCHODILATORS, COMBINATION/SHORT ACTING

Albuterol-Ipratropium (Combivent)	$$ - $$$$$$$

BRONCHODILATORS, COMBINATION STEROID + LONG ACTING BETA-2 AGONISTS

Budesonide-Formoterol (Symbicort)	$$$$$$$
Fluticasone-Salmeterol (Advair)	$$$ - $$$$$

COUGH, COLD AND DECONGESTANT PREPARATIONS

Benzonatate (Tessalon Perle) ***Antitussive***	$$$
Cetirizine-Pseudoephedrine (ZyrTEC D)	$
Chlorpheniramine (Chlor-Trimeton, Teldrin)	$ - $$
Dextromethorphan***Antitussive***	$ _ $$
diphenhydrAMINE (Benadryl)	$
Fexofenadine (Allegra)	$ - $$
Fexofenadine-Pseudoephedrine (Allegra-D)	$$
guaiFENesin-Codeine (Robitussin AC) C-V	$$
guaiFENesin-Dextromethorphan (Robitussin DM)	$ - $$
guaiFENesin-Pseudoephedrine (Mucinex D)	$$
Loratadine (Claritin)	$$
Loratadine-Pseudoephedrine (Claritin D)	$$ - $$
Pseudoephedrine (Sudafed) ***Decongestant***	$ _ $$

EXPECTORANTS

guaiFENesin (Robitussin, Mucinex)	$ _ $$

STEROIDS

Fluticasone (Flovent)	$$$$$$$
Fluticasone-Salmeterol (Advair)	$$$ - $$$$$
Triamcinolone (Azmacort, Nasacort)	$$$$$$$

MISCELLANEOUS RESPIRATORY DRUGS

Montelukast (Singulair)	$$
Sodium Chloride	$ - $

TOPICAL AGENTS

OPHTHALMICS

Antibiotics

Polymyxin B-Trimethoprim (Polytrim)	
Solution, ophthalmic: Polymyxin B 10,000 units -Trimethoprim 1 mg/mL	$$
Sulfacetamide Sodium (Sulamyd)	
Ointment, ophthalmic: 10%	$$$
Solution, ophthalmic: 10%	$$$

^Pricing per ml or per gram

Decongestant/Antiallergy^

Ketotifen (Zaditor)	
Solution, ophthalmic: 0.025%	$
Naphazoline (Naphcon, AK-Con)	
Solution, ophthalmic: 0.012%, 0.1%	$
Olopatadine (Patanol)	
Solution, ophthalmic: 0.012%, 0.1%	+
Tetrahydrozoline (Visine Allergy Relief, Visine Moisturizing)	
Solution, ophthalmic: 0.05%	$

^Pricing per ml or per gram

Miscellaneous Opthalmics^

Ophthalmic Lubricant (Artifical Tears)	
Ointment, ophthalmic	$
Solution, ophthalmic	$
Solution, ophthalmic 1.4%	

^Pricing per ml or per gram

OTICS^

Antipyrine-Benzocaine (Allergen, Auralgan)	
Solution, otic	$
Solution, otic: Ciprofloxacin 2 mg-Hydrocortisone 10 mg per mL	**+/day**
Hydrogen Peroxide	
Solution, topical: 3%	$
Neomycin-Polymyxin B-Hydrocortisone (Cortisporin)	
Solution, otic: Neomycin-Polymyxin B-Hydrocortisone	$$/day
Suspension, otic: Neomycin-Polymyxin B-Hydrocortisone	$$/day

MOUTH AND THROAT AGENTS

Nystatin (Mycostatin)	$$ - $$$
Troche: 200,000 units	

Saliva Substitute **OTC**	$$$
Gel	
Mouthwash	
Spray	

NASAL AGENTS

Fluticasone (Flonase)	
Inhalation, nasal: 50 mcg/actuation	$$$$ - $$$$$$$
Oxymetazoline (Afrin)	$
Solution, nasal, drops: 0.025%, 0.05%	
Solution, nasal, spray: 0.05%	

DERMATOLOGICALS^

Acne Agents

Clindamycin (Cleocin T)	$ - $$

Anesthetics, Local

Lidocaine (Xylocaine)	$ - $$$$

Anti-Histamine Agents

diphenhydrAMINE (Benadryl)	$
Doxepin (Zonalon)	$$$

Anti-Infectives

Antibiotics

Bacitracin (Baciguent)	$
Clindamycin (Cleocin T)	$ - $$
metroNIDAZOLE (Flagyl)	$$ - $$$$$$
Mupirocin (Bactroban)	$$ - $$$
Neomycin-Polymyxin B-Bacitracin (Triple Antibiotic Ointment)	$
Polymyxin B-Neomycin (Neosporin)	

Antiviral

Acyclovir (Zovirax)	$$$$$$ - *

Antifungals

Clotrimazole (Lotrimin, Fungoid)	$ - $
Ketoconazole (Nizoral)	$ - $
Miconazole (Monistat)	$
Nystatin (Mycostatin)	$$ - $
Terbinafine (LamISIL)	$
Tolnaftate (Tinactin)	$

Antipsoriatics

Selenium Sulfide (Selsun)	$

Antiseborrheic Agents

Selenium Sulfide (Selsun)	$
Sulfacetamide Sodium (Sebizon)	$

Antiseptics & Germacides

Povidone-Iodine (Betadine)	$

Burn Agents

Bacitracin (Baciguent)	$
Silver Sulfadiazine (Silvadene)	$

Corticosteroids

Ultra High Potency

Clobetasol (Clobex, Cormax,Temovate) -	$$ - $$$

Medium Potency

Triamcinolone (Aristocort, Kenacort)	$ - $$$

Low Potency

Desonide (Desowen, Lokara, Tridesilon)	$ - $$$
Hydrocortisone	$

Emollients

Emollient Ointment (Lanolin, Aquaphor)	$

Ointment & Lotion Bases

Petrolatum, White (Vaseline)	$

Skin Cleansers

Non-Soap Cleanser (Cetaphil)	$

Scabicides & Pediculicides

Permethrin 1% Liquid (NIX)	$
Permethrin 5% Cream (Acticin), Elimite)	$
Pyrethins 0.33%-Piperonyl Butoxide 4% (Pronto, RID)	

Skin Protectants

Silver Sulfadiazine (Silvadene)	$
Zinc Oxide	$

Miscellaneous Dermatologicals

Aluminum Chloride Hexahydrate (Drysol)	$
Hydrogen Peroxide	$

IRRIGATION SOLUTIONS

Sodium Chloride	$$$
Water for Injection	$$ - $$$$

NUTRITIONAL SUPPLEMENTS*

Melatonin	$

*The following certification processes and product lines certified

Good Manufacturer Practices (GMP)	Nature's Way
	Country Life
	Twin
United States Pharmacopoeia (USP)	Nature Made
National Sanitation Foundation (NSF)	GNC Nutritional Supplements

APPENDIX 1: NEW DRUG APPLICATION FORM

PHF
NEW DRUG APPLICATION
(for inclusion in the PHF *Formulary*)

** (THE NEW DRUG APPLICATION PROCESS IS DESCRIBED ON THE BACK OF THIS FORM.) **

Date: _____

Name of practitioner submitting the application: _____

_____

Information regarding new drug:

Therapeutic Classification	
Generic Name	
Trade Name(s)	
Manufacturer(s)	
Dosage Form(s)	

Explain the pharmacological action or use of this drug:

Explain the advantages of this drug over those listed in the formulary:

State which drugs this new drug would replace or supplement:

****

☐application is approved _____
signature of chairman of facility pharmacy and therapeutics committee

OR
☐application is appropriate and complete _____
signature of clinical/medical director or designee

This describes the procedures for applying to have a drug added to the formulary, which are:

Applying to Have a Drug Added to the Formulary.

(a) Any member of the Committee, any practitioner, or any contract practitioner may apply to have a drug added to the PHF *Formulary* by completing the New Drug Application Form including:
   (1) published articles in biomedical literature that substantiate the efficacy and safety of the proposed drug;
   (2) information on the advantages of the proposed drug compared with similar formulary drugs;
   (3) a list of formulary drugs that the proposed drug would replace or supplement; and
   (4) cost effectiveness data.

(b) Submitting the application.
   (1) If the person submitting the application is a facility practitioner or a facility contract practitioner, then that practitioner submits the application to the facility's pharmacy and therapeutics committee for approval.
   (2) If the person submitting the application is a non-facility service system component practitioner or a non-facility service system component contract practitioner, then that practitioner submits the application to the component's medical director who determines if the application is appropriate and complete, and if so, forwards the application to the Committee.

(c) The Committee considers the drug application and recommends:
   (1) approving the proposed drug's inclusion and recommending dosage guidelines;
   (2) denying the proposed drug's inclusion;
   (3) approving the proposed drug on a trial basis for a specified period of time;
   (4) postponing the decision until a later meeting.

APPENDIX 2: CONFLICT OF INTEREST POLICY

Policy

It is the duty of The Committee to ensure balance, independence, objectivity and scientific rigor in determining the formulary. As such, the policy of the Committee is to prohibit any apparent or actual conflict of interest. Because of this, all staff of the Santa Barbara Psychiatric Health Facility (PHF) shall abide by this policy and submit a Conflict of Interest Disclosure Statement. This is not to prevent input from a member of the facility that may have significant financial interests, but rather to provide information to committee members and to the public so that conflicts can be resolved prior to the decision making process. It is solely left to the Committee to determine whether the individual's interests or relationships may influence them with regard to exposition or conclusions.
A conflict of interest for these purposes includes any situation in which a Committee member or individual submitting a request to the Committee has a private or personal interest sufficient to appear to influence the objective exercise of his/her duties for the agency. An apparent conflict of interest is one in which a reasonable person would think that the person's judgment is potentially compromised.

All individuals requesting drugs for addition to the formulary must disclose any and all significant financial interests or other relationships with the following:

a. The Manufacturer(s) of any commercial product and/or provider of commercial services for drugs on or being considered for the formulary

b. Any commercial support for these drugs

(Significant financial interest or other relationship can include such things as grants or research support, employee, consultant, major stockholder, member of speaker's bureau, etc.).

Procedure

1. Committee members shall submit Disclosure Statements at least annually and as needed as their situation changes. See Attachment A for the " Committee Disclosure Form."
2. Individuals submitting requests for addition to the Formulary or completing drug monographs shall submit the " Committee Disclosure Form" along with the New Drug Application or drug monograph, respectively.
3. A review of Committee members' conflict of interest shall be completed for all individuals present at each meeting. This information shall be documented in the minutes of each meeting.
4. Each facility Pharmacy and Therapeutics Committee is encouraged to adopt a similar policy.
5. The following definitions are applicable to this policy
   "Companies" – include pharmaceutical and biotechnology companies.

   "Compensation" - includes direct and indirect remuneration or royalties, and may also include, among other things, items and services at reduced prices, or with discounts or rebates.

"Controlling Interest" - a direct or indirect ownership or beneficial interest, individually or in conjunction with members of your family, which permits election or selection of a majority of the governing body of a Company and/or which permits the exercise of control over the affairs of such Company.

"Gifts" or "Gratuities" include, among other things, entertainment or recreational items, subsidies given *directly* to a healthcare professional for continuing medical education (CME), educational (i.e. anatomical models) and non-educational and practice-related items (i.e. items that do not advance disease or treatment education).

"Financial Interest" – a direct or indirect, through business, investment or family:

(a) Ownership Interest or investment interest in a Company;
(b) Compensation arrangement with a Company or any of its affiliates; or
(c) Ownership Interest or investment interest in, or Compensation arrangement with, any Company or individual with which that Company or any of its affiliates is negotiating a transaction or arrangement.

"Ownership Interest" - owns or controls directly, indirectly, or beneficially through such person's family, in excess of five percent (5%) of the total value of all securities of a Company.

"Significant Relationship" - a person or a member of such person's family serves as an officer, general or limited partner, board member, employee, speaker or consultant to a company.

Pharmacy&Therapeutic Committee Member Disclosure Form

Name: _____
Date: _____
Facility: _____

Member of Committee? □ Yes □ No

Submitting a New Drug Application? □ Yes □ No

Preparing the Drug Monograph? □ Yes □ No

I have read the Committee policy on conflicts of interest. In agreement with this policy, I hereby disclose the following:

[ ] I have no conflicts of interest to disclose.

-or-

[ ] * The following is a list of my potential conflicts of interest:

*Attach an additional sheet describing your potential conflict of interest.

I have made all of the required disclosures. I understand that it is my continuing obligation to provide disclosure of potential conflicts of interest. If I become aware of any specific conflicts, or if there is a change in my professional activities, financial interests, or employment, I will submit an additional disclosure form in accordance with Committee policies.

_____ _____
Signature Date

Reviewed by Committee:
□ Approved
□ Disapproved

_____
Date

APPENDIX 3: NON-FORMULARY DRUG JUSTIFICATION FORM

PHF

NON-*FORMULARY* DRUG JUSTIFICATION

Santa Barbara Psychiatric Health Facility (PHF)

Drug Name:_____ Trade:_____
Strength:_____

Exceptions to the *Formulary* are limited to the three categories listed below.

Reason for request:

- ☐ An illness for which no *Formulary* drug is as safe or effective.
- ☐ A trial supply in anticipation of application to *Formulary*.
- ☐ To prevent interruption of course of therapy established prior to admission.
- ☐ Other:_____

Quantity Ordered	Cost/ Unit	Total Purchase Cost	*Estimate Course Chronic Cost Per Month	*Estimate Course Acute Cost

☐ Alternative drugs are available on the *PHF Formulary*.

_____ Attending Physician (signature)

_____ Date

Was the drug ordered ☐ yes or ☐ no?

☐ AGREE ☐ DISAGREE

_____ Pharmacy Director or designee (signature) Date: _____

☐ APPROVED ☐ DISAPPROVED ☐ EMERGENCY

_____ Dr. Leslie Lundt, Medical Director Date: _____

APPENDIX 4: ADVERSE DRUG REACTION REPORTING (MEDWATCH) FORM

MEDWATCH
THE FDA MEDICAL PRODUCTS REPORTING PROGRAM

For VOLUNTARY reporting by health professionals of adverse events and product problems

Form Approved: OMB No. 0910-0291 Expires: 11/30/00
See OMB statement on reverse

FDA Use Only
Triage unit sequence #

Page ___ of ___

PLEASE TYPE OR USE BLACK INK

A. Patient information

1. Patient identifier — In confidence
2. Age at time of event: or Date of birth:
3. Sex: ☐ female ☐ male
4. Weight: ___ lbs or ___ kgs

B. Adverse event or product problem

1. ☐ Adverse event and/or ☐ Product problem (e.g., defects/malfunctions)
2. Outcomes attributed to adverse event (check all that apply)
   - ☐ death ___ (mo/day/yr)
   - ☐ life-threatening
   - ☐ hospitalization – initial or prolonged
   - ☐ disability
   - ☐ congenital anomaly
   - ☐ required intervention to prevent permanent impairment/damage
   - ☐ other: ___
3. Date of event (mo/day/yr)
4. Date of this report (mo/day/yr)
5. Describe event or problem
6. Relevant tests/laboratory data, including dates
7. Other relevant history, including preexisting medical conditions (e.g., allergies, race, pregnancy, smoking and alcohol use, hepatic/renal dysfunction, etc.)

C. Suspect medication(s)

1. Name (give labeled strength & mfr/labeler, if known) #1 #2
2. Dose, frequency & route used #1 #2
3. Therapy dates (if unknown, give duration) from/to (or best estimate) #1 #2
4. Diagnosis for use (indication) #1 #2
5. Event abated after use stopped or dose reduced #1 ☐ yes ☐ no ☐ doesn't apply #2 ☐ yes ☐ no ☐ doesn't apply
6. Lot # (if known) #1 #2
7. Exp. date (if known) #1 #2
8. Event reappeared after reintroduction #1 ☐ yes ☐ no ☐ doesn't apply #2 ☐ yes ☐ no ☐ doesn't apply
9. NDC # (for product problems only) – –
10. Concomitant medical products and therapy dates (exclude treatment of event)

D. Suspect medical device

1. Brand name
2. Type of device
3. Manufacturer name & address
4. Operator of device: ☐ health professional ☐ lay user/patient ☐ other: ___
5. Expiration date (mo/day/yr)
6. model # ___ catalog # ___ serial # ___ lot # ___ other #
7. If implanted, give date (mo/day/yr)
8. If explanted, give date (mo/day/yr)
9. Device available for evaluation? (Do not send to FDA) ☐ yes ☐ no ☐ returned to manufacturer on ___ (mo/day/yr)
10. Concomitant medical products and therapy dates (exclude treatment of event)

E. Reporter (see confidentiality section on back)

1. Name & address
2. Phone #
2. Health professional? ☐ yes ☐ no
3. Occupation
4. Also reported to: ☐ manufacturer ☐ user facility ☐ distributor
5. If you do NOT want your identity disclosed to the manufacturer, place an "X" in this box. ☐

FDA

Mail to: MEDWATCH, 5600 Fishers Lane, Rockville, MD 20852-9787 or FAX to: 1-800-FDA-0178

FDA Form 3500

Submission of a report does not constitute an admission that medical personnel or the product caused or contributed to the event.

ADVICE ABOUT VOLUNTARY REPORTING

Report experiences with:

- medications (drugs or biologics)
- medical devices (including in-vitro diagnostics)
- special nutritional products (dietary supplements, medical foods, infant formulas)
- other products regulated by FDA

Report SERIOUS adverse events. An event is serious when the patient outcome is:

- death
- life-threatening (real risk of dying)
- hospitalization (initial or prolonged)
- disability (significant, persistent or permanent)
- congenital anomaly
- required intervention to prevent permanent impairment or damage

Report even if:

- you're not certain the product caused the event
- you don't have all the details

Report product problems – quality, performance or safety concerns such as:

- suspected contamination
- questionable stability
- defective components
- poor packaging or labeling
- therapeutic failures

How to report:

- just fill in the sections that apply to your report
- use section C for all products except medical devices
- attach additional blank pages if needed
- use a separate form for each patient
- report either to FDA or the manufacturer (or both)

Important numbers:

- 1-800-FDA-0178 to FAX report
- 1-800-FDA-7737 to report by modem
- 1-800-FDA-1088 to report by phone or for more information
- 1-800-822-7967 for a VAERS form for vaccines

If your report involves a serious adverse event with a device and it occurred in a facility outside a doctor's office, that facility may be legally required to report to FDA and/or the manufacturer. Please notify the person in that facility who would handle such reporting.

Confidentiality: The patient's identity is held in strict confidence by FDA and protected to the fullest extent of the law. The reporter's identity, including the identity of a self-reporter, may be shared with the manufacturer unless requested otherwise. However, FDA will not disclose the reporter's identity in response to a request from the public, pursuant to the Freedom of Information Act.

The public reporting burden for this collection of information has been estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to:

DHHS Reports Clearance Office
Paperwork Reduction Project (0910-0291)
Hubert H. Humphrey Building, Room 531-H
200 Independence Avenue, S.W.
Washington, DC 20201

"An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number."

Please DO NOT RETURN this form to this address.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service • Food and Drug Administration

FDA Form 3500-back **Please Use Address Provided Below – Just Fold In Thirds, Tape and Mail**

Department of Health and Human Services
Public Health Service
Food and Drug Administration
Rockville, MD 20857

Official Business
Penalty for Private Use $300

BUSINESS REPLY MAIL
FIRST CLASS MAIL PERMIT NO. 946 ROCKVILLE, MD

POSTAGE WILL BE PAID BY FOOD AND DRUG ADMINISTRATION

MEDWATCH
The FDA Medical Products Reporting Program
Food and Drug Administration
5600 Fishers Lane
Rockville, MD 20852-9787

APPENDIX 5: FOODS CONTAINING TYRAMINE

****High Amounts of Tyramine***
Smoked, aged or pickled meat or fish
Sauerkraut
Aged Cheeses such as Swiss and Cheddar
Yeast extracts
Fava beans

*****Moderate Amounts of Tyramine***
Beer
Avocados
Meat extracts
Read wines such as Chianti

******Low Amounts of Tyramine***
Caffeine-containing beverages
Distilled spirits
Chocolate
Soy sauce
Cottage and cream cheeses
Yogurt and sour cream

*May not consume
**May consume in moderation
***May consume

Adapted from Shulman KI, et al. Dietary restriction, tyramine, and the use of monoamine oxidase inhibitors. J Clin Psychopharmacol. 1989; 9: 397.