

Umpqua Health Alliance Formulary (Preferred Drug List)

Effective January 1, 2022

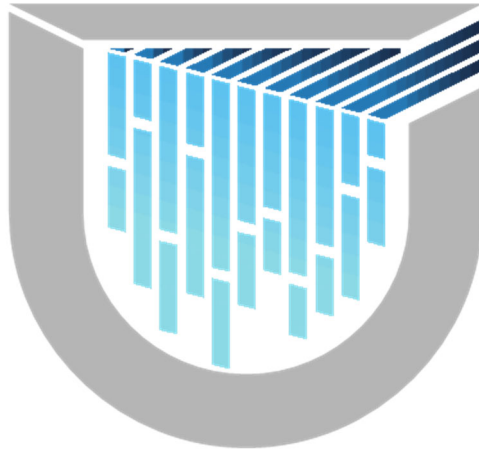


TABLE OF CONTENTS

| | |
|---|----|
| INTRODUCTION | 4 |
| WHAT IS A FORMULARY? | 4 |
| HOW DO I USE THE FORMULARY? | 4 |
| WHAT IS A BRAND, GENERIC and OTC DRUG? | 4 |
| ARE THERE RESTRICTIONS ON MY COVERAGE? | 5 |
| CAN I USE ANY PHARMACY? | 5 |
| DO I HAVE A COPAY? | 5 |
| FOR MORE INFORMATION | 5 |
| FORMULARY RESTRICTION LEGEND | 6 |
| FORMULARY | 7 |
| ALLERGY | 7 |
| ANTIEMESIS/ANTIVERTIGO | 9 |
| ASTHMA AND COPD | 10 |
| AUTONOMIC NERVOUS SYSTEM DISORDERS | 15 |
| BEHAVIORAL HEALTH - OTHER | 15 |
| CARDIOVASCULAR DISEASE - ARRHYTHMIA | 19 |
| CARDIOVASCULAR DISEASE - CARDIAC STIMULANT | 20 |
| CARDIOVASCULAR DISEASE - HYPERTENSION | 20 |
| CARDIOVASCULAR DISEASE - LIPID IRREGULARITY | 27 |
| CARDIOVASCULAR DISEASE - MISCELLANEOUS AGENTS | 30 |
| CARDIOVASCULAR DISEASE - VASODILATION | 30 |
| CONTRACEPTION/OXYTOCICS | 31 |
| COUGH AND COLD | 38 |
| DERMATOLOGY - ACNE | 42 |
| DERMATOLOGY - ANTIINFECTIVE | 42 |
| DERMATOLOGY - ANTIINFLAMMATORY | 44 |
| DERMATOLOGY - MISCELLANEOUS | 45 |
| DERMATOLOGY - PSORIASIS/ECZEMA | 46 |
| DIABETES | 47 |
| EAR - GENERAL DISORDERS | 50 |
| ELECTROLYTE REGULATION | 51 |
| ENDOCRINE DISORDER - OTHER | 51 |
| ENDOCRINE DISORDER - THYROID | 52 |
| EYE - GENERAL DISORDERS | 53 |
| EYE - GLAUCOMA | 55 |

| | |
|--|-----|
| GOUT AND RELATED DISEASES | 55 |
| HEMATOLOGICAL DISORDERS | 55 |
| HORMONAL DEFICIENCY..... | 58 |
| IMMUNIZATION | 61 |
| IMMUNOSUPPRESSION/MODULATION..... | 62 |
| INFECTIOUS DISEASE - BACTERIAL | 62 |
| INFECTIOUS DISEASE - FUNGAL | 66 |
| INFECTIOUS DISEASE - MISCELLANEOUS | 66 |
| INFECTIOUS DISEASE - PARASITIC | 67 |
| INFECTIOUS DISEASE - VIRAL | 67 |
| INFLAMMATORY DISEASE | 69 |
| LOCAL ANESTHESIA..... | 72 |
| LOWER GASTROINTESTINAL DISORDERS - BOWEL INFLAMMAT..... | 72 |
| LOWER GASTROINTESTINAL DISORDERS - OTHER..... | 72 |
| MEDICAL SUPPLIES..... | 78 |
| MISCELLANEOUS AGENTS..... | 78 |
| NEOPLASTIC DISEASE | 78 |
| NEUROLOGICAL DISEASE - MISCELLANEOUS..... | 81 |
| ORAL/PHARYNGEAL DISORDERS..... | 81 |
| OTHER DRUGS..... | 81 |
| OTHER RESPIRATORY DISORDERS..... | 83 |
| PAIN MANAGEMENT - ANALGESICS..... | 83 |
| PARKINSONS DISEASE | 92 |
| SEIZURE DISORDER..... | 93 |
| SKELETAL MUSCLE DISORDER | 95 |
| SMOKING CESSATION | 95 |
| UPPER GASTROINTESTINAL DISORDERS - DIGESTIVE | 96 |
| UPPER GASTROINTESTINAL DISORDERS - SPASTIC DISEASE..... | 97 |
| UPPER GASTROINTESTINAL DISORDERS - ULCER DISEASE | 97 |
| URINARY TRACT - FUNCTIONAL DISORDERS..... | 99 |
| VAGINAL DISORDERS | 100 |
| VITAMIN AND/OR MINERAL DEFICIENCY..... | 101 |
| APPENDIX A: DOSE FORM REFERENCE GUIDE | 115 |
| APPENDIX B: ALTERNATIVES FOR COMMONLY REQUESTED NON-FORMULARY DRUGS..... | 116 |
| ALPHABETICAL DRUG INDEX..... | 121 |

INTRODUCTION

Prescription drugs are a very important part of your healthcare benefits. The following information will help you get the most out of your prescription drug benefit.

WHAT IS A FORMULARY?

As a member of the Umpqua Health Alliance (UHA) CCO, you have Medicaid prescription drug coverage under the Oregon Health Plan (OHP). This booklet is your list of the drugs that we cover. We call it a drug “formulary.” A group of pharmacists and doctors decide which drugs should be in the formulary. Their goal is to create a formulary with drugs that are safe and effective and that offer the best value.

We usually update our formulary at least four times per year. The current version of our formulary is available on our website: www.umpquahealth.com.

HOW DO I USE THE FORMULARY?

There are two ways to find a drug in the formulary:

1. By medical condition

The drugs are organized into categories that match the type of medical conditions each drug treats. For example, drugs to allergies are listed under the category “Allergy.” If you know what a drug is used for, start by looking for its category in the table of contents. Then check the category for the name of your drug.

2. Alphabetically

If you’re not sure which category a drug is in, look for the drug in the index at the end of this booklet. The index provides an alphabetical listing of all the drugs included in the formulary and the page where they can be found in the formulary.

WHAT IS A BRAND, GENERIC AND OTC DRUG?

A generic drug is a copy of a brand-name drug. It has the same active ingredients as the brand-name drug. Generic drugs are approved by the U.S. Food and Drug Administration (FDA) after being tested for effectiveness and safety. They usually cost less than brand-name drugs and become available after the patent for a brand-name drug expires.

We cover both brand name and generic drugs. However, if a generic drug is available, we usually will not cover a brand name drug. The middle column of the formulary lists the drug type: brand, generic, or non drug (e.g. durable medical equipment). If the formulary lists only generic versions of a drug, this means that we do not cover the brand-name drug. In this column we also noted if a drug is over-the-counter (OTC).

ARE THERE RESTRICTIONS ON MY COVERAGE?

Yes. Some covered drugs may have special rules or restrictions related to their use. If there is a restriction on a drug, it is listed in the formulary under the “Restrictions” column next to the drug. This may include information on quantity limits, if the drug requires preapproval or step therapy, or if the drug has any other important restrictions (like an age restriction). The following section, “Formulary Restriction Legend”, describes each type of restriction in detail. Certain restrictions require additional approval or “prior authorization”. This means that we will not pay for the drug without first receiving the important information we need from your provider. Your provider can submit a Prior Authorization Form to us to request coverage.

Drugs usually are not covered unless they are in the formulary. However, if your provider believes a drug outside of our formulary is the best drug for you, the provider can ask us to cover it by submitting a Prior Authorization Form to us. Usually, we’ll approve formulary exception requests only if other formulary drugs would be less effective in treating your condition, or would cause side effects that could hurt you.

Drugs used to treat some conditions are not covered by OHP, such as drugs used to treat fibromyalgia, allergic rhinitis, fungal infections of the skin and nails, acne and chronic back pain. Drugs used for cosmetic purposes are also not covered by OHP. Drugs not approved by the FDA or used for non-medically accepted indications are also excluded from OHP coverage. However, we cover some over-the-counter (OTC) drugs that are listed in the formulary. These drugs have “OTC” noted in the middle column. These drugs are covered if you have a prescription for the drug from your provider.

Mental health drugs, such as antidepressants, anxiolytics and antipsychotics, are covered through the state’s Medical Assistance Programs (MAP). These drugs are not listed in this formulary. Your pharmacy sends the bill directly to MAP.

CAN I USE ANY PHARMACY?

No. You must use a participating network pharmacy when filling your drugs. An in-network pharmacy is a pharmacy that has agreed to work with our members. To check if your pharmacy is in our network, you can use the “Find A Pharmacy” tool on our website, www.umpquahealth.com. Most drugs are limited to a 30-day supply at a participating network pharmacy.

DO I HAVE A COPAY?

No. You do not have copays or tiers for your covered drugs. A copay is a set amount that you would pay for each drug. If a pharmacy asks you to pay for a prescription, call Customer Service before you pay.

FOR MORE INFORMATION

If you should have additional questions about the UHA Formulary, please contact Customer Service at 541-229-4842 Monday through Friday from 8:00 a.m. to 5:00 p.m. Pacific Time. TTY: (541)-440-6304 | Toll Free TTY: (888)-877-6304.

FORMULARY RESTRICTION LEGEND

The following restriction and coverage notes may be found in the right column in the formulary:

| Abbreviations | Definition | Explanation |
|---------------|------------------------------|--|
| PA | Prior Authorization Required | Prior authorization (e.g. prior approval) is required before filling a prescription for this drug. This means you will need to get approval from us to pay for your drug. Without prior authorization, we may not cover this drug. Your provider must submit a request for prior authorization with the appropriate documentation (including recent chart notes) before the drug is covered. |
| ST | Step Therapy Restriction | We require you to first try another lower-cost drug (“Step 1 drug”) before using the more expensive drug (“Step 2 drug”). If it is medically necessary for you to use a Step 2 drug first, your doctor will need to submit a request for prior authorization. |
| AR | Age Restriction | Coverage of this drug is limited to a specific age range. Covered ages are listed. A prior authorization is required for members outside of the listed age range. |
| QL | Quantity Limit | We will cover this drug only up to a certain quantity or limit per time or per fill. The specific quantity limit is listed. If you need quantities greater than the limit shown, your doctor can submit a request for prior authorization. |
| SPEC | Specialty Drug | Coverage for specialty drugs will only be provided if the drug is obtained through our contracted specialty pharmacy, MedImpact Direct Specialty Hub. <i>MedImpact Direct Specialty Hub</i> <i>Telephone: (877) 391-1103</i> <i>Fax: (888) 807-5716</i> <i>Website: www.medimpactdirect.com</i> |

FORMULARY

| DRUG NAME | TYPE | RESTRICTIONS |
|-----------|------|--------------|
|-----------|------|--------------|

ALLERGY

ANTIHISTAMINES - 1ST GENERATION

| | | |
|--|--------------|--|
| CHLORPHENIRAMINE MALEATE (ALLER-CHLOR) 4 MG ORAL TABLET | GENERIC, OTC | |
| CHLORPHENIRAMINE MALEATE (ALLERGY) 4 MG ORAL TABLET | GENERIC, OTC | |
| CHLORPHENIRAMINE MALEATE (ALLERGY RELIEF) 4 MG ORAL TABLET | GENERIC, OTC | |
| CHLORPHENIRAMINE MALEATE (ALLERGY-TIME) 4 MG ORAL TABLET | GENERIC, OTC | |
| CHLORPHENIRAMINE MALEATE (CHLORHIST) 4 MG ORAL TABLET | GENERIC, OTC | |
| CHLORPHENIRAMINE MALEATE 4 MG ORAL TABLET | GENERIC, OTC | |
| CHLORPHENIRAMINE MALEATE (CHLORTABS) 4 MG ORAL TABLET | GENERIC, OTC | |
| CHLORPHENIRAMINE MALEATE (PHARBECHLOR) 4 MG ORAL TABLET | GENERIC, OTC | |
| CHLORPHENIRAMINE MALEATE (WAL-FINATE) 4 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALER-CAPS) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALLER-G-TIME) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALLERGY) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALLERGY) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALLERGY) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALLERGY MEDICATION) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALLERGY MEDICATION) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALLERGY MEDICINE) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALLERGY RELIEF) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALLERGY RELIEF) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (ALLERGY RELIEF) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (BANOPHEN) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (BANOPHEN) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (BANOPHEN) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (BENADRYL ALLERGY) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (CHILDREN'S ALLERGY) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (CHILDREN'S ALLERGY RELIEF) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (CHILDREN'S DIPHENHYDRAMINE) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (CHILDREN'S WAL-DRYL ALLERGY) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (COMPLETE ALLERGY) 25 MG ORAL CAPSULE | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| DIPHENHYDRAMINE HCL (COMPLETE ALLERGY) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (DIPHEDRYL) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (DIPHEDRYL ALLERGY) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (DIPHEN) 12.5MG/5ML ORAL ELIXIR | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (DIPHEN) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (DIPHENHIST) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL 12.5MG/5ML ORAL ELIXIR | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (GERI-DRYL) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (GERI-DRYL) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (M-DRYL) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (NIGHTTIME ALLERGY RELIEF) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (PHARBEDRYL) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (PHARBEDRYL) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SILADRYL) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (TOTAL ALLERGY) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (WAL-DRYL) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (WAL-DRYL ALLERGY) 12.5MG/5ML ORAL LIQUID | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (WAL-DRYL ALLERGY) 25 MG ORAL TABLET | GENERIC, OTC | |
| HYDROXYZINE HCL 10 MG/5 ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| HYDROXYZINE HCL 10 MG ORAL TABLET | GENERIC, OTC | |
| HYDROXYZINE HCL 25 MG ORAL TABLET | GENERIC, OTC | |
| HYDROXYZINE HCL 50 MG ORAL TABLET | GENERIC, OTC | |
| HYDROXYZINE PAMOATE 25 MG ORAL CAPSULE | GENERIC, OTC | |
| HYDROXYZINE PAMOATE 50 MG ORAL CAPSULE | GENERIC, OTC | |
| HYDROXYZINE PAMOATE 100 MG ORAL CAPSULE | GENERIC, OTC | |
| PROMETHAZINE HCL 6.25MG/5ML ORAL SYRUP | GENERIC, OTC | AR (age 2 to 6) |
| PROMETHAZINE HCL 12.5 MG ORAL TABLET | GENERIC, OTC | |
| PROMETHAZINE HCL 25 MG ORAL TABLET | GENERIC, OTC | |
| PROMETHAZINE HCL 50 MG ORAL TABLET | GENERIC, OTC | |

ANTIHISTAMINES - 2ND GENERATION

| | | |
|---|--------------|-----------------|
| CETIRIZINE HCL (24HOUR ALLERGY) 10 MG ORAL TABLET | GENERIC, OTC | |
| CETIRIZINE HCL (ALL DAY ALLERGY) 10 MG ORAL TABLET | GENERIC, OTC | |
| CETIRIZINE HCL (ALLERGY) 10 MG ORAL TABLET | GENERIC, OTC | |
| CETIRIZINE HCL (ALLERGY RELIEF) 1 MG/ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| CETIRIZINE HCL (ALLERGY RELIEF) 10 MG ORAL TABLET | GENERIC, OTC | |
| CETIRIZINE HCL (ALLER-TEC) 10 MG ORAL TABLET | GENERIC, OTC | |
| CETIRIZINE HCL 1 MG/ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| CETIRIZINE HCL 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| CETIRIZINE HCL 5 MG ORAL TABLET | GENERIC, OTC | |
| CETIRIZINE HCL 10 MG ORAL TABLET | GENERIC, OTC | |
| CETIRIZINE HCL (CHILDREN'S ALL DAY ALLERGY) 1 MG/ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| CETIRIZINE HCL (CHILDREN'S ALLERGY) 1 MG/ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| CETIRIZINE HCL (CHILDREN'S ALLERGY RELIEF) 1 MG/ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| CETIRIZINE HCL (CHILDREN'S CETIRIZINE HCL) 1 MG/ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| CETIRIZINE HCL (CHILDREN'S WAL-ZYR) 1 MG/ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| CETIRIZINE HCL (WAL-ZYR) 1 MG/ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| CETIRIZINE HCL (WAL-ZYR) 10 MG ORAL TABLET | GENERIC, OTC | |
| LORATADINE (ALLERCLEAR) 10 MG ORAL TABLET | GENERIC, OTC | |
| LORATADINE (ALLERGY RELIEF) 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| LORATADINE (ALLERGY RELIEF) 10 MG ORAL TABLET | GENERIC, OTC | |
| LORATADINE (CHILDREN'S ALLERGY) 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| LORATADINE (CHILDREN'S ALLERGY RELIEF) 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| LORATADINE (CHILDREN'S LORATADINE) 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| LORATADINE (LORADAMED) 10 MG ORAL TABLET | GENERIC, OTC | |
| LORATADINE 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| LORATADINE 10 MG ORAL TABLET | GENERIC, OTC | |
| LORATADINE (LORATADINE ALLERGY) 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| LORATADINE (WAL-ITIN) 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | AR (age 2 to 6) |
| LORATADINE (WAL-ITIN) 10 MG ORAL TABLET | GENERIC, OTC | |

NASAL ANTI-INFLAMMATORY STEROIDS

| | | |
|--|--------------|--|
| FLUTICASONE PROPIONATE 50 MCG NASAL SPRAY SUSP | GENERIC, OTC | |
|--|--------------|--|

ANTIEMESIS/ANTIVERTIGO

ANTIEMETIC/ANTIVERTIGO AGENTS

| | | |
|--|--------------|------------|
| APREPITANT 125MG-80MG ORAL CAP DS PK | GENERIC, OTC | PA (Rx032) |
| APREPITANT 40 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx032) |
| APREPITANT 80 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx032) |
| APREPITANT 125 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx032) |
| MECLIZINE HCL (ANTIVERT) 50 MG ORAL TABLET | BRAND, OTC | |
| MECLIZINE HCL (DRAMAMINE LESS DROWSY) 25 MG ORAL TABLET | GENERIC, OTC | |
| MECLIZINE HCL 25 MG ORAL TAB CHEW | GENERIC, OTC | |
| MECLIZINE HCL 12.5 MG ORAL TABLET | GENERIC, OTC | |
| MECLIZINE HCL 25 MG ORAL TABLET | GENERIC, OTC | |
| MECLIZINE HCL (MEDI-MECLIZINE) 25 MG ORAL TABLET | GENERIC, OTC | |
| MECLIZINE HCL (MOTION SICKNESS) 25 MG ORAL TABLET | GENERIC, OTC | |
| MECLIZINE HCL (MOTION SICKNESS RELIEF) 25 MG ORAL TAB CHEW | GENERIC, OTC | |
| MECLIZINE HCL (MOTION SICKNESS RELIEF) 25 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|----------------------------------|
| MECLIZINE HCL (MOTION-TIME) 25 MG ORAL TAB CHEW | GENERIC, OTC | |
| MECLIZINE HCL (TRAVEL-EASE) 25 MG ORAL TABLET | GENERIC, OTC | |
| MECLIZINE HCL (VERTICALM) 25 MG ORAL TABLET | GENERIC, OTC | |
| MECLIZINE HCL (WAL-DRAM 2) 25 MG ORAL TABLET | GENERIC, OTC | |
| ONDANSETRON (ONDANSETRON ODT) 4 MG ORAL TAB RAPDIS | GENERIC, OTC | QL (4 tablets per day) |
| ONDANSETRON (ONDANSETRON ODT) 8 MG ORAL TAB RAPDIS | GENERIC, OTC | QL (4 tablets per day) |
| ONDANSETRON HCL 4 MG ORAL TABLET | GENERIC, OTC | QL (4 tablets per day) |
| ONDANSETRON HCL 8 MG ORAL TABLET | GENERIC, OTC | QL (4 tablets per day) |
| PROCHLORPERAZINE MALEATE (COMPRO) 25 MG RECTAL SUPP.RECT | GENERIC, OTC | QL (2 suppositories per 30 days) |
| PROCHLORPERAZINE MALEATE (PROCHLORPERAZINE) 25 MG RECTAL SUPP.RECT | GENERIC, OTC | QL (2 suppositories per 30 days) |
| PROCHLORPERAZINE MALEATE 5 MG ORAL TABLET | GENERIC, OTC | |
| PROCHLORPERAZINE MALEATE 10 MG ORAL TABLET | GENERIC, OTC | |
| PROMETHAZINE HCL 12.5 MG RECTAL SUPP.RECT | GENERIC, OTC | QL (2 suppositories per 30 days) |
| PROMETHAZINE HCL 25 MG RECTAL SUPP.RECT | GENERIC, OTC | QL (2 suppositories per 24 days) |
| PROMETHAZINE HCL 50 MG RECTAL SUPP.RECT | GENERIC, OTC | QL (2 suppositories per 30 days) |
| PROMETHAZINE HCL (PROMETHEGAN) 12.5 MG RECTAL SUPP.RECT | GENERIC, OTC | QL (2 suppositories per 30 days) |
| PROMETHAZINE HCL (PROMETHEGAN) 25 MG RECTAL SUPP.RECT | GENERIC, OTC | QL (2 suppositories per 24 days) |
| PROMETHAZINE HCL (PROMETHEGAN) 50 MG RECTAL SUPP.RECT | GENERIC, OTC | QL (2 suppositories per 30 days) |

ASTHMA AND COPD

ANTICHOLINERGIC, ORALLY INHALED SHORT ACTING

| | | |
|--|--------------|--|
| IPRATROPIUM BROMIDE (ATROVENT HFA) 17MCG INHALATION HFA AER AD | BRAND, OTC | |
| IPRATROPIUM BROMIDE 0.2 MG/ML INHALATION SOLUTION | GENERIC, OTC | |

ANTICHOLINERGICS, ORALLY INHALED LONG ACTING

| | | |
|---|------------|----------------------|
| TIOTROPIUM BROMIDE (SPIRIVA) 18 MCG INHALATION CAP W/DEV | BRAND, OTC | ST (Incruse Ellipta) |
| TIOTROPIUM BROMIDE (SPIRIVA RESPIMAT) 1.25 MCG INHALATION MIST INHAL | BRAND, OTC | ST (Incruse Ellipta) |
| TIOTROPIUM BROMIDE (SPIRIVA RESPIMAT) 2.5 MCG INHALATION MIST INHAL | BRAND, OTC | ST (Incruse Ellipta) |
| UMECLIDINIUM BROMIDE (INCRUSE ELLIPTA) 62.5 MCG INHALATION BLST W/DEV | BRAND, OTC | |

BETA-ADRENERGIC AGENTS

| | | |
|--|--------------|--|
| ALBUTEROL SULFATE 2 MG/5 ML ORAL SYRUP | GENERIC, OTC | |
| ALBUTEROL SULFATE 2 MG ORAL TABLET | GENERIC, OTC | |
| ALBUTEROL SULFATE 4 MG ORAL TABLET | GENERIC, OTC | |
| METAPROTERENOL SULFATE 10 MG/5 ML ORAL SYRUP | GENERIC, OTC | |
| TERBUTALINE SULFATE 2.5 MG ORAL TABLET | GENERIC, OTC | |
| TERBUTALINE SULFATE 5 MG ORAL TABLET | GENERIC, OTC | |

BETA-ADRENERGIC AGENTS, INHALED, SHORT ACTING

| | | |
|--|--------------|--|
| ALBUTEROL SULFATE 5 MG/ML INHALATION SOLUTION | GENERIC, OTC | |
| ALBUTEROL SULFATE 0.63MG/3ML INHALATION VIAL-NEB | GENERIC, OTC | |
| ALBUTEROL SULFATE 1.25MG/3ML INHALATION VIAL-NEB | GENERIC, OTC | |
| ALBUTEROL SULFATE 2.5 MG/3ML INHALATION VIAL-NEB | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| ALBUTEROL SULFATE 2.5 MG/0.5 INHALATION VIAL-NEB | GENERIC, OTC | |
| ALBUTEROL SULFATE (ALBUTEROL SULFATE HFA) 90 MCG INHALATION HFA AER AD | GENERIC, OTC | |
| LEVALBUTEROL HCL (LEVALBUTEROL CONCENTRATE) 1.25MG/0.5 INHALATION VIAL-NEB | GENERIC, OTC | |
| LEVALBUTEROL HCL 0.31MG/3ML INHALATION VIAL-NEB | GENERIC, OTC | |
| LEVALBUTEROL HCL 0.63MG/3ML INHALATION VIAL-NEB | GENERIC, OTC | |
| LEVALBUTEROL HCL 1.25MG/3ML INHALATION VIAL-NEB | GENERIC, OTC | |
| LEVALBUTEROL TARTRATE (LEVALBUTEROL TARTRATE HFA) 45 MCG INHALATION HFA AER AD | GENERIC, OTC | |

BETA-ADRENERGIC AGENTS, INHALED, ULTRA-LONG ACTING

| | | |
|---|------------|--|
| OLODATEROL HCL (STRIVERDI RESPIMAT) 2.5 MCG INHALATION MIST INHAL | BRAND, OTC | |
|---|------------|--|

BETA-ADRENERGIC AGENTS, ORALLY INHALED, LONG ACTING

| | | |
|---|------------|---------------------------|
| SALMETEROL XINAFOATE (SEREVENT DISKUS) 50 MCG INHALATION BLST W/DEV | BRAND, OTC | ST (Arcapta or Striverdi) |
|---|------------|---------------------------|

BETA-ADRENERGIC AND ANTICHOLINERGIC COMBINATIONS

| | | |
|--|--------------|--|
| GLYCOPYRROLATE/FORMOTEROL FUM (BEVESPI AEROSPHERE) 9-4.8 MCG INHALATION HFA AER AD | BRAND, OTC | |
| IPRATROPIUM/ALBUTEROL SULFATE (COMBIVENT RESPIMAT) 20-100 MCG INHALATION MIST INHAL | BRAND, OTC | |
| IPRATROPIUM/ALBUTEROL SULFATE (IPRATROPIUM-ALBUTEROL) 0.5-3MG/3 INHALATION AMPUL-NEB | GENERIC, OTC | |
| TIOTROPIUM BR/OLODATEROL HCL (STIOLTO RESPIMAT) 2.5-2.5MCG INHALATION MIST INHAL | BRAND, OTC | |
| UMECLIDINIUM BRM/VILANTEROL TR (ANORO ELLIPTA) 62.5-25MCG INHALATION BLST W/DEV | BRAND, OTC | |

BETA-ADRENERGIC AND GLUCOCORTICOID COMBINATIONS

| | | |
|--|--------------|--|
| BUDESONIDE/FORMOTEROL FUMARATE (BUDESONIDE-FORMOTEROL FUMARATE) 80-4.5 MCG INHALATION HFA AER AD | GENERIC, OTC | |
| BUDESONIDE/FORMOTEROL FUMARATE (BUDESONIDE-FORMOTEROL FUMARATE) 160-4.5MCG INHALATION HFA AER AD | GENERIC, OTC | |
| FLUTICASONE/SALMETEROL (FLUTICASONE-SALMETEROL) 55-14 MCG INHALATION AER POW BA | GENERIC, OTC | |
| FLUTICASONE/SALMETEROL (FLUTICASONE-SALMETEROL) 113-14 MCG INHALATION AER POW BA | GENERIC, OTC | |
| FLUTICASONE/SALMETEROL (FLUTICASONE-SALMETEROL) 232-14 MCG INHALATION AER POW BA | GENERIC, OTC | |
| FLUTICASONE/SALMETEROL (FLUTICASONE-SALMETEROL) 100-50 MCG INHALATION BLST W/DEV | GENERIC, OTC | |
| FLUTICASONE/SALMETEROL (FLUTICASONE-SALMETEROL) 250-50 MCG INHALATION BLST W/DEV | GENERIC, OTC | |
| FLUTICASONE/SALMETEROL (FLUTICASONE-SALMETEROL) 500-50 MCG INHALATION BLST W/DEV | GENERIC, OTC | |
| FLUTICASONE/SALMETEROL (WIXELA INHUB) 100-50 MCG INHALATION BLST W/DEV | GENERIC, OTC | |
| FLUTICASONE/SALMETEROL (WIXELA INHUB) 250-50 MCG INHALATION BLST W/DEV | GENERIC, OTC | |
| FLUTICASONE/SALMETEROL (WIXELA INHUB) 500-50 MCG INHALATION BLST W/DEV | GENERIC, OTC | |
| MOMETASONE/FORMOTEROL (DULERA) 50MCG-5MCG INHALATION HFA AER AD | BRAND, OTC | ST (fluticasone/salmeterol [generic Advair or AirDuo]) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|-------------|--|
| MOMETASONE/FORMOTEROL (DULERA) 100-5 MCG INHALATION HFA AER AD | BRAND, OTC | ST (fluticasone/salmeterol [generic Advair or AirDuo]) |
| MOMETASONE/FORMOTEROL (DULERA) 200-5 MCG INHALATION HFA AER AD | BRAND, OTC | ST (fluticasone/salmeterol [generic Advair or AirDuo]) |

BETA-ADRENERGIC-ANTICHOLINERGIC-GLUCOCORT, INHALED

| | | |
|---|------------|------------|
| FLUTICASONE/UMECLIDIN/VILANTER (TRELEGY ELLIPTA) 100-62.5 INHALATION BLST W/DEV | BRAND, OTC | PA (Rx041) |
| FLUTICASONE/UMECLIDIN/VILANTER (TRELEGY ELLIPTA) 200-62.5 INHALATION BLST W/DEV | BRAND, OTC | PA (Rx041) |

GLUCOCORTICIDS, ORALLY INHALED

| | | |
|--|--------------|--|
| BECLOMETHASONE DIPROPIONATE (QVAR REDHALER) 40 MCG INHALATION HFA AEROBA | BRAND, OTC | |
| BECLOMETHASONE DIPROPIONATE (QVAR REDHALER) 80 MCG INHALATION HFA AEROBA | BRAND, OTC | |
| BUDESONIDE 0.25MG/2ML INHALATION AMPUL-NEB | GENERIC, OTC | |
| BUDESONIDE 0.5 MG/2ML INHALATION AMPUL-NEB | GENERIC, OTC | |
| BUDESONIDE 1 MG/2 ML INHALATION AMPUL-NEB | GENERIC, OTC | |
| BUDESONIDE (PULMICORT FLEXHALER) 90 MCG INHALATION AER POW BA | BRAND, OTC | |
| BUDESONIDE (PULMICORT FLEXHALER) 180 MCG INHALATION AER POW BA | BRAND, OTC | |
| FLUTICASONE FUROATE (ARNUITY ELLIPTA) 50 MCG INHALATION BLST W/DEV | BRAND, OTC | |
| FLUTICASONE FUROATE (ARNUITY ELLIPTA) 100 MCG INHALATION BLST W/DEV | BRAND, OTC | |
| FLUTICASONE FUROATE (ARNUITY ELLIPTA) 200 MCG INHALATION BLST W/DEV | BRAND, OTC | |
| FLUTICASONE PROPIONATE (FLOVENT DISKUS) 50 MCG INHALATION BLST W/DEV | BRAND, OTC | |
| FLUTICASONE PROPIONATE (FLOVENT DISKUS) 100 MCG INHALATION BLST W/DEV | BRAND, OTC | |
| FLUTICASONE PROPIONATE (FLOVENT DISKUS) 250 MCG INHALATION BLST W/DEV | BRAND, OTC | |
| FLUTICASONE PROPIONATE (FLOVENT HFA) 44 MCG INHALATION AER W/ADAP | BRAND, OTC | |
| FLUTICASONE PROPIONATE (FLOVENT HFA) 110 MCG INHALATION AER W/ADAP | BRAND, OTC | |
| MOMETASONE FUROATE (ASMANEX) 110MCG(30) INHALATION AER POW BA | BRAND, OTC | |
| MOMETASONE FUROATE (ASMANEX) 220MCG 120 INHALATION AER POW BA | BRAND, OTC | |
| MOMETASONE FUROATE (ASMANEX) 220MCG(60) INHALATION AER POW BA | BRAND, OTC | |
| MOMETASONE FUROATE (ASMANEX) 220MCG(30) INHALATION AER POW BA | BRAND, OTC | |
| MOMETASONE FUROATE (ASMANEX HFA) 50 MCG INHALATION HFA AER AD | BRAND, OTC | |
| MOMETASONE FUROATE (ASMANEX HFA) 100 MCG INHALATION HFA AER AD | BRAND, OTC | |
| MOMETASONE FUROATE (ASMANEX HFA) 200 MCG INHALATION HFA AER AD | BRAND, OTC | |

LEUKOTRIENE RECEPTOR ANTAGONISTS

| DRUG NAME | TYPE | RESTRICTIONS |
|---------------------------------------|--------------|------------------------|
| MONTELUKAST SODIUM 4 MG ORAL TAB CHEW | GENERIC, OTC | AR (age 5 and younger) |
| MONTELUKAST SODIUM 5 MG ORAL TAB CHEW | GENERIC, OTC | AR (age 6 to 14) |
| MONTELUKAST SODIUM 10 MG ORAL TABLET | GENERIC, OTC | AR (age 6 and older) |
| ZAFIRLUKAST 10 MG ORAL TABLET | GENERIC, OTC | ST (montelukast) |
| ZAFIRLUKAST 20 MG ORAL TABLET | GENERIC, OTC | ST (montelukast) |

MAST CELL STABILIZERS, ORALLY INHALED

| | | |
|---|--------------|--|
| CROMOLYN SODIUM 20 MG/2 ML INHALATION AMPUL-NEB | GENERIC, OTC | |
|---|--------------|--|

RESPIRATORY AIDS, DEVICES, EQUIPMENT

| | | |
|--|---------------|----------------------------|
| INHALER, ASSIST DEVICES (ACE AEROSOL CLOUD ENHANCER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (AEROCHAMBER MINI) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (AEROCHAMBER MV) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (AEROCHAMBER PLUS FLOW-VU) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (AEROCHAMBER WITH FLOWSIGNAL) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (AEROCHAMBER Z-STAT PLUS) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (AEROTRACH PLUS) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (AEROVENT PLUS) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (BREATHERITE) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (BREATHERITE SPACER-ADULT MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (BREATHERITE SPACER-INFANT MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (BREATHERITE SPACER-LG CHLD MSK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (BREATHERITE SPACER-NEONATE MSK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (BREATHERITE SPACER-SM CHLD MSK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (BREATHRITE) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (CLEVER CHOICE HOLDING CHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (COMPACT SPACE CHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (EASIVENT) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (EASIVENT) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (FLEXICHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (IN-CHECK DIAL) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (INSPIRACHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|---------------|----------------------------|
| INHALER, ASSIST DEVICES (LITEAIRE) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (MICROCHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (MICROSPACER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (MISTASSIST) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (MOUTHPIECE) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (ONE WAY MOUTHPIECE) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (OPTICHAMBER) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (OPTICHAMBER DIAMOND) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (PANDA MASK) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (PEDIATRIC MASK) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (PEDIATRIC PANDA MASK) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (PFLEX TRAINER) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (POCKET CHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (PRIMEAIRE) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (PROCARE SPACER WITH ADULT MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (PROCARE SPACER WITH CHILD MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (PROCHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (RITEFLO) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (SIDESTREAM PEDIATRIC) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (SILICONE MASK) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (SPACE CHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (THRESHOLD IMT) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (THRESHOLD PEP) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (VORTEX) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (VORTEX) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (VORTEX VHC FROG MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|---------------|----------------------------|
| INHALER, ASSIST DEVICES (VORTEX VHC LADYBUG MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER, ASSIST DEVICES (WINDMILL TRAINER) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| inhaler,assist dev,small mask (CLEVER CHOICE HOLDING CHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| inhaler,assist dev,small mask (COMPACT SPACE CHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| inhaler,assist dev,small mask (PRO COMFORT SPACER WITH MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| inhaler,assist dev,small mask (SPACE CHAMBER-SMALL MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER,ASSIST DEVICE,ACCESORY (FLEXICHAMBER MASK) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER,ASSIST DEVICE,ACCESORY (LITETOUCH) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| INHALER,ASSIST DEVICE,ACCESORY (SIDESTREAM PEDIATRIC) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| inhaler,assist device,lg mask (CLEVER CHOICE HOLDING CHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| inhaler,assist device,lg mask (COMPACT SPACE CHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| inhaler,assist device,lg mask (PRO COMFORT SPACER WITH MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| inhaler,assist device,lg mask (SPACE CHAMBER-LARGE MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| inhaler,assist device,med mask (COMPACT SPACE CHAMBER) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| inhaler,assist device,med mask (SPACE CHAMBER-MEDIUM MASK) MISCELL. SPACER | NON DRUG, OTC | QL (1 device per 180 days) |
| NEBULIZER ACCESSORIES (EASIVENT) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |
| SPIROMETER/DRUG DELIVERY ADAPT (MISTASSIST KIT) MISCELL. EACH | NON DRUG, OTC | QL (1 device per 180 days) |

XANTHINES

| | | |
|---|--------------|--|
| THEOPHYLLINE ANHYDROUS (THEOCHRON) 100 MG ORAL TAB ER 12H | GENERIC, OTC | |
| THEOPHYLLINE ANHYDROUS (THEOCHRON) 200 MG ORAL TAB ER 12H | GENERIC, OTC | |
| THEOPHYLLINE ANHYDROUS (THEOCHRON) 300 MG ORAL TAB ER 12H | GENERIC, OTC | |
| THEOPHYLLINE ANHYDROUS 300 MG ORAL TAB ER 12H | GENERIC, OTC | |
| THEOPHYLLINE ANHYDROUS 450 MG ORAL TAB ER 12H | GENERIC, OTC | |

AUTONOMIC NERVOUS SYSTEM DISORDERS

CHOLINESTERASE INHIBITORS

| | | |
|---|--------------|------------------------|
| DONEPEZIL HCL 5 MG ORAL TABLET | GENERIC, OTC | QL (2 tablets per day) |
| DONEPEZIL HCL 10 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day) |
| DONEPEZIL HCL (DONEPEZIL HCL ODT) 5 MG ORAL TAB RAPDIS | GENERIC, OTC | QL (2 tablets per day) |
| DONEPEZIL HCL (DONEPEZIL HCL ODT) 10 MG ORAL TAB RAPDIS | GENERIC, OTC | QL (1 tablet per day) |

BEHAVIORAL HEALTH - OTHER

ADRENERGICS, AROMATIC, NON-CATECHOLAMINE

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHET ER) 5 MG ORAL CAP ER 24H | GENERIC, OTC | PA (Rx002) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHET ER) 10 MG ORAL CAP ER 24H | GENERIC, OTC | PA (Rx002) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHET ER) 15 MG ORAL CAP ER 24H | GENERIC, OTC | PA (Rx002) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHET ER) 20 MG ORAL CAP ER 24H | GENERIC, OTC | PA (Rx002) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHET ER) 25 MG ORAL CAP ER 24H | GENERIC, OTC | PA (Rx002) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHET ER) 30 MG ORAL CAP ER 24H | GENERIC, OTC | PA (Rx002) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHETAMINE) 5 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHETAMINE) 7.5 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHETAMINE) 10 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHETAMINE) 12.5 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHETAMINE) 15 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHETAMINE) 20 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| AMPHET ASP/AMPHET/D-AMPHET (DEXTROAMPHETAMINE-AMPHETAMINE) 30 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| D-AMPHETAMINE SULFATE (DEXTROAMPHETAMINE SULFATE) 5 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| D-AMPHETAMINE SULFATE (DEXTROAMPHETAMINE SULFATE) 10 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| D-AMPHETAMINE SULFATE (DEXTROAMPHETAMINE SULFATE ER) 5 MG ORAL CAPSULE ER | GENERIC, OTC | PA (Rx002) |
| D-AMPHETAMINE SULFATE (DEXTROAMPHETAMINE SULFATE ER) 10 MG ORAL CAPSULE ER | GENERIC, OTC | PA (Rx002) |
| D-AMPHETAMINE SULFATE (DEXTROAMPHETAMINE SULFATE ER) 15 MG ORAL CAPSULE ER | GENERIC, OTC | PA (Rx002) |
| D-AMPHETAMINE SULFATE (ZENZEDI) 5 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| D-AMPHETAMINE SULFATE (ZENZEDI) 10 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |

ANTI-ALCOHOLIC PREPARATIONS

| | | |
|---|--------------|--|
| ACAMPROSATE CALCIUM 333 MG ORAL TABLET DR | GENERIC, OTC | |
| DISULFIRAM 250 MG ORAL TABLET | GENERIC, OTC | |
| DISULFIRAM 500 MG ORAL TABLET | GENERIC, OTC | |

BARBITURATES

| | | |
|--------------------------------------|--------------|--|
| PHENOBARBITAL 20 MG/5 ML ORAL ELIXIR | GENERIC, OTC | |
| PHENOBARBITAL 15 MG ORAL TABLET | GENERIC, OTC | |
| PHENOBARBITAL 30 MG ORAL TABLET | GENERIC, OTC | |
| PHENOBARBITAL 32.4 MG ORAL TABLET | GENERIC, OTC | |
| PHENOBARBITAL 60 MG ORAL TABLET | GENERIC, OTC | |
| PHENOBARBITAL 64.8 MG ORAL TABLET | GENERIC, OTC | |
| PHENOBARBITAL 97.2MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|----------------------------------|--------------|---------------------|
| PHENOBARBITAL 100 MG ORAL TABLET | GENERIC, OTC | |

NARCOTIC ANTAGONISTS

| | | |
|--|--------------|--|
| NALOXONE HCL 0.4 MG/ML INJECTION VIAL | GENERIC, OTC | |
| NALOXONE HCL (NARCAN) 4 MG NASAL SPRAY | BRAND, OTC | |
| NALTREXONE HCL 50 MG ORAL TABLET | GENERIC, OTC | |

PINEAL HORMONE AGENTS

| | | |
|---|--------------|--|
| MELATONIN (MELATIN) 3 MG ORAL TABLET | GENERIC, OTC | |
| MELATONIN 5 MG ORAL CAPSULE | BRAND, OTC | |
| MELATONIN 10 MG ORAL CAPSULE | BRAND, OTC | |
| MELATONIN 10 MG ORAL TAB MPHASE | BRAND, OTC | |
| MELATONIN 3 MG ORAL TAB RAPDIS | GENERIC, OTC | |
| MELATONIN 5 MG ORAL TAB RAPDIS | BRAND, OTC | |
| MELATONIN 1 MG ORAL TABLET | GENERIC, OTC | |
| MELATONIN 3 MG ORAL TABLET | GENERIC, OTC | |
| MELATONIN 5 MG ORAL TABLET | BRAND, OTC | |
| MELATONIN 10 MG ORAL TABLET | GENERIC, OTC | |
| MELATONIN 1 MG ORAL TABLET ER | GENERIC, OTC | |
| MELATONIN (MELATONIN-VITAMIN B6) 3 MG-10 MG ORAL TABLET | GENERIC, OTC | |

SEDATIVE-HYPNOTICS - BENZODIAZEPINES

| | | |
|--------------------------------|--------------|------------|
| TEMAZEPAM 15 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx033) |
| TEMAZEPAM 22.5 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx033) |
| TEMAZEPAM 30 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx033) |

SEDATIVE-HYPNOTICS, NON-BARBITURATE

| | | |
|---|--------------|--|
| DIPHENHYDRAMINE HCL (ALKA-SELTZER PLUS ALLERGY) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (EZ NITE SLEEP) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (NIGHTTIME SLEEP AID) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (NIGHTTIME SLEEP AID) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (NIGHTTIME SLEEP AID) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (NIGHTTIME SLEEP GEL) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (NYTOL QUICKCAPS) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SIMPLY SLEEP) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SLEEP AID) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SLEEP AID) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SLEEP AID) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SLEEP II) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SLEEP TABLET) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SLEEP TABS) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SLEEP TIME) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SLEEP-AID) 25 MG ORAL CAPSULE | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|------------------------|
| DIPHENHYDRAMINE HCL (SLEEPING) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (SOMINEX) 25 MG ORAL TABLET | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (UNISOM) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (WAL-SLEEP Z) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (WAL-SLEEP Z) 25 MG ORAL TAB RAPDIS | GENERIC, OTC | |
| DIPHENHYDRAMINE HCL (WAL-SOM) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DOXYLAMINE SUCCINATE (NIGHTTIME SLEEP-AID) 25 MG ORAL TABLET | GENERIC, OTC | |
| DOXYLAMINE SUCCINATE (SLEEP AID) 25 MG ORAL TABLET | GENERIC, OTC | |
| DOXYLAMINE SUCCINATE (UNISOM SLEEP AID) 25 MG ORAL TABLET | GENERIC, OTC | |
| DOXYLAMINE SUCCINATE (WAL-SOM) 25 MG ORAL TABLET | GENERIC, OTC | |
| ZOLPIDEM TARTRATE (ZOLPIDEM) 5MG ORAL TABLET | GENERIC, OTC | QL (2 tablets per day) |
| ZOLPIDEM TARTRATE 5 MG ORAL TABLET | GENERIC, OTC | QL (2 tablets per day) |
| ZOLPIDEM TARTRATE 5MG ORAL TABLET | GENERIC, OTC | QL (2 tablets per day) |
| ZOLPIDEM TARTRATE 10 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day) |
| ZOLPIDEM TARTRATE 10MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day) |

TX FOR ATTENTION DEFICIT-HYPERACT(ADHD)/NARCOLEPSY

| | | |
|--|--------------|--|
| DEXMETHYLPHENIDATE HCL 2.5 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| DEXMETHYLPHENIDATE HCL 5 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| DEXMETHYLPHENIDATE HCL 10 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18) |
| DEXMETHYLPHENIDATE HCL (DEXMETHYLPHENIDATE HCL ER) 5 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| DEXMETHYLPHENIDATE HCL (DEXMETHYLPHENIDATE HCL ER) 10 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| DEXMETHYLPHENIDATE HCL (DEXMETHYLPHENIDATE HCL ER) 15 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| DEXMETHYLPHENIDATE HCL (DEXMETHYLPHENIDATE HCL ER) 20 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| DEXMETHYLPHENIDATE HCL (DEXMETHYLPHENIDATE HCL ER) 25 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| DEXMETHYLPHENIDATE HCL (DEXMETHYLPHENIDATE HCL ER) 30 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| DEXMETHYLPHENIDATE HCL (DEXMETHYLPHENIDATE HCL ER) 35 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| DEXMETHYLPHENIDATE HCL (DEXMETHYLPHENIDATE HCL ER) 40 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METADATE ER) 20 MG ORAL TABLET ER | GENERIC, OTC | AR (age 6 to 18); QL (3 tablets per day) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE ER) 18 MG ORAL TAB ER 24 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE ER) 27 MG ORAL TAB ER 24 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE ER) 36 MG ORAL TAB ER 24 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE ER) 54 MG ORAL TAB ER 24 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE ER) 10 MG ORAL TABLET ER | GENERIC, OTC | AR (age 6 to 18); QL (3 tablets per day) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|--|
| METHYLPHENIDATE HCL (METHYLPHENIDATE ER) 20 MG ORAL TABLET ER | GENERIC, OTC | AR (age 6 to 18); QL (3 tablets per day) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE ER (LA)) 10 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE ER (LA)) 20 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE ER (LA)) 30 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE ER (LA)) 40 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL 2.5 MG ORAL TAB CHEW | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL 5 MG ORAL TAB CHEW | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL 10 MG ORAL TAB CHEW | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL 5 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18); QL (4 tablets per day) |
| METHYLPHENIDATE HCL 10 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18); QL (4 tablets per day) |
| METHYLPHENIDATE HCL 20 MG ORAL TABLET | GENERIC, OTC | AR (age 6 to 18); QL (4 tablets per day) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL CD) 10 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL CD) 20 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL CD) 30 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL CD) 40 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL CD) 50 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL CD) 60 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL ER (CD)) 10 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL ER (CD)) 20 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL ER (CD)) 30 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL ER (CD)) 40 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL ER (CD)) 50 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE HCL ER (CD)) 60 MG ORAL CPBP 30-70 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE LA) 10 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE LA) 20 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE LA) 30 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |
| METHYLPHENIDATE HCL (METHYLPHENIDATE LA) 40 MG ORAL CPBP 50-50 | GENERIC, OTC | PA (Rx002) |

CARDIOVASCULAR DISEASE - ARRHYTHMIA

| DRUG NAME | TYPE | RESTRICTIONS |
|------------------|-------------|---------------------|
|------------------|-------------|---------------------|

ANTIARRHYTHMICS

| | | |
|--|--------------|--|
| AMIODARONE HCL 200 MG ORAL TABLET | GENERIC, OTC | |
| AMIODARONE HCL (PACERONE) 200 MG ORAL TABLET | GENERIC, OTC | |
| DISOPYRAMIDE PHOSPHATE 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DISOPYRAMIDE PHOSPHATE 150 MG ORAL CAPSULE | GENERIC, OTC | |
| FLECAINIDE ACETATE 50 MG ORAL TABLET | GENERIC, OTC | |
| FLECAINIDE ACETATE 100 MG ORAL TABLET | GENERIC, OTC | |
| FLECAINIDE ACETATE 150 MG ORAL TABLET | GENERIC, OTC | |
| PROPAFENONE HCL 150 MG ORAL TABLET | GENERIC, OTC | |
| PROPAFENONE HCL 225 MG ORAL TABLET | GENERIC, OTC | |
| PROPAFENONE HCL 300 MG ORAL TABLET | GENERIC, OTC | |
| QUINIDINE SULFATE 200 MG ORAL TABLET | GENERIC, OTC | |
| QUINIDINE SULFATE 300 MG ORAL TABLET | GENERIC, OTC | |

CARDIOVASCULAR DISEASE - CARDIAC STIMULANT

DIGITALIS GLYCOSIDES

| | | |
|---------------------------------------|--------------|--|
| DIGOXIN (DIGITEK) 125 MCG ORAL TABLET | GENERIC, OTC | |
| DIGOXIN (DIGITEK) 250 MCG ORAL TABLET | GENERIC, OTC | |
| DIGOXIN (DIGOX) 125 MCG ORAL TABLET | GENERIC, OTC | |
| DIGOXIN (DIGOX) 250 MCG ORAL TABLET | GENERIC, OTC | |
| DIGOXIN 125 MCG ORAL TABLET | GENERIC, OTC | |
| DIGOXIN 250 MCG ORAL TABLET | GENERIC, OTC | |

CARDIOVASCULAR DISEASE - HYPERTENSION

ACE INHIBITOR/CALCIUM CHANNEL BLOCKER COMBINATION

| | | |
|---|--------------|--|
| AMLODIPINE BESYLATE/BENAZEPRIL (AMLODIPINE BESYLATE-BENAZEPRIL) 2.5MG-10MG ORAL CAPSULE | GENERIC, OTC | |
| AMLODIPINE BESYLATE/BENAZEPRIL (AMLODIPINE BESYLATE-BENAZEPRIL) 5 MG-10 MG ORAL CAPSULE | GENERIC, OTC | |
| AMLODIPINE BESYLATE/BENAZEPRIL (AMLODIPINE BESYLATE-BENAZEPRIL) 5 MG-20 MG ORAL CAPSULE | GENERIC, OTC | |
| AMLODIPINE BESYLATE/BENAZEPRIL (AMLODIPINE BESYLATE-BENAZEPRIL) 5 MG-40 MG ORAL CAPSULE | GENERIC, OTC | |
| AMLODIPINE BESYLATE/BENAZEPRIL (AMLODIPINE BESYLATE-BENAZEPRIL) 10 MG-20MG ORAL CAPSULE | GENERIC, OTC | |
| AMLODIPINE BESYLATE/BENAZEPRIL (AMLODIPINE BESYLATE-BENAZEPRIL) 10 MG-40MG ORAL CAPSULE | GENERIC, OTC | |

ACE INHIBITOR/THIAZIDE & THIAZIDE-LIKE DIURETIC

| | | |
|--|--------------|--|
| CAPTOPRIL/HYDROCHLOROTHIAZIDE (CAPTOPRIL-HYDROCHLOROTHIAZIDE) 25 MG-15MG ORAL TABLET | GENERIC, OTC | |
| CAPTOPRIL/HYDROCHLOROTHIAZIDE (CAPTOPRIL-HYDROCHLOROTHIAZIDE) 25 MG-25MG ORAL TABLET | GENERIC, OTC | |
| CAPTOPRIL/HYDROCHLOROTHIAZIDE (CAPTOPRIL-HYDROCHLOROTHIAZIDE) 50 MG-15MG ORAL TABLET | GENERIC, OTC | |
| CAPTOPRIL/HYDROCHLOROTHIAZIDE (CAPTOPRIL-HYDROCHLOROTHIAZIDE) 50 MG-25MG ORAL TABLET | GENERIC, OTC | |
| ENALAPRIL/HYDROCHLOROTHIAZIDE (ENALAPRIL-HYDROCHLOROTHIAZIDE) 5MG-12.5MG ORAL TABLET | GENERIC, OTC | |
| ENALAPRIL/HYDROCHLOROTHIAZIDE (ENALAPRIL-HYDROCHLOROTHIAZIDE) 10 MG-25MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| FOSINOPRIL/HYDROCHLOROTHIAZIDE (FOSINOPRIL-HYDROCHLOROTHIAZIDE) 20-12.5 MG ORAL TABLET | GENERIC, OTC | |
| FOSINOPRIL/HYDROCHLOROTHIAZIDE (FOSINOPRIL-HYDROCHLOROTHIAZIDE) 10-12.5MG ORAL TABLET | GENERIC, OTC | |
| LISINOPRIL/HYDROCHLOROTHIAZIDE (LISINOPRIL-HYDROCHLOROTHIAZIDE) 20-12.5 MG ORAL TABLET | GENERIC, OTC | |
| LISINOPRIL/HYDROCHLOROTHIAZIDE (LISINOPRIL-HYDROCHLOROTHIAZIDE) 20 MG-25MG ORAL TABLET | GENERIC, OTC | |
| LISINOPRIL/HYDROCHLOROTHIAZIDE (LISINOPRIL-HYDROCHLOROTHIAZIDE) 10-12.5MG ORAL TABLET | GENERIC, OTC | |
| QUINAPRIL/HYDROCHLOROTHIAZIDE (QUINAPRIL-HYDROCHLOROTHIAZIDE) 20-12.5 MG ORAL TABLET | GENERIC, OTC | |
| QUINAPRIL/HYDROCHLOROTHIAZIDE (QUINAPRIL-HYDROCHLOROTHIAZIDE) 20 MG-25MG ORAL TABLET | GENERIC, OTC | |
| QUINAPRIL/HYDROCHLOROTHIAZIDE (QUINAPRIL-HYDROCHLOROTHIAZIDE) 10-12.5MG ORAL TABLET | GENERIC, OTC | |

ALPHA/BETA-ADRENERGIC BLOCKING AGENTS

| | | |
|----------------------------------|--------------|--|
| CARVEDILOL 3.125 MG ORAL TABLET | GENERIC, OTC | |
| CARVEDILOL 6.25 MG ORAL TABLET | GENERIC, OTC | |
| CARVEDILOL 12.5 MG ORAL TABLET | GENERIC, OTC | |
| CARVEDILOL 25 MG ORAL TABLET | GENERIC, OTC | |
| LABETALOL HCL 100 MG ORAL TABLET | GENERIC, OTC | |
| LABETALOL HCL 200 MG ORAL TABLET | GENERIC, OTC | |
| LABETALOL HCL 300 MG ORAL TABLET | GENERIC, OTC | |

ALPHA-ADRENERGIC BLOCKING AGENTS

| | | |
|-------------------------------------|--------------|--|
| DOXAZOSIN MESYLATE 1 MG ORAL TABLET | GENERIC, OTC | |
| DOXAZOSIN MESYLATE 2 MG ORAL TABLET | GENERIC, OTC | |
| DOXAZOSIN MESYLATE 4 MG ORAL TABLET | GENERIC, OTC | |
| DOXAZOSIN MESYLATE 8 MG ORAL TABLET | GENERIC, OTC | |
| PRAZOSIN HCL 1 MG ORAL CAPSULE | GENERIC, OTC | |
| PRAZOSIN HCL 2 MG ORAL CAPSULE | GENERIC, OTC | |
| PRAZOSIN HCL 5 MG ORAL CAPSULE | GENERIC, OTC | |
| TERAZOSIN HCL 1 MG ORAL CAPSULE | GENERIC, OTC | |
| TERAZOSIN HCL 2 MG ORAL CAPSULE | GENERIC, OTC | |
| TERAZOSIN HCL 5 MG ORAL CAPSULE | GENERIC, OTC | |
| TERAZOSIN HCL 10 MG ORAL CAPSULE | GENERIC, OTC | |

ANGIOTENSIN RECEPTOR ANTAG./THIAZIDE DIURETIC COMB

| | | |
|--|--------------|------------------------------|
| IRBESARTAN/HYDROCHLOROTHIAZIDE (IRBESARTAN-HYDROCHLOROTHIAZIDE) 150-12.5MG ORAL TABLET | GENERIC, OTC | |
| IRBESARTAN/HYDROCHLOROTHIAZIDE (IRBESARTAN-HYDROCHLOROTHIAZIDE) 300-12.5MG ORAL TABLET | GENERIC, OTC | |
| LOSARTAN/HYDROCHLOROTHIAZIDE (LOSARTAN-HYDROCHLOROTHIAZIDE) 50-12.5 MG ORAL TABLET | GENERIC, OTC | |
| LOSARTAN/HYDROCHLOROTHIAZIDE (LOSARTAN-HYDROCHLOROTHIAZIDE) 100MG-25MG ORAL TABLET | GENERIC, OTC | |
| LOSARTAN/HYDROCHLOROTHIAZIDE (LOSARTAN-HYDROCHLOROTHIAZIDE) 100-12.5MG ORAL TABLET | GENERIC, OTC | |
| TELMISARTAN/HYDROCHLOROTHIAZID (TELMISARTAN-HYDROCHLOROTHIAZID) 40-12.5 MG ORAL TABLET | GENERIC, OTC | ST (irbesartan and losartan) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|------------------------------|
| TELMISARTAN/HYDROCHLOROTHIAZID (TELMISARTAN-HYDROCHLOROTHIAZID) 80-12.5MG ORAL TABLET | GENERIC, OTC | ST (irbesartan and losartan) |
| TELMISARTAN/HYDROCHLOROTHIAZID (TELMISARTAN-HYDROCHLOROTHIAZID) 80 MG-25MG ORAL TABLET | GENERIC, OTC | ST (irbesartan and losartan) |
| VALSARTAN/HYDROCHLOROTHIAZIDE (VALSARTAN-HYDROCHLOROTHIAZIDE) 80-12.5MG ORAL TABLET | GENERIC, OTC | ST (irbesartan and losartan) |
| VALSARTAN/HYDROCHLOROTHIAZIDE (VALSARTAN-HYDROCHLOROTHIAZIDE) 160-12.5MG ORAL TABLET | GENERIC, OTC | ST (irbesartan and losartan) |
| VALSARTAN/HYDROCHLOROTHIAZIDE (VALSARTAN-HYDROCHLOROTHIAZIDE) 160MG-25MG ORAL TABLET | GENERIC, OTC | ST (irbesartan and losartan) |
| VALSARTAN/HYDROCHLOROTHIAZIDE (VALSARTAN-HYDROCHLOROTHIAZIDE) 320-12.5MG ORAL TABLET | GENERIC, OTC | ST (irbesartan and losartan) |
| VALSARTAN/HYDROCHLOROTHIAZIDE (VALSARTAN-HYDROCHLOROTHIAZIDE) 320MG-25MG ORAL TABLET | GENERIC, OTC | ST (irbesartan and losartan) |

ANTIHYPERTENSIVES, ACE INHIBITORS

| | | |
|--------------------------------------|--------------|--|
| BENAZEPRIL HCL 5 MG ORAL TABLET | GENERIC, OTC | |
| BENAZEPRIL HCL 10 MG ORAL TABLET | GENERIC, OTC | |
| BENAZEPRIL HCL 20 MG ORAL TABLET | GENERIC, OTC | |
| BENAZEPRIL HCL 40 MG ORAL TABLET | GENERIC, OTC | |
| CAPTOPRIL 12.5 MG ORAL TABLET | GENERIC, OTC | |
| CAPTOPRIL 25 MG ORAL TABLET | GENERIC, OTC | |
| CAPTOPRIL 50 MG ORAL TABLET | GENERIC, OTC | |
| CAPTOPRIL 100 MG ORAL TABLET | GENERIC, OTC | |
| ENALAPRIL MALEATE 2.5 MG ORAL TABLET | GENERIC, OTC | |
| ENALAPRIL MALEATE 5 MG ORAL TABLET | GENERIC, OTC | |
| ENALAPRIL MALEATE 10 MG ORAL TABLET | GENERIC, OTC | |
| ENALAPRIL MALEATE 20 MG ORAL TABLET | GENERIC, OTC | |
| FOSINOPRIL SODIUM 10 MG ORAL TABLET | GENERIC, OTC | |
| FOSINOPRIL SODIUM 20 MG ORAL TABLET | GENERIC, OTC | |
| FOSINOPRIL SODIUM 40 MG ORAL TABLET | GENERIC, OTC | |
| LISINOPRIL 2.5 MG ORAL TABLET | GENERIC, OTC | |
| LISINOPRIL 5 MG ORAL TABLET | GENERIC, OTC | |
| LISINOPRIL 10 MG ORAL TABLET | GENERIC, OTC | |
| LISINOPRIL 20 MG ORAL TABLET | GENERIC, OTC | |
| LISINOPRIL 30 MG ORAL TABLET | GENERIC, OTC | |
| LISINOPRIL 40 MG ORAL TABLET | GENERIC, OTC | |
| QUINAPRIL HCL 5 MG ORAL TABLET | GENERIC, OTC | |
| QUINAPRIL HCL 10 MG ORAL TABLET | GENERIC, OTC | |
| QUINAPRIL HCL 20 MG ORAL TABLET | GENERIC, OTC | |
| QUINAPRIL HCL 40 MG ORAL TABLET | GENERIC, OTC | |
| RAMIPRIL 1.25 MG ORAL CAPSULE | GENERIC, OTC | |
| RAMIPRIL 2.5 MG ORAL CAPSULE | GENERIC, OTC | |
| RAMIPRIL 5 MG ORAL CAPSULE | GENERIC, OTC | |
| RAMIPRIL 10 MG ORAL CAPSULE | GENERIC, OTC | |

ANTIHYPERTENSIVES, ANGIOTENSIN RECEPTOR ANTAGONIST

| | | |
|-------------------------------|--------------|--|
| IRBESARTAN 75 MG ORAL TABLET | GENERIC, OTC | |
| IRBESARTAN 150 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|--|
| IRBESARTAN 300 MG ORAL TABLET | GENERIC, OTC | |
| LOSARTAN POTASSIUM 25 MG ORAL TABLET | GENERIC, OTC | |
| LOSARTAN POTASSIUM 50 MG ORAL TABLET | GENERIC, OTC | |
| LOSARTAN POTASSIUM 100 MG ORAL TABLET | GENERIC, OTC | |
| OLMESARTAN MEDOXOMIL 5 MG ORAL TABLET | GENERIC, OTC | |
| OLMESARTAN MEDOXOMIL 20 MG ORAL TABLET | GENERIC, OTC | |
| OLMESARTAN MEDOXOMIL 40 MG ORAL TABLET | GENERIC, OTC | |
| TELMISARTAN 20 MG ORAL TABLET | GENERIC, OTC | ST (irbesartan, losartan, or olmesartan) |
| TELMISARTAN 40 MG ORAL TABLET | GENERIC, OTC | ST (irbesartan, losartan, or olmesartan) |
| TELMISARTAN 80 MG ORAL TABLET | GENERIC, OTC | ST (irbesartan, losartan, or olmesartan) |
| VALSARTAN 40 MG ORAL TABLET | GENERIC, OTC | ST (irbesartan, losartan, or olmesartan) |
| VALSARTAN 80 MG ORAL TABLET | GENERIC, OTC | ST (irbesartan, losartan, or olmesartan) |
| VALSARTAN 160 MG ORAL TABLET | GENERIC, OTC | ST (irbesartan, losartan, or olmesartan) |
| VALSARTAN 320 MG ORAL TABLET | GENERIC, OTC | ST (irbesartan, losartan, or olmesartan) |

ANTIHYPERTENSIVES, SYMPATHOLYTIC

| | | |
|----------------------------------|--------------|--|
| CLONIDINE HCL 0.1 MG ORAL TABLET | GENERIC, OTC | |
| CLONIDINE HCL 0.2 MG ORAL TABLET | GENERIC, OTC | |
| CLONIDINE HCL 0.3 MG ORAL TABLET | GENERIC, OTC | |
| GUANFACINE HCL 1 MG ORAL TABLET | GENERIC, OTC | |
| GUANFACINE HCL 2 MG ORAL TABLET | GENERIC, OTC | |
| METHYLDOPA 250 MG ORAL TABLET | GENERIC, OTC | |
| METHYLDOPA 500 MG ORAL TABLET | GENERIC, OTC | |

ANTIHYPERTENSIVES, VASODILATORS

| | | |
|------------------------------------|--------------|--|
| HYDRALAZINE HCL 10 MG ORAL TABLET | GENERIC, OTC | |
| HYDRALAZINE HCL 25 MG ORAL TABLET | GENERIC, OTC | |
| HYDRALAZINE HCL 50 MG ORAL TABLET | GENERIC, OTC | |
| HYDRALAZINE HCL 100 MG ORAL TABLET | GENERIC, OTC | |
| MINOXIDIL 2.5 MG ORAL TABLET | GENERIC, OTC | |
| MINOXIDIL 10 MG ORAL TABLET | GENERIC, OTC | |

BETA-ADRENERGIC BLOCKING AGENTS

| | | |
|---|--------------|------------------------|
| ACEBUTOLOL HCL 200 MG ORAL CAPSULE | GENERIC, OTC | |
| ACEBUTOLOL HCL 400 MG ORAL CAPSULE | GENERIC, OTC | |
| ATENOLOL 25 MG ORAL TABLET | GENERIC, OTC | |
| ATENOLOL 50 MG ORAL TABLET | GENERIC, OTC | |
| ATENOLOL 100 MG ORAL TABLET | GENERIC, OTC | |
| BISOPROLOL FUMARATE 5 MG ORAL TABLET | GENERIC, OTC | |
| BISOPROLOL FUMARATE 10 MG ORAL TABLET | GENERIC, OTC | |
| METOPROLOL SUCCINATE 25 MG ORAL TAB ER 24H | GENERIC, OTC | QL (2 tablets per day) |
| METOPROLOL SUCCINATE 50 MG ORAL TAB ER 24H | GENERIC, OTC | QL (2 tablets per day) |
| METOPROLOL SUCCINATE 100 MG ORAL TAB ER 24H | GENERIC, OTC | QL (2 tablets per day) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|------------------------|
| METOPROLOL SUCCINATE 200 MG ORAL TAB ER 24H | GENERIC, OTC | QL (2 tablets per day) |
| METOPROLOL TARTRATE 25 MG ORAL TABLET | GENERIC, OTC | |
| METOPROLOL TARTRATE 50 MG ORAL TABLET | GENERIC, OTC | |
| METOPROLOL TARTRATE 100 MG ORAL TABLET | GENERIC, OTC | |
| NADOLOL 20 MG ORAL TABLET | GENERIC, OTC | |
| NADOLOL 40 MG ORAL TABLET | GENERIC, OTC | |
| NADOLOL 80 MG ORAL TABLET | GENERIC, OTC | |
| PROPRANOLOL HCL 20 MG/5 ML ORAL SOLUTION | GENERIC, OTC | |
| PROPRANOLOL HCL 40MG/5ML ORAL SOLUTION | GENERIC, OTC | |
| PROPRANOLOL HCL 10 MG ORAL TABLET | GENERIC, OTC | |
| PROPRANOLOL HCL 20 MG ORAL TABLET | GENERIC, OTC | |
| PROPRANOLOL HCL 40 MG ORAL TABLET | GENERIC, OTC | |
| PROPRANOLOL HCL 60 MG ORAL TABLET | GENERIC, OTC | |
| PROPRANOLOL HCL 80 MG ORAL TABLET | GENERIC, OTC | |
| PROPRANOLOL HCL (PROPRANOLOL HCL ER) 60 MG ORAL CAP SA 24H | GENERIC, OTC | |
| PROPRANOLOL HCL (PROPRANOLOL HCL ER) 80 MG ORAL CAP SA 24H | GENERIC, OTC | |
| PROPRANOLOL HCL (PROPRANOLOL HCL ER) 120 MG ORAL CAP SA 24H | GENERIC, OTC | |
| PROPRANOLOL HCL (PROPRANOLOL HCL ER) 160 MG ORAL CAP SA 24H | GENERIC, OTC | |
| SOTALOL HCL (SORINE) 80 MG ORAL TABLET | GENERIC, OTC | |
| SOTALOL HCL (SORINE) 120 MG ORAL TABLET | GENERIC, OTC | |
| SOTALOL HCL (SORINE) 160 MG ORAL TABLET | GENERIC, OTC | |
| SOTALOL HCL (SORINE) 240 MG ORAL TABLET | GENERIC, OTC | |
| SOTALOL HCL (SOTALOL) 80 MG ORAL TABLET | GENERIC, OTC | |
| SOTALOL HCL (SOTALOL) 120 MG ORAL TABLET | GENERIC, OTC | |
| SOTALOL HCL (SOTALOL) 160 MG ORAL TABLET | GENERIC, OTC | |
| SOTALOL HCL (SOTALOL) 240 MG ORAL TABLET | GENERIC, OTC | |
| SOTALOL HCL (SOTALOL AF) 80 MG ORAL TABLET | GENERIC, OTC | |
| SOTALOL HCL (SOTALOL AF) 120 MG ORAL TABLET | GENERIC, OTC | |
| SOTALOL HCL (SOTALOL AF) 160 MG ORAL TABLET | GENERIC, OTC | |

BETA-ADRENERGIC BLOCKING AGENTS/THIAZIDE & RELATED

| | | |
|--|--------------|--|
| ATENOLOL/CHLORTHALIDONE (ATENOLOL-CHLORTHALIDONE) 50 MG-25MG ORAL TABLET | GENERIC, OTC | |
| ATENOLOL/CHLORTHALIDONE (ATENOLOL-CHLORTHALIDONE) 100MG-25MG ORAL TABLET | GENERIC, OTC | |
| BISOPROL/HYDROCHLOROTHIAZIDE (BISOPROLOL-HYDROCHLOROTHIAZIDE) 2.5-6.25MG ORAL TABLET | GENERIC, OTC | |
| BISOPROL/HYDROCHLOROTHIAZIDE (BISOPROLOL-HYDROCHLOROTHIAZIDE) 5-6.25MG ORAL TABLET | GENERIC, OTC | |
| BISOPROL/HYDROCHLOROTHIAZIDE (BISOPROLOL-HYDROCHLOROTHIAZIDE) 10-6.25MG ORAL TABLET | GENERIC, OTC | |
| PROPRANOLOL/HYDROCHLOROTHIAZID (PROPRANOLOL-HYDROCHLOROTHIAZID) 40 MG-25MG ORAL TABLET | GENERIC, OTC | |
| PROPRANOLOL/HYDROCHLOROTHIAZID (PROPRANOLOL-HYDROCHLOROTHIAZID) 80 MG-25MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| CALCIUM CHANNEL BLOCKING AGENTS | | |
| AMLODIPINE BESYLATE 2.5 MG ORAL TABLET | GENERIC, OTC | |
| AMLODIPINE BESYLATE 5 MG ORAL TABLET | GENERIC, OTC | |
| AMLODIPINE BESYLATE 10 MG ORAL TABLET | GENERIC, OTC | |
| DILTIAZEM HCL (CARTIA XT) 120 MG ORAL CAP ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (CARTIA XT) 180 MG ORAL CAP ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (CARTIA XT) 240 MG ORAL CAP ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (CARTIA XT) 300 MG ORAL CAP ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 12HR ER) 60 MG ORAL CAP ER 12H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 12HR ER) 90 MG ORAL CAP ER 12H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 12HR ER) 120 MG ORAL CAP ER 12H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER) 120 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER) 180 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER) 240 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER) 300 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER) 360 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER) 420 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (CD)) 120 MG ORAL CAP ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (CD)) 180 MG ORAL CAP ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (CD)) 240 MG ORAL CAP ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (CD)) 300 MG ORAL CAP ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (CD)) 360 MG ORAL CAP ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (LA)) 180 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (LA)) 240 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (LA)) 300 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (LA)) 360 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (LA)) 420 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (XR)) 120 MG ORAL CAP ER DEG | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (XR)) 180 MG ORAL CAP ER DEG | GENERIC, OTC | |
| DILTIAZEM HCL (DILTIAZEM 24HR ER (XR)) 240 MG ORAL CAP ER DEG | GENERIC, OTC | |
| DILTIAZEM HCL 30 MG ORAL TABLET | GENERIC, OTC | |
| DILTIAZEM HCL 60 MG ORAL TABLET | GENERIC, OTC | |
| DILTIAZEM HCL 90 MG ORAL TABLET | GENERIC, OTC | |
| DILTIAZEM HCL 120 MG ORAL TABLET | GENERIC, OTC | |
| DILTIAZEM HCL (DILT-XR) 120 MG ORAL CAP ER DEG | GENERIC, OTC | |
| DILTIAZEM HCL (DILT-XR) 180 MG ORAL CAP ER DEG | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| DILTIAZEM HCL (DILT-XR) 240 MG ORAL CAP ER DEG | GENERIC, OTC | |
| DILTIAZEM HCL (MATZIM LA) 180 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (MATZIM LA) 240 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (MATZIM LA) 300 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (MATZIM LA) 360 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (MATZIM LA) 420 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TAZTIA XT) 120 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TAZTIA XT) 180 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TAZTIA XT) 240 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TAZTIA XT) 300 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TAZTIA XT) 360 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TIADYLT ER) 120 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TIADYLT ER) 180 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TIADYLT ER) 240 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TIADYLT ER) 300 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TIADYLT ER) 360 MG ORAL CAP SA 24H | GENERIC, OTC | |
| DILTIAZEM HCL (TIADYLT ER) 420 MG ORAL CAP SA 24H | GENERIC, OTC | |
| FELODIPINE (FELODIPINE ER) 2.5 MG ORAL TAB ER 24H | GENERIC, OTC | |
| FELODIPINE (FELODIPINE ER) 5 MG ORAL TAB ER 24H | GENERIC, OTC | |
| FELODIPINE (FELODIPINE ER) 10 MG ORAL TAB ER 24H | GENERIC, OTC | |
| NIFEDIPINE (NIFEDIPINE ER) 30 MG ORAL TAB ER 24 | GENERIC, OTC | |
| NIFEDIPINE (NIFEDIPINE ER) 60 MG ORAL TAB ER 24 | GENERIC, OTC | |
| NIFEDIPINE (NIFEDIPINE ER) 90 MG ORAL TAB ER 24 | GENERIC, OTC | |
| NIFEDIPINE (NIFEDIPINE ER) 30 MG ORAL TABLET ER | GENERIC, OTC | |
| NIFEDIPINE (NIFEDIPINE ER) 60 MG ORAL TABLET ER | GENERIC, OTC | |
| NIFEDIPINE (NIFEDIPINE ER) 90 MG ORAL TABLET ER | GENERIC, OTC | |
| VERAPAMIL HCL (VERAPAMIL ER) 120 MG ORAL TABLET ER | GENERIC, OTC | |
| VERAPAMIL HCL (VERAPAMIL ER) 180 MG ORAL TABLET ER | GENERIC, OTC | |
| VERAPAMIL HCL (VERAPAMIL ER) 240 MG ORAL TABLET ER | GENERIC, OTC | |
| VERAPAMIL HCL 40 MG ORAL TABLET | GENERIC, OTC | |
| VERAPAMIL HCL 80 MG ORAL TABLET | GENERIC, OTC | |
| VERAPAMIL HCL 120 MG ORAL TABLET | GENERIC, OTC | |

LOOP DIURETICS

| | | |
|-----------------------------------|--------------|--|
| BUMETANIDE 0.5 MG ORAL TABLET | GENERIC, OTC | |
| BUMETANIDE 1 MG ORAL TABLET | GENERIC, OTC | |
| BUMETANIDE 2 MG ORAL TABLET | GENERIC, OTC | |
| FUROSEMIDE 10 MG/ML ORAL SOLUTION | GENERIC, OTC | |
| FUROSEMIDE 40MG/5ML ORAL SOLUTION | GENERIC, OTC | |
| FUROSEMIDE 20 MG ORAL TABLET | GENERIC, OTC | |
| FUROSEMIDE 40 MG ORAL TABLET | GENERIC, OTC | |
| FUROSEMIDE 80 MG ORAL TABLET | GENERIC, OTC | |
| TORSEMIDE 5 MG ORAL TABLET | GENERIC, OTC | |
| TORSEMIDE 10 MG ORAL TABLET | GENERIC, OTC | |
| TORSEMIDE 20 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|------------------------------|--------------|---------------------|
| TORSEMIDE 100 MG ORAL TABLET | GENERIC, OTC | |

POTASSIUM SPARING DIURETICS

| | | |
|-----------------------------------|--------------|--|
| AMILORIDE HCL 5 MG ORAL TABLET | GENERIC, OTC | |
| SPIRONOLACTONE 25 MG ORAL TABLET | GENERIC, OTC | |
| SPIRONOLACTONE 50 MG ORAL TABLET | GENERIC, OTC | |
| SPIRONOLACTONE 100 MG ORAL TABLET | GENERIC, OTC | |

POTASSIUM SPARING DIURETICS IN COMBINATION

| | | |
|---|--------------|--|
| TRIAMTERENE/HYDROCHLOROTHIAZID (TRIAMTERENE-HYDROCHLOROTHIAZID) 37.5-25 MG ORAL CAPSULE | GENERIC, OTC | |
| TRIAMTERENE/HYDROCHLOROTHIAZID (TRIAMTERENE-HYDROCHLOROTHIAZID) 37.5-25 MG ORAL TABLET | GENERIC, OTC | |
| TRIAMTERENE/HYDROCHLOROTHIAZID (TRIAMTERENE-HYDROCHLOROTHIAZID) 75 MG-50MG ORAL TABLET | GENERIC, OTC | |

PULM.ANTI-HTN,SEL.C-GMP PHOSPHODIESTERASE T5 INHIB

| | | |
|--------------------------------------|--------------|------------------|
| SILDENAFIL CITRATE 20 MG ORAL TABLET | GENERIC, OTC | PA (Rx034) |
| TADALAFIL (ALYQ) 20 MG ORAL TABLET | GENERIC, OTC | PA (Rx034); SPEC |
| TADALAFIL 20 MG ORAL TABLET | GENERIC, OTC | PA (Rx034); SPEC |

THIAZIDE AND RELATED DIURETICS

| | | |
|--|--------------|--|
| CHLORTHALIDONE 25 MG ORAL TABLET | GENERIC, OTC | |
| CHLORTHALIDONE 50 MG ORAL TABLET | GENERIC, OTC | |
| CHLORTHALIDONE (THALITONE) 15 MG ORAL TABLET | BRAND, OTC | |
| HYDROCHLOROTHIAZIDE 12.5 MG ORAL CAPSULE | GENERIC, OTC | |
| HYDROCHLOROTHIAZIDE 12.5 MG ORAL TABLET | GENERIC, OTC | |
| HYDROCHLOROTHIAZIDE 25 MG ORAL TABLET | GENERIC, OTC | |
| HYDROCHLOROTHIAZIDE 50 MG ORAL TABLET | GENERIC, OTC | |
| INDAPAMIDE 1.25 MG ORAL TABLET | GENERIC, OTC | |
| INDAPAMIDE 2.5 MG ORAL TABLET | GENERIC, OTC | |
| METOLAZONE 2.5 MG ORAL TABLET | GENERIC, OTC | |
| METOLAZONE 5 MG ORAL TABLET | GENERIC, OTC | |
| METOLAZONE 10 MG ORAL TABLET | GENERIC, OTC | |

CARDIOVASCULAR DISEASE - LIPID IRREGULARITY

ANTIHYPERLIPIDEMIC - HMG COA REDUCTASE INHIBITORS

| | | |
|--|--------------|--|
| ATORVASTATIN CALCIUM 10 MG ORAL TABLET | GENERIC, OTC | |
| ATORVASTATIN CALCIUM 20 MG ORAL TABLET | GENERIC, OTC | |
| ATORVASTATIN CALCIUM 40 MG ORAL TABLET | GENERIC, OTC | |
| ATORVASTATIN CALCIUM 80 MG ORAL TABLET | GENERIC, OTC | |
| LOVASTATIN 10 MG ORAL TABLET | GENERIC, OTC | |
| LOVASTATIN 20 MG ORAL TABLET | GENERIC, OTC | |
| LOVASTATIN 40 MG ORAL TABLET | GENERIC, OTC | |
| PRAVASTATIN SODIUM 10 MG ORAL TABLET | GENERIC, OTC | |
| PRAVASTATIN SODIUM 20 MG ORAL TABLET | GENERIC, OTC | |
| PRAVASTATIN SODIUM 40 MG ORAL TABLET | GENERIC, OTC | |
| PRAVASTATIN SODIUM 80 MG ORAL TABLET | GENERIC, OTC | |
| ROSUVASTATIN CALCIUM 5 MG ORAL TABLET | GENERIC, OTC | |
| ROSUVASTATIN CALCIUM 10 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| ROSUVASTATIN CALCIUM 20 MG ORAL TABLET | GENERIC, OTC | |
| ROSUVASTATIN CALCIUM 40 MG ORAL TABLET | GENERIC, OTC | |
| SIMVASTATIN 5 MG ORAL TABLET | GENERIC, OTC | |
| SIMVASTATIN 10 MG ORAL TABLET | GENERIC, OTC | |
| SIMVASTATIN 20 MG ORAL TABLET | GENERIC, OTC | |
| SIMVASTATIN 40 MG ORAL TABLET | GENERIC, OTC | |
| SIMVASTATIN 80 MG ORAL TABLET | GENERIC, OTC | |

BILE SALT SEQUESTRANTS

| | | |
|---|--------------|--|
| CHOLESTYRAMINE/ASPARTAME (CHOLESTYRAMINE LIGHT) 4 G ORAL POWDER | GENERIC, OTC | |
| CHOLESTYRAMINE/ASPARTAME (PREVALITE) 4 G ORAL POWDER | GENERIC, OTC | |
| CHOLESTYRAMINE/SUCROSE (CHOLESTYRAMINE) 4 G ORAL POWD PACK | GENERIC, OTC | |
| CHOLESTYRAMINE/SUCROSE (CHOLESTYRAMINE) 4 G ORAL POWDER | GENERIC, OTC | |
| COLESTIPOL HCL 1 G ORAL TABLET | GENERIC, OTC | |

LIPOTROPICS

| | | |
|--|--------------|--|
| DOCOSAHEXANOIC ACID/EPA (FISH OIL) 100-160 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (FISH OIL) 120-180 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (FISH OIL) 300-500 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (FISH OIL) 300-1000MG ORAL CAPSULE | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (FISH OIL) 340-1000MG ORAL CAPSULE | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (FISH OIL) 435-880MG ORAL CAPSULE | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (FISH OIL) 300-1000MG ORAL CAPSULE DR | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (FISH OIL CONCENTRATE) 300-1000MG ORAL CAPSULE | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (FISH OIL OMEGA-3) 300-1000MG ORAL CAPSULE | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (OMEGA-3 FISH OIL) 300-1000MG ORAL CAPSULE | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (PREMIUM OMEGA-3) 600-1000MG ORAL CAPSULE | GENERIC, OTC | |
| DOCOSAHEXANOIC ACID/EPA (ULTRA OMEGA-3) 500-1000MG ORAL CAPSULE | GENERIC, OTC | |
| EZETIMIBE 10 MG ORAL TABLET | GENERIC, OTC | |
| FENOFIBRATE 54 MG ORAL TABLET | GENERIC, OTC | |
| FENOFIBRATE 160 MG ORAL TABLET | GENERIC, OTC | |
| FENOFIBRATE NANOCRYSTALLIZED (FENOFIBRATE) 48 MG ORAL TABLET | GENERIC, OTC | |
| FENOFIBRATE NANOCRYSTALLIZED (FENOFIBRATE) 145 MG ORAL TABLET | GENERIC, OTC | |
| FENOFIBRATE, MICRONIZED (FENOFIBRATE) 67 MG ORAL CAPSULE | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| FENOFIBRATE,MICRONIZED (FENOFIBRATE) 134 MG ORAL CAPSULE | GENERIC, OTC | |
| FISH OIL/DHA/EPA (FISH OIL) 360-1200MG ORAL CAPSULE DR | GENERIC, OTC | |
| FISH OIL/OMEGA-3 FATTY ACIDS (FISH OIL) 300-1000MG ORAL CAPSULE | GENERIC, OTC | |
| FISH OIL/OMEGA-3 FATTY ACIDS (FISH OIL) 360-1200MG ORAL CAPSULE | GENERIC, OTC | |
| FISH OIL/OMEGA-3 FATTY ACIDS (FISH OIL) 120-180-60 ORAL CAPSULE DR | GENERIC, OTC | |
| FISH OIL/OMEGA-3 FATTY ACIDS (FISH OIL) 360-1200MG ORAL CAPSULE DR | GENERIC, OTC | |
| FISH OIL/OMEGA-3 FATTY ACIDS (FISH OIL OMEGA-3) 300-1000MG ORAL CAPSULE | GENERIC, OTC | |
| FISH OIL/OMEGA-3 FATTY ACIDS (FISH OIL OMEGA-3) 360-1200MG ORAL CAPSULE | GENERIC, OTC | |
| FISH OIL/OMEGA-3 FATTY ACIDS (OMEGA-3 FISH OIL) 300-1000MG ORAL CAPSULE | GENERIC, OTC | |
| FISH OIL/OMEGA-3 FATTY ACIDS (OMEGA-3 FISH OIL) 360-1200MG ORAL CAPSULE | GENERIC, OTC | |
| GEMFIBROZIL 600 MG ORAL TABLET | GENERIC, OTC | |
| NIACIN (NIACIN ER) 500 MG ORAL TAB ER 24H | GENERIC, OTC | |
| NIACIN (NIACIN ER) 750 MG ORAL TAB ER 24H | GENERIC, OTC | |
| NIACIN (NIACIN ER) 1000 MG ORAL TAB ER 24H | GENERIC, OTC | |
| OM-3/DHA/EPA/FISH OIL/VIT D3 (FISH OIL-VIT D3) 300-1000MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3 FATTY ACIDS (FISH OIL) 60 MG-90MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3 FATTY ACIDS (FISH OIL) 1000 MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3 FATTY ACIDS (FISH OIL) 60 MG-90MG ORAL CAPSULE DR | GENERIC, OTC | |
| OMEGA-3 FATTY ACIDS (MAXEPA) 500 MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3 FATTY ACIDS (OMEGA-3) 1000 MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3 FATTY ACIDS (OMEGA-3 FISH OIL) 1000 MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3 FATTY ACIDS (SALMON OIL-1000) 1000-200MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3 FATTY ACIDS (SUPER OMEGA-3) 1000 MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3 FATTY ACIDS/VITAMIN E (OMEGA-3 FISH OIL) 300-1000MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (EXTREME OMEGA-3 MICROGEL) 120-180 MG ORAL CAPSULE | BRAND, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (FISH OIL) 60 MG-90MG ORAL CAPSULE | BRAND, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (FISH OIL) 60 MG-90MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (FISH OIL) 100-160 MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (FISH OIL) 120-180 MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (FISH OIL) 183.3-306 ORAL CAPSULE | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| OMEGA-3/DHA/EPA/FISH OIL (FISH OIL) 300-1000MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (FISH OIL) 1000 MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (FISH OIL) 300-1000MG ORAL CAPSULE DR | GENERIC, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (FISH OIL) 300-600 MG ORAL CAPSULE DR | GENERIC, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (FISH OIL) 28.5-113.5 ORAL TAB CHEW | BRAND, OTC | |
| OMEGA-3/DHA/EPA/FISH OIL (OMEGA-3 FISH OIL) 1000 MG ORAL CAPSULE | GENERIC, OTC | |
| OMEGA-3S/DHA/EPA/FISH OIL (FISH OIL) 300-1000MG ORAL CAPSULE | BRAND, OTC | |
| OMEGA-3S/DHA/EPA/FISH OIL (FISH OIL) 120-180-60 ORAL CAPSULE DR | GENERIC, OTC | |
| OMEGA-3S/DHA/EPA/FISH OIL (FISH OIL) 300-1000MG ORAL CAPSULE DR | BRAND, OTC | |
| OMEGA-3S/DHA/EPA/FISH OIL (OMEGA-3 FISH OIL) 300-1000MG ORAL CAPSULE | BRAND, OTC | |
| UNKNOWN (EXTREME OMEGA-3 MICROGEL) 120-180 MG ORAL CAPSULE | BRAND, OTC | |

CARDIOVASCULAR DISEASE - MISCELLANEOUS AGENTS

ADRENERGIC VASOPRESSOR AGENTS

| | | |
|----------------------------------|--------------|--|
| MIDODRINE HCL 2.5 MG ORAL TABLET | GENERIC, OTC | |
| MIDODRINE HCL 5 MG ORAL TABLET | GENERIC, OTC | |
| MIDODRINE HCL 10 MG ORAL TABLET | GENERIC, OTC | |

ANGIOTENSIN RECEPT-NEPRILYSIN INHIBITOR COMB(ARNI)

| | | |
|--|------------|---|
| SACUBITRIL/VALSARTAN (ENTRESTO) 24 MG-26MG ORAL TABLET | BRAND, OTC | PA (Rx052); QL (60 tablets per 30 days) |
| SACUBITRIL/VALSARTAN (ENTRESTO) 49 MG-51MG ORAL TABLET | BRAND, OTC | PA (Rx052); QL (60 tablets per 30 days) |
| SACUBITRIL/VALSARTAN (ENTRESTO) 97MG-103MG ORAL TABLET | BRAND, OTC | PA (Rx052); QL (60 tablets per 30 days) |

CARDIOVASCULAR DISEASE - VASODILATION

VASODILATORS,CORONARY

| | | |
|---|--------------|--|
| ISOSORBIDE DINITRATE 5 MG ORAL TABLET | GENERIC, OTC | |
| ISOSORBIDE DINITRATE 10 MG ORAL TABLET | GENERIC, OTC | |
| ISOSORBIDE DINITRATE 20 MG ORAL TABLET | GENERIC, OTC | |
| ISOSORBIDE DINITRATE 30 MG ORAL TABLET | GENERIC, OTC | |
| ISOSORBIDE MONONITRATE 10 MG ORAL TABLET | GENERIC, OTC | |
| ISOSORBIDE MONONITRATE 20 MG ORAL TABLET | GENERIC, OTC | |
| ISOSORBIDE MONONITRATE (ISOSORBIDE MONONITRATE ER) 30 MG ORAL TAB ER 24H | GENERIC, OTC | |
| ISOSORBIDE MONONITRATE (ISOSORBIDE MONONITRATE ER) 60 MG ORAL TAB ER 24H | GENERIC, OTC | |
| ISOSORBIDE MONONITRATE (ISOSORBIDE MONONITRATE ER) 120 MG ORAL TAB ER 24H | GENERIC, OTC | |
| NITROGLYCERIN (MINITRAN) 0.1MG/HR TRANSDERM. PATCH TD24 | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| NITROGLYCERIN (MINITRAN) 0.2MG/HR TRANSDERM. PATCH TD24 | GENERIC, OTC | |
| NITROGLYCERIN (MINITRAN) 0.4MG/HR TRANSDERM. PATCH TD24 | GENERIC, OTC | |
| NITROGLYCERIN (MINITRAN) 0.6MG/HR TRANSDERM. PATCH TD24 | GENERIC, OTC | |
| NITROGLYCERIN (NITRO-BID) 2% TRANSDERM. OINT. (G) | BRAND, OTC | |
| NITROGLYCERIN (NITRO-DUR) 0.3 MG/HR TRANSDERM. PATCH TD24 | BRAND, OTC | |
| NITROGLYCERIN (NITRO-DUR) 0.8MG/HR TRANSDERM. PATCH TD24 | BRAND, OTC | |
| NITROGLYCERIN 0.3 MG SUBLINGUAL TAB SUBL | GENERIC, OTC | |
| NITROGLYCERIN 0.4 MG SUBLINGUAL TAB SUBL | GENERIC, OTC | |
| NITROGLYCERIN 0.6 MG SUBLINGUAL TAB SUBL | GENERIC, OTC | |
| NITROGLYCERIN (NITROGLYCERIN PATCH) 0.1MG/HR TRANSDERM. PATCH TD24 | GENERIC, OTC | |
| NITROGLYCERIN (NITROGLYCERIN PATCH) 0.2MG/HR TRANSDERM. PATCH TD24 | GENERIC, OTC | |
| NITROGLYCERIN (NITROGLYCERIN PATCH) 0.4MG/HR TRANSDERM. PATCH TD24 | GENERIC, OTC | |
| NITROGLYCERIN (NITROGLYCERIN PATCH) 0.6MG/HR TRANSDERM. PATCH TD24 | GENERIC, OTC | |

CONTRACEPTION/OXYTOCICS

CONTRACEPTIVES, INTRAVAGINAL, SYSTEMIC

| | | |
|---|--------------|------------------------------------|
| ETONOGESTREL/ETHINYL ESTRADIOL (ELURYNG) .12-.015MG VAGINAL VAG RING | GENERIC, OTC | QL (1 device [1 ring] per 21 days) |
| ETONOGESTREL/ETHINYL ESTRADIOL (ETONOGESTREL-ETHINYL ESTRADIOL) .12-.015MG VAGINAL VAG RING | GENERIC, OTC | QL (1 device [1 ring] per 21 days) |

CONTRACEPTIVES, INJECTABLE

| | | |
|---|--------------|----------------------------|
| MEDROXYPROGESTERONE ACET (DEPO-SUBQ PROVERA 104) 104MG/0.65 SUBCUTANE. SYRINGE | BRAND, OTC | QL (1 syringe per 90 days) |
| MEDROXYPROGESTERONE ACET (MEDROXYPROGESTERONE ACETATE) 150 MG/ML INTRAMUSC. SYRINGE | GENERIC, OTC | QL (1 syringe per 90 days) |
| MEDROXYPROGESTERONE ACET (MEDROXYPROGESTERONE ACETATE) 150 MG/ML INTRAMUSC. VIAL | GENERIC, OTC | QL (1 vial per 90 days) |

CONTRACEPTIVES, ORAL

| | | |
|---|--------------|---|
| DESOGESTREL-ETHINYL ESTRADIOL (APRI) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOGESTREL-ETHINYL ESTRADIOL (CAZANT) 7 DAYS X 3 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOGESTREL-ETHINYL ESTRADIOL (CYRED) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOGESTREL-ETHINYL ESTRADIOL (CYRED EQ) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOGESTREL-ETHINYL ESTRADIOL 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOGESTREL-ETHINYL ESTRADIOL (EMOQUETTE) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOGESTREL-ETHINYL ESTRADIOL (ENSKYCE) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOGESTREL-ETHINYL ESTRADIOL (ISIBLOOM) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---|
| DESOGESTREL-ETHINYL ESTRADIOL (JULEBER) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOGESTREL-ETHINYL ESTRADIOL (KALLIGA) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOGESTREL-ETHINYL ESTRADIOL (RECLIPSEN) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOGESTREL-ETHINYL ESTRADIOL (VELIVET) 7 DAYS X 3 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| DESOG-ET ESTRA/ETHIN ESTRA (AZURETTE) 21-5 (28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| DESOG-ET ESTRA/ETHIN ESTRA (DESOGESTR-ETH ESTRAD ETH ESTRA) 21-5 (28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| DESOG-ET ESTRA/ETHIN ESTRA (KARIVA) 21-5 (28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| DESOG-ET ESTRA/ETHIN ESTRA (PIMTREA) 21-5 (28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| DESOG-ET ESTRA/ETHIN ESTRA (SIMLIYA) 21-5 (28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| DESOG-ET ESTRA/ETHIN ESTRA (VIORELE) 21-5 (28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| DESOG-ET ESTRA/ETHIN ESTRA (VOLNEA) 21-5 (28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (DROSPIRENONE-ETHINYL ESTRADIOL) 0.02-3(28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (DROSPIRENONE-ETHINYL ESTRADIOL) 0.03MG-3MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (JASMIEL) 0.02-3(28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (LORYNA) 0.02-3(28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (LO-ZUMANDIMINE) 0.02-3(28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (NIKKI) 0.02-3(28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (OCELLA) 0.03MG-3MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (SYEDA) 0.03MG-3MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (VESTURA) 0.02-3(28) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (ZARAH) 0.03MG-3MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| ETHINYL ESTRADIOL/DROSPIRENONE (ZUMANDIMINE) 0.03MG-3MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| ETHYNODIOL D-ETHINYL ESTRADIOL (ETHYNODIOL-ETHINYL ESTRADIOL) 1 MG-50MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| ETHYNODIOL D-ETHINYL ESTRADIOL (ETHYNODIOL-ETHINYL ESTRADIOL) 1 MG-35MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| ETHYNODIOL D-ETHINYL ESTRADIOL (KELNOR 1-35) 1 MG-35MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| ETHYNODIOL D-ETHINYL ESTRADIOL (KELNOR 1-50) 1 MG-50MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---|
| ETHYNODIOL D-ETHINYL ESTRADIOL (ZOVIA 1-35) 1 MG-35MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| ETHYNODIOL D-ETHINYL ESTRADIOL (ZOVIA 1-35E) 1 MG-35MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL (AFTER PILL) 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL (AFTERA) 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL (ECONTRA EZ) 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL (ECONTRA ONE-STEP) 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL (MY CHOICE) 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL (MY WAY) 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL (NEW DAY) 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL (OPCICON ONE-STEP) 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL (OPTION 2) 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL (TAKE ACTION) 1.5 MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per fill, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (AFIRMELLE) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (ALTAVERA) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (AUBRA) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (AUBRA EQ) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (AVIANE) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (AYUNA) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (CHATEAL) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (CHATEAL EQ) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (ENPRESSE) 6-5-10 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (FALMINA) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (ICLEVIA) 0.15-0.03 ORAL TBDSPK 3MO | GENERIC, OTC | QL (1 tablet per day, 84 days per 91 days) |
| LEVONORGESTREL-ETH ESTRA (JOLESSA) 0.15-0.03 ORAL TBDSPK 3MO | GENERIC, OTC | QL (1 tablet per day, 84 days per 91 days) |
| LEVONORGESTREL-ETH ESTRA (KURVELO) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---|
| LEVONORGESTREL-ETH ESTRA (LARISSIA) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (LESSINA) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (LEVONEST) 6-5-10 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (LEVONORGESTREL-ETH ESTRADIOL) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (LEVONORGESTREL-ETH ESTRADIOL) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (LEVONORGESTREL-ETH ESTRADIOL) 6-5-10 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (LEVONORGESTREL-ETH ESTRADIOL) 0.15-0.03 ORAL TBDSPK 3MO | GENERIC, OTC | QL (1 tablet per day, 84 days per 91 days) |
| LEVONORGESTREL-ETH ESTRA (LEVORA-28) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (LILLOW) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (LUTERA) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (MARLISSA) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (ORSYTHIA) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (PORTIA) 0.15-0.03 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (SETLAKIN) 0.15-0.03 ORAL TBDSPK 3MO | GENERIC, OTC | QL (1 tablet per day, 84 days per 91 days) |
| LEVONORGESTREL-ETH ESTRA (SRONYX) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (TRIVORA-28) 6-5-10 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (TYBLUME) 0.1-0.02MG ORAL TAB CHEW | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| LEVONORGESTREL-ETH ESTRA (VIENVA) 0.1-0.02MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (AUROVELA FE) 1MG-20(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (AUROVELA FE) 1.5-30(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (BLISOVI FE) 1MG-20(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (BLISOVI FE) 1.5-30(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (HAILEY FE) 1MG-20(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (HAILEY FE) 1.5-30(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (JUNEL FE) 1MG-20(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (JUNEL FE) 1.5-30(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---|
| NORETH A-ET ESTRA/FE FUMARATE (LARIN FE) 1MG-20(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (LARIN FE) 1.5-30(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (MICROGESTIN FE) 1MG-20(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (MICROGESTIN FE) 1.5-30(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (NORETHINDRONE-E. ESTRADIOL-IRON) 1MG-20(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (NORETHINDRONE-E. ESTRADIOL-IRON) 1.5-30(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (TARINA FE) 1MG-20(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETH A-ET ESTRA/FE FUMARATE (TARINA FE 1-20 EQ) 1MG-20(21) ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE (CAMILA) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (DEBLITANE) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (ERRIN) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (HEATHER) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (INCASSIA) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (JENCYCLA) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (LYLEQ) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (LYZA) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (NORA-BE) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (NORLYDA) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (SHAROBEL) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE (TULANA) 0.35 MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE A-E ESTRADIOL (AUROVELA) 1MG-20MCG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE A-E ESTRADIOL (AUROVELA) 1.5-0.03MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE A-E ESTRADIOL (HAILEY) 1.5-0.03MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE A-E ESTRADIOL (JUNEL) 1MG-20MCG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE A-E ESTRADIOL (JUNEL) 1.5-0.03MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---|
| NORETHINDRONE A-E ESTRADIOL (LARIN) 1MG-20MCG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE A-E ESTRADIOL (LARIN) 1.5-0.03MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE A-E ESTRADIOL (MICROGESTIN) 1MG-20MCG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE A-E ESTRADIOL (MICROGESTIN) 1.5-0.03MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE A-E ESTRADIOL (NORETHINDRON-ETHINYL ESTRADIOL) 1MG-20MCG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE A-E ESTRADIOL (NORETHINDRON-ETHINYL ESTRADIOL) 1.5-0.03MG ORAL TABLET | GENERIC, OTC | QL (1 tablet per day, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (ALYACEN) 1 MG-35MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (ALYACEN) 7 DAYS X 3 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (ARANELLE) 7-9-5 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (BALZIVA) 0.4-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (BRIELLYN) 0.4-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (CYCLAFEM) 1 MG-35MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (CYCLAFEM) 7 DAYS X 3 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (DASETTA) 1 MG-35MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (DASETTA) 7 DAYS X 3 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (LEENA) 7-9-5 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (NECON) 0.5-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (NORTREL) 0.5-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (NORTREL) 1 MG-35MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (NORTREL) 7 DAYS X 3 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (NYLIA) 7 DAYS X 3 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (PHILITH) 0.4-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (PIRMELLA) 1 MG-35MCG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (PIRMELLA) 7 DAYS X 3 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (VYFEMLA) 0.4-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORETHINDRONE-ETHINYL ESTRAD (WERA) 0.5-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---|
| NORGESTIMATE-ETHINYL ESTRADIOL (ESTARYLLA) 0.25-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (FEMYNOR) 0.25-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (MILI) 0.25-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (MONO-LINYAH) 0.25-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL 0.25-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL 7DAYSX3 28 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL 7DAYSX3 LO ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (NYMYO) 0.25-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (PREVIFEM) 0.25-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (SPRINTEC) 0.25-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI FEMYNOR) 7DAYSX3 28 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-ESTARYLLA) 7DAYSX3 28 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-LINYAH) 7DAYSX3 28 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-LO-ESTARYLLA) 7DAYSX3 LO ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-LO-MARZIA) 7DAYSX3 LO ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-LO-MILI) 7DAYSX3 LO ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-LO-SPRINTEC) 7DAYSX3 LO ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-MILI) 7DAYSX3 28 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-NYMYO) 7DAYSX3 28 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-PREVIFEM) 7DAYSX3 28 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-SPRINTEC) 7DAYSX3 28 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-VYLIBRA) 7DAYSX3 28 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (TRI-VYLIBRA LO) 7DAYSX3 LO ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTIMATE-ETHINYL ESTRADIOL (VYLIBRA) 0.25-0.035 ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTREL-ETHINYL ESTRADIOL (CRYSSELLE) 0.3-0.03MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| NORGESTREL-ETHINYL ESTRADIOL (ELINEST) 0.3-0.03MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---|
| NORGESTREL-ETHINYL ESTRADIOL (LOW-OGESTREL) 0.3-0.03MG ORAL TABLET | GENERIC, OTC | QL (28 tablets per 21 days, 84 days per fill) |
| ULIPRISTAL ACETATE (ELLA) 30 MG ORAL TABLET | BRAND, OTC | QL (1 tablet per 22 days, 84 days per fill) |

CONTRACEPTIVES, TRANSDERMAL

| | | |
|---|--------------|-------------------------|
| NORELGESTROMIN/ETHIN. ESTRADIOL (XULANE) 150-35/24H TRANSDERM. PATCH TDWK | GENERIC, OTC | QL (1 patch per 7 days) |
| NORELGESTROMIN/ETHIN. ESTRADIOL (ZAFEMY) 150-35/24H TRANSDERM. PATCH TDWK | GENERIC, OTC | QL (1 patch per 7 days) |

OXYTOCICS

| | | |
|---|--------------|--|
| METHYLERGONOVINE MALEATE 0.2 MG ORAL TABLET | GENERIC, OTC | |
|---|--------------|--|

COUGH AND COLD

1ST GEN ANTIHISTAMINE & DECONGESTANT COMBINATIONS

| | | |
|--|--------------|------------------------|
| P-EPHED HCL/TRIPROLODINE HCL (APRODINE) 2.5MG-60MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| P-EPHED HCL/TRIPROLODINE HCL (COLD, ALLERGY & SINUS) 2.5MG-60MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| P-EPHED HCL/TRIPROLODINE HCL (WAL-ACT D COLD & ALLERGY) 2.5MG-60MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| PHENYLEPHRINE HCL/PROMETH HCL (PROMETHAZINE VC) 5-6.25MG/5 ORAL SYRUP | GENERIC, OTC | |
| PHENYLEPHRINE HCL/PROMETH HCL (PROMETHAZINE-PHENYLEPHRINE) 5-6.25MG/5 ORAL SYRUP | GENERIC, OTC | |
| PSEUDOEPHEDRINE HCL/CHLOR-MAL (SUDOGEST COLD AND ALLERGY) 4 MG-60 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |

ANTITUSSIVES, NON-NARCOTIC

| | | |
|---------------------------------|--------------|-------------------------|
| BENZONATATE 100 MG ORAL CAPSULE | GENERIC, OTC | QL (3 capsules per day) |
| BENZONATATE 200 MG ORAL CAPSULE | GENERIC, OTC | QL (3 capsules per day) |

DECONGESTANTS, ORAL

| | | |
|--|--------------|------------------------|
| PSEUDOEPHEDRINE HCL (NASAL DECONGESTANT) 30 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| PSEUDOEPHEDRINE HCL (NEXAFED) 30 MG ORAL TABLET | BRAND, OTC | QL (3 tablets per day) |
| PSEUDOEPHEDRINE HCL 60 MG ORAL TABLET | GENERIC, OTC | QL (2 tablets per day) |
| PSEUDOEPHEDRINE HCL (SUDOGEST) 30 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| PSEUDOEPHEDRINE HCL (ZEPHREX-D) 30 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |

EXPECTORANTS

| | | |
|--|--------------|-------------------------|
| GUAIFENESIN (ADULT TUSSIN CHEST CONGESTION) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (ADULT WAL-TUSSIN) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (CHEST CONGESTION RELIEF) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (CHEST CONGESTION RELIEF) 400 MG ORAL TABLET | GENERIC, OTC | |
| GUAIFENESIN (CHILDREN'S CHEST CONGESTION) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (CHILDREN'S MUCUS RELIEF) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (COUGH SYRUP) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (DIABETIC TUSSIN) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (DIABETIC TUSSIN EX) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|-------------------------|
| GUAIFENESIN (EXPECTORANT) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (EXPECTORANT) 200 MG ORAL TABLET | GENERIC, OTC | |
| GUAIFENESIN (EXPECTORANT COUGH SYRUP) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (FENESIN IR) 400 MG ORAL TABLET | GENERIC, OTC | |
| GUAIFENESIN (GERI-TUSSIN) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (G-FENESIN) 400 MG ORAL TABLET | GENERIC, OTC | |
| GUAIFENESIN (GILTUSS EX) 200 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (120 mL per 30 days) |
| GUAIFENESIN 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN 200 MG ORAL TABLET | GENERIC, OTC | |
| GUAIFENESIN 400 MG ORAL TABLET | GENERIC, OTC | |
| GUAIFENESIN (LIQUITUSS GG) 200 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (120 mL per 30 days) |
| GUAIFENESIN (MUCINEX FAST-MAX CHEST-CONGEST) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (MUCOSA) 400 MG ORAL TABLET | GENERIC, OTC | |
| GUAIFENESIN (MUCUS ER) 600 MG ORAL TAB ER 12H | GENERIC, OTC | QL (2 tablets per day) |
| GUAIFENESIN (MUCUS ER) 1200 MG ORAL TAB ER 12H | GENERIC, OTC | |
| GUAIFENESIN (MUCUS RELIEF) 400 MG ORAL TABLET | GENERIC, OTC | |
| GUAIFENESIN (MUCUS RELIEF ER) 600 MG ORAL TAB ER 12H | GENERIC, OTC | QL (2 tablets per day) |
| GUAIFENESIN (MUCUS RELIEF ER) 1200 MG ORAL TAB ER 12H | GENERIC, OTC | |
| GUAIFENESIN (MUCUS-ER MAX) 1200 MG ORAL TAB ER 12H | GENERIC, OTC | |
| GUAIFENESIN (REFENESEN) 400 MG ORAL TABLET | GENERIC, OTC | |
| GUAIFENESIN (ROBAFEN) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (SCOT-TUSSIN) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (SCOT-TUSSIN EXPECTORANT) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (SILTUSSIN SA) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (TUSNEL-EX) 100 MG/5ML ORAL LIQUID | BRAND, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (TUSSIN) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (TUSSIN) 400 MG ORAL TABLET | GENERIC, OTC | |
| GUAIFENESIN (TUSSIN CHEST CONGESTION) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (TUSSIN HONEY) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (TUSSIN MUCUS-CHEST CONGESTION) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |
| GUAIFENESIN (WAL-TUSSIN) 100 MG/5ML ORAL LIQUID | GENERIC, OTC | QL (240 mL per 30 days) |

NARCOTIC ANTITUSS-1ST GEN. ANTIHISTAMINE-DECONGEST

| | | |
|---|--------------|---|
| PHENYLEPHRINE HCL/COD/PROMETH (PROMETHAZINE VC-CODEINE) 6.25-5-10 ORAL SYRUP | GENERIC, OTC | AR (age 6 and older); QL (120 mL per 30 days) |
| PHENYLEPHRINE HCL/COD/PROMETH (PROMETHAZINE-PHENYLEPH-CODEINE) 6.25-5-10 ORAL SYRUP | GENERIC, OTC | AR (age 6 and older); QL (120 mL per 30 days) |

NARCOTIC ANTITUSS-DECONGESTANT-EXPECTORANT COMB

| | | |
|--|--------------|----------------------|
| P-EPHED HCL/CODEINE/GUAIFEN (GUAIFENESIN DAC) 30-10-100 ORAL SYRUP | GENERIC, OTC | AR (age 6 and older) |
| P-EPHED HCL/CODEINE/GUAIFEN (VIRTUSSIN DAC) 30-10-100 ORAL SYRUP | GENERIC, OTC | AR (age 6 and older) |

NARCOTIC ANTITUSSIVE-1ST GENERATION ANTIHISTAMINE

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---|
| CODEINE/PROMETHAZINE HCL (PROMETHAZINE-CODEINE) 6.25-10/5 ORAL SYRUP | GENERIC, OTC | AR (age 6 and older); QL (120 mL per 30 days) |

NARCOTIC ANTITUSSIVE-ANTICHOLINERGIC COMB.

| | | |
|--|--------------|---|
| HYDROCODONE BIT/HOMATROP ME-BR (HYDROCODONE-HOMATROPINE MBR) 5-1.5 MG/5 ORAL SYRUP | GENERIC, OTC | AR (age 6 and older); QL (240 mL per 30 days) |
| HYDROCODONE BIT/HOMATROP ME-BR (HYDROMET) 5-1.5 MG/5 ORAL SYRUP | GENERIC, OTC | AR (age 6 and older); QL (240 mL per 30 days) |

NARCOTIC ANTITUSSIVE-EXPECTORANT COMBINATION

| | | |
|---|--------------|---|
| GUAIFENESIN/CODEINE PHOS (CODEINE-GUAIFENESIN) 10-100MG/5 ORAL LIQUID | GENERIC, OTC | AR (age 6 and older); QL (240 mL per 27 days) |
| GUAIFENESIN/CODEINE PHOS (G TUSSIN AC) 10-100MG/5 ORAL LIQUID | GENERIC, OTC | AR (age 6 and older); QL (240 mL per 27 days) |
| GUAIFENESIN/CODEINE PHOS (GUAIATUSSIN AC) 20-200/10 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/CODEINE PHOS (GUAIATUSSIN AC) 10-100MG/5 ORAL LIQUID | GENERIC, OTC | AR (age 6 and older); QL (240 mL per 27 days) |
| GUAIFENESIN/CODEINE PHOS (GUAIATUSSIN AC) 10-100MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/CODEINE PHOS (GUAIFENESIN AC) 10-100MG/5 ORAL LIQUID | GENERIC, OTC | AR (age 6 and older); QL (240 mL per 27 days) |
| GUAIFENESIN/CODEINE PHOS (GUAIFENESIN-CODEINE) 10-100MG/5 ORAL LIQUID | GENERIC, OTC | AR (age 6 and older); QL (240 mL per 27 days) |
| GUAIFENESIN/CODEINE PHOS (MAXI-TUSS AC) 10-100MG/5 ORAL LIQUID | GENERIC, OTC | AR (age 6 and older); QL (240 mL per 27 days) |
| GUAIFENESIN/CODEINE PHOS (VIRTUSSIN AC) 10-100MG/5 ORAL LIQUID | GENERIC, OTC | AR (age 6 and older); QL (240 mL per 27 days) |

NON-NARCOTIC ANTITUSSIVE AND EXPECTORANT COMB.

| | | |
|--|--------------|--|
| GUAIFENESIN/D-METHORPHAN HB (ADULT TUSSIN COUGH CONGEST DM) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (ADULT TUSSIN DM) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (ADULT WAL-TUSSIN DM) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (ANTITUSSIVE DM) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (BIOCOTRON) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (CHEST CONGESTION RELIEF DM) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (COUGH DM) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (COUGH SYRUP DM) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (DIABETIC TUSSIN DM) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (EXPECTORANT DM) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (GERI-TUSSIN DM) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (GILTUSS COUGH-CONGESTION) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (GILTUSS DIABETIC) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| GUAIFENESIN/D-METHORPHAN HB (GILTUSS HBP) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (GUAIASORB DM) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (GUAIFENESIN-DEXTROMETHORPHAN) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (GUAIFENESIN-DEXTROMETHORPHAN) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (MAXI-TUSS G) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (NEO-TUSS) 200-30MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (ROBAFEN DM COUGH) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (ROBAFEN DM COUGH-CHEST CONGEST) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (SAFETUSSIN DM) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (SILTUSSIN DM) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (SILTUSSIN DM DAS) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (SORBUGEN NR) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (TUSNEL DIABETIC) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (TUSSIN COUGH) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (TUSSIN DM) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (TUSSIN DM) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (TUSSIN DM CLEAR) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (TUSSIN DM COUGH-CHEST CONGEST) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (ULTRA DM FREE & CLEAR) 100-10MG/5 ORAL LIQUID | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (ULTRA TUSS) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |
| GUAIFENESIN/D-METHORPHAN HB (WAL-TUSSIN DM) 100-10MG/5 ORAL SYRUP | GENERIC, OTC | |

SYMPATHOMIMETIC AGENTS

| | | |
|--|--------------|------------------------|
| PSEUDOEPHEDRINE HCL (CHILDREN'S SILFEDRINE) 15 MG/5 ML ORAL LIQUID | GENERIC, OTC | |
| PSEUDOEPHEDRINE HCL (NASAL DECONGESTANT) 30 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| PSEUDOEPHEDRINE HCL 30 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| PSEUDOEPHEDRINE HCL 60 MG ORAL TABLET | GENERIC, OTC | QL (2 tablets per day) |
| PSEUDOEPHEDRINE HCL (SUDOGEST) 30 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| PSEUDOEPHEDRINE HCL (SUDOGEST) 60 MG ORAL TABLET | GENERIC, OTC | QL (2 tablets per day) |
| PSEUDOEPHEDRINE HCL (SUPHEDRIN) 15 MG/5 ML ORAL LIQUID | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|------------------------|
| PSEUDOEPHEDRINE HCL (SUPHEDRIN) 30 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| PSEUDOEPHEDRINE HCL (SUPHEDRINE) 30 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| PSEUDOEPHEDRINE HCL (SUPHEDRINE SINUS CONGESTION) 30 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| PSEUDOEPHEDRINE HCL (WAL-PHED) 30 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |

DERMATOLOGY - ACNE

ACNE AGENTS,SYSTEMIC

| | | |
|---|--------------|------------|
| ISOTRETINOIN (ABSORICA) 10 MG ORAL CAPSULE | BRAND, OTC | PA (Rx053) |
| ISOTRETINOIN (ABSORICA) 20 MG ORAL CAPSULE | BRAND, OTC | PA (Rx053) |
| ISOTRETINOIN (ABSORICA) 30 MG ORAL CAPSULE | BRAND, OTC | PA (Rx053) |
| ISOTRETINOIN (ABSORICA) 40 MG ORAL CAPSULE | BRAND, OTC | PA (Rx053) |
| ISOTRETINOIN (AC CUTANE) 20 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (AC CUTANE) 30 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (AC CUTANE) 40 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (AMNESTEEM) 10 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (AMNESTEEM) 20 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (AMNESTEEM) 40 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (CLARAVIS) 10 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (CLARAVIS) 20 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (CLARAVIS) 30 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (CLARAVIS) 40 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN 10 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN 20 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN 30 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN 40 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (MYORISAN) 10 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (MYORISAN) 20 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (MYORISAN) 30 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (MYORISAN) 40 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (ZENATANE) 10 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (ZENATANE) 20 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (ZENATANE) 30 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |
| ISOTRETINOIN (ZENATANE) 40 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx053) |

VITAMIN A DERIVATIVES

| | | |
|--|--------------|------------|
| ADAPALENE 0.1% TOPICAL GEL (GRAM) | GENERIC, OTC | PA (Rx053) |
| ADAPALENE 0.3% TOPICAL GEL (GRAM) | GENERIC, OTC | PA (Rx053) |
| ADAPALENE (EFFACLAR ADAPALENE) 0.1% TOPICAL GEL (GRAM) | GENERIC, OTC | PA (Rx053) |
| TRETINOIN (AVITA) 0.025% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx053) |
| TRETINOIN 0.025% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx053) |
| TRETINOIN 0.05% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx053) |

DERMATOLOGY - ANTIINFECTIVE

TOPICAL ANTIBIOTICS

| | | |
|---|--------------|------------|
| CLINDAMYCIN PHOSPHATE 1% TOPICAL SOLUTION | GENERIC, OTC | PA (Rx053) |
| MUPIROCIN 2% TOPICAL OINT. (G) | GENERIC, OTC | |

TOPICAL ANTIFUNGALS

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| CICLOPIROX 0.77% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx010) |
| CICLOPIROX 0.77% TOPICAL GEL (GRAM) | GENERIC, OTC | PA (Rx010) |
| CICLOPIROX 1% TOPICAL SHAMPOO | GENERIC, OTC | PA (Rx010) |
| CICLOPIROX 8% TOPICAL SOLUTION | GENERIC, OTC | PA (Rx010) |
| CICLOPIROX 0.77% TOPICAL SUSPENSION | GENERIC, OTC | PA (Rx010) |
| CICLOPIROX OLAMINE (CICLOPIROX) 0.77% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx010) |
| CICLOPIROX OLAMINE (CICLOPIROX) 0.77% TOPICAL SUSPENSION | GENERIC, OTC | PA (Rx010) |
| CLOTRIMAZOLE (ANTIFUNGAL) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| CLOTRIMAZOLE (ANTIFUNGAL RINGWORM) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| CLOTRIMAZOLE (ATHLETE'S FOOT) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| CLOTRIMAZOLE (ATHLETIC FOOT CREAM) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| CLOTRIMAZOLE 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| CLOTRIMAZOLE (CLOTRIMAZOLE AF) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| CLOTRIMAZOLE (ITCH RELIEF) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| CLOTRIMAZOLE (JOCK ITCH) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| CLOTRIMAZOLE (JOCK ITCH RELIEF) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| CLOTRIMAZOLE (MICOTRIN AC) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| CLOTRIMAZOLE (MYCOZYL AC) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| KETOCONAZOLE 2% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx010) |
| KETOCONAZOLE 2% TOPICAL SHAMPOO | GENERIC, OTC | PA (Rx010) |
| MICONAZOLE NITRATE (ANTIFUNGAL CREAM) 2% TOPICAL CREAM (G) | GENERIC, OTC | |
| MICONAZOLE NITRATE (BAZA ANTIFUNGAL) 2% TOPICAL CREAM (G) | GENERIC, OTC | |
| MICONAZOLE NITRATE (DERMAFUNGAL) 2% TOPICAL CREAM (G) | GENERIC, OTC | |
| MICONAZOLE NITRATE (INZO ANTIFUNGAL) 2% TOPICAL CREAM (G) | GENERIC, OTC | |
| MICONAZOLE NITRATE (MICATIN) 2% TOPICAL CREAM (G) | GENERIC, OTC | |
| MICONAZOLE NITRATE 2% TOPICAL CREAM (G) | GENERIC, OTC | |
| MICONAZOLE NITRATE (REMEDY ANTIFUNGAL) 2% TOPICAL CREAM(ML) | GENERIC, OTC | |
| MICONAZOLE NITRATE (SECURA ANTIFUNGAL) 2% TOPICAL CREAM (G) | GENERIC, OTC | |
| MICONAZOLE NITRATE (THERA ANTIFUNGAL) 2% TOPICAL CREAM(ML) | GENERIC, OTC | |
| NAFTIFINE HCL 1% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx010) |
| NAFTIFINE HCL 1% TOPICAL GEL (GRAM) | GENERIC, OTC | PA (Rx010) |
| NYSTATIN (NYAMYC) 100000/G TOPICAL POWDER | GENERIC, OTC | |
| NYSTATIN 100000/G TOPICAL CREAM (G) | GENERIC, OTC | |
| NYSTATIN 100000/G TOPICAL OINT. (G) | GENERIC, OTC | |
| NYSTATIN 100000/G TOPICAL POWDER | GENERIC, OTC | |
| NYSTATIN (NYSTOP) 100000/G TOPICAL POWDER | GENERIC, OTC | |
| TERBINAFINE HCL (ANTIFUNGAL) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| TERBINAFINE HCL (ATHLETE'S FOOT) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| TERBINAFINE HCL (JOCK ITCH) 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| TERBINAFINE HCL (LAMISIL) 1% TOPICAL SPRAY | BRAND, OTC | PA (Rx010) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| TERBINAFINE HCL (TERBINAFINE) 1% TOPICAL CREAM (G) | GENERIC, OTC | |

TOPICAL ANTIPARASITICS

| | | |
|---|--------------|--|
| PERMETHRIN (LICE KILLING) 1% TOPICAL LIQUID | GENERIC, OTC | |
| PERMETHRIN (LICE TREATMENT) 1% TOPICAL LIQUID | GENERIC, OTC | |
| PERMETHRIN 5% TOPICAL CREAM (G) | GENERIC, OTC | |
| PIPERONYL BUTOXIDE/PYRETHRINS (LICE KILLING) 4%-0.33% TOPICAL SHAMPOO | GENERIC, OTC | |
| PIPERONYL BUTOXIDE/PYRETHRINS (LICE PYRINYL SHAMPOO) 4%-0.33% TOPICAL SHAMPOO | GENERIC, OTC | |
| PIPERONYL BUTOXIDE/PYRETHRINS (LICE TREATMENT) 1% TOPICAL LIQUID | GENERIC, OTC | |
| PIPERONYL BUTOXIDE/PYRETHRINS (RID) 4%-0.33% TOPICAL SHAMPOO | GENERIC, OTC | |

TOPICAL SULFONAMIDES

| | | |
|--|--------------|--|
| SILVER SULFADIAZINE 1% TOPICAL CREAM (G) | GENERIC, OTC | |
| SILVER SULFADIAZINE (SSD) 1% TOPICAL CREAM (G) | GENERIC, OTC | |

DERMATOLOGY - ANTIINFLAMMATORY

TOPICAL ANTI-INFLAMMATORY STEROIDAL

| | | |
|--|--------------|--|
| BETAMET DIPROP/PROP GLY (BETAMETHASONE DIPROP AUGMENTED) 0.05% TOPICAL CREAM (G) | GENERIC, OTC | |
| BETAMET DIPROP/PROP GLY (BETAMETHASONE DIPROP AUGMENTED) 0.05% TOPICAL OINT. (G) | GENERIC, OTC | |
| BETAMETHASONE VALERATE 0.1% TOPICAL CREAM (G) | GENERIC, OTC | |
| BETAMETHASONE VALERATE 0.1% TOPICAL OINT. (G) | GENERIC, OTC | |
| CLOBETASOL PROPIONATE 0.05% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx015) |
| CLOBETASOL PROPIONATE 0.05% TOPICAL OINT. (G) | GENERIC, OTC | PA (Rx015) |
| CLOBETASOL PROPIONATE/EMOLL (CLOBETASOL EMOLLIENT) 0.05% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx015) |
| FLUOCINOLONE ACETONIDE 0.025% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx015) |
| FLUOCINOLONE ACETONIDE 0.025% TOPICAL OINT. (G) | GENERIC, OTC | PA (Rx015) |
| FLUOCINOLONE ACETONIDE 0.01% TOPICAL SOLUTION | GENERIC, OTC | PA (Rx015) |
| FLUOCINONIDE 0.1% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx015) |
| HYDROCORTISONE (ALA-CORT) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (ANTI-ITCH) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (ANTI-ITCH) 1% TOPICAL OINT. (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (AQUAPHOR ITCH RELIEF) 1% TOPICAL OINT. (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (CORTAID) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (CORTISONE) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (CORTISONE WITH ALOE) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (CORTIZONE-10) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (CORTIZONE-10) 1% TOPICAL OINT. (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|--|
| HYDROCORTISONE (CORTIZONE-10 PLUS) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE 2.5% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE 1% TOPICAL CRM/PE APP | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE 1% TOPICAL OINT. (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE 2.5% TOPICAL OINT. (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (HYDROCREAM) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (NOBLE FORMULA HC) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (PREPARATION H) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (PROCTO-PAK) 1% TOPICAL CRM/PE APP | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE (SOOTHING CARE) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE ACETATE (HYDROCORTISONE) 1% TOPICAL OINT. (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE ACETATE 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| HYDROCORTISONE ACETATE (VANICREAM HC) 1% TOPICAL CREAM (G) | GENERIC, OTC | QL (60 g per 292 days, 1 fill per month) |
| MOMETASONE FUROATE 0.1% TOPICAL OINT. (G) | GENERIC, OTC | QL (15 g per 292 days) |
| TRIAMCINOLONE ACETONIDE 0.025% TOPICAL CREAM (G) | GENERIC, OTC | |
| TRIAMCINOLONE ACETONIDE 0.1% TOPICAL CREAM (G) | GENERIC, OTC | |
| TRIAMCINOLONE ACETONIDE 0.5% TOPICAL CREAM (G) | GENERIC, OTC | |
| TRIAMCINOLONE ACETONIDE 0.1% TOPICAL LOTION | GENERIC, OTC | PA (Rx015) |
| TRIAMCINOLONE ACETONIDE 0.025% TOPICAL OINT. (G) | GENERIC, OTC | |
| TRIAMCINOLONE ACETONIDE 0.1% TOPICAL OINT. (G) | GENERIC, OTC | |
| TRIAMCINOLONE ACETONIDE 0.5% TOPICAL OINT. (G) | GENERIC, OTC | |
| TRIAMCINOLONE ACETONIDE (TRIDERM) 0.1% TOPICAL CREAM (G) | GENERIC, OTC | |
| TRIAMCINOLONE ACETONIDE (TRIDERM) 0.5% TOPICAL CREAM (G) | GENERIC, OTC | |

TOPICAL ANTI-INFLAMMATORY, NSAIDS

| | | |
|---|--------------|------------------------|
| DICLOFENAC SODIUM (ARTHRITIS PAIN) 1% TOPICAL GEL (GRAM) | GENERIC, OTC | QL (100 g per 12 days) |
| DICLOFENAC SODIUM (ARTHRITIS PAIN RELIEVER) 1% TOPICAL GEL (GRAM) | GENERIC, OTC | QL (100 g per 12 days) |
| DICLOFENAC SODIUM 1% TOPICAL GEL (GRAM) | GENERIC, OTC | QL (100 g per 12 days) |

DERMATOLOGY - MISCELLANEOUS

ANTIPERSPIRANTS

| | | |
|---|------------|--|
| ALUMINUM CHLORIDE (DRYSOL) 20% TOPICAL SOLUTION | BRAND, OTC | |
|---|------------|--|

ANTISEBORRHEIC AGENTS

| | | |
|--------------------------------------|--------------|--|
| SELENIUM SULFIDE 2.5% TOPICAL LOTION | GENERIC, OTC | |
|--------------------------------------|--------------|--|

| DRUG NAME | TYPE | RESTRICTIONS |
|------------------|-------------|---------------------|
|------------------|-------------|---------------------|

IRRITANTS/COUNTER-IRRITANTS

| | | |
|---|--------------|-----------------------------|
| CAPSAICIN (ARTHRITIS PAIN RELIEF) 0.1% TOPICAL CREAM (G) | GENERIC, OTC | QL (1 tube per 30 days) |
| CAPSAICIN (ARTHRITIS PAIN RELIEVING) 0.075% TOPICAL CREAM (G) | GENERIC, OTC | QL (1 tube per 30 days) |
| CAPSAICIN 0.025% TOPICAL ADH. PATCH | GENERIC, OTC | QL (40 patches per 30 days) |
| CAPSAICIN 0.025% TOPICAL CREAM (G) | GENERIC, OTC | QL (1 tube per 30 days) |
| CAPSAICIN 0.1% TOPICAL CREAM (G) | GENERIC, OTC | QL (1 tube per 30 days) |
| CAPSAICIN (CAPSAICIN HEAT PATCH) 0.025% TOPICAL ADH. PATCH | GENERIC, OTC | QL (40 patches per 30 days) |
| CAPSAICIN (CAPSAICIN HOT PATCH) 0.025% TOPICAL ADH. PATCH | GENERIC, OTC | QL (40 patches per 30 days) |
| CAPSAICIN (CAPSICUM HOT PATCH) 0.025% TOPICAL ADH. PATCH | GENERIC, OTC | QL (40 patches per 30 days) |
| CAPSAICIN (MEDICATED HEAT PATCH) 0.025% TOPICAL ADH. PATCH | GENERIC, OTC | QL (40 patches per 30 days) |
| CAPSAICIN (ZOSTRIX) 0.033% TOPICAL CREAM (G) | GENERIC, OTC | QL (1 tube per 30 days) |
| CAPSAICIN (ZOSTRIX HP) 0.1% TOPICAL CREAM (G) | GENERIC, OTC | QL (1 tube per 30 days) |
| CAPSAICIN (ZOSTRIX HP FOOT) 0.1% TOPICAL CREAM (G) | GENERIC, OTC | QL (1 tube per 30 days) |
| CAPSAICIN/MENTHOL (SALONPAS) 0.025-1.25 TOPICAL ADH. PATCH | BRAND, OTC | QL (40 patches per 30 days) |
| METHYL SALICYLATE/MENTH/CAMPH (PAIN RELIEVING) TOPICAL ADH. PATCH | GENERIC, OTC | QL (40 patches per 30 days) |
| METHYL SALICYLATE/MENTH/CAMPH (PAIN-RELIEVING) TOPICAL ADH. PATCH | GENERIC, OTC | QL (40 patches per 30 days) |
| METHYL SALICYLATE/MENTHOL (SALONPAS) 10%-3% TOPICAL ADH. PATCH | BRAND, OTC | QL (40 patches per 30 days) |

TOPICAL ANTI-INFLAMMATORY STEROID-LOCAL ANESTHETIC

| | | |
|---|--------------|--|
| HC ACETATE/PRAMOXINE HCL (ANALPRAM HC) 2.5%-1% TOPICAL LOTION | BRAND, OTC | |
| HC ACETATE/PRAMOXINE HCL (HYDROCORTISONE-PRAMOXINE) 2.5%-1% TOPICAL CREAM (G) | GENERIC, OTC | |
| HC ACETATE/PRAMOXINE HCL (PRAMOSONE) 1%-1% TOPICAL CREAM (G) | BRAND, OTC | |
| HC ACETATE/PRAMOXINE HCL (PRAMOSONE) 1%-1% TOPICAL LOTION | BRAND, OTC | |
| HC ACETATE/PRAMOXINE HCL (PRAMOSONE) 2.5%-1% TOPICAL LOTION | BRAND, OTC | |
| HC ACETATE/PRAMOXINE HCL (PRAMOSONE) 1%-1% TOPICAL OINT. (G) | BRAND, OTC | |

TOPICAL ANTINEOPLASTIC & PREMALIGNANT LESION AGNTS

| | | |
|----------------------------------|--------------|--|
| FLUOROURACIL 2% TOPICAL SOLUTION | GENERIC, OTC | |
| FLUOROURACIL 5% TOPICAL SOLUTION | GENERIC, OTC | |

TOPICAL LOCAL ANESTHETICS

| | | |
|---|--------------|--|
| LIDOCAINE 5% TOPICAL ADH. PATCH | GENERIC, OTC | |
| LIDOCAINE/PRILOCAINE (LIDOCAINE-PRILOCAINE) 2.5%-2.5% TOPICAL CREAM (G) | GENERIC, OTC | |

DERMATOLOGY - PSORIASIS/ECZEMA

ANTIPSORIATIC AGENTS,SYSTEMIC

| | | |
|------------------------------|--------------|------------------|
| ACITRETIN 10 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx038); SPEC |
| ACITRETIN 25 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx038); SPEC |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|-------------|---------------------|
| SECUKINUMAB (COSENTYX (2 SYRINGES)) 150 MG/ML SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx040); SPEC |
| SECUKINUMAB (COSENTYX PEN) 150 MG/ML SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx040); SPEC |
| SECUKINUMAB (COSENTYX PEN (2 PENS)) 150 MG/ML SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx040); SPEC |
| SECUKINUMAB (COSENTYX SYRINGE) 150 MG/ML SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx040); SPEC |

ANTIPSORIATICS AGENTS

| | | |
|--|--------------|------------|
| CALCIPOTRIENE 0.005% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx037) |
| CALCIPOTRIENE 0.005% TOPICAL OINT. (G) | GENERIC, OTC | PA (Rx037) |
| CALCIPOTRIENE 0.005% TOPICAL SOLUTION | GENERIC, OTC | PA (Rx037) |
| TAZAROTENE 0.1% TOPICAL CREAM (G) | GENERIC, OTC | PA (Rx037) |

TOPICAL IMMUNOSUPPRESSIVE AGENTS

| | | |
|------------------------------------|--------------|------------|
| TACROLIMUS 0.03% TOPICAL OINT. (G) | GENERIC, OTC | PA (Rx036) |
| TACROLIMUS 0.1% TOPICAL OINT. (G) | GENERIC, OTC | PA (Rx036) |

DIABETES

ANTIHYPERGLY,INCRETIN MIMETIC(GLP-1 RECEPTOR AGONIST)

| | | |
|---|------------|------------|
| EXENATIDE (BYETTA) 5MCG/0.02 SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx007) |
| EXENATIDE (BYETTA) 10MCG/0.04 SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx007) |
| EXENATIDE MICROSPHERES (BYDUREON BCISE) 2MG/0.85ML SUBCUTANE. AUTO INJECT | BRAND, OTC | PA (Rx007) |
| LIXISENATIDE (ADLYXIN) 20 MCG/0.2 SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx007) |
| LIXISENATIDE (ADLYXIN) 10-20 (1) SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx007) |
| SEMAGLUTIDE (RYBELSUS) 3 MG ORAL TABLET | BRAND, OTC | PA (Rx007) |
| SEMAGLUTIDE (RYBELSUS) 7 MG ORAL TABLET | BRAND, OTC | PA (Rx007) |
| SEMAGLUTIDE (RYBELSUS) 14 MG ORAL TABLET | BRAND, OTC | PA (Rx007) |

ANTIHYPERGLYCEMIC-SODIUM/GLUCOCOTRANSPORT2(SGLT2)INHIBITORS

| | | |
|--|------------|------------|
| ERTUGLIFLOZIN PIDOLATE (STEGLATRO) 5 MG ORAL TABLET | BRAND, OTC | PA (Rx008) |
| ERTUGLIFLOZIN PIDOLATE (STEGLATRO) 15 MG ORAL TABLET | BRAND, OTC | PA (Rx008) |

ANTIHYPERGLYCEMIC, ALPHA-GLUCOSIDASE INHIBITORS (N-S)

| | | |
|-----------------------------|--------------|--|
| ACARBOSE 25 MG ORAL TABLET | GENERIC, OTC | |
| ACARBOSE 50 MG ORAL TABLET | GENERIC, OTC | |
| ACARBOSE 100 MG ORAL TABLET | GENERIC, OTC | |

ANTIHYPERGLYCEMIC, DPP-4 INHIBITORS

| | | |
|--|--------------|------------|
| ALOGLIPTIN BENZOATE (ALOGLIPTIN) 6.25 MG ORAL TABLET | GENERIC, OTC | PA (Rx006) |
| ALOGLIPTIN BENZOATE (ALOGLIPTIN) 12.5 MG ORAL TABLET | GENERIC, OTC | PA (Rx006) |
| ALOGLIPTIN BENZOATE (ALOGLIPTIN) 25 MG ORAL TABLET | GENERIC, OTC | PA (Rx006) |

ANTIHYPERGLYCEMIC, INSULIN-RELEASE STIMULANT TYPE

| | | |
|---|--------------|--|
| GLIMEPIRIDE 1 MG ORAL TABLET | GENERIC, OTC | |
| GLIMEPIRIDE 2 MG ORAL TABLET | GENERIC, OTC | |
| GLIMEPIRIDE 4 MG ORAL TABLET | GENERIC, OTC | |
| GLIPIZIDE 5 MG ORAL TABLET | GENERIC, OTC | |
| GLIPIZIDE 10 MG ORAL TABLET | GENERIC, OTC | |
| GLIPIZIDE (GLIPIZIDE ER) 2.5 MG ORAL TABLET ER 24 | GENERIC, OTC | |
| GLIPIZIDE (GLIPIZIDE ER) 5 MG ORAL TABLET ER 24 | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| GLIPIZIDE (GLIPIZIDE ER) 10 MG ORAL TAB ER 24 | GENERIC, OTC | |
| GLIPIZIDE (GLIPIZIDE XL) 2.5 MG ORAL TAB ER 24 | GENERIC, OTC | |
| GLIPIZIDE (GLIPIZIDE XL) 5 MG ORAL TAB ER 24 | GENERIC, OTC | |
| GLIPIZIDE (GLIPIZIDE XL) 10 MG ORAL TAB ER 24 | GENERIC, OTC | |
| GLYBURIDE 1.25 MG ORAL TABLET | GENERIC, OTC | |
| GLYBURIDE 2.5 MG ORAL TABLET | GENERIC, OTC | |
| GLYBURIDE 5 MG ORAL TABLET | GENERIC, OTC | |
| NATEGLINIDE 60 MG ORAL TABLET | GENERIC, OTC | |
| NATEGLINIDE 120 MG ORAL TABLET | GENERIC, OTC | |
| REPAGLINIDE 0.5 MG ORAL TABLET | GENERIC, OTC | |
| REPAGLINIDE 1 MG ORAL TABLET | GENERIC, OTC | |
| REPAGLINIDE 2 MG ORAL TABLET | GENERIC, OTC | |

ANTIHYPERGLYCEMIC, INSULIN-RESPONSE ENHANCER (N-S)

| | | |
|------------------------------------|--------------|--|
| PIOGLITAZONE HCL 15 MG ORAL TABLET | GENERIC, OTC | |
| PIOGLITAZONE HCL 30 MG ORAL TABLET | GENERIC, OTC | |
| PIOGLITAZONE HCL 45 MG ORAL TABLET | GENERIC, OTC | |

ANTIHYPERGLYCEMIC,BIGUANIDE TYPE(NON-SULFONYLUREA)

| | | |
|---|--------------|--|
| METFORMIN HCL 500 MG/5ML ORAL SOLUTION | GENERIC, OTC | |
| METFORMIN HCL 500 MG ORAL TABLET | GENERIC, OTC | |
| METFORMIN HCL 850 MG ORAL TABLET | GENERIC, OTC | |
| METFORMIN HCL 1000 MG ORAL TABLET | GENERIC, OTC | |
| METFORMIN HCL (METFORMIN HCL ER) 500 MG ORAL TAB ER 24H | GENERIC, OTC | |
| METFORMIN HCL (METFORMIN HCL ER) 750 MG ORAL TAB ER 24H | GENERIC, OTC | |

ANTIHYPERGLYCEMIC,INSULIN-REL STIM.& BIGUANIDE CMB

| | | |
|--|--------------|--|
| GLIPIZIDE/METFORMIN HCL (GLIPIZIDE-METFORMIN) 2.5-250 MG ORAL TABLET | GENERIC, OTC | |
| GLIPIZIDE/METFORMIN HCL (GLIPIZIDE-METFORMIN) 2.5-500 MG ORAL TABLET | GENERIC, OTC | |
| GLIPIZIDE/METFORMIN HCL (GLIPIZIDE-METFORMIN) 5 MG-500MG ORAL TABLET | GENERIC, OTC | |
| GLYBURIDE/METFORMIN HCL (GLYBURIDE-METFORMIN HCL) 1.25-250MG ORAL TABLET | GENERIC, OTC | |
| GLYBURIDE/METFORMIN HCL (GLYBURIDE-METFORMIN HCL) 2.5-500 MG ORAL TABLET | GENERIC, OTC | |
| GLYBURIDE/METFORMIN HCL (GLYBURIDE-METFORMIN HCL) 5 MG-500MG ORAL TABLET | GENERIC, OTC | |
| REPAGLINIDE/METFORMIN HCL (REPAGLINIDE-METFORMIN HCL) 1MG-500MG ORAL TABLET | GENERIC, OTC | |
| REPAGLINIDE/METFORMIN HCL (REPAGLINIDE-METFORMIN HCL) 2 MG-500MG ORAL TABLET | GENERIC, OTC | |

DIABETIC ULCER PREPARATIONS, TOPICAL

| | | |
|--|------------|--|
| BECAPLERMIN (REGANEX) 0.01% TOPICAL GEL (GRAM) | BRAND, OTC | |
|--|------------|--|

HYPERGLYCEMICS

| | | |
|---|------------|--|
| GLUCAGON (BAQSIMI) 3 MG NASAL SPRAY | BRAND, OTC | |
| GLUCAGON (GVOKE HYPOPEN 1-PACK) 0.5 MG/0.1 SUBCUTANE. AUTO INJECT | BRAND, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| GLUCAGON (GVOKE HYOPEN 1-PACK) 1 MG/0.2ML SUBCUTANE. AUTO INJECT | BRAND, OTC | |
| GLUCAGON (GVOKE HYOPEN 2-PACK) 0.5 MG/0.1 SUBCUTANE. AUTO INJECT | BRAND, OTC | |
| GLUCAGON (GVOKE HYOPEN 2-PACK) 1 MG/0.2ML SUBCUTANE. AUTO INJECT | BRAND, OTC | |
| GLUCAGON (GVOKE PFS 1-PACK SYRINGE) 0.5 MG/0.1 SUBCUTANE. SYRINGE | BRAND, OTC | |
| GLUCAGON (GVOKE PFS 1-PACK SYRINGE) 1 MG/0.2ML SUBCUTANE. SYRINGE | BRAND, OTC | |
| GLUCAGON (GVOKE PFS 2-PACK SYRINGE) 0.5 MG/0.1 SUBCUTANE. SYRINGE | BRAND, OTC | |
| GLUCAGON (GVOKE PFS 2-PACK SYRINGE) 1 MG/0.2ML SUBCUTANE. SYRINGE | BRAND, OTC | |
| GLUCAGON,HUMAN RECOMBINANT (GLUCAGON EMERGENCY KIT) 1 MG INJECTION VIAL | BRAND, OTC | |
| GLUCAGON,HUMAN RECOMBINANT (GLUCAGON EMERGENCY KIT) 1 MG INJECTION VIAL | GENERIC, OTC | |

INSULINS

| | | |
|---|--------------|------------------------|
| HUM INSULIN NPH/REG INSULIN HM (HUMULIN 70/30 KWIKPEN) 70-30/ML SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |
| HUM INSULIN NPH/REG INSULIN HM (HUMULIN 70-30) 70-30/ML SUBCUTANE. VIAL | BRAND, OTC | |
| HUM INSULIN NPH/REG INSULIN HM (NOVOLIN 70-30) 70-30/ML SUBCUTANE. VIAL | BRAND, OTC | |
| HUM INSULIN NPH/REG INSULIN HM (NOVOLIN 70-30 FLEXPEN) 70-30/ML SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |
| INSULIN ASPART 100/ML SUBCUTANE. VIAL | GENERIC, OTC | |
| INSULIN ASPART (INSULIN ASPART FLEXPEN) 100/ML (3) SUBCUTANE. INSULN PEN | GENERIC, OTC | QL (140 days per fill) |
| INSULIN ASPART (INSULIN ASPART PENFILL) 100/ML SUBCUTANE. CARTRIDGE | GENERIC, OTC | |
| INSULIN ASPART (NOVOLOG FLEXPEN) 100/ML (3) SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |
| INSULIN DETEMIR (LEVEMIR) 100/ML SUBCUTANE. VIAL | BRAND, OTC | PA (Rx009) |
| INSULIN DETEMIR (LEVEMIR FLEXTOUCH) 100/ML (3) SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |
| INSULIN GLARGINE,HUM.REC.ANLOG (SEMGLEE) 100/ML SUBCUTANE. VIAL | BRAND, OTC | |
| INSULIN GLARGINE,HUM.REC.ANLOG (SEMGLEE PEN) 100/ML (3) SUBCUTANE. INSULN PEN | BRAND, OTC | QL (140 days per fill) |
| INSULIN GLARGINE,HUM.REC.ANLOG (TOUJEO SOLOSTAR) 300/ML SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |
| INSULIN GLARGINE-YFGN 100/ML (3) SUBCUTANE. INSULN PEN | BRAND, OTC | QL (140 days per fill) |
| INSULIN GLARGINE-YFGN 100/ML SUBCUTANE. VIAL | BRAND, OTC | |
| INSULIN GLARGINE-YFGN (SEMGLEE (YFGN)) 100/ML SUBCUTANE. VIAL | BRAND, OTC | |
| INSULIN GLARGINE-YFGN (SEMGLEE (YFGN) PEN) 100/ML (3) SUBCUTANE. INSULN PEN | BRAND, OTC | QL (140 days per fill) |
| INSULIN LISPRO (ADMELOG) 100/ML SUBCUTANE. VIAL | BRAND, OTC | |
| INSULIN LISPRO (ADMELOG SOLOSTAR) 100/ML SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|-----------------------------|
| INSULIN LISPRO (HUMALOG) 100/ML SUBCUTANE. CARTRIDGE | BRAND, OTC | PA (Rx009) |
| INSULIN LISPRO 100/ML SUBCUTANE. VIAL | GENERIC, OTC | |
| INSULIN LISPRO (INSULIN LISPRO JUNIOR KWIKPEN) 100/ML SUBCUTANE. INS PEN HF | GENERIC, OTC | QL (40 patches per 30 days) |
| INSULIN LISPRO (INSULIN LISPRO KWIKPEN U-100) 100/ML SUBCUTANE. INSULN PEN | GENERIC, OTC | QL (140 days per fill) |
| INSULIN NPL/INSULIN LISPRO (HUMALOG MIX 50-50) 50-50/ML SUBCUTANE. VIAL | BRAND, OTC | |
| INSULIN NPL/INSULIN LISPRO (HUMALOG MIX 50-50 KWIKPEN) 50-50/ML SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |
| INSULIN NPL/INSULIN LISPRO (HUMALOG MIX 75-25) 75-25/ML SUBCUTANE. VIAL | BRAND, OTC | |
| INSULIN NPL/INSULIN LISPRO (INSULIN LISPRO PROTAMINE MIX) 75-25/ML SUBCUTANE. INSULN PEN | GENERIC, OTC | PA (Rx009) |
| INSULIN REGULAR, HUMAN (HUMULIN R) 100/ML INJECTION VIAL | BRAND, OTC | |
| INSULIN REGULAR, HUMAN (HUMULIN R U-500) 500/ML SUBCUTANE. VIAL | BRAND, OTC | PA (Rx009) |
| INSULIN REGULAR, HUMAN (HUMULIN R U-500 KWIKPEN) 500/ML (3) SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |
| INSULIN REGULAR, HUMAN (NOVOLIN R) 100/ML INJECTION VIAL | BRAND, OTC | |
| INSULIN REGULAR, HUMAN (NOVOLIN R FLEXPEN) 100/ML (3) SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |
| INSULN ASP PRT/INSULIN ASPART (INSULIN ASPART PROT MIX 70-30) 70-30/ML SUBCUTANE. INSULN PEN | GENERIC, OTC | PA (Rx009) |
| INSULN ASP PRT/INSULIN ASPART (INSULIN ASPART PROT MIX 70-30) 70-30/ML SUBCUTANE. VIAL | GENERIC, OTC | |
| INSULN ASP PRT/INSULIN ASPART (NOVOLOG MIX 70-30) 70-30/ML SUBCUTANE. VIAL | BRAND, OTC | |
| INSULN ASP PRT/INSULIN ASPART (NOVOLOG MIX 70-30 FLEXPEN) 70-30/ML SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |
| NPH, HUMAN INSULIN ISOPHANE (HUMULIN N) 100/ML SUBCUTANE. VIAL | BRAND, OTC | |
| NPH, HUMAN INSULIN ISOPHANE (HUMULIN N KWIKPEN) 100/ML (3) SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |
| NPH, HUMAN INSULIN ISOPHANE (NOVOLIN N) 100/ML SUBCUTANE. VIAL | BRAND, OTC | |
| NPH, HUMAN INSULIN ISOPHANE (NOVOLIN N FLEXPEN) 100/ML (3) SUBCUTANE. INSULN PEN | BRAND, OTC | PA (Rx009) |

EAR - GENERAL DISORDERS

EAR PREPARATIONS, MISC. ANTI-INFECTIVES

| | | |
|--|--------------|--|
| ACETIC ACID 2% OTIC SOLUTION | GENERIC, OTC | |
| ACETIC ACID/HYDROCORTISONE (HYDROCORTISONE-ACETIC ACID) 1%-2% OTIC DROPS | GENERIC, OTC | |

EAR PREPARATIONS,ANTIBIOTICS

| | | |
|---|--------------|--|
| NEOMY SULF/POLYMYX B SULF/HC (NEOMYCIN-POLYMYXIN-HC) 3.5-10K-1 OTIC DROPS SUSP | GENERIC, OTC | |
| NEOMY SULF/POLYMYX B SULF/HC (NEOMYCIN-POLYMYXIN-HYDROCORT) 3.5-10K-1 OTIC SOLUTION | GENERIC, OTC | |
| OFLOXACIN 0.3% OTIC DROPS | GENERIC, OTC | |

OTIC PREPARATIONS,ANTI-INFLAMMATORY-ANTIBIOTICS

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| CIPROFLOXACIN HCL/DEXAMETH (CIPROFLOXACIN-DEXAMETHASONE) 0.3%-0.1% OTIC DROPS SUSP | GENERIC, OTC | |

ELECTROLYTE REGULATION

ELECTROLYTE DEPLETERS

| | | |
|---|--------------|--|
| CALCIUM ACETATE 667 MG ORAL CAPSULE | GENERIC, OTC | |
| CALCIUM ACETATE 667 MG ORAL TABLET | GENERIC, OTC | |
| SODIUM POLYSTYRENE SULFONATE ORAL POWDER | GENERIC, OTC | |
| SODIUM POLYSTYRENE SULFONATE (SPS) 15 G/60 ML ORAL SUSP | GENERIC, OTC | |

POTASSIUM REPLACEMENT

| | | |
|---|--------------|--|
| POTASSIUM BICARBONATE/CIT AC (EFFER-K) 25 MEQ ORAL TABLET EFF | GENERIC, OTC | |
| POTASSIUM CHLORIDE (KLOR-CON M10) 10 MEQ ORAL TAB ER PRT | GENERIC, OTC | |
| POTASSIUM CHLORIDE (KLOR-CON M15) 15 MEQ ORAL TAB ER PRT | GENERIC, OTC | |
| POTASSIUM CHLORIDE (KLOR-CON M20) 20 MEQ ORAL TAB ER PRT | GENERIC, OTC | |
| POTASSIUM CHLORIDE 8 MEQ ORAL CAPSULE ER | GENERIC, OTC | |
| POTASSIUM CHLORIDE 10 MEQ ORAL CAPSULE ER | GENERIC, OTC | |
| POTASSIUM CHLORIDE 10 MEQ ORAL TAB ER PRT | GENERIC, OTC | |
| POTASSIUM CHLORIDE 15 MEQ ORAL TAB ER PRT | GENERIC, OTC | |
| POTASSIUM CHLORIDE 20 MEQ ORAL TAB ER PRT | GENERIC, OTC | |
| POTASSIUM CHLORIDE 8 MEQ ORAL TABLET ER | GENERIC, OTC | |
| POTASSIUM CHLORIDE 10 MEQ ORAL TABLET ER | GENERIC, OTC | |
| POTASSIUM CHLORIDE 20 MEQ ORAL TABLET ER | GENERIC, OTC | |

SODIUM/SALINE PREPARATIONS

| | | |
|---------------------------------|--------------|--|
| SODIUM CHLORIDE 1 G ORAL TABLET | GENERIC, OTC | |
|---------------------------------|--------------|--|

ENDOCRINE DISORDER - OTHER

ANTIDIURETIC AND VASOPRESSOR HORMONES

| | | |
|---|--------------|------------|
| DESMOPRESSIN (NONREFRIGERATED) (DESMOPRESSIN ACETATE) 10/SPRAY NASAL SPRAY/PUMP | GENERIC, OTC | PA (Rx029) |
| DESMOPRESSIN ACETATE 10/SPRAY NASAL SPRAY/PUMP | GENERIC, OTC | PA (Rx029) |
| DESMOPRESSIN ACETATE 0.1 MG ORAL TABLET | GENERIC, OTC | PA (Rx029) |
| DESMOPRESSIN ACETATE 0.2 MG ORAL TABLET | GENERIC, OTC | PA (Rx029) |

ANTINEOPLASTIC LHRH(GNRH) AGONIST,PITUITARY SUPPR.

| | | |
|---|------------|------------------|
| LEUPROLIDE ACETATE (ELIGARD) 7.5 MG SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx028); SPEC |
| LEUPROLIDE ACETATE (ELIGARD) 22.5 MG SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx028); SPEC |
| LEUPROLIDE ACETATE (ELIGARD) 30 MG SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx028); SPEC |
| LEUPROLIDE ACETATE (ELIGARD) 45 MG SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx028); SPEC |

BONE RESORPTION INHIBITORS

| | | |
|--|--------------|--|
| ALENDRONATE SODIUM 70 MG/75ML ORAL SOLUTION | GENERIC, OTC | |
| ALENDRONATE SODIUM 5 MG ORAL TABLET | GENERIC, OTC | |
| ALENDRONATE SODIUM 10 MG ORAL TABLET | GENERIC, OTC | |
| ALENDRONATE SODIUM 35 MG ORAL TABLET | GENERIC, OTC | |
| ALENDRONATE SODIUM 70 MG ORAL TABLET | GENERIC, OTC | |
| CALCITONIN,SALMON,SYNTHETIC (CALCITONIN-SALMON) 200/SPRAY NASAL SPRAY/PUMP | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---------------------------------------|--------------|---------------------|
| IBANDRONATE SODIUM 150 MG ORAL TABLET | GENERIC, OTC | |
| RALOXIFENE HCL 60 MG ORAL TABLET | GENERIC, OTC | |
| RISEDRONATE SODIUM 5 MG ORAL TABLET | GENERIC, OTC | ST (alendronate) |
| RISEDRONATE SODIUM 30 MG ORAL TABLET | GENERIC, OTC | ST (alendronate) |
| RISEDRONATE SODIUM 35 MG ORAL TABLET | GENERIC, OTC | ST (alendronate) |
| RISEDRONATE SODIUM 150 MG ORAL TABLET | GENERIC, OTC | ST (alendronate) |

GROWTH HORMONES

| | | |
|---|------------|------------------|
| SOMATROPIN (GENOTROPIN) 5 MG/ML SUBCUTANE. CARTRIDGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 12 MG/ML SUBCUTANE. CARTRIDGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 0.2MG/0.25 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 0.4MG/0.25 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 0.6MG/0.25 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 0.8MG/0.25 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 1MG/0.25ML SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 1.2MG/0.25 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 1.4MG/0.25 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 1.6MG/0.25 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 1.8MG/0.25 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (GENOTROPIN) 2MG/0.25ML SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (HUMATROPE) 6 MG INJECTION CARTRIDGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (HUMATROPE) 12 MG INJECTION CARTRIDGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (HUMATROPE) 24 MG INJECTION CARTRIDGE | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (NORDITROPIN FLEXPRO) 5 MG/1.5ML SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (NORDITROPIN FLEXPRO) 10MG/1.5ML SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (NORDITROPIN FLEXPRO) 15MG/1.5ML SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx030); SPEC |
| SOMATROPIN (NORDITROPIN FLEXPRO) 30 MG/3 ML SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx030); SPEC |

PITUITARY SUPPRESSIVE AGENTS

| | | |
|--------------------------------|--------------|--|
| CABERGOLINE 0.5 MG ORAL TABLET | GENERIC, OTC | |
| DANAZOL 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DANAZOL 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DANAZOL 200 MG ORAL CAPSULE | GENERIC, OTC | |

ENDOCRINE DISORDER - THYROID

ANTITHYROID PREPARATIONS

| | | |
|------------------------------------|--------------|--|
| METHIMAZOLE 5 MG ORAL TABLET | GENERIC, OTC | |
| METHIMAZOLE 10 MG ORAL TABLET | GENERIC, OTC | |
| PROPYLTHIOURACIL 50 MG ORAL TABLET | GENERIC, OTC | |

IODINE CONTAINING AGENTS

| | | |
|--|--------------|--|
| POTASSIUM IODIDE (SSKI) 1 G/ML ORAL SOLUTION | GENERIC, OTC | |
|--|--------------|--|

THYROID HORMONES

| | | |
|--|--------------|--|
| LEVOTHYROXINE SODIUM (EUTHYROX) 25 MCG ORAL TABLET | GENERIC, OTC | |
|--|--------------|--|

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| LEVOTHYROXINE SODIUM (EUTHYROX) 50 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM (EUTHYROX) 75 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM (EUTHYROX) 88 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM (EUTHYROX) 100 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM (EUTHYROX) 112 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM (EUTHYROX) 125 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM (EUTHYROX) 137 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM (EUTHYROX) 150 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM (EUTHYROX) 175 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM (EUTHYROX) 200 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 25 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 50 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 75 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 88 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 100 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 112 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 125 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 137 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 150 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 175 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 200 MCG ORAL TABLET | GENERIC, OTC | |
| LEVOTHYROXINE SODIUM 300 MCG ORAL TABLET | GENERIC, OTC | |
| LIOTHYRONINE SODIUM 5 MCG ORAL TABLET | GENERIC, OTC | |
| LIOTHYRONINE SODIUM 25 MCG ORAL TABLET | GENERIC, OTC | |
| LIOTHYRONINE SODIUM 50 MCG ORAL TABLET | GENERIC, OTC | |
| LIOTRIX (THYROLAR-1) 12.5-50MCG ORAL TABLET | BRAND, OTC | |
| LIOTRIX (THYROLAR-1/2) 6.25-25MCG ORAL TABLET | BRAND, OTC | |
| LIOTRIX (THYROLAR-1/4) 3.1-12.5 ORAL TABLET | BRAND, OTC | |
| LIOTRIX (THYROLAR-2) 25-100 MCG ORAL TABLET | BRAND, OTC | |
| LIOTRIX (THYROLAR-3) 37.5-150 ORAL TABLET | BRAND, OTC | |
| THYROID (ARMOUR THYROID) 15 MG ORAL TABLET | BRAND, OTC | |
| THYROID (ARMOUR THYROID) 30 MG ORAL TABLET | BRAND, OTC | |
| THYROID (ARMOUR THYROID) 60 MG ORAL TABLET | BRAND, OTC | |
| THYROID (ARMOUR THYROID) 90 MG ORAL TABLET | BRAND, OTC | |
| THYROID (ARMOUR THYROID) 120 MG ORAL TABLET | BRAND, OTC | |
| THYROID (ARMOUR THYROID) 240 MG ORAL TABLET | BRAND, OTC | |
| THYROID (ARMOUR THYROID) 300 MG ORAL TABLET | BRAND, OTC | |
| THYROID (NP THYROID) 15 MG ORAL TABLET | GENERIC, OTC | |
| THYROID (NP THYROID) 30 MG ORAL TABLET | GENERIC, OTC | |
| THYROID (NP THYROID) 60 MG ORAL TABLET | GENERIC, OTC | |
| THYROID (NP THYROID) 120 MG ORAL TABLET | GENERIC, OTC | |
| THYROID,PORK (ARMOUR THYROID) 180 MG ORAL TABLET | BRAND, OTC | |
| THYROID,PORK (NP THYROID) 90 MG ORAL TABLET | GENERIC, OTC | |

EYE - GENERAL DISORDERS

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| EYE ANTIBIOTIC-CORTICOID COMBINATIONS | | |
| NEO/POLYMYX B SULF/DEXAMETH (NEOMYCIN-POLYMYXIN-DEXAMETH) 0.1% OPHTHALMIC DROPS SUSP | GENERIC, OTC | |
| NEO/POLYMYX B SULF/DEXAMETH (NEOMYCIN-POLYMYXIN-DEXAMETH) 3.5-10K-.1 OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| NEOMY SULF/BACITRAC ZN/POLY/HC (NEOMYCIN-BACITRACIN-POLY-HC) 3.5-10K-1 OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| NEOMY SULF/BACITRAC ZN/POLY/HC (NEO-POLYCIN HC) 3.5-10K-1 OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| TOBRAMYCIN SULFATE/DEXAMETH (TOBRAMYCIN-DEXAMETHASONE) 0.3%-0.1% OPHTHALMIC DROPS SUSP | GENERIC, OTC | |
| EYE ANTIINFLAMMATORY AGENTS | | |
| DEXAMETHASONE SOD PHOSPHATE (DEXAMETHASONE SODIUM PHOSPHATE) 0.1% OPHTHALMIC DROPS | GENERIC, OTC | |
| DICLOFENAC SODIUM 0.1% OPHTHALMIC DROPS | GENERIC, OTC | |
| FLUROMETHOLONE 0.1% OPHTHALMIC DROPS SUSP | GENERIC, OTC | |
| KETOROLAC TROMETHAMINE 0.5% OPHTHALMIC DROPS | GENERIC, OTC | |
| PREDNISOLONE ACETATE 1% OPHTHALMIC DROPS SUSP | GENERIC, OTC | |
| PREDNISOLONE SOD PHOSPHATE (PREDNISOLONE SODIUM PHOSPHATE) 1% OPHTHALMIC DROPS | GENERIC, OTC | |
| EYE ANTIVIRALS | | |
| TRIFLURIDINE 1% OPHTHALMIC DROPS | GENERIC, OTC | |
| EYE SULFONAMIDES | | |
| NA SULFACETM/PREDNIS SP (SULFACETAMIDE-PREDNISOLONE) 10%-0.23% OPHTHALMIC DROPS | GENERIC, OTC | |
| SULFACETAMIDE SODIUM (BLEPH-10) 10% OPHTHALMIC DROPS | GENERIC, OTC | |
| SULFACETAMIDE SODIUM 10% OPHTHALMIC DROPS | GENERIC, OTC | |
| SULFACETAMIDE SODIUM 10% OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| OPHTHALMIC ANTIBIOTICS | | |
| BACITRACIN 500 UNIT/G OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| BACITRACIN/POLYMYXIN B SULFATE (AK-POLY-BAC) 500-10K/G OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| BACITRACIN/POLYMYXIN B SULFATE (BACITRACIN-POLYMYXIN) 500-10K/G OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| BACITRACIN/POLYMYXIN B SULFATE (POLYCIN) 500-10K/G OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| CIPROFLOXACIN HCL 0.3% OPHTHALMIC DROPS | GENERIC, OTC | |
| ERYTHROMYCIN BASE (ERYTHROMYCIN) 5 MG/GRAM OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| GENTAMICIN SULFATE (GENTAK) 0.3% OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| GENTAMICIN SULFATE 0.3% OPHTHALMIC DROPS | GENERIC, OTC | |
| LEVOFLOXACIN 0.5% OPHTHALMIC DROPS | GENERIC, OTC | |
| NEOMY SULF/BACITRA/POLYMYXIN B (NEOMYCIN-BACITRACIN-POLYMYXIN) 3.5MG-400 OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| NEOMY SULF/BACITRA/POLYMYXIN B (NEO-POLYCIN) 3.5MG-400 OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| NEOMYCIN/POLYMYXN B/GRAMICIDIN (NEOMYCIN-POLYMYXIN-GRAMICIDIN) 1.75MG-10K OPHTHALMIC DROPS | GENERIC, OTC | |
| OFLOXACIN 0.3% OPHTHALMIC DROPS | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| POLYMYXIN B SULFATE/TMP (POLYMYXIN B SUL-TRIMETHOPRIM) 10000-1/ML OPHTHALMIC DROPS | GENERIC, OTC | |
| TOBRAMYCIN 0.3% OPHTHALMIC DROPS | GENERIC, OTC | |
| TOBRAMYCIN SULFATE (TOBRAMYCIN) 0.3% OPHTHALMIC DROPS | GENERIC, OTC | |

EYE - GLAUCOMA

CARBONIC ANHYDRASE INHIBITORS

| | | |
|----------------------------------|--------------|--|
| ACETAZOLAMIDE 125 MG ORAL TABLET | GENERIC, OTC | |
| ACETAZOLAMIDE 250 MG ORAL TABLET | GENERIC, OTC | |
| METHAZOLAMIDE 25 MG ORAL TABLET | GENERIC, OTC | |
| METHAZOLAMIDE 50 MG ORAL TABLET | GENERIC, OTC | |

MIOTICS/OTHER INTRAOC. PRESSURE REDUCERS

| | | |
|--|--------------|--|
| BIMATOPROST 0.03% OPHTHALMIC DROPS | GENERIC, OTC | |
| BIMATOPROST (LUMIGAN) 0.01% OPHTHALMIC DROPS | BRAND, OTC | |
| BRIMONIDINE TARTRATE 0.15% OPHTHALMIC DROPS | GENERIC, OTC | |
| BRIMONIDINE TARTRATE 0.2% OPHTHALMIC DROPS | GENERIC, OTC | |
| CARTEOLOL HCL 1% OPHTHALMIC DROPS | GENERIC, OTC | |
| DORZOLAMIDE HCL 2% OPHTHALMIC DROPS | GENERIC, OTC | |
| LATANOPROST 0.005% OPHTHALMIC DROPS | GENERIC, OTC | |
| LEVOBUNOLOL HCL 0.5% OPHTHALMIC DROPS | GENERIC, OTC | |
| PILOCARPINE HCL 1% OPHTHALMIC DROPS | GENERIC, OTC | |
| PILOCARPINE HCL 2% OPHTHALMIC DROPS | GENERIC, OTC | |
| PILOCARPINE HCL 4% OPHTHALMIC DROPS | GENERIC, OTC | |
| TIMOLOL MALEATE 0.25% OPHTHALMIC DROPS | GENERIC, OTC | |
| TIMOLOL MALEATE 0.5% OPHTHALMIC DROPS | GENERIC, OTC | |
| TIMOLOL MALEATE 0.25% OPHTHALMIC SOL-GEL | GENERIC, OTC | |
| TIMOLOL MALEATE 0.5% OPHTHALMIC SOL-GEL | GENERIC, OTC | |
| TIMOLOL MALEATE/DORZOLAM HCL (DORZOLAMIDE-TIMOLOL) 22.3-6.8/1 OPHTHALMIC DROPS | GENERIC, OTC | |
| TRAVOPROST 0.004% OPHTHALMIC DROPS | GENERIC, OTC | |

MYDRIATICS

| | | |
|--|--------------|--|
| ATROPINE SULFATE 1% OPHTHALMIC DROPS | GENERIC, OTC | |
| ATROPINE SULFATE 1% OPHTHALMIC OINT. (G) | GENERIC, OTC | |
| CYCLOPENTOLATE HCL 1% OPHTHALMIC DROPS | GENERIC, OTC | |

GOUT AND RELATED DISEASES

COLCHICINE

| | | |
|-------------------------------|--------------|--|
| COLCHICINE 0.6 MG ORAL TABLET | GENERIC, OTC | |
|-------------------------------|--------------|--|

HYPERURICEMIA TX - PURINE INHIBITORS

| | | |
|--------------------------------|--------------|--|
| ALLOPURINOL 100 MG ORAL TABLET | GENERIC, OTC | |
| ALLOPURINOL 300 MG ORAL TABLET | GENERIC, OTC | |

URICOSURIC AGENTS

| | | |
|--|--------------|--|
| COLCHICINE/PROBENECID (PROBENECID-COLCHICINE) 500-0.5 MG ORAL TABLET | GENERIC, OTC | |
| PROBENECID 500 MG ORAL TABLET | GENERIC, OTC | |

HEMATOLOGICAL DISORDERS

ANTICOAGULANTS, COUMARIN TYPE

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| WARFARIN SODIUM (JANTOVEN) 1 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM (JANTOVEN) 2 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM (JANTOVEN) 2.5 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM (JANTOVEN) 3 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM (JANTOVEN) 4 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM (JANTOVEN) 5 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM (JANTOVEN) 6 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM (JANTOVEN) 7.5 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM (JANTOVEN) 10 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM 1 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM 2 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM 2.5 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM 3 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM 4 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM 5 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM 6 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM 7.5 MG ORAL TABLET | GENERIC, OTC | |
| WARFARIN SODIUM 10 MG ORAL TABLET | GENERIC, OTC | |

DIRECT FACTOR XA INHIBITORS

| | | |
|---|------------|--|
| APIXABAN (ELIQUIS) 5 MG (74) ORAL TAB DS PK | BRAND, OTC | |
| APIXABAN (ELIQUIS) 2.5 MG ORAL TABLET | BRAND, OTC | |
| APIXABAN (ELIQUIS) 5 MG ORAL TABLET | BRAND, OTC | |
| EDOXABAN TOSYLATE (SAVAYSA) 15 MG ORAL TABLET | BRAND, OTC | |
| EDOXABAN TOSYLATE (SAVAYSA) 30 MG ORAL TABLET | BRAND, OTC | |
| EDOXABAN TOSYLATE (SAVAYSA) 60 MG ORAL TABLET | BRAND, OTC | |
| RIVAROXABAN (XARELTO) 15 MG-20MG ORAL TAB DS PK | BRAND, OTC | |
| RIVAROXABAN (XARELTO) 2.5 MG ORAL TABLET | BRAND, OTC | |
| RIVAROXABAN (XARELTO) 10 MG ORAL TABLET | BRAND, OTC | |
| RIVAROXABAN (XARELTO) 15 MG ORAL TABLET | BRAND, OTC | |
| RIVAROXABAN (XARELTO) 20 MG ORAL TABLET | BRAND, OTC | |

HEMATINICS, OTHER

| | | |
|---|------------|------------------|
| EPOETIN ALFA (EPOGEN) 2000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (EPOGEN) 3000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (EPOGEN) 4000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (EPOGEN) 10000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (EPOGEN) 20000/2ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (EPOGEN) 20000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (PROCRIT) 2000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (PROCRIT) 3000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (PROCRIT) 4000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (PROCRIT) 10000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (PROCRIT) 20000/2ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (PROCRIT) 20000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| EPOETIN ALFA (PROCRIT) 40000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|-------------|---------------------|
| epoetin alfa-epbx (RETACRIT) 2000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| epoetin alfa-epbx (RETACRIT) 3000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| epoetin alfa-epbx (RETACRIT) 4000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| epoetin alfa-epbx (RETACRIT) 10000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| epoetin alfa-epbx (RETACRIT) 20000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| epoetin alfa-epbx (RETACRIT) 20000/2ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |
| epoetin alfa-epbx (RETACRIT) 40000/ML INJECTION VIAL | BRAND, OTC | PA (Rx042); SPEC |

HEMORRHOLOGIC AGENTS

| | | |
|--------------------------------------|--------------|--|
| PENTOXIFYLLINE 400 MG ORAL TABLET ER | GENERIC, OTC | |
|--------------------------------------|--------------|--|

HEPARIN AND RELATED PREPARATIONS

| | | |
|---|--------------|--|
| ENOXAPARIN SODIUM 30MG/0.3ML SUBCUTANE. SYRINGE | GENERIC, OTC | QL (2 syringes [0.6 mL] per day, 12 days per 180 days through retail pharmacy [greater than 12 days supply must be obtained through specialty pharmacy]) |
| ENOXAPARIN SODIUM 40MG/0.4ML SUBCUTANE. SYRINGE | GENERIC, OTC | QL (2 syringes [0.8 mL] per day, 12 days per 180 days through retail pharmacy [greater than 12 days supply must be obtained through specialty pharmacy]) |
| ENOXAPARIN SODIUM 60MG/0.6ML SUBCUTANE. SYRINGE | GENERIC, OTC | QL (2 syringes [1.2 mL] per day, 12 days per 180 days through retail pharmacy [greater than 12 days supply must be obtained through specialty pharmacy]) |
| ENOXAPARIN SODIUM 80MG/0.8ML SUBCUTANE. SYRINGE | GENERIC, OTC | QL (2 syringes [1.6 mL] per day, 12 days per 180 days through retail pharmacy [greater than 12 days supply must be obtained through specialty pharmacy]) |
| ENOXAPARIN SODIUM 100 MG/ML SUBCUTANE. SYRINGE | GENERIC, OTC | QL (2 syringes [2 mL] per day, 12 days per 180 days through retail pharmacy [greater than 12 days supply must be obtained through specialty pharmacy]) |
| ENOXAPARIN SODIUM 120MG/.8ML SUBCUTANE. SYRINGE | GENERIC, OTC | QL (2 syringes [1.6 mL] per day, 12 days per 180 days through retail pharmacy [greater than 12 days supply must be obtained through specialty pharmacy]) |
| ENOXAPARIN SODIUM 150 MG/ML SUBCUTANE. SYRINGE | GENERIC, OTC | QL (2 syringes [2 mL] per day, 12 days per 180 days through retail pharmacy [greater than 12 days supply must be obtained through specialty pharmacy]) |
| ENOXAPARIN SODIUM 300MG/3ML SUBCUTANE. VIAL | GENERIC, OTC | QL (2 vials [6 mL] per day, 12 days per 180 days through retail pharmacy [greater than 12 days supply must be obtained through specialty pharmacy]) |

LEUKOCYTE (WBC) STIMULANTS

| DRUG NAME | TYPE | RESTRICTIONS |
|--|-------------|---------------------|
| filgrastim-aafi (NIVESTYM) 300 MCG/ML INJECTION VIAL | BRAND, OTC | PA (Rx043); SPEC |
| filgrastim-aafi (NIVESTYM) 480MCG/1.6 INJECTION VIAL | BRAND, OTC | PA (Rx043); SPEC |
| filgrastim-aafi (NIVESTYM) 300MCG/0.5 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx043); SPEC |
| filgrastim-aafi (NIVESTYM) 480MCG/0.8 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx043); SPEC |
| FILGRASTIM-SNDZ (ZARXIO) 300MCG/0.5 INJECTION SYRINGE | BRAND, OTC | PA (Rx043); SPEC |
| FILGRASTIM-SNDZ (ZARXIO) 480MCG/0.8 INJECTION SYRINGE | BRAND, OTC | PA (Rx043); SPEC |
| SARGRAMOSTIM (LEUKINE) 250 MCG INJECTION VIAL | BRAND, OTC | PA (Rx043); SPEC |
| TBO-FILGRASTIM (GRANIX) 300MCG/0.5 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx043); SPEC |
| TBO-FILGRASTIM (GRANIX) 480MCG/0.8 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx043); SPEC |
| TBO-FILGRASTIM (GRANIX) 300 MCG/ML SUBCUTANE. VIAL | BRAND, OTC | PA (Rx043); SPEC |
| TBO-FILGRASTIM (GRANIX) 480MCG/1.6 SUBCUTANE. VIAL | BRAND, OTC | PA (Rx043); SPEC |

PLATELET AGGREGATION INHIBITORS

| | | |
|---|--------------|--|
| ASPIRIN (ADULT ASPIRIN REGIMEN) 81 MG ORAL TABLET DR | GENERIC, OTC | |
| ASPIRIN (ADULT LOW DOSE ASPIRIN EC) 81 MG ORAL TABLET DR | GENERIC, OTC | |
| ASPIRIN 81 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASPIRIN (ASPIRIN EC) 81 MG ORAL TABLET DR | GENERIC, OTC | |
| ASPIRIN (CHILDREN'S ASPIRIN) 81 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASPIRIN (LO-DOSE ASPIRIN EC) 81 MG ORAL TABLET DR | GENERIC, OTC | |
| ASPIRIN (LOW DOSE ASPIRIN EC) 81 MG ORAL TABLET DR | GENERIC, OTC | |
| ASPIRIN (ST. JOSEPH ASPIRIN) 81 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASPIRIN (ST. JOSEPH ASPIRIN EC) 81 MG ORAL TABLET DR | GENERIC, OTC | |
| CILOSTAZOL 50 MG ORAL TABLET | GENERIC, OTC | |
| CILOSTAZOL 100 MG ORAL TABLET | GENERIC, OTC | |
| CLOPIDOGREL BISULFATE (CLOPIDOGREL) 75 MG ORAL TABLET | GENERIC, OTC | |
| PRASUGREL HYDROCHLORIDE (PRASUGREL HCL) 5 MG ORAL TABLET | GENERIC, OTC | |
| PRASUGREL HYDROCHLORIDE (PRASUGREL HCL) 10 MG ORAL TABLET | GENERIC, OTC | |

THROMBIN INHIBITORS,SELECTIVE,DIRECT, & REVERSIBLE

| | | |
|---|------------|--|
| DABIGATRAN ETEXILATE MESYLATE (PRADAXA) 75 MG ORAL CAPSULE | BRAND, OTC | |
| DABIGATRAN ETEXILATE MESYLATE (PRADAXA) 110 MG ORAL CAPSULE | BRAND, OTC | |
| DABIGATRAN ETEXILATE MESYLATE (PRADAXA) 150 MG ORAL CAPSULE | BRAND, OTC | |

VITAMIN K PREPARATIONS

| | | |
|-------------------------------|--------------|--|
| PHYTONADIONE 5 MG ORAL TABLET | GENERIC, OTC | |
|-------------------------------|--------------|--|

HORMONAL DEFICIENCY

ANDROGENIC AGENTS

| | | |
|--|--------------|------------|
| METHYLTESTOSTERONE (METHITEST) 10 MG ORAL TABLET | BRAND, OTC | |
| METHYLTESTOSTERONE 10 MG ORAL CAPSULE | GENERIC, OTC | |
| TESTOSTERONE CYPIONATE 100 MG/ML INTRAMUSC. VIAL | GENERIC, OTC | PA (Rx045) |
| TESTOSTERONE CYPIONATE 200 MG/ML INTRAMUSC. VIAL | GENERIC, OTC | PA (Rx045) |

ESTROGEN/ANDROGEN COMBINATIONS

| | | |
|---|--------------|--|
| ESTROGEN,ESTER/ME-TESTOSTERONE (COVARYX) 1.25-2.5MG ORAL TABLET | GENERIC, OTC | |
|---|--------------|--|

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| ESTROGEN,ESTER/ME-TESTOSTERONE (COVARYX H.S.) 0.625-1.25 ORAL TABLET | GENERIC, OTC | |
| ESTROGEN,ESTER/ME-TESTOSTERONE (EEMT) 1.25-2.5MG ORAL TABLET | GENERIC, OTC | |
| ESTROGEN,ESTER/ME-TESTOSTERONE (EEMT H.S.) 0.625-1.25 ORAL TABLET | GENERIC, OTC | |
| ESTROGEN,ESTER/ME-TESTOSTERONE (ESTROGEN-METHYLTESTOSTERONE) 0.625-1.25 ORAL TABLET | GENERIC, OTC | |
| ESTROGEN,ESTER/ME-TESTOSTERONE (ESTROGEN-METHYLTESTOSTERONE) 1.25-2.5MG ORAL TABLET | GENERIC, OTC | |

ESTROGENIC AGENTS

| | | |
|---|--------------|-------------------------|
| ESTRADIOL (ALORA) 0.05MG/24H TRANSDERM. PATCH TDSW | BRAND, OTC | |
| ESTRADIOL (ALORA) 0.1MG/24HR TRANSDERM. PATCH TDSW | BRAND, OTC | |
| ESTRADIOL (ALORA) .025MG/24H TRANSDERM. PATCH TDSW | BRAND, OTC | |
| ESTRADIOL (ALORA) .075MG/24H TRANSDERM. PATCH TDSW | BRAND, OTC | |
| ESTRADIOL (DOTTI) 0.05MG/24H TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (DOTTI) 0.1MG/24HR TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (DOTTI) .025MG/24H TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (DOTTI) .075MG/24H TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (DOTTI) .0375MG/24 TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL 0.5 MG ORAL TABLET | GENERIC, OTC | |
| ESTRADIOL 1 MG ORAL TABLET | GENERIC, OTC | |
| ESTRADIOL 2 MG ORAL TABLET | GENERIC, OTC | |
| ESTRADIOL (ESTRADIOL (ONCE WEEKLY)) 0.05MG/24H TRANSDERM. PATCH TDWK | GENERIC, OTC | QL (1 patch per 7 days) |
| ESTRADIOL (ESTRADIOL (ONCE WEEKLY)) 0.06MG/24H TRANSDERM. PATCH TDWK | GENERIC, OTC | QL (1 patch per 7 days) |
| ESTRADIOL (ESTRADIOL (ONCE WEEKLY)) 0.1MG/24HR TRANSDERM. PATCH TDWK | GENERIC, OTC | QL (1 patch per 7 days) |
| ESTRADIOL (ESTRADIOL (ONCE WEEKLY)) .025MG/24H TRANSDERM. PATCH TDWK | GENERIC, OTC | QL (1 patch per 7 days) |
| ESTRADIOL (ESTRADIOL (ONCE WEEKLY)) .075MG/24H TRANSDERM. PATCH TDWK | GENERIC, OTC | QL (1 patch per 7 days) |
| ESTRADIOL (ESTRADIOL (ONCE WEEKLY)) .0375MG/24 TRANSDERM. PATCH TDWK | GENERIC, OTC | QL (1 patch per 7 days) |
| ESTRADIOL (ESTRADIOL (TWICE WEEKLY)) 0.05MG/24H TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (ESTRADIOL (TWICE WEEKLY)) 0.1MG/24HR TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (ESTRADIOL (TWICE WEEKLY)) .025MG/24H TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (ESTRADIOL (TWICE WEEKLY)) .075MG/24H TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (ESTRADIOL (TWICE WEEKLY)) .0375MG/24 TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (ESTROGEL) 1.25 G TRANSDERM. GEL MD PMP | BRAND, OTC | |
| ESTRADIOL (EVAMIST) 1.53/SPRAY TRANSDERM. SPRAY | BRAND, OTC | |
| ESTRADIOL (LYLLANA) 0.05MG/24H TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (LYLLANA) 0.1MG/24HR TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (LYLLANA) .025MG/24H TRANSDERM. PATCH TDSW | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| ESTRADIOL (LYLLANA) .075MG/24H TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (LYLLANA) .0375MG/24 TRANSDERM. PATCH TDSW | GENERIC, OTC | |
| ESTRADIOL (MENOSTAR) 14MCG/24HR TRANSDERM. PATCH TDWK | BRAND, OTC | |
| ESTRADIOL/LEVONORGESTREL (CLIMARA PRO) 45-15/24H TRANSDERM. PATCH TDWK | BRAND, OTC | |
| ESTRADIOL/NORETH AC (AMABELZ) 0.5-0.1 MG ORAL TABLET | GENERIC, OTC | |
| ESTRADIOL/NORETH AC (AMABELZ) 1 MG-0.5MG ORAL TABLET | GENERIC, OTC | |
| ESTRADIOL/NORETH AC (COMBIPATCH) .05-.25/24 TRANSDERM. PATCH TDSW | BRAND, OTC | |
| ESTRADIOL/NORETH AC (COMBIPATCH) .05-.14/24 TRANSDERM. PATCH TDSW | BRAND, OTC | |
| ESTRADIOL/NORETH AC (ESTRADIOL-NORETHINDRONE ACETAT) 0.5-0.1 MG ORAL TABLET | GENERIC, OTC | |
| ESTRADIOL/NORETH AC (ESTRADIOL-NORETHINDRONE ACETAT) 1 MG-0.5MG ORAL TABLET | GENERIC, OTC | |
| ESTRADIOL/NORETH AC (MIMVEY) 1 MG-0.5MG ORAL TABLET | GENERIC, OTC | |
| ESTRADIOL/NORGESTIMATE (PREFEST) 1-1-0.09MG ORAL TABLET | BRAND, OTC | |
| ESTROGEN,CON/M-PROGEST ACET (PREMPHASE) 0.625 (14) ORAL TABLET | BRAND, OTC | |
| ESTROGEN,CON/M-PROGEST ACET (PREMPRO) 0.3-1.5MG ORAL TABLET | BRAND, OTC | |
| ESTROGEN,CON/M-PROGEST ACET (PREMPRO) 0.45-1.5MG ORAL TABLET | BRAND, OTC | |
| ESTROGEN,CON/M-PROGEST ACET (PREMPRO) 0.625-2.5 ORAL TABLET | BRAND, OTC | |
| ESTROGEN,CON/M-PROGEST ACET (PREMPRO) 0.625-5 MG ORAL TABLET | BRAND, OTC | |
| ESTROGENS,CONJUGATED (PREMARIN) 0.3 MG ORAL TABLET | BRAND, OTC | |
| ESTROGENS,CONJUGATED (PREMARIN) 0.45MG ORAL TABLET | BRAND, OTC | |
| ESTROGENS,CONJUGATED (PREMARIN) 0.625 MG ORAL TABLET | BRAND, OTC | |
| ESTROGENS,CONJUGATED (PREMARIN) 0.9 MG ORAL TABLET | BRAND, OTC | |
| ESTROGENS,CONJUGATED (PREMARIN) 1.25 MG ORAL TABLET | BRAND, OTC | |
| ESTROGENS,ESTERIFIED (MENEST) 0.3 MG ORAL TABLET | BRAND, OTC | |
| ESTROGENS,ESTERIFIED (MENEST) 0.625 MG ORAL TABLET | BRAND, OTC | |
| ESTROGENS,ESTERIFIED (MENEST) 1.25 MG ORAL TABLET | BRAND, OTC | |
| ESTROGENS,ESTERIFIED (MENEST) 2.5 MG ORAL TABLET | BRAND, OTC | |
| NORETHINDRONE A-E ESTRADIOL (FYAVOLV) 0.5MG-2.5 ORAL TABLET | GENERIC, OTC | |
| NORETHINDRONE A-E ESTRADIOL (FYAVOLV) 1MG-5MCG ORAL TABLET | GENERIC, OTC | |
| NORETHINDRONE A-E ESTRADIOL (JINTELI) 1MG-5MCG ORAL TABLET | GENERIC, OTC | |
| NORETHINDRONE A-E ESTRADIOL (NORETHINDRON-ETHINYL ESTRADIOL) 0.5MG-2.5 ORAL TABLET | GENERIC, OTC | |
| NORETHINDRONE A-E ESTRADIOL (NORETHINDRON-ETHINYL ESTRADIOL) 1MG-5MCG ORAL TABLET | GENERIC, OTC | |

PROGESTATIONAL AGENTS

| | | |
|---|--------------|--|
| MEDROXYPROGESTERONE ACET (MEDROXYPROGESTERONE ACETATE) 2.5 MG ORAL TABLET | GENERIC, OTC | |
|---|--------------|--|

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| MEDROXYPROGESTERONE ACET (MEDROXYPROGESTERONE ACETATE) 5 MG ORAL TABLET | GENERIC, OTC | |
| MEDROXYPROGESTERONE ACET (MEDROXYPROGESTERONE ACETATE) 10 MG ORAL TABLET | GENERIC, OTC | |
| NORETHINDRONE ACETATE (NORETHINDRONE AC (LUPANETA)) 5 MG ORAL TABLET | GENERIC, OTC | |
| NORETHINDRONE ACETATE 5 MG ORAL TABLET | GENERIC, OTC | |
| PROGESTERONE,MICRONIZED (PROGESTERONE) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| PROGESTERONE,MICRONIZED (PROGESTERONE) 200 MG ORAL CAPSULE | GENERIC, OTC | |

IMMUNIZATION

COVID-19 VACCINES

| | | |
|--|------------|--|
| COVID-19 VAC,AD26(JANSSEN)/PF (JANSSEN COVID-19 VACCINE (EUA)) 0.5 ML INTRAMUSC. VIAL | BRAND, OTC | QL (0.5 mL per 17 days, 1 injections per lifetime) |
| COVID-19 VACC, MRNA(PFIZER)/PF (PFIZER COVID-19 VACCINE (EUA)) 30 MCG/0.3 INTRAMUSC. VIAL | BRAND, OTC | QL (0.3 mL per 17 days, 3 injections per lifetime) |
| COVID-19 VACC,MRNA(MODERNA)/PF (MODERNA COVID-19 VACCINE (EUA)) 100MCG/0.5 INTRAMUSC. VIAL | BRAND, OTC | QL (0.5 mL per 24 days, 3 injections per lifetime) |

GRAM NEGATIVE COCCI VACCINES

| | | |
|---|------------|---|
| MENINGOCOCCAL B VACC,4-COMP/PF (BEXSERO) 50-50/0.5 INTRAMUSC. SYRINGE | BRAND, OTC | AR (age 19 to 25); QL (1 injection [0.5 mL] per 30 days, 2 injections per lifetime) |
| N.MENINGITIDIS B,LIPID FHBP RC (TRUMENBA) 120MCG/0.5 INTRAMUSC. SYRINGE | BRAND, OTC | AR (age 19 to 25); QL (1 injection [0.5 mL] per 30 days, 3 injections per lifetime) |

INFLUENZA VIRUS VACCINES

| | | |
|---|------------|-----------------------|
| FLU VAC QS 2021 SOUTH,6 MOS UP (FLUZONE QUAD SOUTHERN HEM 2021) 60MCG/.5ML INTRAMUSC. VIAL | BRAND, OTC | AR (age 19 and older) |
| FLU VAC QS2021 SOUTH,6MO UP/PF (FLUZONE QUAD SOUTHERN HEM 2021) 60MCG/.5ML INTRAMUSC. SYRINGE | BRAND, OTC | AR (age 19 and older) |

VACCINE/TOXOID PREPARATIONS,COMBINATIONS

| | | |
|--|------------|-----------------------|
| DIPH,PERTUSS(ACELL),TET VAC/PF (ADACEL TDAP) 2-2.5-5/.5 INTRAMUSC. SYRINGE | BRAND, OTC | AR (age 19 and older) |
| DIPH,PERTUSS(ACELL),TET VAC/PF (BOOSTRIX TDAP) 2.5-8-5/.5 INTRAMUSC. SYRINGE | BRAND, OTC | AR (age 19 and older) |
| DIPHTH,PERTUSS(ACELL),TET PED (BOOSTRIX TDAP) 2.5-8-5/.5 INTRAMUSC. VIAL | BRAND, OTC | AR (age 19 and older) |
| DIPHTH,PERTUSS(ACELL),TET VAC (ADACEL TDAP) 2-2.5-5/.5 INTRAMUSC. VIAL | BRAND, OTC | AR (age 19 and older) |
| DIPHTH,PERTUSS(ACELL),TET VAC (BOOSTRIX TDAP) 2.5-8-5/.5 INTRAMUSC. SYRINGE | BRAND, OTC | AR (age 19 and older) |
| MEASLES,MUMPS&RUBELLA VACCINE (M-M-R II VACCINE) 12500/0.5 SUBCUTANE. VIAL | BRAND, OTC | AR (age 19 and older) |
| MEASLES,MUMPS,RUBELLA VACC/PF (M-M-R II VACCINE) 12500/0.5 SUBCUTANE. VIAL | BRAND, OTC | AR (age 19 and older) |
| TETANUS-DIPHThERIA TOXOIDS/PF (TENIVAC) 5-2/0.5ML INTRAMUSC. SYRINGE | BRAND, OTC | AR (age 19 and older) |
| TETANUS-DIPHThERIA TOXOIDS/PF (TENIVAC) 5-2/0.5ML INTRAMUSC. VIAL | BRAND, OTC | AR (age 19 and older) |

VIRAL/TUMORIGENIC VACCINES

| DRUG NAME | TYPE | RESTRICTIONS |
|---|-------------|---|
| HEPATITIS A & B VACCINE/PF (TWINRIX) 720-20/ML INTRAMUSC. SYRINGE | BRAND, OTC | AR (age 19 and older) |
| HPV VACCINE 9-VALENT/PF (GARDASIL 9) 0.5 ML INTRAMUSC. SYRINGE | BRAND, OTC | AR (age 19 and older) |
| HPV VACCINE 9-VALENT/PF (GARDASIL 9) 0.5 ML INTRAMUSC. VIAL | BRAND, OTC | AR (age 19 and older) |
| VARICELLA VACC/PF (VARIVAX VACCINE) 1350 UNIT SUBCUTANE. VIAL | BRAND, OTC | AR (age 19 and older) |
| VARICELLA-ZOSTER GE VAC,2 OF 2 (SHINGRIX GE ANTIGEN COMPONENT) 50 MCG INTRAMUSC. VIAL | BRAND, OTC | AR (age 50 and older); QL (2 injections per lifetime) |
| VARICELLA-ZOSTER GE/AS01B/PF (SHINGRIX) 50 MCG/0.5 INTRAMUSC. KIT | BRAND, OTC | AR (age 50 and older); QL (2 injections per lifetime) |

IMMUNOSUPPRESSION/MODULATION

IMMUNOSUPPRESSIVES

| | | |
|--|--------------|--|
| AZATHIOPRINE 50 MG ORAL TABLET | GENERIC, OTC | |
| CYCLOSPORINE 25 MG ORAL CAPSULE | GENERIC, OTC | |
| CYCLOSPORINE 100 MG ORAL CAPSULE | GENERIC, OTC | |
| CYCLOSPORINE, MODIFIED (CYCLOSPORINE MODIFIED) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| CYCLOSPORINE, MODIFIED (CYCLOSPORINE MODIFIED) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| CYCLOSPORINE, MODIFIED (CYCLOSPORINE MODIFIED) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| CYCLOSPORINE, MODIFIED (CYCLOSPORINE MODIFIED) 100 MG/ML ORAL SOLUTION | GENERIC, OTC | |
| CYCLOSPORINE, MODIFIED (GENGRAF) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| CYCLOSPORINE, MODIFIED (GENGRAF) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| CYCLOSPORINE, MODIFIED (GENGRAF) 100 MG/ML ORAL SOLUTION | GENERIC, OTC | |
| MYCOPHENOLATE MOFETIL 250 MG ORAL CAPSULE | GENERIC, OTC | |
| MYCOPHENOLATE MOFETIL 200 MG/ML ORAL SUSP RECON | GENERIC, OTC | |
| MYCOPHENOLATE MOFETIL 500 MG ORAL TABLET | GENERIC, OTC | |
| SIROLIMUS 1 MG/ML ORAL SOLUTION | GENERIC, OTC | |
| SIROLIMUS 0.5 MG ORAL TABLET | GENERIC, OTC | |
| SIROLIMUS 1 MG ORAL TABLET | GENERIC, OTC | |
| SIROLIMUS 2 MG ORAL TABLET | GENERIC, OTC | |
| TACROLIMUS 0.5 MG ORAL CAPSULE | GENERIC, OTC | |
| TACROLIMUS 1 MG ORAL CAPSULE | GENERIC, OTC | |
| TACROLIMUS 5 MG ORAL CAPSULE | GENERIC, OTC | |

INFECTIOUS DISEASE - BACTERIAL

ABSORBABLE SULFONAMIDES

| | | |
|--|--------------|--|
| SULFADIAZINE 500 MG ORAL TABLET | GENERIC, OTC | |
| SULFAMETHOXAZOLE/TRIMETHOPRIM (SULFAMETHOXAZOLE-TRIMETHOPRIM) 200-40MG/5 ORAL SUSP | GENERIC, OTC | |
| SULFAMETHOXAZOLE/TRIMETHOPRIM (SULFAMETHOXAZOLE-TRIMETHOPRIM) 400MG-80MG ORAL TABLET | GENERIC, OTC | |
| SULFAMETHOXAZOLE/TRIMETHOPRIM (SULFAMETHOXAZOLE-TRIMETHOPRIM) 800-160 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| SULFAMETHOXAZOLE/TRIMETHOPRIM (SULFATRIM) 200-40MG/5 ORAL SUSP | GENERIC, OTC | |

CEPHALOSPORINS - 1ST GENERATION

| | | |
|--|--------------|--|
| CEFADROXIL HYDRATE (CEFADROXIL) 500 MG ORAL CAPSULE | GENERIC, OTC | |
| CEFADROXIL HYDRATE (CEFADROXIL) 250 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFADROXIL HYDRATE (CEFADROXIL) 500 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFADROXIL HYDRATE (CEFADROXIL) 1 G ORAL TABLET | GENERIC, OTC | |
| CEPHALEXIN MONOHYDRATE (CEPHALEXIN) 250 MG ORAL CAPSULE | GENERIC, OTC | |
| CEPHALEXIN MONOHYDRATE (CEPHALEXIN) 500 MG ORAL CAPSULE | GENERIC, OTC | |
| CEPHALEXIN MONOHYDRATE (CEPHALEXIN) 125 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEPHALEXIN MONOHYDRATE (CEPHALEXIN) 250 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |

CEPHALOSPORINS - 2ND GENERATION

| | | |
|---|--------------|--|
| CEFACLOR 250 MG ORAL CAPSULE | GENERIC, OTC | |
| CEFACLOR 500 MG ORAL CAPSULE | GENERIC, OTC | |
| CEFACLOR 125 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFACLOR 250 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFACLOR 375 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFACLOR (CEFACLOR ER) 500 MG ORAL TAB ER 12H | GENERIC, OTC | |
| CEFPROZIL 125 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFPROZIL 250 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFPROZIL 250 MG ORAL TABLET | GENERIC, OTC | |
| CEFPROZIL 500 MG ORAL TABLET | GENERIC, OTC | |
| CEFUROXIME AXETIL (CEFUROXIME) 250 MG ORAL TABLET | GENERIC, OTC | |
| CEFUROXIME AXETIL (CEFUROXIME) 500 MG ORAL TABLET | GENERIC, OTC | |

CEPHALOSPORINS - 3RD GENERATION

| | | |
|---|--------------|--|
| CEFDINIR 300 MG ORAL CAPSULE | GENERIC, OTC | |
| CEFDINIR 125 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFDINIR 250 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFIXIME 100 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFIXIME 200 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFPODOXIME PROXETIL 50 MG/5 ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFPODOXIME PROXETIL 100 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CEFPODOXIME PROXETIL 100 MG ORAL TABLET | GENERIC, OTC | |
| CEFPODOXIME PROXETIL 200 MG ORAL TABLET | GENERIC, OTC | |

CHEMOTHERAPEUTICS, ANTIBACTERIAL, MISC.

| | | |
|---------------------------------|--------------|--|
| TRIMETHOPRIM 100 MG ORAL TABLET | GENERIC, OTC | |
|---------------------------------|--------------|--|

MACROLIDES

| | | |
|---|--------------|--|
| AZITHROMYCIN 1 G ORAL PACKET | GENERIC, OTC | |
| AZITHROMYCIN 100 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| AZITHROMYCIN 200 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| AZITHROMYCIN 250 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| AZITHROMYCIN 500 MG ORAL TABLET | GENERIC, OTC | |
| AZITHROMYCIN 600 MG ORAL TABLET | GENERIC, OTC | |
| CLARITHROMYCIN 125 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CLARITHROMYCIN 250 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| CLARITHROMYCIN 250 MG ORAL TABLET | GENERIC, OTC | |
| CLARITHROMYCIN 500 MG ORAL TABLET | GENERIC, OTC | |
| CLARITHROMYCIN (CLARITHROMYCIN ER) 500 MG ORAL TAB ER 24H | GENERIC, OTC | |
| ERYTHROMYCIN BASE (ERY-TAB) 250 MG ORAL TABLET DR | GENERIC, OTC | |
| ERYTHROMYCIN BASE (ERY-TAB) 500 MG ORAL TABLET DR | GENERIC, OTC | |
| ERYTHROMYCIN BASE (ERYTHROMYCIN) 250 MG ORAL CAPSULE DR | GENERIC, OTC | |
| ERYTHROMYCIN BASE (ERYTHROMYCIN) 250 MG ORAL TABLET | GENERIC, OTC | |
| ERYTHROMYCIN BASE (ERYTHROMYCIN) 500 MG ORAL TABLET | GENERIC, OTC | |
| ERYTHROMYCIN BASE (ERYTHROMYCIN) 250 MG ORAL TABLET DR | GENERIC, OTC | |
| ERYTHROMYCIN BASE (ERYTHROMYCIN) 333 MG ORAL TABLET DR | GENERIC, OTC | |
| ERYTHROMYCIN BASE (ERYTHROMYCIN) 500 MG ORAL TABLET DR | GENERIC, OTC | |
| ERYTHROMYCIN ETHYLSUCCINATE (E.E.S. 400) 400 MG ORAL TABLET | GENERIC, OTC | |
| ERYTHROMYCIN ETHYLSUCCINATE 200 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| ERYTHROMYCIN ETHYLSUCCINATE 400 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| ERYTHROMYCIN ETHYLSUCCINATE 400 MG ORAL TABLET | GENERIC, OTC | |
| ERYTHROMYCIN STEARATE (ERYTHROCIN STEARATE) 250 MG ORAL TABLET | GENERIC, OTC | |

NITROFURAN DERIVATIVES

| | | |
|---|--------------|--|
| NITROFURANTOIN MACROCRYSTAL (NITROFURANTOIN) 25 MG ORAL CAPSULE | GENERIC, OTC | |
| NITROFURANTOIN MACROCRYSTAL (NITROFURANTOIN) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| NITROFURANTOIN MACROCRYSTAL (NITROFURANTOIN) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| NITROFURANTOIN/NITROFURAN MAC (NITROFURANTOIN MONO-MACRO) 100 MG ORAL CAPSULE | GENERIC, OTC | |

OXAZOLIDINONES

| | | |
|------------------------------|--------------|--|
| LINEZOLID 600 MG ORAL TABLET | GENERIC, OTC | |
|------------------------------|--------------|--|

PENICILLINS

| | | |
|---|--------------|--|
| AMOX TR/POTASSIUM CLAVULANATE (AMOXICILLIN-CLAVULANATE POT ER) 1000-62.5 ORAL TAB ER 12H | GENERIC, OTC | |
| AMOX TR/POTASSIUM CLAVULANATE (AMOXICILLIN-CLAVULANATE POTASS) 200-28.5/5 ORAL SUSP RECON | GENERIC, OTC | |
| AMOX TR/POTASSIUM CLAVULANATE (AMOXICILLIN-CLAVULANATE POTASS) 250-62.5/5 ORAL SUSP RECON | GENERIC, OTC | |
| AMOX TR/POTASSIUM CLAVULANATE (AMOXICILLIN-CLAVULANATE POTASS) 400-57MG/5 ORAL SUSP RECON | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| AMOX TR/POTASSIUM CLAVULANATE (AMOXICILLIN-CLAVULANATE POTASS) 600-42.9/5 ORAL SUSP RECON | GENERIC, OTC | |
| AMOX TR/POTASSIUM CLAVULANATE (AMOXICILLIN-CLAVULANATE POTASS) 200-28.5MG ORAL TAB CHEW | GENERIC, OTC | |
| AMOX TR/POTASSIUM CLAVULANATE (AMOXICILLIN-CLAVULANATE POTASS) 400-57MG ORAL TAB CHEW | GENERIC, OTC | |
| AMOX TR/POTASSIUM CLAVULANATE (AMOXICILLIN-CLAVULANATE POTASS) 250-125 MG ORAL TABLET | GENERIC, OTC | |
| AMOX TR/POTASSIUM CLAVULANATE (AMOXICILLIN-CLAVULANATE POTASS) 500-125 MG ORAL TABLET | GENERIC, OTC | |
| AMOX TR/POTASSIUM CLAVULANATE (AMOXICILLIN-CLAVULANATE POTASS) 875-125 MG ORAL TABLET | GENERIC, OTC | |
| AMOX TR/POTASSIUM CLAVULANATE (AUGMENTIN) 125-31.25/ ORAL SUSP RECON | BRAND, OTC | |
| AMOXICILLIN TRIHYDRATE (AMOXICILLIN) 250 MG ORAL CAPSULE | GENERIC, OTC | |
| AMOXICILLIN TRIHYDRATE (AMOXICILLIN) 500 MG ORAL CAPSULE | GENERIC, OTC | |
| AMOXICILLIN TRIHYDRATE (AMOXICILLIN) 125 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| AMOXICILLIN TRIHYDRATE (AMOXICILLIN) 200 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| AMOXICILLIN TRIHYDRATE (AMOXICILLIN) 250 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| AMOXICILLIN TRIHYDRATE (AMOXICILLIN) 400 MG/5ML ORAL SUSP RECON | GENERIC, OTC | |
| AMOXICILLIN TRIHYDRATE (AMOXICILLIN) 125 MG ORAL TAB CHEW | GENERIC, OTC | |
| AMOXICILLIN TRIHYDRATE (AMOXICILLIN) 250 MG ORAL TAB CHEW | GENERIC, OTC | |
| AMOXICILLIN TRIHYDRATE (AMOXICILLIN) 500 MG ORAL TABLET | GENERIC, OTC | |
| AMOXICILLIN TRIHYDRATE (AMOXICILLIN) 875 MG ORAL TABLET | GENERIC, OTC | |
| AMPICILLIN TRIHYDRATE 500 MG ORAL CAPSULE | GENERIC, OTC | |
| DICLOXACILLIN SODIUM 250 MG ORAL CAPSULE | GENERIC, OTC | |
| DICLOXACILLIN SODIUM 500 MG ORAL CAPSULE | GENERIC, OTC | |
| PENICILLIN V POTASSIUM 125 MG/5ML ORAL SOLN RECON | GENERIC, OTC | |
| PENICILLIN V POTASSIUM 250 MG/5ML ORAL SOLN RECON | GENERIC, OTC | |
| PENICILLIN V POTASSIUM 250 MG ORAL TABLET | GENERIC, OTC | |
| PENICILLIN V POTASSIUM 500 MG ORAL TABLET | GENERIC, OTC | |

QUINOLONES

| | | |
|--|--------------|--|
| CIPROFLOXACIN (CIPRO) 250 MG/5ML ORAL SUS MC REC | BRAND, OTC | |
| CIPROFLOXACIN (CIPRO) 500 MG/5ML ORAL SUS MC REC | BRAND, OTC | |
| CIPROFLOXACIN 250 MG/5ML ORAL SUS MC REC | GENERIC, OTC | |
| CIPROFLOXACIN 500 MG/5ML ORAL SUS MC REC | GENERIC, OTC | |
| CIPROFLOXACIN HCL 100 MG ORAL TABLET | GENERIC, OTC | |
| CIPROFLOXACIN HCL 250 MG ORAL TABLET | GENERIC, OTC | |
| CIPROFLOXACIN HCL 500 MG ORAL TABLET | GENERIC, OTC | |
| CIPROFLOXACIN HCL 750 MG ORAL TABLET | GENERIC, OTC | |
| LEVOFLOXACIN 250MG/10ML ORAL SOLUTION | GENERIC, OTC | |
| LEVOFLOXACIN 250 MG ORAL TABLET | GENERIC, OTC | |
| LEVOFLOXACIN 500 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|-------------------------------------|--------------|---------------------|
| LEVOFLOXACIN 750 MG ORAL TABLET | GENERIC, OTC | |
| MOXIFLOXACIN HCL 400 MG ORAL TABLET | GENERIC, OTC | |
| OFLOXACIN 300 MG ORAL TABLET | GENERIC, OTC | |
| OFLOXACIN 400 MG ORAL TABLET | GENERIC, OTC | |

TETRACYCLINES

| | | |
|--|--------------|--|
| DOXYCYCLINE CALCIUM (VIBRAMYCIN) 50 MG/5 ML ORAL SYRUP | BRAND, OTC | |
| DOXYCYCLINE HYCLATE 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DOXYCYCLINE HYCLATE 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DOXYCYCLINE HYCLATE 100 MG ORAL TABLET | GENERIC, OTC | |
| DOXYCYCLINE MONOHYDRATE 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DOXYCYCLINE MONOHYDRATE 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DOXYCYCLINE MONOHYDRATE 25 MG/5 ML ORAL SUSP RECON | GENERIC, OTC | |
| DOXYCYCLINE MONOHYDRATE 50 MG ORAL TABLET | GENERIC, OTC | |
| DOXYCYCLINE MONOHYDRATE 100 MG ORAL TABLET | GENERIC, OTC | |
| DOXYCYCLINE MONOHYDRATE (MONDOXYNE NL) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| MINOCYCLINE HCL 50 MG ORAL CAPSULE | GENERIC, OTC | |
| MINOCYCLINE HCL 75 MG ORAL CAPSULE | GENERIC, OTC | |
| MINOCYCLINE HCL 100 MG ORAL CAPSULE | GENERIC, OTC | |
| MINOCYCLINE HCL 50 MG ORAL TABLET | GENERIC, OTC | |
| MINOCYCLINE HCL 75 MG ORAL TABLET | GENERIC, OTC | |
| TETRACYCLINE HCL 250 MG ORAL CAPSULE | GENERIC, OTC | |
| TETRACYCLINE HCL 500 MG ORAL CAPSULE | GENERIC, OTC | |

INFECTIOUS DISEASE - FUNGAL

ANTIFUNGAL AGENTS

| | | |
|--------------------------------------|--------------|-------------------------|
| CLOTRIMAZOLE 10 MG MUCOUS MEM TROCHE | GENERIC, OTC | QL (1 fill per 30 days) |
| FLUCONAZOLE 10 MG/ML ORAL SUSP RECON | GENERIC, OTC | |
| FLUCONAZOLE 40 MG/ML ORAL SUSP RECON | GENERIC, OTC | |
| FLUCONAZOLE 50 MG ORAL TABLET | GENERIC, OTC | |
| FLUCONAZOLE 100 MG ORAL TABLET | GENERIC, OTC | |
| FLUCONAZOLE 150 MG ORAL TABLET | GENERIC, OTC | |
| FLUCONAZOLE 200 MG ORAL TABLET | GENERIC, OTC | |
| ITRACONAZOLE 100 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx046) |
| KETOCONAZOLE 200 MG ORAL TABLET | GENERIC, OTC | PA (Rx046) |
| TERBINAFINE HCL 250 MG ORAL TABLET | GENERIC, OTC | |

ANTIFUNGAL ANTIBIOTICS

| | | |
|--------------------------------|--------------|--|
| NYSTATIN 100000/ML ORAL SUSP | GENERIC, OTC | |
| NYSTATIN 500K UNIT ORAL TABLET | GENERIC, OTC | |

INFECTIOUS DISEASE - MISCELLANEOUS

AMINOGLYCOSIDES

| | | |
|-------------------------------------|--------------|--|
| NEOMYCIN SULFATE 500 MG ORAL TABLET | GENERIC, OTC | |
|-------------------------------------|--------------|--|

ANTILEPROTICS

| | | |
|----------------------------|--------------|--|
| DAPSONE 25 MG ORAL TABLET | GENERIC, OTC | |
| DAPSONE 100 MG ORAL TABLET | GENERIC, OTC | |

ANTI-MYCOBACTERIUM AGENTS

| DRUG NAME | TYPE | RESTRICTIONS |
|------------------------------------|--------------|---------------------|
| ETHAMBUTOL HCL 100 MG ORAL TABLET | GENERIC, OTC | |
| ETHAMBUTOL HCL 400 MG ORAL TABLET | GENERIC, OTC | |
| ISONIAZID 50 MG/5 ML ORAL SOLUTION | GENERIC, OTC | |
| ISONIAZID 100 MG ORAL TABLET | GENERIC, OTC | |
| ISONIAZID 300 MG ORAL TABLET | GENERIC, OTC | |
| PYRAZINAMIDE 500 MG ORAL TABLET | GENERIC, OTC | |

ANTITUBERCULAR ANTIBIOTICS

| | | |
|------------------------------|--------------|--|
| RIFAMPIN 150 MG ORAL CAPSULE | GENERIC, OTC | |
| RIFAMPIN 300 MG ORAL CAPSULE | GENERIC, OTC | |

LINCOSAMIDES

| | | |
|--|--------------|--|
| CLINDAMYCIN HCL 150 MG ORAL CAPSULE | GENERIC, OTC | |
| CLINDAMYCIN HCL 300 MG ORAL CAPSULE | GENERIC, OTC | |
| CLINDAMYCIN PALMITATE (CLINDAMYCIN (PEDIATRIC)) 75 MG/5 ML ORAL SOLN RECON | GENERIC, OTC | |
| CLINDAMYCIN PALMITATE HCL (CLINDAMYCIN (PEDIATRIC)) 75 MG/5 ML ORAL SOLN RECON | GENERIC, OTC | |

RIFAMYCINS AND RELATED DERIVATIVE ANTIBIOTICS

| | | |
|--|------------|------------|
| RIFAXIMIN (XIFAXAN) 550 MG ORAL TABLET | BRAND, OTC | PA (Rx047) |
|--|------------|------------|

VANCOMYCIN AND DERIVATIVES

| | | |
|------------------------------------|--------------|--|
| VANCOMYCIN HCL 125 MG ORAL CAPSULE | GENERIC, OTC | |
| VANCOMYCIN HCL 250 MG ORAL CAPSULE | GENERIC, OTC | |

INFECTIOUS DISEASE - PARASITIC

ANAEROBIC ANTIPROTOZOAL-ANTIBACTERIAL AGENTS

| | | |
|----------------------------------|--------------|--|
| METRONIDAZOLE 250 MG ORAL TABLET | GENERIC, OTC | |
| METRONIDAZOLE 500 MG ORAL TABLET | GENERIC, OTC | |

ANTHELMINTICS

| | | |
|---|--------------|--|
| PYRANTEL PAMOATE (PINAWAY) 50 MG/ML ORAL SUSP | GENERIC, OTC | |
| PYRANTEL PAMOATE (PINWORM MEDICINE) 50 MG/ML ORAL SUSP | GENERIC, OTC | |
| PYRANTEL PAMOATE (PINWORM TREATMENT) 50 MG/ML ORAL SUSP | GENERIC, OTC | |
| PYRANTEL PAMOATE (REESE'S PINWORM) 50 MG/ML ORAL SUSP | GENERIC, OTC | |

ANTIMALARIAL DRUGS

| | | |
|---|--------------|--|
| CHLOROQUINE PHOSPHATE 250 MG ORAL TABLET | GENERIC, OTC | |
| CHLOROQUINE PHOSPHATE 500 MG ORAL TABLET | GENERIC, OTC | |
| HYDROXYCHLOROQUINE SULFATE 200 MG ORAL TABLET | GENERIC, OTC | |
| MEFLOQUINE HCL 250 MG ORAL TABLET | GENERIC, OTC | |

INFECTIOUS DISEASE - VIRAL

ANTIVIRAL MONOCLONAL ANTIBODIES

| | | |
|--|------------|------------------|
| PALIVIZUMAB (SYNAGIS) 50MG/0.5ML INTRAMUSC. VIAL | BRAND, OTC | PA (Rx048); SPEC |
| PALIVIZUMAB (SYNAGIS) 100 MG/ML INTRAMUSC. VIAL | BRAND, OTC | PA (Rx048); SPEC |

ANTIVIRALS, GENERAL

| | | |
|--------------------------------|--------------|--|
| ACYCLOVIR 200 MG ORAL CAPSULE | GENERIC, OTC | |
| ACYCLOVIR 200 MG/5ML ORAL SUSP | GENERIC, OTC | |
| ACYCLOVIR 400 MG ORAL TABLET | GENERIC, OTC | |
| ACYCLOVIR 800 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|--|
| OSELTAMIVIR PHOSPHATE 30 MG ORAL CAPSULE | GENERIC, OTC | QL (10 capsules per 5 days, 2 fills per year) |
| OSELTAMIVIR PHOSPHATE 45 MG ORAL CAPSULE | GENERIC, OTC | QL (10 capsules per 5 days, 2 fills per year) |
| OSELTAMIVIR PHOSPHATE 75 MG ORAL CAPSULE | GENERIC, OTC | QL (10 capsules per 5 days, 2 fills per year) |
| OSELTAMIVIR PHOSPHATE 6 MG/ML ORAL SUSP RECON | GENERIC, OTC | AR (age 7 and younger); QL (120 mL per 5 days, 2 fills per year) |
| VALACYCLOVIR HCL (VALACYCLOVIR) 500 MG ORAL TABLET | GENERIC, OTC | QL (2 tablets per day) |
| VALACYCLOVIR HCL (VALACYCLOVIR) 1000 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day, 7 days per fill, 1 fill per 30 days) |

ANTIVIRALS, HIV-SPEC, NON-PEPTIDIC PROTEASE INHIB

| | | |
|---|------------|------------|
| DARUNAVIR/COBICISTAT (PREZCOBIX) 800-150 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |
| TIPRANAVIR (APTIVUS) 250 MG ORAL CAPSULE | BRAND, OTC | PA (Rx020) |

ANTIVIRALS, HIV-SPEC, NUCLEOSIDE-NUCLEOTIDE ANALOG

| | | |
|--|--------------|------------|
| EMTRICITABINE/TENOFOVIR (EMTRICITABINE-TENOFOVIR DISOP) 200-300 MG ORAL TABLET | GENERIC, OTC | |
| lamivudine/tenofovir disop fum (TEMIXYS) 300-300 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |

ANTIVIRALS, HIV-SPEC., NUCLEOSIDE ANALOG, RTI COMB

| | | |
|--|--------------|------------|
| ABACAVIR SULFATE/LAMIVUDINE (ABACAVIR-LAMIVUDINE) 600-300MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
| ABACAVIR/LAMIVUDINE/ZIDOVUDINE (ABACAVIR-LAMIVUDINE-ZIDOVUDINE) 150-300 MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
| LAMIVUDINE/ZIDOVUDINE (LAMIVUDINE-ZIDOVUDINE) 150-300 MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |

ANTIVIRALS, HIV-SPECIFIC, CCR5 CO-RECEPTOR ANTAG.

| | | |
|--|------------|------------|
| MARAVIROC (SELZENTRY) 150 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |
| MARAVIROC (SELZENTRY) 300 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |

ANTIVIRALS, HIV-SPECIFIC, NON-NUCLEOSIDE, RTI

| | | |
|---|--------------|------------|
| EFAVIRENZ 50 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx020) |
| EFAVIRENZ 200 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx020) |
| EFAVIRENZ 600 MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
| EFAVIRENZ (SUSTIVA) 50 MG ORAL CAPSULE | BRAND, OTC | PA (Rx020) |
| EFAVIRENZ (SUSTIVA) 200 MG ORAL CAPSULE | BRAND, OTC | PA (Rx020) |
| ETRAVIRINE 100 MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
| ETRAVIRINE 200 MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
| RILPIVIRINE HYDROCHLORIDE (EDURANT) 25 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |

ANTIVIRALS, HIV-SPECIFIC, NUCLEOSIDE ANALOG, RTI

| | | |
|--|--------------|------------|
| ABACAVIR SULFATE (ABACAVIR) 20 MG/ML ORAL SOLUTION | GENERIC, OTC | PA (Rx020) |
| ABACAVIR SULFATE (ABACAVIR) 300 MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |

ANTIVIRALS, HIV-SPECIFIC, NUCLEOTIDE ANALOG, RTI

| | | |
|--|--------------|------------|
| TENOFOVIR DISOPROXIL FUMARATE 300 MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
|--|--------------|------------|

ANTIVIRALS, HIV-SPECIFIC, PROTEASE INHIBITOR COMB

| | | |
|---|--------------|------------|
| LOPINAVIR/RITONAVIR (KALETRA) 100MG-25MG ORAL TABLET | BRAND, OTC | PA (Rx020) |
| LOPINAVIR/RITONAVIR (KALETRA) 200MG-50MG ORAL TABLET | BRAND, OTC | PA (Rx020) |
| LOPINAVIR/RITONAVIR (LOPINAVIR-RITONAVIR) 400-100/5 ORAL SOLUTION | GENERIC, OTC | PA (Rx020) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| LOPINAVIR/RITONAVIR (LOPINAVIR-RITONAVIR) 100MG-25MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
| LOPINAVIR/RITONAVIR (LOPINAVIR-RITONAVIR) 200MG-50MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |

ANTIVIRALS, HIV-SPECIFIC, PROTEASE INHIBITORS

| | | |
|---|--------------|------------|
| ATAZANAVIR SULFATE 150 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx020) |
| ATAZANAVIR SULFATE 200 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx020) |
| ATAZANAVIR SULFATE 300 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx020) |
| FOSAMPRENAVIR CALCIUM 700 MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
| NELFINAVIR MESYLATE (VIRACEPT) 250 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |
| NELFINAVIR MESYLATE (VIRACEPT) 625 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |
| RITONAVIR (NORVIR) 80 MG/ML ORAL SOLUTION | BRAND, OTC | PA (Rx020) |
| RITONAVIR 100 MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
| SAQUINAVIR MESYLATE (INVIRASE) 500 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |

ANTIVIRALS,HIV-1 INTEGRASE STRAND TRANSFER INHIBTR

| | | |
|--|------------|------------|
| DOLUTEGRAVIR SODIUM (TIVICAY) 10 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |
| DOLUTEGRAVIR SODIUM (TIVICAY) 25 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |
| DOLUTEGRAVIR SODIUM (TIVICAY) 50 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |
| RALTEGRAVIR POTASSIUM (ISENTRESS) 400 MG ORAL TABLET | BRAND, OTC | PA (Rx020) |

ARTV CMB NUCLEOSIDE,NUCLEOTIDE,&NON-NUCLEOSIDE RTI

| | | |
|--|--------------|------------|
| EFAVIRENZ/EMTRICITAB/TENOFOVIR (EFAVIRENZ-EMTRIC-TENOFOV DISOP) 600-200MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
| EFAVIRENZ/LAMIVU/TENOFOV DISOP (EFAVIRENZ-LAMIVU-TENOFOV DISOP) 400-300 MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |
| EFAVIRENZ/LAMIVU/TENOFOV DISOP (EFAVIRENZ-LAMIVU-TENOFOV DISOP) 600-300MG ORAL TABLET | GENERIC, OTC | PA (Rx020) |

ARV CMB-NRTI,N(T)RTI, INTEGRASE INHIBITOR

| | | |
|---|------------|------------|
| ELVITEG/COBI/EMTRIC/TENOFO ALA (GENVOYA) 150-200-10 ORAL TABLET | BRAND, OTC | PA (Rx020) |
|---|------------|------------|

ARV COMB-NRTIS & INTEGRASE INHIBITOR

| | | |
|---|------------|------------|
| ABACAIVR/DOLUTEGRAVIR/LAMIVUDI (TRIUMEQ) 600-50-300 ORAL TABLET | BRAND, OTC | PA (Rx020) |
|---|------------|------------|

HEP C - NS5A, NS3/4A, NUCLEOTIDE NS5B INHIB COMBO

| | | |
|--|------------|---|
| SOFOSBUVIR/VELPATAS/VOXILAPREV (VOSEVI) 400-100 MG ORAL TABLET | BRAND, OTC | PA (Rx019); QL (1 tablet per day); SPEC |
|--|------------|---|

HEP C VIRUS - NS5A & NS5B POLYMERASE INHIB. COMBO.

| | | |
|--|--------------|---|
| SOFOSBUVIR/VELPATASVIR (SOFOSBUVIR-VELPATASVIR) 400-100 MG ORAL TABLET | GENERIC, OTC | PA (Rx019); QL (1 tablet per day); SPEC |
|--|--------------|---|

HEPATITIS C VIRUS- NS5A AND NS3/4A INHIBITOR COMB

| | | |
|---|------------|--|
| ELBASVIR/GRAZOPREVIR (ZEPATIER) 50MG-100MG ORAL TABLET | BRAND, OTC | PA (Rx019); QL (1 tablet per day); SPEC |
| GLECAPREVIR/PIBRENTASVIR (MAVYRET) 100MG-40MG ORAL TABLET | BRAND, OTC | PA (Rx019); QL (3 tablets per day); SPEC |

INFLAMMATORY DISEASE

ANTI-INFLAMMATORY TUMOR NECROSIS FACTOR INHIBITOR

| | | |
|--|------------|------------------|
| ADALIMUMAB (HUMIRA) 40MG/0.8ML SUBCUTANE. SYRINGEKIT | BRAND, OTC | PA (Rx040); SPEC |
| ADALIMUMAB (HUMIRA PEN) 40MG/0.8ML SUBCUTANE. PEN IJ KIT | BRAND, OTC | PA (Rx040); SPEC |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|-------------|---------------------|
| ADALIMUMAB (HUMIRA PEN CROHN'S-UC-HS) 40MG/0.8ML SUBCUTANE. PEN IJ KIT | BRAND, OTC | PA (Rx040); SPEC |
| ADALIMUMAB (HUMIRA PEN PSOR-UVEITS-ADOL HS) 40MG/0.8ML SUBCUTANE. PEN IJ KIT | BRAND, OTC | PA (Rx040); SPEC |
| ETANERCEPT (ENBREL) 25MG/0.5ML SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx040); SPEC |
| ETANERCEPT (ENBREL) 50MG/ML(1) SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx040); SPEC |
| ETANERCEPT (ENBREL) 25 MG SUBCUTANE. VIAL | BRAND, OTC | PA (Rx040); SPEC |
| ETANERCEPT (ENBREL SURECLICK) 50MG/ML(1) SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx040); SPEC |

ANTI-INFLAMMATORY, PYRIMIDINE SYNTHESIS INHIBITOR

| | | |
|-------------------------------|--------------|--|
| LEFLUNOMIDE 10 MG ORAL TABLET | GENERIC, OTC | |
| LEFLUNOMIDE 20 MG ORAL TABLET | GENERIC, OTC | |

GLUCOCORTICOIDS

| | | |
|---|--------------|--|
| DEXAMETHASONE (DECADRON) 0.5 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE (DECADRON) 0.75 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE (DECADRON) 4 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE (DECADRON) 6 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE 0.5 MG/5ML ORAL ELIXIR | GENERIC, OTC | |
| DEXAMETHASONE 0.5 MG/5ML ORAL SOLUTION | GENERIC, OTC | |
| DEXAMETHASONE 1.5MG (21) ORAL TAB DS PK | GENERIC, OTC | |
| DEXAMETHASONE 1.5MG (35) ORAL TAB DS PK | GENERIC, OTC | |
| DEXAMETHASONE 1.5MG (51) ORAL TAB DS PK | GENERIC, OTC | |
| DEXAMETHASONE 0.5 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE 0.75 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE 1 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE 1.5 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE 2 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE 4 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE 6 MG ORAL TABLET | GENERIC, OTC | |
| DEXAMETHASONE (DEXAMETHASONE INTENSOL) 1 MG/ML ORAL DROPS | BRAND, OTC | |
| DEXAMETHASONE (HIDEX) 1.5MG (21) ORAL TAB DS PK | GENERIC, OTC | |
| DEXAMETHASONE (TAPERDEX) 1.5MG (21) ORAL TAB DS PK | GENERIC, OTC | |
| METHYLPREDNISOLONE 4 MG ORAL TAB DS PK | GENERIC, OTC | |
| METHYLPREDNISOLONE 4 MG ORAL TABLET | GENERIC, OTC | |
| METHYLPREDNISOLONE 8 MG ORAL TABLET | GENERIC, OTC | |
| METHYLPREDNISOLONE 16 MG ORAL TABLET | GENERIC, OTC | |
| METHYLPREDNISOLONE 32 MG ORAL TABLET | GENERIC, OTC | |
| PREDNISOLONE 15 MG/5 ML ORAL SOLUTION | GENERIC, OTC | |
| PREDNISOLONE SOD PHOSPHATE (PREDNISOLONE SODIUM PHOSPHATE) 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | |
| PREDNISOLONE SOD PHOSPHATE (PREDNISOLONE SODIUM PHOSPHATE) 15 MG/5 ML ORAL SOLUTION | GENERIC, OTC | |
| PREDNISONE 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | |
| PREDNISONE 5 MG ORAL TAB DS PK | GENERIC, OTC | |
| PREDNISONE 10 MG ORAL TAB DS PK | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| PREDNISONE 1 MG ORAL TABLET | GENERIC, OTC | |
| PREDNISONE 2.5 MG ORAL TABLET | GENERIC, OTC | |
| PREDNISONE 5 MG ORAL TABLET | GENERIC, OTC | |
| PREDNISONE 10 MG ORAL TABLET | GENERIC, OTC | |
| PREDNISONE 20 MG ORAL TABLET | GENERIC, OTC | |
| PREDNISONE 50 MG ORAL TABLET | GENERIC, OTC | |
| PREDNISONE (PREDNISONE INTENSOL) 5 MG/ML ORAL CONC | BRAND, OTC | |

MINERALOCORTICOIDS

| | | |
|--|--------------|--|
| FLUDROCORTISONE ACETATE 0.1 MG ORAL TABLET | GENERIC, OTC | |
|--|--------------|--|

NSAIDS, CYCLOOXYGENASE 2 INHIBITOR - TYPE

| | | |
|-------------------------------|--------------|--|
| CELECOXIB 50 MG ORAL CAPSULE | GENERIC, OTC | |
| CELECOXIB 100 MG ORAL CAPSULE | GENERIC, OTC | |
| CELECOXIB 200 MG ORAL CAPSULE | GENERIC, OTC | |
| CELECOXIB 400 MG ORAL CAPSULE | GENERIC, OTC | |

NSAIDS, CYCLOOXYGENASE INHIBITOR-TYPE

| | | |
|---|--------------|--|
| DICLOFENAC SODIUM 50 MG ORAL TABLET DR | GENERIC, OTC | |
| DICLOFENAC SODIUM 75 MG ORAL TABLET DR | GENERIC, OTC | |
| ETODOLAC 400 MG ORAL TABLET | GENERIC, OTC | |
| ETODOLAC 500 MG ORAL TABLET | GENERIC, OTC | |
| FLURBIPROFEN 100 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN (ADDAPRIN) 200 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN (CHILDREN'S IBUPROFEN) 100 MG/5ML ORAL SUSP | GENERIC, OTC | |
| IBUPROFEN (CHILDREN'S PROFEN IB) 100 MG/5ML ORAL SUSP | GENERIC, OTC | |
| IBUPROFEN (CHILDREN'S PROFENIB) 100 MG/5ML ORAL SUSP | GENERIC, OTC | |
| IBUPROFEN (IBU) 400 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN (IBU) 600 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN (IBU) 800 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN (IBU-200) 200 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN 100 MG/5ML ORAL SUSP | GENERIC, OTC | |
| IBUPROFEN 200 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN 400 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN 600 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN 800 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN (IBUPROFEN IB) 200 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN (INFANTS' ADVIL) 50 MG/1.25 ORAL DROPS SUSP | GENERIC, OTC | |
| IBUPROFEN (INFANTS IBUPROFEN) 50 MG/1.25 ORAL DROPS SUSP | GENERIC, OTC | |
| IBUPROFEN (INFANTS' IBUPROFEN) 50 MG/1.25 ORAL DROPS SUSP | GENERIC, OTC | |
| IBUPROFEN (INFANT'S IBUPROFEN) 50 MG/1.25 ORAL DROPS SUSP | GENERIC, OTC | |
| IBUPROFEN (INFANT'S MOTRIN) 50 MG/1.25 ORAL DROPS SUSP | GENERIC, OTC | |
| IBUPROFEN (INFANTS PROFENIB) 50 MG/1.25 ORAL DROPS SUSP | GENERIC, OTC | |
| IBUPROFEN (I-PRIN) 200 MG ORAL TABLET | GENERIC, OTC | |
| IBUPROFEN (WAL-PROFEN) 200 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| INDOMETHACIN (INDOCIN) 25 MG/5 ML ORAL SUSP | BRAND, OTC | |
| INDOMETHACIN (INDOCIN) 50 MG RECTAL SUPP.RECT | BRAND, OTC | |
| INDOMETHACIN 25 MG ORAL CAPSULE | GENERIC, OTC | |
| INDOMETHACIN 50 MG ORAL CAPSULE | GENERIC, OTC | |
| KETOROLAC TROMETHAMINE 10 MG ORAL TABLET | GENERIC, OTC | |
| MELOXICAM 7.5 MG ORAL TABLET | GENERIC, OTC | |
| MELOXICAM 15 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN (EC-NAPROXEN) 375 MG ORAL TABLET DR | GENERIC, OTC | |
| NAPROXEN (EC-NAPROXEN) 500 MG ORAL TABLET DR | GENERIC, OTC | |
| NAPROXEN 125 MG/5ML ORAL SUSP | GENERIC, OTC | |
| NAPROXEN 250 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN 375 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN 500 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN 375 MG ORAL TABLET DR | GENERIC, OTC | |
| NAPROXEN 500 MG ORAL TABLET DR | GENERIC, OTC | |
| NAPROXEN SODIUM (ALEVE) 220 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN SODIUM (ALL DAY PAIN RELIEF) 220 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN SODIUM (ALL DAY RELIEF) 220 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN SODIUM (FLANAX) 220 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN SODIUM (MEDIPROXEN) 220 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN SODIUM 220 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN SODIUM 275 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN SODIUM 550 MG ORAL TABLET | GENERIC, OTC | |
| NAPROXEN SODIUM (WAL-PROXEN) 220 MG ORAL TABLET | GENERIC, OTC | |
| SULINDAC 150 MG ORAL TABLET | GENERIC, OTC | |
| SULINDAC 200 MG ORAL TABLET | GENERIC, OTC | |

LOCAL ANESTHESIA

LOCAL ANESTHETICS

| | | |
|--|--------------|--|
| LIDOCAINE HCL 2% MUCOUS MEM JELLY(ML) | GENERIC, OTC | |
| LIDOCAINE HCL (LIDOCAINE HCL VISCOUS) 2% MUCOUS MEM SOLUTION | GENERIC, OTC | |

LOWER GASTROINTESTINAL DISORDERS - BOWEL INFLAMMAT

CHRONIC INFLAM. COLON DX, 5-A-SALICYLAT,RECTAL TX

| | | |
|-------------------------------------|--------------|-----------------------|
| MESALAMINE 4 G/60 ML RECTAL ENEMA | GENERIC, OTC | |
| MESALAMINE 1000 MG RECTAL SUPP.RECT | GENERIC, OTC | ST (generic SFRowasa) |

DRUG TX-CHRONIC INFLAM. COLON DX,5-AMINOSALICYLAT

| | | |
|--|--------------|------------------------------------|
| BALSALAZIDE DISODIUM 750 MG ORAL CAPSULE | GENERIC, OTC | |
| MESALAMINE 1.2 G ORAL TABLET DR | GENERIC, OTC | ST (sulfasalazine and balsalazide) |
| MESALAMINE 800 MG ORAL TABLET DR | GENERIC, OTC | ST (sulfasalazine and balsalazide) |
| MESALAMINE (MESALAMINE DR) 400 MG ORAL CAP(DRTAB) | GENERIC, OTC | ST (sulfasalazine and balsalazide) |
| SULFASALAZINE 500 MG ORAL TABLET | GENERIC, OTC | |
| SULFASALAZINE (SULFASALAZINE DR) 500 MG ORAL TABLET DR | GENERIC, OTC | |

LOWER GASTROINTESTINAL DISORDERS - OTHER

AMMONIA INHIBITORS

| | | |
|--|--------------|--|
| LACTULOSE (ENULOSE) 10 G/15 ML ORAL SOLUTION | GENERIC, OTC | |
|--|--------------|--|

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| LACTULOSE (GENERLAC) 10 G/15 ML ORAL SOLUTION | GENERIC, OTC | |
| LACTULOSE 10 G/15 ML ORAL SOLUTION | GENERIC, OTC | |

ANTIDIARRHEALS

| | | |
|--|--------------|--|
| BISMUTH SUBSALICYLATE (ANTI-DIARRHEAL) 262MG/15ML ORAL SUSP | GENERIC, OTC | |
| BISMUTH SUBSALICYLATE (DIARRHEA RELIEF) 262MG/15ML ORAL SUSP | GENERIC, OTC | |
| BISMUTH SUBSALICYLATE (DIGESTIVE RELIEF) 262MG/15ML ORAL SUSP | GENERIC, OTC | |
| BISMUTH SUBSALICYLATE (GERI-PECTATE) 262MG/15ML ORAL SUSP | GENERIC, OTC | |
| BISMUTH SUBSALICYLATE (KAOPECTATE) 262MG/15ML ORAL SUSP | GENERIC, OTC | |
| BISMUTH SUBSALICYLATE (K-PEC) 262MG/15ML ORAL SUSP | GENERIC, OTC | |
| BISMUTH SUBSALICYLATE (PINK BISMUTH) 262MG/15ML ORAL SUSP | GENERIC, OTC | |
| BISMUTH SUBSALICYLATE (SOOTHE) 262MG/15ML ORAL SUSP | GENERIC, OTC | |
| BISMUTH SUBSALICYLATE (STOMACH RELIEF) 262MG/15ML ORAL SUSP | GENERIC, OTC | |
| BISMUTH SUBSALICYLATE (STOMACH RELIEF ORIGINAL) 262MG/15ML ORAL SUSP | GENERIC, OTC | |
| DIPHENOXYLATE HCL/ATROP SULF (DIPHENOXYLATE-ATROPINE) 2.5-.025MG ORAL TABLET | GENERIC, OTC | |
| LOPERAMIDE HCL (ANTI-DIARRHEAL) 2 MG ORAL CAPSULE | GENERIC, OTC | |
| LOPERAMIDE HCL (ANTI-DIARRHEAL) 2 MG ORAL TABLET | GENERIC, OTC | |
| LOPERAMIDE HCL (DIAMODE) 2 MG ORAL TABLET | GENERIC, OTC | |
| LOPERAMIDE HCL (IMODIUM A-D) 2 MG ORAL CAPSULE | GENERIC, OTC | |
| LOPERAMIDE HCL (LOPERAMIDE) 2 MG ORAL CAPSULE | GENERIC, OTC | |
| LOPERAMIDE HCL (LOPERAMIDE) 2 MG ORAL TABLET | GENERIC, OTC | |
| LOPERAMIDE HCL (ULTRA A-D) 2 MG ORAL TABLET | GENERIC, OTC | |

BILE SALTS

| | | |
|------------------------------|--------------|--|
| URSODIOL 300 MG ORAL CAPSULE | GENERIC, OTC | |
| URSODIOL 500 MG ORAL TABLET | GENERIC, OTC | |

LAXATIVES AND CATHARTICS

| | | |
|---|--------------|--|
| BISACODYL (ALOPHEN PILLS) 5 MG ORAL TABLET DR | GENERIC, OTC | |
| BISACODYL 5 MG ORAL TABLET DR | GENERIC, OTC | |
| BISACODYL (BISA-LAX) 5 MG ORAL TABLET DR | GENERIC, OTC | |
| BISACODYL (C-LAX LAXATIVE) 5 MG ORAL TABLET DR | GENERIC, OTC | |
| BISACODYL (GENTLE LAXATIVE) 5 MG ORAL TABLET | GENERIC, OTC | |
| BISACODYL (GENTLE LAXATIVE) 5 MG ORAL TABLET DR | GENERIC, OTC | |
| BISACODYL (LAXATIVE) 5 MG ORAL TABLET | GENERIC, OTC | |
| BISACODYL (LAXATIVE) 5 MG ORAL TABLET DR | GENERIC, OTC | |
| BISACODYL (WOMEN'S GENTLE LAXATIVE) 5 MG ORAL TABLET DR | GENERIC, OTC | |
| BISACODYL (WOMEN'S LAXATIVE) 5 MG ORAL TABLET | GENERIC, OTC | |
| BISACODYL (WOMEN'S LAXATIVE) 5 MG ORAL TABLET DR | GENERIC, OTC | |
| CALCIUM POLYCARBOPHIL (FIBER) 625 MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM POLYCARBOPHIL (FIBER LAX) 625 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| CALCIUM POLYCARBOPHIL (FIBER LAXATIVE) 625 MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM POLYCARBOPHIL (FIBER TABS) 625 MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM POLYCARBOPHIL (FIBER THERAPY) 625 MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM POLYCARBOPHIL (FIBER-LAX) 625 MG ORAL TABLET | GENERIC, OTC | |
| DEXTRIN (FIBER) 3 G/3.5 G ORAL POWDER | GENERIC, OTC | |
| DOCUSATE CALCIUM 240 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE CALCIUM (STOOL SOFTENER) 240 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (COL-RITE) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (COL-RITE) 250 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (DIOCTO) 60 MG/15ML ORAL SYRUP | GENERIC, OTC | |
| DOCUSATE SODIUM (DOCU LIQUID) 50 MG/5 ML ORAL LIQUID | GENERIC, OTC | |
| DOCUSATE SODIUM (DOCUPRENE) 100 MG ORAL TABLET | GENERIC, OTC | |
| DOCUSATE SODIUM 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM 250 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM 50 MG/5 ML ORAL LIQUID | GENERIC, OTC | |
| DOCUSATE SODIUM 60 MG/15ML ORAL SYRUP | GENERIC, OTC | |
| DOCUSATE SODIUM 100 MG ORAL TABLET | GENERIC, OTC | |
| DOCUSATE SODIUM (DOK) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (DOK) 100 MG ORAL TABLET | GENERIC, OTC | |
| DOCUSATE SODIUM (DSS) 250 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (DULCOEASE) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (DULCOLAX STOOL SOFTENER) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (LAXA BASIC 100) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (MOVE IT ALONG) 100 MG ORAL TABLET | GENERIC, OTC | |
| DOCUSATE SODIUM (PHILLIPS' LAXATIVE) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (PROMOLAXIN) 100 MG ORAL TABLET | GENERIC, OTC | |
| DOCUSATE SODIUM (SILACE) 50 MG/5 ML ORAL LIQUID | GENERIC, OTC | |
| DOCUSATE SODIUM (SILACE) 60 MG/15ML ORAL SYRUP | GENERIC, OTC | |
| DOCUSATE SODIUM (STOOL SOFTENER) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (STOOL SOFTENER) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (STOOL SOFTENER) 250 MG ORAL CAPSULE | GENERIC, OTC | |
| DOCUSATE SODIUM (STOOL SOFTENER) 50 MG/5 ML ORAL LIQUID | GENERIC, OTC | |
| DOCUSATE SODIUM (STOOL SOFTENER) 60 MG/15ML ORAL SYRUP | GENERIC, OTC | |
| DOCUSATE SODIUM (STOOL SOFTENER) 100 MG ORAL TABLET | GENERIC, OTC | |
| LACTULOSE (CONSTULOSE) 10 G/15 ML ORAL SOLUTION | GENERIC, OTC | |
| LACTULOSE 10 G/15 ML ORAL SOLUTION | GENERIC, OTC | |
| LACTULOSE 20 G/30 ML ORAL SOLUTION | GENERIC, OTC | |
| MAGNESIUM CITRATE (CITRATE OF MAGNESIA) ORAL SOLUTION | GENERIC, OTC | |
| MAGNESIUM CITRATE (CITROMA) ORAL SOLUTION | GENERIC, OTC | |
| MAGNESIUM CITRATE ORAL SOLUTION | GENERIC, OTC | |
| MAGNESIUM HYDROXIDE (DULCOLAX) 400 MG/5ML ORAL SUSP | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|---------------|------------------------|
| MAGNESIUM HYDROXIDE (MILK OF MAGNESIA) 400 MG/5ML ORAL SUSP | GENERIC, OTC | |
| METHYLCELLULOSE (FIBER THERAPY) 2 G/19 G ORAL POWDER | GENERIC, OTC | |
| PEG 3350/NA SULF,BICARB,CL/KCL (GAVILYTE-C) 240-22.72G ORAL SOLN RECON | GENERIC, OTC | |
| PEG 3350/NA SULF,BICARB,CL/KCL (GAVILYTE-G) 236-22.74G ORAL SOLN RECON | GENERIC, OTC | |
| PEG 3350/NA SULF,BICARB,CL/KCL (PEG-3350 AND ELECTROLYTES) 236-22.74G ORAL SOLN RECON | GENERIC, OTC | |
| POLYETHYLENE GLYCOL 3350 (CLEARLAX) 17 G/DOSE ORAL POWDER | GENERIC, OTC | QL (510 g per 30 days) |
| POLYETHYLENE GLYCOL 3350 (GENTLELAX) 17 G/DOSE ORAL POWDER | GENERIC, OTC | QL (510 g per 30 days) |
| POLYETHYLENE GLYCOL 3350 (LAXACLEAR) 17 G/DOSE ORAL POWDER | GENERIC, OTC | QL (510 g per 30 days) |
| POLYETHYLENE GLYCOL 3350 (LAXATIVE PEG 3350) 17 G/DOSE ORAL POWDER | GENERIC, OTC | QL (510 g per 30 days) |
| POLYETHYLENE GLYCOL 3350 (NATURA-LAX) 17 G/DOSE ORAL POWDER | GENERIC, OTC | QL (510 g per 30 days) |
| POLYETHYLENE GLYCOL 3350 17 G/DOSE ORAL POWDER | GENERIC, OTC | QL (510 g per 30 days) |
| POLYETHYLENE GLYCOL 3350 (POWDERLAX) 17 G/DOSE ORAL POWDER | GENERIC, OTC | QL (510 g per 30 days) |
| POLYETHYLENE GLYCOL 3350 (PURELAX) 17 G/DOSE ORAL POWDER | GENERIC, OTC | QL (510 g per 30 days) |
| POLYETHYLENE GLYCOL 3350 (SMOOTHLAX) 17 G/DOSE ORAL POWDER | GENERIC, OTC | QL (510 g per 30 days) |
| PSYLLIUM HUSK (DAILY FIBER) 0.52G ORAL CAPSULE | GENERIC, OTC | |
| PSYLLIUM HUSK (FIBER) 0.52G ORAL CAPSULE | GENERIC, OTC | |
| PSYLLIUM HUSK (FIBER THERAPY) 0.52G ORAL CAPSULE | GENERIC, OTC | |
| PSYLLIUM HUSK (KONSYL) 6 G/6 G ORAL POWDER | BRAND, OTC | |
| PSYLLIUM HUSK (NATURAL FIBER) 0.52G ORAL CAPSULE | GENERIC, OTC | |
| PSYLLIUM HUSK (NATURAL FIBER SUPPLEMENT) 6 G/6 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK (PSYLLIUM FIBER) 0.52G ORAL CAPSULE | GENERIC, OTC | |
| PSYLLIUM HUSK (WAL-MUCIL) 0.52G ORAL CAPSULE | GENERIC, OTC | |
| PSYLLIUM HUSK/ASPARTAME (FIBER THERAPY) 3.4G/5.8G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/ASPARTAME (GERI-MUCIL) 3.4G/5.8G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/ASPARTAME (METAMUCIL) 3.4G/5.8G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/ASPARTAME (METAMUCIL MULTIHEALTH FIBER) 3.4G/5.8G ORAL POWDER | BRAND, OTC | |
| PSYLLIUM HUSK/ASPARTAME (MULTIHEALTH FIBER) 3.4G/5.8G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/ASPARTAME (NATURAL DAILY FIBER) 3.4G/5.8G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/ASPARTAME (WAL-MUCIL) 3.4G/5.8G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/ASPARTAME (WAL-MUCIL) 3.4G/5.8G ORAL POWDER | NON DRUG, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|---------------|---------------------|
| PSYLLIUM HUSK/SUCROSE (DAILY FIBER) 3.4 G/12 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (FIBER) 3.4 G/12 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (FIBER THERAPY) 3.4 G/12 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (FIBER THERAPY) 3.4 G/7 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (GERI-MUCIL) 3.4 G/7 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (GERI-MUCIL) 3.4 G/12 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (KONSYL) 3.4 G ORAL POWD PACK | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (KONSYL) 3.4 G/12 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (MULTIHEALTH FIBER) 3.4 G/7 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (NATURAL DAILY FIBER) 3.4 G/7 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (NATURAL FIBER) 3.4 G/7 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (NATURAL VEGETABLE POWDER) 3.4 G/12 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM HUSK/SUCROSE (WAL-MUCIL) 3.4 G/7 G ORAL POWDER | NON DRUG, OTC | |
| PSYLLIUM HUSK/SUCROSE (WAL-MUCIL NATURAL FIBER LAX) 3.4 G/12 G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM SEED (FIBER THERAPY) 3.4G/5.8G ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM SEED (HYDROCIL INSTANT) ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM SEED (NATURAL VEGETABLE POWDER) ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM SEED/ASPARTAME (NATURAL FIBER) ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM SEED/DEXTROSE (NATURAL VEGETABLE POWDER) ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM SEED/SUCROSE (FIBER THERAPY) ORAL POWDER | GENERIC, OTC | |
| PSYLLIUM SEED/SUCROSE (NATURAL FIBER POWDER) ORAL POWDER | GENERIC, OTC | |
| SENNOSIDES (EVAC-U-GEN) 8.6 MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES (GERI-KOT) 8.6 MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES (NATURAL LAXATIVE) 8.6 MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES (NATURAL VEGETABLE LAXATIVE) 8.6 MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES (SENNA) 8.8MG/5ML ORAL SYRUP | GENERIC, OTC | |
| SENNOSIDES (SENNA) 8.6 MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES (SENNA LAX) 8.6 MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES (SENNA LAXATIVE) 8.6 MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES (SEN-O-TAB) 8.6 MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES (VEGETABLE LAXATIVE) 8.6 MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (DOCUZEN) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (LAX STOOL SOFTENER WITH SENNA) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| SENNOSIDES/DOCUSATE SODIUM (LAXACIN) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (P-COL RITE) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (SENEXON-S) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (SENNAPLUS) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (SENNAS) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (SENNAS LAXATIVE) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (SENNAS TIME S) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (SENNOSIDES-DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (SENNOKOT-S) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (STIMULANT LAXATIVE PLUS) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (STOOL SOFTENER-LAXATIVE) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (STOOL SOFTENER-STIMULANT LAX) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SENNOSIDES/DOCUSATE SODIUM (VEGETABLE LAX-STOOL SOFTENER) 8.6MG-50MG ORAL TABLET | GENERIC, OTC | |
| SOD CHLORIDE/NAHCO3/KCL/PEG'S (GAVILYTE-N) 420G ORAL SOLN RECON | GENERIC, OTC | |
| SOD CHLORIDE/NAHCO3/KCL/PEG'S (NULYTELY) 420G ORAL SOLN RECON | BRAND, OTC | |
| SOD CHLORIDE/NAHCO3/KCL/PEG'S (PEG 3350-ELECTROLYTE) 420G ORAL SOLN RECON | GENERIC, OTC | |
| SODIUM,POTASSIUM,&MAG SULFATES (SUPREP) 17.5-3.13G ORAL SOLN RECON | BRAND, OTC | |
| WHEAT DEXTRIN (BEST FIBER) 3 G/3.5 G ORAL POWDER | GENERIC, OTC | |

LAXATIVES, LOCAL/RECTAL

| | | |
|--|--------------|--|
| BISACODYL 10 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| BISACODYL (FAST RELIEF LAXATIVE) 10 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| BISACODYL (GENTLE LAXATIVE) 10 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| BISACODYL (LAXATIVE SUPPOSITORY) 10 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| BISACODYL (MAGIC BULLET) 10 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| BISACODYL (ONELAX) 10 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| GLYCERIN (ADULT GLYCERIN) ADULT RECTAL SUPP.RECT | GENERIC, OTC | |
| GLYCERIN PEDIATRIC RECTAL SUPP.RECT | GENERIC, OTC | |
| GLYCERIN ADULT RECTAL SUPP.RECT | GENERIC, OTC | |
| GLYCERIN (PEDIA-LAX) PEDIATRIC RECTAL SUPP.RECT | GENERIC, OTC | |
| NA PHOS,M-B/NA PHOS,DI-BA (ENEMA) 19G-7G/118 RECTAL ENEMA | GENERIC, OTC | |
| NA PHOS,M-B/NA PHOS,DI-BA (ENEMA DISPOSABLE) 19G-7G/118 RECTAL ENEMA | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| NA PHOS,M-B/NA PHOS,DI-BA (PEDIATRIC ENEMA) 9.5-3.5/59 RECTAL ENEMA | GENERIC, OTC | |
| NA PHOS,M-B/NA PHOS,DI-BA (PURE AND GENTLE SALINE ENEMA) 19G-7G/118 RECTAL ENEMA | GENERIC, OTC | |
| NA PHOS,M-B/NA PHOS,DI-BA (SALINE ENEMA) 19G-7G/118 RECTAL ENEMA | GENERIC, OTC | |

MEDICAL SUPPLIES

DURABLE MEDICAL EQUIPMENT,MISC

| | | |
|--|---------------|------------------------|
| CONTAINER,EMPTY (TABLET CUTTER) MISCELL. EACH | NON DRUG, OTC | QL (1 device per fill) |
| MISCELLANEOUS MEDICAL SUPPLY (CUT N CRUSH) MISCELL. EACH | NON DRUG, OTC | QL (1 device per fill) |
| MISCELLANEOUS MEDICAL SUPPLY (TABLET CUTTER) MISCELL. EACH | NON DRUG, OTC | QL (1 device per fill) |

MISCELLANEOUS AGENTS

ANAPHYLAXIS THERAPY AGENTS

| | | |
|---|--------------|--------------------------|
| EPINEPHRINE 0.15MG/0.3 INJECTION AUTO INJCT | GENERIC, OTC | QL (1 pack per 144 days) |
| EPINEPHRINE 0.15/0.15 INJECTION AUTO INJCT | GENERIC, OTC | QL (1 pack per 144 days) |
| EPINEPHRINE 0.3MG/0.3 INJECTION AUTO INJCT | GENERIC, OTC | QL (1 pack per 144 days) |

PARASYMPATHETIC AGENTS

| | | |
|--|--------------|--|
| BETHANECHOL CHLORIDE 5 MG ORAL TABLET | GENERIC, OTC | |
| BETHANECHOL CHLORIDE 10 MG ORAL TABLET | GENERIC, OTC | |
| BETHANECHOL CHLORIDE 25 MG ORAL TABLET | GENERIC, OTC | |
| BETHANECHOL CHLORIDE 50 MG ORAL TABLET | GENERIC, OTC | |

NEOPLASTIC DISEASE

ALKYLATING AGENTS

| | | |
|---|--------------|------------------|
| BENDAMUSTINE HCL (TREANDA) 25 MG INTRAVEN. VIAL | BRAND, OTC | PA (Rx018); SPEC |
| BUSULFAN (MYLERAN) 2 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| CHLORAMBUCIL (LEUKERAN) 2 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| CYCLOPHOSPHAMIDE 25 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
| CYCLOPHOSPHAMIDE 50 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
| CYCLOPHOSPHAMIDE 25 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| CYCLOPHOSPHAMIDE 50 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| HYDROXYUREA 500 MG ORAL CAPSULE | GENERIC, OTC | |
| LOMUSTINE (GLEOSTINE) 10 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| LOMUSTINE (GLEOSTINE) 40 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| LOMUSTINE (GLEOSTINE) 100 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| OXALIPLATIN 50 MG/10ML INTRAVEN. VIAL | GENERIC, OTC | PA (Rx018); SPEC |
| OXALIPLATIN 100MG/20ML INTRAVEN. VIAL | GENERIC, OTC | PA (Rx018); SPEC |
| TEMOZOLOMIDE 5 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
| TEMOZOLOMIDE 20 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
| TEMOZOLOMIDE 100 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
| TEMOZOLOMIDE 140 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
| TEMOZOLOMIDE 180 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
| TEMOZOLOMIDE 250 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |

ANTIANDROGENIC AGENTS

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| ABIRATERONE ACETATE 250 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| FLUTAMIDE 125 MG ORAL CAPSULE | GENERIC, OTC | |
| NILUTAMIDE 150 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |

ANTIBIOTIC ANTINEOPLASTICS

| | | |
|------------------------------------|--------------|------------------|
| DACTINOMYCIN 0.5 MG INTRAVEN. VIAL | GENERIC, OTC | PA (Rx018); SPEC |
|------------------------------------|--------------|------------------|

ANTIMETABOLITES

| | | |
|--|--------------|------------------|
| AZACITIDINE 100 MG INJECTION VIAL | GENERIC, OTC | PA (Rx018); SPEC |
| CAPECITABINE 150 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| CAPECITABINE 500 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| GEMCITABINE HCL 1 G INTRAVEN. VIAL | GENERIC, OTC | PA (Rx018); SPEC |
| GEMCITABINE HCL 2 G INTRAVEN. VIAL | GENERIC, OTC | PA (Rx018); SPEC |
| GEMCITABINE HCL 200 MG INTRAVEN. VIAL | GENERIC, OTC | PA (Rx018); SPEC |
| MERCAPTOPYRINE 50 MG ORAL TABLET | GENERIC, OTC | |
| METHOTREXATE SODIUM (METHOTREXATE) 25 MG/ML INJECTION VIAL | GENERIC, OTC | |
| METHOTREXATE SODIUM (METHOTREXATE) 2.5 MG ORAL TABLET | GENERIC, OTC | |
| METHOTREXATE SODIUM 25 MG/ML INJECTION VIAL | GENERIC, OTC | |
| METHOTREXATE SODIUM/PF (METHOTREXATE SODIUM) 25 MG/ML INJECTION VIAL | GENERIC, OTC | |
| PRALATREXATE (FOLOTYN) 20MG/ML(1) INTRAVEN. VIAL | BRAND, OTC | PA (Rx018); SPEC |
| PRALATREXATE (FOLOTYN) 40 MG/2 ML INTRAVEN. VIAL | BRAND, OTC | PA (Rx018); SPEC |
| THIOGUANINE (TABLOID) 40 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |

ANTINEOPLAST EGF RECEPTOR BLOCKER RCMB MC ANTIBODY

| | | |
|---|------------|------------------|
| CETUXIMAB (ERBITUX) 100MG/50ML INTRAVEN. VIAL | BRAND, OTC | PA (Rx018); SPEC |
| CETUXIMAB (ERBITUX) 200MG/0.1L INTRAVEN. VIAL | BRAND, OTC | PA (Rx018); SPEC |

ANTINEOPLASTIC AROMATASE INHIBITORS

| | | |
|------------------------------|--------------|--|
| ANASTROZOLE 1 MG ORAL TABLET | GENERIC, OTC | |
| EXEMESTANE 25 MG ORAL TABLET | GENERIC, OTC | |
| LETROZOLE 2.5 MG ORAL TABLET | GENERIC, OTC | |

ANTINEOPLASTIC - MTOR KINASE INHIBITORS

| | | |
|-------------------------------|--------------|------------------|
| EVEROLIMUS 2.5 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| EVEROLIMUS 5 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| EVEROLIMUS 10 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |

ANTINEOPLASTIC - TOPOISOMERASE I INHIBITORS

| | | |
|--|--------------|------------------|
| IRINOTECAN HCL (CAMPTOSAR) 300MG/15ML INTRAVEN. VIAL | BRAND, OTC | PA (Rx018); SPEC |
| IRINOTECAN HCL 300MG/15ML INTRAVEN. VIAL | GENERIC, OTC | PA (Rx018); SPEC |
| TOPOTECAN HCL (HYCAMTIN) 0.25 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| TOPOTECAN HCL (HYCAMTIN) 1 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| TOPOTECAN HCL 4 MG INTRAVEN. VIAL | GENERIC, OTC | PA (Rx018); SPEC |

ANTINEOPLASTIC IMMUNOMODULATOR AGENTS

| | | |
|---|------------|------------------|
| LENALIDOMIDE (REVLIMID) 2.5 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| LENALIDOMIDE (REVLIMID) 5 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| LENALIDOMIDE (REVLIMID) 10 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| LENALIDOMIDE (REVLIMID) 15 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|-------------|---------------------|
| LENALIDOMIDE (REVLIMID) 20 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| LENALIDOMIDE (REVLIMID) 25 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |

ANTINEOPLASTIC SYSTEMIC ENZYME INHIBITORS

| | | |
|---|--------------|------------------|
| DASATINIB (SPRYCEL) 20 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| DASATINIB (SPRYCEL) 50 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| DASATINIB (SPRYCEL) 70 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| DASATINIB (SPRYCEL) 80 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| DASATINIB (SPRYCEL) 100 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| DASATINIB (SPRYCEL) 140 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| ERLOTINIB HCL 25 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| ERLOTINIB HCL 100 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| ERLOTINIB HCL 150 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| GEFITINIB (IRESSA) 250 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| IMATINIB MESYLATE 100 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| IMATINIB MESYLATE 400 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| LAPATINIB DITOSYLATE (LAPATINIB) 250 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |
| NILOTINIB HYDROCHLORIDE (TASIGNA) 150 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| NILOTINIB HYDROCHLORIDE (TASIGNA) 200 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| PAZOPANIB HYDROCHLORIDE (VOTRIENT) 200 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| SORAFENIB TOSYLATE (NEXAVAR) 200 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| SUNITINIB MALATE 12.5 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
| SUNITINIB MALATE 25 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
| SUNITINIB MALATE 50 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
| VANDETANIB (CAPRELSA) 100 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| VANDETANIB (CAPRELSA) 300 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |

ANTINEOPLASTIC, HISTONE DEACETYLASE INHIBITORS, HDIS

| | | |
|--|------------|------------------|
| ROMIDEPSIN (ISTODAX) 10 MG/2 ML INTRAVEN. VIAL | BRAND, OTC | PA (Rx018); SPEC |
| VORINOSTAT (ZOLINZA) 100 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |

ANTINEOPLASTICS, MISCELLANEOUS

| | | |
|---|--------------|------------------|
| CABAZITAXEL (JEVTANA) FDN10MG/ML INTRAVEN. VIAL | BRAND, OTC | PA (Rx018); SPEC |
| DOCETAXEL (DOCEFREZ) 20 MG INTRAVEN. VIAL | BRAND, OTC | PA (Rx018); SPEC |
| DOCETAXEL (DOCEFREZ) 80 MG INTRAVEN. VIAL | BRAND, OTC | PA (Rx018); SPEC |
| DOCETAXEL 20MG/ML(1) INTRAVEN. VIAL | GENERIC, OTC | PA (Rx018); SPEC |
| DOCETAXEL 80 MG/4 ML INTRAVEN. VIAL | GENERIC, OTC | PA (Rx018); SPEC |
| ETOPOSIDE 50 MG ORAL CAPSULE | GENERIC, OTC | |
| MITOTANE (LYSODREN) 500 MG ORAL TABLET | BRAND, OTC | PA (Rx018); SPEC |
| PROCARBAZINE HCL (MATULANE) 50 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| TRETINOIN 10 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |

CHEMOTHERAPY RESCUE/ANTIDOTE AGENTS

| | | |
|--------------------------------------|--------------|--|
| LEUCOVORIN CALCIUM 5 MG ORAL TABLET | GENERIC, OTC | |
| LEUCOVORIN CALCIUM 10 MG ORAL TABLET | GENERIC, OTC | |
| LEUCOVORIN CALCIUM 15 MG ORAL TABLET | GENERIC, OTC | |
| LEUCOVORIN CALCIUM 25 MG ORAL TABLET | GENERIC, OTC | |

SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERM)

| DRUG NAME | TYPE | RESTRICTIONS |
|--------------------------------------|--------------|---------------------|
| TAMOXIFEN CITRATE 10 MG ORAL TABLET | GENERIC, OTC | |
| TAMOXIFEN CITRATE 20 MG ORAL TABLET | GENERIC, OTC | |
| TOREMIFENE CITRATE 60 MG ORAL TABLET | GENERIC, OTC | PA (Rx018); SPEC |

SELECTIVE RETINOID X RECEPTOR AGONISTS (RXR)

| | | |
|-------------------------------|--------------|------------------|
| BEXAROTENE 75 MG ORAL CAPSULE | GENERIC, OTC | PA (Rx018); SPEC |
|-------------------------------|--------------|------------------|

STEROID ANTINEOPLASTICS

| | | |
|---|--------------|------------------|
| ESTRAMUSTINE PHOSPHATE SODIUM (EMCYT) 140 MG ORAL CAPSULE | BRAND, OTC | PA (Rx018); SPEC |
| MEGESTROL ACETATE 20 MG ORAL TABLET | GENERIC, OTC | |
| MEGESTROL ACETATE 40 MG ORAL TABLET | GENERIC, OTC | |

NEUROLOGICAL DISEASE - MISCELLANEOUS

AGENTS TO TREAT MULTIPLE SCLEROSIS

| | | |
|--|--------------|--|
| DIMETHYL FUMARATE 120 MG ORAL CAPSULE DR | GENERIC, OTC | PA (Rx026); QL (14 capsules per 7 days); SPEC |
| DIMETHYL FUMARATE 120-240 MG ORAL CAPSULE DR | GENERIC, OTC | PA (Rx026); QL (60 capsules per 30 days); SPEC |
| DIMETHYL FUMARATE 240 MG ORAL CAPSULE DR | GENERIC, OTC | PA (Rx026); QL (60 capsules per 30 days); SPEC |
| INTERFERON BETA-1A (AVONEX) 30MCG/.5ML INTRAMUSC. SYRINGE | BRAND, OTC | PA (Rx025); SPEC |
| INTERFERON BETA-1A (AVONEX) 30MCG/.5ML INTRAMUSC. SYRINGEKIT | BRAND, OTC | PA (Rx025); SPEC |
| INTERFERON BETA-1A (AVONEX PEN) 30MCG/.5ML INTRAMUSC. PEN IJ KIT | BRAND, OTC | PA (Rx025); SPEC |
| INTERFERON BETA-1A (AVONEX PEN) 30MCG/.5ML INTRAMUSC. PEN INJCTR | BRAND, OTC | PA (Rx025); SPEC |

ORAL/PHARYNGEAL DISORDERS

DENTAL AIDS AND PREPARATIONS

| | | |
|--|--------------|--|
| CHLORHEXIDINE GLUCONATE 0.12% MUCOUS MEM MOUTHWASH | GENERIC, OTC | |
| CHLORHEXIDINE GLUCONATE (PAROEX) 0.12% MUCOUS MEM MOUTHWASH | GENERIC, OTC | |
| CHLORHEXIDINE GLUCONATE (PERIOGARD) 0.12% MUCOUS MEM MOUTHWASH | GENERIC, OTC | |

NOSE PREPARATIONS, MISCELLANEOUS (RX)

| | | |
|--|--------------|--|
| IPRATROPIUM BROMIDE 21 MCG NASAL SPRAY | GENERIC, OTC | |
| IPRATROPIUM BROMIDE 42 MCG NASAL SPRAY | GENERIC, OTC | |

OTHER DRUGS

APPETITE STIM. FOR ANOREXIA,CACHEXIA,WASTING SYND.

| | | |
|--|--------------|--|
| MEGESTROL ACETATE 400MG/10ML ORAL SUSP | GENERIC, OTC | |
|--|--------------|--|

DIAGNOSTIC PREPARATIONS,MISC.

| | | |
|--|------------|--|
| GLUCAGON,HUMAN RECOMBINANT (GLUCAGEN) 1 MG/ML INJECTION VIAL | BRAND, OTC | |
|--|------------|--|

DIAGNOSTIC TEST DEVICES AND SUPPLIES

| | | |
|---|---------------|-------------------------|
| COVID-19 ANTIGEN (FIA) TEST (BD VERITOR SYSTEM SARS-COV-2) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19 ANTIGEN (FIA) TEST (BINAXNOW COVD AG CARD HOME TST) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|---------------|-------------------------|
| COVID-19 ANTIGEN (FIA) TEST (BINAXNOW COVID-19 AG CARD) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19 ANTIGEN (FIA) TEST (BINAXNOW COVID-19 AG SELF TEST) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19 ANTIGEN (FIA) TEST (ELLUME COVID-19 HOME TEST) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19 ANTIGEN (FIA) TEST (INTELISWAB COVID-19 RAPID TEST) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19 ANTIGEN (FIA) TEST (QUICKVUE AT-HOME COVID-19 TEST) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19 ANTIGEN (FIA) TEST (QUICKVUE SARS ANTIGEN) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19 ANTIGEN (FIA) TEST (SOFIA SARS ANTIGEN FIA) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID19 TEST ADM.BY PHARMACIST (COVID19 TEST ADM BY PHARMACIST) MISCELL. MISCELL | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19 TEST SPECIMEN COLLECT (COVID19 SPECIMEN COLLECT NCPDP) MISCELL. MISCELL | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19 TEST SPECIMEN COLLECT (PIXEL COVID19 HOME COLLECT KIT) MISCELL. MISCELL | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19 VIRAL TEST ASSAY (ID NOW COVID-19 TEST KIT) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19,FLU A,B ANTIGEN TEST (SOFIA2 FLU-SARS ANTIGEN FIA) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |
| COVID-19,FLU A,B ANTIGEN TEST (VERITOR SARS-COV-2 AND FLU A-B) MISCELL. KIT | NON DRUG, OTC | QL (4 kits per 30 days) |

DIETARY SUPPLEMENT, MISCELLANEOUS

| | | |
|---|--------------|--|
| DOCOSAHEXANOIC ACID/EPA (SEA-OMEGA) 600-1000MG ORAL CAPSULE | GENERIC, OTC | |
|---|--------------|--|

GENERAL INHALATION AGENTS

| | | |
|---|--------------|--|
| SODIUM CL FOR INHALATION (NEBUSAL) 3% INHALATION VIAL-NEB | GENERIC, OTC | |
| SODIUM CL FOR INHALATION (SODIUM CHLORIDE) 0.9% INHALATION VIAL-NEB | GENERIC, OTC | |
| SODIUM CL FOR INHALATION (SODIUM CHLORIDE) 3% INHALATION VIAL-NEB | GENERIC, OTC | |
| SODIUM CL FOR INHALATION (SODIUM CHLORIDE) 7% INHALATION VIAL-NEB | GENERIC, OTC | |

INSECTICIDES

| | | |
|---|--------------|--|
| PERMETHRIN (HOME LICE-BEDBUG-DUST MITE) 0.5% MISCELL. SPRAY | GENERIC, OTC | |
| PERMETHRIN (LICE BEDDING) 0.5% MISCELL. SPRAY | GENERIC, OTC | |
| PERMETHRIN (LICE-BEDBUG-MITE BEDDING) 0.5% MISCELL. SPRAY | GENERIC, OTC | |
| PERMETHRIN (RID) 0.5% MISCELL. SPRAY | GENERIC, OTC | |
| PERMETHRIN (STOP LICE) 0.5% MISCELL. SPRAY | GENERIC, OTC | |

METABOLIC DEFICIENCY AGENTS

| | | |
|--|--------------|--|
| LEVOCARNITINE (CARNITOR SF) 100 MG/ML ORAL SOLUTION | BRAND, OTC | |
| LEVOCARNITINE 330 MG ORAL TABLET | GENERIC, OTC | |
| LEVOCARNITINE (LEVOCARNITINE SF) 100 MG/ML ORAL SOLUTION | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| LEVOCARNITINE (WITH SUCROSE) (LEVOCARNITINE) 100 MG/ML ORAL SOLUTION | GENERIC, OTC | |

OTHER RESPIRATORY DISORDERS

MUCOLYTICS

| | | |
|--|--------------|--|
| ACETYLCYSTEINE 100 MG/ML MISCELL. VIAL | GENERIC, OTC | |
| ACETYLCYSTEINE 200 MG/ML MISCELL. VIAL | GENERIC, OTC | |

PAIN MANAGEMENT - ANALGESICS

ANALGESIC, NON-SALICYLATE & BARBITURATE COMB.

| | | |
|--|--------------|--|
| BUTALBITAL/ACETAMINOPHEN (BUTALBITAL-ACETAMINOPHEN) 50MG-325MG ORAL TABLET | GENERIC, OTC | |
| BUTALBITAL/ACETAMINOPHEN (TENCON) 50MG-325MG ORAL TABLET | GENERIC, OTC | |

ANALGESIC, SALICYLATE, BARBITURATE,& XANTHINE CMB

| | | |
|--|--------------|--|
| BUTALBITAL/ASPIRIN/CAFFEINE (BUTALBITAL-ASPIRIN-CAFFEINE) 50-325-40 ORAL CAPSULE | GENERIC, OTC | |
| BUTALBITAL/ASPIRIN/CAFFEINE (BUTALBITAL-ASPIRIN-CAFFEINE) 50-325-40 ORAL TABLET | GENERIC, OTC | |

ANALGESIC, NON-SALICYLATE, BARBITURATE, & XANTHINE CMB

| | | |
|--|--------------|--|
| BUTALB/ACETAMINOPHEN/CAFFEINE (BUTALBITAL-ACETAMINOPHEN-CAFFE) 50-325-40 ORAL TABLET | GENERIC, OTC | |
|--|--------------|--|

ANALGESIC/ANTIPYRETICS, SALICYLATES

| | | |
|---|--------------|--|
| ASPIRIN 325 MG ORAL TABLET | GENERIC, OTC | |
| ASPIRIN 500 MG ORAL TABLET | GENERIC, OTC | |
| ASPIRIN 300 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| ASPIRIN (ASPIRIN EC) 325 MG ORAL TABLET DR | GENERIC, OTC | |
| ASPIRIN (ASPIRIN EC) 650 MG ORAL TABLET DR | GENERIC, OTC | |
| ASPIRIN (ASPIR-TRIN) 325 MG ORAL TABLET DR | GENERIC, OTC | |
| ASPIRIN (BAYER ADVANCED) 500 MG ORAL TABLET | GENERIC, OTC | |
| ASPIRIN (ECOTRIN) 325 MG ORAL TABLET DR | GENERIC, OTC | |
| ASPIRIN/CALCIUM CARBONATE/MAG (BUFFERED ASPIRIN) 325 MG ORAL TABLET | GENERIC, OTC | |
| ASPIRIN/CALCIUM CARBONATE/MAG (BUFFERIN) 325 MG ORAL TABLET | GENERIC, OTC | |
| ASPIRIN/CALCIUM CARBONATE/MAG (TRI-BUFFERED ASPIRIN) 325 MG ORAL TABLET | GENERIC, OTC | |
| SALSALATE 500 MG ORAL TABLET | GENERIC, OTC | |
| SALSALATE 750 MG ORAL TABLET | GENERIC, OTC | |

ANALGESIC/ANTIPYRETICS, NON-SALICYLATE

| | | |
|---|--------------|--|
| ACETAMINOPHEN (8 HOUR ACETAMINOPHEN) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (8 HOUR PAIN RELIEF) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (8HR ARTHRITIS PAIN) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (8HR ARTHRITIS PAIN RELIEF) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (8HR MUSCLE ACHES-PAIN) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN 500 MG ORAL CAPSULE | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|-------------------------|
| ACETAMINOPHEN 160 MG/5ML ORAL LIQUID | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN 325/10.15 ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN 160 MG/5ML ORAL SOLUTION | GENERIC, OTC | |
| ACETAMINOPHEN 325/10.15 ORAL SOLUTION | GENERIC, OTC | |
| ACETAMINOPHEN 650MG/20.3 ORAL SOLUTION | GENERIC, OTC | |
| ACETAMINOPHEN 160 MG ORAL TAB CHEW | GENERIC, OTC | |
| ACETAMINOPHEN 80 MG ORAL TAB RAPDIS | GENERIC, OTC | |
| ACETAMINOPHEN 325 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN 500 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN 120 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| ACETAMINOPHEN 650 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| ACETAMINOPHEN (ACETAMINOPHEN 8 HOUR) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (ACETAMINOPHEN ER) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (ACETAMINOPHEN EXTRA STRENGTH) 500 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (APHEN) 325 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (ARTHRITIS PAIN) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (ARTHRITIS PAIN RELIEF) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (ARTHRITIS PAIN RELIEVER) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (ATHENOL) 325 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (BETATEMP) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (CHILD FEVER REDUCER) 120 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| ACETAMINOPHEN (CHILD FEVER REDUCER-PAIN RELVR) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (CHILD PAIN REL-FEVER REDUCER) 120 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| ACETAMINOPHEN (CHILDREN'S ACETAMINOPHEN) 160 MG/5ML ORAL LIQUID | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (CHILDREN'S ACETAMINOPHEN) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (CHILDREN'S ACETAMINOPHEN) 80 MG ORAL TAB CHEW | GENERIC, OTC | |
| ACETAMINOPHEN (CHILDREN'S ACETAMINOPHEN) 160 MG ORAL TAB CHEW | GENERIC, OTC | |
| ACETAMINOPHEN (CHILDREN'S ACETAMINOPHEN) 80 MG ORAL TAB RAPDIS | GENERIC, OTC | |
| ACETAMINOPHEN (CHILDREN'S EASY-MELTS) 80 MG ORAL TAB RAPDIS | GENERIC, OTC | |
| ACETAMINOPHEN (CHILDREN'S FEVER REDUCER) 120 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| ACETAMINOPHEN (CHILDREN'S MAPAP) 80 MG ORAL TAB CHEW | GENERIC, OTC | |
| ACETAMINOPHEN (CHILDREN'S MAPAP) 160 MG ORAL TAB CHEW | GENERIC, OTC | |
| ACETAMINOPHEN (CHILDREN'S NON-ASPIRIN) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|-------------------------|
| ACETAMINOPHEN (CHILDREN'S PAIN RELIEF) 160 MG/5ML ORAL ELIXIR | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (CHILDREN'S PAIN RELIEF) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (CHILDREN'S PAIN RELIEF) 160 MG ORAL TAB CHEW | GENERIC, OTC | |
| ACETAMINOPHEN (CHILDREN'S PAIN RELIEVER) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (CHILDREN'S PAIN-FEVER) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (CHILDREN'S PAIN-FEVER) 160 MG ORAL TAB CHEW | GENERIC, OTC | |
| ACETAMINOPHEN (CHILDREN'S TYLENOL) 160 MG ORAL TAB CHEW | GENERIC, OTC | |
| ACETAMINOPHEN (ED-APAP) 160 MG/5ML ORAL LIQUID | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (FEVER REDUCER-PAIN RELIEVER) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (FEVERALL) 120 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| ACETAMINOPHEN (FEVERALL) 325 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| ACETAMINOPHEN (FEVERALL) 650 MG RECTAL SUPP.RECT | GENERIC, OTC | |
| ACETAMINOPHEN (INFANT FEVER-PAIN RELIEVER) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (INFANT PAIN RELIEF) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (INFANT PAIN-FEVER) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (INFANTS' ACETAMINOPHEN) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (INFANTS' FEVER-PAIN RELIEVER) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (INFANTS' PAIN RELIEF) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (INFANTS' PAIN RELIEVER) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (INFANT'S PAIN RELIEVER) 80MG/0.8ML ORAL DROPS SUSP | GENERIC, OTC | |
| ACETAMINOPHEN (INFANTS' PAIN-FEVER) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (LITTLE REMEDIES FEVER-PAIN) 160 MG/5ML ORAL LIQUID | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (MAPAP) 500 MG ORAL CAPSULE | GENERIC, OTC | |
| ACETAMINOPHEN (MAPAP ARTHRITIS PAIN) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (MASOPHEN) 325 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (MASOPHEN) 500 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (M-PAP) 160 MG/5ML ORAL LIQUID | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (NON-ASPIRIN) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (NON-ASPIRIN) 80 MG ORAL TAB CHEW | GENERIC, OTC | |
| ACETAMINOPHEN (NON-ASPIRIN) 325 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (NON-ASPIRIN EXTRA STRENGTH) 500 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (NON-ASPIRIN PAIN RELIEF) 500 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|-------------------------|
| ACETAMINOPHEN (NORTEMP) 160 MG/5ML ORAL SUSP | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (PAIN RELIEF) 160 MG/5ML ORAL LIQUID | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (PAIN RELIEF) 325 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (PAIN RELIEF) 500 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (PAIN RELIEF) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (PAIN RELIEF EXTRA STRENGTH) 500 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (PAIN RELIEVER) 325 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (PAIN RELIEVER) 500 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (PAIN RELIEVER) 650 MG ORAL TABLET ER | GENERIC, OTC | |
| ACETAMINOPHEN (PHARBETOL) 325 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (PHARBETOL) 500 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (SHAKE THAT ACHE) 500 MG ORAL TABLET | GENERIC, OTC | |
| ACETAMINOPHEN (SILAPAP) 160 MG/5ML ORAL LIQUID | GENERIC, OTC | AR (age 12 and younger) |
| ACETAMINOPHEN (TYLOPHEN) 500 MG ORAL CAPSULE | GENERIC, OTC | |

ANALGESICS, NARCOTIC AGONIST AND NSAID COMBINATION

| | | |
|--|--------------|---|
| HYDROCODONE/IBUPROFEN (HYDROCODONE-IBUPROFEN) 7.5-200 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
|--|--------------|---|

ANALGESICS,NARCOTICS

| | | |
|--|--------------|---|
| CODEINE SULF (CODEINE SULFATE) 15 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| CODEINE SULF (CODEINE SULFATE) 30 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| CODEINE SULF (CODEINE SULFATE) 60 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| FENTANYL 12 MCG/HR TRANSDERM. PATCH TD72 | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 1 patch per 3 days) |
| FENTANYL 25 MCG/HR TRANSDERM. PATCH TD72 | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 1 patch per 3 days) |
| FENTANYL 50MCG/HR TRANSDERM. PATCH TD72 | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 1 patch per 3 days) |
| FENTANYL 75MCG/HR TRANSDERM. PATCH TD72 | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 1 patch per 3 days) |
| FENTANYL 100 MCG/HR TRANSDERM. PATCH TD72 | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 1 patch per 3 days) |
| HYDROMORPHONE HCL 10 MG/ML INJECTION AMPUL | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| HYDROMORPHONE HCL 1 MG/ML ORAL LIQUID | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---|
| HYDROMORPHONE HCL 2 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| HYDROMORPHONE HCL 4 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| HYDROMORPHONE HCL 8 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| HYDROMORPHONE HCL 3 MG RECTAL SUPP.RECT | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| MEPERIDINE HCL 50 MG/5 ML ORAL SOLUTION | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| MEPERIDINE HCL 50 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| METHADONE HCL 10 MG/ML INJECTION VIAL | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days) |
| METHADONE HCL 5 MG ORAL TABLET | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days) |
| METHADONE HCL 10 MG ORAL TABLET | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days) |
| MORPHINE SULFATE 10 MG/5 ML ORAL SOLUTION | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| MORPHINE SULFATE 20 MG/5 ML ORAL SOLUTION | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| MORPHINE SULFATE 100 MG/5ML ORAL SOLUTION | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| MORPHINE SULFATE 15 MG ORAL TABLET | BRAND, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| MORPHINE SULFATE 15 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| MORPHINE SULFATE 30 MG ORAL TABLET | BRAND, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| MORPHINE SULFATE 30 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| MORPHINE SULFATE (MORPHINE SULFATE ER) 30 MG ORAL CPMP 24HR | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day) |
| MORPHINE SULFATE (MORPHINE SULFATE ER) 45 MG ORAL CPMP 24HR | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|--|
| MORPHINE SULFATE (MORPHINE SULFATE ER) 60 MG ORAL CPMP 24HR | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day) |
| MORPHINE SULFATE (MORPHINE SULFATE ER) 75 MG ORAL CPMP 24HR | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day) |
| MORPHINE SULFATE (MORPHINE SULFATE ER) 90 MG ORAL CPMP 24HR | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day) |
| MORPHINE SULFATE (MORPHINE SULFATE ER) 120 MG ORAL CPMP 24HR | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day) |
| MORPHINE SULFATE (MORPHINE SULFATE ER) 15 MG ORAL TABLET ER | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 3 tablets per day) |
| MORPHINE SULFATE (MORPHINE SULFATE ER) 30 MG ORAL TABLET ER | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 3 tablets per day) |
| MORPHINE SULFATE (MORPHINE SULFATE ER) 60 MG ORAL TABLET ER | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 3 tablets per day) |
| MORPHINE SULFATE (MORPHINE SULFATE ER) 100 MG ORAL TABLET ER | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 3 tablets per day) |
| MORPHINE SULFATE (MORPHINE SULFATE ER) 200 MG ORAL TABLET ER | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 3 tablets per day) |
| OXYCODONE HCL 5 MG ORAL CAPSULE | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL 20 MG/ML ORAL CONC | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | QL (90 mg morphine equivalents per day, 100 mL per year, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL 5 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL 10 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL 15 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL 30 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL (OXYCODONE HCL ER) 10 MG ORAL TAB ER 12H | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|--|
| OXYCODONE HCL (OXYCODONE HCL ER) 15 MG ORAL TAB ER 12H | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day) |
| OXYCODONE HCL (OXYCODONE HCL ER) 30 MG ORAL TAB ER 12H | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day) |
| OXYCODONE HCL (OXYCODONE HCL ER) 60 MG ORAL TAB ER 12H | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day) |
| OXYCODONE HCL (OXYCONTIN) 10 MG ORAL TAB ER 12H | BRAND, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day) |
| OXYCODONE HCL (OXYCONTIN) 15 MG ORAL TAB ER 12H | BRAND, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day) |
| OXYCODONE HCL (OXYCONTIN) 30 MG ORAL TAB ER 12H | BRAND, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day) |
| OXYCODONE HCL (OXYCONTIN) 60 MG ORAL TAB ER 12H | BRAND, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day) |
| OXYMORPHONE HCL 5 MG ORAL TABLET | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYMORPHONE HCL 10 MG ORAL TABLET | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| TRAMADOL HCL 50 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 8 tablets per day, 7 days per 60 days, 30 days per 180 days) |

ANTIMIGRAINE PREPARATIONS

| | | |
|---|--------------|--|
| EPTINEZUMAB-JJMR (VYEPTI) 100 MG/ML INTRAVEN. VIAL | BRAND, OTC | PA (Rx051); SPEC |
| erenumab-aooe (AIMOVIG AUTOINJECTOR) 70 MG/ML SUBCUTANE. AUTO INJCT | BRAND, OTC | PA (Rx051) |
| erenumab-aooe (AIMOVIG AUTOINJECTOR) 140 MG/ML SUBCUTANE. AUTO INJCT | BRAND, OTC | PA (Rx051) |
| FREMANEZUMAB-VFRM (AJOVY AUTOINJECTOR) 225 MG/1.5 SUBCUTANE. AUTO INJCT | BRAND, OTC | PA (Rx051) |
| FREMANEZUMAB-VFRM (AJOVY SYRINGE) 225 MG/1.5 SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx051) |
| GALCANEZUMAB-GNLM (EMGALITY PEN) 120 MG/ML SUBCUTANE. PEN INJCTR | BRAND, OTC | PA (Rx051) |
| GALCANEZUMAB-GNLM (EMGALITY SYRINGE) 120 MG/ML SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx051) |
| LASMIDITAN SUCCINATE (REYVOW) 50 MG ORAL TABLET | BRAND, OTC | PA (Rx023); QL (4 tablets per 30 days) |
| LASMIDITAN SUCCINATE (REYVOW) 100 MG ORAL TABLET | BRAND, OTC | PA (Rx023); QL (4 tablets per 30 days) |
| NARATRIPTAN HCL 1 MG ORAL TABLET | GENERIC, OTC | QL (9 tablets per 30 days) |
| NARATRIPTAN HCL 2.5 MG ORAL TABLET | GENERIC, OTC | QL (9 tablets per 30 days) |
| RIMEGEPANT SULFATE (NURTEC ODT) 75 MG ORAL TAB RAPDIS | BRAND, OTC | PA (Rx051) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---|
| RIZATRIPTAN BENZOATE (RIZATRIPTAN) 5 MG ORAL TAB RAPDIS | GENERIC, OTC | QL (9 tablets per 30 days) |
| RIZATRIPTAN BENZOATE (RIZATRIPTAN) 10 MG ORAL TAB RAPDIS | GENERIC, OTC | QL (9 tablets per 30 days) |
| RIZATRIPTAN BENZOATE (RIZATRIPTAN) 5 MG ORAL TABLET | GENERIC, OTC | QL (9 tablets per 30 days) |
| RIZATRIPTAN BENZOATE (RIZATRIPTAN) 10 MG ORAL TABLET | GENERIC, OTC | QL (9 tablets per 30 days) |
| SUMATRIPTAN 5 MG NASAL SPRAY | GENERIC, OTC | PA (Rx023); QL (1 package [6 mL] per 30 days) |
| SUMATRIPTAN 20 MG NASAL SPRAY | GENERIC, OTC | PA (Rx023); QL (1 package [6 mL] per 30 days) |
| SUMATRIPTAN SUCCINATE 25 MG ORAL TABLET | GENERIC, OTC | QL (9 tablets per 30 days) |
| SUMATRIPTAN SUCCINATE 50 MG ORAL TABLET | GENERIC, OTC | QL (9 tablets per 30 days) |
| SUMATRIPTAN SUCCINATE 100 MG ORAL TABLET | GENERIC, OTC | QL (9 tablets per 30 days) |
| SUMATRIPTAN SUCCINATE 4 MG/0.5ML SUBCUTANE. CARTRIDGE | GENERIC, OTC | PA (Rx023); QL (1 package [1 mL] per 30 days) |
| SUMATRIPTAN SUCCINATE 6 MG/0.5ML SUBCUTANE. CARTRIDGE | GENERIC, OTC | PA (Rx023); QL (1 package [1 mL] per 30 days) |
| SUMATRIPTAN SUCCINATE 4 MG/0.5ML SUBCUTANE. PEN INJCTR | GENERIC, OTC | PA (Rx023); QL (1 package [1 mL] per 30 days) |
| SUMATRIPTAN SUCCINATE 6 MG/0.5ML SUBCUTANE. PEN INJCTR | GENERIC, OTC | PA (Rx023); QL (1 package [1 mL] per 30 days) |
| SUMATRIPTAN SUCCINATE 6 MG/0.5ML SUBCUTANE. SYRINGE | GENERIC, OTC | PA (Rx023); QL (1 package [1 mL] per 30 days) |
| SUMATRIPTAN SUCCINATE 6 MG/0.5ML SUBCUTANE. VIAL | GENERIC, OTC | PA (Rx023); QL (1 vial [2.5 mL] per 30 days) |
| UBROGEPANT (UBRELVY) 50 MG ORAL TABLET | BRAND, OTC | PA (Rx051) |
| UBROGEPANT (UBRELVY) 100 MG ORAL TABLET | BRAND, OTC | PA (Rx051) |
| ZOLMITRIPTAN 2.5 MG ORAL TABLET | GENERIC, OTC | QL (9 tablets per 30 days) |
| ZOLMITRIPTAN 5 MG ORAL TABLET | GENERIC, OTC | QL (9 tablets per 30 days) |
| ZOLMITRIPTAN (ZOLMITRIPTAN ODT) 2.5 MG ORAL TAB RAPDIS | GENERIC, OTC | QL (9 tablets per 30 days) |
| ZOLMITRIPTAN (ZOLMITRIPTAN ODT) 5 MG ORAL TAB RAPDIS | GENERIC, OTC | QL (9 tablets per 30 days) |

CALCITONIN GENE-RELATED PEPTIDE (CGRP) INHIBITORS

| | | |
|---|------------|------------|
| GALCANEZUMAB-GNLM (EMGALITY SYRINGE) 300MG/3ML SUBCUTANE. SYRINGE | BRAND, OTC | PA (Rx051) |
|---|------------|------------|

NARC.& NON-SAL.ANALGESIC,BARBITURATE &XANTHINE CMB

| | | |
|--|--------------|---|
| CODEINE/BUTALBIT/ACETAMIN/CAFF (BUTALB-ACETAMINOPH-CAFF-CODEIN) 50-325-30 ORAL CAPSULE | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days) |
|--|--------------|---|

NARCOTIC & SALICYLATE ANALGESICS, BARB.& XANTHINE

| | | |
|---|--------------|---|
| CODEINE/BUTALBITAL/ASA/CAFFEIN (ASA-BUTALB-CAFFEINE-CODEINE) 30-50-325 ORAL CAPSULE | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days) |
| CODEINE/BUTALBITAL/ASA/CAFFEIN (ASCOMP WITH CODEINE) 30-50-325 ORAL CAPSULE | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days) |
| CODEINE/BUTALBITAL/ASA/CAFFEIN (BUTALBITAL COMPOUND-CODEINE) 30-50-325 ORAL CAPSULE | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days) |

NARCOTIC ANALGESIC & NON-SALICYLATE ANALGESIC COMB

| | | |
|---|--------------|--|
| ACETAMINOPHEN WITH CODEINE (ACETAMINOPHEN-CODEINE) 120-12MG/5 ORAL SOLUTION | GENERIC, OTC | QL (90 mg morphine equivalents per day, 300 mL per year, 7 days per 60 days, 30 days per 180 days) |
| ACETAMINOPHEN WITH CODEINE (ACETAMINOPHEN-CODEINE) 300MG-15MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|--|
| ACETAMINOPHEN WITH CODEINE (ACETAMINOPHEN-CODEINE) 300MG-30MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| ACETAMINOPHEN WITH CODEINE (ACETAMINOPHEN-CODEINE) 300MG-60MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| HYDROCODONE BIT/ACETAMINOPHEN (HYDROCODONE-ACETAMINOPHEN) 7.5-325/15 ORAL SOLUTION | GENERIC, OTC | QL (90 mg morphine equivalents per day, 480 mL per year, 7 days per 60 days, 30 days per 180 days) |
| HYDROCODONE BIT/ACETAMINOPHEN (HYDROCODONE-ACETAMINOPHEN) 5 MG-325MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| HYDROCODONE BIT/ACETAMINOPHEN (HYDROCODONE-ACETAMINOPHEN) 7.5-325 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| HYDROCODONE BIT/ACETAMINOPHEN (HYDROCODONE-ACETAMINOPHEN) 10MG-325MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| HYDROCODONE BIT/ACETAMINOPHEN (HYDROCODONE-ACETAMINOPHEN) 10MG-300MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| HYDROCODONE BIT/ACETAMINOPHEN (VICODIN HP) 10MG-300MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL/ACETAMINOPHEN (ENDOCET) 2.5-325 MG ORAL TABLET | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL/ACETAMINOPHEN (ENDOCET) 5 MG-325MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL/ACETAMINOPHEN (ENDOCET) 7.5-325 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL/ACETAMINOPHEN (ENDOCET) 10MG-325MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL/ACETAMINOPHEN (OXYCODONE-ACETAMINOPHEN) 2.5-325 MG ORAL TABLET | GENERIC, OTC | PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL/ACETAMINOPHEN (OXYCODONE-ACETAMINOPHEN) 5 MG-325MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL/ACETAMINOPHEN (OXYCODONE-ACETAMINOPHEN) 7.5-325 MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |
| OXYCODONE HCL/ACETAMINOPHEN (OXYCODONE-ACETAMINOPHEN) 10MG-325MG ORAL TABLET | GENERIC, OTC | QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days) |

NARCOTIC WITHDRAWAL THERAPY AGENTS

| | | |
|--|--------------|-------------------------|
| BUPRENORPHINE HCL 2 MG SUBLINGUAL TAB SUBL | GENERIC, OTC | QL (12 tablets per day) |
| BUPRENORPHINE HCL 8 MG SUBLINGUAL TAB SUBL | GENERIC, OTC | QL (3 tablets per day) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|-------------------------|
| BUPRENORPHINE HCL/NALOXONE HCL (BUPRENORPHINE-NALOXONE) 2 MG-0.5MG SUBLINGUAL FILM | GENERIC, OTC | QL (12 films per day) |
| BUPRENORPHINE HCL/NALOXONE HCL (BUPRENORPHINE-NALOXONE) 4MG-1MG SUBLINGUAL FILM | GENERIC, OTC | QL (6 films per day) |
| BUPRENORPHINE HCL/NALOXONE HCL (BUPRENORPHINE-NALOXONE) 8 MG-2 MG SUBLINGUAL FILM | GENERIC, OTC | QL (3 films per day) |
| BUPRENORPHINE HCL/NALOXONE HCL (BUPRENORPHINE-NALOXONE) 12 MG-3 MG SUBLINGUAL FILM | GENERIC, OTC | QL (2 films per day) |
| BUPRENORPHINE HCL/NALOXONE HCL (BUPRENORPHINE-NALOXONE) 2 MG-0.5MG SUBLINGUAL TAB SUBL | GENERIC, OTC | QL (12 tablets per day) |
| BUPRENORPHINE HCL/NALOXONE HCL (BUPRENORPHINE-NALOXONE) 8 MG-2 MG SUBLINGUAL TAB SUBL | GENERIC, OTC | QL (3 tablets per day) |

PARKINSONS DISEASE

ANTIPARKINSONISM DRUGS,ANTICHOLINERGIC

| | | |
|---|--------------|--|
| BENZTROPINE MESYLATE 0.5 MG ORAL TABLET | GENERIC, OTC | |
| BENZTROPINE MESYLATE 1 MG ORAL TABLET | GENERIC, OTC | |
| BENZTROPINE MESYLATE 2 MG ORAL TABLET | GENERIC, OTC | |
| TRIHEXYPHENIDYL HCL 2 MG/5 ML ORAL SOLUTION | GENERIC, OTC | |
| TRIHEXYPHENIDYL HCL 2 MG ORAL TABLET | GENERIC, OTC | |
| TRIHEXYPHENIDYL HCL 5 MG ORAL TABLET | GENERIC, OTC | |

ANTIPARKINSONISM DRUGS,OTHER

| | | |
|--|--------------|--|
| AMANTADINE HCL (AMANTADINE) 100 MG ORAL CAPSULE | GENERIC, OTC | |
| AMANTADINE HCL (AMANTADINE) 50 MG/5 ML ORAL SOLUTION | GENERIC, OTC | |
| AMANTADINE HCL (AMANTADINE) 100 MG ORAL TABLET | GENERIC, OTC | |
| BROMOCRIPTINE MESYLATE 5 MG ORAL CAPSULE | GENERIC, OTC | |
| BROMOCRIPTINE MESYLATE 2.5 MG ORAL TABLET | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA (CARBIDOPA-LEVODOPA) 10MG-100MG ORAL TABLET | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA (CARBIDOPA-LEVODOPA) 25MG-100MG ORAL TABLET | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA (CARBIDOPA-LEVODOPA) 25MG-250MG ORAL TABLET | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA (CARBIDOPA-LEVODOPA ER) 25MG-100MG ORAL TABLET ER | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA (CARBIDOPA-LEVODOPA ER) 50MG-200MG ORAL TABLET ER | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA/ENTACAPONE (CARBIDOPA-LEVODOPA-ENTACAPONE) 12.5-50 MG ORAL TABLET | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA/ENTACAPONE (CARBIDOPA-LEVODOPA-ENTACAPONE) 18.75-75MG ORAL TABLET | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA/ENTACAPONE (CARBIDOPA-LEVODOPA-ENTACAPONE) 25-100-200 ORAL TABLET | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA/ENTACAPONE (CARBIDOPA-LEVODOPA-ENTACAPONE) 31.25-125 ORAL TABLET | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA/ENTACAPONE (CARBIDOPA-LEVODOPA-ENTACAPONE) 37.5-150MG ORAL TABLET | GENERIC, OTC | |
| CARBIDOPA/LEVODOPA/ENTACAPONE (CARBIDOPA-LEVODOPA-ENTACAPONE) 50-200-200 ORAL TABLET | GENERIC, OTC | |
| ENTACAPONE 200 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| PRAMIPEXOLE DI-HCL (PRAMIPEXOLE DIHYDROCHLORIDE) 0.125 MG ORAL TABLET | GENERIC, OTC | |
| PRAMIPEXOLE DI-HCL (PRAMIPEXOLE DIHYDROCHLORIDE) 0.25 MG ORAL TABLET | GENERIC, OTC | |
| PRAMIPEXOLE DI-HCL (PRAMIPEXOLE DIHYDROCHLORIDE) 0.5 MG ORAL TABLET | GENERIC, OTC | |
| PRAMIPEXOLE DI-HCL (PRAMIPEXOLE DIHYDROCHLORIDE) 0.75 MG ORAL TABLET | GENERIC, OTC | |
| PRAMIPEXOLE DI-HCL (PRAMIPEXOLE DIHYDROCHLORIDE) 1 MG ORAL TABLET | GENERIC, OTC | |
| PRAMIPEXOLE DI-HCL (PRAMIPEXOLE DIHYDROCHLORIDE) 1.5 MG ORAL TABLET | GENERIC, OTC | |
| ROPINIROLE HCL (ROPINIROLE ER) 2 MG ORAL TAB ER 24H | GENERIC, OTC | PA (Rx024) |
| ROPINIROLE HCL (ROPINIROLE ER) 4 MG ORAL TAB ER 24H | GENERIC, OTC | PA (Rx024) |
| ROPINIROLE HCL (ROPINIROLE ER) 6 MG ORAL TAB ER 24H | GENERIC, OTC | PA (Rx024) |
| ROPINIROLE HCL (ROPINIROLE ER) 8 MG ORAL TAB ER 24H | GENERIC, OTC | PA (Rx024) |
| ROPINIROLE HCL (ROPINIROLE ER) 12 MG ORAL TAB ER 24H | GENERIC, OTC | PA (Rx024) |
| ROPINIROLE HCL 0.25 MG ORAL TABLET | GENERIC, OTC | |
| ROPINIROLE HCL 0.5 MG ORAL TABLET | GENERIC, OTC | |
| ROPINIROLE HCL 1 MG ORAL TABLET | GENERIC, OTC | |
| ROPINIROLE HCL 2 MG ORAL TABLET | GENERIC, OTC | |
| ROPINIROLE HCL 3 MG ORAL TABLET | GENERIC, OTC | |
| ROPINIROLE HCL 4 MG ORAL TABLET | GENERIC, OTC | |
| ROPINIROLE HCL 5 MG ORAL TABLET | GENERIC, OTC | |
| SELEGILINE HCL 5 MG ORAL CAPSULE | GENERIC, OTC | |
| SELEGILINE HCL 5 MG ORAL TABLET | GENERIC, OTC | |

SEIZURE DISORDER

ANTICONVULSANT - BENZODIAZEPINE TYPE

| | | |
|-------------------------------|--------------|------------|
| CLONAZEPAM 0.5 MG ORAL TABLET | GENERIC, OTC | PA (Rx013) |
| CLONAZEPAM 1 MG ORAL TABLET | GENERIC, OTC | PA (Rx013) |
| CLONAZEPAM 2 MG ORAL TABLET | GENERIC, OTC | PA (Rx013) |

ANTICONVULSANTS

| | | |
|---|--------------|--|
| CARBAMAZEPINE 100 MG/5ML ORAL SUSP | GENERIC, OTC | |
| CARBAMAZEPINE 100 MG ORAL TAB CHEW | GENERIC, OTC | |
| CARBAMAZEPINE 200 MG ORAL TABLET | GENERIC, OTC | |
| CARBAMAZEPINE (CARBAMAZEPINE ER) 100 MG ORAL CPMP 12HR | GENERIC, OTC | |
| CARBAMAZEPINE (CARBAMAZEPINE ER) 200 MG ORAL CPMP 12HR | GENERIC, OTC | |
| CARBAMAZEPINE (CARBAMAZEPINE ER) 300 MG ORAL CPMP 12HR | GENERIC, OTC | |
| CARBAMAZEPINE (CARBAMAZEPINE ER) 100 MG ORAL TAB ER 12H | GENERIC, OTC | |
| CARBAMAZEPINE (CARBAMAZEPINE ER) 200 MG ORAL TAB ER 12H | GENERIC, OTC | |
| CARBAMAZEPINE (CARBAMAZEPINE ER) 400 MG ORAL TAB ER 12H | GENERIC, OTC | |
| CARBAMAZEPINE (EPITOL) 200 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|--|
| ETHOSUXIMIDE 250 MG ORAL CAPSULE | GENERIC, OTC | |
| ETHOSUXIMIDE 250 MG/5ML ORAL SOLUTION | GENERIC, OTC | |
| GABAPENTIN 100 MG ORAL CAPSULE | GENERIC, OTC | QL (12 capsules per day) |
| GABAPENTIN 300 MG ORAL CAPSULE | GENERIC, OTC | QL (12 capsules per day) |
| GABAPENTIN 400 MG ORAL CAPSULE | GENERIC, OTC | QL (12 capsules per day) |
| GABAPENTIN 400 MG ORAL CAPSULE | GENERIC, OTC | QL (9 capsules per day) |
| GABAPENTIN 250 MG/5ML ORAL SOLUTION | GENERIC, OTC | AR (age 12 and younger); QL (450 mL per 30 days) |
| GABAPENTIN 600 MG ORAL TABLET | GENERIC, OTC | QL (6 tablets per day) |
| GABAPENTIN 800 MG ORAL TABLET | GENERIC, OTC | QL (4.5 tablets per day) |
| LACOSAMIDE (VIMPAT) 50 MG ORAL TABLET | BRAND, OTC | PA (Rx049) |
| LACOSAMIDE (VIMPAT) 100 MG ORAL TABLET | BRAND, OTC | PA (Rx049) |
| LACOSAMIDE (VIMPAT) 150 MG ORAL TABLET | BRAND, OTC | PA (Rx049) |
| LACOSAMIDE (VIMPAT) 200 MG ORAL TABLET | BRAND, OTC | PA (Rx049) |
| LEVETIRACETAM 100 MG/ML ORAL SOLUTION | GENERIC, OTC | |
| LEVETIRACETAM 500 MG/5ML ORAL SOLUTION | GENERIC, OTC | |
| LEVETIRACETAM 250 MG ORAL TABLET | GENERIC, OTC | |
| LEVETIRACETAM 500 MG ORAL TABLET | GENERIC, OTC | |
| LEVETIRACETAM 750 MG ORAL TABLET | GENERIC, OTC | |
| LEVETIRACETAM 1000 MG ORAL TABLET | GENERIC, OTC | |
| LEVETIRACETAM (LEVETIRACETAM ER) 500 MG ORAL TAB ER 24H | GENERIC, OTC | |
| LEVETIRACETAM (LEVETIRACETAM ER) 750 MG ORAL TAB ER 24H | GENERIC, OTC | |
| OXCARBAZEPINE 300 MG/5ML ORAL SUSP | GENERIC, OTC | |
| OXCARBAZEPINE 150 MG ORAL TABLET | GENERIC, OTC | |
| OXCARBAZEPINE 300 MG ORAL TABLET | GENERIC, OTC | |
| OXCARBAZEPINE 600 MG ORAL TABLET | GENERIC, OTC | |
| PHENYTOIN 100 MG/4ML ORAL SUSP | GENERIC, OTC | |
| PHENYTOIN 125 MG/5ML ORAL SUSP | GENERIC, OTC | |
| PHENYTOIN 50 MG ORAL TAB CHEW | GENERIC, OTC | |
| PHENYTOIN SODIUM EXTENDED (DILANTIN) 30 MG ORAL CAPSULE | BRAND, OTC | |
| PHENYTOIN SODIUM EXTENDED 100 MG ORAL CAPSULE | GENERIC, OTC | |
| PHENYTOIN SODIUM EXTENDED 200 MG ORAL CAPSULE | GENERIC, OTC | |
| PHENYTOIN SODIUM EXTENDED 300 MG ORAL CAPSULE | GENERIC, OTC | |
| PREGABALIN 25 MG ORAL CAPSULE | GENERIC, OTC | QL (3 capsules per day) |
| PREGABALIN 50 MG ORAL CAPSULE | GENERIC, OTC | QL (3 capsules per day) |
| PREGABALIN 75 MG ORAL CAPSULE | GENERIC, OTC | QL (3 capsules per day) |
| PREGABALIN 100 MG ORAL CAPSULE | GENERIC, OTC | QL (3 capsules per day) |
| PREGABALIN 150 MG ORAL CAPSULE | GENERIC, OTC | QL (3 capsules per day) |
| PREGABALIN 200 MG ORAL CAPSULE | GENERIC, OTC | QL (3 capsules per day) |
| PREGABALIN 225 MG ORAL CAPSULE | GENERIC, OTC | QL (2 capsules per day) |
| PREGABALIN 300 MG ORAL CAPSULE | GENERIC, OTC | QL (2 capsules per day) |
| PRIMIDONE 50 MG ORAL TABLET | GENERIC, OTC | |
| PRIMIDONE 250 MG ORAL TABLET | GENERIC, OTC | |
| TIAGABINE HCL 2 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---------------------------------|--------------|---------------------|
| TIAGABINE HCL 4 MG ORAL TABLET | GENERIC, OTC | |
| TIAGABINE HCL 12 MG ORAL TABLET | GENERIC, OTC | |
| TIAGABINE HCL 16 MG ORAL TABLET | GENERIC, OTC | |
| TOPIRAMATE 25 MG ORAL TABLET | GENERIC, OTC | |
| TOPIRAMATE 50 MG ORAL TABLET | GENERIC, OTC | |
| TOPIRAMATE 100 MG ORAL TABLET | GENERIC, OTC | |
| TOPIRAMATE 200 MG ORAL TABLET | GENERIC, OTC | |
| ZONISAMIDE 25 MG ORAL CAPSULE | GENERIC, OTC | |
| ZONISAMIDE 50 MG ORAL CAPSULE | GENERIC, OTC | |
| ZONISAMIDE 100 MG ORAL CAPSULE | GENERIC, OTC | |

SKELETAL MUSCLE DISORDER

SKELETAL MUSCLE RELAXANTS

| | | |
|--|--------------|-------------------------|
| BACLOFEN 10 MG ORAL TABLET | GENERIC, OTC | QL (4 tablets per day) |
| BACLOFEN 20 MG ORAL TABLET | GENERIC, OTC | QL (4 tablets per day) |
| CHLORZOXAZONE 500 MG ORAL TABLET | GENERIC, OTC | PA (Rx021) |
| CYCLOBENZAPRINE HCL 5 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| CYCLOBENZAPRINE HCL 10 MG ORAL TABLET | GENERIC, OTC | QL (3 tablets per day) |
| METHOCARBAMOL 500 MG ORAL TABLET | GENERIC, OTC | QL (16 tablets per day) |
| METHOCARBAMOL 750 MG ORAL TABLET | GENERIC, OTC | QL (10 tablets per day) |
| ORPHENADRINE CITRATE (ORPHENADRINE CITRATE ER) 100 MG ORAL TABLET ER | GENERIC, OTC | PA (Rx021) |
| TIZANIDINE HCL 2 MG ORAL TABLET | GENERIC, OTC | QL (18 tablets per day) |
| TIZANIDINE HCL 4 MG ORAL TABLET | GENERIC, OTC | QL (9 tablets per day) |

SMOKING CESSATION

SMOKING DETERRENT AGENTS (GANGLIONIC STIM, OTHERS)

| | | |
|---|--------------|---|
| NICOTINE (NICOTINE PATCH) 21-14-7MG TRANSDERM. PATCH DYSQ | BRAND, OTC | QL (30 patches per 30 days, 180 patches per year) |
| NICOTINE (NICOTINE PATCH) 7MG/24HR TRANSDERM. PATCH TD24 | GENERIC, OTC | QL (30 patches per 30 days, 180 patches per year) |
| NICOTINE (NICOTINE PATCH) 14MG/24HR TRANSDERM. PATCH TD24 | GENERIC, OTC | QL (30 patches per 30 days, 180 patches per year) |
| NICOTINE (NICOTINE PATCH) 21 MG/24HR TRANSDERM. PATCH TD24 | GENERIC, OTC | QL (30 patches per 30 days, 180 patches per year) |
| NICOTINE (NICOTROL) 10 MG INHALATION CARTRIDGE | BRAND, OTC | PA (Rx044) |
| NICOTINE (NICOTROL NS) 10 MG/ML NASAL SPRAY | BRAND, OTC | PA (Rx044) |
| NICOTINE POLACRILEX (NICOTINE GUM) 2 MG BUCCAL GUM | GENERIC, OTC | QL (120 pieces per 5 days, 4320 pieces per year) |
| NICOTINE POLACRILEX (NICOTINE GUM) 4 MG BUCCAL GUM | GENERIC, OTC | QL (120 pieces per 5 days, 4320 pieces per year) |
| NICOTINE POLACRILEX (NICOTINE LOZENGE) 2 MG BUCCAL LOZENGE | GENERIC, OTC | QL (120 pieces per 5 days, 3600 pieces per year) |
| NICOTINE POLACRILEX (NICOTINE LOZENGE) 4 MG BUCCAL LOZENGE | GENERIC, OTC | QL (120 pieces per 5 days, 3600 pieces per year) |
| NICOTINE POLACRILEX (NICOTINE LOZENGE) 2 MG BUCCAL LOZNG MINI | GENERIC, OTC | QL (120 pieces per 5 days, 3600 pieces per year) |
| NICOTINE POLACRILEX (NICOTINE LOZENGE) 4 MG BUCCAL LOZNG MINI | GENERIC, OTC | QL (120 pieces per 5 days, 3600 pieces per year) |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|--|
| NICOTINE POLACRILEX (QUIT 2) 2 MG BUCCAL GUM | GENERIC, OTC | QL (120 pieces per 5 days, 4320 pieces per year) |
| NICOTINE POLACRILEX (QUIT 2) 2 MG BUCCAL LOZENGE | GENERIC, OTC | QL (120 pieces per 5 days, 3600 pieces per year) |
| NICOTINE POLACRILEX (QUIT 4) 4 MG BUCCAL GUM | GENERIC, OTC | QL (120 pieces per 5 days, 4320 pieces per year) |
| NICOTINE POLACRILEX (QUIT 4) 4 MG BUCCAL LOZENGE | GENERIC, OTC | QL (120 pieces per 5 days, 3600 pieces per year) |
| NICOTINE POLACRILEX (STOP SMOKING AID) 2 MG BUCCAL LOZENGE | GENERIC, OTC | QL (120 pieces per 5 days, 3600 pieces per year) |
| NICOTINE POLACRILEX (STOP SMOKING AID) 4 MG BUCCAL LOZENGE | GENERIC, OTC | QL (120 pieces per 5 days, 3600 pieces per year) |

SMOKING DETERRENT-NICOTINIC RECEPT.PARTIAL AGONIST

| | | |
|---|--------------|--|
| VARENICLINE TARTRATE 0.5 MG ORAL TABLET | GENERIC, OTC | QL (11 tablets per 7 days, 22 tablets per year) |
| VARENICLINE TARTRATE 1 MG ORAL TABLET | GENERIC, OTC | QL (2 tablets per day, 168 tablets per 180 days) |

SMOKING DETERRENTS, OTHER

| | | |
|---|--------------|---|
| BUPROPION HCL (BUPROPION HCL SR) 150 MG ORAL TAB ER 12H | GENERIC, OTC | QL (60 tablets per 30 days, 180 tablets per year) |
|---|--------------|---|

UPPER GASTROINTESTINAL DISORDERS - DIGESTIVE

ANTIFLATULENTS

| | | |
|--|--------------|--|
| SIMETHICONE (GAS RELIEF) 80 MG ORAL TAB CHEW | GENERIC, OTC | |
| SIMETHICONE (MI-ACID) 80 MG ORAL TAB CHEW | GENERIC, OTC | |
| SIMETHICONE 80 MG ORAL TAB CHEW | GENERIC, OTC | |

PANCREATIC ENZYMES

| | | |
|--|------------|------------|
| AMYLASE/LIPASE/PROTEASE (CREON) 6K-19K-30K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (CREON) 12K-38K-60 ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (CREON) 24-76-120K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (CREON) 36K-114K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (CREON) 3-9.5-15K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (PANCREAZE) 2.6K-8.8K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (PANCREAZE) 4.2K-14.2K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (PANCREAZE) 10.5-35.5K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (PANCREAZE) 16.8-56.8K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (PANCREAZE) 21 K-54.7K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (ZENPEP) 5K-17K-24K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (ZENPEP) 15-47-63K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (ZENPEP) 20-63-84K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|-------------|---------------------|
| AMYLASE/LIPASE/PROTEASE (ZENPEP) 25-79-105K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (ZENPEP) 40-126-168 ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (ZENPEP) 10-32-42K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |
| AMYLASE/LIPASE/PROTEASE (ZENPEP) 3-10-14K ORAL CAPSULE DR | BRAND, OTC | PA (Rx031) |

UPPER GASTROINTESTINAL DISORDERS - SPASTIC DISEASE

ANTICHOLINERGICS/ANTISPASMODICS

| | | |
|--|--------------|--|
| DICYCLOMINE HCL 10 MG ORAL CAPSULE | GENERIC, OTC | |
| DICYCLOMINE HCL 10 MG/5 ML ORAL SOLUTION | GENERIC, OTC | |
| DICYCLOMINE HCL 20 MG ORAL TABLET | GENERIC, OTC | |

BELLADONNA ALKALOIDS

| | | |
|---|--------------|--|
| HYOSCYAMINE SULFATE (ED-SPAZ) 0.125 MG ORAL TAB RAPDIS | GENERIC, OTC | |
| HYOSCYAMINE SULFATE 0.125MG/ML ORAL DROPS | GENERIC, OTC | |
| HYOSCYAMINE SULFATE 125MCG/5ML ORAL ELIXIR | GENERIC, OTC | |
| HYOSCYAMINE SULFATE 0.125 MG ORAL TAB RAPDIS | GENERIC, OTC | |
| HYOSCYAMINE SULFATE 0.125 MG ORAL TABLET | GENERIC, OTC | |
| HYOSCYAMINE SULFATE 0.125 MG SUBLINGUAL TAB SUBL | GENERIC, OTC | |
| HYOSCYAMINE SULFATE (HYOSCYAMINE SULFATE ER) 0.375 MG ORAL TAB ER 12H | GENERIC, OTC | |
| HYOSCYAMINE SULFATE (HYOSCYAMINE SULFATE SR) 0.375 MG ORAL TAB ER 12H | GENERIC, OTC | |
| HYOSCYAMINE SULFATE (HYOSYNE) 0.125MG/ML ORAL DROPS | GENERIC, OTC | |
| HYOSCYAMINE SULFATE (HYOSYNE) 125MCG/5ML ORAL ELIXIR | GENERIC, OTC | |
| HYOSCYAMINE SULFATE (OSCIMIN) 0.125 MG ORAL TABLET | GENERIC, OTC | |
| HYOSCYAMINE SULFATE (OSCIMIN SL) 0.125 MG SUBLINGUAL TAB SUBL | GENERIC, OTC | |
| HYOSCYAMINE SULFATE (OSCIMIN SR) 0.375 MG ORAL TAB ER 12H | GENERIC, OTC | |

UPPER GASTROINTESTINAL DISORDERS - ULCER DISEASE

ANTACIDS

| | | |
|---|--------------|--|
| CALCIUM CARBONATE (ANTACID) 200(500)MG ORAL TAB CHEW | GENERIC, OTC | |
| CALCIUM CARBONATE (ANTACID) 215(500)MG ORAL TAB CHEW | GENERIC, OTC | |
| CALCIUM CARBONATE (ANTACID CALCIUM) 215(500)MG ORAL TAB CHEW | GENERIC, OTC | |
| CALCIUM CARBONATE (CALCIUM ANTACID) 200(500)MG ORAL TAB CHEW | GENERIC, OTC | |
| CALCIUM CARBONATE 200(500)MG ORAL TAB CHEW | GENERIC, OTC | |
| CALCIUM CARBONATE (CAL-GEST) 200(500)MG ORAL TAB CHEW | GENERIC, OTC | |
| CALCIUM CARBONATE/MAG HYDROX (ANTACID) 550-110 MG ORAL TAB CHEW | GENERIC, OTC | |
| MAG CARB/AL HYDROX/ALGINIC AC (ACID GONE ANTACID) 358-95/15 ORAL SUSP | GENERIC, OTC | |
| MAG CARB/AL HYDROX/ALGINIC AC (FOAMING ANTACID) 358-95/15 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (ADVANCED ANTACID-ANTIGAS) 200-200-20 ORAL SUSP | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| MAG HYDROX/AL HYDROX/SIMETH (ALUM-MAG HYDROXIDE-SIMETHICONE) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (ANTACID) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (ANTACID M) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (ANTACID PLUS ANTI-GAS) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (ANTACID PLUS GAS RELIEF) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (ANTACID-ANTIGAS) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (COMFORT GEL) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (GERI-LANTA) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (GERI-MOX) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (MAALOX ADVANCED) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAG HYDROX/AL HYDROX/SIMETH (MAG-AL PLUS) 200-200-20 ORAL SUSP | GENERIC, OTC | |
| MAGNESIUM CARBONATE/AL HYDROX (ACID GONE) 105-160MG ORAL TAB CHEW | GENERIC, OTC | |
| MAGNESIUM CARBONATE/AL HYDROX (ANTACID EXTRA STRENGTH) 105-160MG ORAL TAB CHEW | GENERIC, OTC | |
| MAGNESIUM CARBONATE/AL HYDROX (HEARTBURN ANTACID) 105-160MG ORAL TAB CHEW | GENERIC, OTC | |
| MAGNESIUM CARBONATE/AL HYDROX (HEARTBURN RELIEF) 105-160MG ORAL TAB CHEW | GENERIC, OTC | |
| MAGNESIUM OXIDE 400 MG ORAL TABLET | GENERIC, OTC | |
| SODIUM BICARBONATE 325 MG ORAL TABLET | GENERIC, OTC | |
| SODIUM BICARBONATE 650 MG ORAL TABLET | GENERIC, OTC | |

ANTICHOLINERGICS, QUATERNARY AMMONIUM

| | | |
|---------------------------------|--------------|--|
| GLYCOPYRROLATE 1 MG ORAL TABLET | GENERIC, OTC | |
| GLYCOPYRROLATE 2 MG ORAL TABLET | GENERIC, OTC | |

ANTI-ULCER PREPARATIONS

| | | |
|---------------------------------|--------------|--|
| MISOPROSTOL 100 MCG ORAL TABLET | GENERIC, OTC | |
| MISOPROSTOL 200 MCG ORAL TABLET | GENERIC, OTC | |
| SUCRALFATE 1 G ORAL TABLET | GENERIC, OTC | |

HISTAMINE H2-RECEPTOR INHIBITORS

| | | |
|--|--------------|--|
| CIMETIDINE (ACID REDUCER) 200 MG ORAL TABLET | GENERIC, OTC | |
| CIMETIDINE 200 MG ORAL TABLET | GENERIC, OTC | |
| CIMETIDINE 300 MG ORAL TABLET | GENERIC, OTC | |
| CIMETIDINE 400 MG ORAL TABLET | GENERIC, OTC | |
| CIMETIDINE 800 MG ORAL TABLET | GENERIC, OTC | |
| CIMETIDINE (HEARTBURN RELIEF) 200 MG ORAL TABLET | GENERIC, OTC | |
| CIMETIDINE HCL (CIMETIDINE) 300 MG/5ML ORAL SOLUTION | GENERIC, OTC | |
| FAMOTIDINE (ACID CONTROLLER) 10 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| FAMOTIDINE (ACID CONTROLLER) 20 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE (ACID REDUCER) 10 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE (ACID REDUCER) 20 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE (ACID-PEP) 20 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE 10 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE 20 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE 40 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE (HEARTBURN PREVENTION) 10 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE (HEARTBURN PREVENTION) 20 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE (HEARTBURN RELIEF) 10 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE (HEARTBURN RELIEF) 20 MG ORAL TABLET | GENERIC, OTC | |
| FAMOTIDINE (ZANTAC-360 (FAMOTIDINE)) 20 MG ORAL TABLET | GENERIC, OTC | |

INTESTINAL MOTILITY STIMULANTS

| | | |
|---|--------------|--|
| METOCLOPRAMIDE HCL 5 MG/5 ML ORAL SOLUTION | GENERIC, OTC | |
| METOCLOPRAMIDE HCL 10 MG/10ML ORAL SOLUTION | GENERIC, OTC | |
| METOCLOPRAMIDE HCL 5 MG ORAL TABLET | GENERIC, OTC | |
| METOCLOPRAMIDE HCL 10 MG ORAL TABLET | GENERIC, OTC | |

PROTON-PUMP INHIBITORS

| | | |
|---|--------------|-------------------------|
| LANSOPRAZOLE 15 MG ORAL CAPSULE DR | GENERIC, OTC | QL (1 capsule per day) |
| LANSOPRAZOLE 30 MG ORAL CAPSULE DR | GENERIC, OTC | QL (1 capsule per day) |
| OMEPRAZOLE 10 MG ORAL CAPSULE DR | GENERIC, OTC | QL (2 capsules per day) |
| OMEPRAZOLE 20 MG ORAL CAPSULE DR | GENERIC, OTC | QL (2 capsules per day) |
| OMEPRAZOLE 40 MG ORAL CAPSULE DR | GENERIC, OTC | QL (2 capsules per day) |
| OMEPRAZOLE 20 MG ORAL TABLET DR | GENERIC, OTC | QL (2 tablets per day) |
| OMEPRAZOLE (OMEPRAZOLE MAGNESIUM) 20 MG ORAL TABLET DR | GENERIC, OTC | QL (2 tablets per day) |
| PANTOPRAZOLE SODIUM SESQ (OBS) (PANTOPRAZOLE SODIUM) 20 MG ORAL TABLET DR | GENERIC, OTC | QL (2 tablets per day) |
| PANTOPRAZOLE SODIUM SESQ (OBS) (PANTOPRAZOLE SODIUM) 40 MG ORAL TABLET DR | GENERIC, OTC | QL (2 tablets per day) |

URINARY TRACT - FUNCTIONAL DISORDERS

BENIGN PROSTATIC HYPERTROPHY/MICTURITION AGENTS

| | | |
|--|--------------|--|
| ALFUZOSIN HCL (ALFUZOSIN HCL ER) 10 MG ORAL TAB ER 24H | GENERIC, OTC | |
| DUTASTERIDE 0.5 MG ORAL CAPSULE | GENERIC, OTC | |
| FINASTERIDE 5 MG ORAL TABLET | GENERIC, OTC | |
| TAMSULOSIN HCL 0.4 MG ORAL CAPSULE | GENERIC, OTC | |

BPH AGENTS,5-ALPHA-RED INH & ALPHA-1-ADR ANTG CMB

| | | |
|---|--------------|--|
| DUTASTERIDE/TAMSULOSIN HCL (DUTASTERIDE-TAMSULOSIN) 0.5-0.4 MG ORAL CPMP 24HR | GENERIC, OTC | |
|---|--------------|--|

URINARY PH MODIFIERS

| | | |
|---|--------------|--|
| CITRIC ACID/SODIUM CITRATE (CYTRA-2) 334-500MG ORAL SOLUTION | GENERIC, OTC | |
| CITRIC ACID/SODIUM CITRATE (SODIUM CITRATE-CITRIC ACID) 334-500MG ORAL SOLUTION | GENERIC, OTC | |
| CITRIC ACID/SODIUM CITRATE (VIRTRATE-2) 334-500MG ORAL SOLUTION | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| POTASSIUM CITRATE (POTASSIUM CITRATE ER) 5 MEQ ORAL TABLET ER | GENERIC, OTC | |
| POTASSIUM CITRATE (POTASSIUM CITRATE ER) 10 MEQ ORAL TABLET ER | GENERIC, OTC | |
| POTASSIUM CITRATE (POTASSIUM CITRATE ER) 15 MEQ ORAL TABLET ER | GENERIC, OTC | |
| POTASSIUM PHOSPHATE, MONOBASIC (K-PHOS ORIGINAL) 500 MG ORAL TABLET SOL | BRAND, OTC | |

URINARY TRACT ANESTHETIC/ANALGESIC AGNT (AZO-DYE)

| | | |
|--|--------------|--|
| PHENAZOPYRIDINE HCL 100 MG ORAL TABLET | GENERIC, OTC | |
| PHENAZOPYRIDINE HCL 200 MG ORAL TABLET | GENERIC, OTC | |

URINARY TRACT ANTISPASMODIC/ANTIINCONTINENCE AGENT

| | | |
|---|--------------|--|
| OXYBUTYNIN CHLORIDE 5 MG/5 ML ORAL SYRUP | GENERIC, OTC | |
| OXYBUTYNIN CHLORIDE 5 MG ORAL TABLET | GENERIC, OTC | |
| OXYBUTYNIN CHLORIDE (OXYBUTYNIN CHLORIDE ER) 5 MG ORAL TAB ER 24 | GENERIC, OTC | |
| OXYBUTYNIN CHLORIDE (OXYBUTYNIN CHLORIDE ER) 10 MG ORAL TAB ER 24 | GENERIC, OTC | |
| OXYBUTYNIN CHLORIDE (OXYBUTYNIN CHLORIDE ER) 15 MG ORAL TAB ER 24 | GENERIC, OTC | |
| TOLTERODINE TARTRATE 1 MG ORAL TABLET | GENERIC, OTC | ST (oxybutynin IR, oxybutynin ER, or trospium) |
| TOLTERODINE TARTRATE 2 MG ORAL TABLET | GENERIC, OTC | ST (oxybutynin IR, oxybutynin ER, or trospium) |
| TOLTERODINE TARTRATE (TOLTERODINE TARTRATE ER) 2 MG ORAL CAP ER 24H | GENERIC, OTC | ST (oxybutynin IR, oxybutynin ER, or trospium) |
| TOLTERODINE TARTRATE (TOLTERODINE TARTRATE ER) 4 MG ORAL CAP ER 24H | GENERIC, OTC | ST (oxybutynin IR, oxybutynin ER, or trospium) |
| TROSPIUM CHLORIDE 20 MG ORAL TABLET | GENERIC, OTC | |

VAGINAL DISORDERS

VAGINAL ANTIBIOTICS

| | | |
|---|--------------|--|
| CLINDAMYCIN PHOSPHATE 2% VAGINAL CREAM/APPL | GENERIC, OTC | |
| METRONIDAZOLE 0.75% VAGINAL GEL W/APPL | GENERIC, OTC | |
| METRONIDAZOLE (VANDAOLE) 0.75% VAGINAL GEL W/APPL | BRAND, OTC | |

VAGINAL ANTIFUNGALS

| | | |
|--|--------------|--|
| CLOTRIMAZOLE (3-DAY VAGINAL CREAM) 2% VAGINAL CREAM/APPL | GENERIC, OTC | |
| CLOTRIMAZOLE 1% VAGINAL CREAM/APPL | GENERIC, OTC | |
| CLOTRIMAZOLE (CLOTRIMAZOLE-3) 2% VAGINAL CREAM/APPL | GENERIC, OTC | |
| CLOTRIMAZOLE (CLOTRIMAZOLE-7) 1% VAGINAL CREAM/APPL | GENERIC, OTC | |
| MICONAZOLE NITRATE (MICONAZOLE 7) 2% VAGINAL CREAM/APPL | GENERIC, OTC | |
| MICONAZOLE NITRATE 2% VAGINAL CREAM/APPL | GENERIC, OTC | |
| MICONAZOLE NITRATE (MICONAZOLE-7) 2% VAGINAL CREAM/APPL | GENERIC, OTC | |
| MICONAZOLE NITRATE (MONISTAT 7) 2% VAGINAL CREAM/APPL | GENERIC, OTC | |
| TERCONAZOLE 0.4% VAGINAL CREAM/APPL | GENERIC, OTC | |
| TERCONAZOLE 0.8% VAGINAL CREAM/APPL | GENERIC, OTC | |

VAGINAL ESTROGEN PREPARATIONS

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| ESTRADIOL 0.01% VAGINAL CREAM/APPL | GENERIC, OTC | |
| ESTRADIOL 10 MCG VAGINAL TABLET | GENERIC, OTC | |
| ESTRADIOL (YUVAFEM) 10 MCG VAGINAL TABLET | GENERIC, OTC | |
| ESTROGENS,CONJUGATED (PREMARIN) 0.625 MG/G VAGINAL CREAM/APPL | BRAND, OTC | |

VITAMIN AND/OR MINERAL DEFICIENCY

ANTIOXIDANT MULTIVITAMIN COMBINATIONS

| | | |
|---|--------------|--|
| MULTIVITAMINS W-MINERALS (I-VITE) 1000-60-2 ORAL TABLET | GENERIC, OTC | |
|---|--------------|--|

CALCIUM REPLACEMENT

| | | |
|--|--------------|--|
| CA CARBONATE/MAG/VITAMIN D3 (CORAL CALCIUM) 250 MG-200 ORAL CAPSULE | BRAND, OTC | |
| CA CARBONATE/VITAMIN D2/MIN (CALCIUM 600+MINERALS) 600 MG-200 ORAL TABLET | GENERIC, OTC | |
| CA CARBONATE/VITAMIN D2/MIN (CALCIUM 600-VIT D3-MINERAL) 600 MG-400 ORAL TAB CHEW | GENERIC, OTC | |
| CA CARBONATE/VITAMIN D3/VIT K (CALCIUM) 500-100-40 ORAL TAB CHEW | GENERIC, OTC | |
| CA/D3/MAG#11/ZINC/COP/MANG/BOR (CALCIUM 600-D3-MINERALS) 600 MG-800 ORAL TAB CHEW | GENERIC, OTC | |
| CALCIUM CARB/VIT D3/MINERALS (CALCIUM 600+D PLUS MINERALS) 600 MG-400 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE (CALCIUM) 500(1250) ORAL TAB CHEW | GENERIC, OTC | |
| CALCIUM CARBONATE (CALCIUM) 500(1250) ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE (CALCIUM) 600 MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE (CALCIUM 600-VIT D3) 600 MG-10 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE 500 MG/5ML ORAL SUSP | GENERIC, OTC | |
| CALCIUM CARBONATE 500(1250) ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE (NATURAL CALCIUM) 500(1250) ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE (OYSTER SHELL CALCIUM) 500(1250) ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE (SUPER CALCIUM) 600 MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D2 (CALCIUM 250-VIT D3) 250-3.125 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D2 (CALCIUM 500-VIT D3) 500MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D2 (CALCIUM 600-VIT D3) 600MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D2 (CALCIUM 600-VIT D3) 600 MG-20 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D2 (CALCIUM 600-VIT D3) 600 MG-10 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D2 (OYSCO 500-VIT D3) 500MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D2 (OYSTER SHELL CALCIUM W-VIT D) 250 MG-125 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D2 (OYSTER SHELL CALCIUM-VIT D3) 500MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D2 (OYSTERCAL-D) 500 MG-10 ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| CALCIUM CARBONATE/VITAMIN D2 (PARVA-CAL 500) 500MG-5MCG ORAL TABLET | BRAND, OTC | |
| CALCIUM CARBONATE/VITAMIN D2 (PARVA-CAL 500) 500MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM) 500 MG-2.5 ORAL TAB CHEW | BRAND, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM 500 + VIT D) 500 MG-10 ORAL TAB CHEW | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM 500-VIT D3) 500 MG-10 ORAL TAB CHEW | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM 500-VIT D3) 500MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM 500-VIT D3) 500 MG-10 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM 500-VIT D3) 500-3.125 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM 500-VIT D3) 500-15 MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM 600 + VIT D) 600 MG-10 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM 600-VIT D3) 600MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM 600-VIT D3) 600 MG-20 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (CALCIUM 600-VIT D3) 600 MG-10 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (HI-CAL) 500MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (OYSCO 500-VIT D3) 500MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (OYSTER SHELL CALCIUM-VIT D3) 500MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (OYSTER SHELL CALCIUM-VITAMIN D) 500 MG-10 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CARBONATE/VITAMIN D3 (SUPER CALCIUM 600-VIT D3) 600 MG-10 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE 200(950)MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE 250 MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE/VITAMIN D3 (CALCIUM CITRATE - VITAMIN D) 315MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE/VITAMIN D3 (CALCIUM CITRATE - VITAMIN D) 315MG-6.25 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE/VITAMIN D3 (CALCIUM CITRATE - VITAMIN D3) 315MG-6.25 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE/VITAMIN D3 (CALCIUM CITRATE-D) 315MG-6.25 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE/VITAMIN D3 (CALCIUM CITRATE-VIT D) 315MG-6.25 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE/VITAMIN D3 (CALCIUM CITRATE-VIT D3) 250MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE/VITAMIN D3 (CALCIUM CITRATE-VIT D3) 315MG-6.25 ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| CALCIUM CITRATE/VITAMIN D3 (CALCIUM CITRATE-VITAMIN D3) 315MG-6.25 ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE/VITAMIN D3 (CALCIUM CITRATE-VITAMIN D3) 315MG-5MCG ORAL TABLET | GENERIC, OTC | |
| CALCIUM CITRATE/VITAMIN D3 (CITRACAL + D MAXIMUM) 315MG-6.25 ORAL TABLET | BRAND, OTC | |
| CALCIUM CITRATE/VITAMIN D3 (CITRACAL + D MAXIMUM) 315MG-6.25 ORAL TABLET | GENERIC, OTC | |
| CALCIUM GLUCONATE 60(650) MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM/MAGNESIUM (CALCIUM MAGNESIUM) 500-250 MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM/MAGNESIUM (CALCIUM-MAGNESIUM) 300-300 MG ORAL TABLET | GENERIC, OTC | |
| CALCIUM/MAGNESIUM/ZINC (CALCIUM-MAGNESIUM-ZINC) 333-133-5 ORAL TABLET | GENERIC, OTC | |

FLUORIDE PREPARATIONS

| | | |
|---|--------------|-------------------------|
| SODIUM FLUORIDE (FLUORIDE) 0.25(0.55) ORAL TAB CHEW | GENERIC, OTC | AR (age 18 and younger) |
| SODIUM FLUORIDE (FLUORIDE) 0.5(1.1)MG ORAL TAB CHEW | GENERIC, OTC | AR (age 18 and younger) |
| SODIUM FLUORIDE (FLUORIDE) 1MG(2.2MG) ORAL TAB CHEW | GENERIC, OTC | AR (age 18 and younger) |
| SODIUM FLUORIDE 0.5 MG/ML ORAL DROPS | GENERIC, OTC | AR (age 18 and younger) |
| SODIUM FLUORIDE 0.25(0.55) ORAL TAB CHEW | GENERIC, OTC | AR (age 18 and younger) |
| SODIUM FLUORIDE 0.5(1.1)MG ORAL TAB CHEW | GENERIC, OTC | AR (age 18 and younger) |
| SODIUM FLUORIDE 1MG(2.2MG) ORAL TAB CHEW | GENERIC, OTC | AR (age 18 and younger) |

FOLIC ACID PREPARATIONS

| | | |
|-------------------------------|--------------|--|
| FOLIC ACID 0.4 MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID 0.8 MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID 1 MG ORAL TABLET | GENERIC, OTC | |

GERIATRIC VITAMIN PREPARATIONS

| | | |
|---|--------------|--|
| MULTIVITAMINS W-MINERALS/LUT (A THRU Z) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS/LUT (A THRU Z SELECT) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS/LUT (MILLTRIUM SENIOR) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS/LUT (MULTIVITAMIN 50 PLUS) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS/LUT (THERATRUM COMPLETE 50 PLUS) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS/LUT (VISION PLUS LUTEIN) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS/LUT (VITRUM SENIOR) ORAL TABLET | GENERIC, OTC | |

IRON REPLACEMENT

| | | |
|--|--------------|--|
| FERROUS FUMARATE/FOLIC ACID (HEMATINIC WITH FOLIC ACID) 106 MG-1MG ORAL TABLET | GENERIC, OTC | |
| FERROUS GLUCONATE (FERATE) 240(27)MG ORAL TABLET | GENERIC, OTC | |
| FERROUS GLUCONATE 240(27)MG ORAL TABLET | GENERIC, OTC | |
| FERROUS GLUCONATE 324(37.5) ORAL TABLET | GENERIC, OTC | |
| FERROUS GLUCONATE 324(38)MG ORAL TABLET | GENERIC, OTC | |
| FERROUS GLUCONATE (IRON) 236(27)MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|---------------------|
| FERROUS GLUCONATE (IRON) 240(27)MG ORAL TABLET | GENERIC, OTC | |
| FERROUS GLUCONATE (IRON) 256(28)MG ORAL TABLET | GENERIC, OTC | |
| FERROUS SULFATE (CHILDREN'S FERROUS SULFATE) 15 MG/ML ORAL DROPS | GENERIC, OTC | |
| FERROUS SULFATE (CHILDREN'S IRON) 15 MG/ML ORAL DROPS | GENERIC, OTC | |
| FERROUS SULFATE (FEOSOL) 325(65) MG ORAL TABLET | GENERIC, OTC | |
| FERROUS SULFATE (FEROSUL) 325(65) MG ORAL TABLET | GENERIC, OTC | |
| FERROUS SULFATE (FERRO-TIME) 325(65) MG ORAL TABLET | GENERIC, OTC | |
| FERROUS SULFATE 15 MG/ML ORAL DROPS | GENERIC, OTC | |
| FERROUS SULFATE 220 (44)/5 ORAL ELIXIR | GENERIC, OTC | |
| FERROUS SULFATE 300 MG/5ML ORAL LIQUID | GENERIC, OTC | |
| FERROUS SULFATE 220 (44)/5 ORAL SOLUTION | GENERIC, OTC | |
| FERROUS SULFATE 325(65) MG ORAL TABLET | GENERIC, OTC | |
| FERROUS SULFATE 324(65)MG ORAL TABLET DR | GENERIC, OTC | |
| FERROUS SULFATE 325(65) MG ORAL TABLET DR | GENERIC, OTC | |
| FERROUS SULFATE (HIGH POTENCY IRON) 134 MG ORAL TABLET | GENERIC, OTC | |
| FERROUS SULFATE (IRON) 325(65) MG ORAL TABLET | GENERIC, OTC | |
| FERROUS SULFATE (PEDIA IRON) 15 MG/ML ORAL DROPS | GENERIC, OTC | |
| FERROUS SULFATE (PEDIATRIC FE-VITE) 15 MG/ML ORAL DROPS | GENERIC, OTC | |
| FERROUS SULFATE (PEDIATRIC IRON) 15 MG/ML ORAL DROPS | GENERIC, OTC | |
| FERROUS SULFATE (SLOW RELEASE IRON) 142(45)MG ORAL TABLET ER | GENERIC, OTC | |
| FERROUS SULFATE (SLOW RELEASE IRON) 143(45) MG ORAL TABLET ER | GENERIC, OTC | |
| FERROUS SULFATE (SLOW RELEASE IRON) 160(50) MG ORAL TABLET ER | GENERIC, OTC | |
| FERROUS SULFATE (SLOW RELEASE IRON) 250(50) MG ORAL TABLET ER | GENERIC, OTC | |
| IRON 18 MG ORAL TABLET | GENERIC, OTC | |
| IRON AG&FUM/C/FA/MV CMB11/CA-T (FERREX 28) 151-200-1 ORAL TABLET | GENERIC, OTC | |
| IRON POLYSACCHARIDES COMPLEX (FERREX 150) 150 MG ORAL CAPSULE | GENERIC, OTC | |
| IRON POLYSACCHARIDES COMPLEX (IFEREX 150) 150 MG ORAL CAPSULE | GENERIC, OTC | |
| IRON POLYSACCHARIDES COMPLEX (MYFERON 150) 150 MG ORAL CAPSULE | GENERIC, OTC | |
| IRON POLYSACCHARIDES COMPLEX (NU-IRON 150) 150 MG ORAL CAPSULE | GENERIC, OTC | |
| IRON POLYSACCHARIDES COMPLEX (POLY-IRON) 150 MG ORAL CAPSULE | GENERIC, OTC | |
| IRON POLYSACCHARIDES COMPLEX (POLYSACCHARIDE IRON) 150 MG ORAL CAPSULE | GENERIC, OTC | |
| IRON,CARBONYL/VIT C/VIT B12/FA (FE C PLUS) 100-250-1 ORAL TABLET | GENERIC, OTC | |
| IRON,CARBONYL/VIT C/VIT B12/FA (ICAR-C PLUS) 100-250-1 ORAL TABLET | GENERIC, OTC | |
| IRON,CARBONYL/VIT C/VIT B12/FA (IRON 100 PLUS) 100-250-1 ORAL TABLET | GENERIC, OTC | |

| <i>DRUG NAME</i> | <i>TYPE</i> | <i>RESTRICTIONS</i> |
|---|--------------|---------------------|
| MAGNESIUM SALTS REPLACEMENT | | |
| MAGNESIUM 30 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM 200 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM 250 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM CHLORIDE (MAG DELAY) 64 MG ORAL TABLET DR | GENERIC, OTC | |
| MAGNESIUM CHLORIDE (MAG64) 64 MG ORAL TABLET DR | GENERIC, OTC | |
| MAGNESIUM CHLORIDE 70 MG ORAL TABLET DR | GENERIC, OTC | |
| MAGNESIUM CHLORIDE (NU-MAG) 71.5 MG ORAL TABLET DR | GENERIC, OTC | |
| MAGNESIUM GLUCONATE (MAG-G) 27 MG(500) ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM GLUCONATE 27 MG(500) ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM GLUCONATE 27.5 (500) ORAL TABLET | BRAND, OTC | |
| MAGNESIUM GLUCONATE 27.5 (500) ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM GLUCONATE 30 MG(550) ORAL TABLET | BRAND, OTC | |
| MAGNESIUM OXIDE (MAGNESIUM) 400 MG ORAL CAPSULE | BRAND, OTC | |
| MAGNESIUM OXIDE (MAGNESIUM) 500 MG ORAL CAPSULE | GENERIC, OTC | |
| MAGNESIUM OXIDE (MAGNESIUM) 250 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM OXIDE (MAGNESIUM) 400 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM OXIDE 500 MG ORAL CAPSULE | GENERIC, OTC | |
| MAGNESIUM OXIDE 250 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM OXIDE 400 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM OXIDE 420 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM OXIDE 500 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM OXIDE (MAG-OXIDE) 200 MG ORAL TABLET | BRAND, OTC | |
| MAGNESIUM OXIDE (MAG-OXIDE MAGNESIUM) 200 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM OXIDE (MGO) 400 MG ORAL TABLET | GENERIC, OTC | |
| MAGNESIUM OXIDE (PHILLIPS) 500 MG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMIN PREPARATIONS | | |
| FOLIC ACID/MULTIVITAMINS (HIGH POTENCY MULTIVITAMIN) 400 MCG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/MULTIVITAMINS (ONE DAILY ESSENTIAL) 400 MCG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/MULTIVITAMINS (ONE DAILY MULTIVITAMIN) 400 MCG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/MULTIVITAMINS (TAB-A-VITE) 400 MCG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/MULTIVITAMINS (THEREMS MULTIVITAMIN) 400 MCG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/MU-VITS-MIN TH (V-C FORTE) 1 MG ORAL CAPSULE | GENERIC, OTC | |
| FOLIC ACID/MU-VITS-MIN TH (VIC-FORTE) 1 MG ORAL CAPSULE | GENERIC, OTC | |
| FOLIC ACID/MV,FE,OTHER MIN (A THRU Z ADVANCED FORMULA) 18MG-0.4MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/MV,FE,OTHER MIN (CENTRUM COMPLETE) 18MG-0.4MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/MV,FE,OTHER MIN (CENTURY) 18MG-0.4MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/MV,FE,OTHER MIN (DAILY MULTIPLE) 500-18-0.4 ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| FOLIC ACID/MV,FE,OTHER MIN (ONE DAILY FOR WOMEN) 0.4MG-18MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/MV,FE,OTHER MIN (ONE DAILY MAXIMUM) 0.4MG-18MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/MV,FE,OTHER MIN/LUT (CERTA PLUS) 0.4-18-250 ORAL TABLET | GENERIC, OTC | |
| IRON,CARBONYL/FA/MULTIVITS-MIN (ELITE-OB) 50-1.25 MG ORAL TABLET | BRAND, OTC | |
| IRON,CARBONYL/FA/MULTIVITS-MIN (OB COMPLETE) 50-1.25 MG ORAL TABLET | BRAND, OTC | |
| MULTIVITAMINS (DAILY VALUE) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (DAILY VITAMIN FORMULA) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (DAILY VITE) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (DAILY-VITE) 400 MCG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (MULTIPLE VITAMINS) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (MULTIVITAMIN) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (MULTI-VITAMIN DAILY) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (ONE DAILY ESSENTIAL) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (ONE-A-DAY ESSENTIAL) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (ONE-A-DAY MEN'S) 400-300MCG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (ONE-DAILY MULTI-VITAMIN) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (SENTRY) 18MG-0.4MG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (SPECTRAVITE ADVANCED FORMULA) 18MG-0.4MG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (SUPER MULTIVITAMIN) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (TAB-A-VITE) 400 MCG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS (VITAMINS FOR HAIR) 400-400MCG ORAL CAPSULE | GENERIC, OTC | |
| MULTIVITAMINS W-IRON (DAILY VITAMIN + IRON) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-IRON (DAILY VITE WITH IRON) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-IRON (HAIR VITAMIN) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-IRON (MULTI-DAY PLUS IRON) 18MG-0.4MG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-IRON (MULTIVITAMINS WITH IRON) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-IRON (TAB-A-VITE MULTIVIT WITH IRON) 15MG-0.4MG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (DAILY VITAMIN FORMULA-MINERALS) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (HAIR, SKIN & NAILS) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (HAIR, SKIN AND NAILS) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (MEGA MULTI W-CHELATED MINERALS) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (MEN'S ONE DAILY) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (MULTIPLE VITAMIN) ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| MULTIVITAMINS W-MINERALS (MULTIVITAMINS WITH MINERALS) 7.5 MG-400 ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (MULTIVITAMINS WITH MINERALS) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (ONCCOR) 200-10-10 ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (ONE DAILY COMPLETE) 0.4MG-18MG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (ONE DAILY COMPLETE) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (ONE DAILY ENERGY) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (ONE DAILY PLUS MINERALS) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (ONE-A-DAY MAXIMUM FORMULA) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS (PROSIGHT) 5000-60-30 ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS/LUT (CERTAVITE SENIOR) .4-300-250 ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS/LUT (CERTAVITE-ANTIOXIDANT) 18MG-0.4MG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS/LUT (VITATRUM) 18-500-300 ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS W-MINERALS/LUT (VITRUM 50 PLUS SENIOR) 500-300MCG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS, THERAPEUTIC (ONCOVITE) ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS, THERAPEUTIC (THERA) 400 MCG ORAL TABLET | GENERIC, OTC | |
| MULTIVITAMINS, THERAPEUTIC (THERA-TABS) ORAL TABLET | GENERIC, OTC | |
| MULTIVITS W-IRON, HEMATINIC (CENTRAL-VITE) ORAL TABLET | GENERIC, OTC | |
| MULTIVITS W-IRON, HEMATINIC (CENTRAVITES) 0.4-162-18 ORAL TABLET | GENERIC, OTC | |
| PNV NO.15/IRON FUM & PS CMP/FA (FOLIVANE-OB) 85 MG-1 MG ORAL CAPSULE | GENERIC, OTC | |
| PNV WITH CA, NO.74/IRON/FA (NIVA-PLUS) 27 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PNV W-O CA NO5/FE FUMARATE/FA (PRENATAL-U) 106.5-1MG ORAL CAPSULE | GENERIC, OTC | |
| PNV#16/IRON FUM & PS/FA/OM-3 (TARON-C DHA) 35-1-200MG ORAL CAPSULE | GENERIC, OTC | |
| PNV#16/IRON FUM & PS/FA/OM-3 (VIRT-C DHA) 35-1-200MG ORAL CAPSULE | GENERIC, OTC | |
| PRENATAL VIT/FE FUM/DOSS/FA (THRIVITE 19) 29-1-25 MG ORAL TABLET | BRAND, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (O-CAL FA) 27 MG-1 MG ORAL TABLET | GENERIC, OTC | |

PEDIATRIC VITAMIN PREPARATIONS

| | | |
|---|--------------|------------------------|
| FLUORIDE ION/MULTIVITS W-FE (MULTI-VITAMIN W-FLUORIDE-IRON) 0.25-10/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| MULTIVITAMINS (ANIMAL CHEWS) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS (CHILD LITTLE ANIMALS VITAMINS) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS (CHILDREN'S CHEWABLE) ORAL TAB CHEW | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|------------------------|
| MULTIVITAMINS (DINO-LIFE EXTRA C MULTIVITAMIN) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS (DINO-LIFE MULTIVITAMIN) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS (FLINTSTONES) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS (FLINTSTONES WITH EXTRA C) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS (GUMMI BEAR MULTIVITAMIN) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS (HONEY BEARS MULTIVITAMIN) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS (PEDIA POLY-VITE) 750-35/ML ORAL DROPS | BRAND, OTC | |
| MULTIVITAMINS (PEDIATRIC POLY-VITAMIN) 750-35/ML ORAL DROPS | GENERIC, OTC | |
| MULTIVITAMINS (POLY-VITA) 750-35/ML ORAL DROPS | BRAND, OTC | |
| MULTIVITAMINS W-IRON (CHILD CHEW + IRON) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS W-IRON (FLINTSTONES WITH IRON) 18 MG ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS W-IRON (LITTLE ANIMALS WITH IRON) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS W-IRON (VITALETTS) 10 MG ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITAMINS W-IRON (VITALETTS) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITS W-FE,OTHER MIN (DINO-LIFE) 4.5 MG ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITS W-FE,OTHER MIN (FLINTSTONES COMPLETE) ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITS W-FE,OTHER MIN (HONEY BEARS) 4.5 MG ORAL TAB CHEW | GENERIC, OTC | |
| MULTIVITS W-FE,OTHER MIN (SCOOBY-DOO) ORAL TAB CHEW | GENERIC, OTC | |
| PED MV A,C,D3 #38 W-FLUORIDE (TRI-VI-FLOR) 0.25 MG/ML ORAL DRPS SP BP | BRAND, OTC | AR (age 1 and younger) |
| PED MV A,C,D3 #38 W-FLUORIDE (TRI-VI-FLOR) 0.5 MG/ML ORAL DRPS SP BP | BRAND, OTC | AR (age 1 and younger) |
| PEDI MULTIVIT NO.2 W-FLUORIDE (MULTIVITAMIN WITH FLUORIDE) 0.25 MG/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| PEDI MULTIVIT NO.2 W-FLUORIDE (MULTIVITAMIN WITH FLUORIDE) 0.5 MG/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| PEDI MV #45/FLUORIDE/IRON (MULTI-VITAMIN W-FLUORIDE-IRON) 0.25-10/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| PEDI MV #45/FLUORIDE/IRON (MULTIVITAMIN-IRON-FLUORIDE) 0.25-10/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| PEDI MVI NO.12/SODIUM FLUORIDE (MULTIVITAMIN WITH FLUORIDE) 0.25 MG ORAL TAB CHEW | GENERIC, OTC | |
| PEDI MVI NO.12/SODIUM FLUORIDE (MULTIVITAMIN WITH FLUORIDE) 0.5 MG ORAL TAB CHEW | GENERIC, OTC | |
| PEDI MVI NO.12/SODIUM FLUORIDE (MULTIVITAMIN WITH FLUORIDE) 1 MG ORAL TAB CHEW | GENERIC, OTC | |
| PEDI MVI NO.12/SODIUM FLUORIDE (MVC-FLUORIDE) 0.25 MG ORAL TAB CHEW | GENERIC, OTC | |
| PEDI MVI NO.12/SODIUM FLUORIDE (MVC-FLUORIDE) 0.5 MG ORAL TAB CHEW | GENERIC, OTC | |
| PEDI MVI NO.12/SODIUM FLUORIDE (MVC-FLUORIDE) 1 MG ORAL TAB CHEW | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|--|--------------|------------------------|
| PEDI MVI NO.17 WITH FLUORIDE (MULTIVITAMIN WITH FLUORIDE) 0.25 MG ORAL TAB CHEW | GENERIC, OTC | |
| PEDI MVI NO.17 WITH FLUORIDE (MULTIVITAMIN WITH FLUORIDE) 0.5 MG ORAL TAB CHEW | GENERIC, OTC | |
| PEDI MVI NO.17 WITH FLUORIDE (MULTIVITAMIN WITH FLUORIDE) 1 MG ORAL TAB CHEW | GENERIC, OTC | |
| PEDI MVI NO.21 WITH FLUORIDE (TRI-VITAMIN WITH FLUORIDE) 0.25 MG/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| PEDI MVI NO.21 WITH FLUORIDE (TRI-VITAMIN WITH FLUORIDE) 0.5 MG/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| PEDI MVI NO.21 WITH FLUORIDE (TRI-VITE WITH FLUORIDE) 0.25 MG/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| PEDI MVI NO.21 WITH FLUORIDE (TRI-VITE WITH FLUORIDE) 0.5 MG/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| PEDI MVI NO.21 WITH FLUORIDE (VITAMINS A,C,D AND FLUORIDE) 0.25 MG/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| PEDI MVI NO.21 WITH FLUORIDE (VITAMINS A,C,D AND FLUORIDE) 0.5 MG/ML ORAL DROPS | GENERIC, OTC | AR (age 1 and younger) |
| PEDIATRIC MULTIVITAMIN NO.17 (CHILDREN'S CHEW MULTIVITAMIN) ORAL TAB CHEW | GENERIC, OTC | |
| PEDIATRIC MULTIVITAMIN NO.17 (CHILDREN'S MULTIVITAMIN) ORAL TAB CHEW | GENERIC, OTC | |

PRENATAL VITAMIN PREPARATIONS

| | | |
|--|--------------|--|
| PNV #116/IRON FUMARATE/FA/DHA (EXPECTA PRENATAL) 28-800-200 ORAL COMBO. PKG | BRAND, OTC | |
| PNV CMB#21/IRON/FOLIC ACID (PRENATAL COMPLETE) 14 MG-400 ORAL TABLET | BRAND, OTC | |
| PNV CMB#95/FERROUS FUMARATE/FA (PRENATAL) 28MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PNV CMB#95/FERROUS FUMARATE/FA (PRENATAL FORMULA) 28MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PNV CMB#95/FERROUS FUMARATE/FA (PRENATAL MULTIVITAMIN) 28MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PNV NO.115/IRON FUMARATE/FA (PRENATAL 19) 29 MG-1 MG ORAL TAB CHEW | GENERIC, OTC | |
| PNV NO.121/IRON/FOLIC ACID (PRENATAL MULTIVITAMIN) 28MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PNV NO.122/IRON/FOLIC ACID (PRENATAL MULTI) 27MG-0.8MG ORAL TABLET | BRAND, OTC | |
| PNV NO.28/FERROUS FUMARATE/FA (THERANATAL) 27 MG-1 MG ORAL TABLET | BRAND, OTC | |
| PNV NO.63/IRON,CARBONYL/FA/DHA (STUART ONE) 27-800-200 ORAL CAPSULE | BRAND, OTC | |
| PNV NO.74/IRON FUM/FA/COQ10 (THERANATAL OVAVITE) 18-1-125MG ORAL COMBO. PKG | BRAND, OTC | |
| PNV NO.74/IRON FUM/FA/DHA (THERANATAL PLUS) 27-1-300MG ORAL COMBO. PKG | BRAND, OTC | |
| PNV WITH CA,NO.61/IRON/FA/DHA (WOMEN'S PRENATAL PLUS DHA) 28-975-200 ORAL COMBO. PKG | GENERIC, OTC | |
| PNV WITH CA,NO.72/IRON,CARB/FA (PRENATAL PLUS) 29 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PNV WITH CA,NO.72/IRON/FA (M-NATAL PLUS) 27 MG-1 MG ORAL TABLET | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| PNV WITH CA,NO.72/IRON/FA (PRENATAL PLUS) 27 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PNV WITH CA,NO.72/IRON/FA (PRENATAL VITAMIN PLUS LOW IRON) 27 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PNV WITH CA,NO.72/IRON/FA (PREPLUS) 27 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PNV WITH CA,NO.72/IRON/FA (WESTAB PLUS) 27 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PNV WITH CA,NO.74/IRON/FA (PRENATAL LOW IRON) 27 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PNV WITH CA,NO.74/IRON/FA (PREPLUS) 27 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PNV#102/IRON/FA/DHA/LUTEIN (SIMILAC PRENATAL) 27-800-200 ORAL COMBO. PKG | BRAND, OTC | |
| PNV#75/IRON FUM/FA/OM3/DHA/EPA (ONE DAILY PRENATAL) 28-800-440 ORAL COMBO. PKG | GENERIC, OTC | |
| PNV103/FA/OMEGA3/DHA/FISH OIL (PRENATAL) 0.4-32.5MG ORAL TAB CHEW | GENERIC, OTC | |
| PNV115/IRON FUMARATE/FA/DSS (PNV-FERROUS FUMARATE-DOCU-FA) 29-1-25 MG ORAL TABLET | GENERIC, OTC | |
| PNV115/IRON FUMARATE/FA/DSS (PRENATAL 19) 29-1-25 MG ORAL TABLET | GENERIC, OTC | |
| PNV133/FERROUS FUMARATE/FA (PRENATAL VITAMINS) 28MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PNV151/IRON/FA/O3/DHA/EPA/FISH (PRENATAL MULTI-DHA) 27-800-260 ORAL CAPSULE | BRAND, OTC | |
| PNV166/IRON/FA/O3/DHA/EPA/FISH (ULTRA PRENATAL PLUS DHA) 27MG-0.8MG ORAL CAPSULE | BRAND, OTC | |
| PRENATAL 168/IRON/FOLIC/OMEGA3 (ONE-A-DAY PRENATAL-1) 27-800-235 ORAL CAPSULE | BRAND, OTC | |
| prenatal no.137/iron/folic acid (PRENATAL MULTI-DHA) 27-800-260 ORAL CAPSULE | BRAND, OTC | |
| prenatal no.137/iron/folic acid (PRENATAL VITAMIN) 27MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| prenatal no.137/iron/folic acid (PRENATAL VITAMINS) 27MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL NO.40/IRON/FA/DHA (PRENATAL MULTI-DHA) 27-0.8-250 ORAL CAPSULE | GENERIC, OTC | |
| PRENATAL NO.40/IRON/FA/DHA (PRENATAL MULTIVITAMIN-DHA) 27-0.8-250 ORAL CAPSULE | GENERIC, OTC | |
| PRENATAL VIT #116/IRON/FA/DHA (PRENATAL FORMULA-DHA) 28-800-200 ORAL CAPSULE | BRAND, OTC | |
| PRENATAL VIT #49/IRON FUM/FA (MINI PRENATAL) 6.75-0.2MG ORAL TABLET | BRAND, OTC | |
| PRENATAL VIT NO.124/IRON/FA (PRENATAL VITAMIN) 27MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT NO.78/IRON/FA (PRETAB) 29 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT#98/FERROUS FUM/FA (KPN) 9MG-267MCG ORAL TABLET | BRAND, OTC | |
| PRENATAL VIT/FE FUM/DOSS/FA (MYNATE 90 PLUS) 90-50-1MG ORAL TABLET ER | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|---------------------|
| PRENATAL VIT/FE FUM/DOSS/FA (PRENATAL 19) 29-1-25 MG ORAL TABLET | BRAND, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (MYNATAL) 65 MG-1 MG ORAL CAPSULE | GENERIC, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (MYNATAL PLUS) 65 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (MYNATAL-Z) 65 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (PRENATABS FA) 29 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (PRENATAL) 27MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (PRENATAL) 28MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (PRENATAL 19) 29 MG-1 MG ORAL TAB CHEW | GENERIC, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (PRENATAL ONE DAILY) 27MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (PRENATAL VITAMINS) 28MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (SE-NATAL 19) 29 MG-1 MG ORAL TAB CHEW | GENERIC, OTC | |
| PRENATAL VIT/FE FUMARATE/FA (TRINATE) 28 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/IRON,CARB/DOSS/FA (MYNATAL) 90-50-1MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/IRON,CARB/DOSS/FA (MYNATAL ADVANCE) 90-1-50 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/IRON,CARB/DOSS/FA (VINATE GT) 90-1-50 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/IRON,CARB/DOSS/FA (VINATE ULTRA) 90-1-50 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT/IRON,CARBONYL/FA (PRENATABS RX) 29 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VIT37/IRON/FOLIC ACID (PRENATA) 29 MG-1 MG ORAL TAB CHEW | BRAND, OTC | |
| PRENATAL VITAMINS/FE BISGLY/FA (VINATE II) 29 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VITS #93/IRON FUM/FA (PRENATAL FORMULA) 9MG-267MCG ORAL TABLET | BRAND, OTC | |
| PRENATAL VITS W-CA,FE,FA(<1MG) (KPN) ORAL TABLET | GENERIC, OTC | |
| PRENATAL VITS W-CA,FE,FA(<1MG) (PERRY PRENATAL) 13.5-0.4MG ORAL CAPSULE | GENERIC, OTC | |
| PRENATAL VITS W-CA,FE,FA(<1MG) (PRENATAL) 27MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VITS W-CA,FE,FA(<1MG) (PRENATAL MULTIVITAMIN) 28MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VITS W-CA,FE,FA(<1MG) (PRENATAL VITAMINS) 27MG-0.8MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL VITS W-CA,FE,FA(1MG) (O-CAL PRENATAL) 15 MG-1 MG ORAL TABLET | GENERIC, OTC | |
| PRENATAL72/IRON FUM/FA/OM3/DHA (PRENATAL PLUS-DHA) 27-1-250MG ORAL COMBO. PKG | BRAND, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|-------------|---------------------|
| PV W-O CAL/FE,CARBONYL/DOSS/FA (OBSTETRIX EC) 29-1-50 MG ORAL TABLET DR | BRAND, OTC | |

VITAMIN B PREPARATIONS

| | | |
|--|--------------|--|
| FOLIC ACID/VITAMIN B COMP W-C (FULL SPECTRUM B) 0.8 MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/VITAMIN B COMP W-C (NEPHRO-VITE) 0.8 MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/VITAMIN B COMP W-C (RENAL VITAMIN) 0.8 MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/VITAMIN B COMP W-C (RENAL-VITE) 0.8 MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/VITAMIN B COMP W-C (RENA-VITE) 0.8 MG ORAL TABLET | GENERIC, OTC | |
| FOLIC ACID/VITAMIN B COMP W-C (RENA-VITE RX) 1MG-60MG ORAL TABLET | GENERIC, OTC | |

VITAMIN B1 PREPARATIONS

| | | |
|---|--------------|--|
| THIAMINE HCL (B-1) 100 MG ORAL TABLET | GENERIC, OTC | |
| THIAMINE HCL 100 MG/ML INJECTION VIAL | GENERIC, OTC | |
| THIAMINE HCL 100 MG ORAL TABLET | GENERIC, OTC | |
| THIAMINE HCL 250 MG ORAL TABLET | GENERIC, OTC | |
| THIAMINE HCL 500 MG ORAL TABLET | GENERIC, OTC | |
| THIAMINE HCL (VITAMIN B-1) 50 MG ORAL TABLET | GENERIC, OTC | |
| THIAMINE HCL (VITAMIN B-1) 100 MG ORAL TABLET | GENERIC, OTC | |
| THIAMINE HCL (VITAMIN B-1) 250 MG ORAL TABLET | GENERIC, OTC | |
| THIAMINE MONONITRATE (VITAMIN B-1) 100 MG ORAL TABLET | GENERIC, OTC | |

VITAMIN B12 PREPARATIONS

| | | |
|---|--------------|--|
| CYANOCOBALAMIN (B-12) 500 MCG ORAL TABLET | GENERIC, OTC | |
| CYANOCOBALAMIN (B-12) 1000 MCG ORAL TABLET ER | GENERIC, OTC | |
| CYANOCOBALAMIN (B-12 DOTS) 500 MCG ORAL TABLET | GENERIC, OTC | |
| CYANOCOBALAMIN (CYANOCOBALAMIN INJECTION) 1000MCG/ML INJECTION VIAL | GENERIC, OTC | |
| CYANOCOBALAMIN (VITAMIN B-12) 500 MCG ORAL TABLET | GENERIC, OTC | |
| CYANOCOBALAMIN (VITAMIN B-12) 1000 MCG ORAL TABLET | GENERIC, OTC | |
| CYANOCOBALAMIN (VITAMIN B-12) 1000 MCG ORAL TABLET ER | GENERIC, OTC | |
| CYANOCOBALAMIN (VITAMIN B-12) 1000 MCG SUBLINGUAL TAB SUBL | GENERIC, OTC | |

VITAMIN B6 PREPARATIONS

| | | |
|---|--------------|--|
| PYRIDOXINE HCL (B-6) 200 MG ORAL TABLET ER | GENERIC, OTC | |
| PYRIDOXINE HCL 25 MG ORAL TABLET | GENERIC, OTC | |
| PYRIDOXINE HCL 50 MG ORAL TABLET | GENERIC, OTC | |
| PYRIDOXINE HCL 250 MG ORAL TABLET | GENERIC, OTC | |
| PYRIDOXINE HCL 500 MG ORAL TABLET | GENERIC, OTC | |
| PYRIDOXINE HCL (VITAMIN B-6) 50 MG ORAL CAPSULE | GENERIC, OTC | |
| PYRIDOXINE HCL (VITAMIN B-6) 25 MG ORAL TABLET | GENERIC, OTC | |
| PYRIDOXINE HCL (VITAMIN B-6) 50 MG ORAL TABLET | GENERIC, OTC | |
| PYRIDOXINE HCL (VITAMIN B-6) 100 MG ORAL TABLET | GENERIC, OTC | |
| PYRIDOXINE HCL (VITAMIN B-6) 250 MG ORAL TABLET | GENERIC, OTC | |

| <i>DRUG NAME</i> | <i>TYPE</i> | <i>RESTRICTIONS</i> |
|------------------|-------------|---------------------|
|------------------|-------------|---------------------|

VITAMIN C PREPARATIONS

| | | |
|---|--------------|--|
| ASCORBIC ACID (ACEROLA C) 500 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASCORBIC ACID (ACEROLA C) 500 MG ORAL WAFER | GENERIC, OTC | |
| ASCORBIC ACID 500 MG ORAL TABLET | GENERIC, OTC | |
| ASCORBIC ACID (C-1000) 1000 MG ORAL TABLET | GENERIC, OTC | |
| ASCORBIC ACID (C-1000 WITH ROSE HIPS) 1000 MG ORAL TABLET | GENERIC, OTC | |
| ASCORBIC ACID (C-500) 500 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASCORBIC ACID (C-500) 500 MG ORAL TABLET | GENERIC, OTC | |
| ASCORBIC ACID (FRUIT C-100) 100 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASCORBIC ACID (FRUIT C-500) 500 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASCORBIC ACID (SOOTHING PUREWAY-C) 500 MG ORAL TABLET | GENERIC, OTC | |
| ASCORBIC ACID (VITAJEY DAILY C) 125 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C) 125 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C) 250 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C) 500 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C) 100 MG ORAL TABLET | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C) 250 MG ORAL TABLET | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C) 500 MG ORAL TABLET | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C) 1000 MG ORAL TABLET | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C) 500 MG ORAL WAFER | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C WITH ROSE HIPS) 500 MG ORAL TAB CHEW | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C WITH ROSE HIPS) 500 MG ORAL TABLET | GENERIC, OTC | |
| ASCORBIC ACID (VITAMIN C WITH ROSE HIPS) 1000 MG ORAL TABLET | GENERIC, OTC | |

VITAMIN D PREPARATIONS

| | | |
|--|--------------|-------------------------|
| CALCITRIOL 0.25 MCG ORAL CAPSULE | GENERIC, OTC | |
| CALCITRIOL 0.5 MCG ORAL CAPSULE | GENERIC, OTC | |
| CHOLECALCIFEROL (D3 DOTS) 50 MCG ORAL TABLET | GENERIC, OTC | |
| CHOLECALCIFEROL (D3-2000) 50 MCG ORAL CAPSULE | GENERIC, OTC | |
| CHOLECALCIFEROL (DECARA) 1250 MCG ORAL CAPSULE | GENERIC, OTC | |
| CHOLECALCIFEROL (DELTA D3) 10 MCG ORAL TABLET | GENERIC, OTC | |
| CHOLECALCIFEROL (DIALYVITE VITAMIN D) 125 MCG ORAL CAPSULE | GENERIC, OTC | |
| CHOLECALCIFEROL (D-VI-SOL) 10(400)/ML ORAL DROPS | GENERIC, OTC | AR (age 18 and younger) |
| CHOLECALCIFEROL (OPTIMAL D3) 1250 MCG ORAL CAPSULE | GENERIC, OTC | |
| CHOLECALCIFEROL (PEDIA D-VITE) 10(400)/ML ORAL DROPS | GENERIC, OTC | AR (age 18 and younger) |
| CHOLECALCIFEROL (PEDIATRIC D-VITE) 10(400)/ML ORAL DROPS | GENERIC, OTC | AR (age 18 and younger) |
| CHOLECALCIFEROL (PEDIATRIC VITAMIN D3) 10(400)/ML ORAL DROPS | GENERIC, OTC | AR (age 18 and younger) |
| CHOLECALCIFEROL (THERA-D) 50 MCG ORAL TABLET | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAJEY DAILY D) 25 MCG ORAL TAB CHEW | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D) 25 MCG ORAL TABLET | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D3) 10 MCG ORAL CAPSULE | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D3) 25 MCG ORAL CAPSULE | GENERIC, OTC | |

| DRUG NAME | TYPE | RESTRICTIONS |
|---|--------------|-------------------------|
| CHOLECALCIFEROL (VITAMIN D3) 50 MCG ORAL CAPSULE | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D3) 125 MCG ORAL CAPSULE | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D3) 250 MCG ORAL CAPSULE | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D3) 1250 MCG ORAL CAPSULE | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D3) 10(400)/ML ORAL DROPS | GENERIC, OTC | AR (age 18 and younger) |
| CHOLECALCIFEROL (VITAMIN D3) 10MCG/5ML ORAL LIQUID | GENERIC, OTC | AR (age 18 and younger) |
| CHOLECALCIFEROL (VITAMIN D3) 25 MCG ORAL TAB CHEW | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D3) 10 MCG ORAL TABLET | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D3) 25 MCG ORAL TABLET | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D3) 50 MCG ORAL TABLET | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D3) 125 MCG ORAL TABLET | GENERIC, OTC | |
| CHOLECALCIFEROL (VITAMIN D-400) 10 MCG ORAL TABLET | GENERIC, OTC | |
| CHOLECALCIFEROL (WEEKLY-D) 1250 MCG ORAL CAPSULE | GENERIC, OTC | |
| ERGOCALCIFEROL (VITAMIN D2) 1250 MCG ORAL CAPSULE | GENERIC, OTC | |
| ERGOCALCIFEROL (VITAMIN D2) 10 MCG ORAL TABLET | GENERIC, OTC | |
| ERGOCALCIFEROL (VITAMIN D2) 50 MCG ORAL TABLET | BRAND, OTC | |
| FISH OIL/DHA/EPA (FISH OIL) 1200-144MG ORAL CAPSULE | GENERIC, OTC | |

ZINC REPLACEMENT

| | | |
|---|--------------|--|
| ZINC AMINO ACID CHELATE (ZINC) 50 MG ORAL TABLET | GENERIC, OTC | |
| ZINC AMINO ACID CHELATE (ZINC CHELATED) 50 MG ORAL TABLET | GENERIC, OTC | |
| ZINC GLUCONATE (ELEMENTAL ZINC) 30 MG ORAL TABLET | GENERIC, OTC | |
| ZINC GLUCONATE (ZINC) 10 MG ORAL LOZENGE | GENERIC, OTC | |
| ZINC GLUCONATE (ZINC) 30 MG ORAL TABLET | GENERIC, OTC | |
| ZINC GLUCONATE (ZINC) 50 MG ORAL TABLET | GENERIC, OTC | |
| ZINC GLUCONATE 100 MG ORAL TABLET | GENERIC, OTC | |
| ZINC SULFATE (ORAZINC) 25(110) MG ORAL TABLET | BRAND, OTC | |
| ZINC SULFATE (ZINC) 50(220)MG ORAL TABLET | GENERIC, OTC | |
| ZINC SULFATE 50(220)MG ORAL CAPSULE | GENERIC, OTC | |
| ZINC SULFATE 50(220)MG ORAL TABLET | GENERIC, OTC | |
| ZINC SULFATE (ZINC-15) 66 MG ORAL TABLET | BRAND, OTC | |
| ZINC SULFATE (ZINC-220) 50(220)MG ORAL CAPSULE | GENERIC, OTC | |

APPENDIX A: DOSE FORM REFERENCE GUIDE

| | |
|------------|---|
| ADH. PATCH | ADHESIVE PATCH, MEDICATED |
| AER POW BA | AEROSOL POWDER, BREATH ACTIVATED |
| AER W/ADAP | AEROSOL WITH ADAPTER |
| AMPUL-NEB | AMPUL FOR NEBULIZATION |
| AUTO INJCT | AUTO-INJECTOR |
| BLST W/DEV | BLISTER, WITH INHALATION DEVICE |
| CAP DS PK | CAPSULE, DOSE PACK |
| CAP ER 12H | CAPSULE, EXTENDED RELEASE 12 HR |
| CAP ER 24H | CAPSULE, EXT RELEASE 24 HR |
| CAP ER DEG | CAPSULE, EXTENDED-RELEASE 24HR DEGRADABLE |
| CAP LQ RAP | CAPSULE, LIQUID-FILLED, RAPID RELEASE |
| CAP SA 24H | CAPSULE, EXTENDED RELEASE 24HR |
| CAP W/DEV | CAPSULE, WITH INHALATION DEVICE |
| CAPSULE DR | CAPSULE, DELAYED RELEASE |
| CAPSULE ER | CAPSULE, EXTENDED RELEASE |
| CMBPKGDRCP | COMBINATION PACKAGE, TABLET AND DR CAP |
| COMBO. PKG | COMBINATION PACKAGE |
| CPBP 30-70 | CAPSULE, EXTENDED RELEASE BIPHASIC 30-70 |
| CPBP 50-50 | CAPSULE, EXTENDED RELEASE BIPHASIC 50-50 |
| CPMP 12HR | CAPSULE, EXTENDED RELEASE MULTIPHASE 12HR |
| CPMP 24HR | CAPSULE, EXTENDED RELEASE MULTIPHASE 24HR |
| CREAM (G) | CREAM (GRAM) |
| CREAM PACK | CREAM IN PACKET |
| CREAM/APPL | CREAM WITH APPLICATOR |
| CRM/PE APP | CREAM WITH PERINEAL APPLICATOR |
| DROPS SUSP | SUSPENSION, DROPS(FINAL DOSAGE FORM) |
| DRPS SP BP | DROPS, SUSPENSION BIPHASIC RELEASE |
| GEL MD PMP | GEL IN METERED-DOSE PUMP |
| GEL W/APPL | GEL WITH APPLICATOR |
| HFA AER AD | HFA AEROSOL WITH ADAPTER |
| HFA AEROBA | HFA AEROSOL, BREATH ACTIVATED |

| | |
|------------|---|
| LOZNG MINI | MINI LOZENGE |
| MIST INHAL | MIST INHALER |
| NAS SP SYR | NASAL SPRAY SYRINGE (EA) |
| OINT. (G) | OINTMENT (GRAM) |
| ORAL CONC | CONCENTRATE, ORAL |
| ORAL SUSP | SUSPENSION, ORAL |
| PATCH DYSQ | PATCH, TRANSDERMAL DAILY, SEQUENTIAL |
| PATCH TD24 | PATCH, TRANSDERMAL 24 HOURS |
| PATCH TD72 | PATCH, TRANSDERMAL 72 HOURS |
| PATCH TDSW | PATCH, TRANSDERMAL SEMIWEEKLY |
| PATCH TDWK | PATCH, TRANSDERMAL WEEKLY |
| PEN IJ KIT | PEN INJECTOR KIT |
| PEN INJCTR | PEN INJECTOR |
| POWD PACK | POWDER IN PACKET |
| POWDER | POWDER |
| SOL-GEL | GEL-FORMING SOLUTION |
| SOLN RECON | SOLUTION, RECONSTITUTED |
| SPRAY SUSP | SPRAY, SUSPENSION |
| SPRAY/PUMP | AEROSOL, SPRAY WITH PUMP |
| SUPP.RECT | SUPPOSITORY, RECTAL |
| SUS MC REC | SUSPENSION, MICROCAPSULE RECONSTITUTED |
| SUSP RECON | SUSPENSION, RECONSTITUTED |
| TAB CHEW | TABLET, CHEWABLE |
| TAB DS PK | TABLET, DOSE PACK |
| TAB ER 12H | TABLET, EXTENDED RELEASE 12 HR |
| TAB ER 24 | TABLET, EXTENDED RELEASE 24 HR |
| TAB ER PRT | TABLET, EXT RELEASE, PARTICLES/CRYSTALS |
| TAB MPHASE | TABLET, EXTENDED RELEASE MULTIPHASE |
| TAB RAPDIS | TABLET, DISINTEGRATING |
| TAB SUBL | TABLET, SUBLINGUAL |
| TABLET DR | TABLET, DELAYED RELEASE |
| TABLET EFF | TABLET, EFFERVESCENT |
| TABLET ER | TABLET, EXTENDED RELEASE |
| TABLET SOL | TABLET, SOLUBLE |
| TBDSPK 3MO | TABLET, DOSE PACK, 3 MONTHS |
| VAG RING | RING, VAGINAL |
| VIAL-NEB | VIAL, NEBULIZER |

APPENDIX B: ALTERNATIVES FOR COMMONLY REQUESTED NON-FORMULARY DRUGS

HOW TO USE THIS DOCUMENT:

- This list is provided to assist with prescribing decisions for select common conditions that have multiple clinically appropriate options.
- Our current complete list of covered medications, also called a preferred drug list or “formulary,” and our coverage guidelines for drugs on our formulary that require a prior authorization are included online at <https://www.umpquahealth.com/pharmacy-services/>
- For the list of CPT codes for medications covered under the medical benefit, refer to the Prior Authorization Grid on the [Prior Authorization page](#).

MEDICATION LIST:

| THERAPEUTIC CLASS | NON-PREFERRED DRUG | ↔ | ALTERNATIVE PREFERRED DRUG |
|---|---|---|--|
| ALLERGY | | | |
| ANTIHISTAMINES | <ul style="list-style-type: none"> • CETIRIZINE CHEW TAB • FEXOFENADINE TABLET • LEVOCETIRIZINE TABLET | ↔ | <ul style="list-style-type: none"> • CETIRIZINE 1 MG/ML ORAL SOLUTION • CETIRIZINE TABLET • LORATADINE TABLET |
| NASAL ANTI-INFLAMMATORY STEROIDS | <ul style="list-style-type: none"> • FLONASE ALLERGY RELIEF 50 MCG SPRAY | ↔ | <ul style="list-style-type: none"> • FLUTICASONE PROPIONATE 50 MCG NASAL SPRAY SUSPENSION • IPRATROPIUM BROMIDE 21 MCG NASAL SPRAY |
| ANTHELMINTICS | | | |
| ANTHELMINTICS | <ul style="list-style-type: none"> • ALBENDAZOLE 200 MG TABLET | ↔ | <ul style="list-style-type: none"> • REESE’S PINWORM 50 MG/ML ORAL SUSPENSION |
| ASTHMA AND COPD | | | |
| ANTICHOLINERGICS, ORALLY INHALED LONG ACTING | <ul style="list-style-type: none"> • TUDORZA PRESSAIR 400 MCG INHALER | ↔ | <ul style="list-style-type: none"> • INCRUSE ELLIPTA 62.5 MCG INHALER |
| BETA-ADRENERGIC AGENTS, INHALED, SHORT ACTING | <ul style="list-style-type: none"> • PROAIR RESPICLICK 90 MCG INHALER | ↔ | <ul style="list-style-type: none"> • ALBUTEROL SULFATE HFA 90 MCG INHALER • LEVALBUTEROL TARTRATE HFA 45 MCG INHALER |
| BETA-ADRENERGIC AND GLUCOCORTICOID COMBINATIONS | <ul style="list-style-type: none"> • ADVAIR HFA INHALER • BREO ELLIPTA INHALER | ↔ | <ul style="list-style-type: none"> • FLUTICASONE-SALMETEROL INHALERS (GENERIC AIRDUO, GENERIC ADVAIR DISKUS, AND WIXELA INHUB) |
| GLUCOCORTICOID | <ul style="list-style-type: none"> • FLOVENT HFA 220 MCG INHALER | ↔ | <ul style="list-style-type: none"> • ARNUITY ELLIPTA INHALER • ASMANEX INHALER • ASMANEX HFA INHALER • FLOVENT DISKUS INHALER • FLOVENT HFA 44 MCG & 110 MCG INHALER STRENGTHS • PULMICORT FLEXHALER • QVAR REDIHALER |

| THERAPEUTIC CLASS | NON-PREFERRED DRUG | ↔ | ALTERNATIVE PREFERRED DRUG |
|--|---|---|---|
| BEHAVIORAL HEALTH - OTHER | | | |
| ADRENERGICS, AROMATIC, NON-CATECHOLAMINE | <ul style="list-style-type: none"> VYVANSE 30 MG CAPSULE | ↔ | <ul style="list-style-type: none"> DEXTROAMPHETAMINE IR TABLET METHYLPHENIDATE IR TABLET METHYLPHENIDATE ER 10 MG AND 20 MG TABLET AGE LIMITS FOR ALL ALTERNATIVES, PA REQUIREMENTS MAY APPLY |
| SEDATIVE-HYPNOTICS, NON-BARBITURATE | <ul style="list-style-type: none"> ESZOPICLONE 2 MG TABLETS | ↔ | <ul style="list-style-type: none"> ZOLPIDEM TARTRATE IR TABLET (QUANTITY LIMITS APPLY) |
| CARDIVASCULAR DISEASE - HYPERTENSION | | | |
| BETA-ADRENERGIC BLOCKING AGENTS | <ul style="list-style-type: none"> BYSTOLIC 10 MG TABLET | ↔ | <ul style="list-style-type: none"> ACEBUTOLOL CAPSULE ATENOLOL TABLET BISOPROLOL FUMARATE TABLET METOPROLOL SUCCINATE ER TABLET METOPROLOL TARTRATE TABLET NADOLOL TABLET PROPRANOLOL ER CAPSULE PROPRANOLOL TABLET SOTALOL TABLET |
| CONTRACEPTION/OXYTOCICS | | | |
| CONTRACEPTIVES, ORAL | <ul style="list-style-type: none"> LO LOESTRIN FE 1-10 TABLET | ↔ | <ul style="list-style-type: none"> SPRINTEC TABLET JUNEL FE TABLET PORTIA TABLET NORA-BE TALBET MANY ADDITIONAL OPTIONS FOR ORAL BIRTH CONTROL IS FOUND ON THE FORMULARY |
| COUGH AND COLD | | | |
| DECONGESTANTS, ORAL | <ul style="list-style-type: none"> PSEUDOEPHEDRINE ER 120 MG TAB SUDOGEST 12 HOUR 120 MG CAPLET | ↔ | <ul style="list-style-type: none"> SUDOGEST 30MG OR 60MG TABLET (QUANTITY LIMITS APPLY) |
| NON-NARCOTIC ANTITUSSIVE AND EXPECTORANT COMB. | <ul style="list-style-type: none"> MUCINEX ER 600 MG TABLET | ↔ | <ul style="list-style-type: none"> MUCUS ER 600MG TABLET MUCUS ER 1,200MG TABLET GUAIFENESIN TABLET QUANTITY LIMITS MAY APPLY TO THESE OPTIONS |
| DERMATOLOGY – ANTIINFECTIVE | | | |
| TOPICAL ANTIBIOTICS | <ul style="list-style-type: none"> CLINDAMYCIN PH 1% SOLUTION | ↔ | <ul style="list-style-type: none"> MUPIROCIN 2% TOPICAL OINTMENT |

| THERAPEUTIC CLASS | NON-PREFERRED DRUG | ↔ | ALTERNATIVE PREFERRED DRUG |
|---|---|---|--|
| | | | <ul style="list-style-type: none"> CLINDAMYACIN 1% TOPICAL SOLUTION (PA REQUIRED) |
| TOPICAL ANTIFUNGALS | <ul style="list-style-type: none"> CLOTRIMAZOLE 1% SOLUTION ECONAZOLE NITRATE 1% CREAM NYSTATIN-TRIAMCINOLONE CREAM/OINTMENT | ↔ | <ul style="list-style-type: none"> CLOTRIMAZOLE 1% CREAM TERBINAFFINE 1% CREAM MICONAZOLE NITRATE 2% CREAM NYSTATIN CREAM/OINTMENT/POWDER TRIAMCINOLONE CREAM/OINTMENT (AVAILABLE SEPARATELY FROM NYSTATIN) |
| TOPICAL ANTIFUNGAL/ANTIINFLAMMATORY, STERIOD AGENT | <ul style="list-style-type: none"> CLOTRIMAZOLE-BETAMETHASONE CREAM | ↔ | <ul style="list-style-type: none"> CLOTRIMAZOLE 1% CREAM BETAMETHASONE DP AUGMENTED CREAM BETAMETHASONE VALERATE CREAM EACH AVAILABLE SEPARATELY |
| DERMATOLOGY – ANTIINFLAMMATORY | | | |
| TOPICAL ANTI-INFLAMMATORY STEROIDAL | <ul style="list-style-type: none"> BETAMETHASONE DP 0.05% CREAM/OINTMENT FLUOCINONIDE 0.05% SOLUTION | ↔ | <ul style="list-style-type: none"> BETHAMETHASONE DP AUGMENTED CREAM/OINTMENT BETAMETHASONE VALERATE CREAM/OINTMENT TRIAMCINOLONE CREAM/OINTMENT HYDROCORTISONE CREAM/OINTMENT (QUANTITY LIMITS APPLY) |
| DERMATOLOGY - MISCELLANEOUS | | | |
| TOPICAL LOCAL ANESTHETICS | <ul style="list-style-type: none"> LIDOCAINE 3% CREAM LIDOCAINE 5% OINTMENT | ↔ | <ul style="list-style-type: none"> LIDOCAINE-PRILOCAINE 2.5%-2.5% TOPICAL CREAM |
| DIABETES | | | |
| ANTIHYPERGLY,INCRETIN MIMETIC(GLP-1 RECEPTOR AGONIST) | <ul style="list-style-type: none"> OZEMPIC PEN TRULICITY PEN VICTOZA PEN | ↔ | <ul style="list-style-type: none"> BYETTA, ADLYXIN, AND RYBLESUS PA REQUIRED FOR ALL OPTIONS, OTHER ALTERNATIVES MAY APPLY |
| ANTIHYPERGLYCEMIC-SODIUM/GLUCOCOTRANSPORT2(SGLT2)INHIBITORS | <ul style="list-style-type: none"> FARXIGA TABLET JARDIANCE TABLET | ↔ | <ul style="list-style-type: none"> STEGLATRO (PA REQUIRED; OTHER ALTERNATIVES MAY APPLY) |
| ANTIHYPERGLYCEMIC, DPP-4 INHIBITORS | <ul style="list-style-type: none"> JANUVIA TABLET | ↔ | <ul style="list-style-type: none"> ALOGLIPTIN (PA REQUIRED; OTHER ALTERNATIVES MAY APPLY) |
| INSULINS | <ul style="list-style-type: none"> BASAGLAR KWIKPEN LANTUS VIAL LANTUS SOLOSTAR PEN | ↔ | <ul style="list-style-type: none"> SEMGLEE PEN/VIALS |

| THERAPEUTIC CLASS | NON-PREFERRED DRUG | ↔ | ALTERNATIVE PREFERRED DRUG |
|--|--|---|--|
| EAR - GENERAL DISORDERS | | | |
| EAR PREPARATIONS, ANTIBIOTICS | <ul style="list-style-type: none"> CORTISPORIN-TC EAR SUSPENSION | ↔ | <ul style="list-style-type: none"> NEOMYCIN-POLYMYXIN-HYDROCORTISONE 3.5-10K-1 OTIC SOLUTION OXFLOXACIN 0.3% OTIC DROPS |
| HORMONAL DEFICIENCY | | | |
| ANDROGENIC AGENTS | <ul style="list-style-type: none"> TESTOSTERONE 1.62% GEL PUMP | ↔ | <ul style="list-style-type: none"> TESTOSTERONE CYPIONATE 200MG/ML (PA REQUIRED) |
| INFECTIOUS DISEASE - VIRAL | | | |
| ANTIVIRALS, GENERAL | <ul style="list-style-type: none"> FAMCICLOVIR TABLET | ↔ | <ul style="list-style-type: none"> ACYCLOVIR CAPSULE/TABLET VALACYCLOVIR TABLET (QUANTITY LIMITS MAY APPLY) |
| INFLAMMATORY DISEASE | | | |
| ANTI-INFLAMMATORY TUMOR NECROSIS FACTOR INHIBITOR | <ul style="list-style-type: none"> HUMIRA PEN/SYRINGE | ↔ | <ul style="list-style-type: none"> INFLECTRA (PA REQUIRED; OTHER ALTERNATIVES MAY APPLY) |
| GLUCOCORTICOIDS | <ul style="list-style-type: none"> BUDESONIDE EC CAPSULE | ↔ | <ul style="list-style-type: none"> BALSALAZIDE 750MG CAPSULE SULFASALAZINE IR OR ER TABLET PREDNISONE TABLET METHYLPREDNISOLONE TABLET DEXAMETHASONE TABLET PREDNISOLONE SODIUM PHOSPHATE SOLUTION |
| LOWER GASTROINTESTINAL DISORDERS - BOWEL INFLAMMATORY | | | |
| RECTAL PREPARATIONS | <ul style="list-style-type: none"> ANUCORT-HC SUPPOSITORY | ↔ | <ul style="list-style-type: none"> LIDOCAINE-PRILOCAINE 2.5%-2.5% TOPICAL CREAM |
| DRUG TX-CHRONIC INFLAM. COLON DX, 5-AMINOSALICYLATE | <ul style="list-style-type: none"> PENTASA CAPSULE | ↔ | <ul style="list-style-type: none"> BALSALAZIDE 750MG CAPSULE SULFASALAZINE IR OR ER TABLET MESALAMINE (PA REQUIRED) |
| SKELETAL MUSCLE DISORDER | | | |
| SKELETAL MUSCLE RELAXANTS | <ul style="list-style-type: none"> CARISOPRODOL TABLET METAXALONE TABLET | ↔ | <ul style="list-style-type: none"> BACLOFEN TABLET CYCLOBENZAPRINE TABLET METHOCARBAMOL TABLET TIZANIDINE TABLET QUANTITY LIMITS APPLY TO ALL THESE OPTIONS |
| UPPER GASTROINTESTINAL DISORDERS - ULCER DISEASE | | | |
| ANTI-ULCER PREPARATIONS | <ul style="list-style-type: none"> SUCRALFATE 1 GM/10 ML SUSPENSION | ↔ | <ul style="list-style-type: none"> SUCRALFATE 1 GM TABLET |
| PROTON-PUMP INHIBITORS | <ul style="list-style-type: none"> ESOMEPRAZOLE MAGNESIUM DR CAPSULE | ↔ | <ul style="list-style-type: none"> OMEPRAZOLE DR CAPSULE/TABLET PANTOPRAZOLE DR TABLET LANSOPRAZOLE DR CAPSULE |

| THERAPEUTIC CLASS | NON-PREFERRED DRUG | ↔ | ALTERNATIVE PREFERRED DRUG |
|---|---|---|---|
| | | | <ul style="list-style-type: none"> • QUANTITY LIMITS APPLY TO ALL THESE OPTIONS |
| URINARY TRACT - FUNCTIONAL DISORDERS | | | |
| OVERACTIVE BLADDER AGENTS, BETA-3 ADRENERGIC RECEPTOR | <ul style="list-style-type: none"> • MYRBETRIQ ER TABLET | ↔ | <ul style="list-style-type: none"> • TROSPIUM • OXYBUTYNIN IR AND ER • TOLTERODINE IR AND ER (STEP THERAPY REQUIRED) |

ALPHABETICAL DRUG INDEX

24HOUR ALLERGY, 9
3-DAY VAGINAL CREAM, 127
8 HOUR ACETAMINOPHEN, 107
8 HOUR PAIN RELIEF, 107
8HR ARTHRITIS PAIN, 107
8HR ARTHRITIS PAIN RELIEF, 107
8HR MUSCLE ACHES-PAIN, 107
A THRU Z, 131
A THRU Z ADVANCED FORMULA, 134
A THRU Z SELECT, 131
ABACAVIR, 87
ABACAVIR-LAMIVUDINE, 86
ABACAVIR-LAMIVUDINE-ZIDOVUDINE, 87
ABIRATERONE ACETATE, 101
ABSORICA, 51
ACAMPROSATE CALCIUM, 19
ACARBOSE, 58
ACUTANE, 51
ACE AEROSOL CLOUD ENHANCER, 15
ACEBUTOLOL HCL, 28
ACEROLA C, 143
ACETAMINOPHEN, 107
ACETAMINOPHEN 8 HOUR, 108
ACETAMINOPHEN ER, 108
ACETAMINOPHEN EXTRA STRENGTH, 108
ACETAMINOPHEN-CODEINE, 115
ACETAZOLAMIDE, 69
ACETIC ACID, 62
ACETYLCYSTEINE, 106
ACID CONTROLLER, 125
ACID GONE, 124
ACID GONE ANTACID, 124
ACID REDUCER, 125
ACID-PEP, 125
ACITRETIN, 57
ACYCLOVIR, 86
ADACEL TDAP, 78
ADAPALENE, 52
ADDAPRIN, 91
ADLYXIN, 58
ADMELOG, 61
ADMELOG SOLOSTAR, 61
ADULT ASPIRIN REGIMEN, 73
ADULT GLYCERIN, 99
ADULT LOW DOSE ASPIRIN EC, 73
ADULT TUSSIN CHEST CONGESTION, 47
ADULT TUSSIN COUGH CONGEST DM, 49
ADULT TUSSIN DM, 49
ADULT WAL-TUSSIN, 47
ADULT WAL-TUSSIN DM, 49
ADVANCED ANTACID-ANTIGAS, 124
AEROCHAMBER MINI, 15
AEROCHAMBER MV, 15
AEROCHAMBER PLUS FLOW-VU, 15
AEROCHAMBER WITH FLOWSIGNAL, 15
AEROCHAMBER Z-STAT PLUS, 15
AEROTRACH PLUS, 15
AEROVENT PLUS, 15
AFIRMELLE, 41
AFTER PILL, 40
AFTERA, 40
AIMOVIG AUTOINJECTOR, 114
AJOVY AUTOINJECTOR, 114
AJOVY SYRINGE, 114
AK-POLY-BAC, 68
ALA-CORT, 55
ALBUTEROL SULFATE, 12
ALBUTEROL SULFATE HFA, 12
ALENDRONATE SODIUM, 64
ALER-CAPS, 7
ALEVE, 92
ALFUZOSIN HCL ER, 126
ALKA-SELTZER PLUS ALLERGY, 20
ALL DAY ALLERGY, 9
ALL DAY PAIN RELIEF, 92
ALL DAY RELIEF, 92
ALLER-CHLOR, 7
ALLERCLEAR, 10
ALLER-G-TIME, 7
ALLERGY, 7, 9
ALLERGY MEDICATION, 7
ALLERGY MEDICINE, 7
ALLERGY RELIEF, 7, 9, 10
ALLERGY-TIME, 7
ALLER-TEC, 9
ALLOPURINOL, 70
ALOGLIPTIN, 58
ALOPHEN PILLS, 94
ALORA, 74
ALTAVERA, 41
ALUM-MAG HYDROXIDE-SIMETHICONE, 124
ALYACEN, 44
ALYQ, 33
AMABELZ, 76

AMANTADINE, 117
AMILORIDE HCL, 33
AMIODARONE HCL, 23
AMLODIPINE BESYLATE, 30
AMLODIPINE BESYLATE-BENAZEPRIL, 24
AMNESTEEM, 51
AMOXICILLIN, 82, 83
AMOXICILLIN-CLAVULANATE POT ER, 82
AMOXICILLIN-CLAVULANATE POTASS, 82
AMPICILLIN TRIHYDRATE, 83
ANALPRAM HC, 57
ANASTROZOLE, 102
ANIMAL CHEWS, 137
ANORO ELLIPTA, 13
ANTACID, 123, 124
ANTACID CALCIUM, 123
ANTACID EXTRA STRENGTH, 124
ANTACID M, 124
ANTACID PLUS ANTI-GAS, 124
ANTACID PLUS GAS RELIEF, 124
ANTACID-ANTIGAS, 124
ANTI-DIARRHEAL, 93
ANTIFUNGAL, 52, 53
ANTIFUNGAL CREAM, 53
ANTIFUNGAL RINGWORM, 52
ANTI-ITCH, 55
ANTITUSSIVE DM, 49
ANTIVERT, 10
APHEN, 108
APREPITANT, 10
APRI, 39
APRODINE, 46
APTIVUS, 86
AQUAPHOR ITCH RELIEF, 55
ARANELLE, 44
ARMOUR THYROID, 66, 67
ARNUIITY ELLIPTA, 14
ARTHRITIS PAIN, 56, 108
ARTHRITIS PAIN RELIEF, 56, 108
ARTHRITIS PAIN RELIEVER, 56, 108
ARTHRITIS PAIN RELIEVING, 56
ASA-BUTALB-CAFFEINE-CODEINE, 115
ASCOMP WITH CODEINE, 115
ASCORBIC ACID, 143
ASMANEX, 14
ASMANEX HFA, 15
ASPIRIN, 73, 106
ASPIRIN EC, 73, 106
ASPIR-TRIN, 107
ATAZANAVIR SULFATE, 87
ATENOLOL, 28
ATENOLOL-CHLORTHALIDONE, 30
ATHENOL, 108
ATHLETE'S FOOT, 52, 53
ATHLETIC FOOT CREAM, 53
ATORVASTATIN CALCIUM, 34
ATROPINE SULFATE, 70
ATROVENT HFA, 11
AUBRA, 41
AUBRA EQ, 41
AUGMENTIN, 82
AUROVELA, 43
AUROVELA FE, 42
AVIANE, 41
AVITA, 52
AVONEX, 104
AVONEX PEN, 104
AYUNA, 41
AZACITIDINE, 101
AZATHIOPRINE, 78
AZITHROMYCIN, 80, 81
AZURETTE, 39
B-1, 142
B-12, 142
B-12 DOTS, 142
B-6, 143
BACITRACIN, 68
BACITRACIN-POLYMYXIN, 68
BACLOFEN, 120
BALSALAZIDE DISODIUM, 92
BALZIVA, 44
BANOPHEN, 7, 8
BAQSIMI, 60
BAYER ADVANCED, 107
BAZA ANTIFUNGAL, 53
BD VERITOR SYSTEM SARS-COV-2, 105
BENADRYL ALLERGY, 8
BENAZEPRIL HCL, 26, 27
BENZONATATE, 46
BENZTROPINE MESYLATE, 117
BEST FIBER, 99
BETAMETHASONE DIPROP AUGMENTED, 54
BETAMETHASONE VALERATE, 54
BETATEMP, 108
BETHANECHOL CHLORIDE, 100
BEVESPI AEROSPHERE, 13
BEXAROTENE, 104
BEXSERO, 77
BIMATOPROST, 69
BINAXNOW COVID AG CARD HOME TST, 105

BINAXNOW COVID-19 AG CARD, 105
 BINAXNOW COVID-19 AG SELF TEST, 105
 BIOCOTRON, 49
 BISACODYL, 94, 99
 BISA-LAX, 94
 BISOPROLOL FUMARATE, 28, 29
 BISOPROLOL-HYDROCHLOROTHIAZIDE, 30
 BLEPH-10, 68
 BLISOVI FE, 42
 BOOSTRIX TDAP, 78
 BREATHERITE, 15
 BREATHERITE SPACER-ADULT MASK, 15
 BREATHERITE SPACER-INFANT MASK, 15
 BREATHERITE SPACER-LG CHLD MSK, 15
 BREATHERITE SPACER-NEONATE MSK, 15
 BREATHERITE SPACER-SM CHLD MSK, 15
 BREATHRITE, 15
 BRIELLYN, 44
 BRIMONIDINE TARTRATE, 69
 BROMOCRIPTINE MESYLATE, 117
 BUDESONIDE, 14
 BUDESONIDE-FORMOTEROL FUMARATE, 13
 BUFFERED ASPIRIN, 107
 BUFFERIN, 107
 BUMETANIDE, 33
 BUPRENORPHINE HCL, 116
 BUPRENORPHINE-NALOXONE, 116, 117
 BUPROPION HCL SR, 122
 BUTALB-ACETAMINOPH-CAFF-CODEIN, 115
 BUTALBITAL COMPOUND-CODEINE, 115
 BUTALBITAL-ACETAMINOPHEN, 106
 BUTALBITAL-ACETAMINOPHEN-CAFFE, 106
 BUTALBITAL-ASPIRIN-CAFFEINE, 106
 BYDUREON BCISE, 58
 BYETTA, 58
 C-1000, 143
 C-1000 WITH ROSE HIPS, 143
 C-500, 143
 CABERGOLINE, 65
 CALCIPOTRIENE, 57, 58
 CALCITONIN-SALMON, 64
 CALCITRIOL, 144
 CALCIUM, 128, 129
 CALCIUM 250-VIT D3, 128
 CALCIUM 500 + VIT D, 129
 CALCIUM 500-VIT D3, 129
 CALCIUM 600 + VIT D, 129
 CALCIUM 600+D PLUS MINERALS, 128
 CALCIUM 600+MINERALS, 128
 CALCIUM 600-D3-MINERALS, 128
 CALCIUM 600-VIT D3, 128, 129
 CALCIUM 600-VIT D3-MINERAL, 128
 CALCIUM ACETATE, 63
 CALCIUM ANTACID, 123
 CALCIUM CARBONATE, 123, 128
 CALCIUM CITRATE, 130
 CALCIUM CITRATE - VITAMIN D, 130
 CALCIUM CITRATE - VITAMIN D3, 130
 CALCIUM CITRATE-D, 130
 CALCIUM CITRATE-VIT D, 130
 CALCIUM CITRATE-VIT D3, 130
 CALCIUM CITRATE-VITAMIN D3, 130
 CALCIUM GLUCONATE, 130
 CALCIUM MAGNESIUM, 130
 CALCIUM-MAGNESIUM, 130
 CALCIUM-MAGNESIUM-ZINC, 130
 CAL-GEST, 124
 CAMILA, 43
 CAMPTOSAR, 102
 CAPECITABINE, 101
 CAPRELSA, 103
 CAPSAICIN, 56
 CAPSAICIN HEAT PATCH, 56
 CAPSAICIN HOT PATCH, 56
 CAPSICUM HOT PATCH, 56
 CAPTOPRIL, 27
 CAPTOPRIL-HYDROCHLOROTHIAZIDE, 24, 25
 CARBAMAZEPINE, 119
 CARBAMAZEPINE ER, 119
 CARBIDOPA-LEVODOPA, 117
 CARBIDOPA-LEVODOPA ER, 117
 CARBIDOPA-LEVODOPA-ENTACAPONE, 117, 118
 CARNITOR SF, 106
 CARTEOLOL HCL, 69
 CARTIA XT, 30
 CARVEDILOL, 25
 CAZANT, 39
 CEFACLOR, 80
 CEFACLOR ER, 80
 CEFADROXIL, 79
 CEFDINIR, 80
 CEFIXIME, 80
 CEFPODOXIME PROXETIL, 80
 CEFPROZIL, 80
 CEFUROXIME, 80
 CELECOXIB, 90
 CENTRAL-VITE, 136
 CENTRAVITES, 136
 CENTRUM COMPLETE, 134
 CENTURY, 134

CEPHALEXIN, 80
CERTA PLUS, 134
CERTAVITE SENIOR, 136
CERTAVITE-ANTIOXIDANT, 136
CETIRIZINE HCL, 9, 10
CHATEAL, 41
CHATEAL EQ, 41
CHEST CONGESTION RELIEF, 47
CHEST CONGESTION RELIEF DM, 49
CHILD CHEW + IRON, 137
CHILD FEVER REDUCER, 108
CHILD FEVER REDUCER-PAIN RELVR, 108
CHILD LITTLE ANIMALS VITAMINS, 137
CHILD PAIN REL-FEVER REDUCER, 108
CHILDREN'S ACETAMINOPHEN, 108
CHILDREN'S ALL DAY ALLERGY, 10
CHILDREN'S ALLERGY, 8, 10
CHILDREN'S ALLERGY RELIEF, 8, 10
CHILDREN'S ASPIRIN, 73
CHILDREN'S CETIRIZINE HCL, 10
CHILDREN'S CHEST CONGESTION, 47
CHILDREN'S CHEW MULTIVITAMIN, 139
CHILDREN'S CHEWABLE, 137
CHILDREN'S DIPHENHYDRAMINE, 8
CHILDREN'S EASY-MELTS, 108
CHILDREN'S FERROUS SULFATE, 132
CHILDREN'S FEVER REDUCER, 108
CHILDREN'S IBUPROFEN, 91
CHILDREN'S IRON, 132
CHILDREN'S LORATADINE, 10
CHILDREN'S MAPAP, 108
CHILDREN'S MUCUS RELIEF, 47
CHILDREN'S MULTIVITAMIN, 139
CHILDREN'S NON-ASPIRIN, 108
CHILDREN'S PAIN RELIEF, 108
CHILDREN'S PAIN RELIEVER, 109
CHILDREN'S PAIN-FEVER, 109
CHILDREN'S PROFEN IB, 91
CHILDREN'S PROFENIB, 91
CHILDREN'S SILFEDRINE, 50
CHILDREN'S TYLENOL, 109
CHILDREN'S WAL-DRYL ALLERGY, 8
CHILDREN'S WAL-ZYR, 10
CHLORHEXIDINE GLUCONATE, 104
CHLORHIST, 7
CHLOROQUINE PHOSPHATE, 86
CHLORPHENIRAMINE MALEATE, 7
CHLORTABS, 7
CHLORTHALIDONE, 33, 34
CHLORZOXAZONE, 121
CHOLESTYRAMINE, 35
CHOLESTYRAMINE LIGHT, 35
CICLOPIROX, 52
CILOSTAZOL, 73
CIMETIDINE, 125
CIPRO, 83
CIPROFLOXACIN, 83
CIPROFLOXACIN HCL, 68, 83
CIPROFLOXACIN-DEXAMETHASONE, 62
CITRACAL + D MAXIMUM, 130
CITRATE OF MAGNESIA, 95
CITROMA, 95
CLARAVIS, 51
CLARITHROMYCIN, 81
CLARITHROMYCIN ER, 81
C-LAX LAXATIVE, 94
CLEARLAX, 96
CLEVER CHOICE HOLDING CHAMBER, 16, 17
CLIMARA PRO, 76
CLINDAMYCIN (PEDIATRIC), 85
CLINDAMYCIN HCL, 85
CLINDAMYCIN PHOSPHATE, 52, 127
CLOBETASOL EMOLLIENT, 54
CLOBETASOL PROPIONATE, 54
CLONAZEPAM, 119
CLONIDINE HCL, 28
CLOPIDOGREL, 74
CLOTRIMAZOLE, 53, 84, 127
CLOTRIMAZOLE AF, 53
CLOTRIMAZOLE-3, 127
CLOTRIMAZOLE-7, 127
CODEINE SULFATE, 110
CODEINE-GUAIFENESIN, 49
COLCHICINE, 70
COLD, ALLERGY & SINUS, 46
COLESTIPOL HCL, 35
COL-RITE, 94
COMBIPATCH, 76
COMBIVENT RESPIMAT, 13
COMFORT GEL, 124
COMPACT SPACE CHAMBER, 16, 17
COMPLETE ALLERGY, 8
COMPRO, 11
CONSTULOSE, 95
CORAL CALCIUM, 128
CORTAID, 55
CORTISONE, 55
CORTISONE WITH ALOE, 55
CORTIZONE-10, 55
CORTIZONE-10 PLUS, 55

COSENTYX (2 SYRINGES), 57
 COSENTYX PEN, 57
 COSENTYX PEN (2 PENS), 57
 COSENTYX SYRINGE, 57
 COUGH DM, 49
 COUGH SYRUP, 47
 COUGH SYRUP DM, 49
 COVARYX, 74
 COVARYX H.S., 74
 COVID19 SPECIMEN COLLECT NCPDP, 105
 COVID19 TEST ADM BY PHARMACIST, 105
 CREON, 122
 CROMOLYN SODIUM, 15
 CRYSELLE, 46
 CUT N CRUSH, 100
 CYANOCOBALAMIN INJECTION, 142
 CYCLAFEM, 44
 CYCLOBENZAPRINE HCL, 121
 CYCLOPENTOLATE HCL, 70
 CYCLOPHOSPHAMIDE, 100
 CYCLOSPORINE, 78
 CYCLOSPORINE MODIFIED, 78, 79
 CYRED, 39
 CYRED EQ, 39
 CYTRA-2, 126
 D3 DOTS, 144
 D3-2000, 144
 DACTINOMYCIN, 101
 DAILY FIBER, 96, 97
 DAILY MULTIPLE, 134
 DAILY VALUE, 134
 DAILY VITAMIN + IRON, 135
 DAILY VITAMIN FORMULA, 134
 DAILY VITAMIN FORMULA-MINERALS, 135
 DAILY VITE, 134
 DAILY VITE WITH IRON, 135
 DAILY-VITE, 134
 DANAZOL, 65
 DAPSONE, 85
 DASETTA, 44
 DEBLITANE, 43
 DECADRON, 89
 DECARA, 144
 DELTA D3, 144
 DEPO-SUBQ PROVERA 104, 39
 DERMAFUNGAL, 53
 DESMOPRESSIN ACETATE, 63
 DESOGESTREL-ETHINYL ESTRADIOL, 39
 DESOGESTR-ETH ESTRAD ETH ESTRA, 39
 DEXAMETHASONE, 89
 DEXAMETHASONE INTENSOL, 90
 DEXAMETHASONE SODIUM PHOSPHATE, 67
 DEXMETHYLPHENIDATE HCL, 21, 22
 DEXMETHYLPHENIDATE HCL ER, 22
 DEXTROAMPHETAMINE SULFATE, 19
 DEXTROAMPHETAMINE SULFATE ER, 19
 DEXTROAMPHETAMINE-AMPHET ER, 18
 DEXTROAMPHETAMINE-AMPHETAMINE, 18, 19
 DIABETIC TUSSIN, 47
 DIABETIC TUSSIN DM, 49
 DIABETIC TUSSIN EX, 47
 DIALYVITE VITAMIN D, 144
 DIAMODE, 93
 DIARRHEA RELIEF, 93
 DICLOFENAC SODIUM, 56, 67, 90
 DICLOXACILLIN SODIUM, 83
 DICYCLOMINE HCL, 123
 DIGESTIVE RELIEF, 93
 DIGITEK, 24
 DIGOX, 24
 DIGOXIN, 24
 DILANTIN, 120
 DILTIAZEM 12HR ER, 30
 DILTIAZEM 24HR ER, 31
 DILTIAZEM 24HR ER (CD), 31
 DILTIAZEM 24HR ER (LA), 31
 DILTIAZEM 24HR ER (XR), 31
 DILTIAZEM HCL, 31
 DILT-XR, 31
 DIMETHYL FUMARATE, 104
 DINO-LIFE, 137
 DINO-LIFE EXTRA C MULTIVITAMIN, 137
 DINO-LIFE MULTIVITAMIN, 137
 DIOCTO, 94
 DIPHEDRYL, 8
 DIPHEDRYL ALLERGY, 8
 DIPHEN, 8
 DIPHENHIST, 8
 DIPHENHYDRAMINE HCL, 8, 20
 DIPHENOXYLATE-ATROPINE, 93
 DISOPYRAMIDE PHOSPHATE, 23
 DISULFIRAM, 19
 DOCEFREZ, 103
 DOCETAXEL, 103
 DOCU LIQUID, 94
 DOCUPRENE, 94
 DOCUSATE CALCIUM, 94
 DOCUSATE SODIUM, 94, 95
 DOCUZEN, 98
 DOK, 95

DONEPEZIL HCL, 18
 DONEPEZIL HCL ODT, 18
 DORZOLAMIDE HCL, 69
 DORZOLAMIDE-TIMOLOL, 69
 DOTTI, 75
 DOXAZOSIN MESYLATE, 25
 DOXYCYCLINE HYCLATE, 83, 84
 DOXYCYCLINE MONOHYDRATE, 84
 DRAMAMINE LESS DROWSY, 10
 DROSPIRENONE-ETHINYL ESTRADIOL, 40
 DRY SOL, 56
 DSS, 95
 DULCOEASE, 95
 DULCOLAX, 96
 DULCOLAX STOOL SOFTENER, 95
 DULERA, 14
 DUTASTERIDE, 126
 DUTASTERIDE-TAMSULOSIN, 126
 D-VI-SOL, 144
 E.E.S. 400, 81
 EASIVENT, 16, 18
 EC-NAPROXEN, 92
 ECONTRA EZ, 40
 ECONTRA ONE-STEP, 40
 ECOTRIN, 107
 ED-APAP, 109
 ED-SPAZ, 123
 EDURANT, 87
 EEMT, 74
 EEMT H.S., 74
 EFAVIRENZ, 87
 EFAVIRENZ-EMTRIC-TENOFOV DISOP, 88
 EFAVIRENZ-LAMIVU-TENOFOV DISOP, 88
 EFFACLAR ADAPALENE, 52
 EFFER-K, 63
 ELEMENTAL ZINC, 145
 ELIGARD, 63, 64
 ELINEST, 46
 ELIQUIS, 71
 ELITE-OB, 134
 ELLA, 46
 ELLUME COVID-19 HOME TEST, 105
 ELURYNG, 38
 EMCYT, 104
 EMGALITY PEN, 114
 EMGALITY SYRINGE, 114, 115
 EMOQUETTE, 39
 EMTRICITABINE-TENOFOVIR DISOP, 86
 ENALAPRIL MALEATE, 27
 ENALAPRIL-HYDROCHLOROTHIAZIDE, 25
 ENBREL, 89
 ENBREL SURECLICK, 89
 ENDOCET, 116
 ENEMA, 99
 ENEMA DISPOSABLE, 99
 ENOXAPARIN SODIUM, 72, 73
 ENPRESSE, 41
 ENSKYCE, 39
 ENTACAPONE, 118
 ENTRESTO, 37
 ENULOSE, 93
 EPINEPHRINE, 100
 EPITOL, 119
 EPOGEN, 71
 ERBITUX, 101
 ERLOTINIB HCL, 102
 ERRIN, 43
 ERY-TAB, 81
 ERYTHROCIN STEARATE, 81
 ERYTHROMYCIN, 68, 81
 ERYTHROMYCIN ETHYLSUCCINATE, 81
 ESTARYLLA, 45
 ESTRADIOL, 75, 128
 ESTRADIOL (ONCE WEEKLY), 75
 ESTRADIOL (TWICE WEEKLY), 75
 ESTRADIOL-NORETHINDRONE ACETAT, 76
 ESTROGEL, 75
 ESTROGEN-METHYLTESTOSTERONE, 74
 ETHAMBUTOL HCL, 85
 ETHOSUXIMIDE, 119
 ETHYNODIOL-ETHINYL ESTRADIOL, 40
 ETODOLAC, 91
 ETONOGESTREL-ETHINYL ESTRADIOL, 38
 ETOPOSIDE, 103
 ETRAVIRINE, 87
 EUTHYROX, 65, 66
 EVAC-U-GEN, 98
 EVAMIST, 75
 EVEROLIMUS, 102
 EXEMESTANE, 102
 EXPECTA PRENATAL, 139
 EXPECTORANT, 47
 EXPECTORANT COUGH SYRUP, 47
 EXPECTORANT DM, 49
 EXTREME OMEGA-3 MICROGEL, 36, 37
 EZ NITE SLEEP, 20
 EZETIMIBE, 35
 FALMINA, 41
 FAMOTIDINE, 125
 FAST RELIEF LAXATIVE, 99

FE C PLUS, 133
FELODIPINE ER, 32
FEMYNOR, 45
FENESIN IR, 47
FENOFIBRATE, 35
FENTANYL, 111
FEOSOL, 132
FERATE, 131
FEROSUL, 132
FERREX 150, 132
FERREX 28, 132
FERRO-TIME, 132
FERROUS GLUCONATE, 131
FERROUS SULFATE, 132
FEVER REDUCER-PAIN RELIEVER, 109
FEVERALL, 109
FIBER, 94, 96, 97
FIBER LAX, 94
FIBER LAXATIVE, 94
FIBER TABS, 94
FIBER THERAPY, 94, 96, 97, 98
FIBER-LAX, 94
FINASTERIDE, 126
FISH OIL, 35, 36, 37, 145
FISH OIL CONCENTRATE, 35
FISH OIL OMEGA-3, 35, 36
FISH OIL-VIT D3, 36
FLANAX, 92
FLECAINIDE ACETATE, 23
FLEXICHAMBER, 16
FLEXICHAMBER MASK, 17
FLINTSTONES, 137
FLINTSTONES COMPLETE, 137
FLINTSTONES WITH EXTRA C, 137
FLINTSTONES WITH IRON, 137
FLOVENT DISKUS, 14
FLOVENT HFA, 14
FLUCONAZOLE, 84
FLUDROCORTISONE ACETATE, 90
FLUOCINOLONE ACETONIDE, 54
FLUOCINONIDE, 54
FLUORIDE, 130, 131
FLUOROMETHOLONE, 67
FLUOROURACIL, 57
FLURBIPROFEN, 91
FLUTAMIDE, 101
FLUTICASONE PROPIONATE, 10, 148
FLUTICASONE-SALMETEROL, 13
FLUZONE QUAD SOUTHERN HEM 2021, 78
FOAMING ANTACID, 124
FOLIC ACID, 131
FOLIVANE-OB, 136
FOLOTYN, 101
FOSAMPRENAVIR CALCIUM, 87
FOSINOPRIL SODIUM, 27
FOSINOPRIL-HYDROCHLOROTHIAZIDE, 25
FRUIT C-100, 143
FRUIT C-500, 143
FULL SPECTRUM B, 142
FUROSEMIDE, 33
FYAVOLV, 77
G TUSSIN AC, 49
GABAPENTIN, 119
GARDASIL 9, 78
GAS RELIEF, 122
GAVILYTE-C, 96
GAVILYTE-G, 96
GAVILYTE-N, 99
GEMCITABINE HCL, 101
GEMFIBROZIL, 36
GENERLAC, 93
GENGRAF, 79
GENOTROPIN, 64, 65
GENTAK, 68
GENTAMICIN SULFATE, 68
GENTLE LAXATIVE, 94, 99
GENTLELAX, 96
GENVOYA, 88
GERI-DRYL, 8
GERI-KOT, 98
GERI-LANTA, 124
GERI-MOX, 124
GERI-MUCIL, 96, 97
GERI-PECTATE, 93
GERI-TUSSIN, 47
GERI-TUSSIN DM, 49
G-FENESIN, 47
GILTUSS COUGH-CONGESTION, 49
GILTUSS DIABETIC, 49
GILTUSS EX, 47
GILTUSS HBP, 49
GLEOSTINE, 100
GLIMEPIRIDE, 58
GLIPIZIDE, 58
GLIPIZIDE ER, 58, 59
GLIPIZIDE XL, 59
GLIPIZIDE-METFORMIN, 59
GLUCAGEN, 104
GLUCAGON EMERGENCY KIT, 60
GLYBURIDE, 59

GLYBURIDE-METFORMIN HCL, 59, 60
 GLYCERIN, 99
 GLYCOPYRROLATE, 125
 GRANIX, 73
 GUAIASORB DM, 50
 GUAIAUSSIN AC, 49
 GUAIFENESIN, 47
 GUAIFENESIN AC, 49
 GUAIFENESIN DAC, 48
 GUAIFENESIN-CODEINE, 49
 GUAIFENESIN-DEXTROMETHORPHAN, 50
 GUANFACINE HCL, 28
 GUMMI BEAR MULTIVITAMIN, 137
 GVOKE HYOPEN 1-PACK, 60
 GVOKE HYOPEN 2-PACK, 60
 GVOKE PFS 1-PACK SYRINGE, 60
 GVOKE PFS 2-PACK SYRINGE, 60
 HAILEY, 43
 HAILEY FE, 42
 HAIR VITAMIN, 135
 HAIR, SKIN & NAILS, 135
 HAIR, SKIN AND NAILS, 135
 HEARTBURN ANTACID, 124
 HEARTBURN PREVENTION, 125
 HEARTBURN RELIEF, 124, 125
 HEATHER, 43
 HEMATINIC WITH FOLIC ACID, 131
 HI-CAL, 129
 HIDEX, 90
 HIGH POTENCY IRON, 132
 HIGH POTENCY MULTIVITAMIN, 134
 HOME LICE-BEDBUG-DUST MITE, 106
 HONEY BEARS, 138
 HONEY BEARS MULTIVITAMIN, 137
 HUMALOG, 61
 HUMALOG MIX 50-50, 61
 HUMALOG MIX 50-50 KWIKPEN, 61
 HUMALOG MIX 75-25, 61
 HUMATROPE, 65
 HUMIRA, 88
 HUMIRA PEN, 89
 HUMIRA PEN CROHN'S-UC-HS, 89
 HUMIRA PEN PSOR-UVEITS-ADOL HS, 89
 HUMULIN 70/30 KWIKPEN, 60
 HUMULIN 70-30, 60
 HUMULIN N, 62
 HUMULIN N KWIKPEN, 62
 HUMULIN R, 61
 HUMULIN R U-500, 62
 HUMULIN R U-500 KWIKPEN, 62
 HYCAMTIN, 102
 HYDRALAZINE HCL, 28
 HYDROCHLOROTHIAZIDE, 34
 HYDROCIL INSTANT, 97
 HYDROCODONE-ACETAMINOPHEN, 115, 116
 HYDROCODONE-HOMATROPINE MBR, 48
 HYDROCODONE-IBUPROFEN, 110
 HYDROCORTISONE, 55
 HYDROCORTISONE ACETATE, 55
 HYDROCORTISONE-ACETIC ACID, 62
 HYDROCORTISONE-PRAMOXINE, 57
 HYDROCREAM, 55
 HYDROMET, 48
 HYDROMORPHONE HCL, 111
 HYDROXYCHLOROQUINE SULFATE, 86
 HYDROXYUREA, 100
 HYDROXYZINE HCL, 9
 HYDROXYZINE PAMOATE, 9
 HYOSCYAMINE SULFATE, 123
 HYOSCYAMINE SULFATE ER, 123
 HYOSCYAMINE SULFATE SR, 123
 HYOSYNE, 123
 IBANDRONATE SODIUM, 64
 IBU, 91
 IBU-200, 91
 IBUPROFEN, 91
 IBUPROFEN IB, 91
 ICAR-C PLUS, 133
 ICLEVIA, 41
 ID NOW COVID-19 TEST KIT, 105
 IFEREX 150, 132
 IMATINIB MESYLATE, 102
 IMODIUM A-D, 93
 INCASSIA, 43
 IN-CHECK DIAL, 16
 INCRUSE ELLIPTA, 12
 INDAPAMIDE, 34
 INDOCIN, 91
 INDOMETHACIN, 91
 INFANT FEVER-PAIN RELIEVER, 109
 INFANT PAIN RELIEF, 109
 INFANT PAIN-FEVER, 109
 INFANTS' ACETAMINOPHEN, 109
 INFANTS' ADVIL, 91
 INFANTS' FEVER-PAIN RELIEVER, 109
 INFANTS IBUPROFEN, 91
 INFANTS' IBUPROFEN, 91
 INFANT'S IBUPROFEN, 91
 INFANT'S MOTRIN, 91
 INFANTS' PAIN RELIEF, 109

INFANTS' PAIN RELIEVER, 109
 INFANT'S PAIN RELIEVER, 109
 INFANTS' PAIN-FEVER, 109
 INFANTS PROFENIB, 91
 INSPIRACHAMBER, 16
 INSULIN ASPART, 60
 INSULIN ASPART FLEXPEN, 61
 INSULIN ASPART PENFILL, 61
 INSULIN ASPART PROT MIX 70-30, 62
 INSULIN GLARGINE-YFGN, 61
 INSULIN LISPRO, 61
 INSULIN LISPRO JUNIOR KWIKPEN, 61
 INSULIN LISPRO KWIKPEN U-100, 61
 INSULIN LISPRO PROTAMINE MIX, 61
 INTELISWAB COVID-19 RAPID TEST, 105
 INVIRASE, 88
 INZO ANTIFUNGAL, 53
 IPRATROPIUM BROMIDE, 12, 104, 148
 IPRATROPIUM-ALBUTEROL, 13
 I-PRIN, 91
 IRBESARTAN, 27
 IRBESARTAN-HYDROCHLOROTHIAZIDE, 26
 IRESSA, 102
 IRINOTECAN HCL, 102
 IRON, 131, 132
 IRON 100 PLUS, 133
 ISENTRESS, 88
 ISIBLOOM, 39
 ISONIAZID, 85
 ISOSORBIDE DINITRATE, 37, 38
 ISOSORBIDE MONONITRATE, 38
 ISOSORBIDE MONONITRATE ER, 38
 ISOTRETINOIN, 51, 52
 ISTODAX, 103
 ITCH RELIEF, 53
 ITRACONAZOLE, 84
 I-VITE, 128
 JANSSEN COVID-19 VACCINE (EUA), 77
 JANTOVEN, 70
 JASMIEL, 40
 JENCYCLA, 43
 JEVTANA, 103
 JINTELI, 77
 JOCK ITCH, 53, 54
 JOCK ITCH RELIEF, 53
 JOLESSA, 41
 JULEBER, 39
 JUNEL, 43
 JUNEL FE, 42
 KALETRA, 87
 KALLIGA, 39
 KAOPECTATE, 93
 KARIVA, 39
 KELNOR 1-35, 40
 KELNOR 1-50, 40
 KETOCONAZOLE, 53, 84
 KETOROLAC TROMETHAMINE, 67, 91
 KLOR-CON M10, 63
 KLOR-CON M15, 63
 KLOR-CON M20, 63
 KONSYL, 96, 97
 K-PEC, 93
 K-PHOS ORIGINAL, 126
 KPN, 141
 KURVELO, 41
 LABETALOL HCL, 25
 LACTULOSE, 93, 95
 LAMISIL, 54
 LAMIVUDINE-ZIDOVUDINE, 87
 LANSOPRAZOLE, 126
 LAPATINIB, 102
 LARIN, 43, 44
 LARIN FE, 42
 LARISSIA, 41
 LATANOPROST, 69
 LAX STOOL SOFTENER WITH SENNA, 98
 LAXA BASIC 100, 95
 LAXACIN, 98
 LAXACLEAR, 96
 LAXATIVE, 94
 LAXATIVE PEG 3350, 96
 LAXATIVE SUPPOSITORY, 99
 LEENA, 44
 LEFLUNOMIDE, 89
 LESSINA, 41
 LETROZOLE, 102
 LEUCOVORIN CALCIUM, 103
 LEUKERAN, 100
 LEUKINE, 73
 LEVALBUTEROL CONCENTRATE, 12
 LEVALBUTEROL HCL, 12
 LEVALBUTEROL TARTRATE HFA, 12
 LEVEMIR, 61
 LEVEMIR FLEXTOUCH, 61
 LEVETIRACETAM, 119
 LEVETIRACETAM ER, 120
 LEVOBUNOLOL HCL, 69
 LEVOCARNITINE, 106
 LEVOCARNITINE SF, 106
 LEVOFLOXACIN, 68, 83

LEVONEST, 41
 LEVONORGESTREL, 40
 LEVONORGESTREL-ETH ESTRADIOL, 41, 42
 LEVORA-28, 42
 LEVOTHYROXINE SODIUM, 66
 LICE BEDDING, 106
 LICE KILLING, 54
 LICE PYRINYL SHAMPOO, 54
 LICE TREATMENT, 54
 LICE-BEDBUG-MITE BEDDING, 106
 LIDOCAINE, 57
 LIDOCAINE HCL, 92
 LIDOCAINE HCL VISCOUS, 92
 LIDOCAINE-PRILOCAINE, 57
 LILLOW, 42
 LINEZOLID, 81
 LIOTHYRONINE SODIUM, 66
 LIQUITUSS GG, 47
 LISINAPRIL, 27
 LISINAPRIL-HYDROCHLOROTHIAZIDE, 25
 LITEAIRE, 16
 LITETOUCH, 17
 LITTLE ANIMALS WITH IRON, 137
 LITTLE REMEDIES FEVER-PAIN, 109
 LO-DOSE ASPIRIN EC, 73
 LOPERAMIDE, 93
 LOPINAVIR-RITONAVIR, 87
 LORADAMED, 10
 LORATADINE, 10
 LORATADINE ALLERGY, 10
 LORYNA, 40
 LOSARTAN POTASSIUM, 27
 LOSARTAN-HYDROCHLOROTHIAZIDE, 26
 LOVASTATIN, 34
 LOW DOSE ASPIRIN EC, 73
 LOW-OGESTREL, 46
 LO-ZUMANDIMINE, 40
 LUMIGAN, 69
 LUTERA, 42
 LYLEQ, 43
 LYLLANA, 75, 76
 LYSODREN, 103
 LYZA, 43
 MAALOX ADVANCED, 124
 MAG DELAY, 133
 MAG64, 133
 MAG-AL PLUS, 124
 MAG-G, 133
 MAGIC BULLET, 99
 MAGNESIUM, 133
 MAGNESIUM CHLORIDE, 133
 MAGNESIUM CITRATE, 95
 MAGNESIUM GLUCONATE, 133
 MAGNESIUM OXIDE, 124, 133, 134
 MAG-OXIDE, 134
 MAG-OXIDE MAGNESIUM, 134
 MAPAP, 109
 MAPAP ARTHRITIS PAIN, 109
 MARLISSA, 42
 MASOPHEN, 109
 MATULANE, 103
 MATZIM LA, 31, 32
 MAVYRET, 88
 MAXEPA, 36
 MAXI-TUSS AC, 49
 MAXI-TUSS G, 50
 M-DRYL, 8
 MECLIZINE HCL, 10, 11
 MEDICATED HEAT PATCH, 56
 MEDI-MECLIZINE, 11
 MEDIPROXEN, 92
 MEDROXYPROGESTERONE ACETATE, 39, 77
 MEFLOQUINE HCL, 86
 MEGA MULTI W-CHELATED MINERALS, 135
 MEGESTROL ACETATE, 104
 MELATIN, 20
 MELATONIN, 20
 MELATONIN-VITAMIN B6, 20
 MELOXICAM, 91
 MENEST, 76, 77
 MENOSTAR, 76
 MEN'S ONE DAILY, 136
 MEPERIDINE HCL, 111
 MERCAPTOPYRINE, 101
 MESALAMINE, 92
 MESALAMINE DR, 92
 METADATE ER, 22
 METAMUCIL, 97
 METAMUCIL MULTIHEALTH FIBER, 97
 METAPROTERENOL SULFATE, 12
 METFORMIN HCL, 59
 METFORMIN HCL ER, 59
 METHADONE HCL, 111
 METHAZOLAMIDE, 69
 METHIMAZOLE, 65
 METHITEST, 74
 METHOCARBAMOL, 121
 METHOTREXATE, 101
 METHOTREXATE SODIUM, 101
 METHYLDOPA, 28

METHYLERGONOVINE MALEATE, 46
 METHYLPHENIDATE ER, 22
 METHYLPHENIDATE ER (LA), 22
 METHYLPHENIDATE HCL, 22, 23
 METHYLPHENIDATE HCL CD, 23
 METHYLPHENIDATE HCL ER (CD), 23
 METHYLPHENIDATE LA, 23
 METHYLPREDNISOLONE, 90
 METHYLTESTOSTERONE, 74
 METOCLOPRAMIDE HCL, 125, 126
 METOLAZONE, 34
 METOPROLOL SUCCINATE, 29
 METOPROLOL TARTRATE, 29
 METRONIDAZOLE, 85, 127
 MGO, 134
 MI-ACID, 122
 MICATIN, 53
 MICONAZOLE 7, 127
 MICONAZOLE NITRATE, 53, 127
 MICONAZOLE-7, 127
 MICOTRIN AC, 53
 MICROCHAMBER, 16
 MICROGESTIN, 44
 MICROGESTIN FE, 42, 43
 MICROSPACER, 16
 MIDODRINE HCL, 37
 MILI, 45
 MILK OF MAGNESIA, 96
 MILLTRIUM SENIOR, 131
 MIMVEY, 76
 MINI PRENATAL, 140
 MINITRAN, 38
 MINOCYCLINE HCL, 84
 MINOXIDIL, 28
 MISOPROSTOL, 125
 MISTASSIST, 16
 MISTASSIST KIT, 18
 M-M-R II VACCINE, 78
 M-NATAL PLUS, 139
 MODERNA COVID-19 VACCINE (EUA), 77
 MOMETASONE FUROATE, 55
 MONDOXYNE NL, 84
 MONISTAT 7, 127
 MONO-LINYAH, 45
 MONTELUKAST SODIUM, 15
 MORPHINE SULFATE, 111, 112
 MORPHINE SULFATE ER, 112
 MOTION SICKNESS, 11
 MOTION SICKNESS RELIEF, 11
 MOTION-TIME, 11
 MOUTHPIECE, 16
 MOVE IT ALONG, 95
 MOXIFLOXACIN HCL, 83
 M-PAP, 109
 MUCINEX FAST-MAX CHEST-CONGEST, 47
 MUCOSA, 47
 MUCUS ER, 47
 MUCUS RELIEF, 47
 MUCUS RELIEF ER, 47, 48
 MUCUS-ER MAX, 48
 MULTI-DAY PLUS IRON, 135
 MULTIHEALTH FIBER, 97
 MULTIPLE VITAMIN, 136
 MULTIPLE VITAMINS, 135
 MULTIVITAMIN, 135
 MULTIVITAMIN 50 PLUS, 131
 MULTI-VITAMIN DAILY, 135
 MULTI-VITAMIN W-FLUORIDE-IRON, 137, 138
 MULTIVITAMIN WITH FLUORIDE, 138
 MULTIVITAMIN-IRON-FLUORIDE, 138
 MULTIVITAMINS, 135
 MULTIVITAMINS WITH IRON, 135
 MULTIVITAMINS WITH MINERALS, 136
 MUPIROCIN, 52
 MVC-FLUORIDE, 138
 MY CHOICE, 40
 MY WAY, 41
 MYCOPHENOLATE MOFETIL, 79
 MYCOZYL AC, 53
 MYFERON 150, 132
 MYLERAN, 100
 MYNATAL, 141
 MYNATAL ADVANCE, 141
 MYNATAL PLUS, 141
 MYNATAL-Z, 141
 MYNATE 90 PLUS, 141
 MYORISAN, 52
 NADOLOL, 29
 NAFTIFINE HCL, 53
 NALOXONE HCL, 20
 NALTREXONE HCL, 20
 NAPROXEN, 92
 NAPROXEN SODIUM, 92
 NARATRIPTAN HCL, 114
 NARCAN, 20
 NASAL DECONGESTANT, 46, 50
 NATEGLINIDE, 59
 NATURAL CALCIUM, 128
 NATURAL DAILY FIBER, 97
 NATURAL FIBER, 96, 97

NATURAL FIBER POWDER, 98
 NATURAL FIBER SUPPLEMENT, 96
 NATURAL LAXATIVE, 98
 NATURAL VEGETABLE LAXATIVE, 98
 NATURAL VEGETABLE POWDER, 97, 98
 NATURA-LAX, 96
 NEBUSAL, 105
 NECON, 44
 NEOMYCIN SULFATE, 85
 NEOMYCIN-BACITRACIN-POLY-HC, 67
 NEOMYCIN-BACITRACIN-POLYMYXIN, 68
 NEOMYCIN-POLYMYXIN-DEXAMETH, 67
 NEOMYCIN-POLYMYXIN-GRAMICIDIN, 68
 NEOMYCIN-POLYMYXIN-HC, 62
 NEOMYCIN-POLYMYXIN-HYDROCORT, 62
 NEO-POLYCIN, 68
 NEO-POLYCIN HC, 27
 NEO-TUSS, 50
 NEPHRO-VITE, 142
 NEW DAY, 41
 NEXAFED, 46
 NEXAVAR, 103
 NIACIN ER, 36
 NICOTINE GUM, 121
 NICOTINE LOZENGE, 121
 NICOTINE PATCH, 121
 NICOTROL, 121
 NICOTROL NS, 121
 NIFEDIPINE ER, 32
 NIGHTTIME ALLERGY RELIEF, 8
 NIGHTTIME SLEEP AID, 20
 NIGHTTIME SLEEP GEL, 20
 NIGHTTIME SLEEP-AID, 21
 NIKKI, 40
 NILUTAMIDE, 101
 NITRO-BID, 38
 NITRO-DUR, 38
 NITROFURANTOIN, 81
 NITROFURANTOIN MONO-MACRO, 81
 NITROGLYCERIN, 38
 NITROGLYCERIN PATCH, 38
 NIVA-PLUS, 136
 NIVESTYM, 73
 NOBLE FORMULA HC, 55
 NON-ASPIRIN, 109, 110
 NON-ASPIRIN EXTRA STRENGTH, 110
 NON-ASPIRIN PAIN RELIEF, 110
 NORA-BE, 43
 NORDITROPIN FLEXPEN, 65
 NORETHINDRONE, 43
 NORETHINDRONE AC (LUPANETA), 77
 NORETHINDRONE ACETATE, 77
 NORETHINDRONE-E.ESTRADIOL-IRON, 43
 NORETHINDRON-ETHINYL ESTRADIOL, 44, 77
 NORGESTIMATE-ETHINYL ESTRADIOL, 45
 NORLYDA, 43
 NORTEMP, 110
 NORTREL, 44
 NORVIR, 88
 NOVOLIN 70-30, 60
 NOVOLIN 70-30 FLEXPEN, 60
 NOVOLIN N, 62
 NOVOLIN N FLEXPEN, 62
 NOVOLIN R, 62
 NOVOLIN R FLEXPEN, 62
 NOVOLOG FLEXPEN, 61
 NOVOLOG MIX 70-30, 62
 NOVOLOG MIX 70-30 FLEXPEN, 62
 NP THYROID, 67
 NU-IRON 150, 133
 NULYTELY, 99
 NU-MAG, 133
 NURTEC ODT, 114
 NYAMYC, 53
 NYLIA, 44
 NYMYO, 45
 NYSTATIN, 53, 84
 NYSTOP, 53
 NYTOL QUICKCAPS, 20
 OB COMPLETE, 134
 OBSTETRIX EC, 142
 O-CAL FA, 137
 O-CAL PRENATAL, 142
 OCELLA, 40
 OFLOXACIN, 62, 68, 83
 OLMESARTAN MEDOXOMIL, 27, 28
 OMEGA-3, 36
 OMEGA-3 FISH OIL, 35, 36, 37
 OMEPRAZOLE, 126
 OMEPRAZOLE MAGNESIUM, 126
 ONCCOR, 136
 ONCOVITE, 136
 ONDANSETRON HCL, 11
 ONDANSETRON ODT, 11
 ONE DAILY COMPLETE, 136
 ONE DAILY ENERGY, 136
 ONE DAILY ESSENTIAL, 134, 135
 ONE DAILY FOR WOMEN, 134
 ONE DAILY MAXIMUM, 134
 ONE DAILY MULTIVITAMIN, 134

ONE DAILY PLUS MINERALS, 136
ONE DAILY PRENATAL, 140
ONE WAY MOUTHPIECE, 16
ONE-A-DAY ESSENTIAL, 135
ONE-A-DAY MAXIMUM FORMULA, 136
ONE-A-DAY MEN'S, 135
ONE-A-DAY PRENATAL-1, 140
ONE-DAILY MULTI-VITAMIN, 135
ONELAX, 99
OPCICON ONE-STEP, 41
OPTICHAMBER, 16
OPTICHAMBER DIAMOND, 16
OPTIMAL D3, 144
OPTION 2, 41
ORAZINC, 145
ORPHENADRINE CITRATE ER, 121
ORSYTHIA, 42
OSCIMIN, 123
OSCIMIN SL, 123
OSCIMIN SR, 123
OSELTAMIVIR PHOSPHATE, 86
OXALIPLATIN, 100
OXCARBAZEPINE, 120
OXYBUTYNIN CHLORIDE, 127
OXYBUTYNIN CHLORIDE ER, 127
OXYCODONE HCL, 113
OXYCODONE HCL ER, 113
OXYCODONE-ACETAMINOPHEN, 116
OXYCONTIN, 113
OXYMORPHONE HCL, 113
OYSCO 500-VIT D3, 129
OYSTER SHELL CALCIUM, 128
OYSTER SHELL CALCIUM W-VIT D, 129
OYSTER SHELL CALCIUM-VIT D3, 129, 130
OYSTER SHELL CALCIUM-VITAMIN D, 130
OYSTERCAL-D, 129
PACERONE, 23
PAIN RELIEF, 110
PAIN RELIEF EXTRA STRENGTH, 110
PAIN RELIEVER, 110
PAIN RELIEVING, 57
PAIN-RELIEVING, 57
PANCREAZE, 122
PANDA MASK, 16
PANTOPRAZOLE SODIUM, 126
PAROEX, 104
PARVA-CAL 500, 129
P-COL RITE, 98
PEDIA D-VITE, 144
PEDIA IRON, 132
PEDIA POLY-VITE, 137
PEDIA-LAX, 99
PEDIATRIC D-VITE, 144
PEDIATRIC ENEMA, 99
PEDIATRIC FE-VITE, 132
PEDIATRIC IRON, 132
PEDIATRIC MASK, 16
PEDIATRIC PANDA MASK, 16
PEDIATRIC POLY-VITAMIN, 137
PEDIATRIC VITAMIN D3, 144
PEG 3350-ELECTROLYTE, 99
PEG-3350 AND ELECTROLYTES, 96
PENICILLIN V POTASSIUM, 83
PENTOXIFYLLINE, 72
PERIOGARD, 104
PERMETHRIN, 54
PERRY PRENATAL, 141
PFIZER COVID-19 VACCINE (EUA), 77
PFLEX TRAINER, 16
PHARBECHLOR, 7
PHARBEDRYL, 8
PHARBETOL, 110
PHENAZOPYRIDINE HCL, 126, 127
PHENOBARBITAL, 19, 20
PHENYTOIN, 120
PHENYTOIN SODIUM EXTENDED, 120
PHILITH, 44
PHILLIPS, 134
PHILLIPS' LAXATIVE, 95
PHYTONADIONE, 74
PILOCARPINE HCL, 69
PIMTREA, 39
PINAWAY, 85
PINK BISMUTH, 93
PINWORM MEDICINE, 85
PINWORM TREATMENT, 86
PIOGLITAZONE HCL, 59
PIRMELLA, 44
PIXEL COVID19 HOME COLLECT KIT, 105
PNV-FERROUS FUMARATE-DOCU-FA, 140
POCKET CHAMBER, 16
POLYCIN, 68
POLYETHYLENE GLYCOL 3350, 96
POLY-IRON, 133
POLYMYXIN B SUL-TRIMETHOPRIM, 68
POLYSACCHARIDE IRON, 133
POLY-VITA, 137
PORTIA, 42
POTASSIUM CHLORIDE, 63
POTASSIUM CITRATE ER, 126

POWDERLAX, 96
 PRADAXA, 74
 PRAMIPEXOLE DIHYDROCHLORIDE, 118
 PRAMOSONE, 57
 PRASUGREL HCL, 74
 PRAVASTATIN SODIUM, 34
 PRAZOSIN HCL, 26
 PREDNISOLONE, 90
 PREDNISOLONE ACETATE, 68
 PREDNISOLONE SODIUM PHOSPHATE, 68, 90
 PREDNISON, 90
 PREDNISON INTENSOL, 90
 PREFEST, 76
 PREGABALIN, 120
 PREMARIN, 76, 128
 PREMIUM OMEGA-3, 35
 PREMPHASE, 76
 PREMPRO, 76
 PRENATA, 141
 PRENATABS FA, 141
 PRENATABS RX, 141
 PRENATAL, 139, 140, 141
 PRENATAL 19, 139, 140, 141
 PRENATAL COMPLETE, 139
 PRENATAL FORMULA, 139, 141
 PRENATAL FORMULA-DHA, 140
 PRENATAL LOW IRON, 140
 PRENATAL MULTI, 139
 PRENATAL MULTI-DHA, 140
 PRENATAL MULTIVITAMIN, 139, 142
 PRENATAL MULTIVITAMIN-DHA, 140
 PRENATAL ONE DAILY, 141
 PRENATAL PLUS, 139
 PRENATAL PLUS-DHA, 142
 PRENATAL VITAMIN, 140
 PRENATAL VITAMIN PLUS LOW IRON, 140
 PRENATAL VITAMINS, 140, 141, 142
 PRENATAL-U, 136
 PREPARATION H, 55
 PREPLUS, 140
 PRETAB, 140
 PREVALITE, 35
 PREVIFEM, 45
 PREZCOBIX, 86
 PRIMEAIRE, 16
 PRIMIDONE, 120
 PRO COMFORT SPACER WITH MASK, 17
 PROBENECID, 70
 PROBENECID-COLCHICINE, 70
 PROCARE SPACER WITH ADULT MASK, 16
 PROCARE SPACER WITH CHILD MASK, 16
 PROCHAMBER, 16
 PROCHLORPERAZINE, 11
 PROCHLORPERAZINE MALEATE, 11
 PROCRT, 71
 PROCTO-PAK, 55
 PROGESTERONE, 77
 PROMETHAZINE HCL, 9, 11
 PROMETHAZINE VC, 46
 PROMETHAZINE VC-CODEINE, 48
 PROMETHAZINE-CODEINE, 48
 PROMETHAZINE-PHENYLEPH-CODEINE, 48
 PROMETHAZINE-PHENYLEPHRINE, 46
 PROMETHEGAN, 11
 PROMOLAXIN, 95
 PROPAFENONE HCL, 24
 PROPRANOLOL HCL, 29
 PROPRANOLOL HCL ER, 29
 PROPRANOLOL-HYDROCHLOROTHIAZID, 30
 PROPYLTHIOURACIL, 65
 PROSIGHT, 136
 PSEUDOEPHEDRINE HCL, 46, 51
 PSYLLIUM FIBER, 96
 PULMICORT FLEXHALER, 14
 PURE AND GENTLE SALINE ENEMA, 99
 PURELAX, 96
 PYRAZINAMIDE, 85
 PYRIDOXINE HCL, 143
 QUICKVUE AT-HOME COVID-19 TEST, 105
 QUICKVUE SARS ANTIGEN, 105
 QUINAPRIL HCL, 27
 QUINAPRIL-HYDROCHLOROTHIAZIDE, 25
 QUINIDINE SULFATE, 24
 QUIT 2, 121
 QUIT 4, 121
 QVAR REDIHALER, 14
 RALOXIFENE HCL, 64
 RAMIPRIL, 27
 RECLIPSEN, 39
 REESE'S PINWORM, 86
 REFENESEN, 48
 REGRANEX, 60
 REMEDY ANTIFUNGAL, 53
 RENAL VITAMIN, 142
 RENAL-VITE, 142
 RENA-VITE, 142
 RENA-VITE RX, 142
 REPAGLINIDE, 59
 REPAGLINIDE-METFORMIN HCL, 60
 RETACRIT, 72

REVLIMID, 102
 REYVOW, 114
 RID, 54, 106
 RIFAMPIN, 85
 RISEDRONATE SODIUM, 64
 RITEFLO, 16
 RITONAVIR, 88
 RIZATRIPTAN, 114
 ROBAFEN, 48
 ROBAFEN DM COUGH, 50
 ROBAFEN DM COUGH-CHEST CONGEST, 50
 ROPINIROLE ER, 118
 ROPINIROLE HCL, 118
 ROSUVASTATIN CALCIUM, 34
 RYBELSUS, 58
 SAFETUSSIN DM, 50
 SALINE ENEMA, 99
 SALMON OIL-1000, 36
 SALONPAS, 57
 SALSALATE, 107
 SAVAYSA, 71
 SCOOBY-DOO, 138
 SCOT-TUSSIN, 48
 SCOT-TUSSIN EXPECTORANT, 48
 SEA-OMEGA, 105
 SECURA ANTIFUNGAL, 53
 SELEGILINE HCL, 118
 SELENIUM SULFIDE, 56
 SELZENTRY, 87
 SEMGLEE, 61
 SEMGLEE (YFGN), 61
 SEMGLEE (YFGN) PEN, 61
 SEMGLEE PEN, 61
 SE-NATAL 19, 141
 SENEXON-S, 98
 SENNA, 98
 SENNA LAX, 98
 SENNA LAXATIVE, 98
 SENNA PLUS, 98
 SENNA-S, 98
 SENNA-S LAXATIVE, 98
 SENNA-TIME S, 98
 SENNOSIDES-DOCUSATE SODIUM, 98
 SENOKOT-S, 98
 SEN-O-TAB, 98
 SENTRY, 135
 SEREVENT DISKUS, 13
 SETLAKIN, 42
 SHAKE THAT ACHE, 110
 SHAROBEL, 43
 SHINGRIX, 78
 SHINGRIX GE ANTIGEN COMPONENT, 78
 SIDESTREAM PEDIATRIC, 17
 SILACE, 95
 SILADRYL, 9
 SILAPAP, 110
 SILDENAFIL CITRATE, 33
 SILICONE MASK, 17
 SILTUSSIN DM, 50
 SILTUSSIN DM DAS, 50
 SILTUSSIN SA, 48
 SILVER SULFADIAZINE, 54
 SIMETHICONE, 122
 SIMILAC PRENATAL, 140
 SIMLIYA, 39
 SIMPLY SLEEP, 20
 SIMVASTATIN, 34, 35
 SIROLIMUS, 79
 SLEEP AID, 20, 21
 SLEEP II, 21
 SLEEP TABLET, 21
 SLEEP TABS, 21
 SLEEP TIME, 21
 SLEEP-AID, 21
 SLEEPING, 21
 SLOW RELEASE IRON, 132
 SMOOTHLAX, 96
 SODIUM BICARBONATE, 124
 SODIUM CHLORIDE, 63, 105
 SODIUM CITRATE-CITRIC ACID, 126
 SODIUM FLUORIDE, 131
 SODIUM POLYSTYRENE SULFONATE, 63
 SOFIA SARS ANTIGEN FIA, 105
 SOFIA2 FLU-SARS ANTIGEN FIA, 105
 SOFOSBUVIR-VELPATASVIR, 88
 SOMINEX, 21
 SOOTHE, 93
 SOOTHING CARE, 55
 SOOTHING PUREWAY-C, 143
 SORBUGEN NR, 50
 SORINE, 29
 SOTALOL, 29, 30
 SOTALOL AF, 30
 SPACE CHAMBER, 17
 SPACE CHAMBER-LARGE MASK, 17
 SPACE CHAMBER-MEDIUM MASK, 18
 SPACE CHAMBER-SMALL MASK, 17
 SPECTRAVITE ADVANCED FORMULA, 135
 SPIRIVA, 12
 SPIRIVA RESPIMAT, 12

SPIRONOLACTONE, 33
 SPRINTEC, 45
 SPRYCEL, 102
 SPS, 63
 SRONYX, 42
 SSD, 54
 SSKI, 65
 ST. JOSEPH ASPIRIN, 73
 ST. JOSEPH ASPIRIN EC, 73
 STEGLATRO, 58
 STIMULANT LAXATIVE PLUS, 98
 STIOLTO RESPIMAT, 13
 STOMACH RELIEF, 93
 STOMACH RELIEF ORIGINAL, 93
 STOOL SOFTENER, 94, 95
 STOOL SOFTENER-LAXATIVE, 99
 STOOL SOFTENER-STIMULANT LAX, 99
 STOP LICE, 106
 STOP SMOKING AID, 121, 122
 STRIVERDI RESPIMAT, 13
 STUART ONE, 139
 SUCRALFATE, 125
 SUDOGEST, 46, 51
 SUDOGEST COLD AND ALLERGY, 46
 SULFACETAMIDE SODIUM, 68
 SULFACETAMIDE-PREDNISOLONE, 68
 SULFADIAZINE, 79
 SULFAMETHOXAZOLE-TRIMETHOPRIM, 79
 SULFASALAZINE, 92
 SULFASALAZINE DR, 93
 SULFATRIM, 79
 SULINDAC, 92
 SUMATRIPTAN, 114
 SUMATRIPTAN SUCCINATE, 114, 115
 SUNITINIB MALATE, 103
 SUPER CALCIUM, 128
 SUPER CALCIUM 600-VIT D3, 130
 SUPER MULTIVITAMIN, 135
 SUPER OMEGA-3, 36
 SUPHEDRIN, 51
 SUPHEDRINE, 51
 SUPHEDRINE SINUS CONGESTION, 51
 SUPREP, 99
 SUSTIVA, 87
 SYEDA, 40
 SYNAGIS, 86
 TAB-A-VITE, 134, 135
 TAB-A-VITE MULTIVIT WITH IRON, 135
 TABLET CUTTER, 100
 TABLOID, 101
 TACROLIMUS, 58, 79
 TADALAFIL, 33
 TAKE ACTION, 41
 TAMOXIFEN CITRATE, 103, 104
 TAMSULOSIN HCL, 126
 TAPERDEX, 90
 TARINA FE, 43
 TARINA FE 1-20 EQ, 43
 TARON-C DHA, 137
 TASIGNA, 103
 TAZAROTENE, 58
 TAZTIA XT, 32
 TELMISARTAN, 28
 TELMISARTAN-HYDROCHLOROTHIAZID, 26
 TEMAZEPAM, 20
 TEMIXYS, 86
 TEMOZOLOMIDE, 100, 101
 TENCON, 106
 TENIVAC, 78
 TENOFOVIR DISOPROXIL FUMARATE, 87
 TERAZOSIN HCL, 26
 TERBINAFINE, 54
 TERBINAFINE HCL, 84
 TERBUTALINE SULFATE, 12
 TERCONAZOLE, 127, 128
 TESTOSTERONE CYPIONATE, 74
 TETRACYCLINE HCL, 84
 THALITONE, 34
 THEOCHRON, 18
 THEOPHYLLINE ANHYDROUS, 18
 THERA, 136
 THERA ANTIFUNGAL, 53
 THERA-D, 144
 THERANATAL, 139
 THERANATAL OVAVITE, 139
 THERANATAL PLUS, 139
 THERA-TABS, 136
 THERATRUM COMPLETE 50 PLUS, 131
 THEREMS MULTIVITAMIN, 134
 THIAMINE HCL, 142
 THRESHOLD IMT, 17
 THRESHOLD PEP, 17
 THRIVITE 19, 137
 THYROLAR-1, 66
 THYROLAR-1/2, 66
 THYROLAR-1/4, 66
 THYROLAR-2, 66
 THYROLAR-3, 66
 TIADYLT ER, 32
 TIAGABINE HCL, 120

TIMOLOL MALEATE, 69
 TIVICAY, 88
 TIZANIDINE HCL, 121
 TOBRAMYCIN, 68, 69
 TOBRAMYCIN-DEXAMETHASONE, 67
 TOLTERODINE TARTRATE, 127
 TOLTERODINE TARTRATE ER, 127
 TOPIRAMATE, 120
 TOPOTECAN HCL, 102
 TOREMIFENE CITRATE, 104
 TORSEMIDE, 33
 TOTAL ALLERGY, 9
 TOUJEO SOLOSTAR, 61
 TRAMADOL HCL, 114
 TRAVEL-EASE, 11
 TRAVOPROST, 69
 TREANDA, 100
 TRELEGY ELLIPTA, 14
 TRETINOIN, 52, 103
 TRI FEMYNOR, 45
 TRIAMCINOLONE ACETONIDE, 55, 56
 TRIAMTERENE-HYDROCHLOROTHIAZID, 33
 TRI-BUFFERED ASPIRIN, 107
 TRIDERM, 56
 TRI-ESTARYLLA, 45
 TRIFLURIDINE, 68
 TRIHEXYPHENIDYL HCL, 117
 TRI-LINYAH, 45
 TRI-LO-ESTARYLLA, 45
 TRI-LO-MARZIA, 45
 TRI-LO-MILI, 45
 TRI-LO-SPRINTEC, 45
 TRIMETHOPRIM, 80
 TRI-MILI, 45
 TRINATE, 141
 TRI-NYMYO, 45
 TRI-PREVIFEM, 45
 TRI-SPRINTEC, 45
 TRIUMEQ, 88
 TRI-VI-FLOR, 138
 TRI-VITAMIN WITH FLUORIDE, 138
 TRI-VITE WITH FLUORIDE, 139
 TRIVORA-28, 42
 TRI-VYLIBRA, 45
 TRI-VYLIBRA LO, 45
 TROSPIUM CHLORIDE, 127
 TRUMENBA, 78
 TULANA, 43
 TUSNEL DIABETIC, 50
 TUSNEL-EX, 48
 TUSSIN, 48
 TUSSIN CHEST CONGESTION, 48
 TUSSIN COUGH, 50
 TUSSIN DM, 50
 TUSSIN DM CLEAR, 50
 TUSSIN DM COUGH-CHEST CONGEST, 50
 TUSSIN HONEY, 48
 TUSSIN MUCUS-CHEST CONGESTION, 48
 TWINRIX, 78
 TYBLUME, 42
 TYLOPHEN, 110
 UBRELVY, 115
 ULTRA A-D, 93
 ULTRA DM FREE & CLEAR, 50
 ULTRA OMEGA-3, 35
 ULTRA PRENATAL PLUS DHA, 140
 ULTRA TUSS, 50
 UNISOM, 21
 UNISOM SLEEP AID, 21
 URSODIOL, 93
 VALACYCLOVIR, 86
 VALSARTAN, 28
 VALSARTAN-HYDROCHLOROTHIAZIDE, 26
 VANCOMYCIN HCL, 85
 VANDAZOLE, 127
 VANICREAM HC, 55
 VARENICLINE TARTRATE, 122
 VARIVAX VACCINE, 78
 V-C FORTE, 134
 VEGETABLE LAXATIVE, 98
 VEGETABLE LAX-STOOL SOFTENER, 99
 VELIVET, 39
 VERAPAMIL ER, 32, 33
 VERAPAMIL HCL, 33
 VERITOR SARS-COV-2 AND FLU A-B, 105
 VERTICALM, 11
 VESTURA, 40
 VIBRAMYCIN, 83
 VIC-FORTE, 134
 VICODIN HP, 116
 VIENVA, 42
 VIMPAT, 119
 VINATE GT, 141
 VINATE II, 141
 VINATE ULTRA, 141
 VIORELE, 39
 VIRACEPT, 88
 VIRT-C DHA, 137
 VIRTRATE-2, 126
 VIRTUSSIN AC, 49

VIRTUSSIN DAC, 48
VISION PLUS LUTEIN, 131
VITAJEY DAILY C, 143
VITAJEY DAILY D, 144
VITALETS, 137
VITAMIN B-1, 142
VITAMIN B-12, 142, 143
VITAMIN B-6, 143
VITAMIN C, 143, 144
VITAMIN C WITH ROSE HIPS, 144
VITAMIN D, 144
VITAMIN D2, 145
VITAMIN D3, 144, 145
VITAMIN D-400, 145
VITAMINS A,C,D AND FLUORIDE, 139
VITAMINS FOR HAIR, 135
VITATRUM, 136
VITRUM 50 PLUS SENIOR, 136
VITRUM SENIOR, 131
VOLNEA, 39
VORTEX, 17
VORTEX VHC FROG MASK, 17
VORTEX VHC LADYBUG MASK, 17
VOSEVI, 88
VOTRIENT, 103
VYEPTI, 114
VYFEMLA, 44
VYLIBRA, 45
WAL-ACT D COLD & ALLERGY, 46
WAL-DRAM 2, 11
WAL-DRYL, 9
WAL-DRYL ALLERGY, 9
WAL-FINATE, 7
WAL-ITIN, 10
WAL-MUCIL, 96, 97
WAL-MUCIL NATURAL FIBER LAX, 97
WAL-PHED, 51
WAL-PROFEN, 91
WAL-PROXEN, 92
WAL-SLEEP Z, 21
WAL-SOM, 21
WAL-TUSSIN, 48
WAL-TUSSIN DM, 50
WAL-ZYR, 10
WARFARIN SODIUM, 70, 71
WEEKLY-D, 145
WERA, 45
WESTAB PLUS, 140
WINDMILL TRAINER, 17
WIXELA INHUB, 13
WOMEN'S GENTLE LAXATIVE, 94
WOMEN'S LAXATIVE, 94
WOMEN'S PRENATAL PLUS DHA, 139
XARELTO, 71
XIFAXAN, 85
XULANE, 46
YUVAFEM, 128
ZAFEMY, 46
ZAFIRLUKAST, 15
ZANTAC-360 (FAMOTIDINE), 125
ZARAH, 40
ZARXIO, 73
ZENATANE, 52
ZENPEP, 122, 123
ZENZEDI, 19
ZEPATIER, 88
ZEPHREX-D, 46
ZINC, 145
ZINC CHELATED, 145
ZINC GLUCONATE, 145
ZINC SULFATE, 145
ZINC-15, 146
ZINC-220, 146
ZOLINZA, 103
ZOLMITRIPTAN, 115
ZOLMITRIPTAN ODT, 115
ZOLPIDEM, 21
ZOLPIDEM TARTRATE, 21
ZONISAMIDE, 120
ZOSTRIX, 56
ZOSTRIX HP, 57
ZOSTRIX HP FOOT, 57
ZOVIA 1-35, 40
ZOVIA 1-35E, 40
ZUMANDIMINE, 40