

Umpqua Health Alliance Formulary (Preferred Drug List)

Effective January 1, 2024

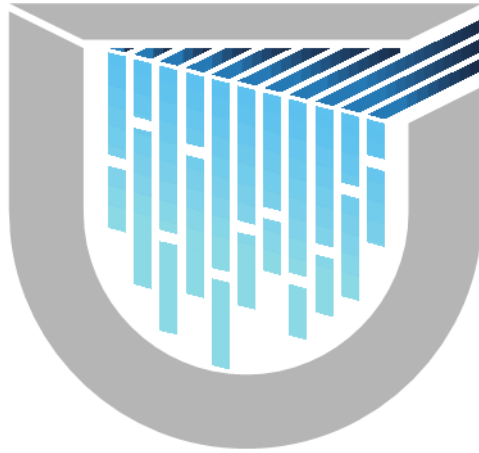


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INTRODUCTION

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.

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
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ALLERGY

ANTI-HISTAMINES - 1ST GENERATION

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

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

ANTI-HISTAMINES - 2ND GENERATION

24HOUR ALLERGY (CETIRIZINE HCL) 10 MG ORAL TABLET	GENERIC, OTC	
ALL DAY ALLERGY (CETIRIZINE HCL) 10 MG ORAL TABLET	GENERIC, OTC	
ALLERGY (CETIRIZINE HCL) 10 MG ORAL TABLET	GENERIC, OTC	
ALLERGY RELIEF (CETIRIZINE HCL) 1 MG/ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
ALLERGY RELIEF (CETIRIZINE HCL) 5 MG ORAL TABLET	GENERIC, OTC	
ALLERGY RELIEF (CETIRIZINE HCL) 10 MG ORAL TABLET	GENERIC, OTC	
ALLER-TEC (CETIRIZINE HCL) 10 MG ORAL TABLET	GENERIC, OTC	
CETIRIZINE HCL 1 MG/ML ORAL SOLUTION	GENERIC	AR (age 2 to 6)
CETIRIZINE HCL 1 MG/ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
CETIRIZINE HCL 5 MG/5 ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
CETIRIZINE HCL 5 MG ORAL TABLET	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
CETIRIZINE HCL 10 MG ORAL TABLET	GENERIC, OTC	
CHILDREN'S ALL DAY ALLERGY (CETIRIZINE HCL) 1 MG/ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
CHILDREN'S ALLERGY (CETIRIZINE HCL) 1 MG/ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
CHILDREN'S ALLERGY RELIEF (CETIRIZINE HCL) 1 MG/ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
CHILDREN'S ALLER-TEC (CETIRIZINE HCL) 1 MG/ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
CHILDREN'S CETIRIZINE HCL (CETIRIZINE HCL) 1 MG/ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
CHILDREN'S WAL-ZYR (CETIRIZINE HCL) 1 MG/ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
WAL-ZYR (CETIRIZINE HCL) 1 MG/ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
WAL-ZYR (CETIRIZINE HCL) 10 MG ORAL TABLET	GENERIC, OTC	
ALLER-EASE (FEXOFENADINE HCL) 180 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per day)
ALLER-FEX (FEXOFENADINE HCL) 180 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per day)
ALLERGY RELIEF (FEXOFENADINE HCL) 60 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per day)
ALLERGY RELIEF (FEXOFENADINE HCL) 180 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per day)
FEXOFENADINE HCL 60 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per day)
FEXOFENADINE HCL 180 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per day)
WAL-FEX ALLERGY (FEXOFENADINE HCL) 60 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per day)
WAL-FEX ALLERGY (FEXOFENADINE HCL) 180 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per day)
ALLERCLEAR (LORATADINE) 10 MG ORAL TABLET	GENERIC, OTC	
ALLERGY RELIEF (LORATADINE) 5 MG/5 ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
ALLERGY RELIEF (LORATADINE) 10 MG ORAL TABLET	GENERIC, OTC	
CHILDREN'S ALLERGY (LORATADINE) 5 MG/5 ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
CHILDREN'S ALLERGY RELIEF (LORATADINE) 5 MG/5 ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
CHILDREN'S LORATADINE (LORATADINE) 5 MG/5 ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
LORADAMED (LORATADINE) 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	PA (Rx020)
LORATADINE 10 MG ORAL TABLET	GENERIC, OTC	
LORATADINE ALLERGY (LORATADINE) 5 MG/5 ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
WAL-ITIN (LORATADINE) 5 MG/5 ML ORAL SOLUTION	GENERIC, OTC	AR (age 2 to 6)
WAL-ITIN (LORATADINE) 10 MG ORAL TABLET	GENERIC, OTC	

NASAL ANTI-INFLAMMATORY STEROIDS

FLUTICASONE PROPIONATE 50 MCG NASAL SPRAY SUSP	GENERIC	
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SEDATIVE-HYPNOTICS, NON-BARBITURATE

ALLERGY RELIEF (DIPHENHYDRAMINE HCL) 25 MG ORAL CAPSULE	GENERIC, OTC	
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ANTIEMESIS/ANTIVERTIGO

ANTIEMETIC/ANTIVERTIGO AGENTS

APREPITANT 125MG-80MG ORAL CAP DS PK	GENERIC	PA (Rx032)
APREPITANT 40 MG ORAL CAPSULE	GENERIC	PA (Rx032)
APREPITANT 80 MG ORAL CAPSULE	GENERIC	PA (Rx032)
APREPITANT 125 MG ORAL CAPSULE	GENERIC	PA (Rx032)

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

ASTHMA AND COPD

ANTICHOLINERGIC, ORALLY INHALED SHORT ACTING

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

ANTICHOLINERGICS, ORALLY INHALED LONG ACTING

SPIRIVA RESPIMAT (TIOTROPIUM BROMIDE) 1.25 MCG	BRAND	ST (Incruse Ellipta)
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DRUG NAME	TYPE	RESTRICTIONS
INHALATION MIST INHAL		
SPIRIVA RESPIMAT (TIOTROPIUM BROMIDE) 2.5 MCG INHALATION MIST INHAL	BRAND	ST (Incruse Ellipta)
TIOTROPIUM BROMIDE 18 MCG INHALATION CAP W/DEV	GENERIC	ST (Incruse Ellipta)
INCRUSE ELLIPTA (UMECLIDINIUM BROMIDE) 62.5 MCG INHALATION BLST W/DEV	BRAND	

BETA-ADRENERGIC AGENTS

ALBUTEROL SULFATE 2 MG/5 ML ORAL SYRUP	GENERIC	
ALBUTEROL SULFATE 2 MG ORAL TABLET	GENERIC	
ALBUTEROL SULFATE 4 MG ORAL TABLET	GENERIC	
TERBUTALINE SULFATE 2.5 MG ORAL TABLET	GENERIC	
TERBUTALINE SULFATE 5 MG ORAL TABLET	GENERIC	

BETA-ADRENERGIC AGENTS, INHALED, SHORT ACTING

ALBUTEROL SULFATE 5 MG/ML INHALATION SOLUTION	GENERIC	
ALBUTEROL SULFATE 0.63MG/3ML INHALATION VIAL-NEB	GENERIC	
ALBUTEROL SULFATE 1.25MG/3ML INHALATION VIAL-NEB	GENERIC	
ALBUTEROL SULFATE 2.5 MG/3ML INHALATION VIAL-NEB	GENERIC	
ALBUTEROL SULFATE 2.5 MG/0.5 INHALATION VIAL-NEB	GENERIC	
ALBUTEROL SULFATE HFA (ALBUTEROL SULFATE) 90 MCG INHALATION HFA AER AD	GENERIC	
LEVALBUTEROL CONCENTRATE (LEVALBUTEROL HCL) 1.25MG/0.5 INHALATION VIAL-NEB	GENERIC	
LEVALBUTEROL HCL 0.31MG/3ML INHALATION VIAL-NEB	GENERIC	
LEVALBUTEROL HCL 0.63MG/3ML INHALATION VIAL-NEB	GENERIC	
LEVALBUTEROL HCL 1.25MG/3ML INHALATION VIAL-NEB	GENERIC	
LEVALBUTEROL TARTRATE HFA (LEVALBUTEROL TARTRATE) 45 MCG INHALATION HFA AER AD	GENERIC	

BETA-ADRENERGIC AGENTS, INHALED, ULTRA-LONG ACTING

STRIVERDI RESPIMAT (OLODATEROL HCL) 2.5 MCG INHALATION MIST INHAL	BRAND	
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BETA-ADRENERGIC AGENTS, ORALLY INHALED, LONG ACTING

SEREVENT DISKUS (SALMETEROL XINAFOATE) 50 MCG INHALATION BLST W/DEV	BRAND	ST (Arcapta or Striverdi)
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BETA-ADRENERGIC AND ANTICHOLINERGIC COMBINATIONS

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

BETA-ADRENERGIC AND GLUCOCORTICOID COMBINATIONS

BREYNA (BUDESONIDE/FORMOTEROL FUMARATE) 80-4.5 MCG INHALATION HFA AER AD	GENERIC	
BREYNA (BUDESONIDE/FORMOTEROL FUMARATE) 160-4.5MCG INHALATION HFA AER AD	GENERIC	
BUDESONIDE-FORMOTEROL FUMARATE	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
(BUDESONIDE/FORMOTEROL FUMARATE) 80-4.5 MCG INHALATION HFA AER AD		
BUDESONIDE-FORMOTEROL FUMARATE (BUDESONIDE/FORMOTEROL FUMARATE) 160-4.5MCG INHALATION HFA AER AD	GENERIC	
FLUTICASONE-SALMETEROL (FLUTICASONE/SALMETEROL) 55-14 MCG INHALATION AER POW BA	GENERIC	
FLUTICASONE-SALMETEROL (FLUTICASONE/SALMETEROL) 113-14 MCG INHALATION AER POW BA	GENERIC	
FLUTICASONE-SALMETEROL (FLUTICASONE/SALMETEROL) 232-14 MCG INHALATION AER POW BA	GENERIC	
FLUTICASONE-SALMETEROL (FLUTICASONE/SALMETEROL) 100-50 MCG INHALATION BLST W/DEV	GENERIC	
FLUTICASONE-SALMETEROL (FLUTICASONE/SALMETEROL) 250-50 MCG INHALATION BLST W/DEV	GENERIC	
FLUTICASONE-SALMETEROL (FLUTICASONE/SALMETEROL) 500-50 MCG INHALATION BLST W/DEV	GENERIC	
WIXELA INHUB (FLUTICASONE/SALMETEROL) 100-50 MCG INHALATION BLST W/DEV	GENERIC	
WIXELA INHUB (FLUTICASONE/SALMETEROL) 250-50 MCG INHALATION BLST W/DEV	GENERIC	
WIXELA INHUB (FLUTICASONE/SALMETEROL) 500-50 MCG INHALATION BLST W/DEV	GENERIC	
DULERA (MOMETASONE/FORMOTEROL) 50MCG-5MCG INHALATION HFA AER AD	BRAND	ST (fluticasone/salmeterol [generic Advair or AirDuo])
DULERA (MOMETASONE/FORMOTEROL) 100-5 MCG INHALATION HFA AER AD	BRAND	ST (fluticasone/salmeterol [generic Advair or AirDuo])
DULERA (MOMETASONE/FORMOTEROL) 200-5 MCG INHALATION HFA AER AD	BRAND	ST (fluticasone/salmeterol [generic Advair or AirDuo])

BETA-ADRENERGIC-ANTICHOLINERGIC-GLUCOCORT, INHALED

BREZTRI AEROSPHERE (BUDESONIDE/GLYCOPYR/FORMOTEROL) 160-9-4.8 INHALATION HFA AER AD	BRAND	PA (Rx041)
TRELEGY ELLIPTA (FLUTICASONE/UMECLIDIN/VILANTER) 100-62.5 INHALATION BLST W/DEV	BRAND	PA (Rx041)
TRELEGY ELLIPTA (FLUTICASONE/UMECLIDIN/VILANTER) 200-62.5 INHALATION BLST W/DEV	BRAND	PA (Rx041)

GLUCOCORTICIDS, ORALLY INHALED

QVAR REDIHALER (BECLOMETHASONE DIPROPIONATE) 40 MCG INHALATION HFA AEROBA	BRAND	
QVAR REDIHALER (BECLOMETHASONE DIPROPIONATE) 80 MCG INHALATION HFA AEROBA	BRAND	
BUDESONIDE 0.25MG/2ML INHALATION AMPUL-NEB	GENERIC	
BUDESONIDE 0.5 MG/2ML INHALATION AMPUL-NEB	GENERIC	
BUDESONIDE 1 MG/2 ML INHALATION AMPUL-NEB	GENERIC	
PULMICORT FLEXHALER (BUDESONIDE) 90 MCG INHALATION AER POW BA	BRAND	
PULMICORT FLEXHALER (BUDESONIDE) 180 MCG INHALATION AER POW BA	BRAND	
ARNUITY ELLIPTA (FLUTICASONE FUROATE) 50 MCG INHALATION BLST W/DEV	BRAND	
ARNUITY ELLIPTA (FLUTICASONE FUROATE) 100 MCG INHALATION BLST W/DEV	BRAND	

DRUG NAME	TYPE	RESTRICTIONS
ARNUITY ELLIPTA (FLUTICASONE FUROATE) 200 MCG INHALATION BLST W/DEV	BRAND	
FLOVENT DISKUS (FLUTICASONE PROPIONATE) 50 MCG INHALATION BLST W/DEV	BRAND	
FLOVENT DISKUS (FLUTICASONE PROPIONATE) 100 MCG INHALATION BLST W/DEV	BRAND	
FLOVENT DISKUS (FLUTICASONE PROPIONATE) 250 MCG INHALATION BLST W/DEV	BRAND	
FLUTICASONE PROPIONATE HFA (FLUTICASONE PROPIONATE) 44 MCG INHALATION AER W/ADAP	GENERIC	
FLUTICASONE PROPIONATE HFA (FLUTICASONE PROPIONATE) 110 MCG INHALATION AER W/ADAP	GENERIC	
FLUTICASONE PROPIONATE HFA (FLUTICASONE PROPIONATE) 220 MCG INHALATION AER W/ADAP	GENERIC	
ASMANEX (MOMETASONE FUROATE) 110MCG(30) INHALATION AER POW BA	BRAND	
ASMANEX (MOMETASONE FUROATE) 220MCG 120 INHALATION AER POW BA	BRAND	
ASMANEX (MOMETASONE FUROATE) 220MCG(60) INHALATION AER POW BA	BRAND	
ASMANEX (MOMETASONE FUROATE) 220MCG(30) INHALATION AER POW BA	BRAND	
ASMANEX HFA (MOMETASONE FUROATE) 50 MCG INHALATION HFA AER AD	BRAND	
ASMANEX HFA (MOMETASONE FUROATE) 100 MCG INHALATION HFA AER AD	BRAND	
ASMANEX HFA (MOMETASONE FUROATE) 200 MCG INHALATION HFA AER AD	BRAND	

LEUKOTRIENE RECEPTOR ANTAGONISTS

MONTELUKAST SODIUM 4 MG ORAL TAB CHEW	GENERIC	AR (age 5 and younger)
MONTELUKAST SODIUM 5 MG ORAL TAB CHEW	GENERIC	AR (age 6 to 14)
MONTELUKAST SODIUM 10 MG ORAL TABLET	GENERIC	AR (age 6 and older)
ZAFIRLUKAST 10 MG ORAL TABLET	GENERIC	ST (montelukast)
ZAFIRLUKAST 20 MG ORAL TABLET	GENERIC	ST (montelukast)

MAST CELL STABILIZERS, ORALLY INHALED

CROMOLYN SODIUM 20 MG/2 ML INHALATION AMPUL-NEB	GENERIC	
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RESPIRATORY AIDS,DEVICES,EQUIPMENT

ACE AEROSOL CLOUD ENHANCER (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
AEROCHAMBER MINI (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
AEROCHAMBER MV (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
AEROCHAMBER PLUS FLOW-VU (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
AEROCHAMBER Z-STAT PLUS (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
AEROTRACH PLUS (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
AEROVENT PLUS (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
BREATHERRITE (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
BREATHERRITE SPACER-ADULT MASK (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)

DRUG NAME	TYPE	RESTRICTIONS
BREATHERITE SPACER-INFANT MASK (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
BREATHERITE SPACER-LG CHLD MSK (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
BREATHERITE SPACER-NEONATE MSK (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
BREATHERITE SPACER-SM CHLD MSK (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
BREATHRITE (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
CLEVER CHOICE HOLDING CHAMBER (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
COMPACT SPACE CHAMBER (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
EASIVENT (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG	QL (1 device per 180 days)
EASIVENT (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
FLEXICHAMBER (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
IN-CHECK DIAL (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
LITEAIRE (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
MICROCHAMBER (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
MICROSPACER (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
MOUTHPIECE (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
ONE WAY MOUTHPIECE (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
OPTICHAMBER (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG	QL (1 device per 180 days)
OPTICHAMBER DIAMOND (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
PANDA MASK (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
PEDIATRIC MASK (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
PEDIATRIC PANDA MASK (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
PFLEX TRAINER (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG	QL (1 device per 180 days)
POCKET CHAMBER (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
PRIMEAIRE (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
PROCARE SPACER WITH ADULT MASK (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
PROCARE SPACER WITH CHILD MASK (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
PROCHAMBER (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
PURE COMFORT SPACER WITH MASK (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG, OTC	QL (1 device per 180 days)
RITFLO (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
SIDESTREAM PEDIATRIC (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
SILICONE MASK (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG	QL (1 device per 180 days)
SILICONE MASK (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
SPACE CHAMBER (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)

DRUG NAME	TYPE	RESTRICTIONS
THRESHOLD IMT (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG	QL (1 device per 180 days)
THRESHOLD PEP (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG	QL (1 device per 180 days)
VORTEX (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
VORTEX (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
VORTEX VHC FROG MASK (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
VORTEX VHC LADYBUG MASK (INHALER, ASSIST DEVICES) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
WINDMILL TRAINER (INHALER, ASSIST DEVICES) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
AEROCHAMBER PLUS FLOW-VU (inhaler,assist dev,small mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
CLEVER CHOICE HOLDING CHAMBER (inhaler,assist dev,small mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
COMPACT SPACE CHAMBER (inhaler,assist dev,small mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
PRO COMFORT SPACER WITH MASK (inhaler,assist dev,small mask) MISCELL. SPACER	NON DRUG, OTC	QL (1 device per 180 days)
SPACE CHAMBER-SMALL MASK (inhaler,assist dev,small mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
COMFORTSEAL (INHALER,ASSIST DEVICE,ACCESORY) MISCELL. EACH	NON DRUG	QL (1 device per 180 days)
FLEXICHAMBER MASK (INHALER,ASSIST DEVICE,ACCESORY) MISCELL. EACH	NON DRUG	QL (1 device per 180 days)
LITETOUCH (INHALER,ASSIST DEVICE,ACCESORY) MISCELL. EACH	NON DRUG	QL (1 device per 180 days)
SIDESTREAM PEDIATRIC (INHALER,ASSIST DEVICE,ACCESORY) MISCELL. EACH	NON DRUG, OTC	QL (1 device per 180 days)
AEROCHAMBER PLUS FLOW-VU (inhaler,assist device,lg mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
CLEVER CHOICE HOLDING CHAMBER (inhaler,assist device,lg mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
COMPACT SPACE CHAMBER (inhaler,assist device,lg mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
PRO COMFORT SPACER WITH MASK (inhaler,assist device,lg mask) MISCELL. SPACER	NON DRUG, OTC	QL (1 device per 180 days)
SPACE CHAMBER-LARGE MASK (inhaler,assist device,lg mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
AEROCHAMBER PLUS FLOW-VU (inhaler,assist device,med mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
COMPACT SPACE CHAMBER (inhaler,assist device,med mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
SPACE CHAMBER-MEDIUM MASK (inhaler,assist device,med mask) MISCELL. SPACER	NON DRUG	QL (1 device per 180 days)
EASIVENT (NEBULIZER ACCESSORIES) MISCELL. EACH	NON DRUG	QL (1 device per 180 days)

XANTHINES

THEOPHYLLINE ER (THEOPHYLLINE ANHYDROUS) 100 MG ORAL TAB ER 12H	GENERIC	
THEOPHYLLINE ER (THEOPHYLLINE ANHYDROUS) 200 MG ORAL TAB ER 12H	GENERIC	
THEOPHYLLINE ER (THEOPHYLLINE ANHYDROUS) 300 MG ORAL TAB ER 12H	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
THEOPHYLLINE ER (THEOPHYLLINE ANHYDROUS) 450 MG ORAL TAB ER 12H	GENERIC	
THEOPHYLLINE ER (THEOPHYLLINE ANHYDROUS) 400 MG ORAL TAB ER 24H	GENERIC	

AUTONOMIC NERVOUS SYSTEM DISORDERS

CHOLINESTERASE INHIBITORS

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

BEHAVIORAL HEALTH - OTHER

ADRENERGICS, AROMATIC, NON-CATECHOLAMINE

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

ANTI-ALCOHOLIC PREPARATIONS

ACAMPROSATE CALCIUM 333 MG ORAL TABLET DR	GENERIC	
DISULFIRAM 250 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
DISULFIRAM 500 MG ORAL TABLET	GENERIC	

BARBITURATES

PHENOBARBITAL 20 MG/5 ML ORAL ELIXIR	GENERIC	
PHENOBARBITAL 15 MG ORAL TABLET	GENERIC	
PHENOBARBITAL 30 MG ORAL TABLET	GENERIC	
PHENOBARBITAL 32.4 MG ORAL TABLET	GENERIC	
PHENOBARBITAL 60 MG ORAL TABLET	GENERIC	
PHENOBARBITAL 64.8 MG ORAL TABLET	GENERIC	
PHENOBARBITAL 97.2MG ORAL TABLET	GENERIC	
PHENOBARBITAL 100 MG ORAL TABLET	GENERIC	

NARCOTIC ANTAGONISTS

NALOXONE HCL 0.4 MG/ML INJECTION VIAL	GENERIC	
NALOXONE HCL 4 MG NASAL SPRAY	GENERIC	
NALOXONE HCL 4 MG NASAL SPRAY	GENERIC, OTC	
NALTREXONE HCL 50 MG ORAL TABLET	GENERIC	

PINEAL HORMONE AGENTS

MELATONIN 5 MG ORAL CAPSULE	BRAND, OTC	
MELATONIN 10 MG ORAL CAPSULE	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	GENERIC, OTC	
MELATONIN 10 MG ORAL TABLET	GENERIC, OTC	
MELATONIN 1 MG ORAL TABLET ER	GENERIC, OTC	
MELATONIN-VITAMIN B6 (MELATONIN) 3 MG-10 MG ORAL TABLET	GENERIC, OTC	

SEDATIVE-HYPNOTICS - BENZODIAZEPINES

TEMAZEPAM 15 MG ORAL CAPSULE	GENERIC	PA (Rx033)
TEMAZEPAM 22.5 MG ORAL CAPSULE	GENERIC	PA (Rx033)
TEMAZEPAM 30 MG ORAL CAPSULE	GENERIC	PA (Rx033)
ALKA-SELTZER PLUS ALLERGY (DIPHENHYDRAMINE HCL) 25 MG ORAL TABLET	GENERIC, OTC	
BENADRYL ALLERGY (DIPHENHYDRAMINE HCL) 50 MG ORAL TABLET	GENERIC, OTC	
DIPHENHYDRAMINE HCL 25 MG ORAL TABLET	GENERIC, OTC	
EZ NITE SLEEP (DIPHENHYDRAMINE HCL) 25 MG ORAL CAPSULE	GENERIC, OTC	
NIGHTTIME SLEEP AID (DIPHENHYDRAMINE HCL) 25 MG ORAL CAPSULE	GENERIC, OTC	
NIGHTTIME SLEEP AID (DIPHENHYDRAMINE HCL) 50 MG ORAL CAPSULE	GENERIC, OTC	
NIGHTTIME SLEEP AID (DIPHENHYDRAMINE HCL) 25 MG ORAL TABLET	GENERIC, OTC	
NIGHTTIME SLEEP GEL (DIPHENHYDRAMINE HCL) 50 MG ORAL CAPSULE	GENERIC, OTC	
NYTOL QUICKCAPS (DIPHENHYDRAMINE HCL) 25 MG ORAL TABLET	GENERIC, OTC	
REST SIMPLY (DIPHENHYDRAMINE HCL) 25 MG ORAL TABLET	GENERIC, OTC	

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

TX FOR ATTENTION DEFICIT-HYPERACT(ADHD)/NARCOLEPSY

DESMETHYLPHENIDATE HCL 2.5 MG ORAL TABLET	GENERIC	AR (age 6 to 18)
DESMETHYLPHENIDATE HCL 5 MG ORAL TABLET	GENERIC	AR (age 6 to 18)
DESMETHYLPHENIDATE HCL 10 MG ORAL TABLET	GENERIC	AR (age 6 to 18)
DESMETHYLPHENIDATE HCL ER (DESMETHYLPHENIDATE HCL) 5 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
DESMETHYLPHENIDATE HCL ER (DESMETHYLPHENIDATE HCL) 10 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
DESMETHYLPHENIDATE HCL ER (DESMETHYLPHENIDATE HCL) 15 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
DESMETHYLPHENIDATE HCL ER (DESMETHYLPHENIDATE HCL) 20 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
DESMETHYLPHENIDATE HCL ER (DESMETHYLPHENIDATE HCL) 25 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
DESMETHYLPHENIDATE HCL ER (DESMETHYLPHENIDATE HCL) 30 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
DESMETHYLPHENIDATE HCL ER (DESMETHYLPHENIDATE HCL) 35 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)

DRUG NAME	TYPE	RESTRICTIONS
DEXMETHYLPHENIDATE HCL ER (DEXMETHYLPHENIDATE HCL) 40 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
METADATE ER (METHYLPHENIDATE HCL) 20 MG ORAL TABLET ER	GENERIC	AR (age 6 to 18); QL (3 tablets per day)
METHYLPHENIDATE ER (METHYLPHENIDATE HCL) 18 MG ORAL TAB ER 24	GENERIC	PA (Rx002)
METHYLPHENIDATE ER (METHYLPHENIDATE HCL) 27 MG ORAL TAB ER 24	GENERIC	PA (Rx002)
METHYLPHENIDATE ER (METHYLPHENIDATE HCL) 36 MG ORAL TAB ER 24	GENERIC	PA (Rx002)
METHYLPHENIDATE ER (METHYLPHENIDATE HCL) 54 MG ORAL TAB ER 24	GENERIC	PA (Rx002)
METHYLPHENIDATE ER (METHYLPHENIDATE HCL) 10 MG ORAL TABLET ER	GENERIC	AR (age 6 to 18); QL (3 tablets per day)
METHYLPHENIDATE ER (METHYLPHENIDATE HCL) 20 MG ORAL TABLET ER	GENERIC	AR (age 6 to 18); QL (3 tablets per day)
METHYLPHENIDATE ER (LA) (METHYLPHENIDATE HCL) 10 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
METHYLPHENIDATE ER (LA) (METHYLPHENIDATE HCL) 20 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
METHYLPHENIDATE ER (LA) (METHYLPHENIDATE HCL) 30 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
METHYLPHENIDATE ER (LA) (METHYLPHENIDATE HCL) 40 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL 2.5 MG ORAL TAB CHEW	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL 5 MG ORAL TAB CHEW	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL 10 MG ORAL TAB CHEW	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL 5 MG ORAL TABLET	GENERIC	AR (age 6 to 18); QL (4 tablets per day)
METHYLPHENIDATE HCL 10 MG ORAL TABLET	GENERIC	AR (age 6 to 18); QL (4 tablets per day)
METHYLPHENIDATE HCL 20 MG ORAL TABLET	GENERIC	AR (age 6 to 18); QL (4 tablets per day)
METHYLPHENIDATE HCL CD (METHYLPHENIDATE HCL) 10 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL CD (METHYLPHENIDATE HCL) 20 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL CD (METHYLPHENIDATE HCL) 30 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL CD (METHYLPHENIDATE HCL) 40 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL CD (METHYLPHENIDATE HCL) 50 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL CD (METHYLPHENIDATE HCL) 60 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL ER (CD) (METHYLPHENIDATE HCL) 10 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL ER (CD) (METHYLPHENIDATE HCL) 20 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL ER (CD) (METHYLPHENIDATE HCL) 30 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL ER (CD) (METHYLPHENIDATE HCL) 40 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)

DRUG NAME	TYPE	RESTRICTIONS
METHYLPHENIDATE HCL ER (CD) (METHYLPHENIDATE HCL) 50 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE HCL ER (CD) (METHYLPHENIDATE HCL) 60 MG ORAL CPBP 30-70	GENERIC	PA (Rx002)
METHYLPHENIDATE LA (METHYLPHENIDATE HCL) 10 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
METHYLPHENIDATE LA (METHYLPHENIDATE HCL) 20 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
METHYLPHENIDATE LA (METHYLPHENIDATE HCL) 30 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)
METHYLPHENIDATE LA (METHYLPHENIDATE HCL) 40 MG ORAL CPBP 50-50	GENERIC	PA (Rx002)

CARDIOVASCULAR DISEASE - ARRHYTHMIA

ANTIARRHYTHMICS

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

CARDIOVASCULAR DISEASE - CARDIAC STIMULANT

DIGITALIS GLYCOSIDES

DIGITEK (DIGOXIN) 125 MCG ORAL TABLET	GENERIC	
DIGITEK (DIGOXIN) 250 MCG ORAL TABLET	GENERIC	
DIGOX (DIGOXIN) 125 MCG ORAL TABLET	GENERIC	
DIGOX (DIGOXIN) 250 MCG ORAL TABLET	GENERIC	
DIGOXIN 125 MCG ORAL TABLET	GENERIC	
DIGOXIN 250 MCG ORAL TABLET	GENERIC	

CARDIOVASCULAR DISEASE - HYPERTENSION

ACE INHIBITOR/CALCIUM CHANNEL BLOCKER COMBINATION

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

ACE INHIBITOR/THIAZIDE & THIAZIDE-LIKE DIURETIC

DRUG NAME	TYPE	RESTRICTIONS
CAPTAPRIL-HYDROCHLOROTHIAZIDE (CAPTOPRIL/HYDROCHLOROTHIAZIDE) 25 MG-15MG ORAL TABLET	GENERIC	
CAPTAPRIL-HYDROCHLOROTHIAZIDE (CAPTOPRIL/HYDROCHLOROTHIAZIDE) 25 MG-25MG ORAL TABLET	GENERIC	
CAPTAPRIL-HYDROCHLOROTHIAZIDE (CAPTOPRIL/HYDROCHLOROTHIAZIDE) 50 MG-15MG ORAL TABLET	GENERIC	
CAPTAPRIL-HYDROCHLOROTHIAZIDE (CAPTOPRIL/HYDROCHLOROTHIAZIDE) 50 MG-25MG ORAL TABLET	GENERIC	
ENALAPRIL-HYDROCHLOROTHIAZIDE (ENALAPRIL/HYDROCHLOROTHIAZIDE) 5MG-12.5MG ORAL TABLET	GENERIC	
ENALAPRIL-HYDROCHLOROTHIAZIDE (ENALAPRIL/HYDROCHLOROTHIAZIDE) 10 MG-25MG ORAL TABLET	GENERIC	
FOSINOPRIL-HYDROCHLOROTHIAZIDE (FOSINOPRIL/HYDROCHLOROTHIAZIDE) 20-12.5 MG ORAL TABLET	GENERIC	
FOSINOPRIL-HYDROCHLOROTHIAZIDE (FOSINOPRIL/HYDROCHLOROTHIAZIDE) 10-12.5 MG ORAL TABLET	GENERIC	
LISINOPRIL-HYDROCHLOROTHIAZIDE (LISINOPRIL/HYDROCHLOROTHIAZIDE) 20-12.5 MG ORAL TABLET	GENERIC	
LISINOPRIL-HYDROCHLOROTHIAZIDE (LISINOPRIL/HYDROCHLOROTHIAZIDE) 20 MG-25MG ORAL TABLET	GENERIC	
LISINOPRIL-HYDROCHLOROTHIAZIDE (LISINOPRIL/HYDROCHLOROTHIAZIDE) 10-12.5 MG ORAL TABLET	GENERIC	
QUINAPRIL-HYDROCHLOROTHIAZIDE (QUINAPRIL/HYDROCHLOROTHIAZIDE) 20-12.5 MG ORAL TABLET	GENERIC	
QUINAPRIL-HYDROCHLOROTHIAZIDE (QUINAPRIL/HYDROCHLOROTHIAZIDE) 20 MG-25MG ORAL TABLET	GENERIC	
QUINAPRIL-HYDROCHLOROTHIAZIDE (QUINAPRIL/HYDROCHLOROTHIAZIDE) 10-12.5 MG ORAL TABLET	GENERIC	

ALPHA/BETA-ADRENERGIC BLOCKING AGENTS

CARVEDILOL 3.125 MG ORAL TABLET	GENERIC	
CARVEDILOL 6.25 MG ORAL TABLET	GENERIC	
CARVEDILOL 12.5 MG ORAL TABLET	GENERIC	
CARVEDILOL 25 MG ORAL TABLET	GENERIC	
LABETALOL HCL 100 MG ORAL TABLET	GENERIC	
LABETALOL HCL 200 MG ORAL TABLET	GENERIC	
LABETALOL HCL 300 MG ORAL TABLET	GENERIC	

ALPHA-ADRENERGIC BLOCKING AGENTS

DOXAZOSIN MESYLATE 1 MG ORAL TABLET	GENERIC	
DOXAZOSIN MESYLATE 2 MG ORAL TABLET	GENERIC	
DOXAZOSIN MESYLATE 4 MG ORAL TABLET	GENERIC	
DOXAZOSIN MESYLATE 8 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
PRAZOSIN HCL 1 MG ORAL CAPSULE	GENERIC	
PRAZOSIN HCL 2 MG ORAL CAPSULE	GENERIC	
PRAZOSIN HCL 5 MG ORAL CAPSULE	GENERIC	
TERAZOSIN HCL 1 MG ORAL CAPSULE	GENERIC	
TERAZOSIN HCL 2 MG ORAL CAPSULE	GENERIC	
TERAZOSIN HCL 5 MG ORAL CAPSULE	GENERIC	
TERAZOSIN HCL 10 MG ORAL CAPSULE	GENERIC	

ANGIOTENSIN RECEPTOR ANTAG./THIAZIDE DIURETIC COMB

IRBESARTAN-HYDROCHLOROTHIAZIDE (IRBESARTAN/HYDROCHLOROTHIAZIDE) 150-12.5MG ORAL TABLET	GENERIC	
IRBESARTAN-HYDROCHLOROTHIAZIDE (IRBESARTAN/HYDROCHLOROTHIAZIDE) 300-12.5MG ORAL TABLET	GENERIC	
LOSARTAN-HYDROCHLOROTHIAZIDE (LOSARTAN/HYDROCHLOROTHIAZIDE) 50-12.5 MG ORAL TABLET	GENERIC	
LOSARTAN-HYDROCHLOROTHIAZIDE (LOSARTAN/HYDROCHLOROTHIAZIDE) 100MG-25MG ORAL TABLET	GENERIC	
LOSARTAN-HYDROCHLOROTHIAZIDE (LOSARTAN/HYDROCHLOROTHIAZIDE) 100-12.5MG ORAL TABLET	GENERIC	
TELMISARTAN-HYDROCHLOROTHIAZID (TELMISARTAN/HYDROCHLOROTHIAZID) 40-12.5 MG ORAL TABLET	GENERIC	ST (irbesartan and losartan)
TELMISARTAN-HYDROCHLOROTHIAZID (TELMISARTAN/HYDROCHLOROTHIAZID) 80-12.5MG ORAL TABLET	GENERIC	ST (irbesartan and losartan)
TELMISARTAN-HYDROCHLOROTHIAZID (TELMISARTAN/HYDROCHLOROTHIAZID) 80 MG-25MG ORAL TABLET	GENERIC	ST (irbesartan and losartan)
VALSARTAN-HYDROCHLOROTHIAZIDE (VALSARTAN/HYDROCHLOROTHIAZIDE) 80-12.5MG ORAL TABLET	GENERIC	ST (irbesartan and losartan)
VALSARTAN-HYDROCHLOROTHIAZIDE (VALSARTAN/HYDROCHLOROTHIAZIDE) 160-12.5MG ORAL TABLET	GENERIC	ST (irbesartan and losartan)
VALSARTAN-HYDROCHLOROTHIAZIDE (VALSARTAN/HYDROCHLOROTHIAZIDE) 160MG-25MG ORAL TABLET	GENERIC	ST (irbesartan and losartan)
VALSARTAN-HYDROCHLOROTHIAZIDE (VALSARTAN/HYDROCHLOROTHIAZIDE) 320-12.5MG ORAL TABLET	GENERIC	ST (irbesartan and losartan)
VALSARTAN-HYDROCHLOROTHIAZIDE (VALSARTAN/HYDROCHLOROTHIAZIDE) 320MG-25MG ORAL TABLET	GENERIC	ST (irbesartan and losartan)

ANTIHYPERTENSIVES, ACE INHIBITORS

BENAZEPRIL HCL 5 MG ORAL TABLET	GENERIC	
BENAZEPRIL HCL 10 MG ORAL TABLET	GENERIC	
BENAZEPRIL HCL 20 MG ORAL TABLET	GENERIC	
BENAZEPRIL HCL 40 MG ORAL TABLET	GENERIC	
CAPTOPRIL 12.5 MG ORAL TABLET	GENERIC	
CAPTOPRIL 25 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
CAPTOPRIL 50 MG ORAL TABLET	GENERIC	
CAPTOPRIL 100 MG ORAL TABLET	GENERIC	
ENALAPRIL MALEATE 2.5 MG ORAL TABLET	GENERIC	
ENALAPRIL MALEATE 5 MG ORAL TABLET	GENERIC	
ENALAPRIL MALEATE 10 MG ORAL TABLET	GENERIC	
ENALAPRIL MALEATE 20 MG ORAL TABLET	GENERIC	
FOSINOPRIL SODIUM 10 MG ORAL TABLET	GENERIC	
FOSINOPRIL SODIUM 20 MG ORAL TABLET	GENERIC	
FOSINOPRIL SODIUM 40 MG ORAL TABLET	GENERIC	
LISINOPRIL 2.5 MG ORAL TABLET	GENERIC	
LISINOPRIL 5 MG ORAL TABLET	GENERIC	
LISINOPRIL 10 MG ORAL TABLET	GENERIC	
LISINOPRIL 20 MG ORAL TABLET	GENERIC	
LISINOPRIL 30 MG ORAL TABLET	GENERIC	
LISINOPRIL 40 MG ORAL TABLET	GENERIC	
QUINAPRIL HCL 5 MG ORAL TABLET	GENERIC	
QUINAPRIL HCL 10 MG ORAL TABLET	GENERIC	
QUINAPRIL HCL 20 MG ORAL TABLET	GENERIC	
QUINAPRIL HCL 40 MG ORAL TABLET	GENERIC	
RAMIPRIL 1.25 MG ORAL CAPSULE	GENERIC	
RAMIPRIL 2.5 MG ORAL CAPSULE	GENERIC	
RAMIPRIL 5 MG ORAL CAPSULE	GENERIC	
RAMIPRIL 10 MG ORAL CAPSULE	GENERIC	

ANTIHYPERTENSIVES, ANGIOTENSIN RECEPTOR ANTAGONIST

IRBESARTAN 75 MG ORAL TABLET	GENERIC	
IRBESARTAN 150 MG ORAL TABLET	GENERIC	
IRBESARTAN 300 MG ORAL TABLET	GENERIC	
LOSARTAN POTASSIUM 25 MG ORAL TABLET	GENERIC	
LOSARTAN POTASSIUM 50 MG ORAL TABLET	GENERIC	
LOSARTAN POTASSIUM 100 MG ORAL TABLET	GENERIC	
OLMESARTAN MEDOXOMIL 5 MG ORAL TABLET	GENERIC	
OLMESARTAN MEDOXOMIL 20 MG ORAL TABLET	GENERIC	
OLMESARTAN MEDOXOMIL 40 MG ORAL TABLET	GENERIC	
TELMISARTAN 20 MG ORAL TABLET	GENERIC	ST (irbesartan, losartan, or olmesartan)
TELMISARTAN 40 MG ORAL TABLET	GENERIC	ST (irbesartan, losartan, or olmesartan)
TELMISARTAN 80 MG ORAL TABLET	GENERIC	ST (irbesartan, losartan, or olmesartan)
VALSARTAN 40 MG ORAL TABLET	GENERIC	ST (irbesartan, losartan, or olmesartan)
VALSARTAN 80 MG ORAL TABLET	GENERIC	ST (irbesartan, losartan, or olmesartan)
VALSARTAN 160 MG ORAL TABLET	GENERIC	ST (irbesartan, losartan, or olmesartan)
VALSARTAN 320 MG ORAL TABLET	GENERIC	ST (irbesartan, losartan, or olmesartan)

ANTIHYPERTENSIVES, SYMPATHOLYTIC

DRUG NAME	TYPE	RESTRICTIONS
CLONIDINE HCL 0.1 MG ORAL TABLET	GENERIC	
CLONIDINE HCL 0.2 MG ORAL TABLET	GENERIC	
CLONIDINE HCL 0.3 MG ORAL TABLET	GENERIC	
GUANFACINE HCL 1 MG ORAL TABLET	GENERIC	
GUANFACINE HCL 2 MG ORAL TABLET	GENERIC	
METHYLDOPA 250 MG ORAL TABLET	GENERIC	
METHYLDOPA 500 MG ORAL TABLET	GENERIC	

ANTIHYPERTENSIVES, VASODILATORS

HYDRALAZINE HCL 10 MG ORAL TABLET	GENERIC	
HYDRALAZINE HCL 25 MG ORAL TABLET	GENERIC	
HYDRALAZINE HCL 50 MG ORAL TABLET	GENERIC	
HYDRALAZINE HCL 100 MG ORAL TABLET	GENERIC	
MINOXIDIL 2.5 MG ORAL TABLET	GENERIC	
MINOXIDIL 10 MG ORAL TABLET	GENERIC	

BETA-ADRENERGIC BLOCKING AGENTS

ACEBUTOLOL HCL 200 MG ORAL CAPSULE	GENERIC	
ACEBUTOLOL HCL 400 MG ORAL CAPSULE	GENERIC	
ATENOLOL 25 MG ORAL TABLET	GENERIC	
ATENOLOL 50 MG ORAL TABLET	GENERIC	
ATENOLOL 100 MG ORAL TABLET	GENERIC	
BISOPROLOL FUMARATE 5 MG ORAL TABLET	GENERIC	
BISOPROLOL FUMARATE 10 MG ORAL TABLET	GENERIC	
METOPROLOL SUCCINATE 25 MG ORAL TAB ER 24H	GENERIC	QL (2 tablets per day)
METOPROLOL SUCCINATE 50 MG ORAL TAB ER 24H	GENERIC	QL (2 tablets per day)
METOPROLOL SUCCINATE 100 MG ORAL TAB ER 24H	GENERIC	QL (2 tablets per day)
METOPROLOL SUCCINATE 200 MG ORAL TAB ER 24H	GENERIC	QL (2 tablets per day)
METOPROLOL TARTRATE 25 MG ORAL TABLET	GENERIC	
METOPROLOL TARTRATE 50 MG ORAL TABLET	GENERIC	
METOPROLOL TARTRATE 100 MG ORAL TABLET	GENERIC	
NADOLOL 20 MG ORAL TABLET	GENERIC	
NADOLOL 40 MG ORAL TABLET	GENERIC	
NADOLOL 80 MG ORAL TABLET	GENERIC	
PROPRANOLOL HCL 20 MG/5 ML ORAL SOLUTION	GENERIC	
PROPRANOLOL HCL 40MG/5ML ORAL SOLUTION	GENERIC	
PROPRANOLOL HCL 10 MG ORAL TABLET	GENERIC	
PROPRANOLOL HCL 20 MG ORAL TABLET	GENERIC	
PROPRANOLOL HCL 40 MG ORAL TABLET	GENERIC	
PROPRANOLOL HCL 60 MG ORAL TABLET	GENERIC	
PROPRANOLOL HCL 80 MG ORAL TABLET	GENERIC	
PROPRANOLOL HCL ER (PROPRANOLOL HCL) 60 MG ORAL CAP SA 24H	GENERIC	
PROPRANOLOL HCL ER (PROPRANOLOL HCL) 80 MG ORAL CAP SA 24H	GENERIC	
PROPRANOLOL HCL ER (PROPRANOLOL HCL) 120 MG ORAL CAP SA 24H	GENERIC	
PROPRANOLOL HCL ER (PROPRANOLOL HCL) 160 MG ORAL CAP SA 24H	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
SORINE (SOTALOL HCL) 80 MG ORAL TABLET	GENERIC	
SORINE (SOTALOL HCL) 120 MG ORAL TABLET	GENERIC	
SORINE (SOTALOL HCL) 160 MG ORAL TABLET	GENERIC	
SORINE (SOTALOL HCL) 240 MG ORAL TABLET	GENERIC	
SOTALOL (SOTALOL HCL) 80 MG ORAL TABLET	GENERIC	
SOTALOL (SOTALOL HCL) 120 MG ORAL TABLET	GENERIC	
SOTALOL (SOTALOL HCL) 160 MG ORAL TABLET	GENERIC	
SOTALOL (SOTALOL HCL) 240 MG ORAL TABLET	GENERIC	
SOTALOL AF (SOTALOL HCL) 80 MG ORAL TABLET	GENERIC	
SOTALOL AF (SOTALOL HCL) 120 MG ORAL TABLET	GENERIC	
SOTALOL AF (SOTALOL HCL) 160 MG ORAL TABLET	GENERIC	

BETA-ADRENERGIC BLOCKING AGENTS/THIAZIDE & RELATED

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

CALCIUM CHANNEL BLOCKING AGENTS

AMLODIPINE BESYLATE 2.5 MG ORAL TABLET	GENERIC	
AMLODIPINE BESYLATE 5 MG ORAL TABLET	GENERIC	
AMLODIPINE BESYLATE 10 MG ORAL TABLET	GENERIC	
CARTIA XT (DILTIAZEM HCL) 120 MG ORAL CAP ER 24H	GENERIC	
CARTIA XT (DILTIAZEM HCL) 180 MG ORAL CAP ER 24H	GENERIC	
CARTIA XT (DILTIAZEM HCL) 240 MG ORAL CAP ER 24H	GENERIC	
CARTIA XT (DILTIAZEM HCL) 300 MG ORAL CAP ER 24H	GENERIC	
DILTIAZEM 12HR ER (DILTIAZEM HCL) 60 MG ORAL CAP ER 12H	GENERIC	
DILTIAZEM 12HR ER (DILTIAZEM HCL) 90 MG ORAL CAP ER 12H	GENERIC	
DILTIAZEM 12HR ER (DILTIAZEM HCL) 120 MG ORAL CAP ER 12H	GENERIC	
DILTIAZEM 24HR ER (DILTIAZEM HCL) 120 MG ORAL CAP SA 24H	GENERIC	
DILTIAZEM 24HR ER (DILTIAZEM HCL) 180 MG ORAL CAP SA 24H	GENERIC	
DILTIAZEM 24HR ER (DILTIAZEM HCL) 240 MG ORAL CAP SA 24H	GENERIC	
DILTIAZEM 24HR ER (DILTIAZEM HCL) 300 MG ORAL CAP SA 24H	GENERIC	
DILTIAZEM 24HR ER (DILTIAZEM HCL) 360 MG ORAL CAP SA 24H	GENERIC	
DILTIAZEM 24HR ER (DILTIAZEM HCL) 420 MG ORAL CAP SA 24H	GENERIC	
DILTIAZEM 24HR ER (CD) (DILTIAZEM HCL) 120 MG ORAL CAP ER 24H	GENERIC	
DILTIAZEM 24HR ER (CD) (DILTIAZEM HCL) 180 MG ORAL CAP ER 24H	GENERIC	

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

DRUG NAME	TYPE	RESTRICTIONS
NIFEDIPINE ER (NIFEDIPINE) 60 MG ORAL TAB ER 24	GENERIC	
NIFEDIPINE ER (NIFEDIPINE) 90 MG ORAL TAB ER 24	GENERIC	
NIFEDIPINE ER (NIFEDIPINE) 30 MG ORAL TABLET ER	GENERIC	
NIFEDIPINE ER (NIFEDIPINE) 60 MG ORAL TABLET ER	GENERIC	
NIFEDIPINE ER (NIFEDIPINE) 90 MG ORAL TABLET ER	GENERIC	
VERAPAMIL ER (VERAPAMIL HCL) 120 MG ORAL TABLET ER	GENERIC	
VERAPAMIL ER (VERAPAMIL HCL) 180 MG ORAL TABLET ER	GENERIC	
VERAPAMIL ER (VERAPAMIL HCL) 240 MG ORAL TABLET ER	GENERIC	
VERAPAMIL HCL 40 MG ORAL TABLET	GENERIC	
VERAPAMIL HCL 80 MG ORAL TABLET	GENERIC	
VERAPAMIL HCL 120 MG ORAL TABLET	GENERIC	

LOOP DIURETICS

BUMETANIDE 0.5 MG ORAL TABLET	GENERIC	
BUMETANIDE 1 MG ORAL TABLET	GENERIC	
BUMETANIDE 2 MG ORAL TABLET	GENERIC	
FUROSEMIDE 10 MG/ML ORAL SOLUTION	GENERIC	
FUROSEMIDE 40MG/5ML ORAL SOLUTION	GENERIC	
FUROSEMIDE 20 MG ORAL TABLET	GENERIC	
FUROSEMIDE 40 MG ORAL TABLET	GENERIC	
FUROSEMIDE 80 MG ORAL TABLET	GENERIC	
TORSEMIDE 5 MG ORAL TABLET	GENERIC	
TORSEMIDE 10 MG ORAL TABLET	GENERIC	
TORSEMIDE 20 MG ORAL TABLET	GENERIC	
TORSEMIDE 100 MG ORAL TABLET	GENERIC	

POTASSIUM SPARING DIURETICS

AMILORIDE HCL 5 MG ORAL TABLET	GENERIC	
SPIRONOLACTONE 25 MG ORAL TABLET	GENERIC	
SPIRONOLACTONE 50 MG ORAL TABLET	GENERIC	
SPIRONOLACTONE 100 MG ORAL TABLET	GENERIC	

POTASSIUM SPARING DIURETICS IN COMBINATION

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

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

SILDENAFIL CITRATE 20 MG ORAL TABLET	GENERIC	PA (Rx034)
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THIAZIDE AND RELATED DIURETICS

CHLORTHALIDONE 25 MG ORAL TABLET	GENERIC	
CHLORTHALIDONE 50 MG ORAL TABLET	GENERIC	
THALITONE (CHLORTHALIDONE) 15 MG ORAL TABLET	BRAND	
HYDROCHLOROTHIAZIDE 12.5 MG ORAL CAPSULE	GENERIC	
HYDROCHLOROTHIAZIDE 12.5 MG ORAL TABLET	GENERIC	
HYDROCHLOROTHIAZIDE 25 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
HYDROCHLOROTHIAZIDE 50 MG ORAL TABLET	GENERIC	
INDAPAMIDE 1.25 MG ORAL TABLET	GENERIC	
INDAPAMIDE 2.5 MG ORAL TABLET	GENERIC	
METOLAZONE 2.5 MG ORAL TABLET	GENERIC	
METOLAZONE 5 MG ORAL TABLET	GENERIC	
METOLAZONE 10 MG ORAL TABLET	GENERIC	

CARDIOVASCULAR DISEASE - LIPID IRREGULARITY

ANTHYPERLIPIDEMIC - HMG COA REDUCTASE INHIBITORS

ATORVASTATIN CALCIUM 10 MG ORAL TABLET	GENERIC	
ATORVASTATIN CALCIUM 20 MG ORAL TABLET	GENERIC	
ATORVASTATIN CALCIUM 40 MG ORAL TABLET	GENERIC	
ATORVASTATIN CALCIUM 80 MG ORAL TABLET	GENERIC	
LOVASTATIN 10 MG ORAL TABLET	GENERIC	
LOVASTATIN 20 MG ORAL TABLET	GENERIC	
LOVASTATIN 40 MG ORAL TABLET	GENERIC	
PRAVASTATIN SODIUM 10 MG ORAL TABLET	GENERIC	
PRAVASTATIN SODIUM 20 MG ORAL TABLET	GENERIC	
PRAVASTATIN SODIUM 40 MG ORAL TABLET	GENERIC	
PRAVASTATIN SODIUM 80 MG ORAL TABLET	GENERIC	
ROSUVASTATIN CALCIUM 5 MG ORAL TABLET	GENERIC	
ROSUVASTATIN CALCIUM 10 MG ORAL TABLET	GENERIC	
ROSUVASTATIN CALCIUM 20 MG ORAL TABLET	GENERIC	
ROSUVASTATIN CALCIUM 40 MG ORAL TABLET	GENERIC	
SIMVASTATIN 5 MG ORAL TABLET	GENERIC	
SIMVASTATIN 10 MG ORAL TABLET	GENERIC	
SIMVASTATIN 20 MG ORAL TABLET	GENERIC	
SIMVASTATIN 40 MG ORAL TABLET	GENERIC	
SIMVASTATIN 80 MG ORAL TABLET	GENERIC	

BILE SALT SEQUESTRANTS

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

LIPOTROPICS

FISH OIL (DOCOSAHEXANOIC ACID/EPA) 100-160 MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (DOCOSAHEXANOIC ACID/EPA) 120-180 MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (DOCOSAHEXANOIC ACID/EPA) 300-500 MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (DOCOSAHEXANOIC ACID/EPA) 300-1000MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (DOCOSAHEXANOIC ACID/EPA) 435-880MG ORAL CAPSULE	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
FISH OIL (DOCOSAHEXANOIC ACID/EPA) 300-1000MG ORAL CAPSULE DR	GENERIC, OTC	
FISH OIL CONCENTRATE (DOCOSAHEXANOIC ACID/EPA) 300-1000MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL OMEGA-3 (DOCOSAHEXANOIC ACID/EPA) 300-1000MG ORAL CAPSULE	GENERIC, OTC	
OMEGA-3 FISH OIL (DOCOSAHEXANOIC ACID/EPA) 300-1000MG ORAL CAPSULE	GENERIC, OTC	
ULTRA OMEGA-3 (DOCOSAHEXANOIC ACID/EPA) 200-300 MG ORAL CAPSULE	GENERIC, OTC	
EZETIMIBE 10 MG ORAL TABLET	GENERIC	
FENOFIBRATE 54 MG ORAL TABLET	GENERIC	
FENOFIBRATE 160 MG ORAL TABLET	GENERIC	
FENOFIBRATE (FENOFIBRATE NANOCRYSTALLIZED) 48 MG ORAL TABLET	GENERIC	
FENOFIBRATE (FENOFIBRATE NANOCRYSTALLIZED) 145 MG ORAL TABLET	GENERIC	
FENOFIBRATE (FENOFIBRATE,MICRONIZED) 67 MG ORAL CAPSULE	GENERIC	
FENOFIBRATE (FENOFIBRATE,MICRONIZED) 134 MG ORAL CAPSULE	GENERIC	
FISH OIL (FISH OIL/DHA/EPA) 360-1200MG ORAL CAPSULE DR	GENERIC, OTC	
FISH OIL (FISH OIL/OMEGA-3 FATTY ACIDS) 300-1000MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (FISH OIL/OMEGA-3 FATTY ACIDS) 360-1200MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (FISH OIL/OMEGA-3 FATTY ACIDS) 120-180-60 ORAL CAPSULE DR	GENERIC, OTC	
FISH OIL (FISH OIL/OMEGA-3 FATTY ACIDS) 360-1200MG ORAL CAPSULE DR	GENERIC, OTC	
FISH OIL OMEGA-3 (FISH OIL/OMEGA-3 FATTY ACIDS) 300-1000MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL OMEGA-3 (FISH OIL/OMEGA-3 FATTY ACIDS) 360-1200MG ORAL CAPSULE	GENERIC, OTC	
OMEGA-3 FISH OIL (FISH OIL/OMEGA-3 FATTY ACIDS) 300-1000MG ORAL CAPSULE	GENERIC, OTC	
OMEGA-3 FISH OIL (FISH OIL/OMEGA-3 FATTY ACIDS) 360-1200MG ORAL CAPSULE	GENERIC, OTC	
GEMFIBROZIL 600 MG ORAL TABLET	GENERIC	
NIACIN ER (NIACIN) 500 MG ORAL TAB ER 24H	GENERIC	
NIACIN ER (NIACIN) 750 MG ORAL TAB ER 24H	GENERIC	
NIACIN ER (NIACIN) 1000 MG ORAL TAB ER 24H	GENERIC	
FISH OIL-VIT D3 (OM-3/DHA/EPA/FISH OIL/VIT D3) 300-1000MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (OMEGA-3 FATTY ACIDS) 60 MG-90MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (OMEGA-3 FATTY ACIDS) 1000 MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (OMEGA-3 FATTY ACIDS) 60 MG-90MG ORAL CAPSULE DR	GENERIC, OTC	
MAXEPA (OMEGA-3 FATTY ACIDS) 500 MG ORAL CAPSULE	GENERIC, OTC	
OMEGA-3 (OMEGA-3 FATTY ACIDS) 1000 MG ORAL CAPSULE	GENERIC, OTC	
OMEGA-3 FISH OIL (OMEGA-3 FATTY ACIDS) 1000 MG ORAL	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
CAPSULE		
SUPER OMEGA-3 (OMEGA-3 FATTY ACIDS) 1000 MG ORAL CAPSULE	GENERIC, OTC	
OMEGA-3 FISH OIL (OMEGA-3 FATTY ACIDS/VITAMIN E) 300-1000MG ORAL CAPSULE	GENERIC, OTC	
EXTREME OMEGA-3 MICROGEL (OMEGA-3/DHA/EPA/FISH OIL) 120-180 MG ORAL CAPSULE	BRAND, OTC	
FISH OIL (OMEGA-3/DHA/EPA/FISH OIL) 60 MG-90MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (OMEGA-3/DHA/EPA/FISH OIL) 100-160 MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (OMEGA-3/DHA/EPA/FISH OIL) 120-180 MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (OMEGA-3/DHA/EPA/FISH OIL) 300-1000MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (OMEGA-3/DHA/EPA/FISH OIL) 1000 MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (OMEGA-3/DHA/EPA/FISH OIL) 300-1000MG ORAL CAPSULE DR	GENERIC, OTC	
FISH OIL (OMEGA-3/DHA/EPA/FISH OIL) 300-600 MG ORAL CAPSULE DR	GENERIC, OTC	
FISH OIL (OMEGA-3/DHA/EPA/FISH OIL) 28.5-113.5 ORAL TAB CHEW	BRAND, OTC	
OMEGA-3 FISH OIL (OMEGA-3/DHA/EPA/FISH OIL) 1000 MG ORAL CAPSULE	GENERIC, OTC	
OMEGA-3 FISH OIL (OMEGA-3/DHA/EPA/FISH OIL) 300-1000MG ORAL CAPSULE DR	GENERIC, OTC	
FISH OIL (OMEGA-3S/DHA/EPA/FISH OIL) 300-1000MG ORAL CAPSULE	BRAND, OTC	
FISH OIL (OMEGA-3S/DHA/EPA/FISH OIL) 600-1000MG ORAL CAPSULE	GENERIC, OTC	
FISH OIL (OMEGA-3S/DHA/EPA/FISH OIL) 120-180-60 ORAL CAPSULE DR	GENERIC, OTC	
FISH OIL (OMEGA-3S/DHA/EPA/FISH OIL) 300-1000MG ORAL CAPSULE DR	BRAND, OTC	
OMEGA-3 FISH OIL (OMEGA-3S/DHA/EPA/FISH OIL) 300-1000MG ORAL CAPSULE	BRAND, OTC	
EXTREME OMEGA-3 MICROGEL (UNKNOWN) 120-180 MG ORAL CAPSULE	BRAND, OTC	

CARDIOVASCULAR DISEASE - MISCELLANEOUS AGENTS

ADRENERGIC VASOPRESSOR AGENTS

MIDODRINE HCL 2.5 MG ORAL TABLET	GENERIC	
MIDODRINE HCL 5 MG ORAL TABLET	GENERIC	
MIDODRINE HCL 10 MG ORAL TABLET	GENERIC	

ANGIOTENSIN RECEPT-NEPRILYSIN INHIBITOR COMB(ARNI)

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

CARDIOVASCULAR DISEASE - VASODILATION

VASODILATORS,CORONARY

DRUG NAME	TYPE	RESTRICTIONS
ISOSORBIDE DINITRATE 5 MG ORAL TABLET	GENERIC	
ISOSORBIDE DINITRATE 10 MG ORAL TABLET	GENERIC	
ISOSORBIDE DINITRATE 20 MG ORAL TABLET	GENERIC	
ISOSORBIDE DINITRATE 30 MG ORAL TABLET	GENERIC	
ISOSORBIDE MONONITRATE 10 MG ORAL TABLET	GENERIC	
ISOSORBIDE MONONITRATE 20 MG ORAL TABLET	GENERIC	
ISOSORBIDE MONONITRATE ER (ISOSORBIDE MONONITRATE) 30 MG ORAL TAB ER 24H	GENERIC	
ISOSORBIDE MONONITRATE ER (ISOSORBIDE MONONITRATE) 60 MG ORAL TAB ER 24H	GENERIC	
ISOSORBIDE MONONITRATE ER (ISOSORBIDE MONONITRATE) 120 MG ORAL TAB ER 24H	GENERIC	
NITRO-BID (NITROGLYCERIN) 2% TRANSDERM. OINT. (G)	BRAND	
NITRO-DUR (NITROGLYCERIN) 0.3 MG/HR TRANSDERM. PATCH TD24	BRAND	
NITRO-DUR (NITROGLYCERIN) 0.8MG/HR TRANSDERM. PATCH TD24	BRAND	
NITROGLYCERIN 0.3 MG SUBLINGUAL TAB SUBL	GENERIC	
NITROGLYCERIN 0.4 MG SUBLINGUAL TAB SUBL	GENERIC	
NITROGLYCERIN 0.6 MG SUBLINGUAL TAB SUBL	GENERIC	
NITROGLYCERIN PATCH (NITROGLYCERIN) 0.1MG/HR TRANSDERM. PATCH TD24	GENERIC	
NITROGLYCERIN PATCH (NITROGLYCERIN) 0.2MG/HR TRANSDERM. PATCH TD24	GENERIC	
NITROGLYCERIN PATCH (NITROGLYCERIN) 0.4MG/HR TRANSDERM. PATCH TD24	GENERIC	
NITROGLYCERIN PATCH (NITROGLYCERIN) 0.6MG/HR TRANSDERM. PATCH TD24	GENERIC	

CONTRACEPTION/OXYTOCICS

CONTRACEPTIVES, INTRAVAGINAL, SYSTEMIC

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

CONTRACEPTIVES, INJECTABLE

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

CONTRACEPTIVES, ORAL

APRI (DESOGESTREL-ETHINYL ESTRADIOL) 0.15-0.03 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
CAZIAN (DESOGESTREL-ETHINYL ESTRADIOL) 7 DAYS X 3 ORAL	GENERIC	QL (28 tablets per 21 days)

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

DRUG NAME	TYPE	RESTRICTIONS
ESTRADIOL) 1 MG-35MCG ORAL TABLET		
KELNOR 1-35 (ETHYNODIOL D-ETHINYL ESTRADIOL) 1 MG-35MCG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
KELNOR 1-50 (ETHYNODIOL D-ETHINYL ESTRADIOL) 1 MG-50MCG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
ZOVIA 1-35 (ETHYNODIOL D-ETHINYL ESTRADIOL) 1 MG-35MCG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
AFTER PILL (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
AFTERA (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
ECONTRA EZ (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
ECONTRA ONE-STEP (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
HER STYLE (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
LEVONORGESTREL 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
MY CHOICE (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
MY WAY (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
NEW DAY (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
OPCICON ONE-STEP (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
OPTION 2 (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
TAKE ACTION (LEVONORGESTREL) 1.5 MG ORAL TABLET	GENERIC, OTC	QL (1 tablet per fill)
AFIRMELLE (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
ALTAVERA (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
AUBRA (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
AUBRA EQ (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
AVIANE (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
AYUNA (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
CHATEAL (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
CHATEAL EQ (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
ENPRESSE (LEVONORGESTREL-ETH ESTRA) 6/5/2010 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
FALMINA (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
ICLEVIA (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TBDSPK 3MO	GENERIC	QL (1 tablet per day)
JOLESSA (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TBDSPK 3MO	GENERIC	QL (1 tablet per day)
KURVELO (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
LESSINA (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
LEVONEST (LEVONORGESTREL-ETH ESTRA) 6/5/2010 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
LEVONORGESTREL-ETH ESTRADIOL (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
LEVONORGESTREL-ETH ESTRADIOL (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)

DRUG NAME	TYPE	RESTRICTIONS
LEVONORGESTREL-ETH ESTRADIOL (LEVONORGESTREL-ETH ESTRA) 6/5/2010 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
LEVONORGESTREL-ETH ESTRADIOL (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TBDSPK 3MO	GENERIC	QL (1 tablet per day)
LEVORA-28 (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
LUTERA (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
MARLISSA (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
PORTIA (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
SETLAKIN (LEVONORGESTREL-ETH ESTRA) 0.15-0.03 ORAL TBDSPK 3MO	GENERIC	QL (1 tablet per day)
SRONYX (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRIVORA-28 (LEVONORGESTREL-ETH ESTRA) 6/5/2010 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TYBLUME (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TAB CHEW	GENERIC	QL (28 tablets per 21 days)
VIENVA (LEVONORGESTREL-ETH ESTRA) 0.1-0.02MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
AUROVELA FE (NORETH A-ET ESTRA/FE FUMARATE) 1MG-20(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
AUROVELA FE (NORETH A-ET ESTRA/FE FUMARATE) 1.5-30(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
BLISOVI FE (NORETH A-ET ESTRA/FE FUMARATE) 1MG-20(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
BLISOVI FE (NORETH A-ET ESTRA/FE FUMARATE) 1.5-30(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
HAILEY FE (NORETH A-ET ESTRA/FE FUMARATE) 1MG-20(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
HAILEY FE (NORETH A-ET ESTRA/FE FUMARATE) 1.5-30(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
JUNEL FE (NORETH A-ET ESTRA/FE FUMARATE) 1MG-20(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
JUNEL FE (NORETH A-ET ESTRA/FE FUMARATE) 1.5-30(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
LARIN FE (NORETH A-ET ESTRA/FE FUMARATE) 1MG-20(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
LARIN FE (NORETH A-ET ESTRA/FE FUMARATE) 1.5-30(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
MICROGESTIN FE (NORETH A-ET ESTRA/FE FUMARATE) 1MG-20(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
MICROGESTIN FE (NORETH A-ET ESTRA/FE FUMARATE) 1.5-30(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
NORETHINDRONE-E.ESTRADIOL-IRON (NORETH A-ET ESTRA/FE FUMARATE) 1MG-20(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
NORETHINDRONE-E.ESTRADIOL-IRON (NORETH A-ET ESTRA/FE FUMARATE) 1.5-30(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
TARINA FE (NORETH A-ET ESTRA/FE FUMARATE) 1MG-20(21) ORAL TABLET	GENERIC	QL (1 tablet per day)
TARINA FE 1-20 EQ (NORETH A-ET ESTRA/FE FUMARATE) 1MG-20(21) ORAL TABLET	GENERIC	QL (1 tablet per day)

DRUG NAME	TYPE	RESTRICTIONS
CAMILA (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
DEBLITANE (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
ERRIN (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
HEATHER (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
INCASSIA (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
JENCYCLA (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
LYLEQ (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
LYZA (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NORA-BE (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NORETHINDRONE 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
SHAROBEL (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TULANA (NORETHINDRONE) 0.35 MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
AUROVELA (NORETHINDRONE A-E ESTRADIOL) 1MG-20MCG ORAL TABLET	GENERIC	QL (1 tablet per day)
AUROVELA (NORETHINDRONE A-E ESTRADIOL) 1.5-0.03MG ORAL TABLET	GENERIC	QL (1 tablet per day)
HAILEY (NORETHINDRONE A-E ESTRADIOL) 1.5-0.03MG ORAL TABLET	GENERIC	QL (1 tablet per day)
JUNEL (NORETHINDRONE A-E ESTRADIOL) 1MG-20MCG ORAL TABLET	GENERIC	QL (1 tablet per day)
JUNEL (NORETHINDRONE A-E ESTRADIOL) 1.5-0.03MG ORAL TABLET	GENERIC	QL (1 tablet per day)
LARIN (NORETHINDRONE A-E ESTRADIOL) 1MG-20MCG ORAL TABLET	GENERIC	QL (1 tablet per day)
LARIN (NORETHINDRONE A-E ESTRADIOL) 1.5-0.03MG ORAL TABLET	GENERIC	QL (1 tablet per day)
MICROGESTIN (NORETHINDRONE A-E ESTRADIOL) 1MG-20MCG ORAL TABLET	GENERIC	QL (1 tablet per day)
MICROGESTIN (NORETHINDRONE A-E ESTRADIOL) 1.5-0.03MG ORAL TABLET	GENERIC	QL (1 tablet per day)
NORETHINDRON-ETHINYL ESTRADIOL (NORETHINDRONE A-E ESTRADIOL) 1MG-20MCG ORAL TABLET	GENERIC	QL (1 tablet per day)
NORETHINDRON-ETHINYL ESTRADIOL (NORETHINDRONE A-E ESTRADIOL) 1.5-0.03MG ORAL TABLET	GENERIC	QL (1 tablet per day)
ALYACEN (NORETHINDRONE-ETHINYL ESTRAD) 1 MG-35MCG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
ALYACEN (NORETHINDRONE-ETHINYL ESTRAD) 7 DAYS X 3 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
ARANELLE (NORETHINDRONE-ETHINYL ESTRAD) 7/9/2005 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
BALZIVA (NORETHINDRONE-ETHINYL ESTRAD) 0.4-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
BRIELLYN (NORETHINDRONE-ETHINYL ESTRAD) 0.4-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
DASETTA (NORETHINDRONE-ETHINYL ESTRAD) 1 MG-35MCG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
DASETTA (NORETHINDRONE-ETHINYL ESTRAD) 7 DAYS X 3 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
LEENA (NORETHINDRONE-ETHINYL ESTRAD) 7/9/2005 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NECON (NORETHINDRONE-ETHINYL ESTRAD) 0.5-0.035 ORAL	GENERIC	QL (28 tablets per 21 days)

DRUG NAME	TYPE	RESTRICTIONS
TABLET		
NORTREL (NORETHINDRONE-ETHINYL ESTRAD) 0.5-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NORTREL (NORETHINDRONE-ETHINYL ESTRAD) 1 MG-35MCG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NORTREL (NORETHINDRONE-ETHINYL ESTRAD) 7 DAYS X 3 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NYLIA (NORETHINDRONE-ETHINYL ESTRAD) 1 MG-35MCG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NYLIA (NORETHINDRONE-ETHINYL ESTRAD) 7 DAYS X 3 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
PHILITH (NORETHINDRONE-ETHINYL ESTRAD) 0.4-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
VYFEMLA (NORETHINDRONE-ETHINYL ESTRAD) 0.4-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
WERA (NORETHINDRONE-ETHINYL ESTRAD) 0.5-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
ESTARYLLA (NORGESTIMATE-ETHINYL ESTRADIOL) 0.25-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
MILI (NORGESTIMATE-ETHINYL ESTRADIOL) 0.25-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
MONO-LINYAH (NORGESTIMATE-ETHINYL ESTRADIOL) 0.25-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NORGESTIMATE-ETHINYL ESTRADIOL 0.25-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NORGESTIMATE-ETHINYL ESTRADIOL 7DAYSX3 28 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NORGESTIMATE-ETHINYL ESTRADIOL 7DAYSX3 LO ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
NYMYO (NORGESTIMATE-ETHINYL ESTRADIOL) 0.25-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
SPRINTEC (NORGESTIMATE-ETHINYL ESTRADIOL) 0.25-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-ESTARYLLA (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 28 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-LINYAH (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 28 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-LO-ESTARYLLA (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 LO ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-LO-MARZIA (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 LO ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-LO-MILI (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 LO ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-LO-SPRINTEC (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 LO ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-MILI (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 28 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-NYMYO (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 28 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-SPRINTEC (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 28 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-VYLIBRA (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 28 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
TRI-VYLIBRA LO (NORGESTIMATE-ETHINYL ESTRADIOL) 7DAYSX3 LO ORAL TABLET	GENERIC	QL (28 tablets per 21 days)

DRUG NAME	TYPE	RESTRICTIONS
VYLIBRA (NORGESTIMATE-ETHINYL ESTRADIOL) 0.25-0.035 ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
CRYSSELLE (NORGESTREL-ETHINYL ESTRADIOL) 0.3-0.03MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
ELINEST (NORGESTREL-ETHINYL ESTRADIOL) 0.3-0.03MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
LOW-OGESTREL (NORGESTREL-ETHINYL ESTRADIOL) 0.3-0.03MG ORAL TABLET	GENERIC	QL (28 tablets per 21 days)
ELLA (ULIPRISTAL ACETATE) 30 MG ORAL TABLET	BRAND	QL (1 tablet per 22 days)

CONTRACEPTIVES, TRANSDERMAL

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

OXYTOCICS

METHYLERGONOVINE MALEATE 0.2 MG ORAL TABLET	GENERIC	
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COUGH AND COLD

1ST GEN ANTIHISTAMINE & DECONGESTANT COMBINATIONS

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

ANTITUSSIVES, NON-NARCOTIC

BENZONATATE 100 MG ORAL CAPSULE	GENERIC	QL (3 capsules per day)
BENZONATATE 200 MG ORAL CAPSULE	GENERIC	QL (3 capsules per day)

DECONGESTANTS, ORAL

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

EXPECTORANTS

ADULT TUSSIN (GUAIFENESIN) 100 MG/5ML ORAL LIQUID	GENERIC, OTC	QL (2 tablets per day)
ADULT TUSSIN CHEST CONGESTION (GUAIFENESIN) 100 MG/5ML ORAL LIQUID	GENERIC, OTC	QL (240 mL per 30 days)
ADULT WAL-TUSSIN (GUAIFENESIN) 100 MG/5ML ORAL LIQUID	GENERIC, OTC	QL (240 mL per 30 days)
CHEST CONGESTION RELIEF (GUAIFENESIN) 100 MG/5ML ORAL LIQUID	GENERIC, OTC	QL (240 mL per 30 days)
CHEST CONGESTION RELIEF (GUAIFENESIN) 400 MG ORAL TABLET	GENERIC, OTC	
CHILDREN GILTUSS EX (GUAIFENESIN) 200 MG/5ML ORAL LIQUID	GENERIC, OTC	QL (120 mL per 30 days)
CHILDREN'S CHEST CONGESTION (GUAIFENESIN) 100 MG/5ML ORAL LIQUID	GENERIC, OTC	QL (240 mL per 30 days)
CHILDREN'S MUCUS RELIEF (GUAIFENESIN) 100 MG/5ML ORAL LIQUID	GENERIC, OTC	QL (240 mL per 30 days)

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

NARCOTIC ANTITUSS-1ST GEN. ANTIHISTAMINE-DECONGEST

PROMETHAZINE VC-CODEINE (PHENYLEPHRINE HCL/COD/PROMETH) 6.25-5-10 ORAL SYRUP	GENERIC	AR (age 6 and older); QL (120 mL per 30 days)
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NARCOTIC ANTITUSS-DECONGESTANT-EXPECTORANT COMB

VIRTUSSIN DAC (P-EPHED HCL/CODEINE/GUAIFEN) 30-10-100 ORAL SYRUP	GENERIC, OTC	AR (age 6 and older); QL (90 mg morphine equivalents per day)
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NARCOTIC ANTITUSSIVE-1ST GENERATION ANTIHISTAMINE

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

NARCOTIC ANTITUSSIVE-ANTICHOLINERGIC COMB.

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

NARCOTIC ANTITUSSIVE-EXPECTORANT COMBINATION

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

NON-NARCOTIC ANTITUSSIVE AND EXPECTORANT COMB.

ADULT TUSSIN COUGH CONGEST DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
ADULT TUSSIN DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	
ADULT WAL-TUSSIN DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	
ANTITUSSIVE DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	
BIOCOTRON (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
CHEST CONGESTION RELIEF DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	
CHILDREN'S GILTUSS COUGH-CHEST (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
DIABETIC TUSSIN DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
EXPECTORANT DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	
GERI-TUSSIN DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
GILTUSS COUGH-CONGESTION (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
GILTUSS DIABETIC (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
GILTUSS HBP (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
GUAIASORB DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
GUAIFENESIN-DEXTROMETHORPHAN (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
GUAIFENESIN-DEXTROMETHORPHAN (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	
MAXI-TUSS G (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
MAXTUSSIN DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
NEO-TUSS (GUAIFENESIN/D-METHORPHAN HB) 200-30MG/5 ORAL LIQUID	GENERIC, OTC	
SAFETUSSIN DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
SILTUSSIN DM DAS (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
SORBUGEN NR (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
TUSNEL DIABETIC (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
TUSSIN COUGH (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
TUSSIN DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
TUSSIN DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	
TUSSIN DM CLEAR (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL LIQUID	GENERIC, OTC	
TUSSIN DM CLEAR (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	
TUSSIN DM COUGH-CHEST CONGEST (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	
ULTRA TUSS (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	
WAL-TUSSIN DM (GUAIFENESIN/D-METHORPHAN HB) 100-10MG/5 ORAL SYRUP	GENERIC, OTC	

SYMPATHOMIMETIC AGENTS

NASAL DECONGESTANT (PSEUDOEPHEDRINE HCL) 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)
SUDOGEST (PSEUDOEPHEDRINE HCL) 30 MG ORAL TABLET	GENERIC, OTC	QL (3 tablets per day)
SUDOGEST (PSEUDOEPHEDRINE HCL) 60 MG ORAL TABLET	GENERIC, OTC	QL (2 tablets per day)
SUPHEDRIN (PSEUDOEPHEDRINE HCL) 15 MG/5 ML ORAL LIQUID	GENERIC, OTC	
SUPHEDRIN (PSEUDOEPHEDRINE HCL) 30 MG ORAL TABLET	GENERIC, OTC	QL (3 tablets per day)
SUPHEDRINE (PSEUDOEPHEDRINE HCL) 30 MG ORAL TABLET	GENERIC, OTC	QL (3 tablets per day)
WAL-PHED (PSEUDOEPHEDRINE HCL) 30 MG ORAL TABLET	GENERIC, OTC	QL (3 tablets per day)

DERMATOLOGY - ACNE

ACNE AGENTS,SYSTEMIC

ACUTANE (ISOTRETINOIN) 10 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ACUTANE (ISOTRETINOIN) 20 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ACUTANE (ISOTRETINOIN) 30 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ACUTANE (ISOTRETINOIN) 40 MG ORAL CAPSULE	GENERIC	PA (Rx053)
AMNESTEEM (ISOTRETINOIN) 10 MG ORAL CAPSULE	GENERIC	PA (Rx053)
AMNESTEEM (ISOTRETINOIN) 20 MG ORAL CAPSULE	GENERIC	PA (Rx053)
AMNESTEEM (ISOTRETINOIN) 40 MG ORAL CAPSULE	GENERIC	PA (Rx053)
CLARAVIS (ISOTRETINOIN) 10 MG ORAL CAPSULE	GENERIC	PA (Rx053)
CLARAVIS (ISOTRETINOIN) 20 MG ORAL CAPSULE	GENERIC	PA (Rx053)

DRUG NAME	TYPE	RESTRICTIONS
CLARAVIS (ISOTRETINOIN) 30 MG ORAL CAPSULE	GENERIC	PA (Rx053)
CLARAVIS (ISOTRETINOIN) 40 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ISOTRETINOIN 10 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ISOTRETINOIN 20 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ISOTRETINOIN 30 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ISOTRETINOIN 40 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ZENATANE (ISOTRETINOIN) 10 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ZENATANE (ISOTRETINOIN) 20 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ZENATANE (ISOTRETINOIN) 30 MG ORAL CAPSULE	GENERIC	PA (Rx053)
ZENATANE (ISOTRETINOIN) 40 MG ORAL CAPSULE	GENERIC	PA (Rx053)

VITAMIN A DERIVATIVES

ADAPALENE 0.10% TOPICAL GEL (GRAM)	GENERIC, OTC	PA (Rx053)
ADAPALENE 0.30% TOPICAL GEL (GRAM)	GENERIC	PA (Rx053)
EFFACLAR ADAPALENE (ADAPALENE) 0.10% TOPICAL GEL (GRAM)	GENERIC, OTC	PA (Rx053)
AVITA (TRETINOIN) 0.03% TOPICAL CREAM (G)	GENERIC	PA (Rx053)
TRETINOIN 0.03% TOPICAL CREAM (G)	GENERIC	PA (Rx053)
TRETINOIN 0.05% TOPICAL CREAM (G)	GENERIC	PA (Rx053)

DERMATOLOGY - ANTIINFECTIVE

TOPICAL ANTIBIOTICS

ANTIBIOTIC (BACITRACIN) 500 UNIT/G TOPICAL OINT. (G)	GENERIC, OTC	
BACITRACIN 500 UNIT/G TOPICAL OINT. (G)	GENERIC, OTC	
BACITRACIN ZINC (BACITRACIN) 500 UNIT/G TOPICAL OINT. (G)	GENERIC, OTC	
BACITRAYCIN PLUS (BACITRACIN) 500 UNIT/G TOPICAL OINT. (G)	GENERIC, OTC	
BACITRACIN ZINC 500 UNIT/G TOPICAL OINT. (G)	GENERIC, OTC	
CLINDAMYCIN PHOSPHATE 1% TOPICAL SOLUTION	GENERIC	PA (Rx053)
MUPIROCIN 2% TOPICAL OINT. (G)	GENERIC	
FIRST AID ANTIBIOTIC (NEOMY SULF/BACITRAC ZN/POLY) 3.5-500/G TOPICAL OINT. (G)	GENERIC, OTC	

TOPICAL ANTIFUNGALS

CICLOPIROX 0.77% TOPICAL CREAM (G)	GENERIC	PA (Rx010)
CICLOPIROX 0.77% TOPICAL GEL (GRAM)	GENERIC	PA (Rx010)
CICLOPIROX 1% TOPICAL SHAMPOO	GENERIC	PA (Rx010)
CICLOPIROX 8% TOPICAL SOLUTION	GENERIC	PA (Rx010)
CICLOPIROX 0.77% TOPICAL SUSPENSION	GENERIC	PA (Rx010)
CICLOPIROX (CICLOPIROX OLAMINE) 0.77% TOPICAL CREAM (G)	GENERIC	PA (Rx010)
CICLOPIROX (CICLOPIROX OLAMINE) 0.77% TOPICAL SUSPENSION	GENERIC	PA (Rx010)
ANTIFUNGAL (CLOTRIMAZOLE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
ANTIFUNGAL RINGWORM (CLOTRIMAZOLE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
ATHLETE'S FOOT (CLOTRIMAZOLE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
ATHLETIC FOOT CREAM (CLOTRIMAZOLE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
CLOTRIMAZOLE 1% TOPICAL CREAM (G)	GENERIC	
CLOTRIMAZOLE 1% TOPICAL CREAM (G)	GENERIC, OTC	
CLOTRIMAZOLE AF (CLOTRIMAZOLE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
ITCH RELIEF (CLOTRIMAZOLE) 1% TOPICAL CREAM (G)	GENERIC, OTC	

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

TOPICAL ANTIPARASITICS

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

TOPICAL SULFONAMIDES

SILVER SULFADIAZINE 1% TOPICAL CREAM (G)	GENERIC	
SSD (SILVER SULFADIAZINE) 1% TOPICAL CREAM (G)	GENERIC	

DERMATOLOGY - ANTIINFLAMMATORY

TOPICAL ANTI-INFLAMMATORY STEROIDAL

BETAMETHASONE DIPROP AUGMENTED (BETAMET	GENERIC	
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DRUG NAME	TYPE	RESTRICTIONS
DIPROP/PROP GLY) 0.05% TOPICAL CREAM (G)		
BETAMETHASONE DIPROP AUGMENTED (BETAMET DIPROP/PROP GLY) 0.05% TOPICAL OINT. (G)	GENERIC	
BETAMETHASONE VALERATE 0.10% TOPICAL CREAM (G)	GENERIC	
BETAMETHASONE VALERATE 0.10% TOPICAL OINT. (G)	GENERIC	
CLOBETASOL PROPIONATE 0.05% TOPICAL CREAM (G)	GENERIC	PA (Rx015)
CLOBETASOL PROPIONATE 0.05% TOPICAL OINT. (G)	GENERIC	PA (Rx015)
CLOBETASOL EMOLLIENT (CLOBETASOL PROPIONATE/EMOLL) 0.05% TOPICAL CREAM (G)	GENERIC	PA (Rx015)
FLUOCINOLONE ACETONIDE 0.03% TOPICAL CREAM (G)	GENERIC	PA (Rx015)
FLUOCINOLONE ACETONIDE 0.03% TOPICAL OINT. (G)	GENERIC	PA (Rx015)
FLUOCINOLONE ACETONIDE 0.01% TOPICAL SOLUTION	GENERIC	PA (Rx015)
FLUOCINONIDE 0.10% TOPICAL CREAM (G)	GENERIC	PA (Rx015)
ALA-CORT (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC	
ANTI-ITCH (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
ANTI-ITCH (HYDROCORTISONE) 1% TOPICAL OINT. (G)	GENERIC, OTC	
AQUAPHOR ITCH RELIEF (HYDROCORTISONE) 1% TOPICAL OINT. (G)	GENERIC, OTC	
CORTISONE (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
CORTISONE WITH ALOE (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
CORTIZONE-10 (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
CORTIZONE-10 (HYDROCORTISONE) 1% TOPICAL OINT. (G)	GENERIC, OTC	
CORTIZONE-10 PLUS (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
HYDROCORTISONE 1% TOPICAL CREAM (G)	GENERIC	
HYDROCORTISONE 1% TOPICAL CREAM (G)	GENERIC, OTC	
HYDROCORTISONE 2.50% TOPICAL CREAM (G)	GENERIC	
HYDROCORTISONE 1% TOPICAL CRM/PE APP	GENERIC	QL (60 g per 292 days, 1 fill per month)
HYDROCORTISONE 1% TOPICAL OINT. (G)	GENERIC	
HYDROCORTISONE 1% TOPICAL OINT. (G)	GENERIC, OTC	
HYDROCORTISONE 2.50% TOPICAL OINT. (G)	GENERIC	
HYDROCORTISONE-ALOE (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
HYDROCREAM (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
MONISTAT CARE (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
NOBLE FORMULA HC (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
PREPARATION H (HYDROCORTISONE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
HYDROCORTISONE (HYDROCORTISONE ACETATE) 1% TOPICAL OINT. (G)	GENERIC, OTC	
HYDROCORTISONE ACETATE 1% TOPICAL CREAM (G)	GENERIC, OTC	
VANICREAM HC (HYDROCORTISONE ACETATE) 1% TOPICAL CREAM (G)	GENERIC, OTC	
MOMETASONE FUROATE 0.10% TOPICAL OINT. (G)	GENERIC	QL (15 g per 292 days)
TRIAMCINOLONE ACETONIDE 0.03% TOPICAL CREAM (G)	GENERIC	
TRIAMCINOLONE ACETONIDE 0.10% TOPICAL CREAM (G)	GENERIC	
TRIAMCINOLONE ACETONIDE 0.50% TOPICAL CREAM (G)	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
TRIAMCINOLONE ACETONIDE 0.10% TOPICAL LOTION	GENERIC	PA (Rx015)
TRIAMCINOLONE ACETONIDE 0.03% TOPICAL OINT. (G)	GENERIC	
TRIAMCINOLONE ACETONIDE 0.10% TOPICAL OINT. (G)	GENERIC	
TRIAMCINOLONE ACETONIDE 0.50% TOPICAL OINT. (G)	GENERIC	
TRIDERM (TRIAMCINOLONE ACETONIDE) 0.10% TOPICAL CREAM (G)	GENERIC	
TRIDERM (TRIAMCINOLONE ACETONIDE) 0.50% TOPICAL CREAM (G)	GENERIC	

TOPICAL ANTI-INFLAMMATORY, NSAIDS

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

DERMATOLOGY - MISCELLANEOUS

ANTIPERSPIRANTS

DRYSOL (ALUMINUM CHLORIDE) 20% TOPICAL SOLUTION	BRAND	
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ANTISEBORRHEIC AGENTS

SELENIUM SULFIDE 2.50% TOPICAL LOTION	GENERIC	
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ANTISEPTICS, GENERAL

ALCOHOL SWABS (ALCOHOL ANTISEPTIC PADS) TOPICAL MED. PAD	NON DRUG, OTC	
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IRRITANTS/COUNTER-IRRITANTS

ARTHRITIS AND MUSCLE (CAPSAICIN) 0.03% TOPICAL CREAM (G)	GENERIC, OTC	QL (40 patches per 30 days)
ARTHRITIS PAIN RELIEF (CAPSAICIN) 0.10% TOPICAL CREAM (G)	GENERIC, OTC	QL (1 tube per 30 days)
ARTHRITIS PAIN RELIEVING (CAPSAICIN) 0.08% TOPICAL CREAM (G)	GENERIC, OTC	QL (1 tube per 30 days)
CAPSAICIN 0.03% TOPICAL ADH. PATCH	GENERIC, OTC	QL (1 tube per 30 days)
CAPSAICIN 0.03% TOPICAL ADH. PATCH	GENERIC, OTC	QL (40 patches per 30 days)
CAPSAICIN 0.03% TOPICAL CREAM (G)	GENERIC, OTC	QL (1 tube per 30 days)
CAPSAICIN 0.08% TOPICAL CREAM (G)	GENERIC, OTC	QL (1 tube per 30 days)
CAPSAICIN 0.10% TOPICAL CREAM (G)	GENERIC, OTC	QL (1 tube per 30 days)
CAPSAICIN HEAT PATCH (CAPSAICIN) 0.03% TOPICAL ADH. PATCH	GENERIC, OTC	QL (40 patches per 30 days)
CAPSAICIN HOT PATCH (CAPSAICIN) 0.03% TOPICAL ADH. PATCH	GENERIC, OTC	QL (40 patches per 30 days)
CAPSAICIN HP (CAPSAICIN) 0.10% TOPICAL CREAM (G)	GENERIC, OTC	QL (1 tube per 30 days)
CAPSICUM HOT PATCH (CAPSAICIN) 0.03% TOPICAL ADH. PATCH	GENERIC, OTC	QL (40 patches per 30 days)
CAPSIMIDE (CAPSAICIN) 0.03% TOPICAL ADH. PATCH	GENERIC, OTC	QL (40 patches per 30 days)
MEDICATED HEAT PATCH (CAPSAICIN) 0.03% TOPICAL ADH. PATCH	GENERIC, OTC	QL (40 patches per 30 days)
ZOSTRIX (CAPSAICIN) 0.03% TOPICAL CREAM (G)	GENERIC, OTC	QL (1 tube per 30 days)
ZOSTRIX HP (CAPSAICIN) 0.10% TOPICAL CREAM (G)	GENERIC, OTC	QL (1 tube per 30 days)
ZOSTRIX HP FOOT (CAPSAICIN) 0.10% TOPICAL CREAM (G)	GENERIC, OTC	QL (1 tube per 30 days)
ASPERFLEX HOT (CAPSAICIN/MENTHOL) 0.025-1.25 TOPICAL ADH. PATCH	GENERIC, OTC	QL (40 patches per 30 days)
SALONPAS (CAPSAICIN/MENTHOL) 0.025-1.25 TOPICAL ADH. PATCH	BRAND, OTC	QL (40 patches per 30 days)
PAIN RELIEVING (METHYL SALICYLATE/MENTH/CAMPH) TOPICAL	GENERIC, OTC	QL (40 patches per 30 days)

DRUG NAME	TYPE	RESTRICTIONS
ADH. PATCH		
PAIN-RELIEVING (METHYL SALICYLATE/MENTH/CAMPH) TOPICAL ADH. PATCH	GENERIC, OTC	QL (40 patches per 30 days)
ARTHRITIS PAIN RELIEF (METHYL SALICYLATE/MENTHOL) 10%-3% TOPICAL ADH. PATCH	GENERIC, OTC	QL (40 patches per 30 days)

TOPICAL ANTINEOPLASTIC & PREMALIGNANT LESION AGENTS

FLUOROURACIL 2% TOPICAL SOLUTION	GENERIC	
FLUOROURACIL 5% TOPICAL SOLUTION	GENERIC	

TOPICAL LOCAL ANESTHETICS

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

DERMATOLOGY - PSORIASIS/ECZEMA

ANTIPSORIATIC AGENTS, SYSTEMIC

COSENTYX (2 SYRINGES) (SECUKINUMAB) 150 MG/ML SUBCUTANE. SYRINGE	BRAND	PA (Rx040); SPEC
COSENTYX SENSOREADY (2 PENS) (SECUKINUMAB) 150 MG/ML SUBCUTANE. PEN INJCTR	BRAND	PA (Rx040); SPEC
COSENTYX SENSOREADY PEN (SECUKINUMAB) 150 MG/ML SUBCUTANE. PEN INJCTR	BRAND	PA (Rx040); SPEC
COSENTYX SYRINGE (SECUKINUMAB) 150 MG/ML SUBCUTANE. SYRINGE	BRAND	PA (Rx040); SPEC

ANTIPSORIATICS AGENTS

CALCIPOTRIENE 0.01% TOPICAL CREAM (G)	GENERIC	PA (Rx037)
CALCIPOTRIENE 0.01% TOPICAL OINT. (G)	GENERIC	PA (Rx037)
CALCIPOTRIENE 0.01% TOPICAL SOLUTION	GENERIC	PA (Rx037)
TAZAROTENE 0.10% TOPICAL CREAM (G)	GENERIC	PA (Rx037)
TAZAROTENE 0.05% TOPICAL GEL (GRAM)	GENERIC	PA (Rx037)
TAZAROTENE 0.10% TOPICAL GEL (GRAM)	GENERIC	PA (Rx037)

TOPICAL IMMUNOSUPPRESSIVE AGENTS

TACROLIMUS 0.03% TOPICAL OINT. (G)	GENERIC	PA (Rx036)
TACROLIMUS 0.10% TOPICAL OINT. (G)	GENERIC	PA (Rx036)

DIABETES

ANTIHYPERGLY, (DPP-4) INHIBITOR & BIGUANIDE COMB.

ALOGLIPTIN-METFORMIN (ALOGLIPTIN BENZ/METFORMIN HCL) 12.5-500MG ORAL TABLET	GENERIC	
ALOGLIPTIN-METFORMIN (ALOGLIPTIN BENZ/METFORMIN HCL) 12.5-1000 ORAL TABLET	GENERIC	

ANTIHYPERGLY, DPP-4 ENZYME INHIB & THIAZOLIDINEDIONE

ALOGLIPTIN-PIOGLITAZONE (ALOGLIPTIN BENZ/PIOGLITAZONE) 12.5-30 MG ORAL TABLET	GENERIC	
ALOGLIPTIN-PIOGLITAZONE (ALOGLIPTIN BENZ/PIOGLITAZONE) 25 MG-15MG ORAL TABLET	GENERIC	
ALOGLIPTIN-PIOGLITAZONE (ALOGLIPTIN BENZ/PIOGLITAZONE) 25 MG-30MG ORAL TABLET	GENERIC	
ALOGLIPTIN-PIOGLITAZONE (ALOGLIPTIN BENZ/PIOGLITAZONE) 25 MG-45MG ORAL TABLET	GENERIC	

ANTIHYPERGLY, INCRETIN MIMETIC (GLP-1 RECEPTOR AGONIST)

TRULICITY (DULAGLUTIDE) 0.75MG/0.5 SUBCUTANE. PEN INJCTR	BRAND	PA (Rx007)
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DRUG NAME	TYPE	RESTRICTIONS
TRULICITY (DULAGLUTIDE) 1.5 MG/0.5 SUBCUTANE. PEN INJCTR	BRAND	PA (Rx007)
TRULICITY (DULAGLUTIDE) 3 MG/0.5ML SUBCUTANE. PEN INJCTR	BRAND	PA (Rx007)
TRULICITY (DULAGLUTIDE) 4.5 MG/0.5 SUBCUTANE. PEN INJCTR	BRAND	PA (Rx007)
BYETTA (EXENATIDE) 5MCG/0.02 SUBCUTANE. PEN INJCTR	BRAND	PA (Rx007)
BYETTA (EXENATIDE) 10MCG/0.04 SUBCUTANE. PEN INJCTR	BRAND	PA (Rx007)
BYDUREON BCISE (EXENATIDE MICROSPHERES) 2MG/0.85ML SUBCUTANE. AUTO INJCT	BRAND	PA (Rx007)
RYBELSUS (SEMAGLUTIDE) 3 MG ORAL TABLET	BRAND	PA (Rx007)
RYBELSUS (SEMAGLUTIDE) 7 MG ORAL TABLET	BRAND	PA (Rx007)
RYBELSUS (SEMAGLUTIDE) 14 MG ORAL TABLET	BRAND	PA (Rx007)

ANTIHYPERGLYCEMIC-SOD/GLUC COTRANSPORT2(SGLT2)INHIB

STEGLATRO (ERTUGLIFLOZIN PIDOLATE) 5 MG ORAL TABLET	BRAND	
STEGLATRO (ERTUGLIFLOZIN PIDOLATE) 15 MG ORAL TABLET	BRAND	

ANTIHYPERGLYCEMIC, ALPHA-GLUCOSIDASE INHIB (N-S)

ACARBOSE 25 MG ORAL TABLET	GENERIC	
ACARBOSE 50 MG ORAL TABLET	GENERIC	
ACARBOSE 100 MG ORAL TABLET	GENERIC	

ANTIHYPERGLYCEMIC, DPP-4 INHIBITORS

ALOGLIPTIN (ALOGLIPTIN BENZOATE) 6.25 MG ORAL TABLET	GENERIC	
ALOGLIPTIN (ALOGLIPTIN BENZOATE) 12.5 MG ORAL TABLET	GENERIC	
ALOGLIPTIN (ALOGLIPTIN BENZOATE) 25 MG ORAL TABLET	GENERIC	

ANTIHYPERGLYCEMIC, INSULIN-RELEASE STIMULANT TYPE

GLIMEPIRIDE 1 MG ORAL TABLET	GENERIC	
GLIMEPIRIDE 2 MG ORAL TABLET	GENERIC	
GLIMEPIRIDE 4 MG ORAL TABLET	GENERIC	
GLIPIZIDE 5 MG ORAL TABLET	GENERIC	
GLIPIZIDE 10 MG ORAL TABLET	GENERIC	
GLIPIZIDE ER (GLIPIZIDE) 2.5 MG ORAL TAB ER 24	GENERIC	
GLIPIZIDE ER (GLIPIZIDE) 5 MG ORAL TAB ER 24	GENERIC	
GLIPIZIDE ER (GLIPIZIDE) 10 MG ORAL TAB ER 24	GENERIC	
GLIPIZIDE XL (GLIPIZIDE) 2.5 MG ORAL TAB ER 24	GENERIC	
GLIPIZIDE XL (GLIPIZIDE) 5 MG ORAL TAB ER 24	GENERIC	
GLIPIZIDE XL (GLIPIZIDE) 10 MG ORAL TAB ER 24	GENERIC	
GLYBURIDE 1.25 MG ORAL TABLET	GENERIC	
GLYBURIDE 2.5 MG ORAL TABLET	GENERIC	
GLYBURIDE 5 MG ORAL TABLET	GENERIC	
NATEGLINIDE 60 MG ORAL TABLET	GENERIC	
NATEGLINIDE 120 MG ORAL TABLET	GENERIC	
REPAGLINIDE 0.5 MG ORAL TABLET	GENERIC	
REPAGLINIDE 1 MG ORAL TABLET	GENERIC	
REPAGLINIDE 2 MG ORAL TABLET	GENERIC	

ANTIHYPERGLYCEMIC, INSULIN-RESPONSE ENHANCER (N-S)

PIOGLITAZONE HCL 15 MG ORAL TABLET	GENERIC	
PIOGLITAZONE HCL 30 MG ORAL TABLET	GENERIC	
PIOGLITAZONE HCL 45 MG ORAL TABLET	GENERIC	

ANTIHYPERGLYCEMIC,BIGUANIDE TYPE(NON-SULFONYLUREA)

METFORMIN HCL 500 MG/5ML ORAL SOLUTION	GENERIC	
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DRUG NAME	TYPE	RESTRICTIONS
METFORMIN HCL 500 MG ORAL TABLET	GENERIC	
METFORMIN HCL 850 MG ORAL TABLET	GENERIC	
METFORMIN HCL 1000 MG ORAL TABLET	GENERIC	
METFORMIN HCL ER (METFORMIN HCL) 500 MG ORAL TAB ER 24H	GENERIC	
METFORMIN HCL ER (METFORMIN HCL) 750 MG ORAL TAB ER 24H	GENERIC	

ANTIHYPERGLYCEMIC,INSULIN-REL STIM.& BIGUANIDE CMB

GLIPIZIDE-METFORMIN (GLIPIZIDE/METFORMIN HCL) 2.5-250 MG ORAL TABLET	GENERIC	
GLIPIZIDE-METFORMIN (GLIPIZIDE/METFORMIN HCL) 2.5-500 MG ORAL TABLET	GENERIC	
GLIPIZIDE-METFORMIN (GLIPIZIDE/METFORMIN HCL) 5 MG-500MG ORAL TABLET	GENERIC	
GLYBURIDE-METFORMIN HCL (GLYBURIDE/METFORMIN HCL) 1.25-250MG ORAL TABLET	GENERIC	
GLYBURIDE-METFORMIN HCL (GLYBURIDE/METFORMIN HCL) 2.5-500 MG ORAL TABLET	GENERIC	
GLYBURIDE-METFORMIN HCL (GLYBURIDE/METFORMIN HCL) 5 MG-500MG ORAL TABLET	GENERIC	

BLOOD SUGAR DIAGNOSTICS

ACCU-CHEK GUIDE TEST STRIP (BLOOD SUGAR DIAGNOSTIC) MISCELL. STRIP	NON DRUG, OTC	QL (100 test strips per 90 days without insulin use; 400 test strips per 90 days with insulin use)
RELION PRIME TEST STRIPS (BLOOD SUGAR DIAGNOSTIC) MISCELL. STRIP	NON DRUG, OTC	QL (100 test strips per 90 days without insulin use; 400 test strips per 90 days with insulin use)
TRUE METRIX GLUCOSE TEST STRIP (BLOOD SUGAR DIAGNOSTIC) MISCELL. STRIP	NON DRUG, OTC	QL (100 test strips per 90 days without insulin use; 400 test strips per 90 days with insulin use)

DIABETIC SUPPLIES

ACCU-CHEK GUIDE CONTROL SOLN (BLOOD GLUCOSE CONTROL HIGH&LOW) MISCELL. EACH	NON DRUG, OTC	QL (1 fill per 90 days)
TRUE METRIX (BLOOD-GLUCOSE CONTROL, HIGH) MISCELL. EACH	NON DRUG, OTC	QL (1 fill per 90 days)
TRUE METRIX (BLOOD-GLUCOSE CONTROL, LOW) MISCELL. EACH	NON DRUG, OTC	QL (1 fill per 90 days)
TRUE METRIX (BLOOD-GLUCOSE CONTROL, NORMAL) MISCELL. EACH	NON DRUG, OTC	QL (1 fill per 90 days)
ACCU-CHEK GUIDE MONITOR SYSTEM (BLOOD-GLUCOSE METER) MISCELL. EACH	NON DRUG, OTC	QL (1 meter per 2 years)
RELION PRIME (BLOOD-GLUCOSE METER) MISCELL. EACH	NON DRUG, OTC	QL (1 meter per 2 years)
TRUE METRIX BLOOD GLUCOSE MTR (BLOOD-GLUCOSE METER) MISCELL. EACH	NON DRUG, OTC	QL (1 meter per 2 years)
TRUE METRIX GO (BLOOD-GLUCOSE METER) MISCELL. EACH	NON DRUG, OTC	QL (1 meter per 2 years)
FREESTYLE LIBRE 14 DAY READER (FLASH GLUCOSE SCANNING READER) MISCELL. EACH	NON DRUG	PA (Rx062); QL (1 device per 2 years)

DRUG NAME	TYPE	RESTRICTIONS
FREESTYLE LIBRE 2 READER (FLASH GLUCOSE SCANNING READER) MISCELL. EACH	NON DRUG	PA (Rx062); QL (1 device per 2 years)
FREESTYLE LIBRE 14 DAY SENSOR (FLASH GLUCOSE SENSOR) MISCELL. KIT	NON DRUG	PA (Rx062); QL (1 device per 14 day)
FREESTYLE LIBRE 2 SENSOR (FLASH GLUCOSE SENSOR) MISCELL. KIT	NON DRUG	PA (Rx062); QL (1 device per 14 day)
FREESTYLE LIBRE 3 SENSOR (FLASH GLUCOSE SENSOR) MISCELL. EACH	NON DRUG	PA (Rx062); QL (1 device per 14 day)
ACCU-CHEK SOFTCLIX (LANCING DEVICE/LANCETS) MISCELL. KIT	NON DRUG, OTC	QL (1 device per 30 days)
LANCING DEVICE (LANCING DEVICE/LANCETS) MISCELL. KIT	NON DRUG, OTC	QL (1 device per 30 days)

DIABETIC ULCER PREPARATIONS, TOPICAL

REGRANEX (BECAPLERMIN) 0.01% TOPICAL GEL (GRAM)	BRAND	
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HYPERGLYCEMICS

BAQSIMI (GLUCAGON) 3 MG NASAL SPRAY	BRAND	
GVOKE HYPOPEN 1-PACK (GLUCAGON) 0.5 MG/0.1 SUBCUTANE. AUTO INJCT	BRAND	
GVOKE HYPOPEN 1-PACK (GLUCAGON) 1 MG/0.2ML SUBCUTANE. AUTO INJCT	BRAND	
GVOKE HYPOPEN 2-PACK (GLUCAGON) 0.5 MG/0.1 SUBCUTANE. AUTO INJCT	BRAND	
GVOKE HYPOPEN 2-PACK (GLUCAGON) 1 MG/0.2ML SUBCUTANE. AUTO INJCT	BRAND	
GVOKE PFS 1-PACK SYRINGE (GLUCAGON) 0.5 MG/0.1 SUBCUTANE. SYRINGE	BRAND	
GVOKE PFS 1-PACK SYRINGE (GLUCAGON) 1 MG/0.2ML SUBCUTANE. SYRINGE	BRAND	
GVOKE PFS 2-PACK SYRINGE (GLUCAGON) 0.5 MG/0.1 SUBCUTANE. SYRINGE	BRAND	
GVOKE PFS 2-PACK SYRINGE (GLUCAGON) 1 MG/0.2ML SUBCUTANE. SYRINGE	BRAND	
GLUCAGON EMERGENCY KIT (GLUCAGON,HUMAN RECOMBINANT) 1 MG INJECTION VIAL	BRAND	
GLUCAGON EMERGENCY KIT (GLUCAGON,HUMAN RECOMBINANT) 1 MG INJECTION VIAL	GENERIC	

INSULINS

HUMULIN 70/30 KWIKPEN (HUM INSULIN NPH/REG INSULIN HM) 70-30/ML SUBCUTANE. INSULN PEN	BRAND, OTC	PA (Rx009)
HUMULIN 70-30 (HUM INSULIN NPH/REG INSULIN HM) 70-30/ML SUBCUTANE. VIAL	BRAND, OTC	PA (Rx009)
NOVOLIN 70-30 (HUM INSULIN NPH/REG INSULIN HM) 70-30/ML SUBCUTANE. VIAL	BRAND, OTC	PA (Rx009)
NOVOLIN 70-30 FLEXPEN (HUM INSULIN NPH/REG INSULIN HM) 70-30/ML SUBCUTANE. INSULN PEN	BRAND, OTC	PA (Rx009)
INSULIN ASPART 100/ML SUBCUTANE. VIAL	GENERIC	
INSULIN ASPART FLEXPEN (INSULIN ASPART) 100/ML (3) SUBCUTANE. INSULN PEN	GENERIC	QL (140 days per fill)
INSULIN ASPART PENFILL (INSULIN ASPART) 100/ML SUBCUTANE. CARTRIDGE	GENERIC	
LEVEMIR (INSULIN DETEMIR) 100/ML SUBCUTANE. VIAL	BRAND	PA (Rx009)
LEVEMIR FLEXPEN (INSULIN DETEMIR) 100/ML (3) SUBCUTANE.	BRAND	PA (Rx009)

DRUG NAME	TYPE	RESTRICTIONS
INSULN PEN		
INSULIN GLARGINE (INSULIN GLARGINE,HUM.REC.ANLOG) 100/ML SUBCUTANE. VIAL	GENERIC	
INSULIN GLARGINE SOLOSTAR (INSULIN GLARGINE,HUM.REC.ANLOG) 100/ML (3) SUBCUTANE. INSULN PEN	GENERIC	QL (140 days per fill)
TOUJEO SOLOSTAR (INSULIN GLARGINE,HUM.REC.ANLOG) 300/ML SUBCUTANE. INSULN PEN	BRAND	PA (Rx009)
INSULIN GLARGINE-YFGN 100/ML (3) SUBCUTANE. INSULN PEN	GENERIC	QL (140 days per fill)
INSULIN GLARGINE-YFGN 100/ML SUBCUTANE. VIAL	GENERIC	PA (Rx009)
INSULIN GLARGINE-YFGN 100/ML SUBCUTANE. VIAL	GENERIC	
ADMELOG (INSULIN LISPRO) 100/ML SUBCUTANE. VIAL	BRAND	PA (Rx009)
ADMELOG SOLOSTAR (INSULIN LISPRO) 100/ML SUBCUTANE. INSULN PEN	BRAND	PA (Rx009)
HUMALOG (INSULIN LISPRO) 100/ML SUBCUTANE. CARTRIDGE	BRAND	PA (Rx009)
INSULIN LISPRO 100/ML SUBCUTANE. VIAL	GENERIC	
INSULIN LISPRO JUNIOR KWIKPEN (INSULIN LISPRO) 100/ML SUBCUTANE. INS PEN HF	GENERIC	QL (140 days per fill)
INSULIN LISPRO KWIKPEN U-100 (INSULIN LISPRO) 100/ML SUBCUTANE. INSULN PEN	GENERIC	QL (140 days per fill)
HUMALOG MIX 50-50 (INSULIN NPL/INSULIN LISPRO) 50-50/ML SUBCUTANE. VIAL	BRAND	
HUMALOG MIX 50-50 KWIKPEN (INSULIN NPL/INSULIN LISPRO) 50-50/ML SUBCUTANE. INSULN PEN	BRAND	PA (Rx009)
HUMALOG MIX 75-25 (INSULIN NPL/INSULIN LISPRO) 75-25/ML SUBCUTANE. VIAL	BRAND	PA (Rx009)
INSULIN LISPRO PROTAMINE MIX (INSULIN NPL/INSULIN LISPRO) 75-25/ML SUBCUTANE. INSULN PEN	GENERIC	PA (Rx009)
HUMULIN R (INSULIN REGULAR, HUMAN) 100/ML INJECTION VIAL	BRAND, OTC	PA (Rx009)
HUMULIN R U-500 (INSULIN REGULAR, HUMAN) 500/ML SUBCUTANE. VIAL	BRAND	PA (Rx009)
HUMULIN R U-500 KWIKPEN (INSULIN REGULAR, HUMAN) 500/ML (3) SUBCUTANE. INSULN PEN	BRAND	PA (Rx009)
NOVOLIN R (INSULIN REGULAR, HUMAN) 100/ML INJECTION VIAL	BRAND, OTC	PA (Rx009)
NOVOLIN R FLEXPEN (INSULIN REGULAR, HUMAN) 100/ML (3) SUBCUTANE. INSULN PEN	BRAND, OTC	PA (Rx009)
INSULIN ASPART PROT MIX 70-30 (INSULN ASP PRT/INSULIN ASPART) 70-30/ML SUBCUTANE. INSULN PEN	GENERIC	PA (Rx009)
INSULIN ASPART PROT MIX 70-30 (INSULN ASP PRT/INSULIN ASPART) 70-30/ML SUBCUTANE. VIAL	GENERIC	PA (Rx009)
HUMULIN N (NPH, HUMAN INSULIN ISOPHANE) 100/ML SUBCUTANE. VIAL	BRAND, OTC	PA (Rx009)
HUMULIN N KWIKPEN (NPH, HUMAN INSULIN ISOPHANE) 100/ML (3) SUBCUTANE. INSULN PEN	BRAND, OTC	PA (Rx009)
NOVOLIN N (NPH, HUMAN INSULIN ISOPHANE) 100/ML SUBCUTANE. VIAL	BRAND, OTC	PA (Rx009)
NOVOLIN N FLEXPEN (NPH, HUMAN INSULIN ISOPHANE) 100/ML (3) SUBCUTANE. INSULN PEN	BRAND, OTC	PA (Rx009)

EAR - GENERAL DISORDERS

EAR PREPARATIONS, MISC. ANTI-INFECTIVES

DRUG NAME	TYPE	RESTRICTIONS
ACETIC ACID 2% OTIC SOLUTION	GENERIC	
HYDROCORTISONE-ACETIC ACID (ACETIC ACID/HYDROCORTISONE) 1%-2% OTIC DROPS	GENERIC	

EAR PREPARATIONS,ANTIBIOTICS

NEOMYCIN-POLYMYXIN-HC (NEOMY SULF/POLYMYX B SULF/HC) 3.5-10K-1 OTIC DROPS SUSP	GENERIC	
NEOMYCIN-POLYMYXIN-HYDROCORT (NEOMY SULF/POLYMYX B SULF/HC) 3.5-10K-1 OTIC SOLUTION	GENERIC	
OFLOXACIN 0.30% OTIC DROPS	GENERIC	

OTIC PREPARATIONS,ANTI-INFLAMMATORY-ANTIBIOTICS

CIPROFLOXACIN-DEXAMETHASONE (CIPROFLOXACIN HCL/DEXAMETH) 0.3%-0.1% OTIC DROPS SUSP	GENERIC	
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ELECTROLYTE REGULATION

ELECTROLYTE DEPLETERS

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

POTASSIUM REPLACEMENT

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

SODIUM/SALINE PREPARATIONS

SODIUM CHLORIDE 1000 MG MISCELL. TABLET SOL	GENERIC, OTC	
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ENDOCRINE DISORDER - OTHER

ANTIDIURETIC AND VASOPRESSOR HORMONES

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

BONE RESORPTION INHIBITORS

ALENDRONATE SODIUM 70 MG/75ML ORAL SOLUTION	GENERIC	
ALENDRONATE SODIUM 5 MG ORAL TABLET	GENERIC	
ALENDRONATE SODIUM 10 MG ORAL TABLET	GENERIC	
ALENDRONATE SODIUM 35 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
ALENDRONATE SODIUM 70 MG ORAL TABLET	GENERIC	
CALCITONIN-SALMON (CALCITONIN,SALMON,SYNTHETIC) 200/SPRAY NASAL SPRAY/PUMP	GENERIC	
IBANDRONATE SODIUM 150 MG ORAL TABLET	GENERIC	
RALOXIFENE HCL 60 MG ORAL TABLET	GENERIC	
RISEDRONATE SODIUM 5 MG ORAL TABLET	GENERIC	ST (alendronate)
RISEDRONATE SODIUM 30 MG ORAL TABLET	GENERIC	ST (alendronate)
RISEDRONATE SODIUM 35 MG ORAL TABLET	GENERIC	ST (alendronate)
RISEDRONATE SODIUM 150 MG ORAL TABLET	GENERIC	ST (alendronate)

PITUITARY SUPPRESSIVE AGENTS

CABERGOLINE 0.5 MG ORAL TABLET	GENERIC	
DANAZOL 50 MG ORAL CAPSULE	GENERIC	
DANAZOL 100 MG ORAL CAPSULE	GENERIC	
DANAZOL 200 MG ORAL CAPSULE	GENERIC	

ENDOCRINE DISORDER - THYROID

ANTITHYROID PREPARATIONS

METHIMAZOLE 5 MG ORAL TABLET	GENERIC	
METHIMAZOLE 10 MG ORAL TABLET	GENERIC	
PROPYLTHIOURACIL 50 MG ORAL TABLET	GENERIC	

IODINE CONTAINING AGENTS

POTASSIUM IODIDE 1 G/ML ORAL SOLUTION	GENERIC	
SSKI (POTASSIUM IODIDE) 1 G/ML ORAL SOLUTION	GENERIC	

THYROID HORMONES

EUTHYROX (LEVOTHYROXINE SODIUM) 25 MCG ORAL TABLET	GENERIC	
EUTHYROX (LEVOTHYROXINE SODIUM) 50 MCG ORAL TABLET	GENERIC	
EUTHYROX (LEVOTHYROXINE SODIUM) 75 MCG ORAL TABLET	GENERIC	
EUTHYROX (LEVOTHYROXINE SODIUM) 88 MCG ORAL TABLET	GENERIC	
EUTHYROX (LEVOTHYROXINE SODIUM) 100 MCG ORAL TABLET	GENERIC	
EUTHYROX (LEVOTHYROXINE SODIUM) 112 MCG ORAL TABLET	GENERIC	
EUTHYROX (LEVOTHYROXINE SODIUM) 125 MCG ORAL TABLET	GENERIC	
EUTHYROX (LEVOTHYROXINE SODIUM) 137 MCG ORAL TABLET	GENERIC	
EUTHYROX (LEVOTHYROXINE SODIUM) 150 MCG ORAL TABLET	GENERIC	
EUTHYROX (LEVOTHYROXINE SODIUM) 175 MCG ORAL TABLET	GENERIC	
EUTHYROX (LEVOTHYROXINE SODIUM) 200 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 25 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 50 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 75 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 88 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 100 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 112 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 125 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 137 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 150 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 175 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 200 MCG ORAL TABLET	GENERIC	
LEVOTHYROXINE SODIUM 300 MCG ORAL TABLET	GENERIC	
LIOthyronine SODIUM 5 MCG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
LIOTHYRONINE SODIUM 25 MCG ORAL TABLET	GENERIC	
LIOTHYRONINE SODIUM 50 MCG ORAL TABLET	GENERIC	
ARMOUR THYROID (THYROID) 15 MG ORAL TABLET	BRAND	
ARMOUR THYROID (THYROID) 30 MG ORAL TABLET	BRAND	
ARMOUR THYROID (THYROID) 60 MG ORAL TABLET	BRAND	
ARMOUR THYROID (THYROID) 90 MG ORAL TABLET	BRAND	
ARMOUR THYROID (THYROID) 120 MG ORAL TABLET	BRAND	
ARMOUR THYROID (THYROID) 240 MG ORAL TABLET	BRAND	
ARMOUR THYROID (THYROID) 300 MG ORAL TABLET	BRAND	
NIVA THYROID (THYROID) 30 MG ORAL TABLET	BRAND	
NIVA THYROID (THYROID) 60 MG ORAL TABLET	BRAND	
NIVA THYROID (THYROID) 90 MG ORAL TABLET	BRAND	
NP THYROID (THYROID) 15 MG ORAL TABLET	GENERIC	
NP THYROID (THYROID) 30 MG ORAL TABLET	GENERIC	
NP THYROID (THYROID) 60 MG ORAL TABLET	GENERIC	
NP THYROID (THYROID) 120 MG ORAL TABLET	GENERIC	
ADTHYZA (THYROID,PORK) 16.25 MG ORAL TABLET	BRAND	
ARMOUR THYROID (THYROID,PORK) 180 MG ORAL TABLET	BRAND	
NP THYROID (THYROID,PORK) 90 MG ORAL TABLET	GENERIC	

EYE - GENERAL DISORDERS

EYE ANTIBIOTIC-CORTICOID COMBINATIONS

NEOMYCIN-POLYMYXIN-DEXAMETH (NEO/POLYMYX B SULF/DEXAMETH) 0.10% OPHTHALMIC DROPS SUSP	GENERIC	
NEOMYCIN-POLYMYXIN-DEXAMETH (NEO/POLYMYX B SULF/DEXAMETH) 3.5-10K-.1 OPHTHALMIC OINT. (G)	GENERIC	
NEOMYCIN-BACITRACIN-POLY-HC (NEOMY SULF/BACITRAC ZN/POLY/HC) 3.5-10K-1 OPHTHALMIC OINT. (G)	GENERIC	
NEO-POLYCIN HC (NEOMY SULF/BACITRAC ZN/POLY/HC) 3.5-10K-1 OPHTHALMIC OINT. (G)	GENERIC	
TOBRAMYCIN-DEXAMETHASONE (TOBRAMYCIN SULFATE/DEXAMETH) 0.3%-0.1% OPHTHALMIC DROPS SUSP	GENERIC	

EYE ANTIINFLAMMATORY AGENTS

DEXAMETHASONE SODIUM PHOSPHATE (DEXAMETHASONE SOD PHOSPHATE) 0.10% OPHTHALMIC DROPS	GENERIC	
DICLOFENAC SODIUM 0.10% OPHTHALMIC DROPS	GENERIC	
FLUOROMETHOLONE 0.10% OPHTHALMIC DROPS SUSP	GENERIC	
KETOROLAC TROMETHAMINE 0.50% OPHTHALMIC DROPS	GENERIC	
PREDNISOLONE ACETATE 1% OPHTHALMIC DROPS SUSP	GENERIC	
PREDNISOLONE SODIUM PHOSPHATE (PREDNISOLONE SOD PHOSPHATE) 1% OPHTHALMIC DROPS	GENERIC	

EYE ANTIVIRALS

TRIFLURIDINE 1% OPHTHALMIC DROPS	GENERIC	
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EYE SULFONAMIDES

SULFACETAMIDE-PREDNISOLONE (NA SULFACETM/PREDNIS SP) 10%-0.23% OPHTHALMIC DROPS	GENERIC	
SULFACETAMIDE SODIUM 10% OPHTHALMIC DROPS	GENERIC	
SULFACETAMIDE SODIUM 10% OPHTHALMIC OINT. (G)	GENERIC	

OPHTHALMIC ANTIBIOTICS

DRUG NAME	TYPE	RESTRICTIONS
BACITRACIN 500 UNIT/G OPHTHALMIC OINT. (G)	GENERIC	
BACITRACIN-POLYMYXIN (BACITRACIN/POLYMYXIN B SULFATE) 500-10K/G OPHTHALMIC OINT. (G)	GENERIC	
POLYCIN (BACITRACIN/POLYMYXIN B SULFATE) 500-10K/G OPHTHALMIC OINT. (G)	GENERIC	
CIPROFLOXACIN HCL 0.30% OPHTHALMIC DROPS	GENERIC	
ERYTHROMYCIN (ERYTHROMYCIN BASE) 5 MG/GRAM OPHTHALMIC OINT. (G)	GENERIC	
GENTAMICIN SULFATE 0.30% OPHTHALMIC DROPS	GENERIC	
NEOMYCIN-BACITRACIN-POLYMYXIN (NEOMY SULF/BACITRA/POLYMYXIN B) 3.5MG-400 OPHTHALMIC OINT. (G)	GENERIC	
NEO-POLYCIN (NEOMY SULF/BACITRA/POLYMYXIN B) 3.5MG-400 OPHTHALMIC OINT. (G)	GENERIC	
NEOMYCIN-POLYMYXIN-GRAMICIDIN (NEOMYCIN/POLYMYXIN B/GRAMICIDIN) 1.75MG-10K OPHTHALMIC DROPS	GENERIC	
OFLOXACIN 0.30% OPHTHALMIC DROPS	GENERIC	
POLYMYXIN B SUL-TRIMETHOPRIM (POLYMYXIN B SULFATE/TMP) 10000-1/ML OPHTHALMIC DROPS	GENERIC	
TOBRAMYCIN 0.30% OPHTHALMIC DROPS	GENERIC	
TOBRAMYCIN (TOBRAMYCIN SULFATE) 0.30% OPHTHALMIC DROPS	GENERIC	

EYE - GLAUCOMA

CARBONIC ANHYDRASE INHIBITORS

ACETAZOLAMIDE 125 MG ORAL TABLET	GENERIC	
ACETAZOLAMIDE 250 MG ORAL TABLET	GENERIC	
METHAZOLAMIDE 25 MG ORAL TABLET	GENERIC	
METHAZOLAMIDE 50 MG ORAL TABLET	GENERIC	

MIOTICS/OTHER INTRAOC. PRESSURE REDUCERS

BIMATOPROST 0.03% OPHTHALMIC DROPS	GENERIC	
LUMIGAN (BIMATOPROST) 0.01% OPHTHALMIC DROPS	BRAND	
BRIMONIDINE TARTRATE 0.15% OPHTHALMIC DROPS	GENERIC	
BRIMONIDINE TARTRATE 0.20% OPHTHALMIC DROPS	GENERIC	
CARTEOLOL HCL 1% OPHTHALMIC DROPS	GENERIC	
DORZOLAMIDE HCL 2% OPHTHALMIC DROPS	GENERIC	
LATANOPROST 0.01% OPHTHALMIC DROPS	GENERIC	
LEVOBUNOLOL HCL 0.50% OPHTHALMIC DROPS	GENERIC	
PILOCARPINE HCL 1% OPHTHALMIC DROPS	GENERIC	
PILOCARPINE HCL 2% OPHTHALMIC DROPS	GENERIC	
PILOCARPINE HCL 4% OPHTHALMIC DROPS	GENERIC	
TIMOLOL MALEATE 0.25% OPHTHALMIC DROPS	GENERIC	
TIMOLOL MALEATE 0.50% OPHTHALMIC DROPS	GENERIC	
TIMOLOL MALEATE 0.25% OPHTHALMIC SOL-GEL	GENERIC	
TIMOLOL MALEATE 0.50% OPHTHALMIC SOL-GEL	GENERIC	
DORZOLAMIDE-TIMOLOL (TIMOLOL MALEATE/DORZOLAM HCL) 22.3-6.8/1 OPHTHALMIC DROPS	GENERIC	
TRAVOPROST 0.00% OPHTHALMIC DROPS	GENERIC	

MYDRIATICS

ATROPINE SULFATE 1% OPHTHALMIC DROPS	GENERIC	
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DRUG NAME	TYPE	RESTRICTIONS
ATROPINE SULFATE 1% OPHTHALMIC OINT. (G)	GENERIC	
CYCLOPENTOLATE HCL 1% OPHTHALMIC DROPS	GENERIC	

GOUT AND RELATED DISEASES

COLCHICINE

COLCHICINE 0.6 MG ORAL TABLET	GENERIC	
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HYPERURICEMIA TX - PURINE INHIBITORS

ALLOPURINOL 100 MG ORAL TABLET	GENERIC	
ALLOPURINOL 300 MG ORAL TABLET	GENERIC	

URICOSURIC AGENTS

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

HEMATOLOGICAL DISORDERS

ANTICOAGULANTS, COUMARIN TYPE

JANTOVEN (WARFARIN SODIUM) 1 MG ORAL TABLET	GENERIC	
JANTOVEN (WARFARIN SODIUM) 2 MG ORAL TABLET	GENERIC	
JANTOVEN (WARFARIN SODIUM) 2.5 MG ORAL TABLET	GENERIC	
JANTOVEN (WARFARIN SODIUM) 3 MG ORAL TABLET	GENERIC	
JANTOVEN (WARFARIN SODIUM) 4 MG ORAL TABLET	GENERIC	
JANTOVEN (WARFARIN SODIUM) 5 MG ORAL TABLET	GENERIC	
JANTOVEN (WARFARIN SODIUM) 6 MG ORAL TABLET	GENERIC	
JANTOVEN (WARFARIN SODIUM) 7.5 MG ORAL TABLET	GENERIC	
JANTOVEN (WARFARIN SODIUM) 10 MG ORAL TABLET	GENERIC	
WARFARIN SODIUM 1 MG ORAL TABLET	GENERIC	
WARFARIN SODIUM 2 MG ORAL TABLET	GENERIC	
WARFARIN SODIUM 2.5 MG ORAL TABLET	GENERIC	
WARFARIN SODIUM 3 MG ORAL TABLET	GENERIC	
WARFARIN SODIUM 4 MG ORAL TABLET	GENERIC	
WARFARIN SODIUM 5 MG ORAL TABLET	GENERIC	
WARFARIN SODIUM 6 MG ORAL TABLET	GENERIC	
WARFARIN SODIUM 7.5 MG ORAL TABLET	GENERIC	
WARFARIN SODIUM 10 MG ORAL TABLET	GENERIC	

DIRECT FACTOR XA INHIBITORS

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

HEMORRHOLOGIC AGENTS

PENTOXIFYLLINE 400 MG ORAL TABLET ER	GENERIC	
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HEPARIN AND RELATED PREPARATIONS

DRUG NAME	TYPE	RESTRICTIONS
ENOXAPARIN SODIUM 30MG/0.3ML SUBCUTANE. SYRINGE	GENERIC	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 30MG/0.3ML SUBCUTANE. SYRINGE	GENERIC	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 40MG/0.4ML SUBCUTANE. SYRINGE	GENERIC	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 40MG/0.4ML SUBCUTANE. SYRINGE	GENERIC	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 60MG/0.6ML SUBCUTANE. SYRINGE	GENERIC	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 60MG/0.6ML SUBCUTANE. SYRINGE	GENERIC	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 80MG/0.8ML SUBCUTANE. SYRINGE	GENERIC	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 80MG/0.8ML SUBCUTANE. SYRINGE	GENERIC	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 100 MG/ML SUBCUTANE. SYRINGE	GENERIC	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])

DRUG NAME	TYPE	RESTRICTIONS
ENOXAPARIN SODIUM 120MG/.8ML SUBCUTANE. SYRINGE	GENERIC	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	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	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])

PLATELET AGGREGATION INHIBITORS

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

THROMBIN INHIBITORS, SELECTIVE, DIRECT, & REVERSIBLE

DABIGATRAN ETEXILATE (DABIGATRAN ETEXILATE MESYLATE) 75 MG ORAL CAPSULE	GENERIC	
DABIGATRAN ETEXILATE (DABIGATRAN ETEXILATE MESYLATE) 150 MG ORAL CAPSULE	GENERIC	
PRADAXA (DABIGATRAN ETEXILATE MESYLATE) 110 MG ORAL CAPSULE	BRAND	

VITAMIN K PREPARATIONS

PHYTONADIONE 5 MG ORAL TABLET	GENERIC	
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HORMONAL DEFICIENCY

ANDROGENIC AGENTS

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

DRUG NAME	TYPE	RESTRICTIONS
ESTROGEN/ANDROGEN COMBINATIONS		
ESTROGEN-METHYLTESTOSTERONE (ESTROGEN,ESTER/ME-TESTOSTERONE) 0.625-1.25 ORAL TABLET	GENERIC	
ESTROGEN-METHYLTESTOSTERONE (ESTROGEN,ESTER/ME-TESTOSTERONE) 1.25-2.5MG ORAL TABLET	GENERIC	
ESTROGENIC AGENTS		
DOTTI (ESTRADIOL) 0.05MG/24H TRANSDERM. PATCH TDSW	GENERIC	
DOTTI (ESTRADIOL) 0.1MG/24HR TRANSDERM. PATCH TDSW	GENERIC	
DOTTI (ESTRADIOL) .025MG/24H TRANSDERM. PATCH TDSW	GENERIC	
DOTTI (ESTRADIOL) .075MG/24H TRANSDERM. PATCH TDSW	GENERIC	
DOTTI (ESTRADIOL) .0375MG/24 TRANSDERM. PATCH TDSW	GENERIC	
ESTRADIOL 0.5 MG ORAL TABLET	GENERIC	
ESTRADIOL 1 MG ORAL TABLET	GENERIC	
ESTRADIOL 2 MG ORAL TABLET	GENERIC	
ESTRADIOL (ONCE WEEKLY) (ESTRADIOL) 0.05MG/24H TRANSDERM. PATCH TDWK	GENERIC	QL (1 patch per 7 days)
ESTRADIOL (ONCE WEEKLY) (ESTRADIOL) 0.06MG/24H TRANSDERM. PATCH TDWK	GENERIC	QL (1 patch per 7 days)
ESTRADIOL (ONCE WEEKLY) (ESTRADIOL) 0.1MG/24HR TRANSDERM. PATCH TDWK	GENERIC	QL (1 patch per 7 days)
ESTRADIOL (ONCE WEEKLY) (ESTRADIOL) .025MG/24H TRANSDERM. PATCH TDWK	GENERIC	QL (1 patch per 7 days)
ESTRADIOL (ONCE WEEKLY) (ESTRADIOL) .075MG/24H TRANSDERM. PATCH TDWK	GENERIC	QL (1 patch per 7 days)
ESTRADIOL (ONCE WEEKLY) (ESTRADIOL) .0375MG/24 TRANSDERM. PATCH TDWK	GENERIC	QL (1 patch per 7 days)
ESTRADIOL (TWICE WEEKLY) (ESTRADIOL) 0.05MG/24H TRANSDERM. PATCH TDSW	GENERIC	
ESTRADIOL (TWICE WEEKLY) (ESTRADIOL) 0.1MG/24HR TRANSDERM. PATCH TDSW	GENERIC	
ESTRADIOL (TWICE WEEKLY) (ESTRADIOL) .025MG/24H TRANSDERM. PATCH TDSW	GENERIC	
ESTRADIOL (TWICE WEEKLY) (ESTRADIOL) .075MG/24H TRANSDERM. PATCH TDSW	GENERIC	
ESTRADIOL (TWICE WEEKLY) (ESTRADIOL) .0375MG/24 TRANSDERM. PATCH TDSW	GENERIC	
ESTROGEL (ESTRADIOL) 1.25 G TRANSDERM. GEL MD PMP	BRAND	
EVAMIST (ESTRADIOL) 1.53/SPRAY TRANSDERM. SPRAY	BRAND	
LYLLANA (ESTRADIOL) 0.05MG/24H TRANSDERM. PATCH TDSW	GENERIC	
LYLLANA (ESTRADIOL) 0.1MG/24HR TRANSDERM. PATCH TDSW	GENERIC	
LYLLANA (ESTRADIOL) .025MG/24H TRANSDERM. PATCH TDSW	GENERIC	
LYLLANA (ESTRADIOL) .075MG/24H TRANSDERM. PATCH TDSW	GENERIC	
LYLLANA (ESTRADIOL) .0375MG/24 TRANSDERM. PATCH TDSW	GENERIC	
MENOSTAR (ESTRADIOL) 14MCG/24HR TRANSDERM. PATCH TDWK	BRAND	
CLIMARA PRO (ESTRADIOL/LEVONORGESTREL) 45-15/24H TRANSDERM. PATCH TDWK	BRAND	
AMABELZ (ESTRADIOL/NORETH AC) 0.5-0.1 MG ORAL TABLET	GENERIC	
AMABELZ (ESTRADIOL/NORETH AC) 1 MG-0.5MG ORAL TABLET	GENERIC	
COMBIPATCH (ESTRADIOL/NORETH AC) .05-.14/24 TRANSDERM.	BRAND	

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

PROGESTATIONAL AGENTS

MEDROXYPROGESTERONE ACETATE (MEDROXYPROGESTERONE ACET) 2.5 MG ORAL TABLET	GENERIC	
MEDROXYPROGESTERONE ACETATE (MEDROXYPROGESTERONE ACET) 5 MG ORAL TABLET	GENERIC	
MEDROXYPROGESTERONE ACETATE (MEDROXYPROGESTERONE ACET) 10 MG ORAL TABLET	GENERIC	
NORETHINDRONE AC (LUPANETA) (NORETHINDRONE ACETATE) 5 MG ORAL TABLET	GENERIC	
NORETHINDRONE ACETATE 5 MG ORAL TABLET	GENERIC	
PROGESTERONE (PROGESTERONE,MICRONIZED) 100 MG ORAL CAPSULE	GENERIC	
PROGESTERONE (PROGESTERONE,MICRONIZED) 200 MG ORAL	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
CAPSULE		

IMMUNIZATION

COVID-19 VACCINES

SPIKEVAX 2023-2024 (COVID VAC 23-24(12UP)(ANDU)/PF) 50 MCG/0.5 INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older); QL (1 injection [0.5ml] per dose)
SPIKEVAX 2023-2024 (COVID VAC 23-24(12UP)(ANDU)/PF) 50 MCG/0.5 INTRAMUSC. VIAL	BRAND	AR (age 19 and older); QL (1 injection [0.5ml] per dose)
COMIRNATY 2023-2024 (COVID VAC 23-24(12UP)(RAXT)/PF) 30 MCG/0.3 INTRAMUSC. VIAL	BRAND	AR (age 19 and older); QL (1 injection [0.5ml] per dose)
COMIRNATY 2023-2024 (COVID VAC23-24(12UP)(RAXT)/PF) 30 MCG/0.3 INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older); QL (1 injection [0.5ml] per dose)

GRAM NEGATIVE COCCI VACCINES

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

GRAM POSITIVE COCCI VACCINES

VAXNEUVANCE (PNEUMOC 15-VAL CONJ-DIP CRM/PF) 0.5 ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
PREVNAR 20 (PNEUMOC 20-VAL CONJ-DIP CRM/PF) 0.5 ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
PNEUMOVAX 23 (PNEUMOCOCCAL 23-VAL P-SAC VAC) 25MCG/0.5 INJECTION SYRINGE	BRAND	AR (age 19 and older)
PNEUMOVAX 23 (PNEUMOCOCCAL 23-VAL P-SAC VAC) 25MCG/0.5 INJECTION VIAL	BRAND	AR (age 19 and older)

INFLUENZA VIRUS VACCINES

FLUCELVAX QUAD 2023-2024 (FLU VAC QS 23-24 (6MS UP) CELL) 60MCG/.5ML INTRAMUSC. VIAL	BRAND	AR (age 19 and older)
FLUCELVAX QUAD 2023-2024 (FLU VAC QS 23-24(6MS UP)CEL/PF) 60MCG/.5ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
FLUBLOK QUAD 2023-2024 (FLU VAC QV 2023(18YR UP)RCM/PF) 180MCG/0.5 INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
AFLURIA QUAD 2023-2024 (FLU VACC QS 2023-24 (6 MOS UP)) 60MCG/.5ML INTRAMUSC. VIAL	BRAND	AR (age 19 and older)
FLUZONE QUAD 2023-2024 (FLU VACC QS 2023-24 (6 MOS UP)) 60MCG/.5ML INTRAMUSC. VIAL	BRAND	AR (age 19 and older)
FLUAD QUAD 2023-2024 (FLU VACC QS2023(65UP)/MF59C/PF) 60MCG/.5ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
AFLURIA QUAD 2023-24 (3YR UP) (FLU VACC QS2023-24 36MOS UP/PF) 60MCG/.5ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
FLUZONE HIGH-DOSE QUAD 2023-24 (FLU VACC QS2023-24(65YR UP)/PF) 240MCG/0.7 INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
FLUARIX QUAD 2023-2024 (FLU VACC QS2023-24(6MOS UP)/PF) 60MCG/.5ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
FLULAVAL QUAD 2023-2024 (FLU VACC QS2023-24(6MOS UP)/PF) 60MCG/.5ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
FLUZONE QUAD 2023-2024 (FLU VACC QS2023-24(6MOS UP)/PF) 60MCG/.5ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
FLUMIST QUAD 2023-2024 (FLU VACC QV LIVE 2023(2-49YRS)) 10E6.5-7.5 NASAL NAS SP SYR	BRAND	AR (age 19 and older)

DRUG NAME	TYPE	RESTRICTIONS
<u>VACCINE/TOXOID PREPARATIONS, COMBINATIONS</u>		
ADACEL TDAP (DIPH, PERTUSS(ACELL), TET VAC/PF) 2-2.5-5/.5 INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
BOOSTRIX TDAP (DIPH, PERTUSS(ACELL), TET VAC/PF) 2.5-8-5/.5 INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
BOOSTRIX TDAP (DIPHTH, PERTUSS(ACELL), TET PED) 2.5-8-5/.5 INTRAMUSC. VIAL	BRAND	AR (age 19 and older)
ADACEL TDAP (DIPHTH, PERTUSS(ACELL), TET VAC) 2-2.5-5/.5 INTRAMUSC. VIAL	BRAND	AR (age 19 and older)
BOOSTRIX TDAP (DIPHTH, PERTUSS(ACELL), TET VAC) 2.5-8-5/.5 INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
M-M-R II VACCINE (MEASLES, MUMPS, RUBELLA VACC/PF) 12500/0.5 SUBCUTANE. VIAL	BRAND	AR (age 19 and older)
TENIVAC (TETANUS-DIPHTHERIA TOXOIDS/PF) 5-2/0.5ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
TENIVAC (TETANUS-DIPHTHERIA TOXOIDS/PF) 5-2/0.5ML INTRAMUSC. VIAL	BRAND	AR (age 19 and older)

VIRAL/TUMORIGENIC VACCINES

TWINRIX (HEPATITIS A & B VACCINE/PF) 720-20/ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
GARDASIL 9 (HPV VACCINE 9-VALENT/PF) 0.5 ML INTRAMUSC. SYRINGE	BRAND	AR (age 19 and older)
GARDASIL 9 (HPV VACCINE 9-VALENT/PF) 0.5 ML INTRAMUSC. VIAL	BRAND	AR (age 19 and older)
ABRYSVO (RSV VACC, PREF A AND PREF B/PF) 120MCG/0.5 INTRAMUSC. VIAL	BRAND	QL (1 injection per lifetime)
AREXVY ANTIGEN COMPONENT (RSVPREF3 ANTIGEN 2 OF 2) 120 MCG INTRAMUSC. VIAL	BRAND	QL (1 injection per lifetime)
AREXVY (RSVPREF3 ANTIGEN/AS01E/PF) 120MCG/0.5 INTRAMUSC. KIT	BRAND	QL (1 injection per lifetime)
VARIVAX VACCINE (VARICELLA VACC/PF) 1350 UNIT SUBCUTANE. VIAL	BRAND	AR (age 19 and older)
SHINGRIX GE ANTIGEN COMPONENT (VARICELLA-ZOSTER GE VAC, 2 OF 2) 50 MCG INTRAMUSC. VIAL	BRAND	AR (age 19 and older); QL (2 injections per lifetime)
SHINGRIX (VARICELLA-ZOSTER GE/AS01B/PF) 50 MCG/0.5 INTRAMUSC. KIT	BRAND	AR (age 19 and older); QL (2 injections per lifetime)

IMMUNOSUPPRESSION/MODULATION

IMMUNOSUPPRESSIVES

AZATHIOPRINE 50 MG ORAL TABLET	GENERIC	
CYCLOSPORINE 25 MG ORAL CAPSULE	GENERIC	
CYCLOSPORINE 100 MG ORAL CAPSULE	GENERIC	
CYCLOSPORINE MODIFIED (CYCLOSPORINE, MODIFIED) 25 MG ORAL CAPSULE	GENERIC	
CYCLOSPORINE MODIFIED (CYCLOSPORINE, MODIFIED) 50 MG ORAL CAPSULE	GENERIC	
CYCLOSPORINE MODIFIED (CYCLOSPORINE, MODIFIED) 100 MG ORAL CAPSULE	GENERIC	
CYCLOSPORINE MODIFIED (CYCLOSPORINE, MODIFIED) 100 MG/ML ORAL SOLUTION	GENERIC	
GENGRAF (CYCLOSPORINE, MODIFIED) 25 MG ORAL CAPSULE	GENERIC	
GENGRAF (CYCLOSPORINE, MODIFIED) 100 MG ORAL CAPSULE	GENERIC	
GENGRAF (CYCLOSPORINE, MODIFIED) 100 MG/ML ORAL	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
SOLUTION		
MYCOPHENOLATE MOFETIL 250 MG ORAL CAPSULE	GENERIC	
MYCOPHENOLATE MOFETIL 200 MG/ML ORAL SUSP RECON	GENERIC	
MYCOPHENOLATE MOFETIL 500 MG ORAL TABLET	GENERIC	
SIROLIMUS 1 MG/ML ORAL SOLUTION	GENERIC	
SIROLIMUS 0.5 MG ORAL TABLET	GENERIC	
SIROLIMUS 1 MG ORAL TABLET	GENERIC	
SIROLIMUS 2 MG ORAL TABLET	GENERIC	
TACROLIMUS 0.5 MG ORAL CAPSULE	GENERIC	
TACROLIMUS 1 MG ORAL CAPSULE	GENERIC	
TACROLIMUS 5 MG ORAL CAPSULE	GENERIC	

INFECTIOUS DISEASE - BACTERIAL

ABSORBABLE SULFONAMIDES

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

CEPHALOSPORINS - 1ST GENERATION

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

CEPHALOSPORINS - 2ND GENERATION

CEFACLOR 250 MG ORAL CAPSULE	GENERIC	
CEFACLOR 500 MG ORAL CAPSULE	GENERIC	
CEFACLOR 125 MG/5ML ORAL SUSP RECON	GENERIC	
CEFACLOR 250 MG/5ML ORAL SUSP RECON	GENERIC	
CEFACLOR 375 MG/5ML ORAL SUSP RECON	GENERIC	
CEFACLOR ER (CEFACLOR) 500 MG ORAL TAB ER 12H	GENERIC	
CEFPROZIL 125 MG/5ML ORAL SUSP RECON	GENERIC	
CEFPROZIL 250 MG/5ML ORAL SUSP RECON	GENERIC	
CEFPROZIL 250 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
CEFPROZIL 500 MG ORAL TABLET	GENERIC	
CEFUROXIME (CEFUROXIME AXETIL) 250 MG ORAL TABLET	GENERIC	
CEFUROXIME (CEFUROXIME AXETIL) 500 MG ORAL TABLET	GENERIC	

CEPHALOSPORINS - 3RD GENERATION

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

CHEMOTHERAPEUTICS, ANTIBACTERIAL, MISC.

TRIMETHOPRIM 100 MG ORAL TABLET	GENERIC	
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MACROLIDES

AZITHROMYCIN 1 G ORAL PACKET	GENERIC	
AZITHROMYCIN 100 MG/5ML ORAL SUSP RECON	GENERIC	
AZITHROMYCIN 200 MG/5ML ORAL SUSP RECON	GENERIC	
AZITHROMYCIN 250 MG ORAL TABLET	GENERIC	
AZITHROMYCIN 500 MG ORAL TABLET	GENERIC	
AZITHROMYCIN 600 MG ORAL TABLET	GENERIC	
CLARITHROMYCIN 125 MG/5ML ORAL SUSP RECON	GENERIC	
CLARITHROMYCIN 250 MG/5ML ORAL SUSP RECON	GENERIC	
CLARITHROMYCIN 250 MG ORAL TABLET	GENERIC	
CLARITHROMYCIN 500 MG ORAL TABLET	GENERIC	
CLARITHROMYCIN ER (CLARITHROMYCIN) 500 MG ORAL TAB ER 24H	GENERIC	
ERY-TAB (ERYTHROMYCIN BASE) 250 MG ORAL TABLET DR	GENERIC	
ERY-TAB (ERYTHROMYCIN BASE) 500 MG ORAL TABLET DR	GENERIC	
ERYTHROMYCIN (ERYTHROMYCIN BASE) 250 MG ORAL CAPSULE DR	GENERIC	
ERYTHROMYCIN (ERYTHROMYCIN BASE) 250 MG ORAL TABLET	GENERIC	
ERYTHROMYCIN (ERYTHROMYCIN BASE) 500 MG ORAL TABLET	GENERIC	
ERYTHROMYCIN (ERYTHROMYCIN BASE) 250 MG ORAL TABLET DR	GENERIC	
ERYTHROMYCIN (ERYTHROMYCIN BASE) 333 MG ORAL TABLET DR	GENERIC	
ERYTHROMYCIN (ERYTHROMYCIN BASE) 500 MG ORAL TABLET DR	GENERIC	
E.E.S. 400 (ERYTHROMYCIN ETHYLSUCCINATE) 400 MG ORAL TABLET	GENERIC	
ERYTHROMYCIN ETHYLSUCCINATE 200 MG/5ML ORAL SUSP RECON	GENERIC	
ERYTHROMYCIN ETHYLSUCCINATE 400 MG/5ML ORAL SUSP RECON	GENERIC	
ERYTHROMYCIN ETHYLSUCCINATE 400 MG ORAL TABLET	GENERIC	
ERYTHROCIN STEARATE (ERYTHROMYCIN STEARATE) 250 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
<u>NITROFURAN DERIVATIVES</u>		
NITROFURANTOIN (NITROFURANTOIN MACROCRYSTAL) 25 MG ORAL CAPSULE	GENERIC	
NITROFURANTOIN (NITROFURANTOIN MACROCRYSTAL) 50 MG ORAL CAPSULE	GENERIC	
NITROFURANTOIN (NITROFURANTOIN MACROCRYSTAL) 100 MG ORAL CAPSULE	GENERIC	
NITROFURANTOIN MONO-MACRO (NITROFURANTOIN/NITROFURAN MAC) 100 MG ORAL CAPSULE	GENERIC	
<u>OXAZOLIDINONES</u>		
LINEZOLID 600 MG ORAL TABLET	GENERIC	
<u>PENICILLINS</u>		
AMOXICILLIN-CLAVULANATE POT ER (AMOX TR/POTASSIUM CLAVULANATE) 1000-62.5 ORAL TAB ER 12H	GENERIC	
AMOXICILLIN-CLAVULANATE POTASS (AMOX TR/POTASSIUM CLAVULANATE) 200-28.5/5 ORAL SUSP RECON	GENERIC	
AMOXICILLIN-CLAVULANATE POTASS (AMOX TR/POTASSIUM CLAVULANATE) 250-62.5/5 ORAL SUSP RECON	GENERIC	
AMOXICILLIN-CLAVULANATE POTASS (AMOX TR/POTASSIUM CLAVULANATE) 400-57MG/5 ORAL SUSP RECON	GENERIC	
AMOXICILLIN-CLAVULANATE POTASS (AMOX TR/POTASSIUM CLAVULANATE) 600-42.9/5 ORAL SUSP RECON	GENERIC	
AMOXICILLIN-CLAVULANATE POTASS (AMOX TR/POTASSIUM CLAVULANATE) 200-28.5MG ORAL TAB CHEW	GENERIC	
AMOXICILLIN-CLAVULANATE POTASS (AMOX TR/POTASSIUM CLAVULANATE) 400-57MG ORAL TAB CHEW	GENERIC	
AMOXICILLIN-CLAVULANATE POTASS (AMOX TR/POTASSIUM CLAVULANATE) 250-125 MG ORAL TABLET	GENERIC	
AMOXICILLIN-CLAVULANATE POTASS (AMOX TR/POTASSIUM CLAVULANATE) 500-125 MG ORAL TABLET	GENERIC	
AMOXICILLIN-CLAVULANATE POTASS (AMOX TR/POTASSIUM CLAVULANATE) 875-125 MG ORAL TABLET	GENERIC	
AUGMENTIN (AMOX TR/POTASSIUM CLAVULANATE) 125-31.25/ ORAL SUSP RECON	BRAND	
AMOXICILLIN (AMOXICILLIN TRIHYDRATE) 250 MG ORAL CAPSULE	GENERIC	
AMOXICILLIN (AMOXICILLIN TRIHYDRATE) 500 MG ORAL CAPSULE	GENERIC	
AMOXICILLIN (AMOXICILLIN TRIHYDRATE) 125 MG/5ML ORAL SUSP RECON	GENERIC	
AMOXICILLIN (AMOXICILLIN TRIHYDRATE) 200 MG/5ML ORAL SUSP RECON	GENERIC	
AMOXICILLIN (AMOXICILLIN TRIHYDRATE) 250 MG/5ML ORAL SUSP RECON	GENERIC	
AMOXICILLIN (AMOXICILLIN TRIHYDRATE) 400 MG/5ML ORAL SUSP RECON	GENERIC	
AMOXICILLIN (AMOXICILLIN TRIHYDRATE) 125 MG ORAL TAB CHEW	GENERIC	
AMOXICILLIN (AMOXICILLIN TRIHYDRATE) 250 MG ORAL TAB CHEW	GENERIC	
AMOXICILLIN (AMOXICILLIN TRIHYDRATE) 500 MG ORAL TABLET	GENERIC	
AMOXICILLIN (AMOXICILLIN TRIHYDRATE) 875 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
AMPICILLIN TRIHYDRATE 500 MG ORAL CAPSULE	GENERIC	
DICLOXACILLIN SODIUM 250 MG ORAL CAPSULE	GENERIC	
DICLOXACILLIN SODIUM 500 MG ORAL CAPSULE	GENERIC	
PENICILLIN V POTASSIUM 125 MG/5ML ORAL SOLN RECON	GENERIC	
PENICILLIN V POTASSIUM 250 MG/5ML ORAL SOLN RECON	GENERIC	
PENICILLIN V POTASSIUM 250 MG ORAL TABLET	GENERIC	
PENICILLIN V POTASSIUM 500 MG ORAL TABLET	GENERIC	

QUINOLONES

CIPRO (CIPROFLOXACIN) 250 MG/5ML ORAL SUS MC REC	BRAND	
CIPRO (CIPROFLOXACIN) 500 MG/5ML ORAL SUS MC REC	BRAND	
CIPROFLOXACIN 250 MG/5ML ORAL SUS MC REC	GENERIC	
CIPROFLOXACIN 500 MG/5ML ORAL SUS MC REC	GENERIC	
CIPROFLOXACIN HCL 100 MG ORAL TABLET	GENERIC	
CIPROFLOXACIN HCL 250 MG ORAL TABLET	GENERIC	
CIPROFLOXACIN HCL 500 MG ORAL TABLET	GENERIC	
CIPROFLOXACIN HCL 750 MG ORAL TABLET	GENERIC	
LEVOFLOXACIN 250MG/10ML ORAL SOLUTION	GENERIC	
LEVOFLOXACIN 250 MG ORAL TABLET	GENERIC	
LEVOFLOXACIN 500 MG ORAL TABLET	GENERIC	
LEVOFLOXACIN 750 MG ORAL TABLET	GENERIC	
MOXIFLOXACIN HCL 400 MG ORAL TABLET	GENERIC	
OFLOXACIN 300 MG ORAL TABLET	GENERIC	
OFLOXACIN 400 MG ORAL TABLET	GENERIC	

TETRACYCLINES

DOXYCYCLINE HYCLATE 50 MG ORAL CAPSULE	GENERIC	
DOXYCYCLINE HYCLATE 100 MG ORAL CAPSULE	GENERIC	
DOXYCYCLINE HYCLATE 100 MG ORAL TABLET	GENERIC	
DOXYCYCLINE MONOHYDRATE 50 MG ORAL CAPSULE	GENERIC	
DOXYCYCLINE MONOHYDRATE 100 MG ORAL CAPSULE	GENERIC	
DOXYCYCLINE MONOHYDRATE 25 MG/5 ML ORAL SUSP RECON	GENERIC	
DOXYCYCLINE MONOHYDRATE 50 MG ORAL TABLET	GENERIC	
DOXYCYCLINE MONOHYDRATE 100 MG ORAL TABLET	GENERIC	
MONDOXYNE NL (DOXYCYCLINE MONOHYDRATE) 100 MG ORAL CAPSULE	GENERIC	
MINOCYCLINE HCL 50 MG ORAL CAPSULE	GENERIC	
MINOCYCLINE HCL 75 MG ORAL CAPSULE	GENERIC	
MINOCYCLINE HCL 100 MG ORAL CAPSULE	GENERIC	
MINOCYCLINE HCL 50 MG ORAL TABLET	GENERIC	
MINOCYCLINE HCL 75 MG ORAL TABLET	GENERIC	
TETRACYCLINE HCL 250 MG ORAL CAPSULE	GENERIC	
TETRACYCLINE HCL 500 MG ORAL CAPSULE	GENERIC	

INFECTIOUS DISEASE - FUNGAL

ANTIFUNGAL AGENTS

CLOTRIMAZOLE 10 MG MUCOUS MEM TROCHE	GENERIC	QL (1 fill per 30 days)
FLUCONAZOLE 10 MG/ML ORAL SUSP RECON	GENERIC	
FLUCONAZOLE 40 MG/ML ORAL SUSP RECON	GENERIC	
FLUCONAZOLE 50 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
FLUCONAZOLE 100 MG ORAL TABLET	GENERIC	
FLUCONAZOLE 150 MG ORAL TABLET	GENERIC	
FLUCONAZOLE 200 MG ORAL TABLET	GENERIC	
ITRACONAZOLE 100 MG ORAL CAPSULE	GENERIC	PA (Rx046)
KETOCONAZOLE 200 MG ORAL TABLET	GENERIC	PA (Rx046)
TERBINAFINE HCL 250 MG ORAL TABLET	GENERIC	

ANTIFUNGAL ANTIBIOTICS

NYSTATIN 100000/ML ORAL SUSP	GENERIC	
NYSTATIN 500K UNIT ORAL TABLET	GENERIC	

INFECTIOUS DISEASE - MISCELLANEOUS

AMINOGLYCOSIDES

NEOMYCIN SULFATE 500 MG ORAL TABLET	GENERIC	
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ANTILEPTOTICS

DAPSONE 25 MG ORAL TABLET	GENERIC	
DAPSONE 100 MG ORAL TABLET	GENERIC	

ANTI-MYCOBACTERIUM AGENTS

ETHAMBUTOL HCL 100 MG ORAL TABLET	GENERIC	
ETHAMBUTOL HCL 400 MG ORAL TABLET	GENERIC	
ISONIAZID 50 MG/5 ML ORAL SOLUTION	GENERIC	
ISONIAZID 100 MG ORAL TABLET	GENERIC	
ISONIAZID 300 MG ORAL TABLET	GENERIC	
PYRAZINAMIDE 500 MG ORAL TABLET	GENERIC	

ANTITUBERCULAR ANTIBIOTICS

RIFAMPIN 150 MG ORAL CAPSULE	GENERIC	
RIFAMPIN 300 MG ORAL CAPSULE	GENERIC	

LINCOSAMIDES

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

RIFAMYCINS AND RELATED DERIVATIVE ANTIBIOTICS

XIFAXAN (RIFAXIMIN) 550 MG ORAL TABLET	BRAND	PA (Rx047)
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VANCOMYCIN AND DERIVATIVES

VANCOMYCIN HCL 125 MG ORAL CAPSULE	GENERIC	
VANCOMYCIN HCL 250 MG ORAL CAPSULE	GENERIC	

INFECTIOUS DISEASE - PARASITIC

ANAEROBIC ANTIPROTOZOAL-ANTIBACTERIAL AGENTS

METRONIDAZOLE 250 MG ORAL TABLET	GENERIC	
METRONIDAZOLE 500 MG ORAL TABLET	GENERIC	

ANTHELMINTICS

PINAWAY (PYRANTEL PAMOATE) 50 MG/ML ORAL SUSP	GENERIC, OTC	
PINWORM MEDICINE (PYRANTEL PAMOATE) 50 MG/ML ORAL SUSP	GENERIC, OTC	
PINWORM TREATMENT (PYRANTEL PAMOATE) 50 MG/ML ORAL SUSP	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
REESE'S PINWORM (PYRANTEL PAMOATE) 50 MG/ML ORAL SUSP	GENERIC, OTC	

ANTIMALARIAL DRUGS

CHLOROQUINE PHOSPHATE 250 MG ORAL TABLET	GENERIC	
CHLOROQUINE PHOSPHATE 500 MG ORAL TABLET	GENERIC	
HYDROXYCHLOROQUINE SULFATE 200 MG ORAL TABLET	GENERIC	
MEFLOQUINE HCL 250 MG ORAL TABLET	GENERIC	

INFECTIOUS DISEASE - VIRAL

ANTIVIRAL - MAIN PROTEASE (MPRO) INHIBITOR

PAXLOVID (NIRMATRELVIR/RITONAVIR) 300-100 MG ORAL TAB DS PK	BRAND	
PAXLOVID (EUA) (NIRMATRELVIR/RITONAVIR) 300-100 MG ORAL TAB DS PK	BRAND	

ANTIVIRAL MONOCLONAL ANTIBODIES

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

ANTIVIRAL NUCLEOTIDE ANALOGS

LAGEVRIO (EUA) (MOLNUPIRAVIR) 200 MG ORAL CAPSULE	GENERIC	
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ANTIVIRALS, GENERAL

ACYCLOVIR 200 MG ORAL CAPSULE	GENERIC	
ACYCLOVIR 200 MG/5ML ORAL SUSP	GENERIC	
ACYCLOVIR 400 MG ORAL TABLET	GENERIC	
ACYCLOVIR 800 MG ORAL TABLET	GENERIC	
OSELTAMIVIR PHOSPHATE 30 MG ORAL CAPSULE	GENERIC	QL (10 capsules per 5 days, 2 fills per year)
OSELTAMIVIR PHOSPHATE 45 MG ORAL CAPSULE	GENERIC	QL (10 capsules per 5 days, 2 fills per year)
OSELTAMIVIR PHOSPHATE 75 MG ORAL CAPSULE	GENERIC	QL (10 capsules per 5 days, 2 fills per year)
OSELTAMIVIR PHOSPHATE 6 MG/ML ORAL SUSP RECON	GENERIC	AR (age 7 and younger); QL (120 mL per 5 days, 2 fills per year)
VALACYCLOVIR (VALACYCLOVIR HCL) 500 MG ORAL TABLET	GENERIC	QL (2 tablets per day)
VALACYCLOVIR (VALACYCLOVIR HCL) 1000 MG ORAL TABLET	GENERIC	QL (3 tablets per day, 7 days per fill, 1 fill per 30 days)

ANTIVIRALS, HIV-SPEC, NON-PEPTIDIC PROTEASE INHIB

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

ANTIVIRALS, HIV-SPEC, NUCLEOSIDE-NUCLEOTIDE ANALOG

EMTRICITABINE-TENOFOVIR DISOP (EMTRICITABINE/TENOFOVIR) 200-300 MG ORAL TABLET	GENERIC	
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ANTIVIRALS, HIV-SPEC., NUCLEOSIDE ANALOG, RTI COMB

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

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

MARAVIROC 150 MG ORAL TABLET	GENERIC	PA (Rx020)
MARAVIROC 300 MG ORAL TABLET	GENERIC	PA (Rx020)

ANTIVIRALS, HIV-SPECIFIC, NON-NUCLEOSIDE, RTI

DRUG NAME	TYPE	RESTRICTIONS
EFAVIRENZ 50 MG ORAL CAPSULE	GENERIC	PA (Rx020)
EFAVIRENZ 200 MG ORAL CAPSULE	GENERIC	PA (Rx020)
EFAVIRENZ 600 MG ORAL TABLET	GENERIC	PA (Rx020)
ETRAVIRINE 100 MG ORAL TABLET	GENERIC	PA (Rx020)
ETRAVIRINE 200 MG ORAL TABLET	GENERIC	PA (Rx020)
EDURANT (RILPIVIRINE HYDROCHLORIDE) 25 MG ORAL TABLET	BRAND	PA (Rx020)

ANTIVIRALS, HIV-SPECIFIC, NUCLEOSIDE ANALOG, RTI

ABACAVIR (ABACAVIR SULFATE) 20 MG/ML ORAL SOLUTION	GENERIC	PA (Rx020)
ABACAVIR (ABACAVIR SULFATE) 300 MG ORAL TABLET	GENERIC	PA (Rx020)

ANTIVIRALS, HIV-SPECIFIC, NUCLEOTIDE ANALOG, RTI

TENOFOVIR DISOPROXIL FUMARATE 300 MG ORAL TABLET	GENERIC	PA (Rx020)
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ANTIVIRALS, HIV-SPECIFIC, PROTEASE INHIBITOR COMB

LOPINAVIR-RITONAVIR (LOPINAVIR/RITONAVIR) 400-100/5 ORAL SOLUTION	GENERIC	PA (Rx020)
LOPINAVIR-RITONAVIR (LOPINAVIR/RITONAVIR) 100MG-25MG ORAL TABLET	GENERIC	PA (Rx020)
LOPINAVIR-RITONAVIR (LOPINAVIR/RITONAVIR) 200MG-50MG ORAL TABLET	GENERIC	PA (Rx020)

ANTIVIRALS, HIV-SPECIFIC, PROTEASE INHIBITORS

ATAZANAVIR SULFATE 150 MG ORAL CAPSULE	GENERIC	PA (Rx020)
ATAZANAVIR SULFATE 200 MG ORAL CAPSULE	GENERIC	PA (Rx020)
ATAZANAVIR SULFATE 300 MG ORAL CAPSULE	GENERIC	PA (Rx020)
FOSAMPRENAVIR CALCIUM 700 MG ORAL TABLET	GENERIC	PA (Rx020)
VIRACEPT (NELFINAVIR MESYLATE) 250 MG ORAL TABLET	BRAND	PA (Rx020)
VIRACEPT (NELFINAVIR MESYLATE) 625 MG ORAL TABLET	BRAND	PA (Rx020)
RITONAVIR 100 MG ORAL TABLET	GENERIC	PA (Rx020)

ANTIVIRALS, HIV-1 INTEGRASE STRAND TRANSFER INHIBTR

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

ARTV CMB NUCLEOSIDE,NUCLEOTIDE,&NON-NUCLEOSIDE RTI

EFAVIRENZ-LAMIVU-TENOFOV DISOP (EFAVIRENZ/LAMIVU/TENOFOV DISOP) 400-300 MG ORAL TABLET	GENERIC	PA (Rx020)
EFAVIRENZ-LAMIVU-TENOFOV DISOP (EFAVIRENZ/LAMIVU/TENOFOV DISOP) 600-300 MG ORAL TABLET	GENERIC	PA (Rx020)

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

GENVOYA (ELVITEG/COBI/EMTRIC/TENOFO ALA) 150-200-10 ORAL TABLET	BRAND	PA (Rx020)
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ARV COMB-NRTIS & INTEGRASE INHIBITOR

TRIUMEQ (ABACAVIR/DOLUTEGRAVIR/LAMIVUDI) 600-50-300 ORAL TABLET	BRAND	PA (Rx020)
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INFLAMMATORY DISEASE

ANTI-INFLAMMATORY, PYRIMIDINE SYNTHESIS INHIBITOR

LEFLUNOMIDE 10 MG ORAL TABLET	GENERIC	
LEFLUNOMIDE 20 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
GLUCOCORTICOIDS		
DEXAMETHASONE 0.5 MG/5ML ORAL ELIXIR	GENERIC	
DEXAMETHASONE 0.5 MG/5ML ORAL SOLUTION	GENERIC	
DEXAMETHASONE 1.5MG (21) ORAL TAB DS PK	GENERIC	
DEXAMETHASONE 1.5MG (35) ORAL TAB DS PK	GENERIC	
DEXAMETHASONE 1.5MG (51) ORAL TAB DS PK	GENERIC	
DEXAMETHASONE 0.5 MG ORAL TABLET	GENERIC	
DEXAMETHASONE 0.75 MG ORAL TABLET	GENERIC	
DEXAMETHASONE 1 MG ORAL TABLET	GENERIC	
DEXAMETHASONE 1.5 MG ORAL TABLET	GENERIC	
DEXAMETHASONE 2 MG ORAL TABLET	GENERIC	
DEXAMETHASONE 4 MG ORAL TABLET	GENERIC	
DEXAMETHASONE 6 MG ORAL TABLET	GENERIC	
DEXAMETHASONE INTENSOL (DEXAMETHASONE) 1 MG/ML ORAL DROPS	BRAND	
TAPERDEX (DEXAMETHASONE) 1.5MG (21) ORAL TAB DS PK	GENERIC	
METHYLPREDNISOLONE 4 MG ORAL TAB DS PK	GENERIC	
METHYLPREDNISOLONE 4 MG ORAL TABLET	GENERIC	
METHYLPREDNISOLONE 8 MG ORAL TABLET	GENERIC	
METHYLPREDNISOLONE 16 MG ORAL TABLET	GENERIC	
METHYLPREDNISOLONE 32 MG ORAL TABLET	GENERIC	
PREDNISOLONE 15 MG/5 ML ORAL SOLUTION	GENERIC	
PREDNISOLONE SODIUM PHOSPHATE (PREDNISOLONE SOD PHOSPHATE) 5 MG/5 ML ORAL SOLUTION	GENERIC	
PREDNISOLONE SODIUM PHOSPHATE (PREDNISOLONE SOD PHOSPHATE) 15 MG/5 ML ORAL SOLUTION	GENERIC	
PREDNISONE 5 MG/5 ML ORAL SOLUTION	GENERIC	
PREDNISONE 5 MG ORAL TAB DS PK	GENERIC	
PREDNISONE 10 MG ORAL TAB DS PK	GENERIC	
PREDNISONE 1 MG ORAL TABLET	GENERIC	
PREDNISONE 2.5 MG ORAL TABLET	GENERIC	
PREDNISONE 5 MG ORAL TABLET	GENERIC	
PREDNISONE 10 MG ORAL TABLET	GENERIC	
PREDNISONE 20 MG ORAL TABLET	GENERIC	
PREDNISONE 50 MG ORAL TABLET	GENERIC	
PREDNISONE INTENSOL (PREDNISONE) 5 MG/ML ORAL CONC	BRAND	
MINERALOCORTICOIDS		
FLUDROCORTISONE ACETATE 0.1 MG ORAL TABLET	GENERIC	
NSAIDS, CYCLOOXYGENASE 2 INHIBITOR - TYPE		
CELECOXIB 50 MG ORAL CAPSULE	GENERIC	
CELECOXIB 100 MG ORAL CAPSULE	GENERIC	
CELECOXIB 200 MG ORAL CAPSULE	GENERIC	
CELECOXIB 400 MG ORAL CAPSULE	GENERIC	
NSAIDS, CYCLOOXYGENASE INHIBITOR-TYPE		
DICLOFENAC SODIUM 50 MG ORAL TABLET DR	GENERIC	
DICLOFENAC SODIUM 75 MG ORAL TABLET DR	GENERIC	
ETODOLAC 400 MG ORAL TABLET	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
ETODOLAC 500 MG ORAL TABLET	GENERIC	
FLURBIPROFEN 100 MG ORAL TABLET	GENERIC	
ADDAPRIN (IBUPROFEN) 200 MG ORAL TABLET	GENERIC, OTC	
CHILDREN'S IBUPROFEN (IBUPROFEN) 100 MG/5ML ORAL SUSP	GENERIC, OTC	
CHILDREN'S PROFEN IB (IBUPROFEN) 100 MG/5ML ORAL SUSP	GENERIC, OTC	
CHILDREN'S PROFENIB (IBUPROFEN) 100 MG/5ML ORAL SUSP	GENERIC, OTC	
IBU (IBUPROFEN) 400 MG ORAL TABLET	GENERIC	
IBU (IBUPROFEN) 600 MG ORAL TABLET	GENERIC	
IBU (IBUPROFEN) 800 MG ORAL TABLET	GENERIC	
IBU-200 (IBUPROFEN) 200 MG ORAL TABLET	GENERIC, OTC	
IBUPROFEN 100 MG/5ML ORAL SUSP	GENERIC	
IBUPROFEN 100 MG/5ML ORAL SUSP	GENERIC, OTC	
IBUPROFEN 200 MG ORAL TABLET	GENERIC, OTC	
IBUPROFEN 400 MG ORAL TABLET	GENERIC	
IBUPROFEN 600 MG ORAL TABLET	GENERIC	
IBUPROFEN 800 MG ORAL TABLET	GENERIC	
IBUPROFEN IB (IBUPROFEN) 200 MG ORAL TABLET	GENERIC, OTC	
INFANTS' ADVIL (IBUPROFEN) 50 MG/1.25 ORAL DROPS SUSP	GENERIC, OTC	
INFANTS IBUPROFEN (IBUPROFEN) 50 MG/1.25 ORAL DROPS SUSP	GENERIC, OTC	
INFANTS' IBUPROFEN (IBUPROFEN) 50 MG/1.25 ORAL DROPS SUSP	GENERIC, OTC	
INFANT'S IBUPROFEN (IBUPROFEN) 50 MG/1.25 ORAL DROPS SUSP	GENERIC, OTC	
INFANT'S MOTRIN (IBUPROFEN) 50 MG/1.25 ORAL DROPS SUSP	GENERIC, OTC	
INFANTS PROFENIB (IBUPROFEN) 50 MG/1.25 ORAL DROPS SUSP	GENERIC, OTC	
I-PRIN (IBUPROFEN) 200 MG ORAL TABLET	GENERIC, OTC	
WAL-PROFEN (IBUPROFEN) 200 MG ORAL TABLET	GENERIC, OTC	
INDOCIN (INDOMETHACIN) 25 MG/5 ML ORAL SUSP	BRAND	
INDOCIN (INDOMETHACIN) 50 MG RECTAL SUPP.RECT	BRAND	
INDOMETHACIN 25 MG ORAL CAPSULE	GENERIC	
INDOMETHACIN 50 MG ORAL CAPSULE	GENERIC	
INDOMETHACIN 50 MG RECTAL SUPP.RECT	GENERIC	
KETOROLAC TROMETHAMINE 10 MG ORAL TABLET	GENERIC	
MELOXICAM 7.5 MG ORAL TABLET	GENERIC	
MELOXICAM 15 MG ORAL TABLET	GENERIC	
EC-NAPROXEN (NAPROXEN) 375 MG ORAL TABLET DR	GENERIC	
EC-NAPROXEN (NAPROXEN) 500 MG ORAL TABLET DR	GENERIC	
NAPROXEN 125 MG/5ML ORAL SUSP	GENERIC	
NAPROXEN 250 MG ORAL TABLET	GENERIC	
NAPROXEN 375 MG ORAL TABLET	GENERIC	
NAPROXEN 500 MG ORAL TABLET	GENERIC	
NAPROXEN 375 MG ORAL TABLET DR	GENERIC	
NAPROXEN 500 MG ORAL TABLET DR	GENERIC	
ALEVE (NAPROXEN SODIUM) 220 MG ORAL TABLET	GENERIC, OTC	
ALL DAY PAIN RELIEF (NAPROXEN SODIUM) 220 MG ORAL TABLET	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
ALL DAY RELIEF (NAPROXEN SODIUM) 220 MG ORAL TABLET	GENERIC, OTC	
FLANAX (NAPROXEN SODIUM) 220 MG ORAL TABLET	GENERIC, OTC	
MEDIPROXEN (NAPROXEN SODIUM) 220 MG ORAL TABLET	GENERIC, OTC	
NAPROXEN SODIUM 220 MG ORAL TABLET	GENERIC, OTC	
NAPROXEN SODIUM 275 MG ORAL TABLET	GENERIC	
NAPROXEN SODIUM 550 MG ORAL TABLET	GENERIC	
WAL-PROXEN (NAPROXEN SODIUM) 220 MG ORAL TABLET	GENERIC, OTC	
SULINDAC 150 MG ORAL TABLET	GENERIC	
SULINDAC 200 MG ORAL TABLET	GENERIC	

LOCAL ANESTHESIA

LOCAL ANESTHETICS

LIDOCAINE HCL VISCOUS (LIDOCAINE HCL) 2% MUCOUS MEM SOLUTION	GENERIC	
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LOWER GASTROINTESTINAL DISORDERS - BOWEL INFLAMMAT

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

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

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

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

LOWER GASTROINTESTINAL DISORDERS - OTHER

AMMONIA INHIBITORS

ENULOSE (LACTULOSE) 10 G/15 ML ORAL SOLUTION	GENERIC	
GENERLAC (LACTULOSE) 10 G/15 ML ORAL SOLUTION	GENERIC	
LACTULOSE 10 G/15 ML ORAL SOLUTION	GENERIC	

ANTIDIARRHEALS

ANTI-DIARRHEAL (BISMUTH SUBSALICYLATE) 262MG/15ML ORAL SUSP	GENERIC, OTC	
DIARRHEA RELIEF (BISMUTH SUBSALICYLATE) 262MG/15ML ORAL SUSP	GENERIC, OTC	
DIGESTIVE RELIEF (BISMUTH SUBSALICYLATE) 262MG/15ML ORAL SUSP	GENERIC, OTC	
GERI-PECTATE (BISMUTH SUBSALICYLATE) 262MG/15ML ORAL SUSP	GENERIC, OTC	
KAOPECTATE (BISMUTH SUBSALICYLATE) 262MG/15ML ORAL SUSP	GENERIC, OTC	
K-PEC (BISMUTH SUBSALICYLATE) 262MG/15ML ORAL SUSP	GENERIC, OTC	
PINK BISMUTH (BISMUTH SUBSALICYLATE) 262MG/15ML ORAL SUSP	GENERIC, OTC	
SOOTHE (BISMUTH SUBSALICYLATE) 262MG/15ML ORAL SUSP	GENERIC, OTC	
STOMACH RELIEF (BISMUTH SUBSALICYLATE) 262MG/15ML	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
ORAL SUSP		
STOMACH RELIEF ORIGINAL (BISMUTH SUBSALICYLATE) 262MG/15ML ORAL SUSP	GENERIC, OTC	
DIPHENOXYLATE-ATROPINE (DIPHENOXYLATE HCL/ATROP SULF) 2.5-.025MG ORAL TABLET	GENERIC	
ANTI-DIARRHEAL (LOPERAMIDE HCL) 2 MG ORAL CAPSULE	GENERIC, OTC	
ANTI-DIARRHEAL (LOPERAMIDE HCL) 2 MG ORAL TABLET	GENERIC, OTC	
DIAMODE (LOPERAMIDE HCL) 2 MG ORAL TABLET	GENERIC, OTC	
IMODIUM A-D (LOPERAMIDE HCL) 2 MG ORAL CAPSULE	GENERIC, OTC	
LOPERAMIDE (LOPERAMIDE HCL) 2 MG ORAL CAPSULE	GENERIC	
LOPERAMIDE (LOPERAMIDE HCL) 2 MG ORAL TABLET	GENERIC, OTC	
ULTRA A-D (LOPERAMIDE HCL) 2 MG ORAL TABLET	GENERIC, OTC	

BILE SALTS

URSODIOL 300 MG ORAL CAPSULE	GENERIC	
URSODIOL 500 MG ORAL TABLET	GENERIC	

LAXATIVES AND CATHARTICS

ALOPHEN PILLS (BISACODYL) 5 MG ORAL TABLET DR	GENERIC, OTC	
BISACODYL 5 MG ORAL TABLET DR	GENERIC, OTC	
C-LAX LAXATIVE (BISACODYL) 5 MG ORAL TABLET DR	GENERIC, OTC	
GENTLE LAXATIVE (BISACODYL) 5 MG ORAL TABLET	GENERIC, OTC	
GENTLE LAXATIVE (BISACODYL) 5 MG ORAL TABLET DR	GENERIC, OTC	
LAXATIVE (BISACODYL) 5 MG ORAL TABLET	GENERIC, OTC	
LAXATIVE (BISACODYL) 5 MG ORAL TABLET DR	GENERIC, OTC	
WOMEN'S GENTLE LAXATIVE (BISACODYL) 5 MG ORAL TABLET DR	GENERIC, OTC	
WOMEN'S LAXATIVE (BISACODYL) 5 MG ORAL TABLET	GENERIC, OTC	
FIBER (CALCIUM POLYCARBOPHIL) 625 MG ORAL TABLET	GENERIC, OTC	
FIBER LAX (CALCIUM POLYCARBOPHIL) 625 MG ORAL TABLET	GENERIC, OTC	
FIBER LAXATIVE (CALCIUM POLYCARBOPHIL) 625 MG ORAL TABLET	GENERIC, OTC	
FIBER TABS (CALCIUM POLYCARBOPHIL) 625 MG ORAL TABLET	GENERIC, OTC	
FIBER THERAPY (CALCIUM POLYCARBOPHIL) 625 MG ORAL TABLET	GENERIC, OTC	
FIBER-LAX (CALCIUM POLYCARBOPHIL) 625 MG ORAL TABLET	GENERIC, OTC	
FIBER (DEXTRIN) 3 G/3.5 G ORAL POWDER	GENERIC, OTC	
DOCUSATE CALCIUM 240 MG ORAL CAPSULE	GENERIC, OTC	
STOOL SOFTENER (DOCUSATE CALCIUM) 240 MG ORAL CAPSULE	GENERIC, OTC	
COL-RITE (DOCUSATE SODIUM) 100 MG ORAL CAPSULE	GENERIC, OTC	
COL-RITE (DOCUSATE SODIUM) 250 MG ORAL CAPSULE	GENERIC, OTC	
DIOCTO (DOCUSATE SODIUM) 60 MG/15ML ORAL SYRUP	GENERIC, OTC	
DOCUPRENE (DOCUSATE SODIUM) 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	
DOK (DOCUSATE SODIUM) 100 MG ORAL TABLET	GENERIC, OTC	
DSS (DOCUSATE SODIUM) 250 MG ORAL CAPSULE	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
DULCOLAX STOOL SOFTENER (DOCUSATE SODIUM) 100 MG ORAL CAPSULE	GENERIC, OTC	
LAXA BASIC 100 (DOCUSATE SODIUM) 100 MG ORAL CAPSULE	GENERIC, OTC	
MOVE IT ALONG (DOCUSATE SODIUM) 100 MG ORAL TABLET	GENERIC, OTC	
ONELAX DOCUSATE SODIUM (DOCUSATE SODIUM) 50 MG/5 ML ORAL LIQUID	GENERIC, OTC	
PHILLIPS' LAXATIVE (DOCUSATE SODIUM) 100 MG ORAL CAPSULE	GENERIC, OTC	
PROMOLAXIN (DOCUSATE SODIUM) 100 MG ORAL TABLET	GENERIC, OTC	
SILACE (DOCUSATE SODIUM) 60 MG/15ML ORAL SYRUP	GENERIC, OTC	
STOOL SOFTENER (DOCUSATE SODIUM) 50 MG ORAL CAPSULE	GENERIC, OTC	
STOOL SOFTENER (DOCUSATE SODIUM) 100 MG ORAL CAPSULE	GENERIC, OTC	
STOOL SOFTENER (DOCUSATE SODIUM) 250 MG ORAL CAPSULE	GENERIC, OTC	
STOOL SOFTENER (DOCUSATE SODIUM) 50 MG/5 ML ORAL LIQUID	GENERIC, OTC	
STOOL SOFTENER (DOCUSATE SODIUM) 60 MG/15ML ORAL SYRUP	GENERIC, OTC	
STOOL SOFTENER (DOCUSATE SODIUM) 100 MG ORAL TABLET	GENERIC, OTC	
CONSTULOSE (LACTULOSE) 10 G/15 ML ORAL SOLUTION	GENERIC	
LACTULOSE 10 G/15 ML ORAL SOLUTION	GENERIC	
LACTULOSE 20 G/30 ML ORAL SOLUTION	GENERIC	
CITRATE OF MAGNESIA (MAGNESIUM CITRATE) ORAL SOLUTION	GENERIC, OTC	
CITROMA (MAGNESIUM CITRATE) ORAL SOLUTION	GENERIC, OTC	
MAGNESIUM CITRATE ORAL SOLUTION	GENERIC, OTC	
ONELAX MAGNESIUM CITRATE (MAGNESIUM CITRATE) ORAL SOLUTION	GENERIC, OTC	
DULCOLAX (MAGNESIUM HYDROXIDE) 400 MG/5ML ORAL SUSP	GENERIC, OTC	
MILK OF MAGNESIA (MAGNESIUM HYDROXIDE) 400 MG/5ML ORAL SUSP	GENERIC, OTC	
FIBER THERAPY (METHYLCELLULOSE) 2 G/19 G ORAL POWDER	GENERIC, OTC	
GAVILYTE-C (PEG 3350/NA SULF,BICARB,CL/KCL) 240-22.72G ORAL SOLN RECON	GENERIC	
GAVILYTE-G (PEG 3350/NA SULF,BICARB,CL/KCL) 236-22.74G ORAL SOLN RECON	GENERIC	
PEG-3350 AND ELECTROLYTES (PEG 3350/NA SULF,BICARB,CL/KCL) 236-22.74G ORAL SOLN RECON	GENERIC	
CLEARLAX (POLYETHYLENE GLYCOL 3350) 17 G/DOSE ORAL POWDER	GENERIC, OTC	QL (510 g per 30 days)
GENTLELAX (POLYETHYLENE GLYCOL 3350) 17 G/DOSE ORAL POWDER	GENERIC, OTC	QL (510 g per 30 days)
LAXACLEAR (POLYETHYLENE GLYCOL 3350) 17 G/DOSE ORAL POWDER	GENERIC, OTC	QL (510 g per 30 days)
LAXATIVE PEG 3350 (POLYETHYLENE GLYCOL 3350) 17 G/DOSE ORAL POWDER	GENERIC, OTC	QL (510 g per 30 days)
NATURA-LAX (POLYETHYLENE GLYCOL 3350) 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)
POWDERLAX (POLYETHYLENE GLYCOL 3350) 17 G/DOSE ORAL POWDER	GENERIC, OTC	QL (510 g per 30 days)
PURELAX (POLYETHYLENE GLYCOL 3350) 17 G/DOSE ORAL POWDER	GENERIC, OTC	QL (510 g per 30 days)

DRUG NAME	TYPE	RESTRICTIONS
SMOOTHLAX (POLYETHYLENE GLYCOL 3350) 17 G/DOSE ORAL POWDER	GENERIC, OTC	QL (510 g per 30 days)
DAILY FIBER (PSYLLIUM HUSK) 0.52G ORAL CAPSULE	GENERIC, OTC	
FIBER (PSYLLIUM HUSK) 0.52G ORAL CAPSULE	GENERIC, OTC	
FIBER THERAPY (PSYLLIUM HUSK) 0.52G ORAL CAPSULE	GENERIC, OTC	
KONSYL (PSYLLIUM HUSK) 6 G/6 G ORAL POWDER	BRAND, OTC	
NATURAL FIBER (PSYLLIUM HUSK) 0.52G ORAL CAPSULE	GENERIC, OTC	
NATURAL FIBER SUPPLEMENT (PSYLLIUM HUSK) 6 G/6 G ORAL POWDER	GENERIC, OTC	
PSYLLIUM FIBER (PSYLLIUM HUSK) 0.52G ORAL CAPSULE	GENERIC, OTC	
WAL-MUCIL (PSYLLIUM HUSK) 0.52G ORAL CAPSULE	GENERIC, OTC	
GERI-MUCIL (PSYLLIUM HUSK/ASPARTAME) 3.4G/5.8G ORAL POWDER	GENERIC, OTC	
METAMUCIL (PSYLLIUM HUSK/ASPARTAME) 3.4G/5.8G ORAL POWDER	GENERIC, OTC	
METAMUCIL MULTIHEALTH FIBER (PSYLLIUM HUSK/ASPARTAME) 3.4G/5.8G ORAL POWDER	BRAND, OTC	
MULTIHEALTH FIBER (PSYLLIUM HUSK/ASPARTAME) 3.4G/5.8G ORAL POWDER	GENERIC, OTC	
NATURAL DAILY FIBER (PSYLLIUM HUSK/ASPARTAME) 3.4G/5.8G ORAL POWDER	GENERIC, OTC	
WAL-MUCIL (PSYLLIUM HUSK/ASPARTAME) 3.4G/5.8G ORAL POWDER	GENERIC, OTC	
WAL-MUCIL (PSYLLIUM HUSK/ASPARTAME) 3.4G/5.8G ORAL POWDER	NON DRUG, OTC	
DAILY FIBER (PSYLLIUM HUSK/SUCROSE) 3.4 G/12 G ORAL POWDER	GENERIC, OTC	
FIBER (PSYLLIUM HUSK/SUCROSE) 3.4 G/12 G ORAL POWDER	GENERIC, OTC	
FIBER THERAPY (PSYLLIUM HUSK/SUCROSE) 3.4 G/12 G ORAL POWDER	GENERIC, OTC	
FIBER THERAPY (PSYLLIUM HUSK/SUCROSE) 3.4 G/7 G ORAL POWDER	GENERIC, OTC	
GERI-MUCIL (PSYLLIUM HUSK/SUCROSE) 3.4 G/7 G ORAL POWDER	GENERIC, OTC	
GERI-MUCIL (PSYLLIUM HUSK/SUCROSE) 3.4 G/12 G ORAL POWDER	GENERIC, OTC	
KONSYL (PSYLLIUM HUSK/SUCROSE) 3.4 G ORAL POWD PACK	GENERIC, OTC	
KONSYL (PSYLLIUM HUSK/SUCROSE) 3.4 G/12 G ORAL POWDER	GENERIC, OTC	
MULTIHEALTH FIBER (PSYLLIUM HUSK/SUCROSE) 3.4 G/7 G ORAL POWDER	GENERIC, OTC	
NATURAL DAILY FIBER (PSYLLIUM HUSK/SUCROSE) 3.4 G/7 G ORAL POWDER	GENERIC, OTC	
ONELAX FIBER THERAPY (PSYLLIUM HUSK/SUCROSE) 3.4 G/12 G ORAL POWDER	GENERIC, OTC	
WAL-MUCIL (PSYLLIUM HUSK/SUCROSE) 3.4 G/7 G ORAL POWDER	NON DRUG, OTC	
WAL-MUCIL NATURAL FIBER LAX (PSYLLIUM HUSK/SUCROSE) 3.4 G/12 G ORAL POWDER	GENERIC, OTC	
FIBER THERAPY (PSYLLIUM SEED) 3.4G/5.8G ORAL POWDER	GENERIC, OTC	
HYDROCIL INSTANT (PSYLLIUM SEED) ORAL POWDER	GENERIC, OTC	
NATURAL FIBER (PSYLLIUM SEED/ASPARTAME) ORAL POWDER	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
PSYLLIUM FIBER POWDER (PSYLLIUM SEED/DEXTROSE) 3 G/7 G ORAL POWDER	GENERIC, OTC	
FIBER THERAPY (PSYLLIUM SEED/SUCROSE) ORAL POWDER	GENERIC, OTC	
NATURAL FIBER POWDER (PSYLLIUM SEED/SUCROSE) ORAL POWDER	GENERIC, OTC	
EVAC-U-GEN (SENNOSIDES) 8.6 MG ORAL TABLET	GENERIC, OTC	
GERI-KOT (SENNOSIDES) 8.6 MG ORAL TABLET	GENERIC, OTC	
NATURAL LAXATIVE (SENNOSIDES) 8.6 MG ORAL TABLET	GENERIC, OTC	
ONELAX SENNA (SENNOSIDES) 8.8MG/5ML ORAL SYRUP	GENERIC, OTC	
SENNA (SENNOSIDES) 8.8MG/5ML ORAL SYRUP	GENERIC, OTC	
SENNA (SENNOSIDES) 8.6 MG ORAL TABLET	GENERIC, OTC	
SENNA LAX (SENNOSIDES) 8.6 MG ORAL TABLET	GENERIC, OTC	
SENNA LAXATIVE (SENNOSIDES) 8.6 MG ORAL TABLET	GENERIC, OTC	
SEN-O-TAB (SENNOSIDES) 8.6 MG ORAL TABLET	GENERIC, OTC	
VEGETABLE LAXATIVE (SENNOSIDES) 8.6 MG ORAL TABLET	GENERIC, OTC	
2-IN-1 LAXATIVE (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
DOCUZEN (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
LAX STOOL SOFTENER WITH SENNA (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
LAXACIN (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
P-COL RITE (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
SENEXON-S (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
SENNA PLUS (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
SENNA-S (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
SENNA-TIME S (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
SENNOSIDES-DOCUSATE SODIUM (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
SEKOT-S (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
STIMULANT LAXATIVE PLUS (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
STOOL SOFTENER-LAXATIVE (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
STOOL SOFTENER-STIMULANT LAX (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
VEGETABLE LAX-STOOL SOFTENER (SENNOSIDES/DOCUSATE SODIUM) 8.6MG-50MG ORAL TABLET	GENERIC, OTC	
PEG 3350-ELECTROLYTE (SOD CHLORIDE/NAHCO3/KCL/PEG'S) 420G ORAL SOLN RECON	GENERIC	
SOD SULF-POTASS SULF-MAG SULF (SODIUM,POTASSIUM,&MAG SULFATES) 17.5-3.13G ORAL SOLN RECON	GENERIC	
BEST FIBER (WHEAT DEXTRIN) 3 G/3.5 G ORAL POWDER	GENERIC, OTC	

LAXATIVES, LOCAL/RECTAL

DRUG NAME	TYPE	RESTRICTIONS
BISACODYL 10 MG RECTAL SUPP.RECT	GENERIC, OTC	
FAST RELIEF LAXATIVE (BISACODYL) 10 MG RECTAL SUPP.RECT	GENERIC, OTC	
GENTLE LAXATIVE (BISACODYL) 10 MG RECTAL SUPP.RECT	GENERIC, OTC	
LAXATIVE SUPPOSITORY (BISACODYL) 10 MG RECTAL SUPP.RECT	GENERIC, OTC	
MAGIC BULLET (BISACODYL) 10 MG RECTAL SUPP.RECT	GENERIC, OTC	
ONELAX (BISACODYL) 10 MG RECTAL SUPP.RECT	GENERIC, OTC	
ADULT GLYCERIN (GLYCERIN) ADULT RECTAL SUPP.RECT	GENERIC, OTC	
GLYCERIN PEDIATRIC RECTAL SUPP.RECT	GENERIC, OTC	
GLYCERIN ADULT RECTAL SUPP.RECT	GENERIC, OTC	
ENEMA (NA PHOS,M-B/NA PHOS,DI-BA) 19G-7G/118 RECTAL ENEMA	GENERIC, OTC	
ENEMA DISPOSABLE (NA PHOS,M-B/NA PHOS,DI-BA) 19G-7G/118 RECTAL ENEMA	GENERIC, OTC	
PEDIA-LAX ENEMA (NA PHOS,M-B/NA PHOS,DI-BA) 9.5-3.5/59 RECTAL ENEMA	GENERIC, OTC	
PEDIATRIC ENEMA (NA PHOS,M-B/NA PHOS,DI-BA) 9.5-3.5/59 RECTAL ENEMA	GENERIC, OTC	
PURE AND GENTLE SALINE ENEMA (NA PHOS,M-B/NA PHOS,DI-BA) 19G-7G/118 RECTAL ENEMA	GENERIC, OTC	
SALINE ENEMA (NA PHOS,M-B/NA PHOS,DI-BA) 19G-7G/118 RECTAL ENEMA	GENERIC, OTC	

MEDICAL SUPPLIES

DURABLE MEDICAL EQUIPMENT,MISC

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

DURABLE MEDICAL EQUIPMENT,MISC(GROUP 1)

ACCU-CHEK SOFTCLIX (LANCETS) MISCELL. EACH	NON DRUG, OTC	QL (200 lancets per 30 days)
LANCETS 28 GAUGE MISCELL. EACH	NON DRUG, OTC	QL (200 lancets per 30 days)
LANCETS 30 GAUGE MISCELL. EACH	NON DRUG, OTC	QL (200 lancets per 30 days)
LANCETS 33 GAUGE MISCELL. EACH	NON DRUG, OTC	QL (200 lancets per 30 days)

SYRINGES AND ACCESSORIES

INSULIN SYRINGE (SYRING W-NDL,DISP,INSUL,0.3ML) 29 G X1/2"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRING W-NDL,DISP,INSUL,0.3ML) 30 GX5/16"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRING W-NDL,DISP,INSUL,0.3ML) 31 GX5/16"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRING W-NDL,DISP,INSUL,0.5ML) 27GX1/2"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRING W-NDL,DISP,INSUL,0.5ML) 28GX1/2"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRING W-NDL,DISP,INSUL,0.5ML) 29 G X1/2"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)

DRUG NAME	TYPE	RESTRICTIONS
INSULIN SYRINGE (SYRING W-NDL,DISP,INSUL,0.5ML) 30 GX5/16"" MISCELL. DISP SYRIN	NON DRUG	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRING W-NDL,DISP,INSUL,0.5ML) 30GX1/2"" MISCELL. DISP SYRIN	NON DRUG	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRING W-NDL,DISP,INSUL,0.5ML) 30 GX5/16"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRING W-NDL,DISP,INSUL,0.5ML) 31 GX5/16"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRINGE W-NDL, DISP,INSUL,1ML) 27GX1/2"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRINGE W-NDL, DISP,INSUL,1ML) 28GX1/2"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRINGE W-NDL, DISP,INSUL,1ML) 29 G X1/2"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRINGE W-NDL, DISP,INSUL,1ML) 30GX1/2"" MISCELL. DISP SYRIN	NON DRUG	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRINGE W-NDL, DISP,INSUL,1ML) 30 GX5/16"" MISCELL. DISP SYRIN	NON DRUG	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRINGE W-NDL, DISP,INSUL,1ML) 30 GX5/16"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRINGE W-NDL, DISP,INSUL,1ML) 30GX1/2"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)
INSULIN SYRINGE (SYRINGE W-NDL, DISP,INSUL,1ML) 31 GX5/16"" MISCELL. DISP SYRIN	NON DRUG, OTC	QL (500 syringes per 30 days)

MISCELLANEOUS AGENTS

ANAPHYLAXIS THERAPY AGENTS

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

PARASYMPATHETIC AGENTS

BETHANECHOL CHLORIDE 5 MG ORAL TABLET	GENERIC	
BETHANECHOL CHLORIDE 10 MG ORAL TABLET	GENERIC	
BETHANECHOL CHLORIDE 25 MG ORAL TABLET	GENERIC	
BETHANECHOL CHLORIDE 50 MG ORAL TABLET	GENERIC	

NEOPLASTIC DISEASE

ALKYLATING AGENTS

HYDROXYUREA 500 MG ORAL CAPSULE	GENERIC	
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ANTIMETABOLITES

MERCAPTOPYRINE 50 MG ORAL TABLET	GENERIC	
METHOTREXATE (METHOTREXATE SODIUM) 25 MG/ML INJECTION VIAL	GENERIC	PA (Rx018)
METHOTREXATE (METHOTREXATE SODIUM) 2.5 MG ORAL TABLET	GENERIC	
METHOTREXATE SODIUM (METHOTREXATE SODIUM/PF) 25 MG/ML INJECTION VIAL	GENERIC	PA (Rx018)

ANTINEOPLASTIC AROMATASE INHIBITORS

ANASTROZOLE 1 MG ORAL TABLET	GENERIC	
EXEMESTANE 25 MG ORAL TABLET	GENERIC	
LETROZOLE 2.5 MG ORAL TABLET	GENERIC	

ANTINEOPLASTIC IMMUNOMODULATOR AGENTS

DRUG NAME	TYPE	RESTRICTIONS
LENALIDOMIDE 2.5 MG ORAL CAPSULE	GENERIC	PA (Rx018); SPEC
LENALIDOMIDE 5 MG ORAL CAPSULE	GENERIC	PA (Rx018); SPEC
LENALIDOMIDE 10 MG ORAL CAPSULE	GENERIC	PA (Rx018); SPEC
LENALIDOMIDE 15 MG ORAL CAPSULE	GENERIC	PA (Rx018); SPEC
LENALIDOMIDE 20 MG ORAL CAPSULE	GENERIC	PA (Rx018); SPEC
LENALIDOMIDE 25 MG ORAL CAPSULE	GENERIC	PA (Rx018); SPEC

ANTINEOPLASTIC SYSTEMIC ENZYME INHIBITORS

GEFITINIB 250 MG ORAL TABLET	GENERIC	PA (Rx028); SPEC
SORAFENIB (SORAFENIB TOSYLATE) 200 MG ORAL TABLET	GENERIC	PA (Rx018); SPEC
CAPRELSA (VANDETANIB) 100 MG ORAL TABLET	BRAND	PA (Rx018); SPEC
CAPRELSA (VANDETANIB) 300 MG ORAL TABLET	BRAND	PA (Rx018); SPEC

ANTINEOPLASTICS, MISCELLANEOUS

ETOPOSIDE 50 MG ORAL CAPSULE	GENERIC	
LYSODREN (MITOTANE) 500 MG ORAL TABLET	BRAND	PA (Rx018); SPEC
MATULANE (PROCARBAZINE HCL) 50 MG ORAL CAPSULE	BRAND	PA (Rx018); SPEC

CHEMOTHERAPY RESCUE/ANTIDOTE AGENTS

LEUCOVORIN CALCIUM 5 MG ORAL TABLET	GENERIC	
LEUCOVORIN CALCIUM 10 MG ORAL TABLET	GENERIC	
LEUCOVORIN CALCIUM 15 MG ORAL TABLET	GENERIC	
LEUCOVORIN CALCIUM 25 MG ORAL TABLET	GENERIC	

SELECTIVE ESTROGEN RECEPTOR MODULATORS (SERM)

TAMOXIFEN CITRATE 10 MG ORAL TABLET	GENERIC	
TAMOXIFEN CITRATE 20 MG ORAL TABLET	GENERIC	

STEROID ANTINEOPLASTICS

MEGESTROL ACETATE 20 MG ORAL TABLET	GENERIC	
MEGESTROL ACETATE 40 MG ORAL TABLET	GENERIC	

ORAL/PHARYNGEAL DISORDERS

DENTAL AIDS AND PREPARATIONS

CHLORHEXIDINE GLUCONATE 0.12% MUCOUS MEM MOUTHWASH	GENERIC	
PAROEX (CHLORHEXIDINE GLUCONATE) 0.12% MUCOUS MEM MOUTHWASH	GENERIC	
PERIOGARD (CHLORHEXIDINE GLUCONATE) 0.12% MUCOUS MEM MOUTHWASH	GENERIC	

NOSE PREPARATIONS, MISCELLANEOUS (RX)

IPRATROPIUM BROMIDE 21 MCG NASAL SPRAY	GENERIC	
IPRATROPIUM BROMIDE 42 MCG NASAL SPRAY	GENERIC	

OTHER DRUGS

ANTIDIARRHEAL MICROORGANISMS AGENTS

ACIDOPHILUS (LA/LACTOBAC SALIV/BB/S.THERMOP) 175 MG ORAL CAPSULE	BRAND, OTC	
ACIDOPHILUS (LACTOBACILLUS ACIDOPHILUS) ORAL CAPSULE	GENERIC, OTC	
ACIDOPHILUS (LACTOBACILLUS ACIDOPHILUS) ORAL TAB CHEW	GENERIC, OTC	
ACIDOPHILUS PROBIOTIC (LACTOBACILLUS ACIDOPHILUS) 500MM CELL ORAL CAPSULE	GENERIC, OTC	
ACIDOPHILUS PROBIOTIC (LACTOBACILLUS ACIDOPHILUS) 0.5 MG ORAL TABLET	GENERIC, OTC	

APPETITE STIM. FOR ANOREXIA, CACHEXIA, WASTING SYND.

DRUG NAME	TYPE	RESTRICTIONS
MEGESTROL ACETATE 400MG/10ML ORAL SUSP	GENERIC	

DIAGNOSTIC TEST DEVICES AND SUPPLIES

BD VERITOR SYSTEM SARS-COV-2 (COVID-19 ANTIGEN (FIA) TEST) MISCELL. KIT	NON DRUG	QL (8 kits per 30 days)
BINAXNOW COVID AG CARD HOME TST (COVID-19 ANTIGEN (FIA) TEST) MISCELL. KIT	NON DRUG, OTC	QL (8 kits per 30 days)
BINAXNOW COVID-19 AG CARD (COVID-19 ANTIGEN (FIA) TEST) MISCELL. KIT	NON DRUG	QL (8 kits per 30 days)
BINAXNOW COVID-19 AG SELF TEST (COVID-19 ANTIGEN (FIA) TEST) MISCELL. KIT	NON DRUG, OTC	QL (8 kits per 30 days)
ELLUME COVID-19 HOME TEST (COVID-19 ANTIGEN (FIA) TEST) MISCELL. KIT	NON DRUG, OTC	QL (8 kits per 30 days)
INTELISWAB COVID-19 HOME TEST (COVID-19 ANTIGEN (FIA) TEST) MISCELL. KIT	NON DRUG, OTC	QL (8 kits per 30 days)
QUICKVUE AT-HOME COVID-19 TEST (COVID-19 ANTIGEN (FIA) TEST) MISCELL. KIT	NON DRUG, OTC	QL (8 kits per 30 days)
QUICKVUE SARS ANTIGEN (COVID-19 ANTIGEN (FIA) TEST) MISCELL. KIT	NON DRUG	QL (8 kits per 30 days)
SOFIA SARS ANTIGEN FIA (COVID-19 ANTIGEN (FIA) TEST) MISCELL. KIT	NON DRUG	QL (8 kits per 30 days)
COVID19 TEST ADM BY PHARMACIST (COVID19 TEST ADM.BY PHARMACIST) MISCELL. MISCELL	NON DRUG, OTC	QL (8 kits per 30 days)
COVID19 SPECIMEN COLLECT NCPDP (COVID-19 TEST SPECIMEN COLLECT) MISCELL. MISCELL	NON DRUG, OTC	QL (8 kits per 30 days)
ID NOW COVID-19 TEST KIT (EUA) (COVID-19 VIRAL TEST ASSAY) MISCELL. KIT	NON DRUG	QL (8 kits per 30 days)
SOFIA2 FLU-SARS ANTIGEN FIA (COVID-19,FLU A,B ANTIGEN TEST) MISCELL. KIT	NON DRUG	QL (8 kits per 30 days)
VERITOR SARS-COV-2 AND FLU A-B (COVID-19,FLU A,B ANTIGEN TEST) MISCELL. KIT	NON DRUG	QL (8 kits per 30 days)

GENERAL INHALATION AGENTS

NEBUSAL (SODIUM CL FOR INHALATION) 3% INHALATION VIAL-NEB	GENERIC	
SODIUM CHLORIDE (SODIUM CL FOR INHALATION) 0.90% INHALATION VIAL-NEB	GENERIC	
SODIUM CHLORIDE (SODIUM CL FOR INHALATION) 3% INHALATION VIAL-NEB	GENERIC	
SODIUM CHLORIDE (SODIUM CL FOR INHALATION) 7% INHALATION VIAL-NEB	GENERIC	

INSECTICIDES

HOME LICE-BEDBUG-DUST MITE (PERMETHRIN) 0.50% MISCELL. SPRAY	GENERIC, OTC	
LICE BEDDING (PERMETHRIN) 0.50% MISCELL. SPRAY	GENERIC, OTC	
LICE-BEDBUG-MITE BEDDING (PERMETHRIN) 0.50% MISCELL. SPRAY	GENERIC, OTC	
RID (PERMETHRIN) 0.50% MISCELL. SPRAY	GENERIC, OTC	
STOP LICE (PERMETHRIN) 0.50% MISCELL. SPRAY	GENERIC, OTC	

METABOLIC DEFICIENCY AGENTS

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

DRUG NAME	TYPE	RESTRICTIONS
LEVOCARNITINE SF (LEVOCARNITINE) 100 MG/ML ORAL SOLUTION	GENERIC	
LEVOCARNITINE (LEVOCARNITINE (WITH SUCROSE)) 100 MG/ML ORAL SOLUTION	GENERIC	

NEEDLES/NEEDLELESS DEVICES

PEN NEEDLE (INSULIN PEN NEEDLE) 29 G X1/2"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (INSULIN PEN NEEDLE) 30 GX3/16"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (INSULIN PEN NEEDLE) 30 GX5/16"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (INSULIN PEN NEEDLE) 31 GX5/16"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (INSULIN PEN NEEDLE) 31 GX3/16"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (INSULIN PEN NEEDLE) 31 G X1/4"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (INSULIN PEN NEEDLE) 32GX 5/32"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (INSULIN PEN NEEDLE) 33 GX5/32"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (NEEDLES, INSULIN DISPOSABLE) 31 GX5/16"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (NEEDLES, INSULIN DISPOSABLE) 31 G X1/4"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (NEEDLES, INSULIN DISPOSABLE) 31 GX3/16"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)
PEN NEEDLE (NEEDLES, INSULIN DISPOSABLE) 32GX 5/32"" MISCELL. DIS NEEDLE	NON DRUG, OTC	QL (200 needles per 30 days)

OTHER RESPIRATORY DISORDERS

MUCOLYTICS

ACETYLCYSTEINE 100 MG/ML MISCELL. VIAL	GENERIC	
ACETYLCYSTEINE 200 MG/ML MISCELL. VIAL	GENERIC	

PAIN MANAGEMENT - ANALGESICS

ANALGESIC, NON-SALICYLATE & BARBITURATE COMB.

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

ANALGESIC, SALICYLATE, BARBITURATE, & XANTHINE CMB

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

ANALGESIC, NON-SALICYLATE, BARBITURATE, & XANTHINE CMB

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

DRUG NAME	TYPE	RESTRICTIONS
ASPIRIN EC (ASPIRIN) 325 MG ORAL TABLET DR	GENERIC, OTC	
ASPIRIN EC (ASPIRIN) 650 MG ORAL TABLET DR	GENERIC, OTC	
ASPIR-TRIN (ASPIRIN) 325 MG ORAL TABLET DR	GENERIC, OTC	
BAYER ADVANCED (ASPIRIN) 500 MG ORAL TABLET	GENERIC, OTC	
ECOTRIN (ASPIRIN) 325 MG ORAL TABLET DR	GENERIC, OTC	
BUFFERED ASPIRIN (ASPIRIN/CALCIUM CARBONATE/MAG) 325 MG ORAL TABLET	GENERIC, OTC	
BUFFERIN (ASPIRIN/CALCIUM CARBONATE/MAG) 325 MG ORAL TABLET	GENERIC, OTC	
TRI-BUFFERED ASPIRIN (ASPIRIN/CALCIUM CARBONATE/MAG) 325 MG ORAL TABLET	GENERIC, OTC	
SALSALATE 500 MG ORAL TABLET	GENERIC	
SALSALATE 750 MG ORAL TABLET	GENERIC	

ANALGESIC/ANTIPYRETICS, NON-SALICYLATE

8 HOUR ACETAMINOPHEN (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
8 HOUR PAIN RELIEF (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
8HR ARTHRITIS PAIN (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
8HR ARTHRITIS PAIN RELIEF (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
8HR MUSCLE ACHES-PAIN (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
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 ER (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
ACETAMINOPHEN EXTRA STRENGTH (ACETAMINOPHEN) 500 MG ORAL TABLET	GENERIC, OTC	
APHEN (ACETAMINOPHEN) 325 MG ORAL TABLET	GENERIC, OTC	
ARTHRITIS PAIN (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
ARTHRITIS PAIN RELIEF (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
ARTHRITIS PAIN RELIEVER (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
ATHENOL (ACETAMINOPHEN) 325 MG ORAL TABLET	GENERIC, OTC	
BETATEMP (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
CHILD FEVER REDUCER (ACETAMINOPHEN) 120 MG RECTAL SUPP.RECT	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
CHILD FEVER REDUCER-PAIN RELVR (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
CHILD PAIN REL-FEVER REDUCER (ACETAMINOPHEN) 120 MG RECTAL SUPP.RECT	GENERIC, OTC	
CHILDREN'S ACETAMINOPHEN (ACETAMINOPHEN) 160 MG/5ML ORAL LIQUID	GENERIC, OTC	AR (age 12 and younger)
CHILDREN'S ACETAMINOPHEN (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
CHILDREN'S ACETAMINOPHEN (ACETAMINOPHEN) 80 MG ORAL TAB CHEW	GENERIC, OTC	
CHILDREN'S ACETAMINOPHEN (ACETAMINOPHEN) 160 MG ORAL TAB CHEW	GENERIC, OTC	
CHILDREN'S EASY-MELTS (ACETAMINOPHEN) 80 MG ORAL TAB RAPDIS	GENERIC, OTC	
CHILDREN'S FEVER REDUCER (ACETAMINOPHEN) 120 MG RECTAL SUPP.RECT	GENERIC, OTC	
CHILDREN'S MAPAP (ACETAMINOPHEN) 80 MG ORAL TAB CHEW	GENERIC, OTC	
CHILDREN'S MAPAP (ACETAMINOPHEN) 160 MG ORAL TAB CHEW	GENERIC, OTC	
CHILDREN'S NON-ASPIRIN (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
CHILDREN'S PAIN RELIEF (ACETAMINOPHEN) 160 MG/5ML ORAL ELIXIR	GENERIC, OTC	AR (age 12 and younger)
CHILDREN'S PAIN RELIEF (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
CHILDREN'S PAIN RELIEF (ACETAMINOPHEN) 160 MG ORAL TAB CHEW	GENERIC, OTC	
CHILDREN'S PAIN RELIEVER (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
CHILDREN'S PAIN-FEVER (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
CHILDREN'S PAIN-FEVER (ACETAMINOPHEN) 160 MG ORAL TAB CHEW	GENERIC, OTC	
CHILDREN'S TYLENOL (ACETAMINOPHEN) 160 MG ORAL TAB CHEW	GENERIC, OTC	
ED-APAP (ACETAMINOPHEN) 160 MG/5ML ORAL LIQUID	GENERIC, OTC	AR (age 12 and younger)
FEVER REDUCER-PAIN RELIEVER (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
FEVERALL (ACETAMINOPHEN) 120 MG RECTAL SUPP.RECT	GENERIC, OTC	
FEVERALL (ACETAMINOPHEN) 325 MG RECTAL SUPP.RECT	GENERIC, OTC	
FEVERALL (ACETAMINOPHEN) 650 MG RECTAL SUPP.RECT	GENERIC, OTC	
INFANT FEVER-PAIN RELIEVER (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
INFANT PAIN-FEVER (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
INFANTS' ACETAMINOPHEN (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
INFANTS' FEVER-PAIN RELIEVER (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
INFANTS' PAIN-FEVER (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
KINDERMED INFANTS PAIN-FEVER (ACETAMINOPHEN) 160	GENERIC, OTC	AR (age 12 and younger)

DRUG NAME	TYPE	RESTRICTIONS
MG/5ML ORAL SUSP		
KINDERMED KIDS PAIN-FEVER (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
LITTLE REMEDIES FEVER-PAIN (ACETAMINOPHEN) 160 MG/5ML ORAL LIQUID	GENERIC, OTC	AR (age 12 and younger)
LITTLE REMEDIES FEVER-PAIN (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
MAPAP (ACETAMINOPHEN) 500 MG ORAL CAPSULE	GENERIC, OTC	
MAPAP ARTHRITIS PAIN (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
MASOPHEN (ACETAMINOPHEN) 325 MG ORAL TABLET	GENERIC, OTC	
MASOPHEN (ACETAMINOPHEN) 500 MG ORAL TABLET	GENERIC, OTC	
MAXRELIEF JUNIOR (ACETAMINOPHEN) 160 MG/5ML ORAL ELIXIR	GENERIC, OTC	AR (age 12 and younger)
M-PAP (ACETAMINOPHEN) 160 MG/5ML ORAL LIQUID	GENERIC, OTC	AR (age 12 and younger)
NON-ASPIRIN (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
NON-ASPIRIN (ACETAMINOPHEN) 80 MG ORAL TAB CHEW	GENERIC, OTC	
NON-ASPIRIN (ACETAMINOPHEN) 325 MG ORAL TABLET	GENERIC, OTC	
NON-ASPIRIN EXTRA STRENGTH (ACETAMINOPHEN) 500 MG ORAL TABLET	GENERIC, OTC	
NON-ASPIRIN PAIN RELIEF (ACETAMINOPHEN) 500 MG ORAL TABLET	GENERIC, OTC	
NORTEMP (ACETAMINOPHEN) 160 MG/5ML ORAL SUSP	GENERIC, OTC	AR (age 12 and younger)
PAIN RELIEF (ACETAMINOPHEN) 160 MG/5ML ORAL LIQUID	GENERIC, OTC	AR (age 12 and younger)
PAIN RELIEF (ACETAMINOPHEN) 325 MG ORAL TABLET	GENERIC, OTC	
PAIN RELIEF (ACETAMINOPHEN) 500 MG ORAL TABLET	GENERIC, OTC	
PAIN RELIEF (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
PAIN RELIEF EXTRA STRENGTH (ACETAMINOPHEN) 500 MG ORAL TABLET	GENERIC, OTC	
PAIN RELIEVER (ACETAMINOPHEN) 325 MG ORAL TABLET	GENERIC, OTC	
PAIN RELIEVER (ACETAMINOPHEN) 500 MG ORAL TABLET	GENERIC, OTC	
PAIN RELIEVER (ACETAMINOPHEN) 650 MG ORAL TABLET ER	GENERIC, OTC	
PHARBETOL (ACETAMINOPHEN) 325 MG ORAL TABLET	GENERIC, OTC	
PHARBETOL (ACETAMINOPHEN) 500 MG ORAL TABLET	GENERIC, OTC	
SHAKE THAT ACHE (ACETAMINOPHEN) 500 MG ORAL TABLET	GENERIC, OTC	
TYLOPHEN (ACETAMINOPHEN) 500 MG ORAL CAPSULE	GENERIC, OTC	

ANALGESICS, NARCOTIC AGONIST AND NSAID COMBINATION

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

CODEINE SULFATE (CODEINE SULF) 15 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
CODEINE SULFATE (CODEINE SULF) 30 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
CODEINE SULFATE (CODEINE SULF) 60 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)

DRUG NAME	TYPE	RESTRICTIONS
FENTANYL 12 MCG/HR TRANSDERM. PATCH TD72	GENERIC	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	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	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	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	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 1 patch per 3 days)
HYDROMORPHONE HCL 1 MG/ML ORAL LIQUID	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
HYDROMORPHONE HCL 2 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
HYDROMORPHONE HCL 4 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
HYDROMORPHONE HCL 8 MG ORAL TABLET	GENERIC	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	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	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	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	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days)
METHADONE HCL 5 MG ORAL TABLET	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days)
METHADONE HCL 10 MG ORAL TABLET	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days)
MORPHINE SULFATE 10 MG/5 ML ORAL SOLUTION	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day,

DRUG NAME	TYPE	RESTRICTIONS
		7 days per 60 days, 30 days per 180 days)
MORPHINE SULFATE 20 MG/5 ML ORAL SOLUTION	GENERIC	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	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	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
MORPHINE SULFATE 15 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
MORPHINE SULFATE 30 MG ORAL TABLET	BRAND	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
MORPHINE SULFATE 30 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
MORPHINE SULFATE ER (MORPHINE SULFATE) 30 MG ORAL CPMP 24HR	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day)
MORPHINE SULFATE ER (MORPHINE SULFATE) 45 MG ORAL CPMP 24HR	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day)
MORPHINE SULFATE ER (MORPHINE SULFATE) 60 MG ORAL CPMP 24HR	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day)
MORPHINE SULFATE ER (MORPHINE SULFATE) 75 MG ORAL CPMP 24HR	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day)
MORPHINE SULFATE ER (MORPHINE SULFATE) 90 MG ORAL CPMP 24HR	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day)
MORPHINE SULFATE ER (MORPHINE SULFATE) 120 MG ORAL CPMP 24HR	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 capsules per day)
MORPHINE SULFATE ER (MORPHINE SULFATE) 15 MG ORAL TABLET ER	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 3 tablets per day)
MORPHINE SULFATE ER (MORPHINE SULFATE) 30 MG ORAL TABLET ER	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 3 tablets per day)

DRUG NAME	TYPE	RESTRICTIONS
MORPHINE SULFATE ER (MORPHINE SULFATE) 60 MG ORAL TABLET ER	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 3 tablets per day)
MORPHINE SULFATE ER (MORPHINE SULFATE) 100 MG ORAL TABLET ER	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 3 tablets per day)
MORPHINE SULFATE ER (MORPHINE SULFATE) 200 MG ORAL TABLET ER	GENERIC	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	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	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	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	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
OXYCODONE HCL 10 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
OXYCODONE HCL 15 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
OXYCODONE HCL 30 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
OXYCODONE HCL ER (OXYCODONE HCL) 10 MG ORAL TAB ER 12H	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day)
OXYCONTIN (OXYCODONE HCL) 10 MG ORAL TAB ER 12H	BRAND	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day)
OXYCONTIN (OXYCODONE HCL) 15 MG ORAL TAB ER 12H	BRAND	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day)
OXYCONTIN (OXYCODONE HCL) 30 MG ORAL TAB ER 12H	BRAND	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day)
OXYCONTIN (OXYCODONE HCL) 60 MG ORAL TAB ER 12H	BRAND	PA (Rx005); QL (90 mg morphine equivalents per day, 30 days per 180 days, 2 tablets per day)

DRUG NAME	TYPE	RESTRICTIONS
		per day)
OXYMORPHONE HCL 5 MG ORAL TABLET	GENERIC	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	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	QL (90 mg morphine equivalents per day, 8 tablets per day, 7 days per 60 days, 30 days per 180 days)

ANTIMIGRAINE PREPARATIONS

VYEPTI (EPTINEZUMAB-JJMR) 100 MG/ML INTRAVEN. VIAL	BRAND	PA (Rx051); SPEC
AIMOVIG AUTOINJECTOR (erenumab-aooe) 70 MG/ML SUBCUTANE. AUTO INJCT	BRAND	PA (Rx051)
AIMOVIG AUTOINJECTOR (erenumab-aooe) 140 MG/ML SUBCUTANE. AUTO INJCT	BRAND	PA (Rx051)
AJOVY AUTOINJECTOR (FREMANEZUMAB-VFRM) 225 MG/1.5 SUBCUTANE. AUTO INJCT	BRAND	PA (Rx051)
AJOVY SYRINGE (FREMANEZUMAB-VFRM) 225 MG/1.5 SUBCUTANE. SYRINGE	BRAND	PA (Rx051)
EMGALITY PEN (GALCANEZUMAB-GNLM) 120 MG/ML SUBCUTANE. PEN INJCTR	BRAND	PA (Rx051)
EMGALITY SYRINGE (GALCANEZUMAB-GNLM) 120 MG/ML SUBCUTANE. SYRINGE	BRAND	PA (Rx051)
REYVOW (LASMIDITAN SUCCINATE) 50 MG ORAL TABLET	BRAND	PA (Rx023); QL (4 tablets per 30 days)
REYVOW (LASMIDITAN SUCCINATE) 100 MG ORAL TABLET	BRAND	PA (Rx023); QL (4 tablets per 30 days)
NARATRIPTAN HCL 1 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)
NARATRIPTAN HCL 2.5 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)
NURTEC ODT (RIMEGEPANT SULFATE) 75 MG ORAL TAB RAPDIS	BRAND	PA (Rx051)
RIZATRIPTAN (RIZATRIPTAN BENZOATE) 5 MG ORAL TAB RAPDIS	GENERIC	QL (9 tablets per 30 days)
RIZATRIPTAN (RIZATRIPTAN BENZOATE) 10 MG ORAL TAB RAPDIS	GENERIC	QL (9 tablets per 30 days)
RIZATRIPTAN (RIZATRIPTAN BENZOATE) 5 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)
RIZATRIPTAN (RIZATRIPTAN BENZOATE) 10 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)
SUMATRIPTAN 5 MG NASAL SPRAY	GENERIC	PA (Rx023); QL (1 package [6 mL] per 30 days)
SUMATRIPTAN 20 MG NASAL SPRAY	GENERIC	PA (Rx023); QL (1 package [6 mL] per 30 days)
SUMATRIPTAN SUCCINATE 25 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)
SUMATRIPTAN SUCCINATE 50 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)
SUMATRIPTAN SUCCINATE 100 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)
SUMATRIPTAN SUCCINATE 4 MG/0.5ML SUBCUTANE. CARTRIDGE	GENERIC	PA (Rx023); QL (1 package [1 mL] per 30 days)
SUMATRIPTAN SUCCINATE 6 MG/0.5ML SUBCUTANE. CARTRIDGE	GENERIC	PA (Rx023); QL (1 package [1 mL] per 30 days)
SUMATRIPTAN SUCCINATE 4 MG/0.5ML SUBCUTANE. PEN INJCTR	GENERIC	PA (Rx023); QL (1 package [1 mL] per 30 days)

DRUG NAME	TYPE	RESTRICTIONS
SUMATRIPTAN SUCCINATE 6 MG/0.5ML SUBCUTANE. PEN INJCTR	GENERIC	PA (Rx023); QL (1 package [1 mL] per 30 days)
SUMATRIPTAN SUCCINATE 6 MG/0.5ML SUBCUTANE. PEN INJCTR	GENERIC	PA (Rx023); QL (1 vial [2.5 mL] per 30 days)
SUMATRIPTAN SUCCINATE 6 MG/0.5ML SUBCUTANE. SYRINGE	GENERIC	PA (Rx023); QL (1 package [1 mL] per 30 days)
SUMATRIPTAN SUCCINATE 6 MG/0.5ML SUBCUTANE. VIAL	GENERIC	PA (Rx023); QL (1 vial [2.5 mL] per 30 days)
UBRELVY (UBROGEPANT) 50 MG ORAL TABLET	BRAND	PA (Rx051)
UBRELVY (UBROGEPANT) 100 MG ORAL TABLET	BRAND	PA (Rx051)
ZOLMITRIPTAN 2.5 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)
ZOLMITRIPTAN 5 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)
ZOLMITRIPTAN ODT (ZOLMITRIPTAN) 2.5 MG ORAL TAB RAPDIS	GENERIC	QL (9 tablets per 30 days)
ZOLMITRIPTAN ODT (ZOLMITRIPTAN) 5 MG ORAL TAB RAPDIS	GENERIC	QL (9 tablets per 30 days)
ZOMIG (ZOLMITRIPTAN) 2.5 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)
ZOMIG (ZOLMITRIPTAN) 5 MG ORAL TABLET	GENERIC	QL (9 tablets per 30 days)

CALCITONIN GENE-RELATED PEPTIDE (CGRP) INHIBITORS

EMGALITY SYRINGE (GALCANEZUMAB-GNLM) 300MG/3ML SUBCUTANE. SYRINGE	BRAND	PA (Rx051)
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NARC. & NON-SAL. ANALGESIC, BARBITURATE & XANTHINE CMB

BUTALB-ACETAMINOPH-CAFF-CODEIN (CODEINE/BUTALBIT/ACETAMIN/CAFF) 50-325-30 ORAL CAPSULE	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days)
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NARCOTIC & SALICYLATE ANALGESICS, BARB. & XANTHINE

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

NARCOTIC ANALGESIC & NON-SALICYLATE ANALGESIC COMB

ACETAMINOPHEN-CODEINE (ACETAMINOPHEN WITH CODEINE) 120-12MG/5 ORAL SOLUTION	GENERIC	QL (90 mg morphine equivalents per day, 300 mL per year, 7 days per 60 days, 30 days per 180 days)
ACETAMINOPHEN-CODEINE (ACETAMINOPHEN WITH CODEINE) 300MG-15MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
ACETAMINOPHEN-CODEINE (ACETAMINOPHEN WITH CODEINE) 300MG-30MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
ACETAMINOPHEN-CODEINE (ACETAMINOPHEN WITH CODEINE) 300MG-60MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
HYDROCODONE-ACETAMINOPHEN (HYDROCODONE BIT/ACETAMINOPHEN) 7.5-325/15 ORAL SOLUTION	GENERIC	QL (90 mg morphine equivalents per day, 480 mL per year, 7 days per 60 days, 30 days per 180 days)
HYDROCODONE-ACETAMINOPHEN (HYDROCODONE	GENERIC	QL (90 mg morphine

DRUG NAME	TYPE	RESTRICTIONS
BIT/ACETAMINOPHEN) 5 MG-325MG ORAL TABLET		equivalents per day, 7 days per 60 days, 30 days per 180 days)
HYDROCODONE-ACETAMINOPHEN (HYDROCODONE BIT/ACETAMINOPHEN) 7.5-325 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
HYDROCODONE-ACETAMINOPHEN (HYDROCODONE BIT/ACETAMINOPHEN) 10MG-325MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
HYDROCODONE-ACETAMINOPHEN (HYDROCODONE BIT/ACETAMINOPHEN) 10MG-300MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
ENDOCET (OXYCODONE HCL/ACETAMINOPHEN) 2.5-325 MG ORAL TABLET	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
ENDOCET (OXYCODONE HCL/ACETAMINOPHEN) 5 MG-325MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
ENDOCET (OXYCODONE HCL/ACETAMINOPHEN) 7.5-325 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
ENDOCET (OXYCODONE HCL/ACETAMINOPHEN) 10MG-325MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
OXYCODONE-ACETAMINOPHEN (OXYCODONE HCL/ACETAMINOPHEN) 5-325/5 ML ORAL SOLUTION	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
OXYCODONE-ACETAMINOPHEN (OXYCODONE HCL/ACETAMINOPHEN) 2.5-325 MG ORAL TABLET	GENERIC	PA (Rx005); QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
OXYCODONE-ACETAMINOPHEN (OXYCODONE HCL/ACETAMINOPHEN) 5 MG-325MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
OXYCODONE-ACETAMINOPHEN (OXYCODONE HCL/ACETAMINOPHEN) 7.5-325 MG ORAL TABLET	GENERIC	QL (90 mg morphine equivalents per day, 7 days per 60 days, 30 days per 180 days)
OXYCODONE-ACETAMINOPHEN (OXYCODONE HCL/ACETAMINOPHEN) 10MG-325MG ORAL TABLET	GENERIC	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	QL (16 tablets per day)
BUPRENORPHINE HCL 8 MG SUBLINGUAL TAB SUBL	GENERIC	QL (4 tablets per day)
BUPRENORPHINE-NALOXONE (BUPRENORPHINE HCL/NALOXONE HCL) 2 MG-0.5MG SUBLINGUAL FILM	GENERIC	QL (16 films per day)
BUPRENORPHINE-NALOXONE (BUPRENORPHINE HCL/NALOXONE HCL) 4MG-1MG SUBLINGUAL FILM	GENERIC	QL (8 films per day)
BUPRENORPHINE-NALOXONE (BUPRENORPHINE HCL/NALOXONE HCL) 8 MG-2 MG SUBLINGUAL FILM	GENERIC	QL (4 films per day)
BUPRENORPHINE-NALOXONE (BUPRENORPHINE HCL/NALOXONE HCL) 12 MG-3 MG SUBLINGUAL FILM	GENERIC	QL (2 films per day)
BUPRENORPHINE-NALOXONE (BUPRENORPHINE HCL/NALOXONE HCL) 2 MG-0.5MG SUBLINGUAL TAB SUBL	GENERIC	QL (16 tablets per day)

DRUG NAME	TYPE	RESTRICTIONS
BUPRENORPHINE-NALOXONE (BUPRENORPHINE HCL/NALOXONE HCL) 8 MG-2 MG SUBLINGUAL TAB SUBL	GENERIC	QL (4 tablets per day)

PARKINSONS DISEASE

ANTIPARKINSONISM DRUGS,ANTICHOLINERGIC

BENZTROPINE MESYLATE 0.5 MG ORAL TABLET	GENERIC	
BENZTROPINE MESYLATE 1 MG ORAL TABLET	GENERIC	
BENZTROPINE MESYLATE 2 MG ORAL TABLET	GENERIC	
TRIHEXYPHENIDYL HCL 2 MG/5 ML ORAL SOLUTION	GENERIC	
TRIHEXYPHENIDYL HCL 2 MG ORAL TABLET	GENERIC	
TRIHEXYPHENIDYL HCL 5 MG ORAL TABLET	GENERIC	

ANTIPARKINSONISM DRUGS,OTHER

AMANTADINE (AMANTADINE HCL) 100 MG ORAL CAPSULE	GENERIC	
AMANTADINE (AMANTADINE HCL) 50 MG/5 ML ORAL SOLUTION	GENERIC	
AMANTADINE (AMANTADINE HCL) 100 MG ORAL TABLET	GENERIC	
BROMOCRIPTINE MESYLATE 5 MG ORAL CAPSULE	GENERIC	
BROMOCRIPTINE MESYLATE 2.5 MG ORAL TABLET	GENERIC	
CARBIDOPA-LEVODOPA (CARBIDOPA/LEVODOPA) 10MG-100MG ORAL TABLET	GENERIC	
CARBIDOPA-LEVODOPA (CARBIDOPA/LEVODOPA) 25MG-100MG ORAL TABLET	GENERIC	
CARBIDOPA-LEVODOPA (CARBIDOPA/LEVODOPA) 25MG-250MG ORAL TABLET	GENERIC	
CARBIDOPA-LEVODOPA ER (CARBIDOPA/LEVODOPA) 25MG-100MG ORAL TABLET ER	GENERIC	
CARBIDOPA-LEVODOPA ER (CARBIDOPA/LEVODOPA) 50MG-200MG ORAL TABLET ER	GENERIC	
CARBIDOPA-LEVODOPA-ENTACAPONE (CARBIDOPA/LEVODOPA/ENTACAPONE) 12.5-50 MG ORAL TABLET	GENERIC	
CARBIDOPA-LEVODOPA-ENTACAPONE (CARBIDOPA/LEVODOPA/ENTACAPONE) 18.75-75MG ORAL TABLET	GENERIC	
CARBIDOPA-LEVODOPA-ENTACAPONE (CARBIDOPA/LEVODOPA/ENTACAPONE) 25-100-200 ORAL TABLET	GENERIC	
CARBIDOPA-LEVODOPA-ENTACAPONE (CARBIDOPA/LEVODOPA/ENTACAPONE) 31.25-125 ORAL TABLET	GENERIC	
CARBIDOPA-LEVODOPA-ENTACAPONE (CARBIDOPA/LEVODOPA/ENTACAPONE) 37.5-150MG ORAL TABLET	GENERIC	
CARBIDOPA-LEVODOPA-ENTACAPONE (CARBIDOPA/LEVODOPA/ENTACAPONE) 50-200-200 ORAL TABLET	GENERIC	
ENTACAPONE 200 MG ORAL TABLET	GENERIC	
PRAMIPEXOLE DIHYDROCHLORIDE (PRAMIPEXOLE DI-HCL) 0.125 MG ORAL TABLET	GENERIC	
PRAMIPEXOLE DIHYDROCHLORIDE (PRAMIPEXOLE DI-HCL) 0.25 MG ORAL TABLET	GENERIC	
PRAMIPEXOLE DIHYDROCHLORIDE (PRAMIPEXOLE DI-HCL) 0.5 MG ORAL TABLET	GENERIC	
PRAMIPEXOLE DIHYDROCHLORIDE (PRAMIPEXOLE DI-HCL) 0.75	GENERIC	

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

SEIZURE DISORDER

ANTICONVULSANT - BENZODIAZEPINE TYPE

CLONAZEPAM 0.5 MG ORAL TABLET	GENERIC	PA (Rx013)
CLONAZEPAM 1 MG ORAL TABLET	GENERIC	PA (Rx013)
CLONAZEPAM 2 MG ORAL TABLET	GENERIC	PA (Rx013)

ANTICONVULSANTS

CARBAMAZEPINE 100 MG/5ML ORAL SUSP	GENERIC	
CARBAMAZEPINE 100 MG ORAL TAB CHEW	GENERIC	
CARBAMAZEPINE 200 MG ORAL TABLET	GENERIC	
CARBAMAZEPINE ER (CARBAMAZEPINE) 100 MG ORAL CPMP 12HR	GENERIC	
CARBAMAZEPINE ER (CARBAMAZEPINE) 200 MG ORAL CPMP 12HR	GENERIC	
CARBAMAZEPINE ER (CARBAMAZEPINE) 300 MG ORAL CPMP 12HR	GENERIC	
CARBAMAZEPINE ER (CARBAMAZEPINE) 100 MG ORAL TAB ER 12H	GENERIC	
CARBAMAZEPINE ER (CARBAMAZEPINE) 200 MG ORAL TAB ER 12H	GENERIC	
CARBAMAZEPINE ER (CARBAMAZEPINE) 400 MG ORAL TAB ER 12H	GENERIC	
EPITOL (CARBAMAZEPINE) 200 MG ORAL TABLET	GENERIC	
ETHOSUXIMIDE 250 MG ORAL CAPSULE	GENERIC	
ETHOSUXIMIDE 250 MG/5ML ORAL SOLUTION	GENERIC	
GABAPENTIN 100 MG ORAL CAPSULE	GENERIC	QL (12 capsules per day)
GABAPENTIN 300 MG ORAL CAPSULE	GENERIC	QL (12 capsules per day)
GABAPENTIN 400 MG ORAL CAPSULE	GENERIC	QL (9 capsules per day)
GABAPENTIN 250 MG/5ML ORAL SOLUTION	GENERIC	AR (age 12 and younger); QL (450 mL per 30 days)
GABAPENTIN 600 MG ORAL TABLET	GENERIC	QL (6 tablets per day)

DRUG NAME	TYPE	RESTRICTIONS
GABAPENTIN 800 MG ORAL TABLET	GENERIC	QL (4.5 tablets per day)
LACOSAMIDE 50 MG ORAL TABLET	GENERIC	PA (Rx049)
LACOSAMIDE 100 MG ORAL TABLET	GENERIC	PA (Rx049)
LACOSAMIDE 150 MG ORAL TABLET	GENERIC	PA (Rx049)
LACOSAMIDE 200 MG ORAL TABLET	GENERIC	PA (Rx049)
LEVETIRACETAM 100 MG/ML ORAL SOLUTION	GENERIC	
LEVETIRACETAM 250 MG ORAL TABLET	GENERIC	
LEVETIRACETAM 500 MG ORAL TABLET	GENERIC	
LEVETIRACETAM 750 MG ORAL TABLET	GENERIC	
LEVETIRACETAM 1000 MG ORAL TABLET	GENERIC	
LEVETIRACETAM ER (LEVETIRACETAM) 500 MG ORAL TAB ER 24H	GENERIC	
LEVETIRACETAM ER (LEVETIRACETAM) 750 MG ORAL TAB ER 24H	GENERIC	
OXCARBAZEPINE 300 MG/5ML ORAL SUSP	GENERIC	
OXCARBAZEPINE 150 MG ORAL TABLET	GENERIC	
OXCARBAZEPINE 300 MG ORAL TABLET	GENERIC	
OXCARBAZEPINE 600 MG ORAL TABLET	GENERIC	
PHENYTOIN 100 MG/4ML ORAL SUSP	GENERIC	
PHENYTOIN 125 MG/5ML ORAL SUSP	GENERIC	
PHENYTOIN 50 MG ORAL TAB CHEW	GENERIC	
DILANTIN (PHENYTOIN SODIUM EXTENDED) 30 MG ORAL CAPSULE	BRAND	
PHENYTOIN SODIUM EXTENDED 100 MG ORAL CAPSULE	GENERIC	
PHENYTOIN SODIUM EXTENDED 200 MG ORAL CAPSULE	GENERIC	
PHENYTOIN SODIUM EXTENDED 300 MG ORAL CAPSULE	GENERIC	
PREGABALIN 25 MG ORAL CAPSULE	GENERIC	QL (3 capsules per day)
PREGABALIN 50 MG ORAL CAPSULE	GENERIC	QL (3 capsules per day)
PREGABALIN 75 MG ORAL CAPSULE	GENERIC	QL (3 capsules per day)
PREGABALIN 100 MG ORAL CAPSULE	GENERIC	QL (3 capsules per day)
PREGABALIN 150 MG ORAL CAPSULE	GENERIC	QL (3 capsules per day)
PREGABALIN 200 MG ORAL CAPSULE	GENERIC	QL (3 capsules per day)
PREGABALIN 225 MG ORAL CAPSULE	GENERIC	QL (2 capsules per day)
PREGABALIN 300 MG ORAL CAPSULE	GENERIC	QL (2 capsules per day)
PRIMIDONE 50 MG ORAL TABLET	GENERIC	
PRIMIDONE 250 MG ORAL TABLET	GENERIC	
TIAGABINE HCL 2 MG ORAL TABLET	GENERIC	
TIAGABINE HCL 4 MG ORAL TABLET	GENERIC	
TIAGABINE HCL 12 MG ORAL TABLET	GENERIC	
TIAGABINE HCL 16 MG ORAL TABLET	GENERIC	
TOPIRAMATE 25 MG ORAL TABLET	GENERIC	
TOPIRAMATE 50 MG ORAL TABLET	GENERIC	
TOPIRAMATE 100 MG ORAL TABLET	GENERIC	
TOPIRAMATE 200 MG ORAL TABLET	GENERIC	
ZONISAMIDE 25 MG ORAL CAPSULE	GENERIC	
ZONISAMIDE 50 MG ORAL CAPSULE	GENERIC	
ZONISAMIDE 100 MG ORAL CAPSULE	GENERIC	

SKELETAL MUSCLE DISORDER

SKELETAL MUSCLE RELAXANTS

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

SMOKING CESSATION

SMOKING DETERRENT AGENTS (GANGLIONIC STIM, OTHERS)

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

DRUG NAME	TYPE	RESTRICTIONS
STOP SMOKING AID (NICOTINE POLACRILEX) 2 MG BUCCAL LOZENGE	GENERIC, OTC	QL (120 pieces per 5 days, 3600 pieces per year)
STOP SMOKING AID (NICOTINE POLACRILEX) 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 (11)-1 ORAL TAB DS PK	GENERIC	QL (53 tablets per 28 days, 106 tablets per year)
VARENICLINE TARTRATE 0.5 MG ORAL TABLET	GENERIC	QL (11 tablets per 7 days, 22 tablets per year)
VARENICLINE TARTRATE 1 MG ORAL TABLET	GENERIC	QL (2 tablets per day, 180 tablets per 180 days)

SMOKING DETERRENTS, OTHER

BUPROPION HCL SR (BUPROPION HCL) 150 MG ORAL TAB ER 12H	GENERIC	QL (60 tablets per 30 days, 180 tablets per year)
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UPPER GASTROINTESTINAL DISORDERS - DIGESTIVE

ANTIPLATULENTS

GAS RELIEF (SIMETHICONE) 80 MG ORAL TAB CHEW	GENERIC, OTC	
SIMETHICONE 80 MG ORAL TAB CHEW	GENERIC, OTC	

PANCREATIC ENZYMES

CREON (AMYLASE/LIPASE/PROTEASE) 6K-19K-30K ORAL CAPSULE DR	BRAND	PA (Rx031)
CREON (AMYLASE/LIPASE/PROTEASE) 12K-38K-60 ORAL CAPSULE DR	BRAND	PA (Rx031)
CREON (AMYLASE/LIPASE/PROTEASE) 24-76-120K ORAL CAPSULE DR	BRAND	PA (Rx031)
CREON (AMYLASE/LIPASE/PROTEASE) 36K-114K ORAL CAPSULE DR	BRAND	PA (Rx031)
CREON (AMYLASE/LIPASE/PROTEASE) 3-9.5-15K ORAL CAPSULE DR	BRAND	PA (Rx031)
PANCREAZE (AMYLASE/LIPASE/PROTEASE) 2.6K-8.8K ORAL CAPSULE DR	BRAND	PA (Rx031)
PANCREAZE (AMYLASE/LIPASE/PROTEASE) 4.2K-14.2K ORAL CAPSULE DR	BRAND	PA (Rx031)
PANCREAZE (AMYLASE/LIPASE/PROTEASE) 10.5-35.5K ORAL CAPSULE DR	BRAND	PA (Rx031)
PANCREAZE (AMYLASE/LIPASE/PROTEASE) 16.8-56.8K ORAL CAPSULE DR	BRAND	PA (Rx031)
PANCREAZE (AMYLASE/LIPASE/PROTEASE) 21 K-54.7K ORAL CAPSULE DR	BRAND	PA (Rx031)
ZENPEP (AMYLASE/LIPASE/PROTEASE) 5K-17K-24K ORAL CAPSULE DR	BRAND	PA (Rx031)
ZENPEP (AMYLASE/LIPASE/PROTEASE) 15-47-63K ORAL CAPSULE DR	BRAND	PA (Rx031)
ZENPEP (AMYLASE/LIPASE/PROTEASE) 20-63-84K ORAL CAPSULE DR	BRAND	PA (Rx031)
ZENPEP (AMYLASE/LIPASE/PROTEASE) 25-79-105K ORAL CAPSULE DR	BRAND	PA (Rx031)
ZENPEP (AMYLASE/LIPASE/PROTEASE) 40-126-168 ORAL CAPSULE DR	BRAND	PA (Rx031)
ZENPEP (AMYLASE/LIPASE/PROTEASE) 10-32-42K ORAL CAPSULE DR	BRAND	PA (Rx031)
ZENPEP (AMYLASE/LIPASE/PROTEASE) 3-10-14K ORAL CAPSULE	BRAND	PA (Rx031)

DRUG NAME	TYPE	RESTRICTIONS
DR		

UPPER GASTROINTESTINAL DISORDERS - SPASTIC DISEASE

ANTICHOLINERGICS/ANTISPASMODICS

DICYCLOMINE HCL 10 MG ORAL CAPSULE	GENERIC	
DICYCLOMINE HCL 10 MG/5 ML ORAL SOLUTION	GENERIC	
DICYCLOMINE HCL 20 MG ORAL TABLET	GENERIC	

BELLADONNA ALKALOIDS

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

UPPER GASTROINTESTINAL DISORDERS - ULCER DISEASE

ANTACIDS

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

DRUG NAME	TYPE	RESTRICTIONS
COMFORT GEL (MAG HYDROX/AL HYDROX/SIMETH) 200-200-20 ORAL SUSP	GENERIC, OTC	
GERI-LANTA (MAG HYDROX/AL HYDROX/SIMETH) 200-200-20 ORAL SUSP	GENERIC, OTC	
GERI-MOX (MAG HYDROX/AL HYDROX/SIMETH) 200-200-20 ORAL SUSP	GENERIC, OTC	
MAALOX ADVANCED (MAG HYDROX/AL HYDROX/SIMETH) 200-200-20 ORAL SUSP	GENERIC, OTC	
MAG-AL PLUS (MAG HYDROX/AL HYDROX/SIMETH) 200-200-20 ORAL SUSP	GENERIC, OTC	
ACID GONE (MAGNESIUM CARBONATE/AL HYDROX) 105-160MG ORAL TAB CHEW	GENERIC, OTC	
ANTACID EXTRA STRENGTH (MAGNESIUM CARBONATE/AL HYDROX) 105-160MG ORAL TAB CHEW	GENERIC, OTC	
HEARTBURN ANTACID (MAGNESIUM CARBONATE/AL HYDROX) 105-160MG ORAL TAB CHEW	GENERIC, OTC	
HEARTBURN RELIEF (MAGNESIUM CARBONATE/AL HYDROX) 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	
GLYCOPYRROLATE 2 MG ORAL TABLET	GENERIC	

ANTI-ULCER PREPARATIONS

MISOPROSTOL 100 MCG ORAL TABLET	GENERIC	
MISOPROSTOL 200 MCG ORAL TABLET	GENERIC	
SUCRALFATE 1 G ORAL TABLET	GENERIC	

HISTAMINE H2-RECEPTOR INHIBITORS

ACID REDUCER (CIMETIDINE) 200 MG ORAL TABLET	GENERIC, OTC	
CIMETIDINE 200 MG ORAL TABLET	GENERIC	
CIMETIDINE 200 MG ORAL TABLET	GENERIC, OTC	
CIMETIDINE 300 MG ORAL TABLET	GENERIC	
CIMETIDINE 400 MG ORAL TABLET	GENERIC	
CIMETIDINE 800 MG ORAL TABLET	GENERIC	
HEARTBURN RELIEF (CIMETIDINE) 200 MG ORAL TABLET	GENERIC, OTC	
ACID CONTROLLER (FAMOTIDINE) 10 MG ORAL TABLET	GENERIC, OTC	
ACID CONTROLLER (FAMOTIDINE) 20 MG ORAL TABLET	GENERIC, OTC	
ACID REDUCER (FAMOTIDINE) 10 MG ORAL TABLET	GENERIC, OTC	
ACID REDUCER (FAMOTIDINE) 20 MG ORAL TABLET	GENERIC, OTC	
ACID-PEP (FAMOTIDINE) 20 MG ORAL TABLET	GENERIC, OTC	
FAMOTIDINE 10 MG ORAL TABLET	GENERIC, OTC	
FAMOTIDINE 20 MG ORAL TABLET	GENERIC	
FAMOTIDINE 20 MG ORAL TABLET	GENERIC, OTC	
FAMOTIDINE 40 MG ORAL TABLET	GENERIC	
HEARTBURN PREVENTION (FAMOTIDINE) 10 MG ORAL TABLET	GENERIC, OTC	
HEARTBURN PREVENTION (FAMOTIDINE) 20 MG ORAL TABLET	GENERIC, OTC	
HEARTBURN RELIEF (FAMOTIDINE) 10 MG ORAL TABLET	GENERIC, OTC	
HEARTBURN RELIEF (FAMOTIDINE) 20 MG ORAL TABLET	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
ZANTAC-360 (FAMOTIDINE) (FAMOTIDINE) 20 MG ORAL TABLET	GENERIC, OTC	

INTESTINAL MOTILITY STIMULANTS

METOCLOPRAMIDE HCL 5 MG/5 ML ORAL SOLUTION	GENERIC	
METOCLOPRAMIDE HCL 10 MG/10ML ORAL SOLUTION	GENERIC	
METOCLOPRAMIDE HCL 5 MG ORAL TABLET	GENERIC	
METOCLOPRAMIDE HCL 10 MG ORAL TABLET	GENERIC	

PROTON-PUMP INHIBITORS

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

URINARY TRACT - FUNCTIONAL DISORDERS

BENIGN PROSTATIC HYPERTROPHY/MICTURITION AGENTS

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

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

DUTASTERIDE-TAMSULOSIN (DUTASTERIDE/TAMSULOSIN HCL) 0.5-0.4 MG ORAL CPMP 24HR	GENERIC	
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URINARY PH MODIFIERS

SODIUM CITRATE-CITRIC ACID (CITRIC ACID/SODIUM CITRATE) 334-500MG ORAL SOLUTION	GENERIC, OTC	
PHOSPHA 250 NEUTRAL (PHOSPHORUS #1) 250 MG ORAL TABLET	GENERIC, OTC	
PHOSPHOROUS (PHOSPHORUS #1) 250 MG ORAL TABLET	GENERIC, OTC	
PHOSPHO-TRIN 250 NEUTRAL (PHOSPHORUS #1) 250 MG ORAL TABLET	GENERIC, OTC	
WES-PHOS 250 NEUTRAL (PHOSPHORUS #1) 250 MG ORAL TABLET	GENERIC, OTC	
POTASSIUM CITRATE ER (POTASSIUM CITRATE) 5 MEQ ORAL TABLET ER	GENERIC	
POTASSIUM CITRATE ER (POTASSIUM CITRATE) 10 MEQ ORAL TABLET ER	GENERIC	
POTASSIUM CITRATE ER (POTASSIUM CITRATE) 15 MEQ ORAL TABLET ER	GENERIC	

DRUG NAME	TYPE	RESTRICTIONS
K-PHOS ORIGINAL (POTASSIUM PHOSPHATE,MONOBASIC) 500 MG ORAL TABLET SOL	BRAND	

URINARY TRACT ANESTHETIC/ANALGESIC AGNT (AZO-DYE)

PHENAZOPYRIDINE HCL 100 MG ORAL TABLET	GENERIC	
PHENAZOPYRIDINE HCL 200 MG ORAL TABLET	GENERIC	

URINARY TRACT ANTISPASMODIC/ANTIINCONTINENCE AGENT

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

VAGINAL DISORDERS

VAGINAL ANTIBIOTICS

CLINDAMYCIN PHOSPHATE 2% VAGINAL CREAM/APPL	GENERIC	
METRONIDAZOLE 0.75% VAGINAL GEL W/APPL	GENERIC	

VAGINAL ANTIFUNGALS

3-DAY VAGINAL CREAM (CLOTRIMAZOLE) 2% VAGINAL CREAM/APPL	GENERIC, OTC	
CLOTRIMAZOLE 1% VAGINAL CREAM/APPL	GENERIC, OTC	
CLOTRIMAZOLE-3 (CLOTRIMAZOLE) 2% VAGINAL CREAM/APPL	GENERIC, OTC	
CLOTRIMAZOLE-7 (CLOTRIMAZOLE) 1% VAGINAL CREAM/APPL	GENERIC, OTC	
MICONAZOLE 7 (MICONAZOLE NITRATE) 2% VAGINAL CREAM/APPL	GENERIC, OTC	
MICONAZOLE NITRATE 2% VAGINAL CREAM/APPL	GENERIC, OTC	
MICONAZOLE-7 (MICONAZOLE NITRATE) 2% VAGINAL CREAM/APPL	GENERIC, OTC	
MONISTAT 7 (MICONAZOLE NITRATE) 2% VAGINAL CREAM/APPL	GENERIC, OTC	
TERCONAZOLE 0.40% VAGINAL CREAM/APPL	GENERIC	
TERCONAZOLE 0.80% VAGINAL CREAM/APPL	GENERIC	

VAGINAL ESTROGEN PREPARATIONS

ESTRADIOL 0.01% VAGINAL CREAM/APPL	GENERIC	
ESTRADIOL 10 MCG VAGINAL TABLET	GENERIC	
YUVAFEM (ESTRADIOL) 10 MCG VAGINAL TABLET	GENERIC	
PREMARIN (ESTROGENS,CONJUGATED) 0.625 MG/G VAGINAL CREAM/APPL	BRAND	

VITAMIN AND/OR MINERAL DEFICIENCY

ANTIOXIDANT MULTIVITAMIN COMBINATIONS

DRUG NAME	TYPE	RESTRICTIONS
I-VITE (MULTIVITAMINS W-MINERALS) 300MCG-200 ORAL TABLET	GENERIC, OTC	

CALCIUM REPLACEMENT

CALCIUM 600+MINERALS (CA CARBONATE/VITAMIN D2/MIN) 600 MG-200 ORAL TABLET	GENERIC, OTC	
CALCIUM 600-VIT D3-MINERAL (CA CARBONATE/VITAMIN D2/MIN) 600 MG-400 ORAL TAB CHEW	GENERIC, OTC	
CALCIUM (CA CARBONATE/VITAMIN D3/VIT K) 500-100-40 ORAL TAB CHEW	GENERIC, OTC	
CALCIUM 600-D3-MINERALS (CA/D3/MAG#11/ZINC/COP/MANG/BOR) 600 MG-800 ORAL TAB CHEW	GENERIC, OTC	
CALCIUM ACETATE 667 MG ORAL TABLET	GENERIC, OTC	
CALCIUM ACETATE 668 MG ORAL TABLET	BRAND, OTC	
CALCIUM 600+D PLUS MINERALS (CALCIUM CARB/VIT D3/MINERALS) 600 MG-400 ORAL TABLET	GENERIC, OTC	
CALCIUM (CALCIUM CARBONATE) 500(1250) ORAL TAB CHEW	GENERIC, OTC	
CALCIUM (CALCIUM CARBONATE) 500(1250) ORAL TABLET	GENERIC, OTC	
CALCIUM (CALCIUM CARBONATE) 600 MG ORAL TABLET	GENERIC, OTC	
CALCIUM 600-VIT D3 (CALCIUM CARBONATE) 600 MG-10 ORAL TABLET	GENERIC, OTC	
CALCIUM CARBONATE 500 MG/5ML ORAL SUSP	GENERIC, OTC	
CALCIUM CARBONATE 500(1250) ORAL TABLET	GENERIC, OTC	
OYSTER SHELL CALCIUM (CALCIUM CARBONATE) 500(1250) ORAL TABLET	GENERIC, OTC	
SUPER CALCIUM (CALCIUM CARBONATE) 600 MG ORAL TABLET	GENERIC, OTC	
CALCIUM 250-VIT D3 (CALCIUM CARBONATE/VITAMIN D2) 250-3.125 ORAL TABLET	GENERIC, OTC	
CALCIUM 500-VIT D3 (CALCIUM CARBONATE/VITAMIN D2) 500MG-5MCG ORAL TABLET	GENERIC, OTC	
CALCIUM 600-VIT D3 (CALCIUM CARBONATE/VITAMIN D2) 600MG-5MCG ORAL TABLET	GENERIC, OTC	
CALCIUM 600-VIT D3 (CALCIUM CARBONATE/VITAMIN D2) 600 MG-20 ORAL TABLET	GENERIC, OTC	
CALCIUM 600-VIT D3 (CALCIUM CARBONATE/VITAMIN D2) 600 MG-10 ORAL TABLET	GENERIC, OTC	
OYSCO 500-VIT D3 (CALCIUM CARBONATE/VITAMIN D2) 500MG-5MCG ORAL TABLET	GENERIC, OTC	
OYSTER SHELL CALCIUM-VIT D3 (CALCIUM CARBONATE/VITAMIN D2) 500MG-5MCG ORAL TABLET	GENERIC, OTC	
OYSTERCAL-D (CALCIUM CARBONATE/VITAMIN D2) 500 MG-10 ORAL TABLET	GENERIC, OTC	
PARVA-CAL 500 (CALCIUM CARBONATE/VITAMIN D2) 500MG-5MCG ORAL TABLET	BRAND, OTC	
PARVA-CAL 500 (CALCIUM CARBONATE/VITAMIN D2) 500MG-5MCG ORAL TABLET	GENERIC, OTC	
CALCIUM (CALCIUM CARBONATE/VITAMIN D3) 500 MG-2.5 ORAL TAB CHEW	BRAND, OTC	
CALCIUM 500-VIT D3 (CALCIUM CARBONATE/VITAMIN D3) 500 MG-10 ORAL TAB CHEW	GENERIC, OTC	
CALCIUM 500-VIT D3 (CALCIUM CARBONATE/VITAMIN D3) 500 MG-10 ORAL TABLET	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
CALCIUM 500-VIT D3 (CALCIUM CARBONATE/VITAMIN D3) 500-3.125 ORAL TABLET	GENERIC, OTC	
CALCIUM 500-VIT D3 (CALCIUM CARBONATE/VITAMIN D3) 500MG-5MCG ORAL TABLET	GENERIC, OTC	
CALCIUM 500-VIT D3 (CALCIUM CARBONATE/VITAMIN D3) 500-15 MCG ORAL TABLET	GENERIC, OTC	
CALCIUM 600-VIT D3 (CALCIUM CARBONATE/VITAMIN D3) 600MG-5MCG ORAL TABLET	GENERIC, OTC	
CALCIUM 600-VIT D3 (CALCIUM CARBONATE/VITAMIN D3) 600 MG-10 ORAL TABLET	GENERIC, OTC	
CALCIUM 600-VIT D3 (CALCIUM CARBONATE/VITAMIN D3) 600 MG-20 ORAL TABLET	GENERIC, OTC	
HI-CAL (CALCIUM CARBONATE/VITAMIN D3) 500MG-5MCG ORAL TABLET	GENERIC, OTC	
OYSCO 500-VIT D3 (CALCIUM CARBONATE/VITAMIN D3) 500MG-5MCG ORAL TABLET	GENERIC, OTC	
OYSTER SHELL CALCIUM-VIT D3 (CALCIUM CARBONATE/VITAMIN D3) 500MG-5MCG ORAL TABLET	GENERIC, OTC	
OYSTER SHELL CALCIUM-VITAMIN D (CALCIUM CARBONATE/VITAMIN D3) 500 MG-10 ORAL TABLET	GENERIC, OTC	
SUPER CALCIUM 600-VIT D3 (CALCIUM CARBONATE/VITAMIN 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 D (CALCIUM CITRATE/VITAMIN D3) 315MG-5MCG ORAL TABLET	GENERIC, OTC	
CALCIUM CITRATE - VITAMIN D (CALCIUM CITRATE/VITAMIN D3) 315MG-6.25 ORAL TABLET	GENERIC, OTC	
CALCIUM CITRATE - VITAMIN D3 (CALCIUM CITRATE/VITAMIN D3) 315MG-6.25 ORAL TABLET	GENERIC, OTC	
CALCIUM CITRATE-VIT D3 (CALCIUM CITRATE/VITAMIN D3) 250MG-5MCG 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/VITAMIN D3) 315MG-5MCG ORAL TABLET	GENERIC, OTC	
CITRACAL + D MAXIMUM (CALCIUM CITRATE/VITAMIN D3) 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

FLUORIDE (SODIUM FLUORIDE) 0.25(0.55) ORAL TAB CHEW	GENERIC, OTC	AR (age 18 and younger)
FLUORIDE (SODIUM FLUORIDE) 0.5(1.1)MG ORAL TAB CHEW	GENERIC, OTC	AR (age 18 and younger)
FLUORIDE (SODIUM 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)

DRUG NAME	TYPE	RESTRICTIONS
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	
FOLIC ACID 1 MG ORAL TABLET	GENERIC, OTC	

GERIATRIC VITAMIN PREPARATIONS

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

IRON REPLACEMENT

HEMATINIC WITH FOLIC ACID (FERROUS FUMARATE/FOLIC ACID) 106 MG-1MG ORAL TABLET	GENERIC, OTC	
FERATE (FERROUS GLUCONATE) 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	
IRON (FERROUS GLUCONATE) 236(27)MG ORAL TABLET	GENERIC, OTC	
IRON (FERROUS GLUCONATE) 240(27)MG ORAL TABLET	GENERIC, OTC	
IRON (FERROUS GLUCONATE) 256(28)MG ORAL TABLET	GENERIC, OTC	
FEOSOL (FERROUS SULFATE) 325(65) MG ORAL TABLET	GENERIC, OTC	
FEROSUL (FERROUS SULFATE) 325(65) MG ORAL TABLET	GENERIC, OTC	
FERRO-TIME (FERROUS SULFATE) 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	
HIGH POTENCY IRON (FERROUS SULFATE) 134 MG ORAL TABLET	GENERIC, OTC	
INFANT-TODDLER IRON (FERROUS SULFATE) 15 MG/ML ORAL DROPS	GENERIC, OTC	
IRON (FERROUS SULFATE) 325(65) MG ORAL TABLET	GENERIC, OTC	
PEDIA IRON (FERROUS SULFATE) 15 MG/ML ORAL DROPS	GENERIC, OTC	
PEDIATRIC FE-VITE (FERROUS SULFATE) 15 MG/ML ORAL DROPS	GENERIC, OTC	
PEDIATRIC IRON (FERROUS SULFATE) 15 MG/ML ORAL DROPS	GENERIC, OTC	
SLOW RELEASE IRON (FERROUS SULFATE) 142(45)MG ORAL TABLET ER	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
SLOW RELEASE IRON (FERROUS SULFATE) 143(45) MG ORAL TABLET ER	GENERIC, OTC	
SLOW RELEASE IRON (FERROUS SULFATE) 160(50) MG ORAL TABLET ER	GENERIC, OTC	
SLOW RELEASE IRON (FERROUS SULFATE) 250(50) MG ORAL TABLET ER	GENERIC, OTC	
IRON 18 MG ORAL TABLET	GENERIC, OTC	
FERREX 28 (IRON AG&FUM/C/FA/MV CMB11/CA-T) 151-200-1 ORAL TABLET	GENERIC, OTC	
FERREX 150 (IRON POLYSACCHARIDES COMPLEX) 150 MG ORAL CAPSULE	GENERIC, OTC	
IFEREX 150 (IRON POLYSACCHARIDES COMPLEX) 150 MG ORAL CAPSULE	GENERIC, OTC	
MYFERON 150 (IRON POLYSACCHARIDES COMPLEX) 150 MG ORAL CAPSULE	GENERIC, OTC	
NU-IRON 150 (IRON POLYSACCHARIDES COMPLEX) 150 MG ORAL CAPSULE	GENERIC, OTC	
POLY-IRON (IRON POLYSACCHARIDES COMPLEX) 150 MG ORAL CAPSULE	GENERIC, OTC	
POLYSACCHARIDE IRON (IRON POLYSACCHARIDES COMPLEX) 150 MG ORAL CAPSULE	GENERIC, OTC	
FE C PLUS (IRON,CARBONYL/VIT C/VIT B12/FA) 100-250-1 ORAL TABLET	GENERIC, OTC	
ICAR-C PLUS (IRON,CARBONYL/VIT C/VIT B12/FA) 100-250-1 ORAL TABLET	GENERIC, OTC	
IRON 100 PLUS (IRON,CARBONYL/VIT C/VIT B12/FA) 100-250-1 ORAL TABLET	GENERIC, OTC	

MAGNESIUM SALTS REPLACEMENT

MAGNESIUM 200 MG ORAL TABLET	GENERIC, OTC	
MAGNESIUM 250 MG ORAL TABLET	GENERIC, OTC	
MAG DELAY (MAGNESIUM CHLORIDE) 64 MG ORAL TABLET DR	GENERIC, OTC	
MAG64 (MAGNESIUM CHLORIDE) 64 MG ORAL TABLET DR	GENERIC, OTC	
MAGNESIUM CHLORIDE 70 MG ORAL TABLET DR	GENERIC, OTC	
NU-MAG (MAGNESIUM CHLORIDE) 71.5 MG ORAL TABLET DR	GENERIC, OTC	
MAG-G (MAGNESIUM GLUCONATE) 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 (MAGNESIUM OXIDE) 400 MG ORAL CAPSULE	BRAND, OTC	
MAGNESIUM (MAGNESIUM OXIDE) 500 MG ORAL CAPSULE	GENERIC, OTC	
MAGNESIUM (MAGNESIUM OXIDE) 250 MG ORAL TABLET	GENERIC, OTC	
MAGNESIUM (MAGNESIUM OXIDE) 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	
MAG-OXIDE (MAGNESIUM OXIDE) 200 MG ORAL TABLET	BRAND, OTC	
MAG-OXIDE MAGNESIUM (MAGNESIUM OXIDE) 200 MG ORAL	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
TABLET		
MGO (MAGNESIUM OXIDE) 400 MG ORAL TABLET	GENERIC, OTC	
PHILLIPS (MAGNESIUM OXIDE) 500 MG ORAL TABLET	GENERIC, OTC	

MULTIVITAMIN PREPARATIONS

HIGH POTENCY MULTIVITAMIN (FOLIC ACID/MULTIVITAMINS) 400 MCG ORAL TABLET	GENERIC, OTC	
ONE DAILY ESSENTIAL (FOLIC ACID/MULTIVITAMINS) 400 MCG ORAL TABLET	GENERIC, OTC	
ONE DAILY MULTIVITAMIN (FOLIC ACID/MULTIVITAMINS) 400 MCG ORAL TABLET	GENERIC, OTC	
ONEVITE DAILY MULTIVITAMIN (FOLIC ACID/MULTIVITAMINS) 400 MCG ORAL TABLET	GENERIC, OTC	
TAB-A-VITE (FOLIC ACID/MULTIVITAMINS) 400 MCG ORAL TABLET	GENERIC, OTC	
THEREMS MULTIVITAMIN (FOLIC ACID/MULTIVITAMINS) 400 MCG ORAL TABLET	GENERIC, OTC	
V-C FORTE (FOLIC ACID/MU-VITS-MIN TH) 1 MG ORAL CAPSULE	GENERIC, OTC	
VIC-FORTE (FOLIC ACID/MU-VITS-MIN TH) 1 MG ORAL CAPSULE	GENERIC, OTC	
A THRU Z ADVANCED FORMULA (FOLIC ACID/MV,FE,OTHER MIN) 18MG-0.4MG ORAL TABLET	GENERIC, OTC	
CENTRUM COMPLETE (FOLIC ACID/MV,FE,OTHER MIN) 18MG-0.4MG ORAL TABLET	GENERIC, OTC	
CENTURY (FOLIC ACID/MV,FE,OTHER MIN) 18MG-0.4MG ORAL TABLET	GENERIC, OTC	
DAILY MULTIPLE (FOLIC ACID/MV,FE,OTHER MIN) 500-18-0.4 ORAL TABLET	GENERIC, OTC	
ONE DAILY FOR WOMEN (FOLIC ACID/MV,FE,OTHER MIN) 0.4MG-18MG ORAL TABLET	GENERIC, OTC	
ONE DAILY MAXIMUM (FOLIC ACID/MV,FE,OTHER MIN) 0.4MG-18MG ORAL TABLET	GENERIC, OTC	
CERTA PLUS (FOLIC ACID/MV,FE,OTHER MIN/LUT) 0.4-18-250 ORAL TABLET	GENERIC, OTC	
ELITE-OB (IRON,CARBONYL/FA/MULTIVITS-MIN) 50-1.25 MG ORAL TABLET	BRAND, OTC	
OB COMPLETE (IRON,CARBONYL/FA/MULTIVITS-MIN) 50-1.25 MG ORAL TABLET	BRAND, OTC	
DAILY VALUE (MULTIVITAMINS) ORAL TABLET	GENERIC, OTC	
DAILY VITAMIN FORMULA (MULTIVITAMINS) ORAL TABLET	GENERIC, OTC	
DAILY VITE (MULTIVITAMINS) ORAL TABLET	GENERIC, OTC	
DAILY-VITE (MULTIVITAMINS) 400 MCG ORAL TABLET	GENERIC, OTC	
HONEY BEARS MULTIVITAMIN (MULTIVITAMINS) ORAL TAB CHEW	GENERIC, OTC	
MULTIPLE VITAMINS (MULTIVITAMINS) ORAL TABLET	GENERIC, OTC	
MULTIVITAMIN (MULTIVITAMINS) ORAL TABLET	GENERIC, OTC	
MULTI-VITAMIN DAILY (MULTIVITAMINS) ORAL TABLET	GENERIC, OTC	
MULTIVITAMINS ORAL TABLET	GENERIC, OTC	
ONE DAILY ESSENTIAL (MULTIVITAMINS) ORAL TABLET	GENERIC, OTC	
ONE-A-DAY ESSENTIAL (MULTIVITAMINS) ORAL TABLET	GENERIC, OTC	
ONE-A-DAY MEN'S (MULTIVITAMINS) 400-300MCG ORAL TABLET	GENERIC, OTC	
ONE-DAILY MULTI-VITAMIN (MULTIVITAMINS) ORAL TABLET	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
SENTRY (MULTIVITAMINS) 18MG-0.4MG ORAL TABLET	GENERIC, OTC	
SPECTRAVITE ADVANCED FORMULA (MULTIVITAMINS) 18MG-0.4MG ORAL TABLET	GENERIC, OTC	
SUPER MULTIVITAMIN (MULTIVITAMINS) ORAL TABLET	GENERIC, OTC	
TAB-A-VITE (MULTIVITAMINS) 400 MCG ORAL TABLET	GENERIC, OTC	
VITAMINS FOR HAIR (MULTIVITAMINS) 400-400MCG ORAL CAPSULE	GENERIC, OTC	
DAILY VITAMIN + IRON (MULTIVITAMINS W-IRON) ORAL TABLET	GENERIC, OTC	
DAILY VITE WITH IRON (MULTIVITAMINS W-IRON) ORAL TABLET	GENERIC, OTC	
HAIR VITAMIN (MULTIVITAMINS W-IRON) ORAL TABLET	GENERIC, OTC	
MULTI-DAY PLUS IRON (MULTIVITAMINS W-IRON) 18MG-0.4MG ORAL TABLET	GENERIC, OTC	
MULTIVITAMINS WITH IRON (MULTIVITAMINS W-IRON) ORAL TABLET	GENERIC, OTC	
DAILY VITAMIN FORMULA-MINERALS (MULTIVITAMINS W-MINERALS) ORAL TABLET	GENERIC, OTC	
HAIR, SKIN AND NAILS (MULTIVITAMINS W-MINERALS) ORAL TABLET	GENERIC, OTC	
MEGA MULTI W-CHELATED MINERALS (MULTIVITAMINS W-MINERALS) ORAL TABLET	GENERIC, OTC	
MULTIPLE VITAMIN (MULTIVITAMINS W-MINERALS) ORAL TABLET	GENERIC, OTC	
MULTIVITAMINS WITH MINERALS (MULTIVITAMINS W-MINERALS) 7.5 MG-400 ORAL TABLET	GENERIC, OTC	
MULTIVITAMINS WITH MINERALS (MULTIVITAMINS W-MINERALS) ORAL TABLET	GENERIC, OTC	
ONCCOR (MULTIVITAMINS W-MINERALS) 200-10-10 ORAL TABLET	GENERIC, OTC	
ONE DAILY COMPLETE (MULTIVITAMINS W-MINERALS) 0.4MG-18MG ORAL TABLET	GENERIC, OTC	
ONE DAILY COMPLETE (MULTIVITAMINS W-MINERALS) ORAL TABLET	GENERIC, OTC	
ONE DAILY ENERGY (MULTIVITAMINS W-MINERALS) ORAL TABLET	GENERIC, OTC	
ONE DAILY PLUS MINERALS (MULTIVITAMINS W-MINERALS) ORAL TABLET	GENERIC, OTC	
ONE-A-DAY MAXIMUM FORMULA (MULTIVITAMINS W-MINERALS) ORAL TABLET	GENERIC, OTC	
PROSIGHT (MULTIVITAMINS W-MINERALS) 5000-60-30 ORAL TABLET	GENERIC, OTC	
CERTAVITE SENIOR (MULTIVITAMINS W-MINERALS/LUT) .4-300-250 ORAL TABLET	GENERIC, OTC	
CERTAVITE-ANTIOXIDANT (MULTIVITAMINS W-MINERALS/LUT) 18MG-0.4MG ORAL TABLET	GENERIC, OTC	
VITATRUM (MULTIVITAMINS W-MINERALS/LUT) 18-500-300 ORAL TABLET	GENERIC, OTC	
VITRUM 50 PLUS SENIOR (MULTIVITAMINS W-MINERALS/LUT) 500-300MCG ORAL TABLET	GENERIC, OTC	
ONCOVITE (MULTIVITAMINS,THERAPEUTIC) ORAL TABLET	GENERIC, OTC	
THERA (MULTIVITAMINS,THERAPEUTIC) 400 MCG ORAL TABLET	GENERIC, OTC	
THERA-TABS (MULTIVITAMINS,THERAPEUTIC) ORAL TABLET	GENERIC, OTC	
CENTRAVITES (MULTIVITS W-IRON,HEMATINIC) 0.4-162-18 ORAL	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
TABLET		
FOLIVANE-OB (PNV NO.15/IRON FUM & PS CMP/FA) 85 MG-1 MG ORAL CAPSULE	GENERIC, OTC	
NIVA-PLUS (PNV WITH CA,NO.74/IRON/FA) 27 MG-1 MG ORAL TABLET	GENERIC, OTC	
PRENATAL-U (PNV W-O CA NO5/FE FUMARATE/FA) 106.5-1MG ORAL CAPSULE	GENERIC, OTC	
TARON-C DHA (PNV#16/IRON FUM & PS/FA/OM-3) 35-1-200MG ORAL CAPSULE	GENERIC, OTC	
WESCAP-C DHA (PNV#16/IRON FUM & PS/FA/OM-3) 35-1-200MG ORAL CAPSULE	GENERIC, OTC	
THRIVITE 19 (PRENATAL VIT/FE FUM/DOSS/FA) 29-1-25 MG ORAL TABLET	BRAND, OTC	

PEDIATRIC VITAMIN PREPARATIONS

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

DRUG NAME	TYPE	RESTRICTIONS
MVC-FLUORIDE (PEDI MVI NO.12/SODIUM FLUORIDE) 0.25 MG ORAL TAB CHEW	GENERIC, OTC	
MVC-FLUORIDE (PEDI MVI NO.12/SODIUM FLUORIDE) 0.5 MG ORAL TAB CHEW	GENERIC, OTC	
MVC-FLUORIDE (PEDI MVI NO.12/SODIUM FLUORIDE) 1 MG ORAL TAB CHEW	GENERIC, OTC	
TRI-VITAMIN WITH FLUORIDE (PEDI MVI NO.21 WITH FLUORIDE) 0.25 MG/ML ORAL DROPS	GENERIC, OTC	AR (age 1 and younger)
TRI-VITAMIN WITH FLUORIDE (PEDI MVI NO.21 WITH FLUORIDE) 0.5 MG/ML ORAL DROPS	GENERIC, OTC	AR (age 1 and younger)
TRI-VITE WITH FLUORIDE (PEDI MVI NO.21 WITH FLUORIDE) 0.25 MG/ML ORAL DROPS	GENERIC, OTC	AR (age 1 and younger)
TRI-VITE WITH FLUORIDE (PEDI MVI NO.21 WITH FLUORIDE) 0.5 MG/ML ORAL DROPS	GENERIC, OTC	AR (age 1 and younger)
VITAMINS A,C,D AND FLUORIDE (PEDI MVI NO.21 WITH FLUORIDE) 0.25 MG/ML ORAL DROPS	GENERIC, OTC	AR (age 1 and younger)
VITAMINS A,C,D AND FLUORIDE (PEDI MVI NO.21 WITH FLUORIDE) 0.5 MG/ML ORAL DROPS	GENERIC, OTC	AR (age 1 and younger)
CHILDREN'S CHEW MULTIVITAMIN (PEDIATRIC MULTIVITAMIN NO.17) ORAL TAB CHEW	GENERIC, OTC	
CHILDREN'S MULTIVITAMIN (PEDIATRIC MULTIVITAMIN NO.17) ORAL TAB CHEW	GENERIC, OTC	

PRENATAL VITAMIN PREPARATIONS

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

DRUG NAME	TYPE	RESTRICTIONS
PRENATAL VITAMIN PLUS LOW IRON (PNV WITH CA,NO.72/IRON/FA) 27 MG-1 MG ORAL TABLET	GENERIC, OTC	
WESTAB PLUS (PNV WITH CA,NO.72/IRON/FA) 27 MG-1 MG ORAL TABLET	GENERIC, OTC	
SIMILAC PRENATAL (PNV#102/IRON/FA/DHA/LUTEIN) 27-800-200 ORAL COMBO. PKG	BRAND, OTC	
ONE DAILY PRENATAL (PNV#75/IRON FUM/FA/OM3/DHA/EPA) 28-800-440 ORAL COMBO. PKG	GENERIC, OTC	
PRENATAL (PNV103/FA/OMEGA3/DHA/FISH OIL) 0.4-32.5MG ORAL TAB CHEW	GENERIC, OTC	
PRENATAL 19 (PNV115/IRON FUMARATE/FA/DSS) 29-1-25 MG ORAL TABLET	GENERIC	
PRENATAL VITAMINS (PNV133/FERROUS FUMARATE/FA) 28MG-0.8MG ORAL TABLET	GENERIC, OTC	
PRENATAL MULTI-DHA (PNV151/IRON/FA/O3/DHA/EPA/FISH) 27-800-260 ORAL CAPSULE	BRAND, OTC	
ULTRA PRENATAL PLUS DHA (PNV166/IRON/FA/O3/DHA/EPA/FISH) 27MG-0.8MG ORAL CAPSULE	BRAND, OTC	
ONE-A-DAY PRENATAL-1 (PRENATAL 168/IRON/FOLIC/OMEGA3) 27-800-235 ORAL CAPSULE	BRAND, OTC	
PRENATAL VITAMIN (prenatal no.137/iron/folic acid) 27MG-0.8MG ORAL TABLET	GENERIC, OTC	
PRENATAL VITAMINS (prenatal no.137/iron/folic acid) 27MG-0.8MG ORAL TABLET	GENERIC, OTC	
PRENATAL MULTI-DHA (PRENATAL NO.40/IRON/FA/DHA) 27-0.8-250 ORAL CAPSULE	GENERIC, OTC	
PRENATAL MULTIVITAMIN-DHA (PRENATAL NO.40/IRON/FA/DHA) 27-0.8-250 ORAL CAPSULE	GENERIC, OTC	
PRENATAL FORMULA-DHA (PRENATAL VIT #116/IRON/FA/DHA) 28-800-200 ORAL CAPSULE	BRAND, OTC	
MINI PRENATAL (PRENATAL VIT #49/IRON FUM/FA) 6.75-0.2MG ORAL TABLET	BRAND, OTC	
PRENATAL VITAMIN (PRENATAL VIT NO.124/IRON/FA) 27MG-0.8MG ORAL TABLET	GENERIC, OTC	
KPN (PRENATAL VIT#98/FERROUS FUM/FA) 9MG-267MCG ORAL TABLET	BRAND, OTC	
MYNATE 90 PLUS (PRENATAL VIT/FE FUM/DOSS/FA) 90-50-1MG ORAL TABLET ER	GENERIC	
MYNATAL (PRENATAL VIT/FE FUMARATE/FA) 65 MG-1 MG ORAL CAPSULE	GENERIC, OTC	
MYNATAL PLUS (PRENATAL VIT/FE FUMARATE/FA) 65 MG-1 MG ORAL TABLET	GENERIC, OTC	
MYNATAL-Z (PRENATAL VIT/FE FUMARATE/FA) 65 MG-1 MG ORAL TABLET	GENERIC, OTC	
PRENATABS FA (PRENATAL VIT/FE FUMARATE/FA) 29 MG-1 MG ORAL TABLET	GENERIC, OTC	
PRENATAL (PRENATAL VIT/FE FUMARATE/FA) 28MG-0.8MG ORAL TABLET	GENERIC, OTC	
PRENATAL 19 (PRENATAL VIT/FE FUMARATE/FA) 29 MG-1 MG ORAL TAB CHEW	GENERIC, OTC	
PRENATAL ONE DAILY (PRENATAL VIT/FE FUMARATE/FA) 27MG-0.8MG ORAL TABLET	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
PRENATAL VITAMINS (PRENATAL VIT/FE FUMARATE/FA) 28MG-0.8MG ORAL TABLET	GENERIC, OTC	
SE-NATAL 19 (PRENATAL VIT/FE FUMARATE/FA) 29 MG-1 MG ORAL TAB CHEW	GENERIC, OTC	
TRINATE (PRENATAL VIT/FE FUMARATE/FA) 28 MG-1 MG ORAL TABLET	GENERIC, OTC	
MYNATAL (PRENATAL VIT/IRON,CARB/DOSS/FA) 90-50-1MG ORAL TABLET	GENERIC	
MYNATAL ADVANCE (PRENATAL VIT/IRON,CARB/DOSS/FA) 90-1-50 MG ORAL TABLET	GENERIC	
PRENATABS RX (PRENATAL VIT/IRON,CARBONYL/FA) 29 MG-1 MG ORAL TABLET	GENERIC, OTC	
PRENATA (PRENATAL VIT37/IRON/FOLIC ACID) 29 MG-1 MG ORAL TAB CHEW	BRAND, OTC	
PRENATAL FORMULA (PRENATAL VITS #93/IRON FUM/FA) 9MG-267MCG ORAL TABLET	BRAND, OTC	
PRENATAL (PRENATAL VITS W-CA,FE,FA(<1MG)) 27MG-0.8MG ORAL TABLET	GENERIC, OTC	
PRENATAL MULTIVITAMIN (PRENATAL VITS W-CA,FE,FA(<1MG)) 28MG-0.8MG ORAL TABLET	GENERIC, OTC	
PRENATAL VITAMINS (PRENATAL VITS W-CA,FE,FA(<1MG)) 27MG-0.8MG ORAL TABLET	GENERIC, OTC	
PRENATAL PLUS-DHA (PRENATAL72/IRON FUM/FA/OM3/DHA) 27-1-250MG ORAL COMBO. PKG	BRAND, OTC	
OBSTETRIX EC (PV W-O CAL/FE,CARBONYL/DOSS/FA) 29-1-50 MG ORAL TABLET DR	BRAND	

VITAMIN B PREPARATIONS

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

VITAMIN B1 PREPARATIONS

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

DRUG NAME	TYPE	RESTRICTIONS
<u>VITAMIN B12 PREPARATIONS</u>		
B-12 (CYANOCOBALAMIN) 500 MCG ORAL TABLET	GENERIC, OTC	
B-12 (CYANOCOBALAMIN) 1000 MCG ORAL TABLET ER	GENERIC, OTC	
B-12 DOTS (CYANOCOBALAMIN) 500 MCG ORAL TABLET	GENERIC, OTC	
CYANOCOBALAMIN INJECTION (CYANOCOBALAMIN) 1000MCG/ML INJECTION VIAL	GENERIC	
DODEX (CYANOCOBALAMIN) 1000MCG/ML INJECTION VIAL	GENERIC	
VITAMIN B-12 (CYANOCOBALAMIN) 500 MCG ORAL TABLET	GENERIC, OTC	
VITAMIN B-12 (CYANOCOBALAMIN) 1000 MCG ORAL TABLET	GENERIC, OTC	
VITAMIN B-12 (CYANOCOBALAMIN) 1000 MCG ORAL TABLET ER	GENERIC, OTC	
VITAMIN B-12 (CYANOCOBALAMIN) 1000 MCG SUBLINGUAL TAB SUBL	GENERIC, OTC	
<u>VITAMIN B6 PREPARATIONS</u>		
B-6 (PYRIDOXINE HCL) 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	
VITAMIN B-6 (PYRIDOXINE HCL) 50 MG ORAL CAPSULE	GENERIC, OTC	
VITAMIN B-6 (PYRIDOXINE HCL) 25 MG ORAL TABLET	GENERIC, OTC	
VITAMIN B-6 (PYRIDOXINE HCL) 50 MG ORAL TABLET	GENERIC, OTC	
VITAMIN B-6 (PYRIDOXINE HCL) 100 MG ORAL TABLET	GENERIC, OTC	
VITAMIN B-6 (PYRIDOXINE HCL) 250 MG ORAL TABLET	GENERIC, OTC	
<u>VITAMIN C PREPARATIONS</u>		
ACEROLA C (ASCORBIC ACID) 500 MG ORAL TAB CHEW	GENERIC, OTC	
ACEROLA C (ASCORBIC ACID) 500 MG ORAL WAFER	GENERIC, OTC	
ASCORBIC ACID 500 MG ORAL TABLET	GENERIC, OTC	
C-1000 (ASCORBIC ACID) 1000 MG ORAL TABLET	GENERIC, OTC	
C-1000 WITH ROSE HIPS (ASCORBIC ACID) 1000 MG ORAL TABLET	GENERIC, OTC	
C-500 (ASCORBIC ACID) 500 MG ORAL TAB CHEW	GENERIC, OTC	
C-500 (ASCORBIC ACID) 500 MG ORAL TABLET	GENERIC, OTC	
FRUIT C-100 (ASCORBIC ACID) 100 MG ORAL TAB CHEW	GENERIC, OTC	
FRUIT C-500 (ASCORBIC ACID) 500 MG ORAL TAB CHEW	GENERIC, OTC	
SOOTHING PUREWAY-C (ASCORBIC ACID) 500 MG ORAL TABLET	GENERIC, OTC	
VITAJOY DAILY C (ASCORBIC ACID) 125 MG ORAL TAB CHEW	GENERIC, OTC	
VITAMIN C (ASCORBIC ACID) 125 MG ORAL TAB CHEW	GENERIC, OTC	
VITAMIN C (ASCORBIC ACID) 250 MG ORAL TAB CHEW	GENERIC, OTC	
VITAMIN C (ASCORBIC ACID) 500 MG ORAL TAB CHEW	GENERIC, OTC	
VITAMIN C (ASCORBIC ACID) 100 MG ORAL TABLET	GENERIC, OTC	
VITAMIN C (ASCORBIC ACID) 250 MG ORAL TABLET	GENERIC, OTC	
VITAMIN C (ASCORBIC ACID) 500 MG ORAL TABLET	GENERIC, OTC	
VITAMIN C (ASCORBIC ACID) 1000 MG ORAL TABLET	GENERIC, OTC	
VITAMIN C (ASCORBIC ACID) 500 MG ORAL WAFER	GENERIC, OTC	
VITAMIN C WITH ROSE HIPS (ASCORBIC ACID) 500 MG ORAL TAB CHEW	GENERIC, OTC	
VITAMIN C WITH ROSE HIPS (ASCORBIC ACID) 500 MG ORAL TABLET	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
VITAMIN C WITH ROSE HIPS (ASCORBIC ACID) 1000 MG ORAL TABLET	GENERIC, OTC	

VITAMIN D PREPARATIONS

CALCITRIOL 0.25 MCG ORAL CAPSULE	GENERIC	
CALCITRIOL 0.5 MCG ORAL CAPSULE	GENERIC	
D3 DOTS (CHOLECALCIFEROL) 50 MCG ORAL TABLET	GENERIC, OTC	
D3-2000 (CHOLECALCIFEROL) 50 MCG ORAL CAPSULE	GENERIC, OTC	
DECARA (CHOLECALCIFEROL) 1250 MCG ORAL CAPSULE	GENERIC, OTC	
DELTA D3 (CHOLECALCIFEROL) 10 MCG ORAL TABLET	GENERIC, OTC	
DIALYVITE VITAMIN D (CHOLECALCIFEROL) 125 MCG ORAL CAPSULE	GENERIC, OTC	
D-VI-SOL (CHOLECALCIFEROL) 10(400)/ML ORAL DROPS	GENERIC, OTC	AR (age 18 and younger)
INFANT VITAMIN D (CHOLECALCIFEROL) 10(400)/ML ORAL DROPS	GENERIC, OTC	AR (age 18 and younger)
OPTIMAL D3 (CHOLECALCIFEROL) 1250 MCG ORAL CAPSULE	GENERIC, OTC	
PEDIA D-VITE (CHOLECALCIFEROL) 10(400)/ML ORAL DROPS	GENERIC, OTC	AR (age 18 and younger)
PEDIATRIC D-VITE (CHOLECALCIFEROL) 10(400)/ML ORAL DROPS	GENERIC, OTC	AR (age 18 and younger)
PEDIATRIC VITAMIN D3 (CHOLECALCIFEROL) 10(400)/ML ORAL DROPS	GENERIC, OTC	AR (age 18 and younger)
THERA-D (CHOLECALCIFEROL) 50 MCG ORAL TABLET	GENERIC, OTC	
VITAJOY DAILY D (CHOLECALCIFEROL) 25 MCG ORAL TAB CHEW	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 10 MCG ORAL CAPSULE	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 25 MCG ORAL CAPSULE	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 50 MCG ORAL CAPSULE	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 125 MCG ORAL CAPSULE	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 250 MCG ORAL CAPSULE	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 1250 MCG ORAL CAPSULE	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 10(400)/ML ORAL DROPS	GENERIC, OTC	AR (age 18 and younger)
VITAMIN D3 (CHOLECALCIFEROL) 10MCG/5ML ORAL LIQUID	GENERIC, OTC	AR (age 18 and younger)
VITAMIN D3 (CHOLECALCIFEROL) 25 MCG ORAL TAB CHEW	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 10 MCG ORAL TABLET	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 25 MCG ORAL TABLET	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 50 MCG ORAL TABLET	GENERIC, OTC	
VITAMIN D3 (CHOLECALCIFEROL) 125 MCG ORAL TABLET	GENERIC, OTC	
VITAMIN D3 MAX (CHOLECALCIFEROL) 125 MCG ORAL CAPSULE	GENERIC, OTC	
VITAMIN D-400 (CHOLECALCIFEROL) 10 MCG ORAL TABLET	GENERIC, OTC	
WEEKLY-D (CHOLECALCIFEROL) 1250 MCG ORAL CAPSULE	GENERIC, OTC	
VITAMIN D2 (ERGOALCIFEROL) 1250 MCG ORAL CAPSULE	GENERIC	
VITAMIN D2 (ERGOALCIFEROL) 10 MCG ORAL TABLET	GENERIC, OTC	
VITAMIN D2 (ERGOALCIFEROL) 50 MCG ORAL TABLET	BRAND, OTC	
FISH OIL (FISH OIL/DHA/EPA) 1200-144MG ORAL CAPSULE	GENERIC, OTC	

ZINC REPLACEMENT

ZINC (ZINC AMINO ACID CHELATE) 50 MG ORAL TABLET	GENERIC, OTC	
ZINC CHELATED (ZINC AMINO ACID CHELATE) 50 MG ORAL TABLET	GENERIC, OTC	
ELEMENTAL ZINC (ZINC GLUCONATE) 30 MG ORAL TABLET	GENERIC, OTC	
ZINC (ZINC GLUCONATE) 10 MG ORAL LOZENGE	GENERIC, OTC	
ZINC (ZINC GLUCONATE) 30 MG ORAL TABLET	GENERIC, OTC	

DRUG NAME	TYPE	RESTRICTIONS
ZINC (ZINC GLUCONATE) 50 MG ORAL TABLET	GENERIC, OTC	
ZINC GLUCONATE 100 MG ORAL TABLET	GENERIC, OTC	
ORAZINC (ZINC SULFATE) 25(110) MG ORAL TABLET	BRAND, OTC	
ZINC (ZINC SULFATE) 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-15 (ZINC SULFATE) 66 MG ORAL TABLET	BRAND, OTC	
ZINC-220 (ZINC SULFATE) 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			
ANTI-HISTAMINES	<ul style="list-style-type: none"> • CETIRIZINE CHEW TAB • LEVOCETIRIZINE TABLET 	↔	<ul style="list-style-type: none"> • CETIRIZINE 1 MG/ML ORAL SOLUTION • CETIRIZINE TABLET • FEXOFENADINE 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)
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)
CARDIOVASCULAR DISEASE - HYPERTENSION			

THERAPEUTIC CLASS	NON-PREFERRED DRUG	↻	ALTERNATIVE PREFERRED DRUG
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 TABLET • 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 • SUDGEST 12 HOUR 120 MG CAPLET 	↻	<ul style="list-style-type: none"> • SUDGEST 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 • 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 • TERBINAFINE 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

THERAPEUTIC CLASS	NON-PREFERRED DRUG	↻	ALTERNATIVE PREFERRED DRUG
			<ul style="list-style-type: none"> • TRIAMCINOLONE CREAM/OINTMENT • HYDROCORTISONE CREAM/OINTMENT
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 • MOUJARO • VICTOZA PEN 	↻	<ul style="list-style-type: none"> • BYETTA, ADLYXIN, AND RYBLESUS AND TRULICITY • PA REQUIRED FOR ALL OPTIONS; OTHER ALTERNATIVES MAY APPLY
ANTIHYPERGLYCEMIC-SODIUM/GLUCOCOTRANSPORTER2(SGLT2) INHIBITORS	<ul style="list-style-type: none"> • FARXIGA TABLET • JARDIANCE TABLET 	↻	<ul style="list-style-type: none"> • STEGLATRO
ANTIHYPERGLYCEMIC, DPP-4 INHIBITORS	<ul style="list-style-type: none"> • JANUVIA TABLET 	↻	<ul style="list-style-type: none"> • ALOGLIPTIN
INSULINS	<ul style="list-style-type: none"> • BASAGLAR KWIKPEN 	↻	<ul style="list-style-type: none"> • INSULIN GLARGINE-YFGN VIALS/PENS (GENERIC SEMGLEE-YFGN) • INSULIN GLARGINE VIALS (GENERIC LANTUS) • INSULIN GLARGINE SOLOSTAR (GENERIC LANTUS SOLOSTAR)
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 INHIBITORS	<ul style="list-style-type: none"> • HUMIRA PEN/SYRINGE 	↻	<ul style="list-style-type: none"> • AMJEVITA (PA REQUIRED; OTHER ALTERNATIVES MAY APPLY) • 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

THERAPEUTIC CLASS	NON-PREFERRED DRUG		ALTERNATIVE PREFERRED DRUG
DRUG TX-CHRONIC INFLAM. COLON DX,5-AMINOSALICYLAT	<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 MAY APPLY)
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 (QUANTITY LIMITS MAY APPLY)
URINARY TRACT - FUNCTIONAL DISORDERS			
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