

Umpqua Health Alliance Formulary (Preferred Drug List)

Effective October 12, 2026



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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. If you should have additional questions about the UHA Formulary, please call Customer Care at 541-229-4842 541-229-4842; Toll Free: 866-672-1551; TTY: 541-440-6304 or 711, Monday to Friday 8am to 5pm PST.

You can get this letter in other languages, large print, Braille or a format you prefer. You can also ask for an interpreter. This help is free. Call 541-229-4842 or TTY 711.

Puede obtener esta carta en otros idiomas, en letra grande, en braille o en el formato que prefiera. También puede solicitar un intérprete. Esta ayuda es gratuita. Llame al 541-229-4842 o al TTY 711.

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 pre-approval 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 allergic rhinitis, fungal infections of the skin and nails, and acne. 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.

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. 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>

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Drug		Notes
Allergy		
Antihistamines - 1St Generation		
ALER-CAP ORAL CAPSULE 25 MG	(diphenhydramine hcl)	
ALLER-CHLOR ORAL TABLET 4 MG	(chlorpheniramine maleate)	
ALLER-G-TIME ORAL TABLET 25 MG	(diphenhydramine hcl)	
ALLERGY (CHLORPHENIRAMINE) ORAL TABLET 4 MG	(chlorpheniramine maleate)	
ALLERGY (DIPHENHYDRAMINE) ORAL CAPSULE 25 MG	(diphenhydramine hcl)	
ALLERGY (DIPHENHYDRAMINE) ORAL LIQUID 12.5 MG/5 ML	(diphenhydramine hcl)	
ALLERGY (DIPHENHYDRAMINE) ORAL TABLET 25 MG	(diphenhydramine hcl)	
ALLERGY MEDICINE ORAL TABLET 25 MG	(diphenhydramine hcl)	
ALLERGY ORAL LIQUID 12.5 MG/5 ML	(diphenhydramine hcl)	
ALLERGY RELIEF(CHLORPHENIRAMN) ORAL TABLET 4 MG	(chlorpheniramine maleate)	
ALLERGY RELIEF(DIPHENHYDRAMIN) ORAL CAPSULE 25 MG	(diphenhydramine hcl)	
ALLERGY RELIEF(DIPHENHYDRAMIN) ORAL LIQUID 12.5 MG/5 ML	(diphenhydramine hcl)	
ALLERGY RELIEF(DIPHENHYDRAMIN) ORAL TABLET 25 MG	(diphenhydramine hcl)	
ALLERGY-TIME ORAL TABLET 4 MG	(chlorpheniramine maleate)	
BANOPHEN ORAL TABLET 25 MG	(diphenhydramine hcl)	
BENADRYL ALLERGY ORAL TABLET 25 MG	(diphenhydramine hcl)	
CHILDREN'S ALLERGY (DIPHENHYD) ORAL LIQUID 12.5 MG/5 ML	(diphenhydramine hcl)	
CHILDREN'S WAL-DRYL ALLERGY ORAL LIQUID 12.5 MG/5 ML	(diphenhydramine hcl)	
<i>chlorpheniramine maleate oral tablet 4 mg</i>	(Aller-Chlor)	
CHLORTABS ORAL TABLET 4 MG	(chlorpheniramine maleate)	
COMPLETE ALLERGY ORAL TABLET 25 MG	(diphenhydramine hcl)	
<i>cyproheptadine oral syrup 2 mg/5 ml</i>		Age (Min 1 Years and Max 9 Years)
<i>cyproheptadine oral tablet 4 mg</i>		Age (Max 20 Years)
DIMETANE (DIPHENHYDRAMINE HCL) ORAL CAPSULE 25 MG, 50 MG	(diphenhydramine hcl)	
DIPHEDRYL ORAL LIQUID 12.5 MG/5 ML	(diphenhydramine hcl)	
DIPHEN ORAL ELIXIR 12.5 MG/5 ML	(diphenhydramine hcl)	
DIPHEN ORAL TABLET 25 MG	(diphenhydramine hcl)	

Drug		Notes
<i>diphenhydramine hcl oral capsule 25 mg</i>	(Aler-Cap)	
<i>diphenhydramine hcl oral capsule 50 mg</i>	(Dimetane (Diphenhydramine HCL))	
<i>diphenhydramine hcl oral elixir 12.5 mg/5 ml</i>	(Diphen)	
<i>diphenhydramine hcl oral liquid 12.5 mg/5 ml</i>	(Allergy)	
<i>diphenhydramine hcl oral tablet 25 mg</i>	(Alka-Seltzer Plus Allergy)	
GERI-DRYL ORAL LIQUID 12.5 MG/5 ML	(diphenhydramine hcl)	
GERI-DRYL ORAL TABLET 25 MG	(diphenhydramine hcl)	
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>		Age (Min 2 Years and Max 9 Years)
<i>hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg</i>		
<i>hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg</i>		
MAXALLERGY KIDS ORAL LIQUID 12.5 MG/5 ML	(diphenhydramine hcl)	
M-DRYL ORAL LIQUID 12.5 MG/5 ML	(diphenhydramine hcl)	
NIGHTTIME ALLERGY RELIEF ORAL TABLET 25 MG	(diphenhydramine hcl)	
PHARBECHLOR ORAL TABLET 4 MG	(chlorpheniramine maleate)	
PHARBEDRYL ORAL CAPSULE 25 MG, 50 MG	(diphenhydramine hcl)	
<i>promethazine oral syrup 6.25 mg/5 ml</i>		Age (Min 2 Years and Max 9 Years)
<i>promethazine oral tablet 12.5 mg, 25 mg, 50 mg</i>		
WAL-DRYL ALLERGY ORAL CAPSULE 25 MG	(diphenhydramine hcl)	
WAL-DRYL ALLERGY ORAL LIQUID 12.5 MG/5 ML	(diphenhydramine hcl)	
WAL-DRYL ALLERGY ORAL TABLET 25 MG	(diphenhydramine hcl)	
WAL-FINATE ORAL TABLET 4 MG	(chlorpheniramine maleate)	
Antihistamines - 2Nd Generation		
24HOUR ALLERGY ORAL TABLET 10 MG	(cetirizine)	
24HR ALLERGY RELIEF ORAL TABLET 5 MG	(levocetirizine)	QL (1 EA per 1 day)
ALL DAY ALLERGY (CETIRIZINE) ORAL TABLET 10 MG	(cetirizine)	
ALLERCLEAR ORAL TABLET 10 MG	(loratadine)	
ALLER-EASE ORAL TABLET 180 MG	(fexofenadine)	QL (1 EA per 1 day)
ALLER-FEX ORAL TABLET 180 MG	(fexofenadine)	QL (1 EA per 1 day)

Drug		Notes
ALLERGY RELIEF (CETIRIZINE) ORAL SOLUTION 1 MG/ML	(cetirizine)	Age (Min 2 Years and Max 9 Years)
ALLERGY RELIEF (CETIRIZINE) ORAL TABLET 10 MG	(cetirizine)	
ALLERGY RELIEF (CETIRIZINE) ORAL TABLET 5 MG	(cetirizine)	QL (1 EA per 1 day)
ALLERGY RELIEF (FEXOFENADINE) ORAL TABLET 180 MG	(fexofenadine)	QL (1 EA per 1 day)
ALLERGY RELIEF (FEXOFENADINE) ORAL TABLET 60 MG	(fexofenadine)	QL (2 EA per 1 day)
ALLERGY RELIEF (LEVOCETIRIZIN) ORAL TABLET 5 MG	(levocetirizine)	QL (1 EA per 1 day)
ALLERGY RELIEF (LORATADINE) ORAL SOLUTION 5 MG/5 ML	(loratadine)	Age (Min 2 Years and Max 9 Years)
ALLERGY RELIEF (LORATADINE) ORAL TABLET 10 MG	(loratadine)	
ALLERGY-HIVES RELIEF ORAL TABLET 180 MG	(fexofenadine)	QL (1 EA per 1 day)
ALLER-TEC ORAL TABLET 10 MG	(cetirizine)	
<i>cetirizine oral solution 1 mg/ml</i>	(Allergy Relief (cetirizine))	Age (Min 2 Years and Max 9 Years)
<i>cetirizine oral solution 5 mg/5 ml</i>	(Children's Cetirizine)	Age (Min 2 Years and Max 9 Years)
<i>cetirizine oral tablet 10 mg</i>	(24Hour Allergy)	
<i>cetirizine oral tablet 5 mg</i>	(Allergy Relief (cetirizine))	
CHILD ALLERGY RELF(CETIRIZINE) ORAL SOLUTION 1 MG/ML	(cetirizine)	Age (Min 2 Years and Max 9 Years)
CHILDREN'S ALLERGY RELIEF(LOR) ORAL SOLUTION 5 MG/5 ML	(loratadine)	Age (Min 2 Years and Max 9 Years)
CHILDREN'S ALLERGY(CETIRIZINE) ORAL SOLUTION 1 MG/ML	(cetirizine)	Age (Min 2 Years and Max 9 Years)
CHILDREN'S ALLER-TEC ORAL SOLUTION 1 MG/ML	(cetirizine)	Age (Min 2 Years and Max 9 Years)
CHILDREN'S CETIRIZINE ORAL SOLUTION 1 MG/ML	(cetirizine)	Age (Min 2 Years and Max 9 Years)
CHILDREN'S WAL-ZYR ORAL SOLUTION 1 MG/ML	(cetirizine)	Age (Min 2 Years and Max 9 Years)
CHILD'S ALL DAY ALLERGY(CETIR) ORAL SOLUTION 1 MG/ML	(cetirizine)	Age (Min 2 Years and Max 9 Years)
<i>fexofenadine oral tablet 180 mg</i>	(Aller-Ease)	QL (1 EA per 1 day)
<i>fexofenadine oral tablet 60 mg</i>	(Allergy Relief (fexofenadine))	QL (2 EA per 1 day)
<i>levocetirizine oral tablet 5 mg</i>	(24HR Allergy Relief)	QL (1 EA per 1 day)
LORADAMED ORAL TABLET 10 MG	(loratadine)	
<i>loratadine oral solution 5 mg/5 ml</i>	(Allergy Relief (loratadine))	Age (Min 2 Years and Max 9 Years)
<i>loratadine oral tablet 10 mg</i>	(Allerclear)	
WAL-FEX ALLERGY ORAL TABLET 180 MG	(fexofenadine)	QL (1 EA per 1 day)
WAL-FEX ALLERGY ORAL TABLET 60 MG	(fexofenadine)	QL (2 EA per 1 day)

Drug		Notes
WAL-ITIN ORAL SOLUTION 5 MG/5 ML	(loratadine)	Age (Min 2 Years and Max 9 Years)
WAL-ITIN ORAL TABLET 10 MG	(loratadine)	
WAL-ZYR (CETIRIZINE) ORAL SOLUTION 1 MG/ML	(cetirizine)	Age (Min 2 Years and Max 9 Years)
WAL-ZYR (CETIRIZINE) ORAL TABLET 10 MG	(cetirizine)	
Nasal Antihistamine		
<i>azelastine nasal spray,non-aerosol 137 mcg (0.1 %)</i>		
Nasal Anti-Inflammatory Steroids		
<i>fluticasone propionate nasal spray,suspension 50 mcg/actuation</i>		(24 Hour Allergy Relief)
Antiemesis/Antivertigo		
Antiemetic/Antivertigo Agents		
<i>aprepitant oral capsule 125 mg, 40 mg</i>		PA
<i>aprepitant oral capsule 80 mg</i>	(Emend)	PA
<i>aprepitant oral capsule,dose pack 125 mg (1)-80 mg (2)</i>	(Emend)	PA
COMPRO RECTAL SUPPOSITORY 25 MG	(prochlorperazine)	QL (2 EA per 30 days)
DRAMAMINE (MECLIZINE) ORAL TABLET 25 MG	(meclizine)	
DRAMAMINE (MECLIZINE) ORAL TABLET,CHEWABLE 25 MG	(meclizine)	
DRAMAMINE LESS DROWSY ORAL TABLET 25 MG	(meclizine)	
<i>meclizine oral tablet 12.5 mg</i>		
<i>meclizine oral tablet 25 mg</i>	(Dramamine (meclizine))	
<i>meclizine oral tablet 50 mg</i>	(Antivert)	
<i>meclizine oral tablet,chewable 25 mg</i>	(Dramamine (meclizine))	
MEDI-MECLIZINE ORAL TABLET 25 MG	(meclizine)	
MOTION SICKNESS (MECLIZINE) ORAL TABLET 25 MG	(meclizine)	
MOTION SICKNESS RELIEF(MECLIZ) ORAL TABLET 25 MG	(meclizine)	
MOTION SICKNESS RELIEF(MECLIZ) ORAL TABLET,CHEWABLE 25 MG	(meclizine)	
MOTION-TIME ORAL TABLET,CHEWABLE 25 MG	(meclizine)	
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>		QL (4 EA per 1 day)
<i>ondansetron oral tablet,disintegrating 4 mg, 8 mg</i>		QL (4 EA per 1 day)

Drug	Notes
<i>prochlorperazine maleate oral tablet 10 mg, 5 mg</i> (Compazine)	
<i>prochlorperazine rectal suppository 25 mg</i> (Compro)	QL (2 EA per 30 days)
<i>promethazine rectal suppository 12.5 mg</i> (Promethegan)	QL (2 EA per 30 days)
<i>promethazine rectal suppository 25 mg</i> (Promethegan)	QL (2 EA per 24 days)
PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 50 MG (promethazine)	QL (2 EA per 30 days)
PROMETHEGAN RECTAL SUPPOSITORY 25 MG (promethazine)	QL (2 EA per 24 days)
TRAVEL-EASE (MECLIZINE) ORAL TABLET 25 MG (meclizine)	
TRAVEL-EASE (MECLIZINE) ORAL TABLET, CHEWABLE 25 MG (meclizine)	
WAL-DRAM 2 ORAL TABLET 25 MG (meclizine)	
Asthma And Copd	
Anticholinergic, Orally Inhaled Short Acting	
<i>ipratropium bromide inhalation hfa aerosol inhaler 17 mcg/actuation</i> (Atrovent HFA)	
<i>ipratropium bromide inhalation solution 0.02 %</i>	
Anticholinergics, Orally Inhaled Long Acting	
SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION	ST; ST: STEP THERAPY REQUIRED
<i>tiotropium bromide inhalation capsule, w/inhalation device 18 mcg</i> (Spiriva with HandiHaler)	ST; ST: STEP THERAPY REQUIRED
<i>umeclidinium inhalation blister with device 62.5 mcg/actuation</i> (Incruse Ellipta)	
Beta-Adrenergic Agents	
<i>albuterol sulfate oral syrup 2 mg/5 ml</i>	
<i>albuterol sulfate oral tablet 2 mg, 4 mg</i>	
<i>terbutaline oral tablet 2.5 mg, 5 mg</i>	
Beta-Adrenergic Agents, Inhaled, Short Acting	
<i>albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation</i> (Ventolin HFA)	6.7gm/Pkg
<i>albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml</i>	
<i>levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml</i>	
<i>levalbuterol tartrate inhalation hfa aerosol inhaler 45 mcg/actuation</i> (Xopenex HFA)	
Beta-Adrenergic Agents, Inhaled, Ultra-Long Acting	
STRIVERDI RESPIMAT INHALATION MIST 2.5 MCG/ACTUATION	

Drug	Notes
Beta-Adrenergic Agents, Orally Inhaled, Long Acting	
SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE	ST; ST: STEP THERAPY REQUIRED
Beta-Adrenergic And Anticholinergic Combinations	
BEVESPI AEROSPHERE INHALATION HFA AEROSOL INHALER 9-4.8 MCG	ST; ST: DRUG NOT COVERED, STEP THERAPY OF UMECLIDINIUM-VILANTEROL REQUIRED
COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION	4gm/Pkg
<i>ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml</i>	
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	ST; ST: DRUG NOT COVERED, STEP THERAPY OF UMECLIDINIUM-VILANTEROL REQUIRED
<i>umeclidinium-vilanterol inhalation blister with device 62.5-25 mcg/actuation</i> (Anoro Ellipta)	
Beta-Adrenergic And Glucocorticoid Combinations	
BREYNA INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION (budesonide-formoterol)	
<i>budesonide-formoterol inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation</i> (Breyna)	
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 200-5 MCG/ACTUATION, 50-5 MCG/ACTUATION	ST; ST: STEP THERAPY REQUIRED
<i>fluticasone furoate-vilanterol inhalation blister with device 100-25 mcg/dose, 200-25 mcg/dose</i> (Breo Ellipta)	ST; ST: STEP THERAPY REQUIRED
<i>fluticasone propion-salmeterol inhalation aerosol powdr breath activated 113-14 mcg/actuation, 232-14 mcg/actuation, 55-14 mcg/actuation</i>	
<i>fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i> (Wixela Inhub)	
WIXELA INHUB INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE (fluticasone propion-salmeterol)	
Beta-Adrenergic-Anticholinergic-Glucocort, Inhaled	

Drug	Notes
BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-9-4.8 MCG/ACTUATION	PA
TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG, 200-62.5- 25 MCG	PA
Glucocorticoids, Orally Inhaled	
ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION	
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	
<i>budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml, 1 mg/2 ml</i> (Pulmicort)	
<i>fluticasone furoate inhalation blister with device 100 mcg/actuation, 200 mcg/actuation, 50 mcg/actuation</i> (Arnuity Ellipta)	
<i>fluticasone propionate inhalation blister with device 100 mcg/actuation, 250 mcg/actuation, 50 mcg/actuation</i>	
<i>fluticasone propionate inhalation hfa aerosol inhaler 110 mcg/actuation, 220 mcg/actuation, 44 mcg/actuation</i>	
PULMICORT FLEXHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 180 MCG/ACTUATION, 90 MCG/ACTUATION	
QVAR REDHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION, 80 MCG/ACTUATION	
Leukotriene Receptor Antagonists	
<i>montelukast oral tablet 10 mg</i> (Singulair)	Age (Min 6 Years)
<i>montelukast oral tablet, chewable 4 mg</i> (Singulair)	Age (Max 6 Years)
<i>montelukast oral tablet, chewable 5 mg</i> (Singulair)	Age (Min 6 Years and Max 14 Years)
<i>zafirlukast oral tablet 10 mg, 20 mg</i>	ST; ST: STEP THERAPY REQUIRED
Mast Cell Stabilizers, Orally Inhaled	
<i>cromolyn inhalation solution for nebulization 20 mg/2 ml</i>	
Phosphodiesterase-4 (Pde4) Inhibitors	
OHTUVAYRE INHALATION SUSPENSION FOR NEBULIZATION 3 MG/2.5 ML	PA; SP
Respiratory Aids, Devices, Equipment	
ACE AEROSOL CLOUD ENHANCER SPACER (inhalational spacing device)	QL (1 EA per 180 days)

Drug		Notes
AEROCHAMBER MECHANICAL VENT SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
AEROCHAMBER MINI SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
AEROCHAMBER MV SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
AEROCHAMBER PLUS FLOW-VU SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
AEROCHAMBER PLUS FLOW-VU,L MSK SPACER		QL (1 EA per 180 days)
AEROCHAMBER PLUS FLOW-VU,M MSK SPACER		QL (1 EA per 180 days)
AEROCHAMBER PLUS FLOW-VU,S MSK SPACER		QL (1 EA per 180 days)
AEROCHAMBER PLUS Z STAT LG MSK SPACER		QL (1 EA per 180 days)
AEROCHAMBER PLUS Z STAT MD MSK SPACER		QL (1 EA per 180 days)
AEROCHAMBER PLUS Z STAT SM MSK SPACER		QL (1 EA per 180 days)
AEROCHAMBER PLUS Z STAT SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
AEROCHAMBER Z-STAT PLUS-FLW SG SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
AEROCHAMBER2GO SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
AEROTRACH PLUS SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
AEROVENT PLUS SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
BREATHERITE MDI SPACER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
BREATHERITE SPACER-MASK, NEO. SPACER		QL (1 EA per 180 days)
BREATHERITE SPACER-MASK,ADULT SPACER		QL (1 EA per 180 days)
BREATHERITE SPACER-MASK,CHILD SPACER		QL (1 EA per 180 days)
BREATHERITE SPACER-MASK,INFANT SPACER		QL (1 EA per 180 days)
BREATHERITE SPACER-MASK,S.CHLD SPACER		QL (1 EA per 180 days)
BREATHERITE VALVED MDI CHAMBER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)

Drug		Notes
BREATHERITE VALVED MDI SPACER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
CLEVER CHOICE CHAMBER-LRG MASK SPACER		QL (1 EA per 180 days)
CLEVER CHOICE CHAMBER-MED MASK SPACER		QL (1 EA per 180 days)
CLEVER CHOICE CHAMBER-SM MASK SPACER		QL (1 EA per 180 days)
COMFORTSEAL LARGE MASK DEVICE		QL (1 EA per 180 days)
COMFORTSEAL MEDIUM MASK DEVICE		QL (1 EA per 180 days)
COMFORTSEAL SMALL MASK DEVICE		QL (1 EA per 180 days)
COMPACT SPACE CHAMBER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
COMPACT SPACE CHAMBER-LRG MASK SPACER		QL (1 EA per 180 days)
COMPACT SPACE CHAMBER-MED MASK SPACER		QL (1 EA per 180 days)
COMPACT SPACE CHAMBER-SM MASK SPACER		QL (1 EA per 180 days)
EASIVENT HOLDING CHAMBER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
EASIVENT MASK LARGE DEVICE		QL (1 EA per 180 days)
EASIVENT MASK MEDIUM DEVICE		QL (1 EA per 180 days)
EASIVENT MASK SMALL DEVICE		QL (1 EA per 180 days)
FLEXICHAMBER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
FLEXICHAMBER-LG CHILD MASK DEVICE		QL (1 EA per 180 days)
FLEXICHAMBER-SM ADULT MASK DEVICE		QL (1 EA per 180 days)
FLEXICHAMBER-SM CHILD MASK DEVICE		QL (1 EA per 180 days)
IN-CHECK DIAL TRAINING DEVICE DEVICE		QL (1 EA per 180 days)
INSPIRACHAMBER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
INSPIRACHAMBER WITH MASK-LARGE SPACER		QL (1 EA per 180 days)
INSPIRACHAMBER WITH MASK-MED SPACER		QL (1 EA per 180 days)
INSPIRACHAMBER WITH MASK-SMALL SPACER		QL (1 EA per 180 days)
LITE TOUCH-MEDIUM MASK DEVICE		QL (1 EA per 180 days)
LITEAIRE MDI CHAMBER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
LITETOUCH-LARGE MASK DEVICE		QL (1 EA per 180 days)
LITETOUCH-SMALL MASK DEVICE		QL (1 EA per 180 days)

Drug		Notes
MICROCHAMBER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
MICROSPACER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
MOUTHPIECE DEVICE		QL (1 EA per 180 days)
ONE WAY VALVED MOUTHPIECE DEVICE		QL (1 EA per 180 days)
OPTICHAMBER ADULT MASK-LARGE DEVICE		QL (1 EA per 180 days)
OPTICHAMBER DIAMOND LG MASK SPACER		QL (1 EA per 180 days)
OPTICHAMBER DIAMOND VHC SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
OPTICHAMBER DIAMOND-MED MSK SPACER		QL (1 EA per 180 days)
OPTICHAMBER DIAMOND-SML MASK SPACER		QL (1 EA per 180 days)
PANDA MASK DEVICE		QL (1 EA per 180 days)
PEDIATRIC MEDIUM MASK DEVICE		QL (1 EA per 180 days)
PEDIATRIC PANDA MASK DEVICE		QL (1 EA per 180 days)
PEDIATRIC SMALL MASK DEVICE		QL (1 EA per 180 days)
PFLEX INSPIRATORY TRAINER DEVICE		QL (1 EA per 180 days)
POCKET CHAMBER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
PRIMEAIRE SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
PRO COMFORT SPACER-ADULT MASK SPACER		QL (1 EA per 180 days)
PRO COMFORT SPACER-CHILD MASK SPACER		QL (1 EA per 180 days)
PRO COMFORT SPACER-INFANT MASK SPACER		QL (1 EA per 180 days)
PROCARE SPACER WITH ADULT MASK SPACER		QL (1 EA per 180 days)
PROCARE SPACER WITH CHILD MASK SPACER		QL (1 EA per 180 days)
PROCHAMBER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)
PURE COMFORT SPACER-ADULT MASK SPACER		QL (1 EA per 180 days)
PURECOMFORT PEAK FLOW MOUTHPCE DEVICE		QL (1 EA per 180 days)
RITEFLO AEROCHAMBER SPACER	(inhalational spacing device)	QL (1 EA per 180 days)

Drug	Notes
SIDESTREAM PEDIATRIC FACE MASK DEVICE	QL (1 EA per 180 days)
SILICONE MASK - INFANT DEVICE	QL (1 EA per 180 days)
SILICONE MASK - PEDIATRIC DEVICE	QL (1 EA per 180 days)
SPACE CHAMBER SPACER (inhalational spacing device)	QL (1 EA per 180 days)
SPACE CHAMBER WITH LARGE MASK SPACER	QL (1 EA per 180 days)
SPACE CHAMBER WITH MEDIUM MASK SPACER	QL (1 EA per 180 days)
SPACE CHAMBER WITH SMALL MASK SPACER	QL (1 EA per 180 days)
THRESHOLD IMT TRAINER DEVICE	QL (1 EA per 180 days)
THRESHOLD PEP DEVICE DEVICE	QL (1 EA per 180 days)
VORTEX ADULT MASK DEVICE	QL (1 EA per 180 days)
VORTEX HOLDING CHAMBER SPACER (inhalational spacing device)	QL (1 EA per 180 days)
VORTEX VHC PEDIATRIC MASK SPACER	QL (1 EA per 180 days)
WINDMILL TRAINER DEVICE	QL (1 EA per 180 days)
Xanthines	
<i>theophylline oral tablet extended release 12 hr 100 mg, 200 mg, 300 mg, 450 mg</i>	
<i>theophylline oral tablet extended release 24 hr 400 mg</i>	
Autonomic Nervous System Disorders	
Alzheimer's Therapy, Nmda Receptor Antagonists	
<i>memantine oral tablet 10 mg, 5 mg</i>	
Amyloid Directed Monoclonal Antibody	
KISUNLA INTRAVENOUS SOLUTION 17.5 MG/ML	PA; SP
Cholinesterase Inhibitors	
<i>donepezil oral tablet 10 mg</i> (Aricept)	QL (1 EA per 1 day)
<i>donepezil oral tablet 5 mg</i> (Aricept)	QL (2 EA per 1 day)
<i>donepezil oral tablet, disintegrating 10 mg</i>	QL (1 EA per 1 day)
<i>donepezil oral tablet, disintegrating 5 mg</i>	QL (2 EA per 1 day)
Behavioral Health - Other	
Adrenergics, Aromatic, Non-Catecholamine	
<i>dextroamphetamine sulfate oral capsule, extended release 10 mg, 15 mg</i> (Dexedrine Spansule)	QL (1 EA per 1 day)
<i>dextroamphetamine sulfate oral capsule, extended release 5 mg</i>	QL (1 EA per 1 day)
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i> (Zenzedi)	

Drug	Notes
<i>dextroamphetamine-amphetamine oral capsule,extended release 24hr 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i> (Adderall XR)	QL (1 EA per 1 day)
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i> (Adderall)	
<i>dextroamphetamine-amphetamine oral tablet 12.5 mg</i> (Adderall)	Age (Min 5 Years and Max 19 Years)
Anti-Alcoholic Preparations	
<i>acamprosate oral tablet,delayed release (dr/ec) 333 mg</i>	
<i>disulfiram oral tablet 250 mg, 500 mg</i>	
VIVITROL INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 380 MG	
Barbiturates	
<i>phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)</i>	
<i>phenobarbital oral tablet 100 mg, 15 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg</i>	
Narcotic Antagonists	
<i>naloxone injection solution 0.4 mg/ml</i>	
<i>naloxone nasal spray,non-aerosol 4 mg/actuation</i> (Narcan)	
<i>naltrexone oral tablet 50 mg</i>	
OPVEE NASAL SPRAY,NON-AEROSOL 2.7 MG/ACTUATION	PA
Pineal Hormone Agents	
<i>melatonin oral capsule 10 mg, 5 mg</i>	
<i>melatonin oral tablet 1 mg, 10 mg, 3 mg, 5 mg</i>	
<i>melatonin oral tablet extended release 1 mg</i>	
<i>melatonin oral tablet,disintegrating 3 mg</i>	
<i>melatonin oral tablet,disintegrating 5 mg</i>	
<i>melatonin-pyridoxine hcl (b6) oral tablet 3-10 mg</i>	
Sedative-Hypnotics - Benzodiazepines	
<i>temazepam oral capsule 15 mg, 22.5 mg, 30 mg</i> (Restoril)	PA
Sedative-Hypnotics,Non-Barbiturate	
ALKA-SELTZER PLUS ALLERGY ORAL TABLET 25 MG (diphenhydramine hcl)	
BENADRYL ALLERGY ORAL TABLET 50 MG (diphenhydramine hcl)	
DORMIN ORAL CAPSULE 25 MG (diphenhydramine hcl)	
<i>eszopiclone oral tablet 1 mg, 2 mg, 3 mg</i> (Lunesta)	QL (1 EA per 1 day)

Drug	Notes
NIGHTTIME SLEEP AID (DIPHEN) ORAL CAPSULE 25 MG, 50 MG (diphenhydramine hcl)	
NIGHTTIME SLEEP AID (DIPHEN) ORAL TABLET 25 MG (diphenhydramine hcl)	
NIGHTTIME SLEEP-AID (DOXYLAMN) ORAL TABLET 25 MG	
NYTOL ORAL TABLET 25 MG (diphenhydramine hcl)	
REST SIMPLY NIGHTTIME SLEEP ORAL TABLET 25 MG (diphenhydramine hcl)	
SIMPLY SLEEP ORAL TABLET 25 MG (diphenhydramine hcl)	
SLEEP AID (DIPHENHYDRAMINE) ORAL CAPSULE 25 MG, 50 MG (diphenhydramine hcl)	
SLEEP AID (DIPHENHYDRAMINE) ORAL TABLET 25 MG (diphenhydramine hcl)	
SLEEP AID (DOXYLAMINE) ORAL TABLET 25 MG	
SLEEP II ORAL TABLET 25 MG (diphenhydramine hcl)	
SLEEPING ORAL CAPSULE 50 MG (diphenhydramine hcl)	
SLEEP-TABS ORAL TABLET 25 MG (diphenhydramine hcl)	
SOMINEX MAXIMUM STRENGTH ORAL TABLET 50 MG (diphenhydramine hcl)	
SOMINEX ORAL TABLET 25 MG (diphenhydramine hcl)	
UNISOM (DOXYLAMINE) ORAL TABLET 25 MG	
UNISOM SLEEPGELS ORAL CAPSULE 50 MG (diphenhydramine hcl)	
WAL-SLEEP Z ORAL CAPSULE 25 MG (diphenhydramine hcl)	
WAL-SLEEP Z ORAL TABLET,DISINTEGRATING 25 MG	
WAL-SOM (DIPHENHYDRAMINE) ORAL CAPSULE 50 MG (diphenhydramine hcl)	
WAL-SOM (DOXYLAMINE) ORAL TABLET 25 MG	
<i>zaleplon oral capsule 10 mg, 5 mg</i>	QL (2 EA per 1 day)
<i>zolpidem oral tablet 10 mg</i> (Ambien)	QL (1 EA per 1 day)
<i>zolpidem oral tablet 5 mg</i> (Ambien)	QL (2 EA per 1 day)
Tx For Attention Deficit-Hyperact(Adhd)/Narcolepsy	
<i>dexmethylphenidate oral capsule,er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg</i> (Focalin XR)	PA
<i>dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg</i> (Focalin)	
METADATE ER ORAL TABLET EXTENDED RELEASE 20 MG (methylphenidate hcl)	QL (3 EA per 1 day)

Drug	Notes
<i>methylphenidate hcl oral capsule, er biphasic</i> 30-70 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg (Metadate CD)	PA
<i>methylphenidate hcl oral capsule, er biphasic</i> 50-50 10 mg, 30 mg, 40 mg	PA
<i>methylphenidate hcl oral capsule, er biphasic</i> 50-50 20 mg (Ritalin LA)	PA
<i>methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg</i> (Ritalin)	QL (4 EA per 1 day)
<i>methylphenidate hcl oral tablet extended release 10 mg, 20 mg</i>	QL (3 EA per 1 day)
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i> (Relexxii)	PA
<i>methylphenidate hcl oral tablet, chewable 10 mg, 2.5 mg, 5 mg</i>	PA
RELEXXII ORAL TABLET EXTENDED RELEASE 24HR 18 MG, 27 MG, 36 MG, 54 MG (methylphenidate hcl)	PA
Cardiovascular Disease - Arrhythmia	
Antiarrhythmics	
<i>amiodarone oral tablet 200 mg</i> (Pacerone)	
<i>disopyramide phosphate oral capsule 100 mg, 150 mg</i> (Norpace)	
<i>flecainide oral tablet 100 mg, 150 mg, 50 mg</i>	
PACERONE ORAL TABLET 200 MG (amiodarone)	
<i>propafenone oral tablet 150 mg, 225 mg, 300 mg</i>	
<i>quinidine sulfate oral tablet 200 mg, 300 mg</i>	
Cardiovascular Disease - Cardiac Stimulant	
Digitalis Glycosides	
<i>digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i> (Lanoxin)	
LANOXIN ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG) (digoxin)	
Cardiovascular Disease - Hypertension	
Ace Inhibitor/Calcium Channel Blocker Combination	
<i>amlodipine-benazepril oral capsule 10-20 mg</i> (Lotrel)	
<i>amlodipine-benazepril oral capsule 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg</i>	
Ace Inhibitor/Thiazide & Thiazide-Like Diuretic	

Drug	Notes
<i>captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg</i>	
<i>enalapril-hydrochlorothiazide oral tablet 10-25 mg</i> (Vaseretic)	
<i>enalapril-hydrochlorothiazide oral tablet 5-12.5 mg</i>	
<i>fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg</i>	
<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i> (Zestoretic)	
<i>quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	
Alpha/Beta-Adrenergic Blocking Agents	
<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i> (Coreg)	
<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	
Alpha-Adrenergic Blocking Agents	
<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i> (Cardura)	
<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	
<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	
Angiotensin Receptor Antag./Thiazide Diuretic Comb	
<i>irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg</i> (Avalide)	
<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i> (Hyzaar)	
<i>telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg</i> (Micardis HCT)	ST; ST: STEP THERAPY REQUIRED
<i>valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg</i> (Diovan HCT)	ST; ST: STEP THERAPY REQUIRED
Antihypertensives, Ace Inhibitors	
<i>benazepril oral tablet 10 mg, 20 mg, 40 mg</i> (Lotensin)	
<i>benazepril oral tablet 5 mg</i>	
<i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	
<i>enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i> (Vasotec)	
<i>fosinopril oral tablet 10 mg, 20 mg, 40 mg</i>	
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i> (Zestril)	
<i>quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	
<i>ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg</i>	

Drug	Notes
Antihypertensives, Angiotensin Receptor Antagonist	
<i>irbesartan oral tablet 150 mg, 300 mg</i> (Avapro)	
<i>irbesartan oral tablet 75 mg</i>	
<i>losartan oral tablet 100 mg, 25 mg, 50 mg</i> (Cozaar)	
<i>olmesartan oral tablet 20 mg, 40 mg, 5 mg</i> (Benicar)	
<i>telmisartan oral tablet 20 mg</i>	ST; ST: STEP THERAPY REQUIRED. 1 OF THE FOLLOWING IN THE PAST 180 DAYS: IRBESARTAN, LOSARTAN, OR OLMESARTAN.
<i>telmisartan oral tablet 40 mg, 80 mg</i> (Micardis)	ST; ST: STEP THERAPY REQUIRED. 1 OF THE FOLLOWING IN THE PAST 180 DAYS: IRBESARTAN, LOSARTAN, OR OLMESARTAN.
<i>valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg</i> (Diovan)	ST; ST: STEP THERAPY REQUIRED. 1 OF THE FOLLOWING IN THE PAST 180 DAYS: IRBESARTAN, LOSARTAN, OR OLMESARTAN.
Antihypertensives, Sympatholytic	
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	
<i>guanfacine oral tablet 1 mg, 2 mg</i>	
<i>methyldopa oral tablet 250 mg, 500 mg</i>	
Antihypertensives, Vasodilators	
<i>hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	
<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	
Antihypertensives, Endothelin Receptor Antagonists	
TRYVIO ORAL TABLET 12.5 MG	PA; SP
Beta-Adrenergic Blocking Agents	
<i>acebutolol oral capsule 200 mg, 400 mg</i>	
<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i> (Tenormin)	
<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	
<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i> (Toprol XL)	QL (2 EA per 1 day)
<i>metoprolol tartrate oral tablet 100 mg, 50 mg</i> (Lopressor)	
<i>metoprolol tartrate oral tablet 25 mg</i>	
<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	
<i>nebivolol oral tablet 10 mg</i> (Bystolic)	
<i>nebivolol oral tablet 2.5 mg, 5 mg</i> (Bystolic)	QL (1 EA per 1 day)

Drug	Notes
nebivolol oral tablet 20 mg (Bystolic)	QL (2 EA per 1 day)
propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg (Inderal LA)	
propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)	
propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	
SOTALOL AF ORAL TABLET 120 MG, 160 MG, 80 MG (sotalol)	
sotalol oral tablet 120 mg, 160 mg, 80 mg (Sotalol AF)	
sotalol oral tablet 240 mg	
Beta-Adrenergic Blocking Agents/Thiazide & Related	
atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg	
bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg	
Calcium Channel Blocking Agents	
amlodipine oral tablet 10 mg, 2.5 mg, 5 mg (Norvasc)	
CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG (diltiazem hcl)	
diltiazem hcl oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg (DILT-XR)	
diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg	
diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiadylt ER)	
diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg (Cartia XT)	
diltiazem hcl oral capsule,extended release 24hr 360 mg (Cardizem CD)	
diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg (Cardizem)	
diltiazem hcl oral tablet 90 mg	
diltiazem hcl oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Matzim LA)	
DILT-XR ORAL CAPSULE,EXT.REL 24H DEGRADABLE 120 MG, 180 MG, 240 MG (diltiazem hcl)	
felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg	
MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (diltiazem hcl)	
nifedipine oral tablet extended release 24hr 30 mg, 60 mg (Procardia XL)	

Drug	Notes
<i>nifedipine oral tablet extended release 24hr 90 mg</i>	
<i>nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg</i>	
TIADYL ER ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG (diltiazem hcl)	
<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	
<i>verapamil oral tablet extended release 120 mg, 180 mg, 240 mg</i>	
Loop Diuretics	
<i>bumetanide oral tablet 0.5 mg, 1 mg, 2 mg</i>	
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	
<i>furosemide oral tablet 20 mg, 40 mg, 80 mg</i> (Lasix)	
<i>torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg</i>	
Potassium Sparing Diuretics	
<i>amiloride oral tablet 5 mg</i>	
<i>spironolactone oral tablet 100 mg, 25 mg, 50 mg</i> (Aldactone)	
Potassium Sparing Diuretics In Combination	
<i>triamterene-hydrochlorothiazid oral capsule 37.5-25 mg</i>	
<i>triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg</i>	
Pulm.Anti-Htn,Sel.C-Gmp Phosphodiesterase T5 Inhib	
ALYQ ORAL TABLET 20 MG (tadalafil (pulm. hypertension))	PA; SP
<i>sildenafil (pulm.hypertension) oral tablet 20 mg</i> (Revatio)	PA
<i>tadalafil (pulm. hypertension) oral tablet 20 mg</i> (Alyq)	PA; SP
Thiazide And Related Diuretics	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	
<i>indapamide oral tablet 1.25 mg, 2.5 mg</i>	
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	
THALITONE ORAL TABLET 15 MG	
Cardiovascular Disease - Lipid Irregularity	

Drug	Notes
Antihyperlipidemic - Hmg Coa Reductase Inhibitors	
<i>atorvastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i> (Lipitor)	
<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	
<i>pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	
<i>rosuvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i> (Crestor)	
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg</i> (Zocor)	
<i>simvastatin oral tablet 5 mg, 80 mg</i>	
Bile Salt Sequestrants	
<i>cholestyramine (with sugar) oral powder 4 gram</i> (Questran)	
<i>cholestyramine (with sugar) oral powder in packet 4 gram</i> (Questran)	
CHOLESTYRAMINE LIGHT ORAL POWDER 4 GRAM (cholestyramine)	
<i>colestipol oral tablet 1 gram</i> (Colestid)	
PREVALITE ORAL POWDER 4 GRAM (cholestyramine)	
Lipotropics	
EXTREME OMEGA-3 ORAL CAPSULE 120-180-600 MG	
<i>ezetimibe oral tablet 10 mg</i> (Zetia)	
<i>fenofibrate micronized oral capsule 134 mg, 67 mg</i>	
<i>fenofibrate nanocrystallized oral tablet 145 mg, 48 mg</i>	
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	
FISH OIL EC 1,000 MG SOFTGEL (omega 3-dha-epa-fish oil)	
FISH OIL EC 1,000 MG SOFTGEL (omega 3-dha-epa-fish oil)	
FISH OIL EC 1,000 MG SOFTGEL SOFTGEL (omega 3-dha-epa-fish oil)	
FISH OIL EXTRA STRENGTH ORAL CAPSULE 435-880 MG	
FISH OIL ORAL CAPSULE 1,000 (120-180) MG, 300-1,000 MG, 60-90-500 MG (omega 3-dha-epa-fish oil)	
FISH OIL ORAL CAPSULE 120-180 MG	
FISH OIL ORAL CAPSULE 360-1,200 MG (omega-3 fatty acids-fish oil)	
FISH OIL ORAL CAPSULE,DELAYED RELEASE(DR/EC) 120 MG-180 MG- 60 MG-1,200 MG, 150-217-840 MG, 60-90-500 MG, 900-1,400 MG	
FISH OIL ORAL CAPSULE,DELAYED RELEASE(DR/EC) 360-1,200 MG (omega 3-dha-epa-fish oil)	

Drug	Notes
FISH OIL ORAL LIQUID 1,600-500-800 MG/5 ML	
FISH OIL-VIT D3 ORAL CAPSULE 300-1,000-1,000 MG-MG-UNIT	(om-3-dha-epa-fish oil-vit d3)
<i>gemfibrozil oral tablet 600 mg</i>	(Lopid)
GNP FISH OIL EC 1,000 MG SFTGL SOFTGEL	(omega 3-dha-epa-fish oil)
<i>niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg</i>	
<i>omega 3-dha-epa-fish oil oral capsule 1,000 (120-180) mg, 300-1,000 mg, 60-90-500 mg</i>	(Fish Oil)
<i>omega 3-dha-epa-fish oil oral capsule, delayed release(dr/ec) 300 mg (120 mg- 180mg)-1,000 mg, 600 mg-216 mg- 324 mg-1,200 mg</i>	
<i>omega 3-dha-epa-fish oil oral capsule, delayed release(dr/ec) 300-1,000 mg</i>	(Fish Oil)
<i>omega 3-dha-epa-fish oil oral tablet, chewable 28.5 mg(23.75- 4.75mg)-113.5mg</i>	
<i>omega-3 fatty acids oral capsule 1,000 mg</i>	(Super Omega-3)
<i>omega-3 fatty acids-fish oil oral capsule 300-1,000 mg</i>	
<i>omega-3 fatty acids-fish oil oral capsule 360-1,200 mg</i>	(Fish Oil)
OMEGA-3 FISH OIL ORAL CAPSULE 300-1,000 MG	PA
<i>omega-3s-dha-epa-fish oil oral capsule 300-250-1,000 mg</i>	PA
<i>omega-3s-dha-epa-fish oil oral capsule, delayed release(dr/ec) 300-1,000 mg, 720-1,200 mg</i>	
SUPER OMEGA-3 ORAL CAPSULE 1,000 MG	(omega-3 fatty acids)
ULTRA OMEGA-3 ORAL CAPSULE 200-300-1,000 MG	(omega 3-dha-epa-fish oil)
Niacin Preparations	
ENDUR-ACIN ORAL TABLET EXTENDED RELEASE 250 MG, 500 MG, 750 MG	(niacin)
ENDUR-AMIDE ORAL TABLET EXTENDED RELEASE 500 MG	(niacinamide)
<i>niacin oral capsule, extended release 250 mg, 500 mg</i>	
<i>niacin oral tablet 100 mg, 250 mg, 50 mg</i>	
<i>niacin oral tablet 500 mg</i>	(Niacor)

Drug	Notes
<i>niacin oral tablet extended release 250 mg, 500 mg</i> (Endur-Acin)	
<i>niacinamide oral tablet 50 mg, 500 mg</i>	
<i>niacinamide oral tablet extended release 500 mg</i> (Endur-amide)	
Cardiovascular Disease - Miscellaneous Agents	
Adrenergic Vasopressor Agents	
<i>midodrine oral tablet 10 mg, 2.5 mg, 5 mg</i>	
Angiotensin Recept-Neprilysin Inhibitor Comb(Arni)	
<i>sacubitril-valsartan oral tablet 24-26 mg, 49-51 mg, 97-103 mg</i> (Entresto)	PA; QL (60 EA per 30 days)
Antianginal & Anti-Ischemic Agents,Non-Hemodynamic	
<i>ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg</i>	
Cardiovascular Disease - Vasodilation	
Vasodilators,Coronary	
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg</i>	
<i>isosorbide dinitrate oral tablet 5 mg</i> (Isordil Titradose)	
<i>isosorbide mononitrate oral tablet 10 mg, 20 mg</i>	
<i>isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg</i>	
NITRO-BID TRANSDERMAL OINTMENT 2 % (nitroglycerin)	
<i>nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg</i> (Nitrostat)	
<i>nitroglycerin transdermal ointment 2 %</i> (Nitro-Bid)	
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i> (Nitro-Dur)	
Contraception/Oxytocics	
Contraceptives, Intravaginal, Systemic	
ELURYNG VAGINAL RING 0.12-0.015 MG/24 HR (etonogestrel-ethinyl estradiol)	QL (0.143 EA per 1 day)
ENILLORING VAGINAL RING 0.12-0.015 MG/24 HR (etonogestrel-ethinyl estradiol)	QL (0.143 EA per 1 day)
<i>etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24 hr</i> (EluRyng)	QL (0.143 EA per 1 day)
HALOETTE VAGINAL RING 0.12-0.015 MG/24 HR (etonogestrel-ethinyl estradiol)	QL (0.143 EA per 1 day)
Contraceptives,Injectable	

Drug		Notes
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML		QL (0.65 ML per 90 days)
<i>medroxyprogesterone intramuscular suspension 150 mg/ml</i>	(Depo-Provera)	QL (1 ML per 90 days)
<i>medroxyprogesterone intramuscular syringe 150 mg/ml</i>	(Depo-Provera)	QL (1 ML per 90 days)
Contraceptives, Oral		
AFIRMELLE ORAL TABLET 0.1-20 MG-MCG	(levonorgestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
AFTER PILL ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
AFTERA ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
ALTAVERA (28) ORAL TABLET 0.15-0.03 MG	(levonorgestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
ALYACEN 1/35 (28) ORAL TABLET 1-35 MG- MCG	(norethindrone-ethin estradiol)	QL (1.334 EA per 1 day)
ALYACEN 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG		QL (1.334 EA per 1 day)
AMETHIA ORAL TABLETS, DOSE PACK, 3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	(l norgest/e.estradiol- e.estradiol)	
APRI ORAL TABLET 0.15-0.03 MG	(desogestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
ARANELLE (28) ORAL TABLET 0.5/1/0.5-35 MG-MCG		QL (1.334 EA per 1 day)
ASHLYNA ORAL TABLETS, DOSE PACK, 3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	(l norgest/e.estradiol- e.estradiol)	
AUBRA EQ ORAL TABLET 0.1-20 MG-MCG	(levonorgestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
AUBRA ORAL TABLET 0.1-20 MG-MCG	(levonorgestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
AUROVELA 1.5/30 (21) ORAL TABLET 1.5- 30 MG-MCG	(norethindrone ac-eth estradiol)	QL (1 EA per 1 day)
AUROVELA 1/20 (21) ORAL TABLET 1-20 MG-MCG	(norethindrone ac-eth estradiol)	QL (1 EA per 1 day)
AUROVELA FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	(norethindrone-e.estradiol- iron)	QL (1 EA per 1 day)
AUROVELA FE 1-20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	(norethindrone-e.estradiol- iron)	QL (1 EA per 1 day)
AVIANE ORAL TABLET 0.1-20 MG-MCG	(levonorgestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
AYUNA ORAL TABLET 0.15-0.03 MG	(levonorgestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
AZURETTE (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	(desog- e.estradiol/e.estradiol)	QL (1 EA per 1 day)

Drug		Notes
BALZIVA (28) ORAL TABLET 0.4-35 MG-MCG		QL (1.334 EA per 1 day)
BLISOVI FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
BLISOVI FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
BRIELLYN ORAL TABLET 0.4-35 MG-MCG		QL (1.334 EA per 1 day)
CAMILA ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
CAMRESE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	(l norgest/e.estradiol-e.estrad)	
CAZIAN (28) ORAL TABLET 0.1/.125/.15-25 MG-MCG		QL (1.334 EA per 1 day)
CHATEAL EQ (28) ORAL TABLET 0.15-0.03 MG	(levonorgestrel-ethinyl estrad)	QL (1.334 EA per 1 day)
CRYSELLE (28) ORAL TABLET 0.3-30 MG-MCG	(norgestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
CYRED EQ ORAL TABLET 0.15-0.03 MG	(desogestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
CYRED ORAL TABLET 0.15-0.03 MG	(desogestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
DASETTA 1/35 (28) ORAL TABLET 1-35 MG-MCG	(norethindrone-ethin estradiol)	QL (1.334 EA per 1 day)
DASETTA 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG		QL (1.334 EA per 1 day)
DAYSEE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	(l norgest/e.estradiol-e.estrad)	
DEBLITANE ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
<i>desog-e.estradiol/e.estradiol oral tablet 0.15-0.02 mgx21 /0.01 mg x 5</i>	(Azurette (28))	QL (1 EA per 1 day)
<i>drospirenone-ethinyl estradiol oral tablet 3-0.02 mg</i>	(Jasmiel (28))	QL (1 EA per 1 day)
<i>drospirenone-ethinyl estradiol oral tablet 3-0.03 mg</i>	(Syeda)	QL (1.334 EA per 1 day)
ECONTRA EZ ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
ECONTRA ONE-STEP ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
ELINEST ORAL TABLET 0.3-30 MG-MCG	(norgestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
ELLA ORAL TABLET 30 MG		QL (1 EA per 22 days)
EMZAHH ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
ENPRESSE ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	(levonorg-eth estrad triphasic)	QL (1.334 EA per 1 day)
ENSKYCE ORAL TABLET 0.15-0.03 MG	(desogestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)

Drug		Notes
ERRIN ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
ESTARYLLA ORAL TABLET 0.25-0.035 MG	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
<i>ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg</i>	(Kelnor 1/35 (28))	QL (1.334 EA per 1 day)
<i>ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg</i>	(Valtysa)	QL (1.334 EA per 1 day)
FALMINA (28) ORAL TABLET 0.1-20 MG-MCG	(levonorgestrel-ethinyl estrad)	QL (1.334 EA per 1 day)
FEIRZA ORAL TABLET 1 MG-20 MCG (21)/75 MG (7), 1.5 MG-30 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
HAILEY FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
HAILEY FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
HAILEY ORAL TABLET 1.5-30 MG-MCG	(norethindrone ac-eth estradiol)	QL (1 EA per 1 day)
HEATHER ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
ICLEVIA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91)	(levonorgestrel-ethinyl estrad)	QL (1 EA per 1 day)
INCASSIA ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
INTROVALE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91)	(levonorgestrel-ethinyl estrad)	QL (1 EA per 1 day)
ISIBLOOM ORAL TABLET 0.15-0.03 MG	(desogestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
JAIMIESS ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	(l norgest/e.estradiol-e.estrad)	
JASMIEL (28) ORAL TABLET 3-0.02 MG	(drospirenone-ethinyl estradiol)	QL (1 EA per 1 day)
JENCYCLA ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
JOLESSA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91)	(levonorgestrel-ethinyl estrad)	QL (1 EA per 1 day)
JULEBER ORAL TABLET 0.15-0.03 MG	(desogestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
JUNEL 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	(norethindrone ac-eth estradiol)	QL (1 EA per 1 day)
JUNEL 1/20 (21) ORAL TABLET 1-20 MG-MCG	(norethindrone ac-eth estradiol)	QL (1 EA per 1 day)
JUNEL FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)

Drug		Notes
JUNEL FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
KALLIGA ORAL TABLET 0.15-0.03 MG	(desogestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
KARIVA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	(desog-e.estradiol/e.estradiol)	QL (1 EA per 1 day)
KELNOR 1/35 (28) ORAL TABLET 1-35 MG-MCG	(ethynodiol diac-eth estradiol)	QL (1.334 EA per 1 day)
KURVELO (28) ORAL TABLET 0.15-0.03 MG	(levonorgestrel-ethinyl estrad)	QL (1.334 EA per 1 day)
LARIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	(norethindrone ac-eth estradiol)	QL (1 EA per 1 day)
LARIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	(norethindrone ac-eth estradiol)	QL (1 EA per 1 day)
LARIN FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
LARIN FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
LESSINA ORAL TABLET 0.1-20 MG-MCG	(levonorgestrel-ethinyl estrad)	QL (1.334 EA per 1 day)
LEVONEST (28) ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	(levonorg-eth estrad triphasic)	QL (1.334 EA per 1 day)
<i>levonorgestrel oral tablet 1.5 mg</i>	(After Pill)	QL (24 EA per 365 days)
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg</i>	(Afirmelle)	QL (1.334 EA per 1 day)
<i>levonorgestrel-ethinyl estrad oral tablet 0.15-0.03 mg</i>	(Altavera (28))	QL (1.334 EA per 1 day)
<i>levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)</i>	(Iclevia)	QL (1 EA per 1 day)
<i>levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	(Enpresse)	QL (1.334 EA per 1 day)
LORYNA (28) ORAL TABLET 3-0.02 MG	(drospirenone-ethinyl estradiol)	QL (1 EA per 1 day)
LOW-OGESTREL (28) ORAL TABLET 0.3-30 MG-MCG	(norgestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
LO-ZUMANDIMINE (28) ORAL TABLET 3-0.02 MG	(drospirenone-ethinyl estradiol)	QL (1 EA per 1 day)
LUIZZA ORAL TABLET 1-20 MG-MCG, 1.5-30 MG-MCG	(norethindrone ac-eth estradiol)	QL (1 EA per 1 day)
LUTERA (28) ORAL TABLET 0.1-20 MG-MCG	(levonorgestrel-ethinyl estrad)	QL (1.334 EA per 1 day)
LYLEQ ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
LYZA ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
MARLISSA (28) ORAL TABLET 0.15-0.03 MG	(levonorgestrel-ethinyl estrad)	QL (1.334 EA per 1 day)

Drug		Notes
MELEYA ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
MICROGESTIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	(norethindrone ac-eth estradiol)	QL (1 EA per 1 day)
MICROGESTIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	(norethindrone ac-eth estradiol)	QL (1 EA per 1 day)
MICROGESTIN FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
MICROGESTIN FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
MILI ORAL TABLET 0.25-0.035 MG	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
MONO-LINYAH ORAL TABLET 0.25-0.035 MG	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
MY CHOICE ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
MY WAY ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
NECON 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG		QL (1.334 EA per 1 day)
NEW DAY ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
NIKKI (28) ORAL TABLET 3-0.02 MG	(drospirenone-ethinyl estradiol)	QL (1 EA per 1 day)
NORA-BE ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
<i>norethindrone (contraceptive) oral tablet 0.35 mg</i>	(Camila)	QL (1.334 EA per 1 day)
<i>norethindrone ac-eth estradiol oral tablet 1.5-30 mg-mcg</i>	(Aurovela 1.5/30 (21))	QL (1 EA per 1 day)
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg</i>	(Aurovela 1/20 (21))	QL (1 EA per 1 day)
<i>norethindrone-e.estradiol-iron oral tablet 1.5 mg-30 mcg (21)/75 mg (7)</i>	(Aurovela Fe 1.5/30 (28))	QL (1 EA per 1 day)
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-0.025 mg</i>	(Tri-Lo-Estarylla)	QL (1.334 EA per 1 day)
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-0.035mg (28)</i>	(Tri-Estarylla)	QL (1.334 EA per 1 day)
<i>norgestimate-ethinyl estradiol oral tablet 0.25-0.035 mg</i>	(Estarylla)	QL (1.334 EA per 1 day)
NORTREL 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG		QL (1.334 EA per 1 day)
NORTREL 1/35 (21) ORAL TABLET 1-35 MG-MCG (21)		QL (1.334 EA per 1 day)
NORTREL 1/35 (28) ORAL TABLET 1-35 MG-MCG	(norethindrone-ethin estradiol)	QL (1.334 EA per 1 day)
NORTREL 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG		QL (1.334 EA per 1 day)

Drug		Notes
NYLIA 1/35 (28) ORAL TABLET 1-35 MG-MCG	(norethindrone-ethin estradiol)	QL (1.334 EA per 1 day)
NYLIA 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG		QL (1.334 EA per 1 day)
OPCICON ONE-STEP ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
OPILL ORAL TABLET 0.075 MG		
OPTION-2 ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
ORQUIDEA ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
PHILITH ORAL TABLET 0.4-35 MG-MCG		QL (1.334 EA per 1 day)
PIMTREA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	(desog-e.estradiol/e.estradiol)	QL (1 EA per 1 day)
PORTIA 28 ORAL TABLET 0.15-0.03 MG	(levonorgestrel-ethinyl estrad)	QL (1.334 EA per 1 day)
RECLIPSEN (28) ORAL TABLET 0.15-0.03 MG	(desogestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
SETLAKIN ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91)	(levonorgestrel-ethinyl estrad)	QL (1 EA per 1 day)
SHAROBEL ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
SIMLIYA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	(desog-e.estradiol/e.estradiol)	QL (1 EA per 1 day)
SIMPESSE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7)	(l norgest/e.estradiol-e.estrad)	
SPRINTEC (28) ORAL TABLET 0.25-0.035 MG	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
SYEDA ORAL TABLET 3-0.03 MG	(drospirenone-ethinyl estradiol)	QL (1.334 EA per 1 day)
TAKE ACTION ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
TARINA FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
TARINA FE 1-20 EQ (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	(norethindrone-e.estradiol-iron)	QL (1 EA per 1 day)
TRI-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28)	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
TRI-LINYAH ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28)	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
TRI-LO-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
TRI-LO-MARZIA ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
TRI-LO-MILI ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
TRI-LO-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
TRI-MILI ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28)	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)

Drug		Notes
TRI-SPRINTEC (28) ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28)	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
TRI-VYLIBRA LO ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
TRI-VYLIBRA ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28)	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
TULANA ORAL TABLET 0.35 MG	(norethindrone (contraceptive))	QL (1.334 EA per 1 day)
TURQOZ (28) ORAL TABLET 0.3-30 MG-MCG	(norgestrel-ethinyl estradiol)	QL (1.334 EA per 1 day)
TYBLUME ORAL TABLET,CHEWABLE 0.1 MG- 20 MCG		QL (1.334 EA per 1 day)
VALTYA ORAL TABLET 1-35 MG-MCG, 1-50 MG-MCG	(ethynodiol diac-eth estradiol)	QL (1.334 EA per 1 day)
VELIVET TRIPHASIC REGIMEN (28) ORAL TABLET 0.1/.125/.15-25 MG-MCG		QL (1.334 EA per 1 day)
VESTURA (28) ORAL TABLET 3-0.02 MG	(drospirenone-ethinyl estradiol)	QL (1 EA per 1 day)
VIENVA ORAL TABLET 0.1-20 MG-MCG	(levonorgestrel-ethinyl estrad)	QL (1.334 EA per 1 day)
VIORELE (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	(desog-e.estradiol/e.estradiol)	QL (1 EA per 1 day)
VOLNEA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5	(desog-e.estradiol/e.estradiol)	QL (1 EA per 1 day)
VYFEMLA (28) ORAL TABLET 0.4-35 MG-MCG		QL (1.334 EA per 1 day)
VYLIBRA ORAL TABLET 0.25-0.035 MG	(norgestimate-ethinyl estradiol)	QL (1.334 EA per 1 day)
WERA (28) ORAL TABLET 0.5-35 MG-MCG		QL (1.334 EA per 1 day)
YOUR CHOICE ORAL TABLET 1.5 MG	(levonorgestrel)	QL (24 EA per 365 days)
ZARAH ORAL TABLET 3-0.03 MG	(drospirenone-ethinyl estradiol)	QL (1.334 EA per 1 day)
ZOVIA 1-35 (28) ORAL TABLET 1-35 MG-MCG	(ethynodiol diac-eth estradiol)	QL (1.334 EA per 1 day)
ZUMANDIMINE (28) ORAL TABLET 3-0.03 MG	(drospirenone-ethinyl estradiol)	QL (1.334 EA per 1 day)
Contraceptives,Transdermal		
<i>norelgestromin-ethin.estradiol transdermal patch weekly 150-35 mcg/24 hr</i>	(Xulane)	QL (0.143 EA per 1 day)
XULANE TRANSDERMAL PATCH WEEKLY 150-35 MCG/24 HR	(norelgestromin-ethin.estradiol)	QL (0.143 EA per 1 day)
ZAFEMY TRANSDERMAL PATCH WEEKLY 150-35 MCG/24 HR	(norelgestromin-ethin.estradiol)	QL (0.143 EA per 1 day)
Oxytocics		

Drug		Notes
<i>methylergonovine oral tablet 0.2 mg</i>		
Cough And Cold		
1st Gen Antihistamine & Decongestant Combinations		
APRODINE ORAL TABLET 2.5-60 MG	(triprolidine-pseudoephedrine)	QL (3 EA per 1 day)
<i>promethazine-phenylephrine oral syrup 6.25-5 mg/5 ml</i>	(Promethazine VC)	
SUDOGEST COLD AND ALLERGY ORAL TABLET 4-60 MG		QL (3 EA per 1 day)
WAL-ACT D COLD AND ALLERGY ORAL TABLET 2.5-60 MG	(triprolidine-pseudoephedrine)	QL (3 EA per 1 day)
Antitussives,Non-Narcotic		
<i>benzonatate oral capsule 100 mg, 200 mg</i>		QL (3 EA per 1 day)
Expectorants		
ADULT TUSSIN CHEST CONGESTION ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
ADULT WAL-TUSSIN ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
CHEST CONGESTION RELIEF ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
CHEST CONGESTION RELIEF ORAL TABLET 400 MG	(guaifenesin)	
CHILD MUCUS RELIEF EXPECTORANT ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
CHILDREN'S CHEST CONGESTION ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
CHILDRENS GILTUSS EX ORAL LIQUID 200 MG/5 ML		QL (120 ML per 30 days)
COUGH SYRUP ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
EXPECTORANT ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
EXPECTORANT ORAL TABLET 200 MG	(guaifenesin)	
FENESIN IR ORAL TABLET 400 MG	(guaifenesin)	
GERI-TUSSIN ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
G-FENESIN ORAL TABLET 400 MG	(guaifenesin)	
GILTUSS EX ORAL LIQUID 200 MG/5 ML		QL (120 ML per 30 days)
GUAIFED (GUAIFENESIN) ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
<i>guaifenesin oral liquid 100 mg/5 ml</i>	(Adult Tussin Chest Congestion)	QL (240 ML per 30 days)
<i>guaifenesin oral tablet 200 mg</i>	(Expectorant)	
<i>guaifenesin oral tablet 400 mg</i>	(Chest Congestion Relief)	
<i>guaifenesin oral tablet extended release 12hr 1,200 mg</i>	(Mucus Relief ER)	

Drug		Notes
<i>guaifenesin oral tablet extended release 12hr 600 mg</i>	(Mucus Relief ER)	QL (2 EA per 1 day)
LIQUITUSS GG ORAL LIQUID 200 MG/5 ML		QL (120 ML per 30 days)
MAXTUSSIN ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
MUCOLYTE (GUAIFENESIN) ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
MUCOSA ORAL TABLET 400 MG	(guaifenesin)	
MUCUS RELIEF ER ORAL TABLET EXTENDED RELEASE 12HR 1,200 MG	(guaifenesin)	
MUCUS RELIEF ER ORAL TABLET EXTENDED RELEASE 12HR 600 MG	(guaifenesin)	QL (2 EA per 1 day)
MUCUS RELIEF ORAL TABLET 400 MG	(guaifenesin)	
MUCUS-ER MAX ORAL TABLET EXTENDED RELEASE 12HR 1,200 MG	(guaifenesin)	
REFENESEN ORAL TABLET 400 MG	(guaifenesin)	
SCOT-TUSSIN EXPECTORANT ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
TUSSIN CHEST CONGESTION ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
TUSSIN MUCUS-CHEST CONGESTION ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
TUSSIN ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
TUSSIN ORAL TABLET 400 MG	(guaifenesin)	
WAL-TUSSIN ORAL LIQUID 100 MG/5 ML	(guaifenesin)	QL (240 ML per 30 days)
Narcotic Antitussive-1st Generation Antihistamine		
<i>promethazine-codeine oral syrup 6.25-10 mg/5 ml</i>		QL (120 ML per 30 days); Age (Min 6 Years)
Narcotic Antitussive-Anticholinergic Comb.		
<i>hydrocodone-homatropine soln 5-1.5 mg/5 ml</i>	(Hycodan (with homatropine))	QL (240 ML per 30 days); Age (Min 6 Years)
HYDROMET ORAL SOLUTION 5-1.5 MG/5 ML	(hydrocodone-homatropine)	QL (240 ML per 30 days); Age (Min 6 Years)
Narcotic Antitussive-Expectorant Combination		
<i>codeine-guaifen 10-100 mg/5 ml (otc)</i>	(G Tussin AC)	QL (240 ML per 27 days); Age (Min 6 Years)
<i>codeine-guaifen 10-100 mg/5 ml d/f (otc)</i>	(G Tussin AC)	QL (240 ML per 27 days); Age (Min 6 Years)
G TUSSIN AC ORAL LIQUID 10-100 MG/5 ML	(codeine-guaifenesin)	QL (240 ML per 27 days); Age (Min 6 Years)
<i>guaifen-codeine 100-10 mg/5 ml (otc) 10-100 mg/5 ml</i>	(G Tussin AC)	QL (240 ML per 27 days); Age (Min 6 Years)

Drug		Notes
GUAIFENESIN AC ORAL LIQUID 10-100 MG/5 ML	(codeine-guaifenesin)	QL (240 ML per 27 days); Age (Min 6 Years)
<i>guaifenesin-codeine 100-10 mg/5 ml cup inner (otc) 10-100 mg/5 ml</i>	(G Tussin AC)	QL (240 ML per 27 days); Age (Min 6 Years)
<i>guaifenesin-codeine 100-10 mg/5 ml cup outer (otc) 10-100 mg/5 ml</i>	(G Tussin AC)	QL (240 ML per 27 days); Age (Min 6 Years)
<i>guaifenesin-codeine 200-20 mg/10 ml cup inner (otc) 10-100 mg/5 ml</i>	(G Tussin AC)	
<i>guaifenesin-codeine 200-20 mg/10 ml cup outer (otc) 10-100 mg/5 ml</i>	(G Tussin AC)	
MAXI-TUSS AC ORAL LIQUID 10-100 MG/5 ML	(codeine-guaifenesin)	QL (240 ML per 27 days); Age (Min 6 Years)
Non-Narcotic Antitussive And Expectorant Comb.		
ALTITUSS ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
BIOCOTRON ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
CHEST CONGESTION RELIEF DM ORAL SYRUP 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
CHILDREN'S GILTUSS COUGH-CHEST ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
<i>dextromethorphan-guaifenesin oral liquid 10-100 mg/5 ml</i>	(Altituss)	
<i>dextromethorphan-guaifenesin oral syrup 10-100 mg/5 ml</i>	(Chest Congestion Relief DM)	
DIABETIC TUSSIN DM ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
EXPECTORANT DM ORAL SYRUP 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
GERI-TUSSIN DM ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
GILTUSS COUGH-CONGESTION ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
GILTUSS DIABETIC ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
GILTUSS HBP ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
GUAIASORB DM ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
GUAIFED-DM ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
GUAIFENESIN-DM ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
MAXI-TUSS G ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
MAXTUSSIN DM ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	

Drug		Notes
MUCOLYTE-DM ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
NEO-TUSS ORAL LIQUID 30-200 MG/5 ML		
SAFE TUSSIN DM ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
SORBUGEN NR ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
TUSNEL DIABETIC ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
TUSSIN DM CLEAR ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
TUSSIN DM COUGH AND CHEST ORAL SYRUP 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
TUSSIN DM ORAL LIQUID 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
TUSSIN DM ORAL SYRUP 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
WAL-TUSSIN DM CLEAR ORAL SYRUP 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
WAL-TUSSIN DM ORAL SYRUP 10-100 MG/5 ML	(dextromethorphan-guaifenesin)	
Sympathomimetic Agents		
12 HOUR DECONGESTANT ORAL TABLET EXTENDED RELEASE 120 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
12 HOUR NASAL DECONGEST (PSE) ORAL TABLET EXTENDED RELEASE 120 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
LONG ACTING NASAL DECONG (PSE) ORAL TABLET EXTENDED RELEASE 120 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
NASAL DECONGESTANT (PSEUDOEPH) ORAL TABLET 30 MG	(pseudoephedrine hcl)	QL (3 EA per 1 day)
NASAL DECONGESTANT (PSEUDOEPH) ORAL TABLET EXTENDED RELEASE 120 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
NEXAFED ORAL TABLET (ABUSE-RESISTANT) 30 MG		QL (3 EA per 1 day)
<i>pseudoephedrine hcl oral tablet 30 mg</i>	(Nasal Decongestant (pseudoeph))	QL (3 EA per 1 day)
<i>pseudoephedrine hcl oral tablet 60 mg</i>	(Sudogest)	QL (2 EA per 1 day)
<i>pseudoephedrine hcl oral tablet extended release 120 mg</i>	(12 Hour Decongestant)	QL (2 EA per 1 day)
SINUS 12 HOUR ORAL TABLET EXTENDED RELEASE 120 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
SINUS-CONGESTION ORAL TABLET 30 MG	(pseudoephedrine hcl)	QL (3 EA per 1 day)

Drug		Notes
SUDAFED 12 HOUR ORAL TABLET EXTENDED RELEASE 120 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
SUDOGEST 12-HOUR ORAL TABLET EXTENDED RELEASE 120 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
SUDOGEST ORAL TABLET 30 MG	(pseudoephedrine hcl)	QL (3 EA per 1 day)
SUDOGEST ORAL TABLET 60 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
SUPHEDRIN ORAL LIQUID 15 MG/5 ML		
SUPHEDRINE 12 HOUR ORAL TABLET EXTENDED RELEASE 120 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
WAL-PHED 12 HOUR ORAL TABLET EXTENDED RELEASE 120 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
WAL-PHED D ORAL TABLET EXTENDED RELEASE 120 MG	(pseudoephedrine hcl)	QL (2 EA per 1 day)
WAL-PHED ORAL TABLET 30 MG	(pseudoephedrine hcl)	QL (3 EA per 1 day)
ZEPHREX-D ORAL TABLET (ABUSE- RESISTANT) 30 MG		QL (3 EA per 1 day)
Dermatology - Acne		
Acne Agents, Systemic		
ACCUTANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	(isotretinoin)	PA
AMNESTEEM ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	(isotretinoin)	PA
CLARAVIS ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	(isotretinoin)	PA
<i>isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg</i>	(Accutane)	PA
ZENATANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	(isotretinoin)	PA
Rosacea Agents, Topical		
<i>metronidazole topical cream 0.75 %</i>	(Rosadan)	
<i>metronidazole topical gel 0.75 %</i>	(Rosadan)	
ROSADAN TOPICAL CREAM 0.75 %	(metronidazole)	
Topical Preparations, Antibacterials		
ANTISEPTIC SKIN CLNSR (CHLORHE) TOPICAL LIQUID 4 %	(chlorhexidine gluconate)	
<i>chlorhexidine gluconate topical liquid 4 %</i>	(Antiseptic Skin Clnsr(chlorhe))	
Vitamin A Derivatives		
<i>adapalene topical gel 0.1 %</i>	(Differin)	PA
<i>adapalene topical gel 0.3 %</i>		PA
<i>tretinoin topical cream 0.025 %, 0.05 %</i>	(Retin-A)	PA
Dermatology - Antiinfective		
Topical Antibiotics		
<i>bacitracin topical ointment 500 unit/gram</i>	(Bacitraycin Plus)	

Drug	Notes
<i>bacitracin zinc topical ointment 500 unit/gram</i> (Antibiotic (bacitracin zinc))	
BACITRAYCIN PLUS TOPICAL OINTMENT 500 UNIT/GRAM (bacitracin)	
<i>clindamycin phosphate topical gel 1 %</i>	
<i>clindamycin phosphate topical lotion 1 %</i> (Cleocin T)	
<i>clindamycin phosphate topical solution 1 %</i>	
FIRST AID ANTIBIOTIC TOPICAL OINTMENT 3.5-500-10,000 MG-UNIT-UNIT	
<i>mupirocin topical ointment 2 %</i> (Centany)	
Topical Antifungal/Antiinflammatory, Steriod Agent	
<i>clotrimazole-betamethasone topical cream 1-0.05 %</i>	
Topical Antifungals	
ANTIFUNGAL (CLOTRIMAZOLE) TOPICAL CREAM 1 % (clotrimazole)	
ANTIFUNGAL (MICONAZOLE) TOPICAL CREAM 2 % (miconazole nitrate)	
ANTIFUNGAL EXTRA THICK TOPICAL CREAM 2 % (miconazole nitrate)	
ATHLETE'S FOOT (CLOTRIMAZOLE) TOPICAL CREAM 1 % (clotrimazole)	
ATHLETE'S FOOT (CLOTRIMAZOLE) TOPICAL SOLUTION 1 % (clotrimazole)	
ATHLETE'S FOOT (TERBINAFINE) TOPICAL CREAM 1 % (terbinafine hcl)	
ATHLETIC FOOT CREAM TOPICAL CREAM 1 % (clotrimazole)	
BAZA ANTIFUNGAL TOPICAL CREAM 2 % (miconazole nitrate)	
<i>ciclopirox topical cream 0.77 %</i> (Ciclodan)	PA
<i>ciclopirox topical gel 0.77 %</i>	PA
<i>ciclopirox topical shampoo 1 %</i>	PA
<i>ciclopirox topical solution 8 %</i> (Ciclodan)	PA
<i>ciclopirox topical suspension 0.77 %</i> (Loprox (as olamine))	PA
<i>clotrimazole topical cream 1 %</i> (Antifungal (clotrimazole))	
<i>clotrimazole topical solution 1 %</i> (Athlete's Foot (clotrimazole))	
DERMAFUNGAL TOPICAL CREAM 2 % (miconazole nitrate)	
DESENEX TOPICAL CREAM 2 % (miconazole nitrate)	
INZO ANTIFUNGAL TOPICAL CREAM 2 % (miconazole nitrate)	
ITCH RELIEF (CLOTRIMAZOLE) TOPICAL CREAM 1 % (clotrimazole)	

Drug	Notes
JOCK ITCH (CLOTRIMAZOLE) TOPICAL CREAM 1 % (clotrimazole)	
JOCK ITCH (TERBINAFINE) TOPICAL CREAM 1 % (terbinafine hcl)	
<i>ketoconazole topical cream 2 %</i>	
<i>ketoconazole topical shampoo 2 %</i>	
KLAYESTA TOPICAL POWDER 100,000 UNIT/GRAM (nystatin)	
LAMISIL AT TOPICAL AEROSOL, SPRAY 1 %	
LASOLEX AC TOPICAL CREAM 2 % (miconazole nitrate)	
LASOLEX TOPICAL SOLUTION 1 % (clotrimazole)	
MICOCLEAR TOPICAL CREAM 1 % (clotrimazole)	
<i>miconazole nitrate topical cream 2 %</i> (Antifungal (miconazole))	
MICOTRIN AC TOPICAL CREAM 1 % (clotrimazole)	
MYCOZYL AC TOPICAL CREAM 1 % (clotrimazole)	
<i>naftifine topical cream 1 %</i>	PA
NYAMYC TOPICAL POWDER 100,000 UNIT/GRAM (nystatin)	
<i>nystatin topical cream 100,000 unit/gram</i>	
<i>nystatin topical ointment 100,000 unit/gram</i>	
<i>nystatin topical powder 100,000 unit/gram</i> (Klayesta)	
NYSTOP TOPICAL POWDER 100,000 UNIT/GRAM (nystatin)	
REMEDY ANTIFUNGAL TOPICAL CREAM 2 % (miconazole nitrate)	
RINGWORM TOPICAL CREAM 1 % (clotrimazole)	
SECURA ANTIFUNGAL EXTRA THICK TOPICAL CREAM 2 % (miconazole nitrate)	
<i>terbinafine hcl topical cream 1 %</i> (Athlete's Foot (terbinafine))	
TRIMAZOLE TOPICAL CREAM 1 % (clotrimazole)	
Topical Antiparasitics	
LICE KILLING (PERMETHRIN) TOPICAL LIQUID 1 % (permethrin)	
LICE KILLING TOPICAL SHAMPOO 0.33-4 %	
LICE TREATMENT (PERMETHRIN) TOPICAL LIQUID 1 % (permethrin)	
LICE TREATMENT TOPICAL LIQUID 1 % (permethrin)	
NIX CREME RINSE TOPICAL LIQUID 1 % (permethrin)	
<i>permethrin topical cream 5 %</i>	
RID LICE KILLING TOPICAL SHAMPOO 0.33-4 %	

Drug	Notes
Topical Sulfonamides	
<i>silver sulfadiazine topical cream 1 %</i> (SSD)	
SSD TOPICAL CREAM 1 % (silver sulfadiazine)	
Dermatology - Antiinflammatory	
Topical Anti-Inflammatory Steroidal	
ALA-CORT TOPICAL CREAM 1 % (hydrocortisone)	
ANTI-ITCH (HC) TOPICAL CREAM 1 % (hydrocortisone)	
ANTI-ITCH (HC) TOPICAL OINTMENT 1 % (hydrocortisone)	
AQUAPHOR ITCH RELIEF TOPICAL OINTMENT 1 % (hydrocortisone)	
<i>betamethasone dipropionate topical cream 0.05 %</i>	
<i>betamethasone dipropionate topical ointment 0.05 %</i>	
<i>betamethasone valerate topical cream 0.1 %</i>	
<i>betamethasone valerate topical ointment 0.1 %</i>	
<i>betamethasone, augmented topical cream 0.05 %</i>	
<i>betamethasone, augmented topical ointment 0.05 %</i> (Diprolene (augmented))	
<i>clobetasol scalp solution 0.05 %</i>	
<i>clobetasol topical cream 0.05 %</i>	
<i>clobetasol topical ointment 0.05 %</i>	
<i>clobetasol-emollient topical cream 0.05 %</i>	PA
CORTISONE (HYDROCORTISONE) TOPICAL CREAM 1 % (hydrocortisone)	
CORTISONE WITH ALOE TOPICAL CREAM 1 % (hydrocortisone-aloe vera)	
CORTIZONE-10 TOPICAL CREAM 1 % (hydrocortisone)	
CORTIZONE-10 TOPICAL OINTMENT 1 % (hydrocortisone)	
<i>fluocinolone topical cream 0.025 %</i> (Synalar)	
<i>fluocinolone topical ointment 0.025 %</i> (Synalar)	
<i>fluocinolone topical solution 0.01 %</i> (Synalar)	
<i>fluocinonide topical cream 0.1 %</i> (Vanos)	PA
<i>fluocinonide topical solution 0.05 %</i>	
<i>hydrocortisone acetate topical cream 1 %</i> (Vanicream HC)	
<i>hydrocortisone acetate topical ointment 1 %</i>	
<i>hydrocortisone topical cream 1 %</i> (Ala-Cort)	
<i>hydrocortisone topical cream 2.5 %</i>	

Drug		Notes
<i>hydrocortisone topical cream with perineal applicator 1 %</i>		
<i>hydrocortisone topical cream with perineal applicator 2.5 %</i>	(Procto-Med HC)	
<i>hydrocortisone topical ointment 1 %</i>	(Anti-Itch (HC))	
<i>hydrocortisone topical ointment 2.5 %</i>		
<i>hydrocortisone-aloe vera topical cream 1 %</i>	(Cortisone with Aloe)	
HYDROCREAM TOPICAL CREAM 1 %	(hydrocortisone)	
ITCH RELIEF (HC) TOPICAL OINTMENT 1 %	(hydrocortisone)	
<i>mometasone topical ointment 0.1 %</i>		
MONISTAT CARE (HYDROCORTISONE) TOPICAL CREAM 1 %	(hydrocortisone)	
NOBLE FORMULA HC TOPICAL CREAM 1 %	(hydrocortisone)	
PREPARATION H HYDROCORTISONE TOPICAL CREAM 1 %	(hydrocortisone)	
PROCTO-MED HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	(hydrocortisone)	
PROCTOZONE-HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	(hydrocortisone)	
<i>triamcinolone acetonide topical cream 0.025 %, 0.1 %</i>		
<i>triamcinolone acetonide topical cream 0.5 %</i>	(Triderm)	
<i>triamcinolone acetonide topical lotion 0.1 %</i>		PA
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>		
TRIDERM TOPICAL CREAM 0.5 %	(triamcinolone acetonide)	
VANICREAM HC TOPICAL CREAM 1 %	(hydrocortisone acetate)	
Topical Anti-Inflammatory, Nsaids		
ARTHRITIS PAIN (DICLOFENAC) TOPICAL GEL 1 %	(diclofenac sodium)	QL (200 GM per 30 days)
<i>diclofenac sodium topical gel 1 %</i>	(Arthritis Pain (diclofenac))	QL (200 GM per 30 days)
Dermatology - Miscellaneous		
Antiperspirants		
DRYSOL DAB-O-MATIC TOPICAL SOLUTION 20 %	(aluminum chloride)	
DRYSOL TOPICAL SOLUTION 20 %	(aluminum chloride)	
Antiseborrheic Agents		
ANTI-DANDRUFF TOPICAL SHAMPOO 1 %	(selenium sulfide)	
DANDRUFF SHAMPOO (SELENIUM) TOPICAL SHAMPOO 1 %	(selenium sulfide)	
<i>selenium sulfide topical lotion 2.5 %</i>		
SELSUN BLUE 2-IN-1 TOPICAL SHAMPOO 1 %	(selenium sulfide)	

Drug		Notes
SELSUN BLUE TOPICAL SHAMPOO 1 %	(selenium sulfide)	
Antiseptics, General		
ALCOHOL PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
ALCOHOL PREP PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
<i>alcohol swabs topical pads, medicated</i>	(Alcohol Pads)	
ALCOHOL WIPES TOPICAL PADS, MEDICATED	(alcohol swabs)	
CARETOUCH ALCOHOL PREP PAD TOPICAL PADS, MEDICATED	(alcohol swabs)	
CURITY ALCOHOL SWABS TOPICAL PADS, MEDICATED	(alcohol swabs)	
DROPSAFE ALCOHOL PREP PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
EASY COMFORT ALCOHOL PAD TOPICAL PADS, MEDICATED	(alcohol swabs)	
EASY TOUCH ALCOHOL PREP PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
INCONTROL ALCOHOL PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
PRO COMFORT ALCOHOL PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
PRO-COMFORT ALCOHOL PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
PURE COMFORT ALCOHOL PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
SURE COMFORT ALCOHOL PREP PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
SURE-PREP ALCOHOL PREP PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
TRUE COMFORT ALCOHOL PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
TRUE COMFORT PRO ALCOHOL PADS TOPICAL PADS, MEDICATED	(alcohol swabs)	
ULTILET ALCOHOL SWAB TOPICAL PADS, MEDICATED	(alcohol swabs)	
WEBCOL TOPICAL PADS, MEDICATED	(alcohol swabs)	
Irritants/Counter-Irritants		
ARTHRITIS PAIN RELIEF(CAPSAIC) TOPICAL CREAM 0.075 %, 0.1 %	(capsaicin)	QS LIMIT. PATIENTS MAY RECEIVE UP TO 1 TUBE WITHOUT PA PER MONTH.; QL (1 GM per 30 days)
ASPERFLEX HOT TOPICAL ADHESIVE PATCH, MEDICATED 0.025-1.25 %		QL (40 EA per 30 days)

Drug		Notes
CAPSAICIN HP TOPICAL CREAM 0.1 %	(capsaicin)	QS LIMIT. PATIENTS MAY RECEIVE UP TO 1 TUBE WITHOUT PA PER MONTH.; QL (1 GM per 30 days)
<i>capsaicin topical adhesive patch,medicated 0.025 %</i>	(Capsimide)	QL (40 EA per 30 days)
<i>capsaicin topical cream 0.025 %</i>	(Arthritis-Muscle (capsaicin))	QS LIMIT. PATIENTS MAY RECEIVE UP TO 1 TUBE WITHOUT PA PER MONTH.; QL (1 GM per 30 days)
<i>capsaicin topical cream 0.075 %, 0.1 %</i>	(Arthritis Pain Relief(capsaicin))	QS LIMIT. PATIENTS MAY RECEIVE UP TO 1 TUBE WITHOUT PA PER MONTH.; QL (1 GM per 30 days)
CAPSIMIDE TOPICAL ADHESIVE PATCH,MEDICATED 0.025 %	(capsaicin)	QL (40 EA per 30 days)
CAPZIX TOPICAL CREAM 0.1 %	(capsaicin)	QS LIMIT. PATIENTS MAY RECEIVE UP TO 1 TUBE WITHOUT PA PER MONTH.; QL (1 GM per 30 days)
MEDICATED HEAT PATCH TOPICAL ADHESIVE PATCH,MEDICATED 0.025 %	(capsaicin)	QL (40 EA per 30 days)
PAIN RELIEVING(CAM-M.SAL-MENT) TOPICAL ADHESIVE PATCH,MEDICATED		QL (40 EA per 30 days)
SALONPAS (CAPSAICIN-MENTHOL) TOPICAL ADHESIVE PATCH,MEDICATED 0.025-1.25 %		QL (40 EA per 30 days)
ZOSTRIX TOPICAL CREAM 0.033 %		QS LIMIT. PATIENTS MAY RECEIVE UP TO 1 TUBE WITHOUT PA PER MONTH.; QL (1 GM per 30 days)
ZOSTRIX-HP TOPICAL CREAM 0.1 %	(capsaicin)	QS LIMIT. PATIENTS MAY RECEIVE UP TO 1 TUBE WITHOUT PA PER MONTH.; QL (1 GM per 30 days)
Keratolytics		
ACNE MEDICATION TOPICAL GEL 5 %	(benzoyl peroxide)	
ADVANCED EXFOLIATING CLEANSER TOPICAL CLEANSER 5 %	(benzoyl peroxide)	
<i>benzoyl peroxide topical cleanser 5 %</i>	(Advanced Exfoliating Cleanser)	
<i>benzoyl peroxide topical gel 5 %</i>	(Acne Medication)	
Topical Anti-Inflammatory Steroid-Local Anesthetic		
ANALPRAM-HC TOPICAL LOTION 2.5-1 %		
PRAMOSONE TOPICAL CREAM 1-1 %	(hydrocortisone-pramoxine)	
PRAMOSONE TOPICAL LOTION 1-1 %, 2.5-1 %		
Topical Antineoplastic & Premalignant Lesion Agnts		
<i>fluorouracil topical solution 2 %, 5 %</i>		
Topical Local Anesthetics		

Drug	Notes
ANLIDO TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
ASPERCREME (LIDOCAINE) TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
ASPERFLEX (LIDOCAINE) TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
BLUE-EMU LIDOCAINE PATCH TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
DERMACINRX LIDOCAN TOPICAL ADHESIVE PATCH,MEDICATED 5 % (lidocaine)	
LIDO KING TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
LIDOCAINE PAIN RELIEF TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
<i>lidocaine topical adhesive patch,medicated 4 %</i> (Anlido)	
<i>lidocaine topical adhesive patch,medicated 5 %</i> (DermacinRx Lidocan)	
<i>lidocaine topical ointment 5 %</i>	
<i>lidocaine-prilocaine topical cream 2.5-2.5 %</i>	
LIDOCAN III TOPICAL ADHESIVE PATCH,MEDICATED 5 % (lidocaine)	
LIDOCAN IV TOPICAL ADHESIVE PATCH,MEDICATED 5 % (lidocaine)	
LIDOCAN V TOPICAL ADHESIVE PATCH,MEDICATED 5 % (lidocaine)	
LIDOCARE TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
LIDOCORE TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
LIDOFOR TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
LIDOGUARD TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
LIDOTRODE TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
LIDOZO TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
NEUROCAINE TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
RE-LIEVED LIDOCAINE TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	
SALONPAS (LIDOCAINE) TOPICAL ADHESIVE PATCH,MEDICATED 4 % (lidocaine)	

Drug	Notes
Dermatology - Psoriasis/Eczema	
Antipsoriatic Agents, Systemic	
<i>acitretin oral capsule 10 mg, 25 mg</i>	
COSENTYX (2 SYRINGES) SUBCUTANEOUS SYRINGE 150 MG/ML	PA; SP
COSENTYX PEN (2 PENS) SUBCUTANEOUS PEN INJECTOR 150 MG/ML	PA; SP
COSENTYX PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML	PA; SP
COSENTYX SUBCUTANEOUS SYRINGE 150 MG/ML	PA; SP
Antipsoriatics Agents	
<i>calcipotriene scalp solution 0.005 %</i> (Pellix)	PA
<i>calcipotriene topical cream 0.005 %</i>	PA
<i>calcipotriene topical ointment 0.005 %</i>	PA
PELLIX SCALP SOLUTION 0.005 % (calcipotriene)	PA
<i>tazarotene topical cream 0.1 %</i> (Tazorac)	PA
<i>tazarotene topical gel 0.05 %</i> (Tazorac)	PA
<i>tazarotene topical gel 0.1 %</i> (Trilitas)	PA
TRILITAS TOPICAL GEL 0.1 % (tazarotene)	PA
Topical Immunosuppressive Agents	
<i>tacrolimus topical ointment 0.03 %, 0.1 %</i>	PA
Diabetes	
Antihypergly, (Dpp-4) Inhibitor & Biguanide Comb.	
<i>alogliptin-metformin oral tablet 12.5-1,000 mg, 12.5-500 mg</i> (Kazano)	
Antihypergly, Dpp-4 Enzyme Inhib & Thiazolidinedione	
<i>alogliptin-pioglitazone oral tablet 12.5-30 mg, 25-45 mg</i> (Oseni)	
<i>alogliptin-pioglitazone oral tablet 25-15 mg, 25-30 mg</i>	
Antihypergly, Incretin Mimetic (Glp-1 Recep. Agonist)	
<i>exenatide subcutaneous pen injector 10 mcg/dose (250 mcg/ml) 2.4 ml, 5 mcg/dose (250 mcg/ml) 1.2 ml</i>	PA
<i>liraglutide subcutaneous pen injector 0.6 mg/0.1 ml (18 mg/3 ml)</i> (Victoza 2-Pak)	PA
OZEMPIC ORAL TABLET 1.5 MG, 4 MG, 9 MG	PA

Drug	Notes
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	PA
TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML	PA
Antihyperglycemic-Sod/Gluc Cotransport2(Sglt2)Inhib	
BRENZAVVY ORAL TABLET 20 MG (bexagliflozin)	
dapagliflozin oral tablet 10 mg, 5 mg (Farxiga)	
JARDIANCE ORAL TABLET 10 MG, 25 MG	PA
STEGLATRO ORAL TABLET 15 MG, 5 MG	
Antihyperglycemic, Alpha-Glucosidase Inhib (N-S)	
acarbose oral tablet 100 mg, 25 mg, 50 mg	
Antihyperglycemic, Dpp-4 Inhibitors	
alogliptin oral tablet 12.5 mg, 25 mg (Nesina)	
alogliptin oral tablet 6.25 mg	
Antihyperglycemic, Insulin-Release Stimulant Type	
glimepiride oral tablet 1 mg, 2 mg, 4 mg	
glipizide oral tablet 10 mg, 5 mg	
glipizide oral tablet extended release 24hr 10 mg, 2.5 mg, 5 mg	
glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg	
nateglinide oral tablet 120 mg, 60 mg	
repaglinide oral tablet 0.5 mg, 1 mg, 2 mg	
Antihyperglycemic, Insulin-Response Enhancer (N-S)	
pioglitazone oral tablet 15 mg, 30 mg, 45 mg (Actos)	
Antihyperglycemic,Biguanide Type(Non- Sulfonylurea)	
metformin oral solution 500 mg/5 ml (Riomet)	
metformin oral tablet 1,000 mg, 500 mg, 850 mg	
metformin oral tablet extended release 24 hr 500 mg, 750 mg	
Antihyperglycemic,Insulin-Rel Stim.& Biguanide Cmb	
glipizide-metformin oral tablet 2.5-250 mg, 2.5- 500 mg, 5-500 mg	

Drug		Notes
glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg		
Blood Sugar Diagnostics		
ACCU-CHEK GUIDE TEST STRIPS STRIP	(blood sugar diagnostic)	QS=1.2 IN 1 DAYS IF NO HISTORY OF Insulins IN 120 DAYS QS=4.5 IN 1 DAYS IF HISTORY OF Insulins IN 120 DAYS
RELION PRIME TEST STRIPS STRIP	(blood sugar diagnostic)	QS=1.2 IN 1 DAYS IF NO HISTORY OF Insulins IN 120 DAYS QS=4.5 IN 1 DAYS IF HISTORY OF Insulins IN 120 DAYS
TRUE METRIX GLUCOSE TEST STRIP STRIP	(blood sugar diagnostic)	QS=1.2 IN 1 DAYS IF NO HISTORY OF Insulins IN 120 DAYS QS=4.5 IN 1 DAYS IF HISTORY OF Insulins IN 120 DAYS
Diabetic Supplies		
ACCU-CHEK FASTCLIX LANCING DEV KIT	(lancing device with lancets)	QL (1 EA per 30 days)
ACCU-CHEK GUIDE GLUCOSE METER	(blood-glucose meter)	
ACCU-CHEK GUIDE L1-L2 CTRL SOL SOLUTION		QL (1 EA per 90 days)
ACCU-CHEK GUIDE ME GLUCOSE MTR	(blood-glucose meter)	
ACCU-CHEK SOFT DEV LANCETS KIT	(lancing device with lancets)	QL (1 EA per 30 days)
ADJUSTABLE LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
ADVANCED LANCING DEVICE KIT	(lancing device with lancets)	QL (1 EA per 30 days)
ADVOCATE LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
ALTERNATE SITE LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
AQUA LANCE LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
AUTOLET IMPRESSION LANC DEV KIT	(lancing device with lancets)	QL (1 EA per 30 days)
AUTOLET LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
CAREONE LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
CARETOUCH LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
DROPLET LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
EASY MINI EJECT LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
EASY TOUCH LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
FORA LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
FREESTYLE LIBRE 14 DAY READER		PA; QL (1 EA per 730 days)
FREESTYLE LIBRE 14 DAY SENSOR KIT		PA; QL (1 EA per 14 days)
FREESTYLE LIBRE 2 PLUS SENSOR DEVICE		PA; QL (1 EA per 14 days)
FREESTYLE LIBRE 2 READER		PA; QL (1 EA per 730 days)
FREESTYLE LIBRE 2 SENSOR KIT		PA; QL (1 EA per 14 days)
FREESTYLE LIBRE 3 PLUS SENSOR DEVICE		PA; QL (1 EA per 14 days)
FREESTYLE LIBRE 3 SENSOR DEVICE		PA; QL (1 EA per 14 days)

Drug		Notes
HYPOLANCE AST LANCING KIT	(lancing device with lancets)	QL (1 EA per 30 days)
INCONTROL LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
<i>lancing device</i>	(Adjustable Lancing Device)	QL (1 EA per 30 days)
LANCING DEVICE WITH LANCETS	(lancing device)	QL (1 EA per 30 days)
<i>lancing device with lancets kit</i>	(Accu-Chek FastClix Lancing Dev)	QL (1 EA per 30 days)
LANCING SYSTEM	(lancing device)	QL (1 EA per 30 days)
LANZO LANCING DEVICE KIT	(lancing device with lancets)	QL (1 EA per 30 days)
MICROLET 2 LANCING DEVICE KIT	(lancing device with lancets)	QL (1 EA per 30 days)
MICROLET NEXT LANCING DEVICE KIT	(lancing device with lancets)	QL (1 EA per 30 days)
MINI LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
MULTI-LANCET DEVICE 2 KIT	(lancing device with lancets)	QL (1 EA per 30 days)
ON CALL LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
ONETOUCH DELICA PLUS LANC DEV KIT	(lancing device with lancets)	QL (1 EA per 30 days)
PRODIGY LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
RELIAMED MINI LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
RELION PRIME METER	(blood-glucose meter)	
RIGHTEST GD500 LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
SMARTDIABETES VANTAGE	(lancing device)	QL (1 EA per 30 days)
SOLUS V2 LANCING DEVICE KIT	(lancing device with lancets)	QL (1 EA per 30 days)
SURE COMFORT LANCING PEN	(lancing device)	QL (1 EA per 30 days)
SUREFLEX DEVICE WITH LANCETS KIT	(lancing device with lancets)	QL (1 EA per 30 days)
SUREFLEX LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
SURE-PEN LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
TRUE METRIX GLUCOSE METER	(blood-glucose meter)	
TRUE METRIX GO GLUCOSE METER	(blood-glucose meter)	
TRUE METRIX LEVEL 1 SOLUTION	(blood glucose control, low)	QL (1 EA per 90 days)
TRUE METRIX LEVEL 2 SOLUTION	(blood glucose control, normal)	QL (1 EA per 90 days)
TRUE METRIX LEVEL 3 SOLUTION	(blood glucose control, high)	QL (1 EA per 90 days)
TRUEDRAW LANCING DEVICE	(lancing device)	QL (1 EA per 30 days)
TWIST REFILL KT(CSST-NDL-SYR) KIT		QL (16.67 EA per 1 day)

Drug		Notes
ULTI-LANCE	(lancing device)	QL (1 EA per 30 days)
ULTI-LANCE KIT	(lancing device with lancets)	QL (1 EA per 30 days)
Hyperglycemics		
BAQSIMI NASAL SPRAY, NON-AEROSOL 3 MG/ACTUATION		
<i>dextrose oral liquid 15 gram/59 ml</i>	(Gluco Shot)	
<i>dextrose oral liquid 15 gram/60 ml</i>	(TRUEplus Glucose)	
GLUCAGON EMERGENCY KIT (HUMAN) INJECTION RECON SOLN 1 MG		
GLUCOSE GEL ORAL GEL 40 %	(dextrose)	
<i>glucose oral tablet, chewable 2 gram, 4 gram</i>		
<i>glucose oral tablet, chewable 3.75 gram</i>	(TRUEplus Glucose)	
GLUTOSE-15 ORAL GEL 40 %	(dextrose)	
GLUTOSE-45 ORAL GEL 40 %	(dextrose)	
GLUTOSE-5 ORAL GEL 40 %	(dextrose)	
GVOKE HYPOPEN 1-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML		
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML, 1 MG/0.2 ML		
GVOKE PFS 1-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML		
GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML		
TRUEPLUS GLUCOSE ORAL TABLET, CHEWABLE 3.75 GRAM	(glucose)	
Insulins		
ADMELOG SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	(insulin lispro)	PA
ADMELOG U-100 INSULIN LISPRO SUBCUTANEOUS SOLUTION 100 UNIT/ML	(insulin lispro)	
HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50)		PA
HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25)		
HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML		PA
HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)		

Drug		Notes
HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)		PA
HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)		PA
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML		
HUMULIN R REGULAR U-100 INSULIN INJECTION SOLUTION 100 UNIT/ML		
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)		PA
<i>insulin glargine u-300 conc subcutaneous insulin pen 300 unit/ml (1.5 ml)</i>	(Toujeo SoloStar U-300 Insulin)	PA
<i>insulin glargine-yfgn subcutaneous insulin pen 100 unit/ml (3 ml)</i>	(Semglee(insulin glarg- yfgn)Pen)	
<i>insulin glargine-yfgn subcutaneous solution 100 unit/ml</i>	(Semglee(insulin glargine- yfgn))	
<i>insulin lispro protamin-lispro subcutaneous insulin pen 100 unit/ml (75-25)</i>	(Humalog Mix 75-25 KwikPen)	
<i>insulin lispro subcutaneous insulin pen 100 unit/ml</i>	(Admelog SoloStar U-100 Insulin)	
<i>insulin lispro subcutaneous insulin pen, half- unit 100 unit/ml</i>	(Humalog Junior KwikPen U-100)	
<i>insulin lispro subcutaneous solution 100 unit/ml</i>	(Admelog U-100 Insulin lispro)	
LANTUS SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	(insulin glargine)	
NOVOLIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)		
NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30)		PA
NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)		PA
NOVOLIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML		
NOVOLIN R FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)		PA
NOVOLIN R REGULAR U100 INSULIN INJECTION SOLUTION 100 UNIT/ML		

Drug	Notes
NOVOLOG FLEXPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	(insulin aspart u-100)
NOVOLOG MIX 70-30 FLEXPEN SUV 100 UNIT/ML (70-30)	(insulin asp prt-insulin aspart) PA
NOVOLOG MIX 70-30 U-100 INSULN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30)	(insulin asp prt-insulin aspart)
NOVOLOG PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	(insulin aspart u-100)
NOVOLOG U-100 INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML	(insulin aspart u-100)
RELION NOVOLOG MIX 70-30 FLXPN SUV 100 UNIT/ML (70-30)	(insulin asp prt-insulin aspart)
REZVOGLAR KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	
Ear - General Disorders	
Ear Preparations, Misc. Anti-Infectives	
<i>acetic acid otic (ear) solution 2 %</i>	
<i>hydrocortisone-acetic acid otic (ear) drops 1-2 %</i>	
Ear Preparations, Antibiotics	
<i>neomycin-polymyxin-hc otic (ear) drops, suspension 3.5-10,000-1 mg/ml-unit/ml- %</i>	
<i>neomycin-polymyxin-hc otic (ear) solution 3.5- 10,000-1 mg/ml-unit/ml-%</i>	
<i>ofloxacin otic (ear) drops 0.3 %</i>	
Ear Preparations, Ear Wax Removers	
CLEARCANAL EARWAX SOFTENER OTIC (EAR) DROPS 6.5 %	(carbamide peroxide)
CLINERE EAR WAX REMOVAL OTIC (EAR) DROPS 6.5 %	(carbamide peroxide)
DEBROX OTIC (EAR) DROPS 6.5 %	(carbamide peroxide)
EAR DROPS (CARBAMIDE PEROXIDE) OTIC (EAR) DROPS 6.5 %	(carbamide peroxide)
EAR WAX REMOVAL DROPS OTIC (EAR) DROPS 6.5 %	(carbamide peroxide)
EAR WAX REMOVAL KIT OTIC (EAR) DROPS 6.5 %	(carbamide peroxide)
Otic Preparations, Anti-Inflammatory- Antibiotics	
<i>ciprofloxacin-dexamethasone otic (ear) drops, suspension 0.3-0.1 %</i>	
Electrolyte Regulation	

Drug		Notes
Electrolyte Depleters		
<i>calcium acetate(phosphat bind) oral capsule 667 mg</i>		
<i>calcium acetate(phosphat bind) oral tablet 667 mg</i>		
KIONEX ORAL SUSPENSION 15 GRAM/60 ML	(sodium polystyrene sulfonate)	
<i>sevelamer carbonate oral tablet 800 mg</i>	(Renvela)	
<i>sodium polystyrene sulfonate oral powder 15 gram</i>		
<i>sodium polystyrene sulfonate oral suspension 15 gram/60 ml</i>	(Kionex)	
SPS (WITH SORBITOL) ORAL SUSPENSION 15-20 GRAM/60 ML		
Potassium Replacement		
EFFER-K ORAL TABLET, EFFERVESCENT 25 MEQ	(potassium bicarb-citric acid)	
KLOR-CON M10 ORAL TABLET,ER PARTICLES/CRYSTALS 10 MEQ	(potassium chloride)	
KLOR-CON M15 ORAL TABLET,ER PARTICLES/CRYSTALS 15 MEQ	(potassium chloride)	
KLOR-CON M20 ORAL TABLET,ER PARTICLES/CRYSTALS 20 MEQ	(potassium chloride)	
<i>potassium chloride oral capsule, extended release 10 meq, 8 meq</i>		
<i>potassium chloride oral tablet extended release 10 meq</i>	(Klor-Con 10)	
<i>potassium chloride oral tablet extended release 20 meq</i>		
<i>potassium chloride oral tablet extended release 8 meq</i>	(Klor-Con 8)	
<i>potassium chloride oral tablet,er particles/crystals 10 meq</i>	(Klor-Con M10)	
<i>potassium chloride oral tablet,er particles/crystals 15 meq</i>	(Klor-Con M15)	
<i>potassium chloride oral tablet,er particles/crystals 20 meq</i>	(Klor-Con M20)	
Sodium/Saline Preparations		
<i>sodium chloride tablet,soluble 1,000 mg</i>		
Endocrine Disorder - Other		
Antidiuretic And Vasopressor Hormones		
<i>desmopressin nasal spray with pump 10 mcg/spray (0.1 ml)</i>		PA

Drug	Notes
<i>desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml)</i>	PA
<i>desmopressin oral tablet 0.1 mg, 0.2 mg</i> (DDAVP)	
Antineoplastic Lhrh(Gnrh) Agonist,Pituitary Suppr.	
ELIGARD (3 MONTH) SUBCUTANEOUS SYRINGE 22.5 MG	PA; SP
ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE 30 MG	PA; SP
ELIGARD (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	PA; SP
ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	PA; SP
VABRINTY (1 MONTH) SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH)	PA; SP
VABRINTY (3 MONTH) SUBCUTANEOUS SYRINGE 22.5 MG	PA; SP
VABRINTY (4 MONTH) SUBCUTANEOUS SYRINGE 30 MG	PA; SP
VABRINTY (6 MONTH) SUBCUTANEOUS SYRINGE 45 MG	PA; SP
Bone Resorption Inhibitors	
<i>alendronate oral solution 70 mg/75 ml</i>	
<i>alendronate oral tablet 10 mg, 35 mg, 5 mg</i>	
<i>alendronate oral tablet 70 mg</i> (Fosamax)	
<i>calcitonin (salmon) nasal spray,non-aerosol 200 unit/actuation</i>	
ENOBY SUBCUTANEOUS SYRINGE 60 MG/ML	PA; SP
<i>ibandronate oral tablet 150 mg</i>	
<i>raloxifene oral tablet 60 mg</i> (Evista)	
<i>risedronate oral tablet 150 mg, 35 mg</i> (Actonel)	ST; ST: STEP THERAPY REQUIRED
<i>risedronate oral tablet 30 mg, 5 mg</i>	ST; ST: STEP THERAPY REQUIRED
Growth Hormones	
GENOTROPIN MINIQICK SUBCUTANEOUS SYRINGE 0.2 MG/0.25 ML, 0.4 MG/0.25 ML, 0.6 MG/0.25 ML, 0.8 MG/0.25 ML, 1 MG/0.25 ML, 1.2 MG/0.25 ML, 1.4 MG/0.25 ML, 1.6 MG/0.25 ML, 1.8 MG/0.25 ML, 2 MG/0.25 ML	PA; SP
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG/ML (36 UNIT/ML), 5 MG/ML (15 UNIT/ML)	PA; SP
HUMATROPE INJECTION CARTRIDGE 12 MG (36 UNIT), 24 MG (72 UNIT), 6 MG (18 UNIT)	PA; SP

Drug	Notes
NORDITROPIN FLEXPRO SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)	PA; SP
Pituitary Suppressive Agents	
<i>cabergoline oral tablet 0.5 mg</i>	
<i>danazol oral capsule 100 mg, 200 mg, 50 mg</i>	
Endocrine Disorder - Thyroid	
Antithyroid Preparations	
<i>methimazole oral tablet 10 mg, 5 mg</i>	
<i>propylthiouracil oral tablet 50 mg</i>	
Iodine Containing Agents	
<i>potassium iodide oral solution 1 gram/ml</i> (SSKI)	
SSKI ORAL SOLUTION 1 GRAM/ML (potassium iodide)	
Thyroid Hormones	
ADTHYZA ORAL TABLET 16.25 MG	
AMERITHROID ORAL TABLET 120 MG, 15 MG (thyroid (pork))	
AMERITHROID ORAL TABLET 180 MG, 240 MG, 300 MG	
ARMOUR THYROID ORAL TABLET 120 MG, 30 MG, 60 MG, 90 MG (thyroid (pork))	
ARMOUR THYROID ORAL TABLET 180 MG, 240 MG, 300 MG	
EUTHYROX ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG (levothyroxine)	
EVEXITHROID ORAL TABLET 180 MG	
<i>levothyroxine oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg</i> (Levo-T)	
LIOMNY ORAL TABLET 25 MCG, 5 MCG, 50 MCG (liothyronine)	
<i>liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg</i> (Liomny)	
NP THYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 60 MG, 90 MG (thyroid (pork))	
<i>thyroid (pork) oral tablet 120 mg, 15 mg</i> (Amerithroid)	
<i>thyroid (pork) oral tablet 30 mg, 60 mg, 90 mg</i> (NP Thyroid)	
Eye - General Disorders	
Eye Antibiotic-Corticoid Combinations	

Drug	Notes
<i>neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%</i>	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %</i> (Maxitrol)	
<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %</i>	
<i>tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %</i>	
Eye Antihistamines	
ADVANCED EYE RELIEF (OLOPATAD) OPTHALMIC (EYE) DROPS 0.2 % (olopatadine)	
EYE ALLERGY ITCH RELIEF OPTHALMIC (EYE) DROPS 0.2 % (olopatadine)	
EYE ALLERGY ITCH-REDNESS RLF OPTHALMIC (EYE) DROPS 0.1 % (olopatadine)	
<i>olopatadine ophthalmic (eye) drops 0.1 %</i> (Eye Allergy Itch-Redness Rlf)	
<i>olopatadine ophthalmic (eye) drops 0.2 %</i> (Advanced Eye Relief (olopatad))	
RETAIN EYE ALLERGY OPTHALMIC (EYE) DROPS 0.2 % (olopatadine)	
Eye Antiinflammatory Agents	
<i>dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %</i>	
<i>diclofenac sodium ophthalmic (eye) drops 0.1 %</i>	
<i>fluorometholone ophthalmic (eye) drops,suspension 0.1 %</i> (FML Liquifilm)	
<i>ketorolac ophthalmic (eye) drops 0.5 %</i> (Acular)	
<i>prednisolone acetate ophthalmic (eye) drops,suspension 1 %</i> (Pred Forte)	
<i>prednisolone sodium phosphate ophthalmic (eye) drops 1 %</i>	
Eye Antivirals	
<i>trifluridine ophthalmic (eye) drops 1 %</i>	
Eye Sulfonamides	
<i>sulfacetamide sodium ophthalmic (eye) drops 10 %</i>	
<i>sulfacetamide-prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)</i>	
Ophthalmic Antibiotics	
<i>bacitracin ophthalmic (eye) ointment 500 unit/gram</i>	
<i>bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram</i>	

Drug	Notes
<i>ciprofloxacin hcl ophthalmic (eye) drops 0.3 %</i>	
<i>erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)</i>	
<i>gentamicin ophthalmic (eye) drops 0.3 %</i>	
<i>moxifloxacin ophthalmic (eye) drops 0.5 %</i> (Vigamox)	
<i>neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g</i>	
<i>neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml</i>	
<i>ofloxacin ophthalmic (eye) drops 0.3 %</i> (Ocuflox)	
<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml</i>	
<i>tobramycin ophthalmic (eye) drops 0.3 %</i>	
Eye - Glaucoma	
Carbonic Anhydrase Inhibitors	
<i>acetazolamide oral tablet 125 mg, 250 mg</i>	
<i>methazolamide oral tablet 25 mg, 50 mg</i>	
Miotics/Other Intraoc. Pressure Reducers	
<i>bimatoprost ophthalmic (eye) drops 0.01 %</i> (Lumigan)	
<i>bimatoprost ophthalmic (eye) drops 0.03 %</i>	
<i>brimonidine ophthalmic (eye) drops 0.15 %</i> (Alphagan P)	
<i>brimonidine ophthalmic (eye) drops 0.2 %</i>	
<i>carteolol ophthalmic (eye) drops 1 %</i>	
<i>dorzolamide ophthalmic (eye) drops 2 %</i>	
<i>dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml</i> (Cosopt)	
<i>latanoprost ophthalmic (eye) drops 0.005 %</i> (Xalatan)	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	
<i>timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %</i>	
<i>timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %</i>	
<i>travoprost ophthalmic (eye) drops 0.004 %</i> (Travatan Z)	
Mydriatics	
<i>atropine ophthalmic (eye) drops 1 %</i>	
<i>cyclopentolate ophthalmic (eye) drops 1 %</i> (Cyclogyl)	
Gout And Related Diseases	
Colchicine	

Drug	Notes
<i>colchicine oral tablet 0.6 mg</i> (Colcrys)	
Hyperuricemia Tx - Purine Inhibitors	
<i>allopurinol oral tablet 100 mg</i> (Zyloprim)	
<i>allopurinol oral tablet 300 mg</i>	
Uricosuric Agents	
<i>probenecid oral tablet 500 mg</i>	
<i>probenecid-colchicine oral tablet 500-0.5 mg</i>	
Hematological Disorders	
Anticoagulants, Coumarin Type	
JANTOVEN ORAL TABLET 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG (warfarin)	
<i>warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	
Direct Factor Xa Inhibitors	
ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS, DOSE PACK 5 MG (74 TABS)	
ELIQUIS ORAL TABLET 2.5 MG, 5 MG	
<i>rivaroxaban oral tablet 2.5 mg</i> (Xarelto)	
SAVAYSA ORAL TABLET 15 MG, 30 MG, 60 MG	
XARELTO DVT-PE TREAT 30D START ORAL TABLETS, DOSE PACK 15 MG (42)- 20 MG (9)	
XARELTO ORAL TABLET 10 MG, 15 MG, 20 MG (rivaroxaban)	
Hematinics, Other	
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	PA; SP
PROCRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	PA; SP
RETACRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	PA; SP
Hemorrhologic Agents	
<i>pentoxifylline oral tablet extended release 400 mg</i>	
Heparin And Related Preparations	
<i>enoxaparin subcutaneous solution 300 mg/3 ml</i> (Lovenox)	QL (6 ML per 1 day)

Drug	Notes
<i>enoxaparin subcutaneous syringe 100 mg/ml, 150 mg/ml</i> (Lovenox)	QL (2 ML per 1 day)
<i>enoxaparin subcutaneous syringe 120 mg/0.8 ml, 80 mg/0.8 ml</i> (Lovenox)	QL (1.6 ML per 1 day)
<i>enoxaparin subcutaneous syringe 30 mg/0.3 ml</i> (Lovenox)	QL (0.6 ML per 1 day)
<i>enoxaparin subcutaneous syringe 40 mg/0.4 ml</i> (Lovenox)	QL (0.8 ML per 1 day)
<i>enoxaparin subcutaneous syringe 60 mg/0.6 ml</i> (Lovenox)	QL (1.2 ML per 1 day)
Leukocyte (Wbc) Stimulants	
GRANIX SUBCUTANEOUS SOLUTION 300 MCG/ML	PA; SP
GRANIX SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	PA; SP
LEUKINE INJECTION RECON SOLN 250 MCG	PA; SP
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	PA; SP
NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	PA; SP
ZARXIO INJECTION SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	PA; SP
Platelet Aggregation Inhibitors	
ADULT ASPIRIN REGIMEN ORAL TABLET,DELAYED RELEASE (DR/EC) 81 MG (aspirin)	
ADULT LOW DOSE ASPIRIN ORAL TABLET,DELAYED RELEASE (DR/EC) 81 MG (aspirin)	
ASPIRIN CHILDRENS ORAL TABLET,CHEWABLE 81 MG (aspirin)	
<i>aspirin oral tablet,chewable 81 mg</i> (Aspirin Childrens)	
<i>aspirin oral tablet,delayed release (dr/ec) 81 mg</i> (Adult Aspirin Regimen)	
BAYER LOW DOSE ASPIRIN ORAL TABLET,DELAYED RELEASE (DR/EC) 81 MG (aspirin)	
CHILDREN'S ASPIRIN ORAL TABLET,CHEWABLE 81 MG (aspirin)	
<i>cilostazol oral tablet 100 mg, 50 mg</i>	
<i>clopidogrel oral tablet 75 mg</i> (Plavix)	
<i>prasugrel hcl oral tablet 10 mg, 5 mg</i> (Effient)	

Drug	Notes
ST JOSEPH ASPIRIN ORAL TABLET,CHEWABLE 81 MG (aspirin)	
ST. JOSEPH ASPIRIN ORAL TABLET,DELAYED RELEASE (DR/EC) 81 MG (aspirin)	
Thrombin Inhibitors,Selective,Direct, & Reversible	
<i>dabigatran etexilate oral capsule 110 mg, 150 mg, 75 mg</i> (Pradaxa)	
Vitamin K Preparations	
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	
Hormonal Deficiency	
Androgenic Agents	
<i>testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml</i> (Depo-Testosterone)	PA
<i>testosterone transdermal gel 50 mg/5 gram (1 %)</i> (Testim)	PA
<i>testosterone transdermal gel in packet 1 % (25 mg/2.5gram)</i>	PA
<i>testosterone transdermal gel in packet 1 % (50 mg/5 gram)</i> (Vogelxo)	PA
Estrogenic Agents	
ABIGALE LO ORAL TABLET 0.5-0.1 MG (estradiol-norethindrone acet)	
ABIGALE ORAL TABLET 1-0.5 MG (estradiol-norethindrone acet)	
CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045-0.015 MG/24 HR	
COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR	
<i>conjugated estrogens oral tablet 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg</i> (Premarin)	
DOTTI TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR (estradiol)	
<i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>	
<i>estradiol transdermal gel in metered-dose pump 1.25 gram/actuation</i> (EstroGel)	
<i>estradiol transdermal gel in packet 1 mg/gram (0.1 %)</i> (Divigel)	
<i>estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i> (Dotti)	

Drug	Notes
<i>estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i> (Climara)	QL (1 EA per 7 days)
<i>estradiol-norethindrone acet oral tablet 0.5-0.1 mg</i> (Abigale Lo)	
<i>estradiol-norethindrone acet oral tablet 1-0.5 mg</i> (Abigale)	
EVAMIST TRANSDERMAL SPRAY, NON-AEROSOL 1.53 MG/SPRAY (1.7%)	
FYAVOLV ORAL TABLET 0.5-2.5 MG-MCG, 1-5 MG-MCG (norethindrone ac-eth estradiol)	
JINTELI ORAL TABLET 1-5 MG-MCG (norethindrone ac-eth estradiol)	
LYLLANA TRANSDERMAL PATCH SEMI-WEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR (estradiol)	
MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24 HR	
MIMVEY ORAL TABLET 1-0.5 MG (estradiol-norethindrone acet)	
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i> (Fyavolv)	
PREMPHASE ORAL TABLET 0.625 MG (14)/0.625MG-5MG(14)	
PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG	
Progestational Agents	
GALLIFREY ORAL TABLET 5 MG (norethindrone acetate)	
<i>medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg</i> (Provera)	
<i>norethindrone acetate oral tablet 5 mg</i> (Gallifrey)	
<i>progesterone micronized oral capsule 100 mg, 200 mg</i> (Prometrium)	
Immunization	
Covid-19 Vaccines	
COMIRNATY 2026-2027(5-11Y)(PF) INTRAMUSCULAR SUSPENSION 10 MCG/0.3 ML	
COMIRNATY 2026-27 (12Y UP)(PF) INTRAMUSCULAR SYRINGE 30 MCG/0.3 ML	

Drug	Notes
MNEXSPIKE 2026-2027 (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.2 ML	
NUVAXOVID 2026-2027 (PF) INTRAMUSCULAR SYRINGE 5 MCG/0.5 ML	
SPIKEVAX 2026-2027(12Y UP)(PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	
SPIKEVAX 2026-27 (6M-11Y) (PF) INTRAMUSCULAR SYRINGE 25 MCG/0.25 ML	
Gram Negative Cocci Vaccines	
BEXSERO INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML	QL (0.5 ML per 30 days); Age (Min 19 Years and Max 25 Years)
TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML	QL (0.5 ML per 30 days); Age (Min 19 Years and Max 25 Years)
Gram Positive Cocci Vaccines	
CAPVAXIVE (PF) INTRAMUSCULAR SYRINGE 0.5 ML	
PNEUMOVAX-23 INJECTION SYRINGE 25 MCG/0.5 ML	
PREVNAR 20 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	Age (Min 19 Years)
VAXNEUVANCE (PF) INTRAMUSCULAR SYRINGE 0.5 ML	Age (Min 19 Years)
Influenza Virus Vaccines	
AUDENZ (NATIONAL STOCKPILE) INTRAMUSCULAR EMULSION 7.5 MCG/0.5 ML	
AUDENZ(PF)(NATIONAL STOCKPILE) INTRAMUSCULAR SYRINGE 7.5 MCG/0.5 ML	
FLUAD 2026-2027 (65 YR UP)(PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	
FLUARIX 2026-2027 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	
FLUBLOK 2026-2027 (PF) INTRAMUSCULAR SYRINGE 135 MCG (45 MCG X 3)/0.5 ML	
FLUCELVAX 2026-2027 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	
FLULAVAL 2026-2027 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	
FLUMIST 2026-2027 NASAL NASAL SPRAY SYRINGE 10EXP6.5-7.5 FF UNIT/0.2 ML	

Drug	Notes
FLUMIST HOME 2026-2027 NASAL (HOME ADMIN) NASAL SPRAY SYRINGE 10EXP6.5-7.5 FF UNIT/0.2 ML	
FLUZONE 2026-2027 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML	
FLUZONE 2026-2027 INTRAMUSCULAR SUSPENSION 45 MCG (15 MCG X 3)/0.5 ML	
FLUZONE HIGH-DOSE 2026-27 (PF) INTRAMUSCULAR SYRINGE 180 MCG/0.5 ML	
MFLUSIVA 2026-2027 (PF) INTRAMUSCULAR SYRINGE 37.5 MCG (12.5 MCG X 3)/0.38ML	
Vaccine/Toxoid Preparations, Combinations	
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	Age (Min 19 Years)
ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML	
BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML	Age (Min 19 Years)
M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML	Age (Min 19 Years)
TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML	Age (Min 19 Years)
TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML	Age (Min 19 Years)
Viral/Tumorigenic Vaccines	
ABRYSV (PF) INTRAMUSCULAR RECON SOLN 120 MCG/0.5 ML	QL (1 EA per 1 LIFETIME)
AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 120 MCG/0.5 ML	
GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML	Age (Min 19 Years)
GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML	Age (Min 19 Years)
MRESVIA (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	PA
SHINGRIX (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML	QL (2 ML per 1 LIFETIME); Age (Min 19 Years)
TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT- 20 MCG/ML	Age (Min 19 Years)

Drug	Notes
VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML	Age (Min 19 Years)
Immunosuppression/Modulation	
Immunosuppressives	
azathioprine oral tablet 50 mg (Imuran)	
cyclosporine modified oral capsule 100 mg, 25 mg (Gengraf)	
cyclosporine modified oral capsule 50 mg	
cyclosporine modified oral solution 100 mg/ml (Neoral)	
cyclosporine oral capsule 100 mg, 25 mg (Sandimmune)	
GENGRAF ORAL CAPSULE 100 MG, 25 MG (cyclosporine modified)	
mycophenolate mofetil oral capsule 250 mg (CellCept)	
mycophenolate mofetil oral suspension for reconstitution 200 mg/ml (CellCept)	
mycophenolate mofetil oral tablet 500 mg (CellCept)	
NEORAL ORAL CAPSULE 100 MG, 25 MG (cyclosporine modified)	
NEORAL ORAL SOLUTION 100 MG/ML (cyclosporine modified)	
PROGRAF ORAL CAPSULE 0.5 MG, 1 MG, 5 MG (tacrolimus)	
SANDIMMUNE ORAL CAPSULE 100 MG, 25 MG (cyclosporine)	
sirolimus oral solution 1 mg/ml	
sirolimus oral tablet 0.5 mg, 1 mg, 2 mg	
tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg (Prograf)	
Infectious Disease - Bacterial	
Absorbable Sulfonamides	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml (Sulfatrim)	
sulfamethoxazole-trimethoprim oral tablet 400-80 mg (Bactrim)	
sulfamethoxazole-trimethoprim oral tablet 800-160 mg (Bactrim DS)	
SULFATRIM ORAL SUSPENSION 200-40 MG/5 ML (sulfamethoxazole-trimethoprim)	
Cephalosporins - 1St Generation	
cefadroxil oral capsule 500 mg	
cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml	
cefadroxil oral tablet 1 gram	
cephalexin oral capsule 250 mg, 500 mg	
cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml	

Drug	Notes
Cephalosporins - 2Nd Generation	
<i>cefaclor oral capsule 250 mg, 500 mg</i>	
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	
<i>cefaclor oral tablet extended release 12 hr 500 mg</i>	
<i>cefprozil oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	
<i>cefprozil oral tablet 250 mg, 500 mg</i>	
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	
Cephalosporins - 3Rd Generation	
<i>cefdinir oral capsule 300 mg</i>	
<i>cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	
<i>cefixime oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	
<i>cefpodoxime oral suspension for reconstitution 100 mg/5 ml, 50 mg/5 ml</i>	
<i>cefpodoxime oral tablet 100 mg, 200 mg</i>	
Chemotherapeutics, Antibacterial, Misc.	
ANTIBACTERIAL-URINARY PAIN RLF ORAL TABLET 162-162.5 MG	
AZO URINARY TRACT DEFENSE ORAL TABLET 162-162.5 MG	
CYSTEX DUAL ACTION ORAL TABLET 162-162.5 MG	
<i>trimethoprim oral tablet 100 mg</i>	
URO-PAIN DUAL ACTION ORAL TABLET 162-162.5 MG	
Macrolides	
<i>azithromycin oral packet 1 gram</i>	
<i>azithromycin oral suspension for reconstitution 100 mg/5 ml</i>	
<i>azithromycin oral suspension for reconstitution 200 mg/5 ml</i> (Zithromax)	
<i>azithromycin oral tablet 250 mg, 500 mg</i> (Zithromax)	
<i>azithromycin oral tablet 600 mg</i>	
<i>clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	
<i>clarithromycin oral tablet extended release 24 hr 500 mg</i>	

Drug		Notes
E.E.S. 400 ORAL TABLET 400 MG	(erythromycin ethylsuccinate)	
ERY-TAB ORAL TABLET, DELAYED RELEASE (DR/EC) 250 MG, 500 MG	(erythromycin)	
ERYTHROCIN (AS STEARATE) ORAL TABLET 250 MG	(erythromycin stearate)	
<i>erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml</i>	(E.E.S. Granules)	
<i>erythromycin ethylsuccinate oral suspension for reconstitution 400 mg/5 ml</i>	(EryPed 400)	
<i>erythromycin ethylsuccinate oral tablet 400 mg</i>	(E.E.S. 400)	
<i>erythromycin oral capsule, delayed release (dr/ec) 250 mg</i>		
<i>erythromycin oral tablet 250 mg, 500 mg</i>		
<i>erythromycin oral tablet, delayed release (dr/ec) 250 mg, 333 mg, 500 mg</i>	(Ery-Tab)	
Nitrofurantoin Derivatives		
<i>nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg</i>		
<i>nitrofurantoin monohydrate/m-cryst oral capsule 100 mg</i>	(Macrobid)	
Oxazolidinones		
<i>linezolid oral tablet 600 mg</i>		
Penicillins		
<i>amoxicillin oral capsule 250 mg, 500 mg</i>		
<i>amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml</i>		
<i>amoxicillin oral tablet 500 mg, 875 mg</i>		
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>		
<i>amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 400-57 mg/5 ml</i>		
<i>amoxicillin-pot clavulanate oral suspension for reconstitution 250-62.5 mg/5 ml</i>	(Augmentin)	
<i>amoxicillin-pot clavulanate oral suspension for reconstitution 600-42.9 mg/5 ml</i>	(Augmentin ES-600)	
<i>amoxicillin-pot clavulanate oral tablet 250-125 mg, 875-125 mg</i>		
<i>amoxicillin-pot clavulanate oral tablet 500-125 mg</i>	(Augmentin)	
<i>amoxicillin-pot clavulanate oral tablet extended release 12 hr 1,000-62.5 mg</i>		
<i>amoxicillin-pot clavulanate oral tablet, chewable 200-28.5 mg, 400-57 mg</i>		

Drug	Notes
<i>ampicillin oral capsule 500 mg</i>	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	
<i>dicloxacillin oral capsule 250 mg, 500 mg</i>	
<i>penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml</i>	
<i>penicillin v potassium oral tablet 250 mg, 500 mg</i>	
Quinolones	
CIPRO ORAL SUSPENSION,MICROCAPSULE RECON 250 (ciprofloxacin) MG/5 ML, 500 MG/5 ML	
<i>ciprofloxacin hcl oral tablet 100 mg, 750 mg</i>	
<i>ciprofloxacin hcl oral tablet 250 mg, 500 mg</i> (Cipro)	
<i>ciprofloxacin oral suspension,microcapsule recon 250 mg/5 ml, 500 mg/5 ml</i> (Cipro)	
<i>levofloxacin oral solution 250 mg/10 ml</i>	
<i>levofloxacin oral tablet 250 mg, 500 mg, 750 mg</i>	
<i>moxifloxacin oral tablet 400 mg</i>	
<i>ofloxacin oral tablet 400 mg</i>	
Tetracyclines	
<i>doxycycline hyclate oral capsule 100 mg</i>	
<i>doxycycline hyclate oral capsule 50 mg</i> (Morgidox)	
<i>doxycycline hyclate oral tablet 100 mg</i>	
<i>doxycycline monohydrate oral capsule 100 mg</i> (Mondoxylene NL)	
<i>doxycycline monohydrate oral capsule 50 mg</i>	
<i>doxycycline monohydrate oral suspension for reconstitution 25 mg/5 ml</i>	
<i>doxycycline monohydrate oral tablet 100 mg</i> (Avidoxy)	
<i>doxycycline monohydrate oral tablet 50 mg</i>	
<i>minocycline oral capsule 100 mg, 50 mg, 75 mg</i>	
<i>minocycline oral tablet 50 mg, 75 mg</i>	
MONDOXYNE NL ORAL CAPSULE 100 MG (doxycycline monohydrate)	
<i>tetracycline oral capsule 250 mg, 500 mg</i>	
<i>tetracycline oral tablet 250 mg, 500 mg</i>	
Infectious Disease - Fungal	
Antifungal Agents	
<i>clotrimazole mucous membrane troche 10 mg</i>	

Drug	Notes
<i>fluconazole oral suspension for reconstitution 10 mg/ml</i>	
<i>fluconazole oral suspension for reconstitution 40 mg/ml</i> (Diflucan)	
<i>fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	
<i>itraconazole oral capsule 100 mg</i> (Sporanox)	PA
<i>ketoconazole oral tablet 200 mg</i>	PA
<i>terbinafine hcl oral tablet 250 mg</i>	
Antifungal Antibiotics	
<i>nystatin oral suspension 100,000 unit/ml</i>	
<i>nystatin oral tablet 500,000 unit</i>	
Infectious Disease - Miscellaneous	
Aminoglycosides	
<i>neomycin oral tablet 500 mg</i>	
Antileprotics	
<i>dapsone oral tablet 100 mg, 25 mg</i>	
Anti-Mycobacterium Agents	
<i>ethambutol oral tablet 100 mg, 400 mg</i>	
<i>isoniazid oral solution 50 mg/5 ml</i>	
<i>isoniazid oral tablet 100 mg, 300 mg</i>	
<i>pyrazinamide oral tablet 500 mg</i>	
Antitubercular Antibiotics	
<i>rifampin oral capsule 150 mg, 300 mg</i>	
Lincosamides	
<i>clindamycin hcl oral capsule 150 mg, 300 mg</i> (Cleocin HCl)	
<i>clindamycin palmitate hcl oral recon soln 75 mg/5 ml</i> (Clindamycin Pediatric)	
CLINDAMYCIN PEDIATRIC ORAL RECON SOLN 75 MG/5 ML (clindamycin palmitate hcl)	
Rifamycins And Related Derivative Antibiotics	
XIFAXAN ORAL TABLET 550 MG	PA
Vancomycin And Derivatives	
<i>vancomycin oral capsule 125 mg, 250 mg</i> (Vancocin)	
Infectious Disease - Parasitic	
Anaerobic Antiprotozoal-Antibacterial Agents	
<i>metronidazole oral tablet 250 mg, 500 mg</i>	
Anthelmintics	
PINAWAY ORAL SUSPENSION 50 MG/ML	

Drug	Notes
PINWORM TREATMENT ORAL SUSPENSION 50 MG/ML	
REESE'S PINWORM MEDICINE ORAL SUSPENSION 50 MG/ML	
Antimalarial Drugs	
<i>chloroquine phosphate oral tablet 250 mg, 500 mg</i>	
<i>hydroxychloroquine oral tablet 200 mg</i> (Sovuna)	
<i>mefloquine oral tablet 250 mg</i>	
SOVUNA ORAL TABLET 200 MG (hydroxychloroquine)	
Infectious Disease - Viral	
Antiretroviral - Anti-Cd4 Domain 2 Monoclonal Ab	
TROGARZO INTRAVENOUS SOLUTION 200 MG/1.33 ML (150 MG/ML)	SP
Antiretroviral - Capsid Inhibitors	
SUNLENCA ORAL TABLET 300 MG	SP
SUNLENCA SUBCUTANEOUS SOLUTION 309 MG/ML	SP
Antiretroviral-Integrase Inhibitor And Nrti Comb.	
CABENUVA INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 400 MG/2 ML- 600 MG/2 ML, 600 MG/3 ML- 900 MG/3 ML	SP
JULUCA ORAL TABLET 50-25 MG	
Antiretroviral-Integrase Inhibitor And Nrti Comb.	
DOVATO ORAL TABLET 50-300 MG	
Antiretroviral- Nucleoside,Nucleotide,Protease Inh.	
SYM TUZA ORAL TABLET 800-150-200-10 MG	
Antiviral Nucleotide Analogs	
LAGEVRIO (EUA) ORAL CAPSULE 200 MG	
Antivirals, General	
<i>acyclovir oral capsule 200 mg</i>	
<i>acyclovir oral suspension 200 mg/5 ml</i>	
<i>acyclovir oral tablet 400 mg, 800 mg</i>	
<i>oseltamivir oral capsule 30 mg, 45 mg</i>	QL (10 EA per 5 days)
<i>oseltamivir oral capsule 75 mg</i> (Tamiflu)	QL (10 EA per 5 days)

Drug	Notes
<i>oseltamivir oral suspension for reconstitution 6 mg/ml</i> (Tamiflu)	QL (120 ML per 5 days); Age (Max 7 Years)
<i>valacyclovir oral tablet 1 gram</i> (Valtrex)	QL (3 EA per 1 day)
<i>valacyclovir oral tablet 500 mg</i> (Valtrex)	QL (2 EA per 1 day)
Antivirals, Hiv-Spec, Non-Peptidic Protease Inhib	
APTIVUS ORAL CAPSULE 250 MG	
<i>darunavir oral tablet 600 mg, 800 mg</i> (Prezista)	
PREZCOBIX ORAL TABLET 675-150 MG, 800-150 MG-MG	
PREZISTA ORAL SUSPENSION 100 MG/ML	
PREZISTA ORAL TABLET 150 MG, 75 MG	
PREZISTA ORAL TABLET 600 MG, 800 MG (darunavir)	
Antivirals, Hiv-Spec, Nucleoside-Nucleotide Analog	
CIMDUO ORAL TABLET 300-300 MG	
DESCOVY ORAL TABLET 120-15 MG, 200-25 MG	
<i>emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg</i> (Truvada)	
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG, 200-300 MG (emtricitabine-tenofovir (tdf))	
Antivirals, Hiv-Spec., Nucleoside Analog, Rti Comb	
<i>abacavir-lamivudine oral tablet 600-300 mg</i>	
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	
Antivirals, Hiv-Specific, Ccr5 Co-Receptor Antag.	
<i>maraviroc oral tablet 150 mg, 300 mg</i> (Selzentry)	
SELZENTRY ORAL SOLUTION 20 MG/ML	
SELZENTRY ORAL TABLET 150 MG, 300 MG (maraviroc)	
Antivirals, Hiv-Specific, Cd4 Attachment Inhibitor	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HR 600 MG	
Antivirals, Hiv-Specific, Non-Nucleoside, Rti	
EDURANT ORAL TABLET 25 MG (rilpivirine hcl)	
EDURANT PED ORAL TABLET FOR SUSPENSION 2.5 MG	
<i>efavirenz oral tablet 600 mg</i>	
<i>etravirine oral tablet 100 mg, 200 mg</i> (Intelence)	
INTELENCE ORAL TABLET 100 MG, 200 MG (etravirine)	
INTELENCE ORAL TABLET 25 MG	

Drug	Notes
<i>nevirapine oral suspension 50 mg/5 ml</i>	
<i>nevirapine oral tablet 200 mg</i>	
<i>nevirapine oral tablet extended release 24 hr 400 mg</i>	
PIFELTRO ORAL TABLET 100 MG	
<i>rilpivirine hcl oral tablet 25 mg</i> (Edurant)	
Antivirals, Hiv-Specific, Nucleoside Analog, Rti	
<i>abacavir oral solution 20 mg/ml</i> (Ziagen)	
<i>abacavir oral tablet 300 mg</i>	
<i>emtricitabine oral capsule 200 mg</i> (Emtriva)	
EMTRIVA ORAL CAPSULE 200 MG (emtricitabine)	
EMTRIVA ORAL SOLUTION 10 MG/ML	
EPIVIR ORAL SOLUTION 10 MG/ML (lamivudine)	
EPIVIR ORAL TABLET 150 MG, 300 MG (lamivudine)	
<i>lamivudine oral solution 10 mg/ml</i> (Epivir)	
<i>lamivudine oral tablet 150 mg, 300 mg</i> (Epivir)	
RETROVIR INTRAVENOUS SOLUTION 10 MG/ML	
RETROVIR ORAL CAPSULE 100 MG (zidovudine)	
RETROVIR ORAL SYRUP 10 MG/ML (zidovudine)	
ZIAGEN ORAL SOLUTION 20 MG/ML (abacavir)	
<i>zidovudine oral capsule 100 mg</i> (Retrovir)	
<i>zidovudine oral syrup 10 mg/ml</i> (Retrovir)	
<i>zidovudine oral tablet 300 mg</i>	
Antivirals, Hiv-Specific, Nucleotide Analog, Rti	
<i>tenofovir disoproxil fumarate oral tablet 300 mg</i> (Viread)	
VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM)	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	
VIREAD ORAL TABLET 300 MG (tenofovir disoproxil fumarate)	
Antivirals, Hiv-Specific, Protease Inhibitor Comb	
KALETRA ORAL SOLUTION 400-100 MG/5 ML (lopinavir-ritonavir)	
KALETRA ORAL TABLET 100-25 MG, 200-50 MG (lopinavir-ritonavir)	

Drug	Notes
<i>lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg</i> (Kaletra)	
Antivirals, Hiv-Specific, Protease Inhibitors	
<i>atazanavir oral capsule 150 mg</i>	
<i>atazanavir oral capsule 200 mg, 300 mg</i> (Reyataz)	
EVOTAZ ORAL TABLET 300-150 MG	
<i>fosamprenavir oral tablet 700 mg</i>	
NORVIR ORAL POWDER IN PACKET 100 MG	
NORVIR ORAL TABLET 100 MG (ritonavir)	
REYATAZ ORAL CAPSULE 200 MG, 300 MG (atazanavir)	
REYATAZ ORAL POWDER IN PACKET 50 MG	
<i>ritonavir oral tablet 100 mg</i> (Norvir)	
VIRACEPT ORAL TABLET 250 MG, 625 MG	
Antivirals,Hiv-1 Integrase Strand Transfer Inhibtr	
APRETUDE INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 600 MG/3 ML (200 MG/ML) (cabotegravir)	SP
ISENTRESS HD ORAL TABLET 600 MG	
ISENTRESS ORAL POWDER IN PACKET 100 MG	
ISENTRESS ORAL TABLET 400 MG	
ISENTRESS ORAL TABLET,CHEWABLE 100 MG, 25 MG	
TIVICAY ORAL TABLET 50 MG	
TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG	
Artv Cmb Nucleoside,Nucleotide,&Non-Nucleoside Rti	
COMPLERA ORAL TABLET 200-25-300 MG (emtricitabine-tenofovir disoproxil fumarate)	
DELSTRIGO ORAL TABLET 100-300-300 MG	
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate oral tablet 600-200-300 mg</i>	
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate oral tablet 400-300-300 mg</i>	
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate oral tablet 600-300-300 mg</i> (Symfi)	
<i>emtricitabine-tenofovir disoproxil fumarate oral tablet 200-25-300 mg</i> (Complera)	
ODEFSEY ORAL TABLET 200-25-25 MG	

Drug	Notes
SYMFI ORAL TABLET 600-300-300 MG (efavirenz-lamivudine-tenofovir disoproxil fumarate)	
Arv Cmb-Nrti,N(T)Rti, Integrase Inhibitor	
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG	QL (1 EA per 1 day)
GENVOYA ORAL TABLET 150-150-200-10 MG	
STRIBILD ORAL TABLET 150-150-200-300 MG	
Arv Comb-Nrtis & Integrase Inhibitor	
TRIUMEQ ORAL TABLET 600-50-300 MG	
TRIUMEQ PD ORAL TABLET FOR SUSPENSION 60-5-30 MG	
Hep C Virus - Ns5a & Ns5b Polymerase Inhib. Combo.	
sofosbuvir-velpatasvir oral tablet 400-100 mg (Epclusa)	SP; QL (1 EA per 1 day)
Hepatitis B Treatment Agents	
adefovir oral tablet 10 mg	SP
BARACLUDE ORAL SOLUTION 0.05 MG/ML	SP
BARACLUDE ORAL TABLET 0.5 MG, 1 MG (entecavir)	SP
entecavir oral tablet 0.5 mg, 1 mg (Baraclude)	SP
lamivudine oral tablet 100 mg	
VELMIDY ORAL TABLET 25 MG	SP
Hepatitis C Virus- Ns5a And Ns3/4A Inhibitor Comb	
MAVYRET ORAL TABLET 100-40 MG	SP; QL (3 EA per 1 day)
Inflammatory Disease	
Anti-Inflammatory Tumor Necrosis Factor Inhibitor	
adalimumab-biwb subcutaneous auto-injector 40 mg/0.4 ml (Hadlima(CF) PushTouch)	PA; SP
adalimumab-biwb subcutaneous syringe 40 mg/0.4 ml (Hadlima(CF))	PA; SP
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	PA; SP
ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	PA; SP
HADLIMA PUSH TOUCH SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.8 ML	PA; SP
HADLIMA SUBCUTANEOUS SYRINGE 40 MG/0.8 ML	PA; SP

Drug	Notes
HADLIMA(CF) PUSHTOUCH SUBCUTANEOUS AUTO-INJECTOR 40 (adalimumab-bwwd) MG/0.4 ML	PA; SP
HADLIMA(CF) SUBCUTANEOUS SYRINGE 40 MG/0.4 ML (adalimumab-bwwd)	PA; SP
Anti-Inflammatory, Pyrimidine Synthesis Inhibitor	
<i>leflunomide oral tablet 10 mg, 20 mg</i> (Arava)	
Glucocorticoids	
DEXAMETHASONE INTENSOL ORAL DROPS 1 MG/ML	
<i>dexamethasone oral elixir 0.5 mg/5 ml</i>	
<i>dexamethasone oral solution 0.5 mg/5 ml</i>	
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</i>	
<i>dexamethasone oral tablets,dose pack 1.5 mg (21 tabs)</i> (TaperDex)	
<i>methylprednisolone oral tablet 16 mg, 4 mg, 8 mg</i> (Medrol)	
<i>methylprednisolone oral tablet 32 mg</i>	
<i>methylprednisolone oral tablets,dose pack 4 mg</i> (Medrol (Pak))	
<i>prednisolone oral solution 15 mg/5 ml</i>	
<i>prednisolone sodium phosphate oral solution 15 mg/5 ml (3 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	
PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML	
<i>prednisone oral solution 5 mg/5 ml</i>	
<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>	
<i>prednisone oral tablets,dose pack 10 mg, 5 mg</i>	
TAPERDEX ORAL TABLETS,DOSE PACK 1.5 MG (21 TABS) (dexamethasone)	
Mineralocorticoids	
<i>fludrocortisone oral tablet 0.1 mg</i>	
Monoclonal Antibody-Human Interleukin 12/23 Inhib	
STARJEMZA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML	PA; SP
Nsaids, Cyclooxygenase 2 Inhibitor - Type	
<i>celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg</i> (Celebrex)	
Nsaids, Cyclooxygenase Inhibitor-Type	

Drug		Notes
ADDAPRIN ORAL TABLET 200 MG	(ibuprofen)	
ALEVE ORAL TABLET 220 MG	(naproxen sodium)	
ALL DAY PAIN RELIEF ORAL TABLET 220 MG	(naproxen sodium)	
ALL DAY RELIEF ORAL TABLET 220 MG	(naproxen sodium)	
CHILDREN'S IBUPROFEN ORAL SUSPENSION 100 MG/5 ML	(ibuprofen)	
CHILDREN'S PROFEN IB ORAL SUSPENSION 100 MG/5 ML	(ibuprofen)	
<i>diclofenac sodium oral tablet, delayed release (dr/ec) 50 mg, 75 mg</i>		
<i>etodolac oral tablet 400 mg</i>	(Lodine)	
<i>etodolac oral tablet 500 mg</i>		
FLANAX (NAPROXEN) ORAL TABLET 220 MG	(naproxen sodium)	
<i>flurbiprofen oral tablet 100 mg</i>	(Lurbiro)	
IBU ORAL TABLET 400 MG, 600 MG, 800 MG	(ibuprofen)	
IBU-200 ORAL TABLET 200 MG	(ibuprofen)	
<i>ibuprofen oral drops, suspension 50 mg/1.25 ml</i>	(Infant's Advil)	
<i>ibuprofen oral suspension 100 mg/5 ml</i>	(Children's Ibuprofen)	
<i>ibuprofen oral tablet 200 mg</i>	(Addaprin)	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	(IBU)	
<i>indomethacin oral capsule 25 mg, 50 mg</i>		
<i>indomethacin oral suspension 25 mg/5 ml</i>	(Indocin)	
<i>indomethacin rectal suppository 50 mg</i>	(Indocin)	
INFANT'S ADVIL ORAL DROPS, SUSPENSION 50 MG/1.25 ML	(ibuprofen)	
INFANT'S IBUPROFEN ORAL DROPS, SUSPENSION 50 MG/1.25 ML	(ibuprofen)	
INFANT'S MOTRIN ORAL DROPS, SUSPENSION 50 MG/1.25 ML	(ibuprofen)	
INFANTS PROFENIB ORAL DROPS, SUSPENSION 50 MG/1.25 ML	(ibuprofen)	
I-PRIN ORAL TABLET 200 MG	(ibuprofen)	
<i>ketorolac oral tablet 10 mg</i>		
LURBIRO ORAL TABLET 100 MG	(flurbiprofen)	
MEDIPROXEN ORAL TABLET 220 MG	(naproxen sodium)	
<i>meloxicam oral tablet 15 mg, 7.5 mg</i>		
<i>naproxen oral suspension 125 mg/5 ml</i>	(Naprosyn)	

Drug	Notes
<i>naproxen oral tablet 250 mg, 375 mg</i>	
<i>naproxen oral tablet 500 mg</i> (Naprosyn)	
<i>naproxen oral tablet, delayed release (dr/ec) 375 mg, 500 mg</i> (EC-Naprosyn)	
<i>naproxen sodium oral tablet 220 mg</i> (Aleve)	
<i>naproxen sodium oral tablet 275 mg</i>	
<i>naproxen sodium oral tablet 550 mg</i> (Anaprox DS)	
PAIN RELIEF (IBUPROFEN) ORAL TABLET 200 MG (ibuprofen)	
<i>sulindac oral tablet 150 mg, 200 mg</i>	
WAL-PROFEN ORAL TABLET 200 MG (ibuprofen)	
WAL-PROXEN ORAL TABLET 220 MG (naproxen sodium)	
Local Anesthesia	
Local Anesthetics	
<i>lidocaine hcl mucous membrane solution 2 %</i>	
Lower Gastrointestinal Disorders - Bowel Inflammation	
Bowel Antiinflammatory Agents	
<i>sulfadiazine oral tablet 500 mg</i>	
Chronic Inflamm. Colon Dx, 5-A-Salicylate, Rectal Tx	
<i>mesalamine rectal enema 4 gram/60 ml</i> (Rowasa)	
<i>mesalamine rectal suppository 1,000 mg</i> (Canasa)	
Drug Tx-Chronic Inflamm. Colon Dx, 5-Aminosalicylate	
<i>balsalazide oral capsule 750 mg</i> (Colazal)	
<i>mesalamine oral capsule (with del rel tablets) 400 mg</i>	ST; ST: STEP THERAPY REQUIRED
<i>mesalamine oral tablet, delayed release (dr/ec) 1.2 gram</i> (Lialda)	ST; ST: STEP THERAPY REQUIRED
<i>mesalamine oral tablet, delayed release (dr/ec) 800 mg</i>	ST; ST: STEP THERAPY REQUIRED
<i>sulfasalazine oral tablet 500 mg</i> (Azulfidine)	
<i>sulfasalazine oral tablet, delayed release (dr/ec) 500 mg</i> (Azulfidine EN-tabs)	
Hemorrhoidal Prep, Anti-Inflamm Steroid/Local Anesth	
<i>hydrocortisone-pramoxine rectal cream 2.5-1 %</i> (Analpram-HC)	
Hemorrhoidals, Local Rectal Anesthetics	
ANECREAM5 TOPICAL CREAM 5 % (lidocaine)	
HEMORRHOIDAL RELIEF TOPICAL CREAM 5 % (lidocaine)	

Drug	Notes
HEMORRHOID-FISSURE PAIN TOPICAL CREAM 5 %	(lidocaine)
<i>lidocaine topical cream 5 %</i>	(AneCream5)
LIDONUMB TOPICAL CREAM 5 %	(lidocaine)
NUMBCREAM TOPICAL CREAM 5 %	(lidocaine)
RECTALIEF TOPICAL CREAM 5 %	(lidocaine)
Lower Gastrointestinal Disorders - Other	
Ammonia Inhibitors	
ENULOSE ORAL SOLUTION 10 GRAM/15 ML	(lactulose)
GENERLAC ORAL SOLUTION 10 GRAM/15 ML	(lactulose)
Antidiarrheals	
ANTI-DIARRHEAL (LOPERAMIDE) ORAL CAPSULE 2 MG	(loperamide)
ANTI-DIARRHEAL (LOPERAMIDE) ORAL TABLET 2 MG	(loperamide)
ANTI-DIARRHEAL ORAL SUSPENSION 262 MG/15 ML	(bismuth subsalicylate)
DIAMODE ORAL TABLET 2 MG	(loperamide)
DIARRHEA RELIEF (BISMUTH SUBS) ORAL SUSPENSION 262 MG/15 ML	(bismuth subsalicylate)
<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	(Lomotil)
IMODIUM A-D ORAL CAPSULE 2 MG	(loperamide)
KAOPLECTATE (BISMUTH SUBSALICY) ORAL SUSPENSION 262 MG/15 ML	(bismuth subsalicylate)
K-PEC ANTIDIARRHEAL (BISM SUB) ORAL SUSPENSION 262 MG/15 ML	(bismuth subsalicylate)
<i>loperamide oral capsule 2 mg</i>	(Anti-Diarrheal (loperamide))
<i>loperamide oral tablet 2 mg</i>	(Anti-Diarrheal (loperamide))
SOOTHE REGULAR STRENGTH ORAL SUSPENSION 262 MG/15 ML	(bismuth subsalicylate)
STOMACH RELIEF ORAL SUSPENSION 262 MG/15 ML	(bismuth subsalicylate)
STOMACH RELIEF ORIGINAL ORAL SUSPENSION 262 MG/15 ML	(bismuth subsalicylate)
ULTRA A-D ORAL TABLET 2 MG	(loperamide)
Bile Salts	
<i>ursodiol oral capsule 300 mg</i>	

Drug	Notes
<i>ursodiol oral tablet 500 mg</i> (URSO Forte)	
Laxatives And Cathartics	
BENEFIBER CLEAR SF (DEXTRIN) ORAL POWDER IN PACKET 3 GRAM/3.5 GRAM	
BEST FIBER ORAL POWDER 3 GRAM/3.5 GRAM	
<i>bisacodyl oral tablet, delayed release (dr/ec) 5 mg</i> (C-Lax Laxative (bisacodyl))	
CITROMA ORAL SOLUTION (magnesium citrate)	
C-LAX LAXATIVE (BISACODYL) ORAL TABLET, DELAYED RELEASE (DR/EC) 5 MG (bisacodyl)	
CLEARLAX ORAL POWDER 17 GRAM/DOSE (polyethylene glycol 3350)	QL (510 GM per 30 days)
CONSTULOSE ORAL SOLUTION 10 GRAM/15 ML (lactulose)	
DAILY FIBER (PSYLLIUM-SUCROSE) ORAL POWDER 3.4 GRAM/12 GRAM, 3.4 GRAM/7 GRAM	
DAILY FIBER ORAL CAPSULE 0.4 GRAM, 0.52 GRAM (psyllium husk)	
<i>docusate calcium oral capsule 240 mg</i> (Stool Softener (docusate cal))	
<i>docusate sodium oral capsule 100 mg</i> (Dulcolax Stool Softener (dss))	
<i>docusate sodium oral capsule 250 mg</i> (Prolaxa)	
<i>docusate sodium oral liquid 50 mg/5 ml</i> (OneLAX Docusate Sodium)	
<i>docusate sodium oral syrup 60 mg/15 ml</i> (Stool Softener)	
<i>docusate sodium oral tablet 100 mg</i> (DOK)	
DOCUZEN ORAL TABLET 8.6-50 MG (sennosides-docusate sodium)	
DOK ORAL TABLET 100 MG (docusate sodium)	
DULCOLAX (MAGNESIUM HYDROXIDE) ORAL SUSPENSION 400 MG/5 ML (magnesium hydroxide)	
DULCOLAX STOOL SOFTENER (DSS) ORAL CAPSULE 100 MG (docusate sodium)	
FIBER (CALCIUM POLYCARBOPHIL) ORAL TABLET 625 MG (calcium polycarbophil)	
FIBER (DEXTRIN) ORAL POWDER 3 GRAM/3.5 GRAM	
FIBER (PSYLLIUM HUSK) ORAL CAPSULE 0.52 GRAM (psyllium husk)	
FIBER (PSYLLIUM HUSK-SUGAR) ORAL POWDER 3.4 GRAM/12 GRAM, 3.4 GRAM/7 GRAM	

Drug		Notes
FIBER (WITH ASPARTAME) ORAL POWDER 3.4 GRAM/5.8 GRAM		
FIBER LAXATIVE (CA POLYCARBO) ORAL TABLET 625 MG	(calcium polycarbophil)	
FIBER LAXATIVE (PSYLLIUM HUSK) ORAL CAPSULE 0.52 GRAM	(psyllium husk)	
FIBER THERAPY (CA POLYCARBOPH) ORAL TABLET 625 MG	(calcium polycarbophil)	
FIBER THERAPY (M-CELL/SUGAR) ORAL POWDER 2 GRAM/19 GRAM		
FIBER THERAPY LAXATIVE (HUSK) ORAL CAPSULE 0.52 GRAM	(psyllium husk)	
FIBER THERAPY(PSYL SEED-SUGAR) ORAL POWDER	(psyllium seed (sugar))	
FIBER-LAX ORAL TABLET 625 MG	(calcium polycarbophil)	
FIBER-TABS ORAL TABLET 625 MG	(calcium polycarbophil)	
FLEET BISACODYL ORAL TABLET,DELAYED RELEASE (DR/EC) 5 MG	(bisacodyl)	
FLEET DOCUSATE ORAL CAPSULE 100 MG	(docusate sodium)	
GAVILYTE-C ORAL RECON SOLN 240- 22.72-6.72 -5.84 GRAM	(peg 3350-electrolytes)	
GAVILYTE-G ORAL RECON SOLN 236- 22.74-6.74 -5.86 GRAM	(peg 3350-electrolytes)	
GAVILYTE-N ORAL RECON SOLN 420 GRAM	(peg-electrolyte soln)	
GENTLE LAXATIVE (BISACODYL) ORAL TABLET,DELAYED RELEASE (DR/EC) 5 MG	(bisacodyl)	
GENTLE LAXATIVE (MAG HYDROX) ORAL SUSPENSION 400 MG/5 ML	(magnesium hydroxide)	
GENTLELAX ORAL POWDER 17 GRAM/DOSE	(polyethylene glycol 3350)	QL (510 GM per 30 days)
GERI-KOT ORAL TABLET 8.6 MG	(sennosides)	
GERI-MUCIL (SUGAR) ORAL POWDER 3.4 GRAM/7 GRAM		
HYDROCIL ORAL POWDER	(psyllium)	
INSTALAX ORAL POWDER 17 GRAM/DOSE	(polyethylene glycol 3350)	QL (510 GM per 30 days)
<i>lactulose oral solution 10 gram/15 ml</i>	(Constulose)	
LAX STOOL SOFTENER WITH SENNA ORAL TABLET 8.6-50 MG	(sennosides-docusate sodium)	
LAXA BASIC ORAL CAPSULE 100 MG	(docusate sodium)	
LAXACIN ORAL TABLET 8.6-50 MG	(sennosides-docusate sodium)	

Drug	Notes
LAXACLEAR ORAL POWDER 17 GRAM/DOSE (polyethylene glycol 3350)	QL (510 GM per 30 days)
LAXATIVE (BISACODYL) ORAL TABLET 5 MG	
LAXATIVE (BISACODYL) ORAL TABLET, DELAYED RELEASE (DR/EC) 5 MG (bisacodyl)	
LAXATIVE (SENNOSIDES) ORAL TABLET 8.6 MG (sennosides)	
LAXATIVE PEG 3350 ORAL POWDER 17 GRAM/DOSE (polyethylene glycol 3350)	QL (510 GM per 30 days)
<i>magnesium citrate oral solution</i> (Citroma)	
<i>magnesium hydroxide oral suspension 400 mg/5 ml</i> (Dulcolax (magnesium hydroxide))	
METAMUCIL MULTIHEALTH FIBER ORAL POWDER 3.4 GRAM/5.8 GRAM	
METAMUCIL SUGAR-FREE (ASPART) ORAL POWDER 3.4 GRAM/5.8 GRAM	
MILK OF MAGNESIA ORAL SUSPENSION 400 MG/5 ML (magnesium hydroxide)	
MOVE IT ALONG ORAL TABLET 100 MG (docusate sodium)	
NATURAL DAILY FIBER ORAL POWDER 3.4 GRAM/5.8 GRAM	
NATURAL FIBER LAXATIVE (SUGAR) ORAL POWDER (psyllium seed (sugar))	
NATURAL FIBER LAXATIVE ORAL CAPSULE 0.52 GRAM (psyllium husk)	
NATURAL FIBER LAXATIVE (ASPART) ORAL POWDER	
NATURAL FIBER SUPPLEMENT ORAL POWDER 6 GRAM/6 GRAM	
NATURAL VEG LAXATIVE (SENNOSID) ORAL TABLET 8.6 MG (sennosides)	
ONELAX DOCUSATE SODIUM ORAL LIQUID 50 MG/5 ML (docusate sodium)	
ONELAX MAGNESIUM CITRATE ORAL SOLUTION (magnesium citrate)	
ONELAX SENNA ORAL SYRUP 8.8 MG/5 ML (sennosides)	
<i>peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram</i> (GaviLyte-G)	
<i>peg-electrolyte soln oral recon soln 420 gram</i> (GaviLyte-N)	
PHILLIPS' LIQUI-GELS ORAL CAPSULE 100 MG (docusate sodium)	
<i>polyethylene glycol 3350 oral powder 17 gram/dose</i> (ClearLax)	QL (510 GM per 30 days)
POWDERLAX ORAL POWDER 17 GRAM/DOSE (polyethylene glycol 3350)	QL (510 GM per 30 days)

Drug		Notes
PROLAXA ORAL CAPSULE 250 MG	(docusate sodium)	
PROMOLAXIN ORAL TABLET 100 MG	(docusate sodium)	
<i>psyllium husk (with sugar) oral powder 3 gram/7 gram</i>	(Daily Fiber (psyllium-sucrose))	
<i>psyllium husk oral capsule 0.4 gram, 0.52 gram</i>	(Daily Fiber)	
PURELAX ORAL POWDER 17 GRAM/DOSE	(polyethylene glycol 3350)	QL (510 GM per 30 days)
REGULOID (PSYLLIUM HUSK) ORAL CAPSULE 0.4 GRAM	(psyllium husk)	
SENEXON-S ORAL TABLET 8.6-50 MG	(sennosides-docusate sodium)	
SENNA LAX ORAL TABLET 8.6 MG	(sennosides)	
SENNA LAXATIVE ORAL TABLET 8.6 MG	(sennosides)	
SENNA ORAL SYRUP 8.8 MG/5 ML	(sennosides)	
SENNA ORAL TABLET 8.6 MG	(sennosides)	
SENNA PLUS ORAL TABLET 8.6-50 MG	(sennosides-docusate sodium)	
SENNA-S ORAL TABLET 8.6-50 MG	(sennosides-docusate sodium)	
SENNA-TIME S ORAL TABLET 8.6-50 MG	(sennosides-docusate sodium)	
<i>sennosides oral syrup 8.8 mg/5 ml</i>	(OneLAX Senna)	
<i>sennosides oral tablet 8.6 mg</i>	(Geri-kot)	
<i>sennosides-docusate sodium oral tablet 8.6-50 mg</i>	(Docuzen)	
SENOKOT-S ORAL TABLET 8.6-50 MG	(sennosides-docusate sodium)	
SMOOTHLAX ORAL POWDER 17 GRAM/DOSE	(polyethylene glycol 3350)	QL (510 GM per 30 days)
<i>sodium,potassium,mag sulfates oral recon soln 17.5-3.13-1.6 gram</i>	(Suprep Bowel Prep Kit)	
STIMULANT LAXATIVE PLUS ORAL TABLET 8.6-50 MG	(sennosides-docusate sodium)	
STOOL SOFTENER (DOCUSATE CAL) ORAL CAPSULE 240 MG	(docusate calcium)	
STOOL SOFTENER ORAL CAPSULE 100 MG, 250 MG	(docusate sodium)	
STOOL SOFTENER ORAL CAPSULE 50 MG		
STOOL SOFTENER ORAL LIQUID 50 MG/5 ML	(docusate sodium)	
STOOL SOFTENER ORAL SYRUP 60 MG/15 ML	(docusate sodium)	
STOOL SOFTENER ORAL TABLET 100 MG	(docusate sodium)	

Drug	Notes
STOOL SOFTENER-LAXATIVE ORAL TABLET 8.6-50 MG (sennosides-docusate sodium)	
STOOL SOFTENER-STIMULANT LAXATIVE ORAL TABLET 8.6-50 MG (sennosides-docusate sodium)	
SUFLAVE ORAL RECON SOLN 178.7-7.3-0.5 GRAM	
SUTAB ORAL TABLET 1.479-0.188- 0.225 GRAM	
VEGETABLE LAXATIVE ORAL TABLET 8.6 MG (sennosides)	
VEGETABLE LAX-STOOL SOFTENER ORAL TABLET 8.6-50 MG (sennosides-docusate sodium)	
WAL-MUCIL 100% NATURAL FIBER 114 DOSES,ORANGE 3.4 GRAM/5.8 GRAM	
WAL-MUCIL 100% NATURAL FIBER 180 DOSES,ORANGE 3.4 GRAM/5.8 GRAM	
WAL-MUCIL FIBER (SUGAR) ORAL POWDER 3.4 GRAM/7 GRAM	
WAL-MUCIL FIBER ORAL CAPSULE 0.52 GRAM (psyllium husk)	
WAL-MUCIL NATURAL FIBER LAX ORAL POWDER 3.4 GRAM/12 GRAM	
WOMAN'S LAXATIVE (BISACODYL) ORAL TABLET 5 MG	
WOMEN'S GENTLE LAXATIVE(BISAC) ORAL TABLET,DELAYED RELEASE (DR/EC) 5 MG (bisacodyl)	
WOMEN'S LAXATIVE (BISACODYL) ORAL TABLET 5 MG	
Laxatives, Local/Rectal	
<i>bisacodyl rectal suppository 10 mg</i> (Gentle Laxative (bisacodyl))	
CHILDREN'S PROCTOZONE-G RECTAL SUPPOSITORY (glycerin (child))	
ENEMA DISPOSABLE RECTAL ENEMA 19-7 GRAM/118 ML	
ENEMA RECTAL ENEMA 19-7 GRAM/118 ML	
FLEET ENEMA RECTAL ENEMA 19-7 GRAM/118 ML	
FLEET GLYCERIN (ADULT) RECTAL SUPPOSITORY (glycerin (adult))	
FLEET PEDIATRIC RECTAL ENEMA 9.5-3.5 GRAM/59 ML	
GENTLE LAXATIVE (BISACODYL) RECTAL SUPPOSITORY 10 MG (bisacodyl)	
<i>glycerin (adult) rectal suppository</i> (Fleet Glycerin (Adult))	

Drug		Notes
glycerin (child) rectal suppository	(Children's Proctozone-G)	
LAXATIVE (BISACODYL) RECTAL SUPPOSITORY 10 MG	(bisacodyl)	
ONELAX BISACODYL RECTAL SUPPOSITORY 10 MG	(bisacodyl)	
PEDIATRIC ENEMA RECTAL ENEMA 9.5-3.5 GRAM/59 ML		
PROCTOZONE-B RECTAL SUPPOSITORY 10 MG	(bisacodyl)	
PROCTOZONE-GMAX RECTAL SUPPOSITORY	(glycerin (adult))	
PURE AND GENTLE (SALINE) RECTAL ENEMA 19-7 GRAM/118 ML		
READY-TO-USE ENEMA RECTAL ENEMA 19-7 GRAM/118 ML		
THE MAGIC BULLET RECTAL SUPPOSITORY 10 MG	(bisacodyl)	
Medical Supplies		
Diabetic Supplies		
UNISTIK 3 DUAL LANCET 18 GAUGE		QL (6.67 EA per 1 day)
Durable Medical Equipment,Misc		
CUT N CRUSH		
PILL SPLITTER		
SHARPS CONTAINER		
TABLET CUTTER		
Durable Medical Equipment,Misc(Group 1)		
ACCU-CHEK FASTCLIX LANCET DRUM	(lancets)	QL (6.67 EA per 1 day)
ACCU-CHEK SAFE-T-PRO PLUS 23 GAUGE		QL (6.67 EA per 1 day)
ACCU-CHEK SOFTCLIX LANCETS	(lancets)	QL (6.67 EA per 1 day)
ACTI-LANCE LANCETS 17 GAUGE, 23 GAUGE		QL (6.67 EA per 1 day)
ACTI-LANCE LANCETS 28 GAUGE	(lancets)	QL (6.67 EA per 1 day)
ADVANCED TRAVEL LANCETS 28 GAUGE	(lancets)	QL (6.67 EA per 1 day)
ADVANTAGE SAFETY LANCET 28 GAUGE	(lancets)	QL (6.67 EA per 1 day)
ADVOCATE LANCET 21 GAUGE, 26 GAUGE, 28 GAUGE, 30 GAUGE	(lancets)	QL (6.67 EA per 1 day)
ADVOCATE LANCET 23 GAUGE		QL (6.67 EA per 1 day)
AGAMATRIX ULTRA-THIN LANCET 33 GAUGE	(lancets)	QL (6.67 EA per 1 day)
ALTERNATE SITE LANCET 26 GAUGE	(lancets)	QL (6.67 EA per 1 day)
ASSURE LANCE 25 GAUGE		QL (6.67 EA per 1 day)
ASSURE LANCE 28 GAUGE	(lancets)	QL (6.67 EA per 1 day)

Drug	Notes
ASSURE LANCE PLUS 21 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
ASSURE LANCE PLUS 25 GAUGE	QL (6.67 EA per 1 day)
BD MICROTAINER LANCET 1.5 X 2 MM	QL (6.67 EA per 1 day)
BD MICROTAINER LANCET 21 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
BULLSEYE MINI SAFETY LANCETS 21 GAUGE, 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
BULLSEYE MINI SAFETY LANCETS 25 GAUGE	QL (6.67 EA per 1 day)
BUTTERFLY TOUCH LANCET 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
CAREONE ULTRA THIN LANCET (lancets)	QL (6.67 EA per 1 day)
CARESENS LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
CARETOUCH SAFETY LANCETS 26 GAUGE, 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
CARETOUCH TWIST LANCET 28 GAUGE, 30 GAUGE, 33 GAUGE (lancets)	QL (6.67 EA per 1 day)
CHOSEN LANCET 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
CHOSEN SAFETY LANCET 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
CLEVER CHEK LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
COAGUCHEK LANCETS (lancets)	QL (6.67 EA per 1 day)
COMFORT EZ LANCETS 23 GAUGE	QL (6.67 EA per 1 day)
COMFORT EZ LANCETS 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
COMFORT TOUCH PLUS SAFETY LANC 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
COMFORT TOUCH ULT THIN LANCETS 31 GAUGE	QL (6.67 EA per 1 day)
DROPLET LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
DROPLET MEDLANCE PLUS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
DROPSAFE ACTI-LANCE 17 GAUGE, 23 GAUGE	QL (6.67 EA per 1 day)
DROPSAFE ACTI-LANCE 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
DROPSAFE ERGOLANCE 21 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
DROPSAFE ERGOLANCE 25 GAUGE	QL (6.67 EA per 1 day)
DROPSAFE HAEMOLANCE PLUS 18 GAUGE, 25 GAUGE	QL (6.67 EA per 1 day)
DROPSAFE HAEMOLANCE PLUS 21 GAUGE, 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
DROPSAFE HAEMOLANCE PLUS BLADE 1.5 X 1.2 MM, 1.5 X 1.6 MM	QL (6.67 EA per 1 day)
DROPSAFE MEDISAFE SOLO LANCET 23 GAUGE, 29 GAUGE	QL (6.67 EA per 1 day)
DROPSAFE MEDLANCE PLUS 21 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
DROPSAFE MEDLANCE PLUS 25 GAUGE	QL (6.67 EA per 1 day)

Drug	Notes
DROPSAFE MEDLANCE PLUS BLADE 0.8 X 2 MM	QL (6.67 EA per 1 day)
EASY COMFORT LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
EASY COMFORT SAFETY LANCET 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
EASY TOUCH SAFETY LANCETS 21 GAUGE, 26 GAUGE, 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
EASY TOUCH SAFETY LANCETS 23 GAUGE, 32 GAUGE	QL (6.67 EA per 1 day)
EASY TOUCH TWIST LANCETS 26 GAUGE, 28 GAUGE, 30 GAUGE, 33 GAUGE (lancets)	QL (6.67 EA per 1 day)
EASY TOUCH TWIST LANCETS 32 GAUGE	QL (6.67 EA per 1 day)
EASY TWIST AND CAP LANCETS 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
EMBRACE LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
EMBRACE SAFETY LANCET 21 GAUGE, 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
EZ SMART LANCETS 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
FINGERSTIX LANCETS (lancets)	QL (6.67 EA per 1 day)
FONDCIRCLE LANCET 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
FORACARE LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
FREESTYLE LANCETS 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
FREESTYLE UNISTIK 2 (lancets)	QL (6.67 EA per 1 day)
GLUCOCOM LANCETS 28 GAUGE, 30 GAUGE, 33 GAUGE (lancets)	QL (6.67 EA per 1 day)
GOJJI LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
INCONTROL SUPER THIN LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
INCONTROL ULTRA THIN LANCETS 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
INJECT EASE LANCETS 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
INVACARE LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
<i>lancets</i> (Accu-Chek Fastclix Lancet Drum)	QL (6.67 EA per 1 day)
<i>lancets 26 gauge, 30 gauge</i> (Advocate Lancet)	QL (6.67 EA per 1 day)
<i>lancets 28 gauge</i> (Acti-Lance Lancets)	QL (6.67 EA per 1 day)
<i>lancets 33 gauge</i> (AgaMatrix Ultra-Thin Lancet)	QL (6.67 EA per 1 day)
LANCETS, THIN 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
MEDLANCE PLUS LANCETS 21 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
MEDLANCE PLUS LANCETS 25 GAUGE	QL (6.67 EA per 1 day)

Drug	Notes
MEDLANCE PLUS SPECIAL BLADE 0.8 X 2 MM	QL (6.67 EA per 1 day)
MICRO THIN LANCETS 33 GAUGE (lancets)	QL (6.67 EA per 1 day)
MICROLET LANCET (lancets)	QL (6.67 EA per 1 day)
MICROLET NEXT LANCET 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
MOBI BLOOD GLUCOSE TWIST LANCT 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
MOBILE LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
MONOLET LANCETS 21 GAUGE (lancets)	QL (6.67 EA per 1 day)
MONOLET THIN LANCETS 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
MYGLUCOHEALTH LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
NOVA SAFETY LANCETS 23 GAUGE	QL (6.67 EA per 1 day)
NOVA SAFETY LANCETS 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
NOVA SUREFLEX LANCETS (lancets)	QL (6.67 EA per 1 day)
ON CALL LANCET 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
ONETOUCH DELICA PLUS LANCET 30 GAUGE, 33 GAUGE (lancets)	QL (6.67 EA per 1 day)
ONETOUCH DELICA SAFETY LANCET 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
ONETOUCH ULTRASOFT 2 LANCET 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
ON-THE-GO LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
PERFECT POINT SAFETY LANCETS 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
PIP LANCET 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
PRESSURE ACTIVATED LANCETS 21 GAUGE, 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
PRO COMFORT LANCET 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
PRO COMFORT LANCET 31 GAUGE	QL (6.67 EA per 1 day)
PRO COMFORT SAFETY LANCET 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
PRODIGY LANCETS 26 GAUGE, 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
PRODIGY TWIST TOP LANCET 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
PURE COMFORT LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
PURE COMFORT SAFETY LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
PUSH BUTTON SAFETY LANCETS 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
RELIAMED LANCET 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
RELIAMED SAFETY SEAL LANCETS 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
RIGHTEST GL300 LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
SAFETY LANCETS 21 GAUGE, 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
SAFETY SEAL LANCETS 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
SAFETY-LET LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)

Drug	Notes
SENSILANCE 21 GAUGE, 26 GAUGE, 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
SINGLE-LET (lancets)	QL (6.67 EA per 1 day)
SMARTTEST LANCET (lancets)	QL (6.67 EA per 1 day)
SOLUS V2 LANCETS 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
STERILANCE TL 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
STERILANCE TL 32 GAUGE	QL (6.67 EA per 1 day)
SUPER THIN LANCETS 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
SURE COMFORT LANCETS 18 GAUGE, 23 GAUGE	QL (6.67 EA per 1 day)
SURE COMFORT LANCETS 21 GAUGE, 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
SURE-LANCE , 26 GAUGE, 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
SURE-LANCE ULTRA THIN 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
SURE-TOUCH LANCET (lancets)	QL (6.67 EA per 1 day)
TECHLITE LANCETS 26 GAUGE, 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
TELCARE LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
THIN LANCETS 26 GAUGE (lancets)	QL (6.67 EA per 1 day)
TRUE COMFORT LANCET 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
TRUEPLUS LANCETS 28 GAUGE, 30 GAUGE, 33 GAUGE (lancets)	QL (6.67 EA per 1 day)
TWIST LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
TWIST LANCETS 32 GAUGE	QL (6.67 EA per 1 day)
ULTILET BASIC LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
ULTILET CLASSIC LANCETS , 28 GAUGE, 30 GAUGE, 33 GAUGE (lancets)	QL (6.67 EA per 1 day)
ULTILET LANCETS 28 GAUGE, 30 GAUGE, 33 GAUGE (lancets)	QL (6.67 EA per 1 day)
ULTILET SAFETY LANCETS 23 GAUGE	QL (6.67 EA per 1 day)
ULTRA THIN II LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
ULTRA THIN LANCETS , 28 GAUGE, 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
ULTRA THIN LANCETS 31 GAUGE	QL (6.67 EA per 1 day)
ULTRA TLC LANCETS (lancets)	QL (6.67 EA per 1 day)
ULTRA-CARE LANCETS 30 GAUGE (lancets)	QL (6.67 EA per 1 day)
ULTRALANCE LANCETS 26 GAUGE, 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
ULTRA-THIN II LANCETS 28 GAUGE (lancets)	QL (6.67 EA per 1 day)
UNILET COMFORTOUCH LANCET , 26 GAUGE (lancets)	QL (6.67 EA per 1 day)
UNILET GP LANCET (lancets)	QL (6.67 EA per 1 day)

Drug		Notes
UNILET LANCET 28 GAUGE, 33 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNILET LANCETS 30 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNILET SUPER THIN LANCETS 30 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK 2 EXTRA LANCET 21 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK 2 NORMAL LANCET 21 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK 3 COMFORT LANCET 28 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK 3 EXTRA LANCET 21 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK 3 GENTLE 30 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK 3 NORMAL LANCET 23 GAUGE		QL (6.67 EA per 1 day)
UNISTIK COMFORT LANCETS 28 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK CZT LANCET 23 GAUGE		QL (6.67 EA per 1 day)
UNISTIK CZT LANCET 28 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK EXTRA LANCETS 21 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK NORMAL LANCETS 23 GAUGE		QL (6.67 EA per 1 day)
UNISTIK PRO LANCET 21 GAUGE, 28 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK PRO LANCET 25 GAUGE		QL (6.67 EA per 1 day)
UNISTIK SAFETY 28 GAUGE, 30 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK TOUCH LANCETS 21 GAUGE, 28 GAUGE, 30 GAUGE	(lancets)	QL (6.67 EA per 1 day)
UNISTIK TOUCH LANCETS 23 GAUGE		QL (6.67 EA per 1 day)
UNIVERSAL 1 LANCETS 26 GAUGE	(lancets)	QL (6.67 EA per 1 day)
VERIFINE SAFETY LANCET MINI 21 GAUGE, 28 GAUGE, 30 GAUGE	(lancets)	QL (6.67 EA per 1 day)
VERIFINE SAFETY LANCET MINI 23 GAUGE		QL (6.67 EA per 1 day)
VERIFINE UNIVERSAL LANCET 28 GAUGE, 30 GAUGE, 33 GAUGE	(lancets)	QL (6.67 EA per 1 day)
VIVAGUARD LANCET 30 GAUGE	(lancets)	QL (6.67 EA per 1 day)
VIVAGUARD SAFETY LANCET 28 GAUGE	(lancets)	QL (6.67 EA per 1 day)
Syringes And Accessories		
ADVOCATE SYRINGES SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
<i>aq insulin syr 0.5 ml 30g 8mm (rx) 0.5 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>aq insulin syr 1 ml 31g 8mm (rx) 1 ml 31 gauge x 5/16</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>aq insulin syrin 1 ml 29g 12mm (rx) 1 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
BD ECLIPSE LUER-LOK SYRINGE 1 ML 30 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)

Drug		Notes
BD SAFETYGLIDE INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 15/64", 1 ML 29 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64"		QL (16.67 EA per 1 day)
BD SAFETYGLIDE SYRINGE SYRINGE 1 ML 27 GAUGE X 5/8"	(insulin syringe-needle u- 100)	QL (16.67 EA per 1 day)
<i>ca ins syr 0.3 ml 30gx5/16" short 0.3 ml 30 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ca ins syr 0.3 ml 30gx5/16" short 0.3 ml 30 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ca ins syr 0.3 ml 31gx5/16" short 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ca ins syr 0.3 ml 31gx5/16" short 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ca ins syr 0.5 ml 30gx5/16" short (otc) 0.5 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>ca ins syr 0.5 ml 30gx5/16" short (otc) 0.5 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>ca ins syr 0.5 ml 31gx5/16" short (otc) 0.5 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ca ins syr 0.5 ml 31gx5/16" short (otc) 0.5 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ca insulin syr 0.3 ml 29gx1/2" 0.3 ml 29 gauge x 1/2"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>ca insulin syr 0.3 ml 29gx1/2" 0.3 ml 29 gauge x 1/2"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>ca insulin syr 0.5 ml 29gx1/2" (otc) 0.5 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>ca insulin syr 0.5 ml 29gx1/2" (otc) 0.5 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>ca insulin syr 1 ml 29gx1/2" (otc) 1 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>ca insulin syr 1 ml 29gx1/2" (otc) 1 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>ca insulin syr 1 ml 30gx5/16" short (otc) 1 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>ca insulin syr 1 ml 30gx5/16" short (otc) 1 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>ca insulin syr 1 ml 31gx5/16" short (otc) 1 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ca insulin syr 1 ml 31gx5/16" short (otc) 1 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)

Drug		Notes
<i>careone syr 0.5 ml 30gx1/2" regular, hri (otc)</i> <i>0.5 ml 30 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>careone syr 1 ml 30gx1/2" regular, hri (otc) 1 ml 30 gauge x 1/2"</i>	(BD Eclipse Luer-Lok)	QL (16.67 EA per 1 day)
CARETOUCH INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	(insulin syringe-needle u- 100)	QL (16.67 EA per 1 day)
CARETOUCH INSULIN SYRINGE SYRINGE 1 ML 28 X 5/16", 1 ML 29 GAUGE X 5/16		QL (16.67 EA per 1 day)
COMFORT EZ INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 31 GAUGE X 15/64"	(insulin syringe-needle u- 100)	QL (16.67 EA per 1 day)
DROPLET INSULIN SYR(HALF UNIT) SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 15/64", 0.5 ML 31 GAUGE X 5/16", 0.5ML 30 GAUGE X 15/64"		QL (16.67 EA per 1 day)
DROPLET INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 31 GAUGE X 15/64"	(insulin syringe-needle u- 100)	QL (16.67 EA per 1 day)
DROPLET INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 15/64", 1 ML 30 GAUGE X 15/64"		QL (16.67 EA per 1 day)

Drug	Notes
DROPSAFE INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 31 GAUGE X 15/64", 0.5 ML 31 GAUGE X 5/16", 1 ML 29 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16"	QL (16.67 EA per 1 day)
EASY COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", (insulin syringe-needle u- 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE 100) X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 29 X5/16 "	QL (16.67 EA per 1 day)
EASY COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 31 X 1/2", 1 ML 29 GAUGE X 5/16, 1 ML 32 GAUGE X 5/16", 1/2 ML 32 GAUGE X 5/16"	QL (16.67 EA per 1 day)
EASY GLIDE INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE (insulin syringe-needle u- X 15/64", 1/2 ML 31 GAUGE X 15/64" 100)	QL (16.67 EA per 1 day)
EASY TOUCH FLIPLOCK INSULIN SYRINGE 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16"	QL (16.67 EA per 1 day)
EASY TOUCH INSULIN SAFETY SYR SYRINGE 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2"	QL (16.67 EA per 1 day)
EASY TOUCH INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 27 GAUGE X 1/2", 1 ML 27 (insulin syringe-needle u- GAUGE X 5/8", 1 ML 28 GAUGE X 1/2", 1 ML 100) 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2"	QL (16.67 EA per 1 day)
EASY TOUCH LUER LOCK INSULIN SYRINGE 1 ML (insulin syringe needleless)	QL (16.67 EA per 1 day)
EASY TOUCH SHEATHLOCK INSULIN SYRINGE 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16"	QL (16.67 EA per 1 day)
EASY TOUCH UNI-SLIP SYRINGE 1 ML (insulin syringe needleless)	QL (16.67 EA per 1 day)
exel ins syr u100 1 ml 28gx1/2 (otc) 1 ml 28 gauge x 1/2" (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)

Drug		Notes
<i>exel ins syr u100 1 ml 28gx1/2 (otc) 1 ml 28 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
EXEL U100 0.3 ML 29GX1/2" 0.3 ML 29 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
EXEL U100 0.3 ML 29GX1/2" 0.3 ML 29 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
<i>exel u100 0.3 ml 30gx5/16" 0.3 ml 30 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>exel u100 0.3 ml 30gx5/16" 0.3 ml 30 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
EXEL U100 0.5 ML 28GX1/2" 1/2 ML 28 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
EXEL U100 0.5 ML 28GX1/2" 1/2 ML 28 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
<i>exel u100 0.5 ml 29gx1/2" (otc) 0.5 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>exel u100 0.5 ml 29gx1/2" (otc) 0.5 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
EXEL U100 0.5 ML 30GX5/16" 0.5 ML 30 GAUGE X 5/16"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
EXEL U100 0.5 ML 30GX5/16" 0.5 ML 30 GAUGE X 5/16"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
EXEL U100 1 ML 30GX5/16" 1 ML 30 GAUGE X 5/16	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
EXEL U100 1 ML 30GX5/16" 1 ML 30 GAUGE X 5/16	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
<i>exel u100 ins syr 1 ml 29gx1/2 (otc) 1 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>exel u100 ins syr 1 ml 29gx1/2 (otc) 1 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>gnp ins syringe 1 ml 28g 1/2" (otc) 1 ml 28 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>gnp insul syr 0.3 ml 31gx5/16" 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>gnp insul syr 0.5 ml 31gx5/16" (otc) 0.5 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>gnp insulin syr 1 ml 31gx5/16" (otc) 1 ml 31 gauge x 5/16</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
HEALTHWISE INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
<i>insulin syr 0.3 ml 30gx5/16" 0.3 ml 30 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syr 0.5 ml 28g 12.7mm (otc) 1/2 ml 28 gauge x 1/2"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)

Drug		Notes
<i>insulin syrin u100 half mark syringe 0.3 ml 31 gauge x 1/4"</i>	(UltiCare Insulin Syr(half unit))	QL (16.67 EA per 1 day)
<i>insulin syrin 0.3 ml 29gx1/2" 0.3 ml 29 gauge x 1/2"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.3 ml 30gx5/16" 0.3 ml 30 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.3 ml 30gx5/16" hri 0.3 ml 30 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.3 ml 30gx5/16" short 0.3 ml 30 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.3 ml 30gx5/16" short needle 0.3 ml 30 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.3 ml 31gx5/16" 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.3 ml 31gx5/16" hri 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.3 ml 31gx5/16" short 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.3 ml 31gx5/16" short needle 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.3 ml 31gx5/16" short needle,thin ii 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 28g 1/2" outer (rx) 1/2 ml 28 gauge x 1/2"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 28gx1/2" (otc) 1/2 ml 28 gauge x 1/2"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 29gx1/2" (otc) 0.5 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30g 1/2" (otc) 0.5 ml 30 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30g 5/16" (otc) 0.5 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30g 5/16" inner (rx) 0.5 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30g 5/16" inner (rx) 0.5 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30g 5/16" outer (rx) 0.5 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30gx1/2" (otc) 0.5 ml 30 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30gx1/2" (rx) 0.5 ml 30 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30gx1/2" short needle (otc) 0.5 ml 30 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)

Drug	Notes
<i>insulin syrin 0.5 ml 30gx5/16" (otc) 0.5 ml 30 gauge x 5/16"</i> (Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30gx5/16" (rx) 0.5 ml 30 gauge x 5/16"</i> (Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30gx5/16" hri (otc) 0.5 ml 30 gauge x 5/16"</i> (Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30gx5/16" short (otc) 0.5 ml 30 gauge x 5/16"</i> (Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 30gx5/16" short needle (otc) 0.5 ml 30 gauge x 5/16"</i> (Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 31g 5/16" inner (rx) 0.5 ml 31 gauge x 5/16"</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 31g 5/16" inner (rx) 0.5 ml 31 gauge x 5/16"</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 31g 5/16" outer (rx) 0.5 ml 31 gauge x 5/16"</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 31gx5/16" (otc) 0.5 ml 31 gauge x 5/16"</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 31gx5/16" hri (otc) 0.5 ml 31 gauge x 5/16"</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 31gx5/16" short (otc) 0.5 ml 31 gauge x 5/16"</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 31gx5/16" short needle (otc) 0.5 ml 31 gauge x 5/16"</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syrin 0.5 ml 31gx5/16" short needle,thin ii (otc) 0.5 ml 31 gauge x 5/16"</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syring 0.5 ml 28g 1/2" inner (rx) 1/2 ml 28 gauge x 1/2"</i> (Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syring 0.5 ml 28g 1/2" inner (rx) 1/2 ml 28 gauge x 1/2"</i> (Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syring 0.5 ml 29g 1/2" inner (rx) 0.5 ml 29 gauge x 1/2"</i> (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syring 0.5 ml 29g 1/2" inner (rx) 0.5 ml 29 gauge x 1/2"</i> (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syring 0.5 ml 29g 1/2" outer (rx) 0.5 ml 29 gauge x 1/2"</i> (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syring 0.5 ml 29gx1/2" (otc) 0.5 ml 29 gauge x 1/2"</i> (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 27g 1/2" inner 1 ml 27 gauge x 1/2"</i> (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 27g 1/2" inner 1 ml 27 gauge x 1/2"</i> (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 27g 1/2" outer 1 ml 27 gauge x 1/2"</i> (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 27g 13mm inner 1 ml 27 gauge x 1/2"</i> (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 27gx1/2" outer 1 ml 27 gauge x 1/2"</i> (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)

Drug		Notes
insulin syringe 1 ml 28g 1/2" inner (rx) 1 ml 28 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 28g 1/2" inner (rx) 1 ml 28 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 28g 1/2" outer (rx) 1 ml 28 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 28g 12.7mm (otc) 1 ml 28 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 28g 13mm inner (rx) 1 ml 28 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 28g 13mm outer (rx) 1 ml 28 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 28gx1/2" (otc) 1 ml 28 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 29g 1/2" inner (rx) 1 ml 29 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 29g 1/2" inner (rx) 1 ml 29 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 29g 1/2" outer (rx) 1 ml 29 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 29gx1/2" (otc) 1 ml 29 gauge x 1/2"	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30g 1/2" (otc) 1 ml 30 gauge x 1/2"	(BD Eclipse Luer-Lok)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30g 1/2" inner (rx) 1 ml 30 gauge x 1/2"	(BD Eclipse Luer-Lok)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30g 1/2" inner (rx) 1 ml 30 gauge x 1/2"	(BD Eclipse Luer-Lok)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30g 1/2" outer (rx) 1 ml 30 gauge x 1/2"	(BD Eclipse Luer-Lok)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30g 5/16" (otc) 1 ml 30 gauge x 5/16	(Exel Insulin)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30gx1/2" (otc) 1 ml 30 gauge x 1/2"	(BD Eclipse Luer-Lok)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30gx1/2" (rx) 1 ml 30 gauge x 1/2"	(BD Eclipse Luer-Lok)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30gx1/2" short needle (otc) 1 ml 30 gauge x 1/2"	(BD Eclipse Luer-Lok)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30gx5/16" (otc) 1 ml 30 gauge x 5/16	(Exel Insulin)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30gx5/16" (rx) 1 ml 30 gauge x 5/16	(Exel Insulin)	QL (16.67 EA per 1 day)
insulin syringe 1 ml 30gx5/16" hri (otc) 1 ml 30 gauge x 5/16	(Exel Insulin)	QL (16.67 EA per 1 day)

Drug	Notes
<i>insulin syringe 1 ml 30gx5/16" short (otc) 1 ml 30 gauge x 5/16</i> (Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 30gx5/16" short needle (otc) 1 ml 30 gauge x 5/16</i> (Exel Insulin)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 31g 5/16" inner (rx) 1 ml 31 gauge x 5/16</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 31g 5/16" inner (rx) 1 ml 31 gauge x 5/16</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 31g 5/16" outer (rx) 1 ml 31 gauge x 5/16</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 31gx5/16" (otc) 1 ml 31 gauge x 5/16</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 31gx5/16" hri (otc) 1 ml 31 gauge x 5/16</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 31gx5/16" short (otc) 1 ml 31 gauge x 5/16</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 31gx5/16" short needle (otc) 1 ml 31 gauge x 5/16</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
<i>insulin syringe 1 ml 31gx5/16" short needle,thin ii (otc) 1 ml 31 gauge x 5/16</i> (Advocate Syringes)	QL (16.67 EA per 1 day)
INSULIN SYRINGE SYRINGE 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2" (insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
<i>insulin syringe-needle u-100 syringe 0.3 ml 29 gauge, 1/2 ml 29</i> (Ultilet Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe-needle u-100 syringe 0.3 ml 30</i> (Ultra Comfort Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe-needle u-100 syringe 0.3 ml 30 gauge x 1/2", 0.3 ml 31 gauge x 15/64", 1 ml 31 gauge x 15/64", 1/2 ml 31 gauge x 15/64"</i> (Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe-needle u-100 syringe 0.3 ml 31 gauge x 1/4", 1 ml 31 gauge x 1/4", 1/2 ml 31 gauge x 1/4"</i> (Sure Comfort Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe-needle u-100 syringe 1 ml 27 gauge x 5/8"</i> (BD SafetyGlide Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe-needle u-100 syringe 1 ml 29 gauge x 7/16", 1 ml 30 gauge x 7/16", 1/2 ml 30 gauge</i>	QL (16.67 EA per 1 day)
<i>insulin syringe-needle u-100 syringe 1 ml 30 gauge x 3/8"</i> (Thinpro Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin syringe-needle u-100 syringe 1/2 ml 27 gauge x 1/2"</i> (Easy Touch Insulin Syringe)	QL (16.67 EA per 1 day)
<i>insulin u-500 syringe-needle syringe 1/2 ml 31 gauge x 15/64"</i>	QL (16.67 EA per 1 day)
MAGELLAN INSULIN SAFETY SYRNG SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16"	QL (16.67 EA per 1 day)

Drug		Notes
MAGELLAN SYRINGE SYRINGE 0.3 ML 30 X 5/16", 0.5 ML 30 GAUGE X 5/16"		QL (16.67 EA per 1 day)
MAXICOMFORT INSULIN SYRINGE SYRINGE 1 ML 27 GAUGE X 1/2", 1/2 ML 27 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
MAXI-COMFORT INSULIN SYRINGE SYRINGE 1 ML 28 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
MONOJECT INSULIN SAFETY SYRING SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
MONOJECT INSULIN SAFETY SYRING SYRINGE 1 ML 29 GAUGE X 1/2"		QL (16.67 EA per 1 day)
MONOJECT INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 25 GAUGE X 5/8", 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
MONOJECT INSULIN SYRINGE SYRINGE 1 ML	(insulin syringes (disposable))	QL (16.67 EA per 1 day)
MONOJECT SYRINGE SYRINGE 1/2 ML 28 GAUGE	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
MONOJECT ULTRA COMFORT INSULIN SYRINGE 1/2 ML 28 GAUGE	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
PRO COMFORT INSULIN SYRINGE SYRINGE 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
PRODIGY INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
<i>pub ins syringe 1 ml 30gx1/2" regular needle (otc) 1 ml 30 gauge x 1/2"</i>	(BD Eclipse Luer-Lok)	QL (16.67 EA per 1 day)
<i>pub insul syr 0.3 ml 31gx5/16" short needle 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>pub insul syr 0.5 ml 30gx1/2" regular needle (otc) 0.5 ml 30 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>pub insul syr 0.5 ml 31gx5/16" short needle (otc) 0.5 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)

Drug		Notes
<i>pub insulin syr 1 ml 31gx5/16" short needle (otc) 1 ml 31 gauge x 5/16</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>relion ins syr 1 ml 31gx5/16" inner (otc) 1 ml 31 gauge x 5/16</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>relion ins syr 1 ml 31gx5/16" outer, 10x10 (otc) 1 ml 31 gauge x 5/16</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>relion syring 0.3 ml 31gx5/16" inner 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>relion syring 0.3 ml 31gx5/16" outer, 10x10 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>relion syring 0.5 ml 31gx5/16" inner (otc) 0.5 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>relion syring 0.5 ml 31gx5/16" outer, 10x10 (otc) 0.5 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
SAFESNAP INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"		QL (16.67 EA per 1 day)
SECURESAFE INSULIN SYRINGE SYRINGE 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"		QL (16.67 EA per 1 day)
SURE COMFORT INS. SYR. U-100 SYRINGE 0.5 ML 29 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
SURE COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 1/4", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 1/4", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 31 GAUGE X 1/4"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
SURE-JECT INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
TECHLITE INSULIN SYRINGE SYRINGE 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)

Drug	Notes
TECHLITE INSULN SYR(HALF UNIT) SYRINGE 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 15/64", 0.5 ML 31 GAUGE X 5/16"	QL (16.67 EA per 1 day)
<i>terumo ins syr 0.3 ml 29gx1/2" 0.3 ml 29 gauge x 1/2"</i> (Exel Insulin)	QL (16.67 EA per 1 day)
TERUMO INSULIN SYRINGE SYRINGE 0.3 ML 30 X 3/8", 0.5 ML 29 GAUGE X 1/2", 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 X 3/8" (insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
THINPRO INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 X 3/8", 0.5 ML 29 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 3/8", 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 X 3/8" (insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
THINPRO INSULIN SYRINGE SYRINGE 0.3 ML 31 X 3/8", 0.5 ML 31 X 3/8", 1 ML 31 X 3/8"	QL (16.67 EA per 1 day)
TRUE COMFORT INSULIN SYRINGE SYRINGE 0.5 ML 31 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16 (insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
TRUE COMFORT PRO INS SYRINGE SYRINGE 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16 (insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
TRUE COMFORT PRO INS SYRINGE SYRINGE 1 ML 32 GAUGE X 5/16", 1/2 ML 32 GAUGE X 5/16"	QL (16.67 EA per 1 day)
TRUE COMFORT SAFE INSULIN SYRG SYRINGE 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16", 1 ML 32 GAUGE X 5/16"	QL (16.67 EA per 1 day)
TRUEPLUS INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2" (insulin syringe-needle u-100)	QL (16.67 EA per 1 day)

Drug		Notes
<i>ulticare ins syr 1 ml 31gx5/16" 31gx5/16" (otc)</i> <i>1 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ulticare ins safety 1 ml 29x1/2 (rx) 1 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>ulticare ins syr 1 ml 28gx1/2" 28gx1/2" (otc) 1 ml 28 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>ulticare ins syr 1 ml 29gx1/2" 29gx1/2" (otc) 1 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
ULTICARE INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 1/4", 1 ML 31 GAUGE X 1/4", 1/2 ML 31 GAUGE X 1/4"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
ULTICARE INSULN SYR(HALF UNIT) SYRINGE 0.3 ML 31 GAUGE X 1/4"	(insulin syr/ndl u100 half mark)	QL (16.67 EA per 1 day)
<i>ulticare safety 0.5 ml 29gx1/2 (rx) 0.5 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>ulticare syr 0.3 ml 30gx5/16" 30gx5/16" 0.3 ml 30 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ulticare syr 0.3 ml 31gx5/16" 0.3 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ulticare syr 0.5 ml 29gx1/2" 29gx1/2" (otc) 0.5 ml 29 gauge x 1/2"</i>	(Comfort EZ Insulin Syringe)	QL (16.67 EA per 1 day)
<i>ulticare syr 0.5 ml 30gx5/16" 30gx5/16" (otc) 0.5 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>ulticare syr 0.5 ml 31gx5/16" 31gx5/16" (otc) 0.5 ml 31 gauge x 5/16"</i>	(Advocate Syringes)	QL (16.67 EA per 1 day)
<i>ulticare syr 1 ml 30gx5/16" 30gx5/16" (otc) 1 ml 30 gauge x 5/16"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>ulticare syrin 0.3 ml 29gx1/2" 29gx1/2" 0.3 ml 29 gauge x 1/2"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
<i>ulticare syrin 0.5 ml 28gx1/2" 28gx1/2" (otc) 1/2 ml 28 gauge x 1/2"</i>	(Exel Insulin)	QL (16.67 EA per 1 day)
ULTICARE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 5/16	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
ULTIGUARD SAFEPACK-INSULIN SYR SYRINGE 0.3 ML 30 X 1/2", 0.3 ML 31 X 5/16", 1 ML 30 X 1/2", 1 ML 31 X 5/16", 1/2 ML 30 X 1/2", 1/2 ML 31 X 5/16"		QL (16.67 EA per 1 day)
ULTILET INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE, 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 29	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)

Drug	Notes
ULTILET INSULIN SYRINGE SYRINGE 1 ML 29 GAUGE	QL (16.67 EA per 1 day)
ULTRA CMFT INS SYR (HALF UNIT) SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16"	QL (16.67 EA per 1 day)
ULTRA COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30, 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 30 GAUGE X 7/16", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 29 , 1/2 ML 30 GAUGE	(insulin syringe-needle u-100) QL (16.67 EA per 1 day)
ULTRA FLO INSUL SYR(HALF UNIT) SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16"	QL (16.67 EA per 1 day)
ULTRA FLO INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2"	(insulin syringe-needle u-100) QL (16.67 EA per 1 day)
ULTRACARE INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	(insulin syringe-needle u-100) QL (16.67 EA per 1 day)
ULTRA-FINE INS SYR (HALF UNIT) SYRINGE 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16"	QL (16.67 EA per 1 day)
ULTRA-FINE INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 31 GAUGE X 15/64"	(insulin syringe-needle u-100) QL (16.67 EA per 1 day)
ULTRA-FINE SAFETY INSULIN SYRN SYRINGE 0.5 ML 31 GAUGE X 15/64"	QL (16.67 EA per 1 day)
ULTRA-THIN II (SHORT) INS SYR SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16	(insulin syringe-needle u-100) QL (16.67 EA per 1 day)

Drug		Notes
ULTRA-THIN II INSULIN SYRINGE SYRINGE 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
VANISHPOINT INSULIN SYRINGE SYRINGE 0.5 ML 30 GAUGE X 5/16", 1 ML 30 GAUGE X 3/16"		QL (16.67 EA per 1 day)
VANISHPOINT SYRINGE SYRINGE 0.5 ML 30 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
VERIFINE INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML 29 GAUGE X 1/2", 1 ML 31 GAUGE X 5/16"	(insulin syringe-needle u-100)	QL (16.67 EA per 1 day)
Miscellaneous Agents		
Anaphylaxis Therapy Agents		
AUVI-Q INJECTION AUTO-INJECTOR 0.15 MG/0.15 ML	(epinephrine)	QL (1 EA per 144 days)
AUVI-Q INJECTION AUTO-INJECTOR 0.3 MG/0.3 ML	(epinephrine)	PRIOR AUTHORIZATION REQUIRED. UHA FORMULARY LIMITS PATIENTS TO 1 FILL EVERY 144 DAYS WITHOUT PRIOR AUTHORIZATION.; QL (1 EA per 144 days)
<i>epinephrine injection auto-injector 0.15 mg/0.15 ml</i>	(Auvi-Q)	QL (1 EA per 144 days)
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml</i>	(EpiPen Jr)	PRIOR AUTHORIZATION REQUIRED. UHA FORMULARY LIMITS PATIENTS TO 1 FILL EVERY 144 DAYS WITHOUT PRIOR AUTHORIZATION.; QL (1 EA per 144 days)
<i>epinephrine injection auto-injector 0.3 mg/0.3 ml</i>	(Auvi-Q)	PRIOR AUTHORIZATION REQUIRED. UHA FORMULARY LIMITS PATIENTS TO 1 FILL EVERY 144 DAYS WITHOUT PRIOR AUTHORIZATION.; QL (1 EA per 144 days)
NEFFY NASAL SPRAY, NON-AEROSOL 2 MG/SPRAY (0.1 ML)		PA
Parasympathetic Agents		
<i>bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg</i>		
Neoplastic Disease		
Alkylating Agents		
<i>bendamustine intravenous recon soln 25 mg</i>	(Treanda)	PA; SP
<i>cyclophosphamide oral capsule 50 mg</i>		PA; SP
<i>cyclophosphamide oral tablet 50 mg</i>		PA; SP
<i>hydroxyurea oral capsule 500 mg</i>	(Hydrea)	
LEUKERAN ORAL TABLET 2 MG		PA; SP
<i>lomustine oral capsule 10 mg, 100 mg, 40 mg</i>	(Gleostine)	PA; SP

Drug	Notes
MYLERAN ORAL TABLET 2 MG	PA; SP
oxaliplatin intravenous solution 100 mg/20 ml, 50 mg/10 ml (5 mg/ml)	PA; SP
temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg	PA; SP
Antandrogenic Agents	
abiraterone oral tablet 250 mg (Abirtega)	PA; SP
ABIRTEGA ORAL TABLET 250 MG (abiraterone)	PA; SP
nilutamide oral tablet 150 mg	PA; SP
Antibiotic Antineoplastics	
dactinomycin intravenous recon soln 0.5 mg	PA; SP
Antimetabolites	
azacitidine injection recon soln 100 mg (Vidaza)	PA; SP
capecitabine oral tablet 150 mg, 500 mg	PA; SP
FOLOTYN INTRAVENOUS SOLUTION 20 MG/ML (1 ML), 40 MG/2 ML (20 MG/ML) (pralatrexate)	PA; SP
gemcitabine intravenous recon soln 1 gram, 2 gram, 200 mg	PA; SP
mercaptopurine oral tablet 50 mg	
methotrexate sodium (pf) injection solution 25 mg/ml	
methotrexate sodium injection solution 25 mg/ml	
methotrexate sodium oral tablet 2.5 mg	
pralatrexate intravenous solution 20 mg/ml (1 ml), 40 mg/2 ml (20 mg/ml) (Folotyn)	PA; SP
TABLOID ORAL TABLET 40 MG (thioguanine)	PA; SP
Antineoplast Egf Receptor Blocker Rcmb Mc Antibody	
ERBITUX INTRAVENOUS SOLUTION 100 MG/50 ML, 200 MG/100 ML	PA; SP
Antineoplastic Aromatase Inhibitors	
anastrozole oral tablet 1 mg (Arimidex)	
exemestane oral tablet 25 mg (Aromasin)	
letrozole oral tablet 2.5 mg (Femara)	
Antineoplastic - Mtor Kinase Inhibitors	
everolimus (antineoplastic) oral tablet 10 mg, 2.5 mg, 5 mg (Torpenz)	PA; SP
TORPENZ ORAL TABLET 10 MG, 2.5 MG, 5 MG (everolimus (antineoplastic))	PA; SP
YULITHIRA ORAL TABLET 10 MG, 2.5 MG, 5 MG (everolimus (antineoplastic))	PA; SP

Drug	Notes
Antineoplastic - Topoisomerase I Inhibitors	
HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG	PA; SP
<i>irinotecan intravenous solution 300 mg/15 ml</i> (Camptosar)	PA; SP
<i>topotecan intravenous recon soln 4 mg</i>	PA; SP
Antineoplastic Immunomodulator Agents	
<i>lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg</i> (Revlimid)	PA; SP
Antineoplastic Systemic Enzyme Inhibitors	
CAPRELSA ORAL TABLET 100 MG, 300 MG (vandetanib)	PA; SP
<i>dasatinib oral tablet 100 mg, 140 mg, 20 mg, 50 mg, 70 mg, 80 mg</i> (Sprycel)	PA; SP
<i>erlotinib oral tablet 100 mg, 150 mg, 25 mg</i>	PA; SP
<i>gefitinib oral tablet 250 mg</i> (Iressa)	PA; SP
<i>imatinib oral tablet 100 mg, 400 mg</i> (Gleevec)	PA; SP
<i>lapatinib oral tablet 250 mg</i> (Tykerb)	PA; SP
<i>nilotinib hcl oral capsule 150 mg, 200 mg</i> (Tasigna)	PA; SP
<i>pazopanib oral tablet 200 mg</i> (Votrient)	PA; SP
PHYRAGO ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	PA; SP
<i>sorafenib oral tablet 200 mg</i> (Nexavar)	PA; SP
<i>sunitinib malate oral capsule 12.5 mg, 25 mg, 50 mg</i> (Sutent)	PA; SP
Antineoplastic, Histone Deacetylase Inhibitors, Hdis	
ISTODAX INTRAVENOUS RECON SOLN 10 MG/2 ML (romidepsin)	PA; SP
<i>romidepsin intravenous recon soln 10 mg/2 ml</i> (Istodax)	PA; SP
ZOLINZA ORAL CAPSULE 100 MG	PA; SP
Antineoplastics, Miscellaneous	
BEIZRAY INTRAVENOUS SOLUTION 20 MG/ML (1 ML) (docetaxel)	PA; SP
<i>docetaxel intravenous solution 20 mg/ml (1 ml)</i> (Beizray)	PA; SP
<i>docetaxel intravenous solution 80 mg/4 ml (20 mg/ml)</i>	PA; SP
<i>etoposide oral capsule 50 mg</i> (VePesid)	
JEVTANA INTRAVENOUS SOLUTION 60 MG/1.5 ML (DILUTE 10MG/ML)	PA; SP
LYSODREN ORAL TABLET 500 MG	PA; SP
MATULANE ORAL CAPSULE 50 MG	PA; SP
<i>tretinoin (antineoplastic) oral capsule 10 mg</i>	PA; SP
Chemotherapy Rescue/Antidote Agents	
<i>leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg</i>	
Selective Estrogen Receptor Modulators (Serm)	

Drug	Notes
<i>tamoxifen oral tablet 10 mg, 20 mg</i>	
<i>toremifene oral tablet 60 mg</i> (Fareston)	PA; SP
Selective Retinoid X Receptor Agonists (Rxr)	
<i>bexarotene oral capsule 75 mg</i> (Targretin)	PA; SP
Steroid Antineoplastics	
<i>megestrol oral tablet 20 mg, 40 mg</i>	
Neurological Disease - Miscellaneous	
Agents To Treat Multiple Sclerosis	
AVONEX INTRAMUSCULAR PEN INJECTOR 30 MCG/0.5 ML	PA; SP
AVONEX INTRAMUSCULAR PEN INJECTOR KIT 30 MCG/0.5 ML	PA; SP
AVONEX INTRAMUSCULAR SYRINGE 30 MCG/0.5 ML	PA; SP
AVONEX INTRAMUSCULAR SYRINGE KIT 30 MCG/0.5 ML	PA; SP
<i>dimethyl fumarate oral capsule, delayed release(dr/ec) 120 mg</i> (Tecfidera)	PA; SP; QL (14 EA per 7 days)
<i>dimethyl fumarate oral capsule, delayed release(dr/ec) 120 mg (14)- 240 mg (46), 240 mg</i> (Tecfidera)	PA; SP; QL (60 EA per 30 days)
Oral/Pharyngeal Disorders	
Dental Aids And Preparations	
<i>chlorhexidine gluconate mucous membrane mouthwash 0.12 %</i> (Periogard)	
PERIOGARD MUCOUS MEMBRANE MOUTHWASH 0.12 % (chlorhexidine gluconate)	
Nose Preparations, Miscellaneous (Rx)	
<i>ipratropium bromide nasal spray, non-aerosol 21 mcg (0.03 %), 42 mcg (0.06 %)</i>	
Other Drugs	
Antidiarrheal Microorganisms Agents	
ACIDOPHILUS ORAL TABLET, CHEWABLE	
ACIDOPHILUS PROBIOTIC BLEND ORAL CAPSULE 175 MG (l.acidoph, saliva-b.bif- s.therm)	
<i>l.acidoph, saliva-b.bif-s.therm oral capsule 175 mg</i> (Acidophilus Probiotic Blend)	
<i>lactobacillus acidophilus oral capsule 25 million cell, 500 million cell</i>	
PROBIOTIC ACIDOPHILUS (4 STRN) ORAL TABLET 1 BILLION CELL- 250 MG	
Antiretroviral - Capsid Inhibitors (Prep)	

Drug	Notes
YEZTUGO ORAL TABLET 300 MG	SP
Appetite Stim. For Anorexia, Cachexia, Wasting Synd.	
<i>megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml)</i>	
Diagnostic Test Devices And Supplies	
ADVIN COVID-19 AG HOME TEST KIT	QL (4 EA per 30 days)
BINAXNOW COVD AG CARD HOME TST KIT	QL (4 EA per 30 days)
BINAXNOW COVID-19 AG SELF TEST KIT	QL (4 EA per 30 days)
CARESTART COVID-19 AG HOME TST KIT	QL (4 EA per 30 days)
CLINITEST COVID-19 HOME TEST KIT	QL (4 EA per 30 days)
CORDX COVID-19 AG HOME TEST KIT	QL (4 EA per 30 days)
COVID-19 AT-HOME TEST KIT	QL (4 EA per 30 days)
ELLUME COVID-19 HOME TEST KIT	QL (4 EA per 30 days)
FASTEP COVID-19 AG HOME TEST KIT	QL (4 EA per 30 days)
FLOWFLEX COVID-19 AG HOME TEST KIT	QL (4 EA per 30 days)
GENABIO COVID-19 RAPID AT-HOME KIT	QL (4 EA per 30 days)
IHEALTH COVID-19 AG HOME TEST KIT	QL (4 EA per 30 days)
INDICAID COVID-19 AG HOME TEST KIT	QL (4 EA per 30 days)
INTELISWAB COVID-19 HOME TEST KIT	QL (4 EA per 30 days)
LUCIRA CHECK-IT COVID HOME TST KIT	QL (4 EA per 30 days)
ON-GO COVID-19 AG AT HOME TEST KIT	QL (4 EA per 30 days)
PILOT COVID-19 AT-HOME TEST KIT	QL (4 EA per 30 days)
QUICKVUE AT-HOME COVID-19 TEST KIT	QL (4 EA per 30 days)
RAPID SARS-COV-2 AG HOME TEST KIT	QL (4 EA per 30 days)
SPEEDYSWAB COVID-19 HOME TEST KIT	QL (4 EA per 30 days)
General Inhalation Agents	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 3 % (sodium chloride)	
<i>sodium chloride inhalation solution for nebulization 0.9 %</i>	
<i>sodium chloride inhalation solution for nebulization 3 %</i> (NebuSal)	
<i>sodium chloride inhalation solution for nebulization 7 %</i> (Hyper-Sal)	
Insecticides	
HOME LICE-BEDBUG-DUST MITE SPRAY AEROSOL, SPRAY 0.5 %	
LICE BEDDING SPRAY AEROSOL, SPRAY 0.5 %	

Drug	Notes
LICE-BEDBUG-MITE BEDDING AEROSOL,SPRAY 0.5 %	
RID COMPLETE LICE ELIM KIT AEROSOL,SPRAY 0.5 %	
STOP LICE AEROSOL,SPRAY 0.5 %	
Metabolic Deficiency Agents	
<i>levocarnitine (with sugar) oral solution 100 mg/ml</i> (Carnitor)	
<i>levocarnitine oral solution 100 mg/ml</i> (Carnitor (sugar-free))	
<i>levocarnitine oral tablet 330 mg</i> (Carnitor)	
Needles/Needleless Devices	
1ST TIER UNIFINE PENTIPS NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
1ST TIER UNIFINE PENTIPS PLUS NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
ADVOCATE PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
AQINJECT PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
ASSURE ID DUO PRO SFTY PEN NDL NEEDLE 31 GAUGE X 3/16" (pen needle, diabetic, safety)	QL (6.67 EA per 1 day)
ASSURE ID PEN NEEDLE NEEDLE 30 GAUGE X 5/16"	QL (6.67 EA per 1 day)
ASSURE ID PRO PEN NEEDLE NEEDLE 30 GAUGE X 3/16"	QL (6.67 EA per 1 day)
AUTOKEEPER SAFETY PEN NEEDLE NEEDLE 30 GAUGE X 3/16", 30 GAUGE X 5/16"	QL (6.67 EA per 1 day)
AUTOSHIELD DUO PEN NEEDLE NEEDLE 30 GAUGE X 3/16"	QL (6.67 EA per 1 day)
CAREFINE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
CARETOUCH PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 3/16", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)

Drug	Notes
CLICKFINE PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
COMFORT EZ PEN NEEDLES NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 1/4", 33 GAUGE X 3/16", 33 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
COMFORT EZ PEN NEEDLES NEEDLE 33 GAUGE X 5/16"	QL (6.67 EA per 1 day)
COMFORT EZ PLUS PEN NEEDLE NEEDLE 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
COMFORT EZ PRO SAFETY PEN NDL NEEDLE 30 GAUGE X 5/16"	QL (6.67 EA per 1 day)
COMFORT EZ PRO SAFETY PEN NDL NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/32" (pen needle, diabetic, safety)	QL (6.67 EA per 1 day)
<i>comfort point pen ndl 29gx1/2" 12mm 29 gauge x 1/2"</i> (1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>comfort point pen ndl 31gx1/4" 6mm 31 gauge x 1/4"</i> (Unifine Pentips)	QL (6.67 EA per 1 day)
COMFORT TOUCH PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 31 GAUGE X 5/32", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 1/4", 33 GAUGE X 3/16", 33 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
DROPLET MICRON PEN NEEDLE NEEDLE 34 GAUGE X 9/64"	QL (6.67 EA per 1 day)
DROPLET PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
DROPLET PEN NEEDLE NEEDLE 29 GAUGE X 3/8"	QL (6.67 EA per 1 day)
DROPSAFE PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 5/16"	QL (6.67 EA per 1 day)
DROPSAFE PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/32" (pen needle, diabetic, safety)	QL (6.67 EA per 1 day)
EASY COMFORT PEN NEEDLES NEEDLE 29 GAUGE X 3/16", 29 GAUGE X 5/32"	QL (6.67 EA per 1 day)
EASY COMFORT PEN NEEDLES NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 1/4", 33 GAUGE X 3/16", 33 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)

Drug		Notes
EASY COMFORT SAFETY PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 32 GAUGE X 5/32"		QL (6.67 EA per 1 day)
EASY COMFORT SAFETY PEN NEEDLE NEEDLE 31 GAUGE X 3/16"	(pen needle, diabetic, safety)	QL (6.67 EA per 1 day)
EASY GLIDE PEN NEEDLE NEEDLE 33 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
EASY TOUCH NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
EASY TOUCH PEN NEEDLE NEEDLE 30 GAUGE X 5/16"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
EASY TOUCH SAFETY PEN NEEDLE NEEDLE 29 GAUGE X 3/16", 29 GAUGE X 5/16", 30 GAUGE X 1/4", 30 GAUGE X 3/16", 30 GAUGE X 5/16"		QL (6.67 EA per 1 day)
EMBRACE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 3/16", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
<i>gnp pen needle 31g 5mm 31 gauge x 3/16"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>gnp pen needle 31g 8mm 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>gnp pen needle 32g 4mm 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>gs pen needle 31g x 5/16" 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>gs pen needle 31g x 5mm 31 gauge x 3/16"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>gs pen needle 31g x 5mm 31 gauge x 3/16"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>gs pen needle 31g x 6mm 31 gauge x 1/4"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>gs pen needle 31g x 8mm 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>gs pen needle 31g x 8mm 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>gs pen needle 32g x 4mm 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>gs pen needle 32g x 4mm 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
HEALTHWISE PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
INCONTROL PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
INSUPEN PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
<i>kro pen needle 4mm x 32g 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>kro pen needle 4mm x 33g 33 gauge x 5/32"</i>	(Advocate Pen Needle)	QL (6.67 EA per 1 day)

Drug		Notes
<i>kro pen needle 5mm x 31g 31 gauge x 3/16"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>kro pen needle 6mm x 31g 31 gauge x 1/4"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>kro pen needle 8mm x 31g 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
MAXICOMFORT II PEN NEEDLE NEEDLE 31 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
MAXICOMFORT SAFETY PEN NEEDLE NEEDLE 29 GAUGE X 3/16", 29 GAUGE X 5/16"		QL (6.67 EA per 1 day)
<i>mini pen needle 32g 4mm 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>mini pen needle 33g 4mm 33 gauge x 5/32"</i>	(Advocate Pen Needle)	QL (6.67 EA per 1 day)
MINI ULTRA-THIN II NEEDLE 31 GAUGE X 3/16"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
NANO 2ND GEN PEN NEEDLE NEEDLE 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
NANO PEN NEEDLE NEEDLE 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
NOVOFINE 32 NEEDLE 32 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
NOVOFINE PLUS NEEDLE 32 GAUGE X 1/6"		QL (6.67 EA per 1 day)
PC UNIFINE PENTIPS 6MM NEEDLE ULTRA SHORT 31 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
PC UNIFINE PENTIPS 8MM NEEDLE SHORT 31 GAUGE X 5/16"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
<i>pen needle 29g 12mm 29 gauge x 1/2"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 29g 12mm 29 gauge x 1/2"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 30g 5mm inner 30 gauge x 3/16"</i>	(Embrace Pen Needle)	QL (6.67 EA per 1 day)
<i>pen needle 30g 5mm outer 30 gauge x 3/16"</i>	(Embrace Pen Needle)	QL (6.67 EA per 1 day)
<i>pen needle 31g 5mm 31 gauge x 3/16"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g 5mm inner 31 gauge x 3/16"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g 5mm outer 31 gauge x 3/16"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g 6mm 31 gauge x 1/4"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g 8mm 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g 8mm 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g 8mm inner 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g 8mm outer 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 1/4" 31 gauge x 1/4"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 1/4" 31 gauge x 1/4"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 1/4" 6mm 31 gauge x 1/4"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 1/4" hri 31 gauge x 1/4"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 3/16" 31 gauge x 3/16"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 3/16" 31 gauge x 3/16"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 3/16" hri 31 gauge x 3/16"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 5/16" 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 5/16" 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 5/16" 8mm 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 31g x 5/16" hri 31 gauge x 5/16"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 32g 4mm 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)

Drug		Notes
<i>pen needle 32g 4mm inner 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 32g 4mm outer 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 32g x 5/32" 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 32g x 5/32" 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 32g x 5/32" 4mm 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 32g x 5/32" hri 32 gauge x 5/32"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle 33g 4mm 33 gauge x 5/32"</i>	(Advocate Pen Needle)	QL (6.67 EA per 1 day)
<i>pen needle 33g 4mm 33 gauge x 5/32"</i>	(Advocate Pen Needle)	QL (6.67 EA per 1 day)
PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
<i>pen needle, diabetic needle 29 gauge x 15/32", 31 gauge x 1/3", 31 gauge x 1/6", 31 gauge x 13/64"</i>		QL (6.67 EA per 1 day)
<i>pen needle, diabetic needle 30 gauge x 5/16"</i>	(CareFine Pen Needle)	QL (6.67 EA per 1 day)
<i>pen needle, diabetic needle 31 gauge x 15/64"</i>	(True-Comfort Pro Pen Needle)	QL (6.67 EA per 1 day)
<i>pen needle, diabetic needle 31 gauge x 5/32"</i>	(Comfort Touch Pen Needle)	QL (6.67 EA per 1 day)
<i>pen needle, diabetic needle 32 gauge x 1/4"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needle, diabetic needle 32 gauge x 3/16"</i>	(CareFine Pen Needle)	QL (6.67 EA per 1 day)
<i>pen needle, diabetic needle 32 gauge x 5/16", 33 gauge x 1/4", 33 gauge x 3/16"</i>	(Comfort EZ Pen Needles)	QL (6.67 EA per 1 day)
<i>pen needle, diabetic, safety needle 31 gauge x 3/16"</i>	(Assure ID Duo Pro Sfty Pen Ndl)	QL (6.67 EA per 1 day)
<i>pen needle, diabetic, safety needle 31 gauge x 5/32"</i>	(Comfort EZ PRO Safety Pen Ndl)	QL (6.67 EA per 1 day)
<i>pen needles 12mm 29g 29gx12mm, strl 29 gauge x 1/2"</i>	(1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
<i>pen needles 6mm 31g 31gx6mm, strl 31 gauge x 1/4"</i>	(Unifine Pentips)	QL (6.67 EA per 1 day)
PENTIPS PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
PIP PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
PREVENT DROPSAFE PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 5/16"		QL (6.67 EA per 1 day)
PRO COMFORT PEN NEEDLE NEEDLE 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)

Drug	Notes
PURE COMFORT PEN NEEDLE NEEDLE 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
PURE COMFORT SAFETY PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 32 GAUGE X 5/32"	QL (6.67 EA per 1 day)
PURE COMFORT SAFETY PEN NEEDLE NEEDLE 31 GAUGE X 3/16" (pen needle, diabetic, safety)	QL (6.67 EA per 1 day)
QC UNIFINE PENTIPS 32GX5/32" STERILE 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
QC UNIFINE PENTIPS 4MM 32G STERILE 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
relion pen needle 29gx1/2" 29 gauge x 1/2" (1st Tier Unifine Pentips)	QL (6.67 EA per 1 day)
relion pen needle 31gx1/4" 31 gauge x 1/4" (Unifine Pentips)	QL (6.67 EA per 1 day)
relion pen needle 31gx5/16" 31 gauge x 5/16" (Unifine Pentips)	QL (6.67 EA per 1 day)
relion pen needle 31gx5/16" short 31 gauge x 5/16" (Unifine Pentips)	QL (6.67 EA per 1 day)
relion pen needle 32gx5/32" 32 gauge x 5/32" (Unifine Pentips)	QL (6.67 EA per 1 day)
SAFETY PEN NEEDLE NEEDLE 31 GAUGE X 3/16" (pen needle, diabetic, safety)	QL (6.67 EA per 1 day)
SECURESAFE PEN NEEDLE NEEDLE 30 GAUGE X 5/16"	QL (6.67 EA per 1 day)
SECURESAFE PEN NEEDLE NEEDLE 31 GAUGE X 3/16" (pen needle, diabetic, safety)	QL (6.67 EA per 1 day)
SIMPLI PEN NEEDLE NEEDLE 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
SKY SAFETY PEN NEEDLE NEEDLE 30 GAUGE X 3/16", 30 GAUGE X 5/16"	QL (6.67 EA per 1 day)
SURE COMFORT PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
SURE COMFORT SAFETY PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 32 GAUGE X 5/32"	QL (6.67 EA per 1 day)
SURE-FINE PEN NEEDLES NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16" (pen needle, diabetic)	QL (6.67 EA per 1 day)
TECHLITE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
TECHLITE PLUS PEN NEEDLE NEEDLE 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
TOPFINE INSULIN PEN NEEDLE NEEDLE 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)

Drug	Notes
TRUE COMFORT PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/32", 33 GAUGE X 1/4", 33 GAUGE X 3/16", 33 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
TRUE COMFORT SAFETY PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 32 GAUGE X 5/32"	QL (6.67 EA per 1 day)
TRUE COMFORT SAFETY PEN NEEDLE NEEDLE 31 GAUGE X 3/16" (pen needle, diabetic, safety)	QL (6.67 EA per 1 day)
TRUE-COMFORT PRO PEN NEEDLE NEEDLE 31 GAUGE X 15/64", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
TRUEPLUS PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
ULTICARE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
ULTICARE SAFETY PEN NEEDLE NEEDLE 30 GAUGE X 3/16", 30 GAUGE X 5/16"	QL (6.67 EA per 1 day)
ULTIGUARD SAFEPAK-PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32"	QL (6.67 EA per 1 day)
ULTILET PEN NEEDLE NEEDLE 29 GAUGE	QL (6.67 EA per 1 day)
ULTILET PEN NEEDLE NEEDLE 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
ULTRA FLO PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
ULTRA THIN PEN NEEDLE NEEDLE 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
ULTRACARE PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/32", 33 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
ULTRA-FINE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4" (pen needle, diabetic)	QL (6.67 EA per 1 day)

Drug		Notes
ULTRA-THIN II (SHORT) PEN NDL NEEDLE 31 GAUGE X 5/16"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
ULTRA-THIN II INS PEN NEEDLES NEEDLE 29 GAUGE X 1/2"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE OTC PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 31G 6MM 31 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 31G 8MM 31 GAUGE X 5/16"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 32G 4MM 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 32G 4MM 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 32G 6MM 32 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 32GX1/4" 32 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 32GX1/4" 32 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 32GX5/32" 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 32GX5/32" 32GX4MM, STRL, NANO 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 32GX5/32" STERILE, SINGLE USE 32 GAUGE X 5/32"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 6MM 31G 31 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 6MM 31G 31 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 6MM 31G 31GX6MM, STRL 31 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 6MM 31G 31GX6MM, STRL, MINI 31 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 6MM 31G 31GX6MM,MINI,STRL 31 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 6MM 31G 31GX6MM,STRL,MINI 31 GAUGE X 1/4"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 8MM 31G 31 GAUGE X 5/16"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 8MM 31G 31 GAUGE X 5/16"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 8MM 31G 31GX8MM, SHORT, STRL 31 GAUGE X 5/16"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 8MM 31G 31GX8MM, STRL 31 GAUGE X 5/16"	(pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS 8MM 31G 31GX8MM,SHORT,STRL 31 GAUGE X 5/16"	(pen needle, diabetic)	QL (6.67 EA per 1 day)

Drug	Notes
UNIFINE PENTIPS 8MM 31G 31GX8MM,STRL,SHORT 31 GAUGE X 5/16" (pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS MAXFLOW NEEDLE 30 GAUGE X 3/16" (pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 33 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS PLUS MAXFLOW NEEDLE 30 GAUGE X 3/16" (pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PENTIPS PLUS NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE PROTECT NEEDLE 30 GAUGE X 3/16", 30 GAUGE X 5/16", 32 GAUGE X 5/32"	QL (6.67 EA per 1 day)
UNIFINE SAFECONTROL PEN NEEDLE NEEDLE 30 GAUGE X 3/16", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	QL (6.67 EA per 1 day)
UNIFINE SAFECONTROL PEN NEEDLE NEEDLE 31 GAUGE X 3/16" (pen needle, diabetic, safety)	QL (6.67 EA per 1 day)
UNIFINE ULTRA PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
UNIFINE ULTRA PEN NEEDLE NEEDLE 34 GAUGE X 9/64"	QL (6.67 EA per 1 day)
VERIFINE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
VERIFINE PLUS PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" (pen needle, diabetic)	QL (6.67 EA per 1 day)
VERIFINE PLUS PEN NEEDLE-SHARP NEEDLE 32 GAUGE X 5/32"	QL (6.67 EA per 1 day)
Nose Preparations, Miscellaneous (Otc)	
SALINE NASAL MIST NASAL MIST 3 %	
Other Respiratory Disorders	
Mucolytics	
acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)	
Pain Management - Analgesics	
Analgesic, Non-Salicylate & Barbiturate Comb.	

Drug	Notes
<i>butalbital-acetaminophen oral tablet 50-325 mg</i> (Tencon)	
TENCON ORAL TABLET 50-325 MG (butalbital-acetaminophen)	
Analgesic, Salicylate, Barbiturate, & Xanthine Cmb	
<i>butalbital-aspirin-caffeine oral capsule 50-325-40 mg</i>	
<i>butalbital-aspirin-caffeine oral tablet 50-325-40 mg</i>	
Analgesic, Non-Salicylate, Barbiturate, & Xanthine Cmb	
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	
Analgesic/Antipyretics, Salicylates	
<i>aspirin oral tablet 325 mg</i> (Bayer Aspirin)	
<i>aspirin oral tablet, delayed release (dr/ec) 325 mg</i> (Bayer Aspirin)	
<i>aspirin oral tablet, delayed release (dr/ec) 650 mg</i>	
<i>aspirin rectal suppository 300 mg</i>	
<i>aspirin, buffd-calcium carb-mag oral tablet 325 mg</i> (Bufferin)	
BAYER ADVANCED ORAL TABLET 500 MG (aspirin)	
BAYER ASPIRIN ORAL TABLET 325 MG (aspirin)	
BAYER ASPIRIN ORAL TABLET, DELAYED RELEASE (DR/EC) 325 MG (aspirin)	
BUFFERIN ORAL TABLET 325 MG (aspirin, buffd-calcium carb-mag)	
ECOTRIN ORAL TABLET, DELAYED RELEASE (DR/EC) 325 MG (aspirin)	
EXTRA STRENGTH BAYER ORAL TABLET 500 MG (aspirin)	
<i>salsalate oral tablet 500 mg, 750 mg</i>	
TRI-BUFFERED ASPIRIN ORAL TABLET 325 MG (aspirin, buffd-calcium carb-mag)	
Analgesic/Antipyretics, Non-Salicylate	
8 HOUR PAIN RELIEVER ORAL TABLET EXTENDED RELEASE 650 MG (acetaminophen)	
8HR MUSCLE ACHES-PAIN ORAL TABLET EXTENDED RELEASE 650 MG (acetaminophen)	
ACETAMINOPHEN EXTRA STRENGTH ORAL TABLET 500 MG (acetaminophen)	
<i>acetaminophen oral liquid 160 mg/5 ml</i> (Children's Acetaminophen)	Age (Max 12 Years)
<i>acetaminophen oral solution 160 mg/5 ml (5 ml), 325 mg/10.15 ml, 650 mg/20.3 ml</i>	

Drug		Notes
<i>acetaminophen oral suspension 160 mg/5 ml</i>	(BetaTemp)	Age (Max 12 Years)
<i>acetaminophen oral suspension 160 mg/5 ml (5 ml), 325 mg/10.15 ml</i>	(Children's Acetaminophen)	Age (Max 12 Years)
<i>acetaminophen oral tablet 325 mg</i>	(Aminofen)	
<i>acetaminophen oral tablet 500 mg</i>	(Acetaminophen Extra Strength)	
<i>acetaminophen oral tablet extended release 650 mg</i>	(8 Hour Pain Reliever)	
<i>acetaminophen oral tablet, disintegrating 80 mg</i>	(Children's Easy-Melts)	
<i>acetaminophen rectal suppository 120 mg</i>	(Child Pain Rel-Fever Reducer)	
<i>acetaminophen rectal suppository 650 mg</i>	(Feverall)	
AMINOFEN ORAL TABLET 325 MG	(acetaminophen)	
APHEN ORAL TABLET 325 MG	(acetaminophen)	
ARTHRITIS PAIN RELIEF (ACETAM) ORAL TABLET EXTENDED RELEASE 650 MG	(acetaminophen)	
ARTHRITIS PAIN RELIEVER ORAL TABLET EXTENDED RELEASE 650 MG	(acetaminophen)	
BETATEMP ORAL SUSPENSION 160 MG/5 ML	(acetaminophen)	Age (Max 12 Years)
CHILD PAIN REL-FEVER REDUCER RECTAL SUPPOSITORY 120 MG	(acetaminophen)	
CHILDREN'S ACETAMINOPHEN ORAL LIQUID 160 MG/5 ML	(acetaminophen)	Age (Max 12 Years)
CHILDREN'S ACETAMINOPHEN ORAL SUSPENSION 160 MG/5 ML, 160 MG/5 ML (5 ML)	(acetaminophen)	Age (Max 12 Years)
CHILDREN'S ACETAMINOPHEN ORAL TABLET, CHEWABLE 160 MG, 80 MG	(acetaminophen)	
CHILDREN'S EASY-MELTS ORAL TABLET, DISINTEGRATING 80 MG	(acetaminophen)	
CHILDREN'S FEVER REDUCING RECTAL SUPPOSITORY 120 MG	(acetaminophen)	
CHILDREN'S MAPAP ORAL TABLET, CHEWABLE 160 MG, 80 MG	(acetaminophen)	
CHILDREN'S NON-ASPIRIN ORAL SUSPENSION 160 MG/5 ML	(acetaminophen)	Age (Max 12 Years)
CHILDREN'S NON-ASPIRIN ORAL TABLET, CHEWABLE 160 MG	(acetaminophen)	
CHILDREN'S PAIN RELIEF ORAL ELIXIR 160 MG/5 ML	(acetaminophen)	Age (Max 12 Years)
CHILDREN'S PAIN RELIEF ORAL SUSPENSION 160 MG/5 ML	(acetaminophen)	Age (Max 12 Years)

Drug	Notes
CHILDREN'S PAIN RELIEF ORAL TABLET,CHEWABLE 160 MG (acetaminophen)	
CHILDREN'S PAIN RELIEVER ORAL SUSPENSION 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
CHILDREN'S PAIN-FEVER RELIEF ORAL LIQUID 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
CHILDREN'S PAIN-FEVER RELIEF ORAL SUSPENSION 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
CHILDREN'S PAIN-FEVER RELIEF ORAL TABLET,CHEWABLE 160 MG (acetaminophen)	
CHILDREN'S TYLENOL ORAL TABLET,CHEWABLE 160 MG (acetaminophen)	
ED-APAP ORAL LIQUID 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
FEVER REDUCER RECTAL SUPPOSITORY 120 MG (acetaminophen)	
FEVERALL RECTAL SUPPOSITORY 120 MG, 325 MG, 650 MG (acetaminophen)	
INFANT PAIN RELIEVER ORAL SUSPENSION 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
INFANT'S ACETAMINOPHEN ORAL SUSPENSION 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
INFANTS' PAIN AND FEVER ORAL SUSPENSION 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
INFANTS' PAIN RELIEF ORAL SUSPENSION 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
LITTLE REMEDIES FEVER AND PAIN ORAL LIQUID 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
MAPAP (ACETAMINOPHEN) ORAL CAPSULE 500 MG (acetaminophen)	
MAXRELIEF JUNIOR ORAL LIQUID 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
MAXRELIEF JUNIOR ORAL SUSPENSION 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
M-PAP ORAL LIQUID 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
NON-ASPIRIN EXTRA STRENGTH ORAL TABLET 500 MG (acetaminophen)	
NON-ASPIRIN ORAL TABLET 325 MG (acetaminophen)	
NON-ASPIRIN ORAL TABLET,CHEWABLE 80 MG (acetaminophen)	
NON-ASPIRIN PAIN RELIEF ORAL TABLET 500 MG (acetaminophen)	
NORTEMP ORAL SUSPENSION 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
PAIN RELIEF (ACETAMINOPHEN) ORAL LIQUID 160 MG/5 ML (acetaminophen)	Age (Max 12 Years)
PAIN RELIEF (ACETAMINOPHEN) ORAL TABLET 325 MG, 500 MG (acetaminophen)	

Drug	Notes
PAIN RELIEF (ACETAMINOPHEN) ORAL TABLET EXTENDED RELEASE 650 MG (acetaminophen)	
PAIN RELIEF ES (ACETAMINOPHEN) ORAL TABLET 500 MG (acetaminophen)	
PAIN RELIEVER (ACETAMINOPHEN) ORAL TABLET 325 MG, 500 MG (acetaminophen)	
PAIN RELIEVER ES(ACETAMINOPHN) ORAL TABLET 500 MG (acetaminophen)	
PHARBETOL ORAL TABLET 325 MG, 500 MG (acetaminophen)	
SHAKE THAT ACHE ORAL TABLET 500 MG (acetaminophen)	
Analgesics, Narcotic Agonist And Nsaid Combination	
hydrocodone-ibuprofen oral tablet 7.5-200 mg	
Analgesics,Narcotics	
codeine sulfate oral tablet 15 mg, 30 mg, 60 mg	
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	PA; QL (1 EA per 3 days)
hydromorphone oral liquid 1 mg/ml (Dilaudid)	PA
hydromorphone oral tablet 2 mg, 4 mg, 8 mg (Dilaudid)	
hydromorphone rectal suppository 3 mg	
meperidine oral solution 50 mg/5 ml	PA
meperidine oral tablet 50 mg	
methadone injection solution 10 mg/ml	
methadone oral tablet 10 mg, 5 mg	PA
morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)	PA
morphine oral capsule, er multiphase 24 hr 120 mg, 30 mg, 45 mg, 60 mg, 75 mg, 90 mg	PA; QL (2 EA per 1 day)
morphine oral solution 10 mg/5 ml (2 mg/ml)	PA
morphine oral tablet 15 mg	
morphine oral tablet extended release 100 mg	PA; QL (3 EA per 1 day)
morphine oral tablet extended release 15 mg, 30 mg, 60 mg (MS Contin)	PA; QL (3 EA per 1 day)
morphine oral tablet extended release 200 mg	QL (3 EA per 1 day)
morphine sulf 20 mg/5 ml soln 20 mg/5 ml (4 mg/ml)	PA
morphine sulf 20 mg/5 ml soln dosing cup 20 mg/5 ml (4 mg/ml)	PA
morphine sulfate ir 30 mg tab	

Drug	Notes
<i>morphine sulfate ir 30 mg tab</i>	
<i>morphine sulfate ir 30 mg tab u-d 4x25, blister</i>	
<i>oxycodone oral capsule 5 mg</i>	
<i>oxycodone oral concentrate 20 mg/ml</i>	PA
<i>oxycodone oral solution 5 mg/5 ml</i>	QL (100 ML per 365 days)
<i>oxycodone oral tablet 10 mg, 5 mg</i>	
<i>oxycodone oral tablet 15 mg, 30 mg</i> (Roxicodone)	
OXYCONTIN ORAL TABLET, ORAL ONLY, EXT.REL.12 HR 10 MG, 15 MG, 30 MG, 60 MG (oxycodone)	PA
<i>oxymorphone oral tablet 10 mg, 5 mg</i>	PA
<i>tramadol oral tablet 50 mg</i>	QL (8 EA per 1 day)
Antimigraine Preparations	
AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML, 70 MG/ML	PA
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 225 MG/1.5 ML	PA
AJOVY SYRINGE SUBCUTANEOUS SYRINGE 225 MG/1.5 ML	PA
EMGALITY PEN SUBCUTANEOUS PEN INJECTOR 120 MG/ML	PA
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML	PA
<i>naratriptan oral tablet 1 mg, 2.5 mg</i>	QL (9 EA per 30 days)
NURTEC ODT ORAL TABLET, DISINTEGRATING 75 MG	PA
<i>rizatriptan oral tablet 10 mg</i> (Maxalt)	QL (9 EA per 30 days)
<i>rizatriptan oral tablet 5 mg</i>	QL (9 EA per 30 days)
<i>rizatriptan oral tablet, disintegrating 10 mg</i> (Maxalt-MLT)	QL (9 EA per 30 days)
<i>rizatriptan oral tablet, disintegrating 5 mg</i>	QL (9 EA per 30 days)
<i>sumatriptan nasal spray, non-aerosol 20 mg/actuation, 5 mg/actuation</i>	PA; QL (6 EA per 30 days)
<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i> (Imitrex)	QL (9 EA per 30 days)
<i>sumatriptan succinate subcutaneous pen injector 6 mg/0.5 ml</i> (Imitrex STATdose Pen)	LIMIT OF 1 BOX PER FILL; QL (1 ML per 30 days)
<i>sumatriptan succinate subcutaneous solution 6 mg/0.5 ml</i>	LIMIT OF 1 BOX PER FILL; QL (2.5 ML per 30 days)
UBRELVY ORAL TABLET 100 MG, 50 MG	PA
VYEPTI INTRAVENOUS SOLUTION 100 MG/ML	PA; SP
<i>zolmitriptan oral tablet 2.5 mg, 5 mg</i> (Zomig)	QL (9 EA per 30 days)

Drug		Notes
<i>zolmitriptan oral tablet, disintegrating 2.5 mg, 5 mg</i>		QL (9 EA per 30 days)
ZOMIG ORAL TABLET 2.5 MG, 5 MG	(zolmitriptan)	QL (9 EA per 30 days)
Calcitonin Gene-Related Peptide (Cgrp) Inhibitors		
EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 300 MG/3 ML (100 MG/ML X 3)		PA
Narc. & Non-Sal. Analgesic, Barbiturate & Xanthine Cmb		
<i>butalbital-acetaminop-caff-cod oral capsule 50-325-40-30 mg</i>		
Narcotic & Salicylate Analgesics, Barb. & Xanthine		
ASCOMP WITH CODEINE ORAL CAPSULE 30-50-325-40 MG	(codeine-bitalbital-asa-caff)	
<i>codeine-bitalbital-asa-caff oral capsule 30-50-325-40 mg</i>	(Ascomp with Codeine)	
Narcotic Analgesic & Non-Salicylate Analgesic Comb		
<i>acetaminophen-codeine oral solution 120 mg-12 mg /5 ml (5 ml), 120-12 mg/5 ml</i>		QL (300 ML per 365 days)
<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>		
ENDOCET ORAL TABLET 10-325 MG, 5-325 MG, 7.5-325 MG	(oxycodone-acetaminophen)	
ENDOCET ORAL TABLET 2.5-325 MG	(oxycodone-acetaminophen)	PA
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml</i>		QL (480 ML per 365 days)
<i>hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-325 mg, 7.5-325 mg</i>		
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	(Endocet)	
<i>oxycodone-acetaminophen oral tablet 2.5-325 mg</i>	(Endocet)	PA
PERCOCET ORAL TABLET 10-325 MG, 5-325 MG, 7.5-325 MG	(oxycodone-acetaminophen)	
Narcotic Withdrawal Therapy Agents		
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 128 MG/0.36 ML		SP; QL (0.36 ML per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 16 MG/0.32 ML		SP; QL (0.32 ML per 7 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 24 MG/0.48 ML		SP; QL (0.48 ML per 7 days)

Drug	Notes
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 32 MG/0.64 ML	SP; QL (0.64 ML per 7 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 64 MG/0.18 ML	SP; QL (0.18 ML per 28 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 8 MG/0.16 ML	SP; QL (0.16 ML per 7 days)
BRIXADI SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 96 MG/0.27 ML	SP; QL (0.27 ML per 28 days)
<i>buprenorphine hcl sublingual tablet 2 mg</i>	QL (16 EA per 1 day)
<i>buprenorphine hcl sublingual tablet 8 mg</i>	QL (4 EA per 1 day)
<i>buprenorphine-naloxone sublingual film 12-3 mg</i> (Suboxone)	QL (2 EA per 1 day)
<i>buprenorphine-naloxone sublingual film 2-0.5 mg</i> (Suboxone)	QL (16 EA per 1 day)
<i>buprenorphine-naloxone sublingual film 4-1 mg</i> (Suboxone)	QL (8 EA per 1 day)
<i>buprenorphine-naloxone sublingual film 8-2 mg</i> (Suboxone)	QL (4 EA per 1 day)
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg</i>	QL (16 EA per 1 day)
<i>buprenorphine-naloxone sublingual tablet 8-2 mg</i>	QL (4 EA per 1 day)
SUBLOCADE SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 100 MG/0.5 ML	SP; QL (0.5 ML per 28 days)
SUBLOCADE SUBCUTANEOUS SOLUTION, EXTENDED REL SYRINGE 300 MG/1.5 ML	SP; QL (1.5 ML per 28 days)
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG	QL (45 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 1.4-0.36 MG	QL (22 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 11.4-2.9 MG	QL (2 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 2.9-0.71 MG	QL (11 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 5.7-1.4 MG	QL (5 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 8.6-2.1 MG	QL (3 EA per 1 day)
Parkinsons Disease	
Antiparkinsonism Drugs,Anticholinergic	
<i>benztropine oral tablet 0.5 mg, 1 mg, 2 mg</i>	
<i>trihexyphenidyl oral elixir 0.4 mg/ml</i>	
<i>trihexyphenidyl oral tablet 2 mg, 5 mg</i>	
Antiparkinsonism Drugs,Other	
<i>amantadine hcl oral capsule 100 mg</i>	
<i>amantadine hcl oral solution 50 mg/5 ml</i>	
<i>amantadine hcl oral tablet 100 mg</i>	

Drug	Notes
<i>bromocriptine oral capsule 5 mg</i>	
<i>bromocriptine oral tablet 2.5 mg</i>	
<i>carbidopa-levodopa oral tablet 10-100 mg</i> (Sinemet)	
<i>carbidopa-levodopa oral tablet 25-100 mg</i> (Dhivy)	
<i>carbidopa-levodopa oral tablet 25-250 mg</i>	
<i>carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg</i>	
<i>carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg</i>	
<i>entacapone oral tablet 200 mg</i>	
<i>pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	
<i>ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	
<i>ropinirole oral tablet extended release 24 hr 12 mg, 2 mg, 4 mg, 8 mg</i>	PA
<i>ropinirole oral tablet extended release 24 hr 6 mg</i>	
<i>selegiline hcl oral capsule 5 mg</i>	
<i>selegiline hcl oral tablet 5 mg</i>	
Seizure Disorder	
Anticonvulsant - Benzodiazepine Type	
<i>clonazepam oral tablet 0.5 mg, 1 mg, 2 mg</i> (Klonopin)	PA
Anticonvulsants	
<i>carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg</i> (Carbatrol)	
<i>carbamazepine oral suspension 100 mg/5 ml</i> (Tegretol)	
<i>carbamazepine oral tablet 200 mg</i> (Tegretol)	
<i>carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg</i> (Tegretol XR)	
<i>carbamazepine oral tablet, chewable 100 mg</i>	
CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG (carbamazepine)	
DILANTIN EXTENDED ORAL CAPSULE 100 MG (phenytoin sodium extended)	
DILANTIN INFATABS ORAL TABLET, CHEWABLE 50 MG (phenytoin)	
DILANTIN ORAL CAPSULE 30 MG	

Drug		Notes
DILANTIN-125 ORAL SUSPENSION 125 MG/5 ML	(phenytoin)	
<i>ethosuximide oral capsule 250 mg</i>	(Zarontin)	
<i>ethosuximide oral solution 250 mg/5 ml</i>	(Zarontin)	
<i>gabapentin oral capsule 100 mg</i>	(Neurontin)	QL (12 EA per 1 day)
<i>gabapentin oral capsule 300 mg</i>	(Relgaabi)	QL (12 EA per 1 day)
<i>gabapentin oral capsule 400 mg</i>	(Relgaabi)	QL (9 EA per 1 day)
<i>gabapentin oral solution 250 mg/5 ml</i>	(Neurontin)	QL (450 ML per 30 days); Age (Max 12 Years)
<i>gabapentin oral tablet 600 mg</i>	(Neurontin)	QL (6 EA per 1 day)
<i>gabapentin oral tablet 800 mg</i>	(Neurontin)	QL (4.5 EA per 1 day)
<i>lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	(Vimpat)	PA
<i>levetiracetam oral solution 100 mg/ml</i>	(Keppra)	
<i>levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg</i>	(Keppra)	
<i>levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg</i>	(Keppra XR)	
<i>oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)</i>	(Trileptal)	
<i>oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg</i>	(Trileptal)	
PHENYTEK ORAL CAPSULE 200 MG, 300 MG	(phenytoin sodium extended)	
<i>phenytoin oral suspension 125 mg/5 ml</i>	(Dilantin-125)	
<i>phenytoin oral tablet, chewable 50 mg</i>	(Dilantin Infatabs)	
<i>phenytoin sodium extended oral capsule 100 mg</i>	(Dilantin Extended)	
<i>phenytoin sodium extended oral capsule 200 mg, 300 mg</i>	(Phenytek)	
<i>pregabalin oral capsule 100 mg, 150 mg, 200 mg, 25 mg, 50 mg, 75 mg</i>	(Lyrica)	QL (3 EA per 1 day)
<i>pregabalin oral capsule 225 mg, 300 mg</i>	(Lyrica)	QL (2 EA per 1 day)
<i>primidone oral tablet 250 mg, 50 mg</i>	(Mysoline)	
RELGAABI ORAL CAPSULE 300 MG	(gabapentin)	QL (12 EA per 1 day)
RELGAABI ORAL CAPSULE 400 MG	(gabapentin)	QL (9 EA per 1 day)
TEGRETOL ORAL SUSPENSION 100 MG/5 ML	(carbamazepine)	
TEGRETOL ORAL TABLET 200 MG	(carbamazepine)	
TEGRETOL XR ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 200 MG, 400 MG	(carbamazepine)	
<i>tiagabine oral tablet 12 mg, 16 mg, 2 mg, 4 mg</i>		
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	(Topamax)	
<i>zonisamide oral capsule 100 mg, 25 mg</i>	(Zonegran)	

Drug	Notes
zonisamide oral capsule 50 mg	
Skeletal Muscle Disorder	
Skeletal Muscle Relaxants	
baclofen oral tablet 10 mg, 20 mg	QL (4 EA per 1 day)
chlorzoxazone oral tablet 500 mg	PA
cyclobenzaprine oral tablet 10 mg, 5 mg	QL (3 EA per 1 day)
methocarbamol oral tablet 500 mg	QL (16 EA per 1 day)
methocarbamol oral tablet 750 mg	QL (10 EA per 1 day)
orphenadrine citrate oral tablet extended release 100 mg	PA
tizanidine oral tablet 2 mg	QL (18 EA per 1 day)
tizanidine oral tablet 4 mg (Zanaflex)	QL (9 EA per 1 day)
Smoking Cessation	
Smoking Deterrent Agents (Ganglionic Stim,Others)	
nicotine (polacrilex) buccal gum 2 mg (Quit 2)	QL (120 EA per 5 days)
nicotine (polacrilex) buccal gum 4 mg (Quit 4)	QL (120 EA per 5 days)
nicotine (polacrilex) buccal lozenge 2 mg (Quit 2)	QL (120 EA per 5 days)
nicotine (polacrilex) buccal lozenge 4 mg (Quit 4)	QL (120 EA per 5 days)
nicotine (polacrilex) buccal mini lozenge 2 mg, 4 mg (Nicorette)	QL (120 EA per 5 days)
nicotine transdermal patch 24 hour 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr (Nicoderm CQ)	QL (30 EA per 30 days)
nicotine transdermal patch, td daily, sequential 21-14-7 mg/24 hr	QL (30 EA per 30 days)
NICOTROL NS NASAL SPRAY, NON-AEROSOL 10 MG/ML	
QUIT 2 BUCCAL GUM 2 MG (nicotine (polacrilex))	QL (120 EA per 5 days)
QUIT 2 BUCCAL LOZENGE 2 MG (nicotine (polacrilex))	QL (120 EA per 5 days)
QUIT 4 BUCCAL GUM 4 MG (nicotine (polacrilex))	QL (120 EA per 5 days)
QUIT 4 BUCCAL LOZENGE 4 MG (nicotine (polacrilex))	QL (120 EA per 5 days)
STOP SMOKING AID BUCCAL LOZENGE 2 MG, 4 MG (nicotine (polacrilex))	QL (120 EA per 5 days)
Smoking Deterrent-Nicotinic Recept.Partial Agonist	
varenicline tartrate oral tablet 0.5 mg (Chantix)	QL (23 EA per 366 days)
varenicline tartrate oral tablet 1 mg (Chantix)	QL (2 EA per 1 day)
varenicline tartrate oral tablets,dose pack 0.5 mg (11)- 1 mg (42) (Chantix Starting Month Box)	QL (53 EA per 28 days)
Smoking Deterrents, Other	
bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg	QL (60 EA per 30 days)

Drug	Notes
Upper Gastrointestinal Disorders - Digestive	
Antiflatulents	
GAS RELIEF (SIMETHICONE) ORAL TABLET,CHEWABLE 125 MG, 80 MG (simethicone)	
GAS RELIEF 80 (SIMETHICONE) ORAL TABLET,CHEWABLE 80 MG (simethicone)	
GAS RELIEF EXTRA STRENGTH ORAL TABLET,CHEWABLE 125 MG (simethicone)	
<i>simethicone oral tablet, chewable 125 mg, 80 mg</i> (Gas Relief (simethicone))	
Pancreatic Enzymes	
CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 -60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 -30,000 UNIT	PA
PANCREAZE ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,500-35,500- 61,500 UNIT, 16,800-56,800- 98,400 UNIT, 2,600-8,800- 15,200 UNIT, 21,000-54,700- 83,900 UNIT, 4,200-14,200- 24,600 UNIT	PA
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 -42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT	PA
Upper Gastrointestinal Disorders - Spastic Disease	
Anticholinergics/Antispasmodics	
<i>dicyclomine oral capsule 10 mg</i>	
<i>dicyclomine oral solution 10 mg/5 ml</i>	
<i>dicyclomine oral tablet 20 mg</i>	
Belladonna Alkaloids	
ED-SPAZ ORAL TABLET,DISINTEGRATING 0.125 MG (hyoscyamine sulfate)	
<i>hyoscyamine sulfate oral drops 0.125 mg/ml</i> (Hyosyne)	
<i>hyoscyamine sulfate oral elixir 0.125 mg/5 ml</i> (Hyosyne)	
<i>hyoscyamine sulfate oral tablet 0.125 mg</i> (Oscimin)	
<i>hyoscyamine sulfate oral tablet extended release 12 hr 0.375 mg</i> (Levbid)	
<i>hyoscyamine sulfate oral tablet,disintegrating 0.125 mg</i> (Ed-Spaz)	
<i>hyoscyamine sulfate sublingual tablet 0.125 mg</i> (Oscimin SL)	

Drug	Notes
OSCIMIN ORAL TABLET 0.125 MG (hyoscyamine sulfate)	
OSCIMIN SL SUBLINGUAL TABLET 0.125 MG (hyoscyamine sulfate)	
Upper Gastrointestinal Disorders - Ulcer Disease	
Antacids	
ACID GONE ANTACID E.STRENGTH ORAL TABLET,CHEWABLE 160-105 MG	
ACID GONE ANTACID ORAL SUSPENSION 95-358 MG/15 ML	
ADVANCED ANTACID-ANTIGAS ORAL SUSPENSION 200-200-20 MG/5 ML (alum-mag hydroxide-simeth)	
ALKA-SELTZER HEARTBURN CHEW ORAL TABLET,CHEWABLE 300 MG (750 MG) (calcium carbonate)	
ANTACID (CALCIUM CARB-MAG HYD) ORAL TABLET,CHEWABLE 550-110 MG	
ANTACID (CALCIUM CARBONATE) ORAL TABLET,CHEWABLE 200 MG CALCIUM (500 MG) (calcium carbonate)	
ANTACID CALCIUM ORAL TABLET,CHEWABLE 215 MG CALCIUM (500 MG)	
ANTACID EXST (MAG CARB-AL HYD) ORAL TABLET,CHEWABLE 160-105 MG	
ANTACID EXT STR (CALCIUM CARB) ORAL TABLET,CHEWABLE 300 MG (750 MG) (calcium carbonate)	
ANTACID LIQUID ORAL SUSPENSION 200-200-20 MG/5 ML (alum-mag hydroxide-simeth)	
ANTACID M ORAL SUSPENSION 200-200-20 MG/5 ML (alum-mag hydroxide-simeth)	
ANTACID ORAL SUSPENSION 200-200-20 MG/5 ML (alum-mag hydroxide-simeth)	
ANTACID PLUS ANTI-GAS ORAL SUSPENSION 200-200-20 MG/5 ML (alum-mag hydroxide-simeth)	
ANTACID REGULAR STRENGTH ORAL SUSPENSION 200-200-20 MG/5 ML (alum-mag hydroxide-simeth)	
ANTACID-ANTIGAS ORAL SUSPENSION 200-200-20 MG/5 ML (alum-mag hydroxide-simeth)	
CALCIUM ANTACID ORAL TABLET,CHEWABLE 200 MG CALCIUM (500 MG), 300 MG (750 MG), 320 MG CALCIUM (750 MG) (calcium carbonate)	
<i>calcium carbonate oral tablet,chewable 200 mg calcium (500 mg)</i> (Antacid (calcium carbonate))	

Drug	Notes
<i>calcium carbonate oral tablet, chewable 300 mg (750 mg)</i>	(Alka-Seltzer Heartburn Chew)
CAL-GEST ANTACID ORAL TABLET, CHEWABLE 200 MG CALCIUM (500 MG)	(calcium carbonate)
COMFORT GEL ORAL SUSPENSION 200-200-20 MG/5 ML	(alum-mag hydroxide-simeth)
FLAVOR CHEWS ANTACID ORAL TABLET, CHEWABLE 300 MG (750 MG)	(calcium carbonate)
FOAMING ANTACID ORAL SUSPENSION 95-358 MG/15 ML	
GERI-LANTA ORAL SUSPENSION 200-200-20 MG/5 ML	(alum-mag hydroxide-simeth)
GERI-MOX ANTACID-ANTIGAS ORAL SUSPENSION 200-200-20 MG/5 ML	(alum-mag hydroxide-simeth)
HEARTBURN ANTACID ORAL TABLET, CHEWABLE 160-105 MG	
HEARTBURN RELIEF ORAL TABLET, CHEWABLE 160-105 MG	
MAALOX ADVANCED ORAL SUSPENSION 200-200-20 MG/5 ML	(alum-mag hydroxide-simeth)
MAG-AL PLUS ORAL SUSPENSION 200-200-20 MG/5 ML	(alum-mag hydroxide-simeth)
<i>magnesium oxide oral tablet 400 mg (241.3 mg magnesium)</i>	(MgO)
SMOOTH ANTACID ORAL TABLET, CHEWABLE 300 MG (750 MG)	(calcium carbonate)
<i>sodium bicarbonate oral tablet 325 mg, 650 mg</i>	
TUM-EASE ORAL TABLET, CHEWABLE 200 MG CALCIUM (500 MG)	(calcium carbonate)
Anticholinergics, Quaternary Ammonium	
<i>glycopyrrolate oral tablet 1 mg</i>	(Robinul)
<i>glycopyrrolate oral tablet 2 mg</i>	(Robinul Forte)
Anti-Ulcer Preparations	
<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	(Cytotec)
<i>sucralfate oral tablet 1 gram</i>	(Carafate)
Anti-Ulcer-H. Pylori Agents	
VOQUEZNA DUAL PAK ORAL COMBO PACK 20 MG (28)- 500 MG (84)	PA
VOQUEZNA TRIPLE PAK ORAL COMBO PACK 20-500-500 MG	PA
Histamine H2-Receptor Inhibitors	
ACID CONTROLLER ORAL TABLET 10 MG, 20 MG	(famotidine)

Drug		Notes
ACID REDUCER (CIMETIDINE) ORAL TABLET 200 MG	(cimetidine)	
ACID REDUCER (FAMOTIDINE) ORAL TABLET 10 MG, 20 MG	(famotidine)	
ACID-PEP ORAL TABLET 20 MG	(famotidine)	
<i>cimetidine oral tablet 200 mg</i>	(Acid Reducer (cimetidine))	
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>		
<i>famotidine oral suspension for reconstitution 40 mg/5 ml (8 mg/ml)</i>		Age (Max 6 Years)
<i>famotidine oral tablet 10 mg, 20 mg</i>	(Acid Controller)	
<i>famotidine oral tablet 40 mg</i>	(Pepcid)	
HEARTBURN PREVENTION ORAL TABLET 20 MG	(famotidine)	
HEARTBURN RELIEF (CIMETIDINE) ORAL TABLET 200 MG	(cimetidine)	
HEARTBURN RELIEF (FAMOTIDINE) ORAL TABLET 10 MG, 20 MG	(famotidine)	
<i>ranitidine hcl oral tablet 150 mg</i>		
ZANTAC-360 (FAMOTIDINE) ORAL TABLET 20 MG	(famotidine)	
Intestinal Motility Stimulants		
<i>metoclopramide hcl oral solution 5 mg/5 ml</i>		
<i>metoclopramide hcl oral tablet 10 mg, 5 mg</i>	(Reglan)	
Potassium-Competitive Acid Blockers (Pcabs)		
VOQUEZNA ORAL TABLET 10 MG, 20 MG		PA
Proton-Pump Inhibitors		
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 20 mg</i>	(Acid Reducer (esomeprazole))	QL (1 EA per 1 day)
<i>esomeprazole magnesium oral capsule, delayed release(dr/ec) 40 mg</i>	(Nexium)	QL (1 EA per 1 day)
<i>lansoprazole oral capsule, delayed release(dr/ec) 15 mg</i>	(Prevacid 24Hr)	QL (1 EA per 1 day)
<i>lansoprazole oral capsule, delayed release(dr/ec) 30 mg</i>	(Prevacid)	QL (1 EA per 1 day)
<i>omeprazole magnesium oral tablet, delayed release (dr/ec) 20 mg</i>	(Prilosec OTC)	QL (2 EA per 1 day)
<i>omeprazole oral capsule, delayed release(dr/ec) 10 mg, 20 mg, 40 mg</i>		QL (2 EA per 1 day)
<i>omeprazole oral tablet, delayed release (dr/ec) 20 mg</i>		QL (2 EA per 1 day)

Drug		Notes
<i>pantoprazole oral tablet, delayed release (dr/ec) 20 mg, 40 mg</i>	(Protonix)	QL (2 EA per 1 day)
PREVACID 24HR ORAL CAPSULE, DELAYED RELEASE (DR/EC) 15 MG	(lansoprazole)	QL (1 EA per 1 day)
Urinary Tract - Functional Disorders		
Benign Prostatic Hypertrophy/Micturition Agents		
<i>alfuzosin oral tablet extended release 24 hr 10 mg</i>	(Uroxatral)	
<i>dutasteride oral capsule 0.5 mg</i>	(Avodart)	
<i>finasteride oral tablet 5 mg</i>	(Proscar)	
<i>tamsulosin oral capsule 0.4 mg</i>		
Bph Agents, 5-Alpha-Red Inh & Alpha-1-Adr Antg Cmb		
<i>dutasteride-tamsulosin oral capsule, er multiphase 24 hr 0.5-0.4 mg</i>	(Jalyn)	
Urinary Ph Modifiers		
K-PHOS ORIGINAL ORAL TABLET, SOLUBLE 500 MG		
PHOSPHA 250 NEUTRAL ORAL TABLET 250 MG	(sod phos di, mono-k phos mono)	
PHOSPHOROUS ORAL TABLET 250 MG	(sod phos di, mono-k phos mono)	
PHOSPHO-TRIN 250 NEUTRAL ORAL TABLET 250 MG	(sod phos di, mono-k phos mono)	
<i>potassium citrate oral tablet extended release 10 meq (1,080 mg)</i>	(Urocit-K 10)	
<i>potassium citrate oral tablet extended release 15 meq</i>	(Urocit-K 15)	
<i>potassium citrate oral tablet extended release 5 meq (540 mg)</i>		
<i>sodium citrate-citric acid oral solution 500-334 mg/5 ml</i>	(Cytra-2)	
WES-PHOS 250 NEUTRAL ORAL TABLET 250 MG	(sod phos di, mono-k phos mono)	
Urinary Tract Anesthetic/Analgesic Agnt (Azo-Dye)		
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	(Pyridium)	
Urinary Tract Antispasmodic, M(3) Selective Antag.		
<i>solifenacin oral tablet 10 mg, 5 mg</i>	(Vesicare)	
Urinary Tract Antispasmodic/Anti-incontinence Agent		
<i>oxybutynin chloride oral syrup 5 mg/5 ml</i>		
<i>oxybutynin chloride oral tablet 5 mg</i>		

Drug	Notes
<i>oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg</i>	
<i>tolterodine oral capsule, extended release 24hr 2 mg, 4 mg</i>	ST; ST: STEP THERAPY REQUIRES ONE OF THE FOLLOWING IN THE PAST 180 DAYS - OXYBUTYNIN IR OR ER, OR TROSPIUM, OR SOLIFENACIN SUCCINATE
<i>tolterodine oral tablet 1 mg, 2 mg</i>	ST; ST: STEP THERAPY REQUIRES ONE OF THE FOLLOWING IN THE PAST 180 DAYS - OXYBUTYNIN IR OR ER, OR TROSPIUM, OR SOLIFENACIN SUCCINATE
<i>trospium oral tablet 20 mg</i>	
Vaginal Disorders	
Vaginal Antibiotics	
<i>clindamycin phosphate vaginal cream 2 %</i> (Cleocin)	
<i>metronidazole vaginal gel 0.75 % (37.5mg/5 gram)</i> (Vandazole)	
Vaginal Antifungals	
3-DAY VAGINAL VAGINAL CREAM 2 %	
CLOTRIMAZOLE 3 DAY VAGINAL CREAM 2 %	
<i>clotrimazole vaginal cream 1 %</i> (Clotrimazole-7)	
CLOTRIMAZOLE-3 VAGINAL CREAM 2 %	
CLOTRIMAZOLE-7 VAGINAL CREAM 1 % (clotrimazole)	
<i>miconazole nitrate vaginal cream 2 %</i> (Miconazole-7)	
MICONAZOLE-7 VAGINAL CREAM 2 % (miconazole nitrate)	
MONISTAT 7 VAGINAL CREAM 2 % (miconazole nitrate)	
<i>terconazole vaginal cream 0.4 %, 0.8 %</i>	
Vaginal Estrogen Preparations	
<i>estradiol vaginal cream 0.01 % (0.1 mg/gram)</i> (Estrace)	
<i>estradiol vaginal tablet 10 mcg</i> (Yuvaferm)	
PREMARIN VAGINAL CREAM 0.625 MG/GRAM	
YUVAFERM VAGINAL TABLET 10 MCG (estradiol)	
Vitamin And/Or Mineral Deficiency	
Calcium Replacement	
<i>ca-d3-mag ox-zinc-cop-mang-bor oral tablet, chewable 600 mg calcium- 800 unit-40 mg, 600 mg-400 unit -40 mg-7.5 mg</i>	

Drug	Notes
<i>calc carb-mag ox-d3-zinc gluc oral tablet 333 mg-133 mg- 1.67 mcg-5 mg</i>	
CALCIUM 500 + D ORAL TABLET 500 MG-10 MCG (400 UNIT), 500 MG-5 MCG (200 UNIT)	(calcium carbonate-vitamin d3)
CALCIUM 500 + D ORAL TABLET,CHEWABLE 500 MG-10 MCG (400 UNIT)	(calcium carbonate-vitamin d3)
CALCIUM 500 WITH D ORAL TABLET 500 MG-10 MCG (400 UNIT)	(calcium carbonate-vitamin d3)
CALCIUM 600 + D(3) ORAL TABLET 600 MG-10 MCG (400 UNIT), 600 MG-5 MCG (200 UNIT)	(calcium carbonate-vitamin d3)
CALCIUM 600 ORAL TABLET 600 MG CALCIUM (1,500 MG)	(calcium carbonate)
<i>calcium acetate oral tablet 667 mg</i>	(Calphron)
<i>calcium acetate oral tablet 668 mg (169 mg calcium)</i>	
<i>calcium carbonate oral suspension 500 mg/5 ml (1,250 mg/5 ml)</i>	
<i>calcium carbonate oral tablet 500 mg calcium (1,250 mg)</i>	(Oyster Shell Calcium)
<i>calcium carbonate oral tablet 600 mg calcium (1,500 mg)</i>	(Calcium 600)
<i>calcium carbonate oral tablet,chewable 500 mg calcium (1,250 mg)</i>	
<i>calcium carbonate-vit d3-min oral tablet 600 mg-10 mcg (400 unit)</i>	
<i>calcium carbonate-vitamin d3 oral tablet 500 mg-10 mcg (400 unit), 500 mg-5 mcg (200 unit)</i>	(Calcium 500 + D)
<i>calcium carbonate-vitamin d3 oral tablet 500 mg-15 mcg (600 unit), 500 mg-3.125 mcg (125 unit)</i>	
<i>calcium carbonate-vitamin d3 oral tablet 600 mg-10 mcg (400 unit), 600 mg-5 mcg (200 unit)</i>	(Calcium 600 + D(3))
<i>calcium carbonate-vitamin d3 oral tablet 600 mg-20 mcg (800 unit)</i>	(Caltrate with Vitamin D3)
<i>calcium carbonate-vitamin d3 oral tablet,chewable 500 mg-10 mcg (400 unit)</i>	(Calcium 500 + D)
<i>calcium carbonate-vitamin d3 oral tablet,chewable 500 mg-2.5 mcg (100 unit)</i>	
CALCIUM CITRATE + D ORAL TABLET 315 MG-5 MCG (200 UNIT)	(calcium citrate-vitamin d3)
<i>calcium citrate oral tablet 200 mg (950 mg), 250 mg calcium</i>	
<i>calcium citrate-vitamin d3 oral tablet 250 mg-5 mcg (200 unit)</i>	(Citracal Regular)

Drug	Notes
<i>calcium citrate-vitamin d3 oral tablet 315 mg-5 mcg (200 unit)</i> (Calcium Citrate + D)	
<i>calcium citrate-vitamin d3 oral tablet 315 mg-6.25 mcg (250 unit)</i> (Citracal + D Maximum)	
CALCIUM FOR WOMEN ORAL TABLET,CHEWABLE 500 MG-100 UNIT -40 MCG	
<i>calcium gluconate intravenous solution 100 mg/ml (10%)</i>	
CALCIUM WITH VITAMIN D ORAL TABLET 600 MG-10 MCG (400 UNIT) (calcium carbonate-vitamin d3)	
<i>calcium-magnesium-zinc oral tablet 333-133-5 mg</i>	
CALPHRON ORAL TABLET 667 MG (calcium acetate)	
CITRACAL + D MAXIMUM ORAL TABLET 315 MG-6.25 MCG (250 UNIT) (calcium citrate-vitamin d3)	
ONEVITE CALCIUM ORAL TABLET 600 MG CALCIUM (1,500 MG) (calcium carbonate)	
ONEVITE CALCIUM-D3 ORAL TABLET 500 MG-5 MCG (200 UNIT), 600 MG-10 MCG (400 UNIT), 600 MG-5 MCG (200 UNIT) (calcium carbonate-vitamin d3)	
OYSCO 500/D ORAL TABLET 500 MG-5 MCG (200 UNIT) (calcium carbonate-vitamin d3)	
OYSTER SHELL CALCIUM 500 ORAL TABLET 500 MG CALCIUM (1,250 MG) (calcium carbonate)	
OYSTER SHELL CALCIUM ORAL TABLET 500 MG CALCIUM (1,250 MG) (calcium carbonate)	
OYSTER SHELL CALCIUM-VIT D3 ORAL TABLET 500 MG-10 MCG (400 UNIT), 500 MG-5 MCG (200 UNIT) (calcium carbonate-vitamin d3)	
PARVA-CAL 500 TABLET 500 MG-5 MCG (200 UNIT)	
PARVA-CAL 500 TABLET 500 MG-5 MCG (200 UNIT)	
Fluoride Preparations	
<i>fluoride (sodium) oral drops 0.5 mg (1.1 mg sod.fluorid)/ml</i>	Age (Max 18 Years)
<i>fluoride (sodium) oral tablet,chewable 0.25 mg(0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid), 1 mg (2.2 mg sod. fluoride)</i> (Ludent Fluoride)	Age (Max 18 Years)
Folic Acid Preparations	
<i>folic acid oral tablet 1 mg, 800 mcg</i>	
<i>folic acid oral tablet 400 mcg</i> (PureVita Folic Acid)	

Drug	Notes
PUREVITA FOLIC ACID ORAL TABLET 400 MCG (folic acid)	
Geriatric Vitamin Preparations	
A THRU Z HIGH POTENCY ORAL TABLET	
A THRU Z SELECT ORAL TABLET	
MILLTRIUM SENIOR ORAL TABLET	
MULTIVITAMIN 50 PLUS ORAL TABLET	
VISION PLUS LUTEIN ORAL TABLET	
Iron Replacement	
FE C PLUS ORAL TABLET 100-250-25-1 MG-MG-MCG-MG	
FEOSOL ORAL TABLET 325 MG (65 MG IRON) (ferrous sulfate)	
FERATE ORAL TABLET 240 MG (27 MG IRON) (ferrous gluconate)	
FEROSUL ORAL TABLET 325 MG (65 MG IRON) (ferrous sulfate)	
FERREX 150 ORAL CAPSULE 150 MG IRON (polysaccharide iron complex)	
FERREX 28 ORAL TABLET 151-200-1-0.8 MG	
FERRO-TIME ORAL TABLET 325 MG (65 MG IRON) (ferrous sulfate)	
<i>ferrous gluconate oral tablet 236 mg (27 mg iron), 324 mg (37.5 mg iron), 324 mg (38 mg iron)</i>	
<i>ferrous gluconate oral tablet 240 mg (27 mg iron)</i> (Ferate)	
<i>ferrous sulfate oral drops 15 mg iron (75 mg)/ml</i> (Fe-Vite)	
<i>ferrous sulfate oral elixir 220 mg (44 mg iron)/5 ml</i>	
<i>ferrous sulfate oral liquid 300 mg (60 mg iron)/5 ml</i>	
<i>ferrous sulfate oral solution 220 mg (44 mg iron)/5 ml</i>	
<i>ferrous sulfate oral tablet 325 mg (65 mg iron)</i> (Feosol)	
<i>ferrous sulfate oral tablet, delayed release (dr/ec) 324 mg (65 mg iron), 325 mg (65 mg iron)</i>	
FE-VITE ORAL DROPS 15 MG IRON (75 MG)/ML (ferrous sulfate)	
HEMATINIC/FOLIC ACID ORAL TABLET 324 MG (106 MG IRON)-1 MG	
ICAR-C PLUS ORAL TABLET 100-250-25-1 MG-MG-MCG-MG	

Drug		Notes
IFEREX 150 ORAL CAPSULE 150 MG IRON	(polysaccharide iron complex)	
IRON (FERROUS SULFATE) ORAL TABLET 325 MG (65 MG IRON)	(ferrous sulfate)	
IRON 100 PLUS ORAL TABLET 100-250-25-1 MG-MG-MCG-MG		
IRON ORAL TABLET 325 MG (65 MG IRON)	(ferrous sulfate)	
MYFERON 150 ORAL CAPSULE 150 MG IRON	(polysaccharide iron complex)	
NU-IRON ORAL CAPSULE 150 MG IRON	(polysaccharide iron complex)	
ONEVITE FERROUS SULFATE ORAL TABLET 325 MG (65 MG IRON)	(ferrous sulfate)	
PEDIA IRON ORAL DROPS 15 MG IRON (75 MG)/ML	(ferrous sulfate)	
POLY-IRON ORAL CAPSULE 150 MG IRON	(polysaccharide iron complex)	
<i>polysaccharide iron complex oral capsule 150 mg iron</i>	(Ferrex 150)	
SLOW RELEASE IRON ORAL TABLET EXTENDED RELEASE 142 MG (45 MG IRON)	(ferrous sulfate)	
SLOW RELEASE IRON ORAL TABLET EXTENDED RELEASE 143 MG (45 MG IRON), 250 MG (50 MG IRON)		
Magnesium Salts Replacement		
MAG 64 ORAL TABLET,DELAYED RELEASE (DR/EC) 64 MG	(magnesium chloride)	
MAG GLYCINATE ORAL TABLET 100 MG		
MAG-DELAY ORAL TABLET,DELAYED RELEASE (DR/EC) 64 MG	(magnesium chloride)	
<i>magnesium chloride oral tablet, delayed release (dr/ec) 64 mg</i>	(Mag 64)	
<i>magnesium chloride oral tablet, delayed release (dr/ec) 70 mg</i>		
<i>magnesium gluconate oral tablet 27 mg magnesium (500 mg)</i>	(Mag-G)	
<i>magnesium gluconate oral tablet 27.5 mg (500 mg)</i>		
<i>magnesium gluconate oral tablet 30 mg (550 mg)</i>		
<i>magnesium glycinate oral capsule 100 mg magnesium</i>		
<i>magnesium oral tablet 200 mg</i>		

Drug	Notes
<i>magnesium oxide oral capsule 400 mg magnesium</i>	
<i>magnesium oxide oral capsule 500 mg</i>	
<i>magnesium oxide oral tablet 250 mg magnesium, 400 mg magnesium, 420 mg</i>	
<i>magnesium oxide oral tablet 500 mg magnesium</i> (Phillips)	
<i>mag-oxide 200 mg tab 200 mg magnesium</i>	
<i>mag-oxide magnesium 200 mg tab 200 mg magnesium</i>	
MGO ORAL TABLET 400 MG (241.3 MG MAGNESIUM) (magnesium oxide)	
PHILLIPS ORAL TABLET 500 MG MAGNESIUM (magnesium oxide)	
PUREVITA MAGNESIUM OXIDE ORAL TABLET 400 MG (241.3 MG MAGNESIUM) (magnesium oxide)	
Multivitamin Preparations	
A THRU Z ADVANCED FORMULA ORAL TABLET 18-400 MG-MCG	
CENTRUM ORAL TABLET 18-400 MG-MCG	
CENTRUM WOMEN ORAL TABLET 18-400 MG-MCG	
CENTURY ORAL TABLET 18-400 MG-MCG	
CERTA PLUS ORAL TABLET 18-0.4-250 MG-MG-MCG	
CERTAVITE SENIOR ORAL TABLET 0.4 MG-300 MCG- 250 MCG	
CERTAVITE-ANTIOXIDANT ORAL TABLET 18-400 MG-MCG	
COMPLETE MULTIVITAMIN-MINERAL ORAL TABLET 18-400 MG-MCG	
DAILY MULTIPLE FOR WOMEN ORAL TABLET 18 MG IRON-400 MCG-500 MG CA	
DAILY MULTI-VITAMIN ORAL TABLET (multivitamin)	
DAILY MULTIVITAMIN-MINERALS ORAL TABLET 18-400 MG-MCG	
DAILY VALUE ORAL TABLET (multivitamin)	
DAILY VITAMIN FORMULA ORAL TABLET (multivitamin)	
DAILY VITAMIN FORMULA-IRON ORAL TABLET 18-400 MG-MCG	
DAILY VITAMIN FORMULA-MINERALS ORAL TABLET (multivitamin with minerals)	
DAILY VITAMIN WITH IRON ORAL TABLET (multivitamin with iron)	
DAILY VITES/IRON ORAL TABLET (multivitamin with iron)	

Drug	Notes
DAILY-VITE (WITH FOLIC ACID) ORAL TABLET 400 MCG (multivitamin with folic acid)	
DAILY-VITE ORAL TABLET (multivitamin)	
ELITE-OB ORAL TABLET 50 MG IRON- 1.25 MG	
ESSENTIA ORAL TABLET 18-400 MG-MCG	
FOLIVANE-OB ORAL CAPSULE 85-1 MG	
HAIR,SKIN AND NAILS ORAL TABLET (multivitamin with minerals)	
HIGH POTENCY MULTIVIT (W-IRON) ORAL TABLET 18-400 MG-MCG	
MEGA MULTIPLE/CHELATED MINERAL ORAL TABLET (multivitamin with minerals)	
MINI MULTIVITAMINS-IRON ORAL TABLET 18-400 MG-MCG	
MULTI COMPLETE WITH IRON ORAL TABLET 18-400 MG-MCG	
MULTIPLE VITAMIN-MINERALS ORAL TABLET (multivitamin with minerals)	
MULTIPLE VITAMINS ORAL TABLET (multivitamin)	
<i>multivit with min-folic acid oral tablet 0.4 mg</i> (One Daily Womens 50 Plus)	
<i>multivitamin oral tablet</i> (Daily Multi-Vitamin)	
<i>multivitamin with iron oral tablet</i> (Daily Vitamin with Iron)	
<i>multivit-min-iron fum-folic ac oral tablet 7.5 mg iron-400 mcg</i>	
OB COMPLETE ORAL TABLET 50 MG IRON- 1.25 MG	
ONCCOR ORAL TABLET 200-10-10 MCG	
ONCOVITE ORAL TABLET (therapeutic multivitamin)	
ONE DAILY ESSENTIAL ORAL TABLET (multivitamin)	
ONE DAILY ESSENTIAL ORAL TABLET 400 MCG (multivitamin with folic acid)	
ONE DAILY FOR WOMEN ORAL TABLET 18-0.4 MG	
ONE DAILY MAXIMUM ORAL TABLET 18-0.4 MG	
ONE DAILY MULTIVITAMIN ORAL TABLET (multivitamin)	
ONE DAILY MULTIVITAMIN ORAL TABLET 400 MCG (multivitamin with folic acid)	
ONE DAILY MULTIVITAMIN WOMEN ORAL TABLET 18-400 MG-MCG	
ONE DAILY MULTIVIT-IRON(FOLIC) ORAL TABLET 18-400 MG-MCG	

Drug	Notes
ONE DAILY PLUS IRON ORAL TABLET 18-400 MG-MCG	
ONE-A-DAY ESSENTIAL ORAL TABLET (multivitamin)	
ONE-A-DAY MAXIMUM FORMULA ORAL TABLET (multivitamin with minerals)	
ONE-A-DAY MEN'S MULTIVITAMIN ORAL TABLET 400-20-300 MCG	
ONE-A-DAY TEEN ADVANTAGE ORAL TABLET 18-400 MG-MCG	
ONEVITE DAILY MULTIVITAMIN ORAL TABLET 400 MCG (multivitamin with folic acid)	
PRENATAL-U ORAL CAPSULE 106.5-1 MG	
PROSIGHT ORAL TABLET 1,500 MCG-60 MG -13.5 MG	
SENTRY ORAL TABLET 18-400 MG-MCG	
SPECTRAVITE ADULT ORAL TABLET 18-400 MG-MCG	
SPECTRAVITE ADVANCED FORMULA ORAL TABLET 18-400 MG-MCG	
SPECTRAVITE WOMEN ORAL TABLET 18-400 MG-MCG	
TAB-A-VITE MULTIVITAMIN W-IRON ORAL TABLET 18-400 MG-MCG	
TAB-A-VITE ORAL TABLET 400 MCG (multivitamin with folic acid)	
TARON-C DHA ORAL CAPSULE 35-1-200 MG	
THERA ORAL TABLET 400 MCG (multivitamin with folic acid)	
THERA-TABS ORAL TABLET (therapeutic multivitamin)	
THEREMS MULTIVITAMIN ORAL TABLET 400 MCG (multivitamin with folic acid)	
THRIVITE-19 ORAL TABLET 29 MG IRON-1 MG -25 MG	
V-C FORTE ORAL CAPSULE 1 MG	
VIC-FORTE ORAL CAPSULE 1 MG	
VITAMINS FOR HAIR ORAL CAPSULE 400-400 MCG	
WOMEN'S DAILY MULTIVITAMIN ORAL TABLET 18-400 MG-MCG	
YELETS ORAL TABLET 18-400 MG-MCG	
Pediatric Vitamin Preparations	
ANIMAL CHEWS ORAL TABLET,CHEWABLE (pediatric multivitamin)	
CHILDREN'S CHEW MULTIVITAMIN ORAL TABLET,CHEWABLE	

Drug	Notes
CHILDREN'S MULTIVITAMIN ORAL TABLET,CHEWABLE	
FLINTSTONES COMPLETE (FE SULF) ORAL TABLET,CHEWABLE 10 MG IRON	
FLINTSTONES MULTIVITAMIN ORAL TABLET,CHEWABLE (pediatric multivitamin)	
FLINTSTONES/EXTRA C ORAL TABLET,CHEWABLE (pediatric multivitamin)	
GUMMI BEAR MULTIVITAMIN ORAL TABLET,CHEWABLE (pediatric multivitamin)	
MULTI-VIT WITH FLUORIDE-IRON ORAL DROPS 0.25MG FLUORIDE -10 MG IRON/ML	Age (Max 1 Years)
MULTI-VITAMIN WITH FLUORIDE ORAL DROPS 0.25 MG/ML, 0.5 MG/ML	Age (Max 1 Years)
MULTI-VITAMIN WITH FLUORIDE ORAL TABLET,CHEWABLE 0.25 MG, 0.5 MG, 1 MG	
MVC-FLUORIDE ORAL TABLET,CHEWABLE 0.25 MG, 0.5 MG, 1 MG (pedi multivit no.12 w- fluoride)	
<i>pediatric multivitamin no.171 oral drops 750 unit-35 mg- 400 unit/ml</i> (Poly-Vita Drops)	
POLY-VITA DROPS ORAL DROPS 750 UNIT-35 MG- 400 UNIT/ML (pediatric multivitamin no.171)	
SCOOBY-DOO ONE A DAY ORAL TABLET,CHEWABLE	
SOLUVITA MULTIVITAMIN FLUORIDE ORAL DROPS 0.25 MG/ML	
TRI-VITAMIN WITH FLUORIDE ORAL DROPS 0.25 MG FLUOR. (0.55 MG)/ML, 0.5 MG FLUORIDE (1.1 MG)/ML	Age (Max 1 Years)
TRI-VITE WITH FLUORIDE ORAL DROPS 0.25 MG FLUOR. (0.55 MG)/ML, 0.5 MG FLUORIDE (1.1 MG)/ML	Age (Max 1 Years)
VITALETS ORAL TABLET,CHEWABLE (pediatric multivitamin-iron)	
VITALETS ORAL TABLET,CHEWABLE 10 MG IRON	
Prenatal Vitamin Preparations	
KPN ORAL TABLET 9 MG IRON- 267 MCG	
MINI PRENATAL ORAL TABLET 6.75 MG IRON- 200 MCG	
M-NATAL PLUS ORAL TABLET 27 MG IRON- 1 MG (pnv,calcium 72-iron-folic acid)	
MYNATAL ADVANCE ORAL TABLET 90-1-50 MG	

Drug	Notes
MYNATAL ORAL CAPSULE 65 MG IRON- 1 MG	
MYNATAL ORAL TABLET 90-1-50 MG	
MYNATAL PLUS ORAL TABLET 65 MG IRON- 1 MG	
MYNATAL-Z ORAL TABLET 65 MG IRON- 1 MG	
MYNATE 90 PLUS ORAL TABLET EXTENDED RELEASE 90 MG IRON-1 MG	
OBSTETRIX EC ORAL TABLET,DELAYED RELEASE (DR/EC) 29 MG IRON-1 MG -50 MG	
ONE-A-DAY PRENATAL-1 ORAL CAPSULE 27 MG IRON- 800 MCG-235 MG	
<i>pnv no.95-ferrous fumarate-fa oral tablet 28 mg iron- 800 mcg</i> (Prenatal)	
PRENATA ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG	
PRENATABS FA ORAL TABLET 29-1 MG	
PRENATABS RX ORAL TABLET 29 MG IRON- 1 MG	
PRENATAL 19 (WITH DOCUSATE) ORAL TABLET 29 MG IRON- 1 MG-25 MG	
PRENATAL 19 ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG	
PRENATAL COMPLETE ORAL TABLET 14 MG IRON- 400 MCG	
PRENATAL FORMULA ORAL TABLET 9 MG IRON- 267 MCG	
PRENATAL FORMULA-DHA ORAL CAPSULE 28 MG-800 MCG- 200 MG	
PRENATAL MULTI ORAL TABLET 27-800 MG-MCG	
PRENATAL MULTI-DHA (ALGAL OIL) ORAL CAPSULE 27MG IRON- 800 MCG-250 MG	
PRENATAL MULTI-DHA(WITH VIT K) ORAL CAPSULE 27 MG IRON-800 MCG-260 MG	
PRENATAL MULTIVITAMINS ORAL TABLET 28 MG IRON- 800 MCG (pnv no.95-ferrous fumarate-fa)	
PRENATAL ONE DAILY ORAL TABLET 27 MG IRON- 800 MCG	
PRENATAL ORAL TABLET 28 MG IRON- 800 MCG (pnv no.95-ferrous fumarate-fa)	
PRENATAL ORAL TABLET 28-800 MG-MCG	
PRENATAL PLUS (CALCIUM CARB) ORAL TABLET 27 MG IRON- 1 MG (pnv,calcium 72-iron-folic acid)	

Drug	Notes
PRENATAL PLUS DHA ORAL COMBO PACK 27 MG IRON-1 MG -312 MG-250 MG	
PRENATAL PLUS ORAL TABLET 29 MG IRON- 1 MG	(pnv,calcium 72-iron,carb-folic)
PRENATAL TABLET ORAL TABLET 28 MG IRON- 800 MCG	(prenatal vit-iron fum-folic ac)
PRENATAL VITAMIN ORAL TABLET 27 MG IRON- 0.8 MG, 27 MG IRON- 800 MCG	
PRENATAL VITAMIN PLUS LOW IRON ORAL TABLET 27 MG IRON- 1 MG	(pnv,calcium 72-iron-folic acid)
PRENATAL VITAMIN WITH MINERALS ORAL TABLET 28 MG IRON- 800 MCG	(prenatal vit-iron fum-folic ac)
<i>prenatal vit-iron fum-folic ac oral tablet 28 mg iron- 800 mcg</i>	(Prenatal Tablet)
PRENATAL WITH DHA-FOLIC ACID ORAL TABLET,CHEWABLE 400-32.5 MCG-MG	
SE-NATAL 19 CHEWABLE ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG	
SIMILAC PRENATAL ORAL COMBO PACK 27 MG IRON-800 MCG-200 MG	
STUART ONE ORAL CAPSULE 27 MG IRON- 800 MCG-200 MG	
THERANATAL ORAL TABLET 27 MG IRON- 1 MG	
THERANATAL PLUS ORAL COMBO PACK 27 MG IRON- 1 MG-300 MG	
TRINATAL RX 1 ORAL TABLET 60 MG IRON-1 MG	
TRINATE ORAL TABLET 28 MG IRON- 1 MG	
WESTAB PLUS ORAL TABLET 27 MG IRON- 1 MG	(pnv,calcium 72-iron-folic acid)
WOMEN'S PRENATAL PLUS DHA ORAL COMBO PACK 28 MG-975 MCG- 200 MG	
Prenatal Vitamins Without Iron	
THERANATAL OVAVITE ORAL COMBO PACK 18-1-125 MG-MG-UNIT	
Vitamin B Preparations	
B COMPLEX 1 (WITH FOLIC ACID) ORAL TABLET 0.4 MG	(vitamin b complex-folic acid)
<i>b complex-vitamin c-folic acid oral tablet 400 mcg</i>	
B-100 COMPLEX ORAL TABLET EXTENDED RELEASE 100 MG	
BALANCE B-50 (WITH FOLIC ACID) ORAL TABLET 0.4 MG	(vitamin b complex-folic acid)

Drug	Notes
BALANCED B-100 COMPLEX ORAL TABLET EXTENDED RELEASE 100 MG	
COMPLEX B-100 ORAL TABLET EXTENDED RELEASE	
FOLBEE ORAL TABLET 2.5-25-1 MG (folic acid-vit b6-vit b12)	
FULL SPECTRUM B-VITAMIN C ORAL TABLET 0.8 MG	
NEPHRO VITAMINS ORAL TABLET 0.8 MG	
NEPHRO-VITE ORAL TABLET 0.8 MG	
RENAL VITAMIN ORAL TABLET 0.8 MG	
RENAL-VITE ORAL TABLET 0.8 MG	
RENA-VITE ORAL TABLET 0.8 MG	
RENA-VITE RX ORAL TABLET 1-60-300 MG- MG-MCG	
SUPER B-50 COMPLEX ORAL CAPSULE 400 MCG-20 MG- 50 MG	
SUPER QUINTS B-50 ORAL TABLET (vitamin b complex)	
<i>vit b comp-folic-choline-inosi oral tablet extended release 400 mcg-10 mg- 10 mg</i>	
<i>vitamin b complex oral capsule</i>	
<i>vitamin b complex oral tablet</i> (Super Quints B-50)	
<i>vitamin b complex oral tablet,disintegrating</i>	
VITAMINS B COMPLEX ORAL TABLET (vitamin b complex)	
WESTAB ONE ORAL TABLET 2.5-25-1 MG (folic acid-vit b6-vit b12)	
Vitamin B1 Preparations	
<i>thiamine hcl (vitamin b1) injection solution 100 mg/ml</i>	
<i>thiamine hcl (vitamin b1) oral tablet 100 mg, 50 mg</i> (Vitamin B-1)	
<i>thiamine mononitrate (vit b1) oral tablet 100 mg</i> (Vitamin B-1 (mononitrate))	
VITAMIN B-1 (MONONITRATE) ORAL TABLET 100 MG (thiamine mononitrate (vit b1))	
VITAMIN B-1 ORAL TABLET 100 MG, 250 MG, 50 MG (thiamine hcl (vitamin b1))	
Vitamin B12 Preparations	
B-12 DOTS ORAL TABLET 500 MCG (cyanocobalamin (vitamin b-12))	
<i>cyanocobalamin (vitamin b-12) injection solution 1,000 mcg/ml</i>	
<i>cyanocobalamin (vitamin b-12) oral tablet 1,000 mcg</i> (Vitamin B-12)	
<i>cyanocobalamin (vitamin b-12) oral tablet 500 mcg</i> (B-12 DOTS)	

Drug		Notes
<i>cyanocobalamin (vitamin b-12) oral tablet extended release 1,000 mcg</i>	(Vitamin B-12)	
<i>cyanocobalamin (vitamin b-12) sublingual tablet 1,000 mcg</i>		
VITAMIN B-12 ORAL TABLET 1,000 MCG, 500 MCG	(cyanocobalamin (vitamin b-12))	
VITAMIN B-12 ORAL TABLET EXTENDED RELEASE 1,000 MCG	(cyanocobalamin (vitamin b-12))	
Vitamin B6 Preparations		
<i>pyridoxine (vitamin b6) oral tablet 100 mg, 25 mg, 50 mg</i>	(Vitamin B-6)	
<i>pyridoxine (vitamin b6) oral tablet 500 mg</i>		
VITAMIN B-6 ORAL TABLET 100 MG, 25 MG, 250 MG, 50 MG	(pyridoxine (vitamin b6))	
Vitamin C Preparations		
ACEROLA C-500 ORAL WAFER 500 MG	(ascorbic acid-ascorbate sodium)	
<i>ascorbic acid (vitamin c) oral tablet 1,000 mg</i>	(C-1000)	
<i>ascorbic acid (vitamin c) oral tablet 250 mg</i>	(Vitamin C)	
<i>ascorbic acid (vitamin c) oral tablet 500 mg</i>	(C-500)	
<i>ascorbic acid (vitamin c) oral tablet, chewable 125 mg</i>	(PureVita Vitamin C)	
<i>ascorbic acid (vitamin c) oral tablet, chewable 250 mg</i>	(Vitamin C)	
<i>ascorbic acid (vitamin c) oral tablet, chewable 500 mg</i>	(C-500)	
<i>ascorbic acid-ascorbate sodium oral wafer 500 mg</i>	(Acerola C-500)	
C-1000 ORAL TABLET 1,000 MG	(ascorbic acid (vitamin c))	
C-1000 WITH ROSE HIPS ORAL TABLET 1,000 MG	(ascorbic acid (vitamin c))	
C-500 ORAL TABLET 500 MG	(ascorbic acid (vitamin c))	
C-500 ORAL TABLET, CHEWABLE 500 MG	(ascorbic acid (vitamin c))	
FRUIT C ORAL TABLET, CHEWABLE 100 MG		
FRUIT C-500 ORAL TABLET, CHEWABLE 500 MG	(ascorbic acid (vitamin c))	
PUREVITA VITAMIN C ORAL TABLET, CHEWABLE 125 MG	(ascorbic acid (vitamin c))	
STRAWBERRY C ORAL TABLET, CHEWABLE 500 MG	(ascorbic acid (vitamin c))	
VITAJoy DAILY C ORAL TABLET, CHEWABLE 125 MG	(ascorbic acid (vitamin c))	

Drug	Notes
VITAMIN C ORAL TABLET 1,000 MG, 100 MG, 250 MG, 500 MG (ascorbic acid (vitamin c))	
VITAMIN C ORAL TABLET,CHEWABLE 125 MG, 250 MG, 500 MG (ascorbic acid (vitamin c))	
VITAMIN C WITH ROSE HIPS ORAL TABLET 1,000 MG, 500 MG (ascorbic acid (vitamin c))	
VITAMIN C WITH ROSE HIPS ORAL TABLET,CHEWABLE 500 MG (ascorbic acid (vitamin c))	
Vitamin D Preparations	
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	
<i>cholecalciferol (vitamin d3) oral capsule 1,250 mcg (50,000 unit)</i> (Decara)	
<i>cholecalciferol (vitamin d3) oral capsule 10 mcg (400 unit), 25 mcg (1,000 unit)</i> (Vitamin D3)	
<i>cholecalciferol (vitamin d3) oral capsule 125 mcg (5,000 unit)</i> (Dialyvite Vitamin D)	
<i>cholecalciferol (vitamin d3) oral capsule 250 mcg (10,000 unit)</i> (IS-D-10,000)	
<i>cholecalciferol (vitamin d3) oral capsule 50 mcg (2,000 unit)</i> (D3-2000)	
<i>cholecalciferol (vitamin d3) oral drops 10 mcg/ml (400 unit/ml)</i> (D-Vi-Sol)	Age (Max 18 Years)
<i>cholecalciferol (vitamin d3) oral liquid 10 mcg/5 ml (400 unit/5 ml)</i>	Age (Max 18 Years)
<i>cholecalciferol (vitamin d3) oral tablet 10 mcg (400 unit)</i> (Delta D3)	
<i>cholecalciferol (vitamin d3) oral tablet 125 mcg (5,000 unit)</i> (Vitamin D3)	
<i>cholecalciferol (vitamin d3) oral tablet 25 mcg (1,000 unit)</i> (PureVita Vitamin D3)	
<i>cholecalciferol (vitamin d3) oral tablet 50 mcg (2,000 unit)</i> (Thera-D)	
<i>cholecalciferol (vitamin d3) oral tablet,chewable 25 mcg (1,000 unit)</i> (VitaJoy Daily D)	
D3-2000 ORAL CAPSULE 50 MCG (2,000 UNIT) (cholecalciferol (vitamin d3))	
DECARA ORAL CAPSULE 1,250 MCG (50,000 UNIT) (cholecalciferol (vitamin d3))	
DELTA D3 ORAL TABLET 10 MCG (400 UNIT) (cholecalciferol (vitamin d3))	
DIALYVITE VITAMIN D ORAL CAPSULE 125 MCG (5,000 UNIT) (cholecalciferol (vitamin d3))	
D-VI-SOL ORAL DROPS 10 MCG/ML (400 UNIT/ML) (cholecalciferol (vitamin d3))	Age (Max 18 Years)
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i> (Vitamin D2)	

Drug		Notes
<i>ergocalciferol (vitamin d2) oral tablet 10 mcg (400 unit)</i>		
<i>ergocalciferol (vitamin d2) oral tablet 50 mcg (2,000 unit)</i>		
<i>fish oil-dha-epa oral capsule 1,200-144-216 mg</i>		
OPTIMAL D3 ORAL CAPSULE 1,250 MCG (50,000 UNIT)	(cholecalciferol (vitamin d3))	
PEDIA D-VITE ORAL DROPS 10 MCG/ML (400 UNIT/ML)	(cholecalciferol (vitamin d3))	Age (Max 18 Years)
PEDIATRIC D-VITE ORAL DROPS 10 MCG/ML (400 UNIT/ML)	(cholecalciferol (vitamin d3))	Age (Max 18 Years)
PUREVITA VITAMIN D3 ORAL TABLET 25 MCG (1,000 UNIT)	(cholecalciferol (vitamin d3))	
THERA-D ORAL TABLET 50 MCG (2,000 UNIT)	(cholecalciferol (vitamin d3))	
VITAJoy DAILY D ORAL TABLET,CHEWABLE 25 MCG (1,000 UNIT)	(cholecalciferol (vitamin d3))	
VITAMIN D2 ORAL CAPSULE 1,250 MCG (50,000 UNIT)	(ergocalciferol (vitamin d2))	
VITAMIN D3 ORAL CAPSULE 10 MCG (400 UNIT), 25 MCG (1,000 UNIT), 50 MCG (2,000 UNIT)	(cholecalciferol (vitamin d3))	
VITAMIN D3 ORAL TABLET 10 MCG (400 UNIT), 125 MCG (5,000 UNIT), 25 MCG (1,000 UNIT), 50 MCG (2,000 UNIT)	(cholecalciferol (vitamin d3))	
VITAMIN D3 ORAL TABLET,CHEWABLE 25 MCG (1,000 UNIT)	(cholecalciferol (vitamin d3))	
WEEKLY-D ORAL CAPSULE 1,250 MCG (50,000 UNIT)	(cholecalciferol (vitamin d3))	
Zinc Replacement		
ORAZINC ORAL TABLET 25 MG ZINC (110 MG)		
<i>zinc amino acid chelate oral tablet 50 mg</i>		
<i>zinc gluconate oral lozenge 10 mg</i>		
<i>zinc gluconate oral tablet 100 mg, 30 mg, 50 mg</i>		
<i>zinc sulfate oral capsule 50 mg zinc (220 mg)</i>	(Zinc-220)	
<i>zinc sulfate oral tablet 50 mg zinc (220 mg)</i>		
ZINC-15 ORAL TABLET 66 MG		
ZINC-220 ORAL CAPSULE 50 MG ZINC (220 MG)	(zinc sulfate)	

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