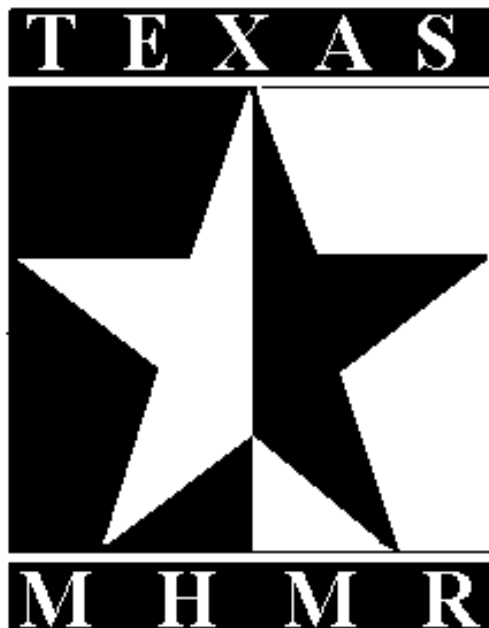


**TEXAS DEPARTMENT
OF
MENTAL HEALTH
AND
MENTAL RETARDATION**



**DRUG FORMULARY
2004**

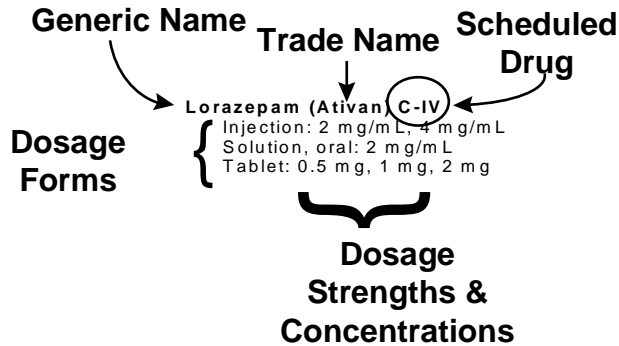
<http://www.mhmr.state.tx.us/CentralOffice/MedicalDirector/EFC.html>

HOW TO USE THIS FORMULARY

The TDMHMR Drug Formulary is the publication that outlines the medications that have been approved for use in the TDMHMR system. The formulary is published annually in the last quarter of the calendar year. This document is divided into three sections (Alphabetical Listing, Therapeutic Classification/Cost Index, Alphabetical Index) to facilitate usage.

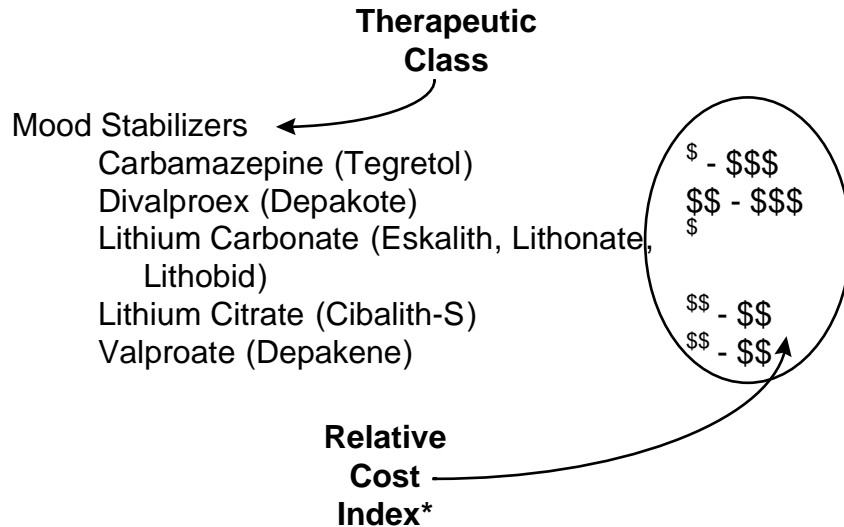
1. ALPHABETICAL LISTING:

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



2. THERAPEUTIC CLASSIFICATION/COST INDEX:

This section groups the medications by therapeutic usage and lists them alphabetically by generic (nonproprietary) name. Medications may be listed in multiple categories. For trade names, consult the alphabetical index. Also in this section is a relative cost index so that medications used in similar situations can be evaluated keeping cost of care in mind. Relative cost is based on cost per day of the average dose. The cost of bulk items is listed per unit.



* Index = \$ < \$\$ < \$ < \$\$ < \$\$\$ < \$\$\$\$ < \$\$\$\$\$ < \$\$\$\$\$\$ < \$\$\$\$\$\$\$ < \$\$\$\$\$\$\$\$

3. ALPHABETICAL INDEX:

This section lists all the medications alphabetically by trade name, generic name, and abbreviations. Page numbers for each of the listings is provided.

INTRODUCTION

The purpose of the TDMHMR Executive Formulary Committee is to maintain and update the *Formulary* and to recommend standards for drug use within the TDMHMR system. The Committee is concerned with maintaining the highest standards for drug use. To assist the clinician in prescribing the most cost effective agents a Therapeutic Classification with relative cost data is provided. Because of their frequency of use, the highest level of concern and vigilance centers on the psychotropic medications. For the clinician's reference, the *Formulary* provides tables summarizing the recommended dosage ranges for the psychotropic drugs; however, these guidelines are not intended to replace other references or the clinician's clinical judgment. The clinician is urged to check with other references, including the TDMHMR Rule Governing Prescribing of Medications - Mental Health, Chapter 405, Subchapter A, *The American Hospital Formulary Service Drug Information, Facts & Comparisons*, and *The AMA Drug Evaluations* among other reliable sources.

This *Formulary*, is not intended to be a reference for drug use. Rather it is to serve the clinician as a listing of drugs, which are approved for use within the Department. Approval of a drug entity for inclusion in the Formulary does not imply approval of all formulations containing that entity. The Executive Formulary Committee will decide which formulations are approved for use within the department. Not all drugs listed in the *Formulary* will be stocked at each facility's pharmacy. If a physician, dentist, nurse or pharmacist desires to have a drug added to the *Formulary*, he or she should complete and submit the appropriate form (New Drug Application, DF-1, see Appendix 1) to the facility's Pharmacy and Therapeutics Committee. If it is approved at the facility level but is not included in the Departmental Formulary, the facility's Director of Pharmacy must then forward the request to the Departmental Executive Formulary Committee in care of the TDMHMR Office of the Medical Director. Requests received at least 30 days prior to the quarterly meeting will be considered at that meeting. Requests received less than 30 days before the meeting will not be considered until the following meeting. Clinicians and facilities are encouraged to submit supporting documents with their formulary request. The Executive Formulary Committee will evaluate the submission's appropriateness based upon the efficacy and safety of the proposed drug compared with existing formulary items and cost effectiveness of the new agent. When appropriate, the Executive Formulary committee will add the new drug or replace old agents in the same pharmacological/therapeutic category with the new agent. The TDMHMR *Formulary* and Interim Formulary Updates are available at <http://www.mhmr.state.tx.us/CentralOffice/MedicalDirector/Formulary.html>

The TDMHMR Formulary consists of routine and reserve drugs. Drugs in the reserve class have specific guidelines for use printed in the *Formulary*. These guidelines will be used to audit the appropriate use of reserve drugs. Based on the audit results, continuing education will be developed and targeted as needed. The purpose of reserve status is to stimulate thought and promote care in prescribing. Discussions about the use of reserve status drugs with peers are encouraged. Use of reserve status drugs requires documentation of justification in the patient's progress notes.

As a means of preventing medication errors, the *Formulary* has incorporated TALL

MAN characters to assist in distinguishing look-alike drug names. TALL MAN characters are being implemented in various parts of the pharmaceutical industry in order to prevent medication errors. Even though the *Formulary* may not play a major role in preventing medication errors, hopefully this change will stimulate the awareness of TALL MAN characters and assist in implementing this print style in other areas of our medication use process.

The Texas Department of Mental Health and Mental Retardation utilizes a closed formulary system. Only drugs listed in the *Formulary* are to be stocked, prescribed and dispensed in TDMHMR facilities including pharmaceutical products recommended by consultants for specialized treatments. When a patient's condition requires a drug not listed in the *Formulary*, limited quantities can be obtained for use in that particular patient. However, documentation (Non-Formulary Drug Justification Form, DF-2, see Appendix 2) should be submitted to the facility Clinical Director and the Office of the Medical Director where it will be reviewed by the Executive Formulary Committee to assure reasonable compliance with the *Formulary*.

When requested by the Commissioner, the Executive Formulary Committee will make other recommendations regarding drug use. If facility clinicians have topics for committee consideration, these requests should be sent to the Chairperson, TDMHMR Executive Formulary Committee in care of the TDMHMR Office of the Medical Director. The Committee also appreciates your comments concerning the printing of the *Formulary* and Committee deliberations and decisions. To facilitate your involvement, a schedule of the review process has been added to this edition of the *Formulary*. Please feel free to provide input.

Victoria B. Morgan, MD
Chairperson
TDMHMR Executive Formulary Committee

Steven P. Shon, MD
Medical Director
TDMHMR

December 2003
Date

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FORMULARY REVIEW SCHEDULE

For FY04 – FY06 (9/1/03 – 8/31/06)

FY	Meeting Number	Category
04	1*	Dermatologicals, (Acne agents to Anti-Infectives Antifungals)
	2	Dermatologicals (Scabicides to Miscellaneous Dermatologicals)
	3	Psychotropic
	4	Cardiovascular
05	1*	Infectious Disease
	2	Antidiabetic Antidotes/Deterrents/Poison Control Antihistamines Antineoplastic Blood Modifying
	3	Analgesics Antiemetics/Antivertigo Sedative and Hypnotics Anticonvulsants
	4	Muscle Relaxants Antiparkinson Agents Migraine Miscellaneous CNS Endocrine
06	1*	Gastrointestinal Genitourinary
	2	Immunological Intravenous Solutions and Additives Nutritional
	3	Respiratory Ophthalmic
	4	Otics Nasal, Mouth and Throat Irrigation Solutions

* Reserve Drugs and Tables reviewed annually

PROCEDURE FOR ADDITION OF DRUGS TO THE FORMULARY

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

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

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

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

The specific limitations or guidelines for use of a reserve drug are stated in the formulary. A credentialed clinician may prescribe reserve drugs outside *Formulary* guidelines; however, such exceptions must be justified in the patient record and must be reviewed in routine facility audits of reserve drug utilization.

PSYCHOTROPIC DOSAGE GUIDELINES

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

In children and adolescents, metabolic and physiologic differences from adults should be considered when prescribing. Dosing based on body weight may be more accurate when treating these patients.

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

In general, when treating patients with developmental disabilities, a "go low, go slow" approach is recommended when increasing or decreasing psychotropic medication. The use of psychotropic medication can be therapeutic and empowering for a person with both mental retardation and a mental illness. The primary goal is to obtain an accurate diagnosis of behavioral and psychiatric symptoms so that the patients' treatment is appropriate. A functional analysis by a psychologist is vital prior to starting any psychotropic medication except in an emergency. The U. S. Health Care Financing Administration now states that the least intrusive and most positive intervention to treat behavioral or psychiatric symptoms in a person with mental retardation may be the use of a psychotropic medication.

Prescribing psychotropic medication should be based on the following resources:

TDMHMR Prescribing of Medications-Mental Health, Chapter 405, Subchapter A

TDMHMR Prescribing of Psychotropic Medication-Mental Retardation Facilities, Chapter 405, Subchapter B

Other useful resources that reflect current Standards of Care for the mentally ill include but are not limited to the following:

Treatment Guidelines of Various Psychiatric Disorders

Examples include:

APA Practice Guideline for the treatment of Patients with Schizophrenia. *Am J Psychiatry* 1997; 154: 4 (April supplement)

APA Practice Guideline for Major Depressive Disorder in Adults. *Am J Psychiatry*

1993; 150 (supplement)
Consensus Guidelines for Bipolar Disorder. *J Clin Psychiatry* 1996; 57 (suppl 12a)

Psychotropic Medications and Developmental Disabilities: The International Consensus Handbook (Reiss and Aman, eds; AAMR, 202-387-1968)

Consensus Guidelines of Psychotropic Medication in Persons with Developmental Disabilities *AJMR*, May 2000 (special issue)

Texas Implementation of Medication Algorithms (TIMA):
www.mhmr.state.tx.us/CentralOffice/MedicalDirector/TIMA.html
(web site still under construction)

Revised 5 December 2000

ANTIPSYCHOTICS

Drug	Suggested Maximum Dose (mg/day)*
Aripiprazole (Abilify)	30
chlorproMAZINE (Thorazine)	2,000
Clozapine (Clozaril) - RESERVE USE	900
Fluphenazine ¹ (oral) (Prolixin)	60
Fluphenazine Decanoate ¹ (Prolixin, Permitil)	100 (q 1 - 4 weeks)
Haloperidol ² (oral) (Haldol)	100
Haloperidol Decanoate ² (Haldol)	450 mg per month
Loxapine (Loxitane)	250
Mesoridazine (Serentil) ³ - RESERVE USE	500
Molindone (Moban)	225
Olanzapine (Zyprexa)	30
Perphenazine (Trilafon)	64
Quetiapine (Seroquel)	800
Risperidone (Risperdal)	8 ⁴
Thioridazine (Mellaril) ³ - RESERVE USE	(ABSOLUTE) 800
Thiothixene (Navane)	60
Trifluoperazine (Stelazine)	80
Ziprasidone (Geodon)	240

*except where noted

¹ Fluphenazine Therapeutic Concentration = 1 - 3 ng/mL

² Haloperidol Therapeutic Concentration = 3 - 15 ng/mL

³ A boxed warning has been added to advise clinicians of prolongation of the QTc interval

⁴ Risperidone doses >6 mg/day have increased risk of EPS

Revised 24 October 2003

ANTIDEPRESSANTS

Drug	Suggested Maximum Dose (mg/day)
Amitriptyline (Elavil)	300
Amoxapine (Asendin)	600
buPROPion (Wellbutrin)	450/day (with no single dose > 150)
buPROPion SR (Wellbutrin SR)	400
buPROPion XL (Wellbutrin XL)	450
Citalopram (Celexa)	60
Desipramine (Norpramin)	300* ¹
Doxepin (Sinequan, Adapin)	300
Escitalopram (Lexapro)	20
Fluoxetine (Prozac)	80
Fluvoxamine (Luvox)	300
Imipramine (Tofranil)	300* ²
Maprotiline (Ludiomil)	225
Mirtazapine (Remeron)	45
Nefazodone (Serzone) - RESERVE USE	600
Nortriptyline (Pamelor, Aventyl)	200* ³
Paroxetine (Paxil)	50
Phenelzine (Nardil)	90
Protriptyline (Vivactil)	60
Sertraline (Zoloft)	200
Tranylcypromine (Parnate)	60
Trazodone (Desyrel)	600
Trimipramine (Surmontil)	300
Venlafaxine (Effexor)	375
Venlafaxine XR (Effexor XR)	375

*Plasma concentration monitoring is recommended if these doses are exceeded.

¹Desipramine Therapeutic Concentration = 100-300 ng/mL

²Imipramine Therapeutic Concentration = 150-250 ng/mL

³Nortriptyline Therapeutic Concentration = 50-150 ng/mL

Revised 24 October 2003

FOODS CONTAINING TYRAMINE

****High Amounts of Tyramine***

Smoked, aged or pickled meat or fish
Sauerkraut
Aged Cheeses such as Swiss and Cheddar
Yeast extracts
Fava beans

*****Moderate Amounts of Tyramine***

Beer
Avocados
Meat extracts
Red wines such as Chianti

******Low Amounts of Tyramine***

Caffeine-containing beverages
Distilled spirits
Chocolate
Soy sauce
Cottage and cream cheeses
Yogurt and sour cream

*May not consume

**May consume in moderation

***May consume

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

MOOD STABILIZERS

Drug	Suggested Maximum Dose (mg/day)*	Therapeutic Serum Concentration
Carbamazepine (Tegretol, Tegretol XR, Carbatrol)	1600	4 - 12 mcg/mL
Lamotrigine (Lamictal)	400	nd
Lithium (Lithobid, Eskalith)	3600 (<65 years old) 1800 (≥65 years old)	0.6-1.5 mEq/L 0.6-1.0 mEq/L
Oxcarbazepine (Trileptal)	2400	nd
Topiramate (Topamax)	nd	nd
Valproic Acid/Valproate (Depakene), Divalproex (Depakote)	60 mg/kg	50 - 150 mcg/mL
Verapamil (Calan, Isoptin)	480	nd

* Plasma concentration monitoring is recommended if these doses are exceeded
nd = not yet determined

Revised 24 October 2003

STIMULANTS

Drug	Suggested Maximum Dose (mg/day)
Amphetamine Mixture (Adderall, Adderall XR)	60*
Dextroamphetamine (Dexedrine)	60*
Methylphenidate (Ritalin, Concerta)	60

* suggested maximum dosage in children

Revised 24 October 2003

MISCELLANEOUS DRUGS USED FOR PSYCHOTROPIC PURPOSES

Drug	Suggested Maximum Dose (mg/day)
clomiPRAMINE (Anafranil)	250
Clonidine (Catapres)	0.4
Propranolol (Inderal)	160 (anxiety)***

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

Revised 19 October 1998

ANXIOLYTICS

Drug	Suggested Maximum Dose (mg/day)	
	Under 65 years (mg/day)	Over 65 years (mg/day)
Alprazolam (Xanax)	4	2
(exception: for panic disorder)	10	N/A
busPIRone (BuSpar)	60	60
Chlordiazepoxide (Librium)	100*	40*
Clonazepam (Klonopin)	20	10
Clorazepate (Tranxene)	60	30
Diazepam (Valium)	60	20
Lorazepam (Ativan)	10*	3*
Oxazepam (Serax)	90	60

*Larger doses may be necessary in some cases of alcohol/substance withdrawal.

Revised 19 October 1998

SEDATIVES AND HYPNOTICS

Drug	Suggested Maximum Dose (mg/day)	
	Under 65 years (mg/day)	Over 65 years (mg/day)
Amobarbital (Amytal) - RESERVE USE	500	500
Chloral Hydrate (Noctec)	1500*	1500*
diphenhydrAMINE (Benadryl)	300	300
hydrOXYzine (Atarax)	300	300
Mirtazapine (Remeron)	30	15
Temazepam (Restoril)	30	15
Trazodone (Desyrel)	150	150
Triazolam (Halcion)	0.25	0.125
Zaleplon (Sonata)	10	5
Zolpidem (Ambien)	10	5

* Individual dose usually 500 mg but doses up to 1 gram may be used to produce conscious sedation for certain procedures

Revised 25 October 2002

RESERVE DRUGS

The purpose of the reserve drug class is to stimulate thought and promote care in prescribing. Discussions and interaction with other prescribers is strongly encouraged. When reserve status drugs are utilized, documentation of justification in the patient's progress notes is mandated. To assist the prescriber, specific guidelines have been developed by the Executive Formulary Committee for use of each drug so classified. The guidelines will be used to audit the appropriate use of reserve drugs. Based on the audit results, continuing education will be developed and targeted as needed.

Drug	Guidelines for Use
Amobarbital (Amytal) C-II	For use with research protocols
Azithromycin (Zithromax)	<ol style="list-style-type: none"> 1) If a macrolide antibiotic is indicated for the treatment of an infection, then erythromycin is the drug of choice 2) The patient has prior side effects (not anaphylactic) to erythromycin which is documented in the chart 3) The prescriber is aware of the significant cost difference between erythromycin, clarithromycin, and azithromycin 4) The prescriber is aware that all macrolide antibiotics have the potential to have drug interactions
Cefuroxime Axetil (Ceftin) - Oral Form	<ol style="list-style-type: none"> 1) Streptococcus or Staphylococcus infections or any penicillin-sensitive organism infections in patients who are <ol style="list-style-type: none"> a) allergic to penicillin, and b) intolerant of erythromycin; or c) allergic or intolerant to sulfonamides; or d) therapeutic failures with penicillin, erythromycin, or sulfonamides; or 2) <i>H. influenza</i> or <i>Branhamella catarrhalis</i> infections or 3) Oral continuation of IV therapy for appropriate indications (not appropriate follow-up for coliforms); 4) Not to be used for oral therapy of gram negative infections
Clarithromycin (Biaxin)	<ol style="list-style-type: none"> 1) If a macrolide antibiotic is indicated for the treatment of an infection, then erythromycin is the drug of choice 2) The patient has prior side effects (not anaphylactic) to erythromycin which is documented in the chart 3) The prescriber is aware of the significant cost difference between erythromycin and clarithromycin 4) The prescriber is aware that all macrolide antibiotics have the potential to have drug interactions
Clobetasol (Temovate)	To be used under the direction of a dermatologist
Clopidogrel (Plavix)	Documented sensitivity to aspirin

Drug	Guidelines for Use
Clozapine (Clozaril)	<ol style="list-style-type: none"> 1) For use in patients with refractory schizophrenia or schizoaffective disorder; or 2) For use in schizophrenic or schizoaffective patients who cannot tolerate other antipsychotics; or 3) Psychosis associated with other organic conditions who have failed two antipsychotics or who cannot tolerate other antipsychotics; or 4) Manic disorders with psychosis in patients who have failed two antipsychotics
Divalproex ER (Depakote ER)	For the treatment of migraine headaches and epilepsy only.
Donepezil (Aricept)	<ol style="list-style-type: none"> 1) Preferred agent for patients who have been newly diagnosed with Alzheimer's disease 2) Patient's response needs to be monitored with a Mini-Mental Status Exam (MMSE) during the course of therapy 3) Initial dose is 5 mg/day for 4 to 6 weeks 4) Maximum dose is 10 mg/day and dose cannot be increased to 10 mg/day until the patient has been on 5 mg/day for 4 to 6 weeks
Felbamate (Felbatol)	Weekly progress note by physician monitoring for response and adverse effects for at least two weeks following initiation of therapy
Mesoridazine (Serentil)	<ol style="list-style-type: none"> 1) Indicated only for patients with refractory schizophrenia (failed other classes of antipsychotics) 2) EKG prior to initiating therapy: 7 – 14 days after dose change; 7 – 14 days after other medication changes that could significantly alter the cardiac effects of Thioridazine; every six months; and as clinically indicated 3) Potassium level prior to initiating therapy; every six months; and as clinically indicated 4) Magnesium level prior to initiating therapy; and as clinically indicated (especially if potassium level is low)
Nabumetone (Relafen)	For the treatment of chronic osteoarthritis or chronic rheumatoid arthritis
Ophthalmic agents containing a steroid	Consultation with an Ophthalmologist prior to initiation.
Pentamidine (Pentam)	<ol style="list-style-type: none"> 1) Prophylaxis post-treatment of documented <i>Pneumocystis carinii</i> pneumonia; or 2) Prophylaxis of <i>Pneumocystis carinii</i> in patients with T₄ counts of less than 200
Rivastigmine (Exelon)	Patient's response needs to be monitored with mini-mental status exam (MMSE) during the course of therapy

Drug	Guidelines for Use
Thioridazine (Mellaril)	<ol style="list-style-type: none"> 1) Indicated only for patients with refractory schizophrenia (failed other classes of antipsychotics) 2) EKG prior to initiating therapy: 7 – 14 days after dose change; 7 – 14 days after other medication changes that could significantly alter the cardiac effects of Thioridazine; every six months; and as clinically indicated 3) Potassium level prior to initiating therapy; every six months; and as clinically indicated 4) Magnesium level prior to initiating therapy; and as clinically indicated (especially if potassium level is low)
Tizanidine (Zanaflex)	<ol style="list-style-type: none"> 1) Documented failure or intolerance to baclofen 2) Liver enzymes obtained at baseline, 1, 3, and 6 months and at least annually 3) Documentation of efficacy after one month of therapy 4) The dose should be decreased in severe renal dysfunction (CrCl <25 mL/min)

THERAPEUTIC SERUM CONCENTRATIONS OF SOME ANTICONVULSANTS

Drug	(mcg/mL)
Carbamazepine (Tegretol, Tegretol XR, Carbatrol)	4-12
Ethosuximide (Zarontin)	40-100
Phenobarbital (Luminal)	10-40
Phenytoin (Dilantin)	10-20
Valproic Acid, Valproate, Divalproex (Depakene, Depakote)	Seizure Disorder: 50-150 Bipolar Disorder: 50-125 Aggression: not established

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

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

- Benzodiazepines
- Gabapentin
- Lamotrigine
- Levetiracetam
- Oxcarbazepine
- Tiagabine
- Topiramate

*Source: USP Dispensing Information, 1998
The United States Pharmacopeial Convention, Inc.

Revised 25 October 2002

ANTIBIOTIC SENSITIVITIES

STREP/STAPH INFECTIONS

Oral Medication	Dose	Cost/Day*
Pen V Potassium (Strep only)	500 mg q6h	0.40
Cloxacillin/Dicloxacillin	500 mg q6h	1.40
Cloxacillin/Dicloxacillin	1 gm q6h	2.80
Cefuroxime Axetil - Reserve Use	500 mg q8h	15.90
Cephalexin	500 mg q6h	0.63
Erythromycin	500 mg q6h	0.48
Clarithromycin - Reserve Use	500 mg q6h	10.97
Trimethoprim/Sulfamethoxazole	DS q12h	0.12

STAPH INFECTIONS

IV Medication	Dose	Cost/Day*
Nafcillin	2 gm q4h	18.72
Vancomycin	500 mg q6h	13.18

SINUSITIS - OTITIS MEDIA

Oral Medication	Dose	Cost/Day*
Amoxicillin	500 mg q8h	0.38
Amoxicillin/Clavulanate	500 mg q8h	7.47
Cefuroxime Axetil - Reserve Use	500 mg q8h	15.90
Clarithromycin - Reserve Use	500 mg q8h	8.23
Trimethoprim/Sulfamethoxazole	DS q12h	0.12
Erythromycin	500 mg q6h	0.48
Clindamycin	300 mg q6h	7.11

* Cost may vary slightly between facilities

UTI - GRAM (-)
E. COLI, KLEBSIELLA, PROTEUS

Medication	Route	Dose	Cost/Day*
Ceftriaxone	IV	1 gm qD	25.44
Trimethoprim/Sulfamethoxazole	IV	1.2 gm sulfa q12h	1.32
Ciprofloxacin	IV	400 mg q12h	60.00
Ciprofloxacin	PO	500 mg q12h	6.20
Trimethoprim/Sulfamethoxazole	PO	DS q12h	0.12

PSEUDOMONAS INFECTIONS

Medication	Route	Dose	Cost/Day*
Ticarcillin/Clavulanate	IV	3.1 gm q6h	43.26
Ciprofloxacin	IV	400 mg q12h	60.00
Gentamicin	IV	1.8 mg/kg q8h	14.40
Ciprofloxacin	PO	500 mg q12h	6.20

ANAEROBES

Medication	Route	Dose	Cost/Day*
Ticarcillin/Clavulanate	IV	3.1 gm q6h	43.26
Metronidazole	IV	500 mg q12h	32.78
Clindamycin	IV	900 mg q8h	17.26
Amoxicillin/Clavulanate	PO	500 mg q8h	7.47
Metronidazole	PO	750 mg q8h	0.40
Clindamycin	PO	300 mg q6h	7.11

* Cost may vary slightly between facilities

Revised 30 November 1998

ALPHABETICAL LISTING

Abrasive Cleanser (Brasivol, Pernox)

Pernox Cleanser (contains sulfur, salicylic acid, EDTA): 56 g, 113 g

Brasivol Cleanser (contains aluminum oxide): fine (153 g), medium (180 g), rough (195 g) textures

Acetaminophen (Tylenol)

Liquid: 160 mg/5 mL, 500 mg/15 mL

Suppository, rectal: 120 mg, 125 mg, 325 mg, 650 mg

Tablet: 325 mg, 500 mg, 650 mg

Tablet, chewable: 80 mg

Acetaminophen/Codeine C-III

Suspension, oral: Acetaminophen 120 mg/Codeine 12 mg per 5 mL (C-V)

Tablet:

#2: Acetaminophen 300 mg/Codeine 15 mg

#3: Acetaminophen 300 mg/Codeine 30 mg

Acetaminophen/Hydrocodone (Lortab, Vicodin)

Elixir: Acetaminophen 167 mg/Hydrocodone 2.5 mg per 5 mL with 7% alcohol

Tablet: Acetaminophen 325 mg/Hydrocodone 5 mg, Acetaminophen 325 mg/Hydrocodone 10 mg, Acetaminophen 500 mg/Hydrocodone 2.5 mg, Acetaminophen 500 mg/Hydrocodone 5 mg, Acetaminophen 500 mg/Hydrocodone 7.5 mg, Acetaminophen 500 mg/Hydrocodone 10 mg

acetaZOLAMIDE (Diamox)

Capsule, sustained release: 500 mg

Tablet: 125 mg, 250 mg

Acetic Acid (Acetasol, VoSol)

Solution, otic: 2%

Acetic Acid/Aluminum Acetate (Domeboro Otic)

Solution, otic: 2% acetic acid in aluminum acetate

Acetic Acid/Hydrocortisone/Propylene Glycol/Sodium Acetate/Benzethonium (VoSol HC)

Solution, otic: 1% Hydrocortisone, 2% Acetic Acid, 3% Propylene Glycol, 0.015% Sodium Acetate, and 0.02% Benzethonium

Acetylcysteine (Mucomyst)

Solution, inhalation: 10% [100 mg/mL], 20% [200 mg/mL]

Activated Charcoal

Liquid, oral, activated, with sorbitol: 25 g, 30 g, 50 g
Powder for oral suspension, activated: 15 g, 30 g, 40 g, 120 g, 240 g

Acyclovir (Zovirax)

Capsule: 200 mg
Powder for injection: 500 mg, 1000 mg
Ointment, topical 5% [50 mg/g]: 3 gm, 15 gm
Suspension, oral: 200 mg/5 mL
Tablet: 400 mg, 800 mg

Adapalene (Differin)

Gel, topical: 0.1%

Adenosine (Adenocard)

Injection: 3 mg/mL

Albuterol (Proventil, Ventolin)

Aerosol, inhalation, chlorofluorocarbon free: 90 mcg/dose (17g) [200 doses]
Solution, inhalation: 0.083% [83 mg/mL], 0.5% [50 mg/mL]
Syrup: 2 mg/5 mL
Tablet: 2 mg, 4 mg
Tablet, extended release: 4 mg, 8 mg

Alendronate (Fosamax)

Tablet: 5 mg, 10 mg, 35 mg, 40 mg, 70 mg

Allopurinol (Zyloprim)

Tablet: 100 mg, 300 mg

Alprazolam (Xanax) C-IV

Tablet: 0.25 mg, 0.5 mg, 1 mg, 2 mg

Aluminum Acetate (Burow's Solution,)

Solution, topical: 480 mL

Aluminum Hydroxide (Amphojel)

Suspension, oral: 320 mg/5 mL, 600 mg/5 mL
Tablet: 300 mg, 400 mg, 500 mg, 600 mg

Aluminum Hydroxide/Magnesium Trisilicate (Gaviscon)

Tablet, chewable: each tablet contains Aluminum Hydroxide/Magnesium Trisilicate

Aluminum Hydroxide/Magnesium Hydroxide (Maalox)

Suspension, oral: containing Aluminum Hydroxide/Magnesium Hydroxide
Tablet: each tablet contains Aluminum Hydroxide/Magnesium Hydroxide

Aluminum Hydroxide/Magnesium Hydroxide/Simethicone (Mylanta, Aludrox)

Liquid, oral: containing Aluminum Hydroxide/Magnesium Hydroxide/Simethicone

Tablet: each tablet contains Aluminum Hydroxide/Magnesium Hydroxide/Simethicone

Amantadine (Symmetrel)

Capsule: 100 mg

Syrup: 50 mg/5 mL

Amino Acid Injection (Aminosyn)

Infusion: 3.5%, 5%, 7%, 8.5%, 10%, 15%

Aminophylline (79% Theophylline)

Injection: 25 mg/mL

Suppository, rectal: 250 mg

Amitriptyline (Elavil)

Tablet: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg

Amlodipine (Norvasc)

Tablet, extended release: 2.5 mg, 5 mg, 10 mg

Amobarbital (Amytal) C-II - RESERVE USE

Capsule: 65 mg, 200 mg 100 mg

Injection: 250 mg, 500 mg

Tablet: 30 mg, 50 mg, 100 mg, 500 mg

Amoxapine (Asendin)

Tablet: 25 mg, 50 mg, 100 mg, 150 mg

Amoxicillin (Amoxil, Polymox)

Capsule: 250 mg, 500 mg

Powder for oral suspension: 50 mg/mL, 125 mg/5 mL, 250 mg/5 mL

Tablet: 500 mg, 875 mg

Tablet, chewable: 125 mg, 250 mg

Amoxicillin/Clavulanate (Augmentin)

Tablet: 200 mg (contains 28.5 mg Clavulanate), 250 mg (contains 125 mg Clavulanate), 400 mg (contains 57 mg Clavulanate), 500 mg (contains 125 mg Clavulanate), 875 mg (contains 125 mg Clavulanate)

Tablet, chewable: 125 mg (contains 31.25 mg Clavulanate), 250 mg (contains 62.5 mg Clavulanate)

Amphetamine Mixture (Adderall, Adderall XR) CII

Capsule, extended release: 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg

Tablet: 5 mg, 10 mg

Ampicillin (Polycillin, Omnipen)

Capsule, as anhydrous: 250 mg, 500 mg

Capsule, as trihydrate: 250 mg, 500 mg

Powder for injection: 125 mg, 250 mg, 500 mg, 1 g, 2 g, 10 g

Powder for oral suspension, as trihydrate: 125 mg/5 mL, 250 mg/5 mL

Antipyrine/Benzocaine (Allergen, Auralgan)

Solution, otic

Aripiprazole (Abilify)

Tablet: 10 mg, 15 mg, 20 mg, 30 mg

Ascorbic Acid (Vitamin C)

Solution, oral: 100 mg/mL

Tablet: 250 mg, 500 mg

Tablet, chewable: 250 mg, 500 mg

Aspirin

Suppository, rectal: 300 mg, 600 mg

Tablet: 81 mg, 325 mg, 500 mg

Tablet, buffered: 325 mg with buffering agents

Tablet, chewable: 81 mg

Tablet, enteric coated: 81 mg, 325 mg, 500 mg, 650 mg, 975 mg

Atenolol (Tenormin)

Tablet: 25 mg, 50 mg, 100 mg

Atomoxetine (Strattera)

Capsule: 10 mg, 18 mg, 25 mg, 40 mg, 60 mg

Atorvastatin (Lipitor)

Tablet: 10 mg, 20 mg, 40 mg

Atropine Sulfate (Isopto Atropine)

Ointment, ophthalmic: 1%

Solution, ophthalmic: 1%

Attapulgate

Liquid, oral concentrate: 600 mg/15 mL, 750 mg/15 mL

Azithromycin (Zithromax)- RESERVE USE

Powder for oral solution: 200 mg/5 mL, 400 mg/5 mL

Tablet: 250 mg

Bacitracin (Baciguent)

Injection: 50,000 units
Ointment, ophthalmic: 500 units/g
Ointment, topical: 500 units/g

Bacitracin/Polymyxin B (Polysporin)

Ointment, ophthalmic: Bacitracin 500 units/Polymyxin B 10,000 units/g
Ointment, topical: Bacitracin 500 units/Polymyxin B 10,000 units/g
Powder, topical: Bacitracin 500 units/Polymyxin B 10,000 units/g

Baclofen (Lioresal)

Tablet: 10 mg, 20 mg

Beclomethasone (Vanceril, Beconase)

Spray, nasal: 0.084% (19 g) [120 metered doses]
Spray, nasal, aqueous: 42 mcg/inhalation (25 g) [≥ 200 metered doses], 84 mcg/inhalation (25 g) [≥ 200 metered doses]

Benazepril (Lotensin)

Tablet: 5 mg, 10 mg, 20 mg, 40 mg

Benzalkonium Chloride (Zephiran)

Concentrate, topical: 17%
Solution, topical, aqueous: 1:750
Spray, topical: 1:750

Benzocaine (Lanacaine)

Topical, for mucous membranes:
Gel: 6%, 20%
Liquid: 20%
Topical, dermatologic:
Cream, topical: 5%, 6%
Lotion: 8%
Ointment: 5%
Spray: 5%, 20%
Mouth/Throat preparations:
Gel: 6.3%, 7.5%, 10%, 15%, 20%
Liquid: 5%, 6.3%, 10%, 20%
Lozenges: 5 mg, 6 mg, 10 mg, 15 mg
Ointment: 20%

Benzoic and Salicylic Acids (Whitfield's)

Ointment, topical: 6% Benzoic acid/3% Salicylic acid

Benzoin, Compound Tincture

Tincture, topical (also contains aloe, storax, tolu balsam, 74% to 80% alcohol): 30 mL, 60 mL, 120 mL, 480 mL, 4000 mL

Benzoyl Peroxide

Bar: 5%, 10%
Cream, topical: 5%, 10%
Gel, topical: 2.5%, 5%, 10%, 20%
Liquid, topical: 5%, 10%
Lotion: 5%, 5.5%, 10%

Benzoyl Peroxide/Clindamycin (BenzaClin)

Gel, topical: Benzoyl Peroxide 5%/Clindamycin 1%

Benzotropine (Cogentin)

Injection: 1 mg/mL
Tablet: 0.5 mg, 1 mg, 2 mg

Betamethasone Valerate (Valisone)

Cream, topical: 0.01%, 0.1%
Lotion: 0.1%
Ointment, topical: 0.1%

Betaxolol (Betoptic S)

Solution, ophthalmic: 0.5%
Suspension, ophthalmic: 0.25%

Bethanechol (Urecholine)

Injection: 5 mg/mL
Tablet: 5 mg, 10 mg, 25 mg, 50 mg

Bimatoprost (Lumigan)

Solution, ophthalmic: 0.03%

Biperiden (Akineton)

Injection: 5 mg/mL
Tablet: 2 mg

Bisacodyl (Dulcolax)

Suppository, rectal: 10 mg
Tablet, enteric coated: 5 mg

Bismuth Subsalicylate (Pepto-Bismol, Bismatrol, Kaopectate)

Liquid, oral: 262mg/15 mL
Tablet, chewable: 262 mg

Brimonidine (Alphagan)

Solution, ophthalmic: 0.15%, 0.2%

Bromocriptine (Parlodel)

Capsule: 5 mg

Tablet: 2.5 mg

Brompheniramine/Pseudoephedrine (Bromfed)

Capsule: 12 mg Brompheniramine/120 mg Pseudoephedrine

Elixir: 4 mg Brompheniramine/30 mg Pseudoephedrine

Syrup: 2 mg Brompheniramine/30 mg Pseudoephedrine

Tablet: 4 mg Brompheniramine/60 mg Pseudoephedrine

Bupivacaine (Marcaine)

Injection: 0.25%, 0.5%, 0.75%

buPROPion (Wellbutrin, Wellbutrin SR, Wellbutrin XL)

Tablet: 75 mg, 100 mg

Tablet, extended release: 150 mg, 300 mg

Tablet, sustained release: 100 mg, 150 mg

busPIRone (BuSpar)

Tablet: 5 mg, 10 mg

Calamine/Zinc Oxide/Glycerin (Calamine Lotion)

Lotion, topical: 120 mL, 240 mL, 480 mL

Calamine/Pramoxine (Caladryl)

Lotion, topical: 180 mL

Calcipotriene (Dovonex)

Cream, topical: 0.005%

Ointment, topical: 0.005%

Calcitonin-Salmon (Miacalcin)

Nasal spray: 200 IU/activation

Calcium Carbonate (Os-Cal, Titalac) [40% elemental calcium]

Liquid, oral: 500 mg/5 mL, 1000 mg/5 mL

Tablet: 600 mg, 1250 mg, 1500 mg

Tablet, chewable: 350 mg, 500 mg, 550 mg, 750 mg, 850 mg, 1000 mg

Calcium Citrate (Citracal) [21% elemental calcium]

Tablet: 200 mg, 250 mg

Calcium Carbonate/Vitamin D (Oscal + D)

Tablet: Calcium 250 mg/Vitamin D 125 IU, Calcium 500 mg/Vitamin D 125 IU

Calcium Glubionate (Neo-Calglucon) [6% elemental calcium]

Syrup: 1.8 g/5 mL

Calcium Gluconate [9% elemental calcium]

Injection: 10% [100 mg/mL]

Tablet: 500 mg, 650 mg, 975 mg, 1g

Calcium Undecylenate (Caldesene)

Powder, topical: 10%

Camphor-Phenol (Campho-Phenique)

Liquid, topical: 10.8% Camphor/4.7% phenol [with eucalyptus oil and mineral oil]

Captopril (Capoten)

Tablet: 12.5 mg, 25 mg, 50 mg, 100 mg

Carbamazepine (Tegretol, Tegretol XR, Carbatrol)

Capsule, extended release: 200 mg, 300 mg

Suspension, oral: 100 mg/5 mL

Tablet: 200 mg

Tablet, chewable: 100 mg

Tablet, extended release: 100 mg, 200 mg, 400 mg

Carbamide Peroxide/Glycerin/Propylene Glycol/Sodium Stannate (Debrox, Gly-Oxide)

Gel, oral: 10%

Solution, oral: 10%, 15%

Solution, otic: 6.5%

Carboxymethylcellulose/Electrolytes (Saliva Substitute, Moi-Stir, Salivart, MouthKote, Salix)

Solution, oral

Cascara Sagrada (Cascara Aromatic)

Aromatic fluid extract: 120 mL, 473 mL

Tablet: 325 mg

Cefazolin (Kefzol, Ancef)

Injection: 500 mg, 1 g

Powder for injection: 250 mg, 500 mg, 1 g, 5 g, 10 g, 20 g

Cefoperazone (Cefobid)

Infusion, premixed in dextrose: 1 g, 2 g

Powder for injection: 1 g, 2 g

Ceftriaxone (Rocephin)

Infusion, premixed in dextrose: 1 g, 2 g

Powder for injection: 250 mg, 500 mg, 1 g, 2 g, 10 g

Cefuroxime Axetil (Ceftin) - Oral form only - RESERVE USE

Powder for oral suspension: 125 mg/5 mL, 250 mg/5 mL

Tablet: 125 mg, 250 mg, 500 mg

Cellulose (Unifiber)

Powder, oral: 150 g, 270 g, 480 g

Cephalexin (Keflex)

Capsule: 250 mg, 500 mg

Powder for oral suspension: 100 mg/mL, 125 mg/5 mL, 250 mg/5 mL

Tablet: 250 mg, 500 mg, 1 g

Tablet: 500 mg

Cetylpyridinium (Cepacol)

Lozenges: 0.07% Cetylpyridinium/0.3% Benzyl Alcohol [with tartrazine]

Mouthwash: 0.05% Cetylpyridinium/14% Alcohol [with tartrazine]

Troches: 0.07% Cetylpyridinium/10 mg Benzocaine [with tartrazine]

Chloral Hydrate (Noctec) C-IV

Capsule: 500 mg

Suppository, rectal: 324 mg, 500 mg

Syrup: 250 mg/5 mL, 500 mg/5 mL

Chlordiazepoxide (Librium) - oral form only - C-IV

Capsule: 5 mg, 10 mg, 25 mg

Tablet: 5 mg, 10 mg, 25 mg

Chlorhexidine (Peridex, Hibiclens, Bactoshield)

Foam, topical, with 4% isopropyl alcohol: 4%

Liquid, topical, with 4% isopropyl alcohol: 2%, 4%

Rinse, oral, with 12% alcohol: 0.12%

Chloroquine (Aralen)

Tablet: 250 mg, 500 mg

Chlorpheniramine (Chlor-Trimeton, Teldrin)

Capsule: 12 mg

Syrup: 2 mg/5 mL

Tablet: 4 mg, 8 mg, 12 mg

Tablet, chewable: 2 mg

Tablet, timed release: 8 mg, 12 mg

chlorproMAZINE (Thorazine)

Concentrate, oral: 30 mg/mL, 100 mg/mL

Injection: 25 mg/mL

Syrup: 10 mg/5 mL

Tablet: 10 mg, 25 mg, 50 mg, 100 mg, 200 mg

chlorproPAMIDE (Diabinese)

Tablet: 100 mg, 250 mg

Chlorthalidone (Hygroton)

Tablet: 15 mg, 25 mg, 50 mg, 100 mg

Cholestyramine (Questran)

Powder, oral: 4 gm resin/9 gm powder

Powder for oral suspension (with aspartame): 4 gm resin/5 gm powder

Powder for oral suspension (with phenylalanine): 4 gm resin/5.5 gm powder

Tablet: 1 gm

Ciprofloxacin (Cipro, Ciloxan)

Injection: 200 mg, 400 mg

Solution, ophthalmic: 0.3%

Suspension, oral: 5 gm/100 mL, 10 gm/100 mL

Tablet: 100 mg, 250 mg, 500 mg, 750 mg

Ciprofloxacin/Hydrocortisone (Cipro Otic)

Solution, otic: Ciprofloxacin 2 mg/Hydrocortisone 10 mg per mL

Citalopram (Celexa)

Tablet: 20 mg, 40 mg

Clarithromycin (Biaxin) - RESERVE USE

Granules for oral suspension: 125 mg/5 mL, 250 mg/5 mL

Tablet, film coated: 250 mg, 500 mg

Clindamycin (Cleocin, Cleocin T)

Capsule: 75 mg, 150 mg, 300 mg

Gel, topical: 1% [10 mg/g]

Granules for oral solution: 75 mg/5 mL

Injection: 150 mg/mL

Lotion: 1% [10 mg/mL]

Solution, topical: 1% [10 mg/mL]

Clobetasol (Temovate) - RESERVE USE

Cream, topical: 0.05%

Cream, topical, in emollient base: 0.05%

Gel, topical: 0.05%

Ointment, topical: 0.05%

Scalp application: 0.05%

clomiPRAMINE (Anafranil) - for Obsessive Compulsive Disorder

Capsule: 25 mg, 50 mg, 75 mg

Clonazepam (Klonopin) C-IV

Tablet: 0.5 mg, 1 mg, 2 mg

Clonidine (Catapres)

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

Tablet: 0.1 mg, 0.2 mg, 0.3 mg

Clopidogrel (Plavix) - RESERVE USE

Tablet: 75 mg

Clorazepate (Tranxene, Tranxene SD) C-IV

Capsule: 3.75 mg, 7.5 mg, 15 mg

Tablet: 3.75 mg, 7.5 mg, 15 mg

Tablet, sustained release: 11.25 mg, 22.5 mg

Clotrimazole (Lotrimin, Mycelex, Gyne-Lotrimin, Fungoid)

Cream, topical: 1%

Cream, vaginal: 1%, 2%

Lotion: 1%

Solution, topical: 1%

Suppository, vaginal: 100 mg, 200 mg

Tablet, vaginal: 100 mg, 500 mg

Troche: 10 mg

Cloxacillin (Cloxapen, Tegopen)

Capsule: 250 mg, 500 mg

Powder for oral suspension: 125 mg/5 mL

Clozapine (Clozaril) - RESERVE USE

Tablet: 25 mg, 100 mg

Coal Tar (Ionil-T, Tegrin)

Liquid, topical: 30%

Shampoo: 1%

Solution, topical: 120 mL, 480 mL

Cod Liver Oil/Zinc Oxide/Talc (Desitin)

Ointment, topical: 40% Zinc Oxide [with Cod Liver Oil, Talc, Petrolatum, Lanolin, and Methylparaben]

Colchicine

Tablet: 0.5 mg, 0.6 mg

Collagenase (Santyl)

Ointment, topical: 250 units/g

Corticotropin (ACTH)

Injection, repository: 40 units/mL, 80 units/mL
Powder for injection: 25 units, 40 units

Cortisone

Injection: 50 mg/mL
Tablet: 5 mg, 10 mg, 25 mg

Cromolyn (Intal)

Inhalation, oral: 800 mcg/spray
Solution, nebulizing: 10 mg/mL
Solution, nasal: 40 mg/mL
Solution, ophthalmic: 4%

Crotamiton (Eurax)

Cream: 10%
Lotion: 10%

Cyanocobalamin (Vitamin B₁₂)

Injection: 1000 mcg/mL
Tablet: 100 mcg, 250 mcg, 500 mcg, 1000 mcg

Cyproheptadine (Periactin)

Syrup: 2 mg/5 mL with 5% alcohol
Tablet: 4 mg

Dantrolene (Dantrium)

Capsule: 25 mg, 50 mg, 100 mg
Powder for injection: 20 mg

Deferoxamine (Desferal)

Powder for injection: 500 mg

Delavirdine (DLV, Rescriptor)

Tablet: 100 mg

Desipramine (Norpramin, Pertofrane)

Capsule: 25 mg, 50 mg
Tablet: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg

Desmopressin (DDAVP, Stimate)

Solution, nasal: 100 mcg/mL, 1.5 mg/mL

Dexamethasone (Decadron)

Injection, as sodium phosphate: 4 mg/mL, 10 mg/mL, 20 mg/mL, 24 mg/mL
Solution, oral: 0.5 mg/5 mL
Suspension, ophthalmic: 0.1% with methylcellulose 0.5% - **RESERVE USE**
Tablet: 0.25 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg

Dextran (Gentran, LMD, Macrodex, Rheomacrodex)

High molecular weight: 6% Dextran 75 in D5W, 6% Dextran 75 in NS, 6% Dextran 70 in NS
Low molecular weight: 10% Dextran 40 in D5W, 10% Dextran 40 in NS

Dextroamphetamine (Dexedrine)

Capsule, sustained release: 5 mg, 10 mg, 15 mg
Tablet: 5 mg, 10 mg (5 mg tablet contain tartrazine)

Dextromethorphan

Capsule: 30 mg
Liquid, oral: 3.5 mg/5 mL, 7.5 mg/5 mL, 10 mg/15 mL, 15 mg/5 mL
Liquid, oral, sustained release: 30 mg/5 mL
Lozenges: 2.5 mg, 5 mg, 7.5 mg

Dextrose/Sodium Chloride Intravenous Solution

Dextrose 5% in 0.2% Sodium Chloride
Dextrose 5% in 0.45% Sodium Chloride
Dextrose 5% in 0.9% Sodium Chloride

Dextrose 5%/Sodium Chloride/Potassium Chloride Intravenous Solution

Dextrose 5%/Sodium Chloride 0.2%/Potassium Chloride
Infusion with Potassium Chloride: 10 mEq, 20 mEq
Dextrose 5%/Sodium Chloride 0.45%/Potassium Chloride
Infusion with Potassium Chloride: 10 mEq, 20 mEq, 40 mEq
Dextrose 5%/Sodium Chloride 0.9%/Potassium Chloride
Infusion with Potassium Chloride: 20 mEq, 40 mEq

Dextrose 5% in Water

Infusion

Dextrose 5% in Ringer's Lactate

Infusion

Dextrose 5% with Multiple Electrolytes (D5 E75, Baxter)

Infusion

Dextrose 50% in Water

Infusion: 500 mL, 1000 mL, 2000 mL
Syringe: 50 mL
Vials: 50 mL

Diaper Rash Ointment (Desitin, Diaperene, Vitamin A&D)

see *Cod Liver Oil/Zinc Oxide/Talc (Desitin)*

see *Vitamin A&D Ointment*

see *Zinc Oxide/Petrolatum/Imidazolidinyl Urea (Diaperene)*

Diaper Rash Powder (Mexsana)

Powder: contains kaolin, eucalyptus oil, camphor, corn starch, lemon oil, zinc oxide

Diazepam (Valium, Diastat) C-IV

Gel, rectal: 2.5 mg, 5 mg, 10 mg, 15 mg, 20 mg

Injection: 5 mg/mL

Solution, oral: 1 mg/mL, 5 mg/mL

Tablet: 2 mg, 5 mg, 10 mg

Dibucaine (Nupercainal)

Cream, topical: 0.5%

Ointment, topical: 1%

Dicloxacillin (Dycill, Dynapen, Pathocil)

Capsule: 125 mg, 250 mg, 500 mg

Powder for oral suspension: 62.5 mg/mL

Dicyclomine (Bentyl)

Capsule: 10 mg, 20 mg

Injection: 10 mg/mL

Syrup: 10 mg/5 mL

Tablet: 10 mg

Didanosine (ddl, Videx)

Powder for oral solution: 100 mg, 167 mg, 250 mg, 375 mg, 2 gm, 4 gm

Tablet, chewable: 25 mg, 50 mg, 100 mg, 150 mg, 200 mg

Digoxin (Lanoxin)

Capsule: 50 mcg, 100 mcg, 200 mcg

Elixir: 50 mcg/mL with 10% alcohol

Injection: 100 mcg/mL, 250 mcg/mL

Tablet: 125 mcg, 250 mcg, 500 mcg

Diltiazem (Cardizem)

Capsule, sustained release:

Cardizem CD: 120 mg, 180 mg, 240 mg, 300 mg

Cardizem SR: 60 mg, 90 mg, 120 mg

Dilacor XR: 180 mg, 240 mg

Tiazac: 120 mg, 180 mg, 240 mg, 300 mg, 360 mg

Tablet: 30 mg, 60 mg, 90 mg, 120 mg

Tablet, sustained release: 120 mg, 180 mg, 240 mg

Dimercaprol (B.A.L.)

Injection: 100 mg/mL

diphenhydrAMINE (Benadryl)

Capsule: 25 mg, 50 mg

Cream, topical: 1%, 2%

Injection: 50 mg/mL

Lotion: 1%

Syrup: 12.5 mg/5 mL

Tablet: 25 mg, 50 mg

Diphtheria & Tetanus Toxoids Adsorbed (DT)

Injection, single dose

Diphtheria & Tetanus Toxoids Adsorbed for Adult Use (Td)

Injection, single dose

Disulfiram (Antabuse)

Tablet: 250 mg, 500 mg

Divalproex (Depakote, Depakote ER, Divalproex ER)

Capsule, sprinkles: 125 mg

Tablet, delayed release: 125 mg, 250 mg, 500 mg

Tablet, extended release: 500 mg - **RESERVE USE**

Docusate Calcium (Surfak)

Capsule: 250 mg

Docusate Sodium (Colace, Doxinate)

Capsule: 100 mg, 250 mg

Liquid, oral: 150 mg/15 mL

Syrup: 60 mg/15 mL

Tablet: 100 mg

Docusate Sodium/Casanthrol (Peri-Colace)

Syrup, oral: Docusate 60 mg/Casanthrol 30 mg per 15 mL

Docusate Sodium/Sennosides (Peri-Colace)

Tablet: Docusate 50 mg/Sennosides 8.6 mg

Donepezil (Aricept) - RESERVE USE

Tablet: 5 mg, 10 mg

DOPamine (Intropin)

Infusion in D5W: 0.8 mg/mL, 1.6 mg/mL, 3.2 mg/mL

Injection: 40 mg/mL, 80 mg/mL, 160 mg/mL

Doxepin (Sinequan, Adapin)

Capsule: 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg
Concentrate, oral: 10 mg/mL

Doxycycline (Vibramycin, Periostat)

Capsule: 50 mg, 100 mg
Powder for injection: 100 mg, 200 mg
Powder for oral suspension: 25 mg/5 mL
Syrup: 50 mg/5 mL
Tablet: 20 mg, 50 mg, 100 mg

Emollient Lotion/Cream (Lubriderm, Allercreme, Keri Lotion, Cetaphil, Lac-Hydrin)

Lotion/Cream, topical

Emollient Ointment (Lanolin)

Ointment, topical

Enalapril (Vasotec)

Tablet: 2.5 mg, 5 mg, 10 mg, 20 mg

Enoxaparin (Lovenox)

Injection: 30 mg, 40 mg, 60 mg, 80 mg, 100 mg

Epinephrine (Adrenalin)

Auto-injector: 1:2000 [0.15 mg], 1:1000 [0.3 mg]
Injection: 1:100,000 [0.01 mg/mL], 1:10,000 [0.1 mg/mL], 1:1000 [1 mg/mL]

Ergocalciferol (Calciferol, Drisdol)

See *Vitamin D*

Erythromycin (Erythrocin)

Erythromycin base (Eryc, E-Mycin, Ery-Tab, E-Base, PCE):

Capsule, delayed release: 250 mg
Tablet, enteric coated: 250 mg, 333 mg, 500 mg
Tablet, film coated: 250 mg, 500 mg
Tablet, polymer coated particles: 333 mg, 500 mg

Erythromycin Ethylsuccinate (EryPed, E.E.S.):

Granules/Powder for oral suspension: 200 mg/5 mL, 400 mg/5 mL
Suspension, oral: 200 mg/5 mL, 400 mg/5 mL
Suspension, oral (drops): 100 mg/2.5 mL

Tablet: 400 mg

Tablet, chewable: 200 mg

Ointment, ophthalmic: 5%

Erythromycin/Benzoyl Peroxide (Benzamycin)

Gel, topical: Erythromycin 30 mg/Benzoyl Peroxide 50 mg per gram (with 16% alcohol)

Erythromycin Ethylsuccinate/Sulfisoxazole Suspension (Pediazole)

Suspension, oral: 200 mg/600 mg per 5 mL

Escitalopram (Lexapro)

Tablet: 10 mg, 20 mg

Estradiol (Estrace, Vivelle, Alora, Climara, Estraderm)

Cream, vaginal: 43 gm

Systems, transdermal: 0.025 mg, 0.0375 mg, 0.05 mg, 0.075 mg, 0.1 mg per 24 hr

Tablets: 0.5 mg, 1 mg, 2 mg

Estrogen/medroxyPROGESTERone (PremPro)

Tablet: Conjugated estrogen 0.625 mg/medroxyPROGESTERone 2.5 mg

Estrogens, Conjugated (Premarin)

Cream, vaginal: 0.625 mg/g

Injection: 25 mg

Tablet: 0.3 mg, 0.625 mg, 0.9 mg, 1.25 mg, 2.5 mg

Ethambutol (Myambutol)

Tablet: 100 mg, 400 mg

Ethinyl Estradiol/Norethindrone (Loestrin, Ortho-Novum 777)

Loestrin:

1/20: Ethinyl Estradiol 0.02 mg/Norethindrone 1 mg

1.5/30: Ethinyl Estradiol 0.03 mg/Norethindrone 1.5 mg

Ortho-Novum 777: Phase 1 (Ethinyl Estradiol 0.035 mg/Norethindrone 0.5 mg),

Phase 2 (Ethinyl Estradiol 0.035 mg/Norethindrone 0.75 mg), Phase 3

(Ethinyl Estradiol 0.035 mg/Norethindrone 1 mg)

Ethinyl Estradiol/Norgestrel (Ovral, Lo-Ovral)

Lo-Ovral: Ethinyl Estradiol 0.03 mg/Norgestrel 0.3 mg

Ovral: Ethinyl Estradiol 0.05 mg/Norgestrel 0.5 mg

Ethionamide

Tablet, sugar coated: 250 mg

Ethosuximide (Zarontin)

Capsule: 250 mg

Syrup: 250 mg/5 mL

Ethyl Chloride

Spray: 100 g, 105 mL, 120 mL, 270 mL

Famotidine (Pepcid)

Injection: 10 mg/mL

Powder for oral suspension: 40 mg/5 mL

Tablet: 10 mg, 20 mg, 40 mg

Felbamate (Felbatol) - RESERVE USE

Suspension, oral: 600 mg/5 mL

Tablet: 400 mg, 600 mg

Felodipine (Plendil)

Tablet, extended release: 2.5 mg, 5 mg, 10 mg

Fentanyl (Duragesic) C-II

Patch, transdermal: 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr

Ferrous Fumarate/Docusate Sodium (Ferro-Sequels)[contains 33% elemental iron]

Tablet, timed released: Ferrous fumarate 150 mg [50 mg]/Docusate Sodium 100 mg

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

Elixir with 5% alcohol: 220 mg/5 mL [18 mg/5 mL]

Tablet: 300 mg [60 mg], 325 mg [65 mg]

Fexofenadine (Allegra)

Capsule: 60 mg

Tablet: 30 mg, 60 mg, 180 mg

Fexofenadine/Pseudoephedrine (Allegra-D)

Tablet, extended release: 60 mg Fexofenadine/120 mg Pseudoephedrine

Flavoxate (Urispas)

Tablet, film coated: 100 mg

Fluconazole (Diflucan)

Tablet: 100 mg, 250 mg, 500 mg

Fludrocortisone (Florinef)

Tablet: 0.1 mg

Fluocinolone (Synalar)

Cream, topical: 0.01%, 0.025%

Ointment, topical: 0.025%

Shampoo: 0.01%

Solution, topical: 0.01%

Fluocinonide (Lidex)

Cream, topical: 0.05%
Gel, topical: 0.05%
Ointment, topical: 0.05%
Solution, topical: 0.05%

Fluorescein Sodium

Injection: 10%
Strip, ophthalmic: 1 mg

Fluoxetine (Prozac)

Capsule: 10 mg, 20 mg
Liquid, oral: 20 mg/5 mL
Tablet: 10 mg

Fluphenazine (Prolixin, Permitil)

Concentrate:
Permitil: 5 mg/mL with 1% alcohol
Prolixin: 5 mg/mL with 14% alcohol
Elixir: 2.5 mg/5 mL with 14% alcohol
Injection, as decanoate: 25 mg/mL
Injection, as hydrochloride: 2.5 mg/mL
Tablet: 1 mg, 2.5 mg, 5 mg, 10 mg

Fluticasone (Flonase, Flovent)

Aerosol, inhalation, oral: 44 mcg/actuation, 110 mcg/actuation, 220 mcg/actuation
Inhalation, nasal: 50 mcg/actuation

Fluvastatin (Lescol)

Capsule: 20 mg, 40 mg

Fluvoxamine (Luvox)

Tablet: 50 mg, 100 mg

Folic Acid (Folvite)

Tablet: 0.4 mg, 0.8 mg, 1 mg

Fosphenytoin (Cerebyx)

Injection: 100 Phenytoin Equivalents [PE]/2 mL, 500 PE/10 mL

Furosemide (Lasix)

Injection: 10 mg/mL
Solution, oral: 10 mg/mL, 40 mg/5 mL
Tablet: 20 mg, 40 mg, 80 mg

Gabapentin (Neurontin)

Capsule: 100 mg, 300 mg, 400 mg
Tablet: 600 mg, 800 mg

Galantamine (Reminyl)

Solution, oral: 4 mg/mL
Tablet, film coated: 4 mg, 8 mg, 12 mg

Gemfibrozil (Lopid)

Tablet, film coated: 600 mg

Gentamicin (Garamycin)

Infusion, premixed in D5W: 60 mg, 80 mg, 100 mg
Infusion, premixed in NS: 40 mg, 60 mg, 80 mg, 90 mg, 100 mg, 120 mg
Injection: 10 mg/mL, 40 mg/mL
Injection, intrathecal (preservative free): 2 mg/mL
Ointment, ophthalmic: 0.3% [3 mg/g]
Solution, ophthalmic: 0.3% [3 mg/mL]

glipiZIDE (Glucotrol)

Tablet: 5 mg, 10 mg
Tablet, extended release: 2.5 mg, 5 mg, 10 mg

Glucagon

Powder for injection: 1 mg

glyBURIDE (Micronase, DiaBeta)

Tablet: 1.25 mg, 2.5 mg, 5 mg
Tablet, micronized: 1.5 mg, 3 mg, 4.5 mg, 6 mg

Glycerin (Sani-Supp)

Suppository, rectal

Griseofulvin (Fulvicin)

Microsize:
Capsule: 125 mg, 250 mg
Suspension, oral: 125 mg/5 mL with 0.2% alcohol
Tablet: 250 mg, 500 mg
Ultramicrosize:
Tablet: 125 mg, 165 mg, 250 mg, 330 mg

Guaifenesin (Robitussin)

Caplet, sustained release: 600 mg
Liquid, oral: 100 mg/5 mL, 200 mg/5 mL
Tablet: 100 mg, 200 mg
Tablet, sustained release: 600 mg

Guaifenesin/Dextromethorphan (Robitussin DM)

Liquid, oral: Guaifenesin 100 mg/Dextromethorphan 100 mg per 5 mL

Guaifenesin/Pseudoephedrine (Entex PSE)

Tablet: Guaifenesin 600 mg/Pseudoephedrine 120 mg

Guanethidine (Ismelin)

Tablet: 10 mg, 25 mg

Haloperidol (Haldol)

Concentrate, oral: 2 mg/mL

Injection, as decanoate: 50 mg/mL, 100 mg/mL

Injection, as lactate: 5 mg/mL

Tablet: 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg

Heparin

Injection: 100 units/mL, 1,000 units/mL, 10,000 units/mL, 20,000 units/mL

Hepatitis A Vaccine (Vaqta)

Injection, single dose

Hepatitis B Immune Globulin (HBIG)

Injection, single dose

Hepatitis B Virus Vaccine, Recombinant (Recombivax HB, Engerix-B)

Injection: 5 mcg/mL, 10 mcg/mL, 20 mcg/mL

Hexachlorophene (pHisoHex)

Foam: 0.23% with 56% alcohol

Liquid, topical: 3%

Homatropine (Isopto Homatropine)

Solution, ophthalmic: 2%, 5%

hydrALAZINE (Apresoline)

Tablet: 10 mg, 25 mg, 50 mg, 100 mg

Hydrochlorothiazide (HydroDIURIL, Esidrix)

Solution, oral: 50 mg/5 mL

Tablet: 25 mg, 50 mg, 100 mg

Hydrocodone/Guaifenesin (Hycotuss, Kwelcof)

Liquid, oral: Hydrocodone 5 mg/Guaifenesin 100 mg per 5 mL

Hydrocortisone

Injection, as sodium succinate: 100 mg, 250 mg, 500 mg, 1000 mg
Suppositories, rectal, as acetate: 10 mg, 25 mg
Suspension, oral, as cypionate: 10 mg/5 mL

Hydrocortisone base:

Cream, rectal: 1%, 2.5%

Tablet, oral: 5 mg, 10 mg, 20 mg

Hydrocortisone, topical (Lanacort, Corticaine):

Cream, topical: 0.1%, 0.2%, 0.5%, 1%, 2.5%

Lotion, topical: 0.25%, 0.5%, 1%, 2%, 2.5%

Ointment, topical: 0.1%, 0.2%, 0.5%, 1%, 2.5%

Solution, topical: 0.1%

Hydrogen Peroxide

Solution, topical: 3%

hydrOXYzine (Atarax)

Injection, as hydrochloride: 25 mg/mL, 50 mg/mL

Syrup, as hydrochloride: 10 mg/5 mL

Tablet, as hydrochloride: 10 mg, 25 mg, 50 mg, 100 mg

Ibuprofen (Motrin)

Suspension, oral: 40 mg/mL, 100 mg/5 mL

Tablet: 200 mg, 400 mg, 600 mg, 800 mg

Tablet, chewable: 50 mg, 100 mg

Imipramine (Tofranil)

Capsule: 75 mg, 100 mg, 125 mg, 150 mg

Tablet: 10 mg, 25 mg, 50 mg

Indinavir (Crixivan)

Capsule: 400 mg

Influenza Virus Vaccine (Fluzone, Fluviron)

Injection, single dose

Insulin, Combination (70/30)

Injection: 100 units/mL

Insulin, Glargine (Lantus)

Injection: 100 units/mL

Insulin, Lente

Injection: 100 units/mL

Insulin, Lispro (Humalog)

Injection: 100 units/mL

Insulin, Lispro/Insulin, Lispro Protamine (Humalog Mix 75/25)

Injection: 100 units/mL

Insulin, NPH

Injection: 100 units/mL

Insulin, Regular

Injection: 100 units/mL

Insulin, Ultralente

Injection: 100 units/mL

Ipecac Syrup

Syrup: 70 mg/mL

Ipratropium (Atrovent)

Inhalation: 18 mcg/actuation

Solution, nasal: 0.03%, 0.06%

Solution, nebulizing: 0.02%

Iron Dextran Complex (Imferon)

Injection: 50 mg/mL

Isoniazid (INH)

Injection: 100 mg/mL

Syrup: 50 mg/5 mL

Tablet: 50 mg, 100 mg, 300 mg

Isosorbide Dinitrate (Isordil, Sorbitrate)

Capsule, sustained release: 40 mg

Tablet, chewable: 5 mg, 10 mg

Tablet, oral: 5 mg, 10 mg, 20 mg, 30 mg, 40 mg

Tablet, sublingual: 2.5 mg, 5 mg, 10 mg

Tablet, sustained release: 40 mg

Isosorbide Mononitrate (Imdur, ISMO, Monoket)

Tablet: 10 mg, 20 mg

Tablet, extended release: 30 mg, 60 mg, 120 mg

Kaolin-Pectin

Suspension: 30 mL, 120 mL, 180 mL, 240 mL

Ketoconazole (Nizoral)

Cream, topical: 2%

Shampoo: 2%

Tablet: 200 mg

Ketorolac (Toradol)

Injection: 15 mg/mL, 30 mg/mL

Labetalol (Normodyne)

Tablet: 100 mg, 200 mg, 300 mg

Lactobacillus Acidophilus (Lactinex, Bacid)

Capsule

Granules: 1 g/packet

Tablet, chewable

Lactulose (Cephulac)

Syrup: 10 g/15 mL

Lamivudine (Epivir)

Solution, oral: 10 mg/mL

Tablet: 150 mg

Lamivudine/Zidovudine (Combivir)

Tablet: Lamivudine 150 mg/Zidovudine 300 mg

Lamotrigine (Lamictal)

Tablet: 25 mg, 100 mg, 150 mg, 200 mg

Lansoprazole (Prevacid)

Capsule, enteric coated granules: 15 mg, 30 mg

Granules for oral suspension: 15 mg, 30 mg

Latanoprost (Xalatan)

Solution, ophthalmic: 0.005%

Leucovorin (Wellcovorin)

Injection: 3 mg/mL

Powder for injection: 25 mg, 50 mg, 100 mg, 350 mg

Tablet: 5 mg, 10 mg, 15 mg, 25 mg

Levarterenol (Levophed)

see Norepinephrine

Levetiracetam (Keppra)

Tablets: 250 mg, 500 mg, 750 mg

Levodopa (Larodopa)

Capsule: 100 mg, 250 mg, 500 mg

Tablet: 100 mg, 250 mg, 500 mg

Levodopa/Carbidopa (Sinemet)

10/100: Carbidopa 10 mg/Levodopa 100 mg

25/100: Carbidopa 25 mg/Levodopa 100 mg

25/250: Carbidopa 25 mg/Levodopa 250 mg

Sustained release: Carbidopa 25 mg/Levodopa 100 mg, Carbidopa 50 mg/Levodopa 200 mg

Levofloxacin (Levaquin)

Infusion: 250 mg, 500 mg

Tablet: 250 mg, 500 mg

Levonorgestrel/Ethinyl Estradiol (Tri-Levlen, Triphasil)

Tablet: Phase I (Levonorgestrel 0.05 mg/Ethinyl Estradiol 30 mcg), Phase 2 (Levonorgestrel 0.075 mg/Ethinyl Estradiol 40 mg), Phase 3 (Levonorgestrel 0.125 mg/ Ethinyl Estradiol 30 mg)

Levothyroxine (Synthroid)

Powder for injection: 200 mcg/mL, 500 mcg/mL

Tablet: 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 112 mcg, 125 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg

Lidocaine (Xylocaine)

Cream, topical: 2%

Injection: 10%

Gel, topical: 2%, 2.5%

Liquid, topical: 2.5%

Liquid, viscous: 2%

Ointment, topical: 2.5%, 5%

Solution, topical: 2%, 4%

Lindane (Gamma Benzene Hexachloride, Kwell)

Cream, topical: 1%

Lotion: 1%

Shampoo: 1%

Liotrix (Thyrolar, Euthroid)

Tablet: 15 mg, 30 mg, 60 mg, 120 mg, 180 mg [thyroid equivalent]

Lisinopril (Prinivil, Zestril)

Tablet: 2.5 mg, 5 mg, 10 mg, 20 mg, 40 mg

Lithium Carbonate (Eskalith, Lithonate, Lithobid)

Capsule: 150 mg, 300 mg, 600 mg

Tablet: 300 mg

Tablet, controlled release: 450 mg

Tablet, slow release: 300 mg

Lithium Citrate

Syrup: 300 mg/5 mL

Loperamide (Imodium)

Capsule: 2 mg

Liquid, oral: 1 mg/5 mL

Tablet: 2 mg

Loratadine (Claritin)

Tablet: 10 mg

Lorazepam (Ativan) C-IV

Injection: 2 mg/mL, 4 mg/mL

Solution, oral: 2 mg/mL

Tablet: 0.5 mg, 1 mg, 2 mg

Loxapine (Loxitane)

Capsule: 5 mg, 10 mg, 25 mg, 50 mg

Concentrate, oral: 25 mg/mL

Injection: 50 mg/mL

Magnesium Citrate

Solution, oral: 300 mL

Magnesium Hydroxide (Milk of Magnesia)

Liquid, oral: 400 mg/5 mL

Liquid, oral, concentrate: 800 mg/5 mL

Tablet, chewable: 311 mg

Magnesium Sulfate (Epsom Salt)

Granules: ~40 mEq magnesium/5 g

Injection: 100 mg/mL, 125 mg/mL, 250 mg/mL, 500 mg/mL

Maprotiline (Ludiomil)

Tablet: 25 mg, 50 mg, 75 mg

Measles, Mumps and Rubella Virus Vaccine, Live (MMR II)

Injection, single dose

Mebendazole (Vermox)

Tablet, chewable: 100 mg

Meclizine (Antivert, Bonine)

Tablet: 12.5 mg, 25 mg, 50 mg

Tablet, chewable: 25 mg

medroxyPROGESTERone (Provera)

Injection, suspension: 100 mg/mL, 150 mg/mL, 400 mg/mL

Tablet: 2.5 mg, 5 mg, 10 mg

Mephobarbital (Mebaral) C-IV

Tablet: 32 mg, 50 mg, 100 mg

Mesalamine (Asacol, Pentasa, Rowasa)

Capsule, controlled release: 250 mg

Suppository: 500 mg

Suspension, rectal: 4 gm/60 mL

Tablet, delayed release: 400 mg

Mesoridazine (Serentil) - RESERVE USE

Injection: 25 mg/mL

Liquid, oral: 25 mg/mL

Tablet: 10 mg, 25 mg, 50 mg, 100 mg

Metaproterenol (Alupent)

Aerosol, oral: 0.65 mg/metered dose

Solution for inhalation: 0.4%, 0.6%, 5%

Metformin (Glucophage, Glucophage XR)

Tablet: 500 mg, 850 mg, 1000 mg

Tablet, extended release: 500 mg

Methadone (Dolophine) C-II

Solution, oral: 1 mg/mL

Tablet: 5 mg, 10 mg, 40 mg

Methimazole (Tapazole)

Tablet: 5 mg, 10 mg

Methocarbamol (Robaxin)

Tablet: 500 mg, 750 mg

Methotrexate

Injection: 2.5 mg/mL, 25 mg/mL

Injection, preservative free: 25 mg/mL

Powder for injection: 20 mg, 25 mg, 50 mg, 100 mg, 250 mg, 1 g

Tablet: 2.5 mg

Methylcellulose (Citrucel)

Powder: Methylcellulose 2 g per tbsp [with sucrose]

Powder, sugar free: Methylcellulose 2 g per tbsp [with phylalanine]

Methyldopa (Aldomet)

Injection: 50 mg/mL
Suspension, oral: 250 mg/5 mL
Tablet: 125 mg, 250 mg, 500 mg

Methylphenidate (Ritalin, Concerta)

Tablet: 5 mg, 10 mg, 20 mg
Tablet, extended release: 18 mg, 36 mg
Tablet, sustained release: 20 mg

Methylprednisolone (Medrol)

Injection, as acetate: 20 mg/mL, 40 mg/mL, 80 mg/mL
Injection, as sodium succinate: 40 mg, 125 mg, 500 mg, 1000 mg, 2000 mg
Tablet: 2 mg, 4 mg, 8 mg, 16 mg, 24 mg, 32 mg

Methyl Salicylate (Ben-Gay)

Cream, topical: 30%

methyITESTOSTERone (Android, Oreton) C-IV

Capsule: 10 mg
Tablet: 10 mg, 25 mg
Tablet, buccal: 5 mg, 10 mg

Metoclopramide (Reglan)

Injection: 5 mg/mL
Syrup, sugar free: 5 mg/5 mL
Tablet: 5 mg, 10 mg

Metoprolol (Lopressor)

Tablet: 50 mg, 100 mg
Tablet, sustained release: 50 mg, 100 mg, 200 mg

Metronidazole (Flagyl, Noritate, MetroGel)

Capsule: 375 mg
Cream, topical: 1%
Gel, topical: 0.75% [7.5 mg/mL]
Gel, vaginal: 0.75%
Injection: 5 mg/mL
Powder for injection: 500 mg
Tablet: 250 mg, 500 mg

Miconazole (Monistat)

Cream, topical: 2%
Cream, vaginal: 2%
Injection: 10 mg/mL
Lotion: 2%
Powder, topical: 2%
Spray, topical: 2%
Suppository, vaginal: 100 mg, 200 mg

Midazolam (Versed) C-IV

Injection: 1 mg/mL, 5 mg/mL

Mineral Oil - for topical use only

Oil: 480 mL

Mirtazapine (Remeron)

Tablet: 15 mg, 30 mg

Misoprostol (Cytotec)

Tablet: 100 mcg, 200 mcg

Molindone (Moban)

Concentrate, oral: 20 mg/mL
Tablet: 5 mg, 10 mg, 25 mg, 50 mg, 100 mg

Mometasone (Nasonex)

Inhalation, nasal: 50 mcg/actuation

Morphine C-II

Injection: 1 mg/mL, 2 mg/mL, 4 mg/mL, 10 mg/mL
Solution, oral: 20 mg/mL
Tablet, controlled release: 15 mg, 30 mg

Multivitamin (Unicap, Hexavitamins)

Liquid, oral: each solution contains a minimum of USDA requirements
Tablet: each tablet contains a minimum of USDA requirements
Tablet, chew: each tablet contains a minimum of USDA requirements

Multivitamin, Prenatal (Filibon)

Tablet: each tablet contains a minimum of USDA requirements

Multivitamin/Minerals

Liquid, oral: each solution contains a minimum of USDA requirements
Tablet: each tablet contains a minimum of USDA requirements
Tablet, chew: each tablet contains a minimum of USDA requirements

Multivitamins, Pediatric (Poly-Vi-Sol)

Liquid, oral: each solution contains a minimum of USDA requirements

Mupirocin (Bactroban)

Ointment, intranasal: 2%

Ointment, topical: 2%

Nabumetone (Relafen) - RESERVE USE

Tablet: 500 mg, 750 mg

Nadolol (Corgard)

Tablet: 20 mg, 40 mg, 80 mg, 120 mg, 160 mg

Nafcillin (Unipen)

Capsule: 250 mg

Powder for injection: 500 mg, 1 g, 2 g, 4 g, 10 g

Solution: 250 mg/5 mL

Tablet: 500 mg

Naloxone (Narcan)

Injection: 0.4 mg/mL, 1 mg/mL

Naltrexone (Trexan, ReVia)

Tablet: 50 mg

Naphazoline (Naphcon, AK-Con)

Solution, ophthalmic: 0.012%, 0.1%

Naproxen (Naprosyn)

Tablet: 220 mg, 250 mg, 275 mg, 375 mg, 500 mg, 550 mg

Tablet, controlled release: 500 mg

Nefazodone (Serzone)

Tablet: 50 mg, 100 mg, 150 mg, 200 mg, 250 mg

Nelfinavir (Viracept)

Powder for oral solution: 50 mg/g

Tablet: 250 mg

Neomycin (Mycifradin)

Tablet: 500 mg

Neomycin/Polymyxin B/Bacitracin (Triple Antibiotic Ointment)

Ointment, topical: Neomycin 3.5 mg/Polymyxin B 5000 units/Bacitracin 400 units

Neomycin/Polymyxin B/Hydrocortisone (Cortisporin)

Solution, otic: Neomycin 5 mg/Polymyxin B 10,000 units/Hydrocortisone 10 mg per mL

Suspension, otic: Neomycin 5 mg/Polymyxin B 10,000 units/Hydrocortisone 10 mg per mL

Nevirapine (NVP, Viramune)

Tablet: 200 mg

Niacin/Nicotinamide (Nicobid)

Capsule, extended release: 250 mg, 500 mg

Tablet: 50 mg, 100 mg, 250 mg, 500 mg

Tablet, extended release: 250 mg, 500 mg, 750 mg, 1000 mg

Nicotine (Nicoderm, Habitrol, ProStep, Nicotrol, Nicorette)

Patch, transdermal:

Habitrol: 21 mg/day, 14 mg/day, 7 mg/day

Nicoderm: 21 mg/day, 14 mg/day, 7 mg/day

Nicotrol: 15 mg/day (gradual release over 16 hours)

Pieces, chewing gum, as polacrilex: 2 mg/square, 4 mg/square

NIFEdipine (Procardia)

Capsule, liquid-filled: 10 mg, 20 mg

Tablet, sustained release: 30 mg, 60 mg, 90 mg

Nitrofurantoin (Macrochantin)

Capsule: 50 mg, 100 mg

Capsule, extended release: 100 mg

Capsule, macrocrystal: 25 mg, 50 mg, 100 mg

Capsule, macrocrystal/monohydrate: 100 mg

Suspension, oral: 25 mg/mL

Nitroglycerin

Capsule, sustained release: 2.5 mg, 6.5 mg, 9 mg, 13 mg

Ointment, topical 2%: 30 gm, 60 gm

Patch, transdermal, topical: systems designed to deliver 2.5 mg, 5 mg, 7.5 mg, 10 mg, or 15 mg over 24 hours

Spray, translingual: 0.4 mg/metered spray

Tablet, buccal, controlled release: 2 mg, 3 mg

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

Tablet, sustained release: 2.6 mg, 6.5 mg, 9 mg

Non-Soap Cleanser (Cetaphil)

Lotion

Norepinephrine or Levarterenol (Levophed)

Injection: 1 mg/mL

Norgestimate/Ethinyl Estradiol (Ortho Tri-Cyclen)

Tablet: 21 day, 28 day

Nortriptyline (Aventyl, Pamelor)

Capsule: 10 mg, 25 mg, 50 mg, 75 mg

Solution: 10 mg/5 mL

Nystatin (Mycostatin)

Cream, topical: 100,000 units/g

Ointment, topical: 100,000 units/g

Powder for oral suspension: 50 million units, 1 billion units, 2 billion units, 5 billion units

Powder, topical: 100,000 units/g

Suspension, oral: 100,000 units/mL

Tablet, oral: 500,000 units

Troche: 200,000 units

Olanzapine (Zyprexa, Zydys)

Tablet: 2.5 mg, 5 mg, 7.5 mg, 10 mg

Tablet, rapid dissolving: 5 mg, 10 mg

Olopatadine (Patanol)

Solution, ophthalmic: 0.1%

Omeprazole (Prilosec)

Capsule, delayed release: 10 mg, 20 mg, 40 mg

Ophthalmic Lubricant (HypoTears, HypoTears PF) [preservative-free, lanolin-free]

Ointment, ophthalmic: 3.5 gm

Solution, ophthalmic: 0.6 mL

Oxacillin (Prostaphlin)

Capsule: 250 mg, 500 mg

Powder for injection: 250 mg, 500 mg, 1 g, 2 g, 4 g, 10 g

Powder for oral solution: 250 mg/5 mL

Oxazepam (Serax) C-IV

Capsule: 10 mg, 15 mg, 30 mg

Tablet: 15 mg

Oxcarbazepine (Trileptal)

Tablet: 150 mg, 300 mg, 600 mg

Oxybutynin (Ditropan, Ditropan XL)

Syrup: 5 mg/5 mL

Tablet: 5 mg

Tablet, extended release: 5 mg, 10 mg, 15 mg

Oxycodone (OxyContin) C-II

Tablet, controlled release: 10 mg, 20 mg, 40 mg, 80 mg, 160 mg

Oxymetazoline (Afrin)

Solution, nasal, drops: 0.025%, 0.05%

Solution, nasal, spray: 0.05%

Pancrelipase (Pancrease, Creon)

Capsule: contains lipase, protease and amylase

Tablet: contains lipase, protease and amylase

Pantoprazole (Protonix)

Tablet: 40 mg, 20 mg

Paroxetine (Paxil)

Tablet: 10 mg, 20 mg, 30 mg, 40 mg

Tablet, controlled release: 12.5 mg, 25 mg, 37.5 mg, 50 mg

Penicillamine (Cuprimine)

Capsule: 125 mg, 250 mg

Tablet: 250 mg

Penicillin G Benzathine (Bicillin)

Injection: 300,000 units/mL, 600,000 units/mL

Penicillin G Benzathine/Penicillin G Procaine (Bicillin C-R)

Injection: Penicillin G Benzathine 150,000 units/Penicillin G Procaine 150,000 units,
Penicillin G Benzathine 900,000 units/Penicillin G Procaine 300,000 units

Penicillin G Procaine (Wycillin)

Injection (suspension): 300,000 units/mL, 500,000 units/mL, 600,000 units/mL

Penicillin G Sodium

Injection: 5 million units

Penicillin V Potassium (Pen-Vee K, V-Cillin K)

Powder for oral solution: 125 mg/5 mL, 250 mg/5 mL

Tablet: 125 mg, 250 mg, 500 mg

Pentamidine (Pentam) - RESERVE USE

Inhalation: 300 mg

Powder for injection: 300 mg

Permethrin (Elimite, NIX)

Cream, topical: 5%

Liquid, topical: 1%

Perphenazine (Trilafon)

Concentrate, oral: 16 mg/5 mL

Injection: 5 mg/mL

Tablet: 2 mg, 4 mg, 8 mg, 16 mg

Petrolatum, White (Vaseline)

Ointment, topical: 430 g

Phenazopyridine (Pyridium)

Tablet: 95 mg, 100 mg, 200 mg

Phenelzine (Nardil)

Tablet: 15 mg

Phenobarbital (Luminal) C-IV

Capsule: 16 mg

Elixir: 20 mg/5 mL

Injection: 30 mg/mL, 60 mg/mL, 65 mg/mL, 130 mg/mL

Tablet: 8 mg, 15 mg, 16 mg, 30 mg, 32 mg, 60 mg, 65 mg, 100 mg

Phenol (Chloraseptic)

Mouthwash/Gargle: 1.4%

Throat Spray: 0.5%

Phenylephrine (Neo-Synephrine)

Solution, nasal, drops: 0.125%, 0.25%, 0.5%

Solution, nasal, spray: 0.25%, 0.5%, 1%

Solution, ophthalmic: 2.5%, 10%

Phenytoin (Dilantin)

Capsule, extended release: 30 mg, 100 mg

Capsule, immediate release: 100 mg

Injection: 50 mg/mL

Suspension, oral: 125 mg/5 mL

Tablet, chewable: 50 mg

Physostigmine (Antilirium)

Injection: 1 mg/mL

Phytonadione (Vitamin K₁, Mephyton, Konakion)

Injection, aqueous colloidal: 2 mg/mL, 10 mg/mL

Injection, aqueous (IM only): 2 mg/mL, 10 mg/mL

Tablet: 5 mg

Pilocarpine (Isopto Carpine)

Solution, ophthalmic, as hydrochloride: 1%, 2%, 4%

Pneumococcal Vaccine, Polyvalent (Pneumovax)

Injection, single dose

Podophyllum Resin

Liquid, topical: 25% in benzoin

Poliovirus Vaccine, Inactivated (IPOL)

Injection, single dose

Polycarbophil (Fibercon, Fiber-Lax)

Tablet: 500 mg, 600 mg

Polyethylene Glycol (MiraLax)

Powder for oral solution

Polymyxin B/Bacitracin (Polysporin)

Ointment, ophthalmic: Polymyxin B 10,000 units/Bacitracin 500 units

Ointment, topical: Polymyxin B 10,000 units/Bacitracin 500 units

Powder, topical: Polymyxin B 10,000 units/Bacitracin 500 units

Polymyxin B/Neomycin (Neosporin)

Cream: Polymyxin B 10,000 units/Neomycin 3.5 mg

Polymyxin B/Trimethoprim (Polytrim)

Solution, ophthalmic: Polymyxin B 10,000 units/Trimethoprim 1 mg/mL

Potassium Chloride

Capsules: 8 mEq, 10 mEq

Crystals for oral suspension, extended release: 20 mEq/packet

Liquid, oral: 10% [20 mEq/15 mL], 15% [30 mEq/15 mL], 20% [40 mEq/15 mL]

Powder for oral suspension(per packet): 15 mEq, 20 mEq, 25 mEq

Injection, concentrate: 2 mEq/mL

Tablet, controlled release (microencapsulated): 750 mg [10 mEq], 1500 mg [20 mEq]

Tablet, controlled release (wax matrix): 500 mg [6.7 mEq], 600 mg [8 mEq], 750 mg [10 mEq]

Potassium Citrate (Urocit K)

Tablet: 5 mEq, 10 mEq

Potassium Citrate Combinations (Polycitra, Polycitra-LC, Polycitra K, Citrolith)

Solution, oral: containing Sodium Citrate /Potassium Citrate/Citric Acid

Solution, oral: containing Sodium Citrate/Potassium Citrate

Potassium Iodide (SSKI)

Solution, oral: 100 mg/mL, 1 g/mL

Povidone-Iodine (Betadine)

Cleanser, topical: 60 mL, 240 mL

Foam, topical: 10%

Liquid, topical: 473 mL

Ointment, topical: 10%

Solution, prep: 30 mL, 60 mL, 240 mL, 473 mL, 1000 mL, 4000 mL

Solution, swabsticks: 4"

Solution, topical: 10%

Pramoxine (Tronothane)

Cream, topical: 1%

Gel, topical: 1%

Lotion: 1%

Ointment, topical: 1%

Spray: 1%

Prazosin (Minipress)

Capsule: 1 mg, 2 mg, 5 mg

prednisoLONE (Delta-Cortef)

Injection, as sodium phosphate: 20 mg/mL

Liquid, oral: 5 mg/mL

Syrup: 15 mg/mL

Tablet: 5 mg

predniSONE (Meticorten, Deltasone)

Solution, oral, concentrate: 5 mg/mL with 30% alcohol

Syrup: 5 mg/5 mL

Tablet: 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg

Primidone (Mysoline)

Suspension, oral: 250 mg/5 mL

Tablet: 50 mg, 250 mg

Probenecid (Benemid)

Tablet: 500 mg

Procainamide (Pronestyl)

Capsule: 250 mg, 375 mg, 500 mg

Tablet: 250 mg, 375 mg, 500 mg

Tablet, sustained release: 250 mg, 500 mg, 750 mg, 1000 mg

Prochlorperazine (Compazine)

Injection: 5 mg/mL

Suppository, rectal: 2.5 mg, 5 mg, 25 mg

Syrup: 5 mg/5 mL

Tablet: 5 mg, 10 mg, 25 mg

Promethazine (Phenergan)

Injection: 25 mg/mL, 50 mg/mL
Suppository, rectal: 12.5 mg, 25 mg, 50 mg
Syrup: 6.25 mg/5 mL, 25 mg/5 mL
Tablet: 12.5 mg, 25 mg, 50 mg

Propantheline (Pro-Banthine)

Tablet: 7.5 mg, 15 mg

Proparacaine (Alcaine)

Solution, ophthalmic: 0.5%

Propranolol (Inderal)

Capsule, sustained release: 60 mg, 80 mg, 120 mg, 160 mg
Injection: 1 mg/mL
Solution, oral: 4 mg/mL, 8 mg/mL, 80 mg/mL
Tablet: 10 mg, 20 mg, 40 mg, 60 mg, 80 mg, 90 mg

Propylene Glycol Electrolyte Solution (PEG, Co-Lyte, GoLYTELY, OCL)

Powder for oral solution: 2000 mL, 4000 mL, 4800 mL, 6000 mL

Propylthiouracil

Tablet: 50 mg

Protamine

Injection: 10 mg/mL

Protriptyline (Vivactil)

Tablet: 5 mg, 10 mg

Pseudoephedrine (Sudafed)

Liquid, oral: 15 mg/5 mL, 30 mg/mL
Tablet, immediate release: 30 mg, 60 mg
Tablet, timed release: 120 mg
Tablet, extended release: 120 mg, 240 mg

Psyllium (Metamucil)

Granules: 4.03 g per rounded teaspoon, 2.5 g per rounded teaspoon
Powder, hydrophilic: 3.4 g per rounded teaspoon

Pyrantel (Antiminth)

Capsule: 180 mg
Liquid, oral: 50 mg/mL
Suspension, oral: 50 mg/mL

Pyrazinamide

Tablet: 500 mg

Pyrethins/Piperonyl Butoxide (A-200, RID)

Gel, topical: 0.3%

Liquid, topical: 0.18%, 0.3%

Shampoo: 0.3%, 0.33%

Pyridoxine (Vitamin B₆)

Injection: 100 mg/mL

Tablet: 25 mg, 50 mg, 100 mg

Quetiapine (Seroquel) – RESERVE USE

Tablet: 25 mg, 100 mg, 200 mg, 300 mg

Quinidine Gluconate

Tablet, sustained release: 324 mg

Quinidine Sulfate

Tablet: 200 mg, 300 mg

Tablet, sustained action: 300 mg

Raloxifene (Evista)

Tablet: 60 mg

Ranitidine (Zantac)

Injection: 25 mg/mL

Granules, effervescent: 150 mg

Syrup: 15 mg/mL

Tablet: 75 mg, 150 mg, 300 mg

Tablet, effervescent: 150 mg

Rectal Hemorrhoidal Cream with Hydrocortisone

Cream: see Hydrocortisone

Rectal Hemorrhoidal Ointment (Anusol)

Ointment

Rectal Hemorrhoidal Suppositories (Wyanoids, Anusol)

Suppository, rectal:

Rectal Hemorrhoidal Suppositories with Hydrocortisone (Anusol-HC)

Suppository, rectal: see Hydrocortisone

Repaglinide (Prandin)

Tablet: 0.5 mg, 1 mg, 2 mg

Rifampin (Rifadin)

Capsule: 150 mg, 300 mg

Injection: 600 mg

Rifampin/Isoniazid (Rifamate)

Capsule: Rifampin 300 mg/Isoniazid 150 mg

Ringer's Lactate Solution (Hartmann's Solution)

Infusion: 150 mL, 250 mL, 500 mL, 1000 mL

Risperidone (Risperdal, Risperdal Consta)

Injection, long acting: 25 mg/2 mL, 37.5 mg/2 mL, 50 mg/2 mL

Solution, oral: 1 mg/mL

Tablet: 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg

Tablet, orally disintegrating: 0.5 mg, 1 mg, 2 mg

Ritonavir (Norvir)

Capsule: 100 mg

Solution, oral: 80 mg/mL

Rivastigmine (Exelon) - RESERVE USE

Capsule: 1.5 mg, 3 mg, 4.5 mg, 6 mg

Rosiglitazone (Avandia)

Tablet: 2 mg, 4 mg, 8 mg

Rubella Virus Vaccine Live (Meruvax II)

Injection, single dose

Salicylic Acid

Cream, topical: 2%

Gel, topical: 5%, 6%, 17%

Liquid, topical: 13.6%, 16.7%, 17%

Lotion: 3%

Ointment, topical: 3%

Soap: 2%

Salmeterol (Serevent)

Aerosol, inhalation: 25 mcg/dose

Powder, inhalation: 50 mcg

Saquinavir (Invirase, Fortovase)

Capsule: 200 mg

Scopolamine (Isopto Hyoscine)

Solution, ophthalmic: 0.25%

Selenium Sulfide (Selsun)

Shampoo: 1%, 2.5%

Senna (Senokot)

Tablet: 8.6 mg, 25 mg

Sertraline (Zoloft)

Tablet: 25 mg, 50 mg, 100 mg

Sevelamer (Renagel)

Tablet: 400 mg, 800 mg

Silver Nitrate

Applicator sticks: 75% with potassium nitrate 25%

Ointment, topical: 10%

Solution, topical: 10%, 25%, 50%

Silver Sulfadiazine (Silvadene)

Cream, topical: 1%

Simethicone (Mylicon)

Drops, oral: 40 mg/0.6 mL

Tablet, chewable: 40 mg, 80 mg, 125 mg

Simvastatin (Zocor)

Tablet: 5 mg, 10 mg, 20 mg, 40 mg, 80 mg

Sodium Bicarbonate

Injection: 4.2% [5 mEq/10 mL], 8.4% [10 mEq/10 mL]

Sodium Chloride

Drops, nasal: 0.9%

Infusion: 0.2%, 0.45%, 0.9%, 3%, 5%, 20%, 23.4%

Injection, bacteriostatic: 0.9%

Injection, for admixtures: 50 mEq, 100 mEq, 635 mEq

Ointment, ophthalmic: 5%

Solution, irrigation: 0.45%, 0.9%

Solution, nasal: 0.4%, 0.6%, 0.65%

Solution, nebulizing: 0.9%

Solution, ophthalmic: 2%, 5%

Tablet: 650 mg, 1 g

Tablet, enteric coated: 1 g

Tablet, slow release: 600 mg

Sodium Chloride Intravenous Solution

Sodium Chloride 0.2%

Sodium Chloride 0.45%

Sodium Chloride 0.9%

Sodium Citrate/Citric Acid (Bicitra, Oracit)

Solution, oral:

Bicitra: Sodium Citrate 500 mg/Citric Acid 334 mg per 5 mL

Oracit: Sodium Citrate 400 mg/Citric Acid 640 mg per 5 mL

Sodium Fluoride

Liquid, oral: 360 mL, 480 mL, 540 mL

Tablet, chewable: 0.25 mg, 0.5 mg, 1 mg, 1.1 mg, 2.2 mg

Sodium Lactate

Injection: Sodium 167 mEq/Lactate 168 mEq per liter

Sodium Phosphate/Biphosphate (Fleet Phospho-Soda, Fleet's Enema)

Enema: Sodium Phosphate 7 g/Sodium Biphosphate 19 g per 118 mL

Injection: Phosphate 3 mmol and Sodium 4 mEq per mL

Solution, oral: Sodium Phosphate 18 g/Sodium Biphosphate 48 g per 100 mL

Sodium Polystyrene Sulfonate (Kayexalate)

Powder for suspension: 454 gm

Suspension, oral: 1.25 gm/5 mL (with sorbitol and alcohol)

Sorbitol

Solution, oral: 70%

Spirolactone (Aldactone)

Tablet: 25 mg, 50 mg, 100 mg

Spirolactone/Hydrochlorothiazide (Aldactazide)

Tablet: Spirolactone 25 mg/Hydrochlorothiazide 25 mg, Spirolactone 50 mg/
Hydrochlorothiazide 50 mg

Stannous Fluoride (OmniMed, PerioMed)

Solution, oral: 0.4%, 0.63%

Stavudine (d4T, Zerit)

Capsule: 15 mg, 20 mg, 30 mg, 40 mg

Solution, oral: 1 mg/mL

Sucralfate (Carafate)

Suspension, oral: 1 g/10 mL

Tablet: 1 g

Sulfacetamide Sodium (Sulamyd, Sebizon)

Lotion: 10%

Ointment, ophthalmic: 10%

Solution, ophthalmic: 10%

Sulfasalazine (Azulfidine)

Tablet: 500 mg

Tablet, delayed release: 500 mg

Sulfur/Resorcinol (Sulforcin, Rezamid)

Lotion: Sulfur 5%/Resorcinol 2% [with up to 28% alcohol]

Sulindac (Clinoril)

Tablet: 150 mg, 200 mg

Sumatriptan (Imitrex)

Injection: 12 mg/mL

Nasal Spray: 5 mg, 20 mg

Tablet: 25 mg, 50 mg, 100 mg

Sunscreen/block

Cream/Lotion: contains a minimum SPF of 15

Tamoxifen (Nolvadex)

Tablet: 10 mg, 20 mg

Tazarotene (Tazorac, Avage)

Cream, topical: 0.05%, 0.1%

Gel, topical: 0.05%, 0.1%

Temazepam (Restoril) C-IV

Capsule: 7.5 mg, 15 mg, 30 mg

Terbinafine (Lamisil)

Cream, topical: 1%

Tablet: 250 mg

Terbutaline (Brethine)

Aerosol, oral: 0.2 mg/actuation

Injection: 1 mg/mL

Tablet: 2.5 mg, 5 mg

Testosterone (Androlan) C-IV

Injection, in oil, as cypionate: 100 mg/mL, 200 mg/mL

Injection, in oil, as enanthate: 100 mg/mL, 200 mg/mL

Tetracycline (Achromycin, Panmycin)

Capsule: 100 mg, 250 mg, 500 mg

Suspension, oral: 125 mg/5 mL

Tablet: 250 mg, 500 mg

Tetrahydrozoline (Visine Allergy Relief, Visine Moisturizing)

Solution, ophthalmic: 0.05%

Theophylline (Elixophyllin)

Capsule, timed release (12 hour): 130 mg, 260 mg

Capsule, timed release (24 hour): 100 mg, 200 mg, 300 mg

Solution, oral: 80 mg/15 mL, 150 mg/15 mL

Tablet, immediate release [Slo-phyllin]: 100 mg, 125 mg, 200 mg, 250 mg, 300 mg

Tablet, timed release:

Theolair SR (8-12 hour): 100 mg, 200 mg, 250 mg, 300 mg, 500 mg

Theo-Dur (8-24 hour): 100 mg, 200 mg, 300 mg, 450 mg

Theophylline SR (12-24 hour): 100 mg, 200 mg, 300 mg

Uniphyl (24 hour): 400 mg

Thiabendazole (Mintezol)

Suspension, oral: 500 mg/5 mL

Tablet, chewable: 500 mg

Thiamine (Vitamin B₁)

Injection: 100 mg/mL, 200 mg/mL

Tablet: 50 mg, 100 mg, 250 mg, 500 mg

Thioridazine (Mellaril) - RESERVE USE

Concentrate, oral: 30 mg/mL, 100 mg/mL

Suspension, oral: 25 mg/5 mL, 100 mg/mL

Tablet: 10 mg, 15 mg, 25 mg, 50 mg, 100 mg, 150 mg, 200 mg

Thiothixene (Navane)

Capsule: 1 mg, 2 mg, 5 mg, 10 mg, 20 mg

Concentrate, oral: 5 mg/mL

Thyroid, Desiccated (Thyroid)

Capsule (pork source): 60 mg, 120 mg, 180 mg, 300 mg

Tablet:

Armour: 15 mg, 30 mg, 60 mg, 90 mg, 120 mg, 180 mg, 240 mg, 300 mg

Thyrar (bovine source): 30 mg, 60 mg, 120 mg

Thyroid Strong (60 mg is equivalent to 90 mg thyroid, USP)

Thyroid, USP: 15 mg, 30 mg, 60 mg, 120 mg, 180 mg, 300 mg

Tiagabine (Gabatril)

Tablet: 4 mg, 12 mg, 16 mg, 20 mg

Ticarcillin (Ticar)

Powder for injection: 1 g, 3 g, 6 g, 20 g, 30 g

Ticarcillin/Clavulanate (Timentin)

Powder for injection: 3.1 g

Timolol (Timoptic)

Gel, ophthalmic: 0.25%, 0.5%

Solution, as maleate, ophthalmic: 0.25%, 0.5%

Solution, as maleate, ophthalmic, preservative free, single use: 0.25%, 0.5%

Tablet: 5 mg, 10 mg, 20 mg

Timolol/Dorzolamide (Cosopt)

Solution, ophthalmic: Timolol 0.5%/Dorzolamide 2%

Tioconazole (Vagistat-1)

Ointment, vaginal: 6.5%

Tizanidine (Zanaflex) - RESERVE USE

Tablet: 4 mg

Tobramycin (Nebcin, Tobrex)

Injection: 10 mg/mL, 40 mg/mL

Ointment, ophthalmic: 0.3%

Powder for injection: 40 mg/mL

Solution, ophthalmic: 0.3%

Tobramycin/Dexamethasone (TobraDex) [contains Benzalkonium] - RESERVE USE

Ointment, ophthalmic: Tobramycin 0.3%/Dexamethasone 0.1%

Suspension, ophthalmic: Tobramycin 0.3%/ Dexamethasone 0.1%

TOLBUTamide (Orinase)

Injection, diagnostic: 1 g

Tablet: 250 mg, 500 mg

Tolnaftate (Tinactin)

Aerosol, topical, liquid: 1%

Aerosol, topical, powder: 1%

Cream, topical: 1%

Gel, topical: 1%

Powder, topical: 1%

Solution, topical: 1%

Tolterodine (Detrol, Detrol LA)

Capsule, extended release: 2 mg, 4 mg

Tablet: 1 mg, 2 mg

Topiramate (Topamax)

Tablet: 25 mg, 100 mg, 200 mg

Tramadol (Ultram)

Tablet: 50 mg

Tranlycypromine (Parnate)

Tablet: 10 mg

Travoprost (Travatan)

Solution, ophthalmic: 0.004%

Trazodone (Desyrel)

Tablet: 50 mg, 100 mg, 150 mg, 300 mg

Tretinoin Gel (Retin-A)

Cream, topical: 0.025%, 0.05%, 0.1%

Gel, topical: 0.01%, 0.025%, 0.1%

Liquid, topical: 0.05%

Triamcinolone (Aristocort, Kenacort, Azmacort, Nasacort)

Aerosol, oral, inhalation: 100 mcg/metered spray

Aerosol, topical: 0.2 mg/2 second spray

Cream, topical: 0.025%, 0.1%, 0.5%

Lotion, topical: 0.025%, 0.1%

Ointment, topical: 0.025%, 0.1%, 0.5%

Spray, intranasal: 55 mcg/actuation [100 sprays/canister]

Triamcinolone in Oral Adhesive Base (Kenalog in Orabase)

Paste: Triamcinolone 0.1%

Triamterene (Dyrenium)

Capsule: 50 mg, 100 mg

Triamterene/Hydrochlorothiazide (Dyazide, Maxzide)

Capsule (Dyazide): 37.5 mg Triamterene/25 mg Hydrochlorothiazide, 50 mg

Triamterene/25 mg Hydrochlorothiazide

Tablet (Maxzide): 37.5 mg Triamterene/25 mg Hydrochlorothiazide, 75 mg

Triamterene/50 mg Hydrochlorothiazide

Triazolam (Halcion) C-IV

Tablet: 0.125 mg, 0.25 mg

Trifluoperazine (Stelazine)

Concentrate, oral: 10 mg/mL

Injection: 2 mg/mL

Tablet: 1 mg, 2 mg, 5 mg, 10 mg

Trihexyphenidyl (Artane)

Capsule, sustained release: 5 mg

Elixir: 2 mg/5 mL

Tablet: 2 mg, 5 mg

Trimethobenzamide (Tigan)

Injection: 100 mg/mL

Suppository, rectal: 100 mg, 200 mg

Trimethoprim/Sulfamethoxazole (Co-Trimoxazole, Bactrim, Septra)

The 5:1 ratio of Sulfamethoxazole (SMX) to Trimethoprim (TMP) is constant in all dosage forms

Injection: 80 mg SMX/16 mg TMP per mL

Suspension, oral: 200 mg SMX/40 mg TMP per 5 mL

Tablet: 400 mg SMX/80 mg TMP, 800 mg SMX/160 mg TMP

Trimipramine (Surmontil)

Capsule: 25 mg, 50 mg, 100 mg

Tripolidine/Pseudoephedrine (Actifed)

Capsule, extended release: Tripolidine 5 mg/Pseudoephedrine 120 mg

Syrup: Tripolidine 1.25 mg/Pseudoephedrine 30 mg per 10 mL

Tablet: Tripolidine 2.5 mg/Pseudoephedrine 60 mg

Tropicamide (Mydracil)

Solution, ophthalmic: 0.5%, 1%

Trypsin/Balsam Peru/Castor Oil (Granulex)

Aerosol: Trypsin 0.1 mg/Balsam Peru 72.5 mg/Castor Oil 650 mg per 0.82 mL

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

Intermediate test strength: 5 TU/0.1 mL

Valproic Acid/Valproate (Depakene)

Capsule: 250 mg

Syrup: 250 mg/5 mL

Vancomycin (Vancocin)

Capsule: 125 mg, 250 mg

Powder for oral solution: 1 g, 10 g

Powder for injection: 500 mg, 1 g, 2 g, 5 g, 10 g

Varicella Virus Vaccine, Live (Varivax)

Injection, single dose

Venlafaxine (Effexor)

Capsule, sustained release: 37.5 mg, 75 mg, 150 mg

Tablet: 25 mg, 37.5 mg, 50 mg, 75 mg, 100 mg

Verapamil (Calan, Isoptin)

Capsule, sustained release: 120 mg, 180 mg, 240 mg, 360 mg

Injection: 2.5 mg/mL

Tablet: 40 mg, 80 mg, 120 mg

Tablet, sustained release: 120 mg, 180 mg, 240 mg

Vitamin A (Aquasol A)

Capsule: 10,000 units, 25,000 units, 50,000 units

Injection: 50,000 units/mL

Tablet: 5000 units

Vitamin A&D Ointment

Ointment, topical: 113 g

Vitamin B Complex/Vitamin C (Stresscaps, Allbee with C)

Capsule: each capsule contains a minimum of USDA requirements

Tablet: each tablet contains a minimum of USDA requirements

Vitamin B Complex/Vitamin C/Zinc

Tablet: each tablet contains a minimum of USDA requirements

Vitamin D (Ergocalciferol, Calciferol, Drisdol)

Drops, oral: 200 IU/drop

Vitamin E (Aquasol E)

Capsule: 100 units, 200 units, 400 units, 1000 units

Tablet: 200 units, 400 units

Warfarin (Coumadin)

Tablet: 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 7.5 mg, 10 mg

Water for Injection

Infusion: 250 mL, 500 mL, 1000 mL, 2000 mL, 3000 mL

Water for Irrigation

Solution, irrigation

Zafirlukast (Accolate)

Tablet: 20 mg

Zaleplon (Sonata)

Capsule: 5 mg, 10 mg

Zidovudine (AZT, Retrovir)

Capsule: 100 mg
Injection: 10 mg/mL
Syrup: 50 mg/5 mL
Tablet: 300 mg

Zinc Oxide

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

Ziprasidone (Geodon)

Capsule: 20 mg, 40 mg, 60 mg, 80 mg
Injection: 20 mg

Zinc Oxide/Petrolatum/Imidazolidinyl Urea (Diaperene)

Ointment, topical

Zinc Sulfate

Capsule: 220 mg [50 mg zinc]
Injection: 1 mg/mL, 5 mg/mL

Zinc Undecylenate (Desenex)

Cream, topical: 20%
Foam, topical: 10% [with 35.2% alcohol]
Ointment, topical: 30 gm
Powder, topical: 19%

Zolpidem (Ambien) C-IV

Tablet: 5 mg, 10 mg

Zonisamide (Zonegran)

Capsule: 100 mg

THERAPEUTIC CLASSIFICATION/COST INDEX

ANTIDIABETIC AGENTS

INSULINS, HUMAN

Insulin, Combination (70/30)	\$\$\$\$
Insulin, Glargine (Lantus)	\$\$\$\$\$\$\$
Insulin, Lente	\$\$\$\$
Insulin, Lispro (Humalog)	\$\$\$\$\$\$\$
Insulin, Lispro/Insulin, Lispro Protamine (Humalog Mix 75/25)	\$\$\$\$\$\$\$
Insulin, NPH	\$\$\$\$
Insulin, Regular	\$\$\$\$
Insulin, Ultralente	\$\$\$\$\$

SULFONYLUREAS

chlorproPAMIDE (Diabinese)	\$
glipiZIDE (Glucotrol)	\$
glyBURIDE (Micronase, DiaBeta)	\$\$
TOLBUTamide (Orinase)	\$\$

MISCELLANEOUS ANTIDIABETICS

Metformin (Glucophage, Glucophage XR)	\$\$
Repaglinide (Prandin)	\$\$ - \$\$\$
Rosiglitazone (Avandia)	\$\$-\$\$\$

GLUCOSE ELEVATING AGENTS

Dextrose 50% in Water	\$\$
Glucagon	\$\$\$\$\$\$\$

ANTIDOTES/DETERRENTS/POISON CONTROL AGENTS

Acetylcysteine (Mucomyst)	
Activated Charcoal	
Deferoxamine (Desferal)	
Dimercaprol (B.A.L.)	
Disulfiram (Antabuse)	
Glucagon	
Ipecac Syrup	
Leucovorin (Wellcovorin)	
Naloxone (Narcan)	\$\$ - \$\$
Naltrexone (Trexan, ReVia)	\$\$\$
Nicotine Polacrilex (Nicorette)	\$\$ - \$\$\$\$\$
Nicotine Transdermal Patch (Nicoderm, Habitrol, ProStep, Nicotrol)	\$\$\$
Penicillamine (Cuprimine)	
Physostigmine (Antilirium)	
Phytonadione (Vitamin K ₁ , Mephyton)	\$\$ - \$\$\$
Protamine	\$

ANTIHISTAMINES

Brompheniramine/Pseudoephedrine (Bromfed)	\$\$
Chlorpheniramine (Chlor-Trimeton, Teldrin)	\$ - \$
Cyproheptadine (Periactin)	\$
diphenhydrAMINE (Benadryl)	\$
Fexofenadine (Allegra)	\$\$
Fexofenadine/Pseudoephedrine (Allegra-D)	\$\$
hydrOXYzine (Atarax)	\$ - \$\$
Loratadine (Claritin)	\$\$
Promethazine (Phenergan)	\$\$
Triprolidine/Pseudoephedrine (Actifed)	\$

ANTINEOPLASTIC AGENTS

Methotrexate	
Tamoxifen (Nolvadex)	

BLOOD MODIFYING AGENTS

ANTIPLATELET

Aspirin	\$
Clopidogrel (Plavix) – RESERVE USE	\$\$\$

ANTICOAGULANT

Heparin	\$\$
Enoxaparin (Lovenox)	\$\$\$\$\$\$\$
Warfarin (Coumadin)	\$

ANTICOAGULATION ANTAGONIST

Phytonadione (Vitamin K ₁ , Mephyton)	\$\$ - \$\$\$
Protamine	\$

MISCELLANEOUS BLOOD MODIFYING AGENTS

Ferrous Fumarate/Docusate Sodium (Ferro-Sequels) [33% elemental iron]	\$\$
Ferrous Sulfate (Feosol, Fer-In-Sol) [20% elemental iron]	\$
Iron Dextran Complex (Imferon)	\$\$\$\$\$\$\$

CARDIOVASCULAR AGENTS

DIURETICS

Thiazides & Related Diuretics	
Chlorthalidone (Hygroton)	\$
Hydrochlorothiazide (HydroDIURIL, Esidrix)	\$
Loop Diuretics	
Furosemide (Lasix)	\$
Potassium-Sparing Diuretics	
Spironolactone (Aldactone)	\$
Triamterene (Dyrenium)	\$ - \$
Carbonic Anhydrase Inhibitors	
acetaZOLAMIDE (Diamox)	\$
Combination Diuretics	
Spironolactone/Hydrochlorothiazide (Aldactazide)	\$ - \$\$
Triamterene/Hydrochlorothiazide (Dyazide, Maxzide)	\$ - \$

CARDIAC GLYCOSIDES

Digoxin (Lanoxin)	\$
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ANTIANGINALS

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

ANTIARRHYTHMICS

Adenosine (Adenocard)	\$\$\$\$\$\$\$
Procainamide (Pronestyl)	\$ - \$
Quinidine Gluconate	\$
Quinidine Sulfate	\$ - \$\$\$

CALCIUM CHANNEL BLOCKERS

Amlodipine (Norvasc)	\$ - \$\$
Diltiazem (Cardizem)	\$ - \$\$
Felodipine (Plendil)	\$ - \$\$
NIFEdipine (Procardia)	\$ - \$\$\$
Verapamil (Calan, Isoptin)	\$ - \$\$

BETA-ADRENERGIC BLOCKERS

Atenolol (Tenormin)	\$
Labetalol (Normodyne)	\$ - \$\$
Metoprolol (Lopressor)	\$ - \$\$\$
Nadolol (Corgard)	\$ - \$\$\$
Propranolol (Inderal)	\$ - \$\$\$

ANTIHYPERLIPIDEMICS

Atorvastatin (Lipitor)	\$
Cholestyramine (Questran)	\$ - \$\$\$
Fluvastatin (Lescol)	\$
Gemfibrozil (Lopid)	\$
Niacin/Nicotinamide (Nicobid)	\$ - \$
Simvastatin (Zocor)	\$ - \$\$

ANGIOTENSIN CONVERTING ENZYME INHIBITORS

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

VASOPRESSORS

DOPamine (Intropin)	\$\$\$ - \$\$\$\$
Epinephrine (Adrenalin)	\$ - \$\$\$\$\$\$\$
Norepinephrine or Levarterenol (Levophed)	\$\$\$ - \$\$\$\$\$\$\$

MISCELLANEOUS ANTIHYPERTENSIVES

Clonidine (Catapres)	\$ - \$\$\$\$\$
Guanethidine (Ismelin)	\$\$ - \$\$
hydrALAZINE (Apresoline)	\$
Methyldopa (Aldomet)	\$ - \$\$\$\$\$
Prazosin (Minipress)	\$ - \$\$

MISCELLANEOUS CARDIOVASCULARS

Sodium Polystyrene Sulfonate (Kayexalate)	\$\$ - \$\$\$\$
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CENTRAL NERVOUS SYSTEM AGENTS

ANALGESICS

Nonsteroidal Anti-Inflammatory Agents

Aspirin	\$ - \$
Ibuprofen (Motrin)	\$ - \$\$
Ketorolac (Toradol)	\$\$\$\$ - \$\$\$\$\$
Nabumetone (Relafen) - RESERVE USE	\$\$
Naproxen (Naprosyn)	\$\$
Sulindac (Clinoril)	\$ - \$\$

Opiate Agonists

Fentanyl (Duragesic)	\$\$\$-\$\$\$\$
Methadone (Dolophine) C-II	\$ - \$\$\$\$
Morphine C-II	\$ - \$\$\$
Oxycodone (OxyContin)	\$\$ - \$\$\$\$\$

Miscellaneous Analgesics & Antipyretics

Acetaminophen (Tylenol)	\$ - \$\$
Acetaminophen/Codeine C-III	\$ - \$
Acetaminophen/Hydrocodone (Lortab, Vicodin)	\$\$ - \$\$
Tramadol (Ultram)	\$ - \$\$\$\$

ANTIEMETIC/ANTIVERTIGO AGENTS

diphenhydrAMINE (Benadryl)	\$
hydrOXYzine (Atarax)	\$ - \$\$
Meclizine (Antivert, Bonine)	\$
Metoclopramide (Reglan)	\$ - \$\$\$
Prochlorperazine (Compazine)	\$ - \$\$\$
Promethazine (Phenergan)	\$ - \$\$\$\$\$
Trimethobenzamide (Tigan)	\$\$

PSYCHOTROPIC AGENTS

Benzodiazepines

Alprazolam (Xanax) C-IV	\$ - \$
Chlordiazepoxide (Librium) <u>oral only</u> C-IV	\$
Clonazepam (Klonopin)	\$\$ - \$\$\$\$
Clorazepate (Tranxene) C-IV	\$ - \$\$
Diazepam (Valium) C-IV	\$
Lorazepam (Ativan) C-IV	\$ - \$\$\$
Oxazepam (Serax) C-IV	\$ - \$\$
Temazepam (Restoril) C-IV	\$
Triazolam (Halcion) C-IV	\$ - \$

Antidepressants

Monoamine Oxidase Inhibitors

Phenelzine (Nardil)	\$\$ - \$
Tranylcypromine (Parnate)	\$\$

Serotonin Selective Reuptake Inhibitors (SSRIs)

Citalopram (Celexa)	\$\$
Escitalopram (Lexapro)	\$\$
Fluoxetine (Prozac)	\$\$ - \$\$\$\$
Fluvoxamine (Luvox)	\$\$ - \$\$\$
Paroxetine (Paxil)	\$\$ - \$\$\$\$
Sertraline (Zoloft)	\$ - \$\$\$

Serotonin Norepinephrine Reuptake Inhibitors (SNRIs)

Venlafaxine (Effexor)	\$ - \$\$\$\$
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Tricyclic Agents

Amitriptyline (Elavil)	\$\$ - \$
clomiPRAMINE (Anafranil) - for OCD	\$ - \$\$\$
Desipramine (Norpramin, Pertofrane)	\$ - \$
Doxepin (Sinequan, Adapin)	\$ - \$\$
Imipramine (Tofranil)	\$
Nortriptyline (Aventyl, Pamelor)	\$ - \$\$
Protriptyline (Vivactil)	\$ - \$\$
Trimipramine (Surmontil)	\$ - \$\$\$

SEE "PSYCHOTROPIC DOSAGE GUIDELINES", PAGE 11

Miscellaneous Agents	
Amoxapine (Asendin)	\$ - \$\$
buPROPion (Wellbutrin, Wellbutrin SR, Wellbutrin XL)	\$\$ - \$\$\$
Maprotiline (Ludiomil)	\$ - \$
Mirtazapine (Remeron)	\$\$ - \$\$\$
Nefazodone (Serzone)	\$ - \$\$
Trazodone (Desyrel)	\$ - \$
Antipsychotics	
Aripiprazole (Abilify)	\$\$\$\$ - \$\$\$\$\$
chlorproMAZINE (Thorazine)	\$
Clozapine (Clozaril) - RESERVE USE	\$\$ - \$\$\$\$\$
Fluphenazine (Prolixin, Permitil)	\$ - \$\$\$
Fluphenazine Decanoate (Prolixin Decanoate)	\$\$ - \$\$\$\$
Haloperidol (Haldol)	\$
Haloperidol Decanoate (Haldol Decanoate)	\$\$ - \$\$\$\$
Loxapine (Loxitane)	\$ - \$\$\$
Mesoridazine (Serentil) - RESERVE USE	\$ - \$\$\$
Molindone (Moban)	\$ - \$\$\$
Olanzapine (Zyprexa, Zydys)	\$\$\$ - \$\$\$\$\$
Perphenazine (Trilafon)	\$\$ - \$\$
Quetiapine (Seroquel) - RESERVE USE	\$\$ - \$\$\$\$\$
Risperidone (Risperdal, Risperdal Consta)	\$\$ - \$\$\$\$\$
Thioridazine (Mellaril) - RESERVE USE	\$ - \$
Thiothixene (Navane)	\$ - \$
Trifluoperazine (Stelazine)	\$\$ - \$
Ziprasidone (Geodon)	\$\$\$\$
Mood Stabilizers	
Carbamazepine (Tegretol)	\$ - \$\$\$
Divalproex (Depakote)	\$\$ - \$\$\$
Lithium Carbonate (Eskalith, Lithonate, Lithobid)	\$
Lithium Citrate	\$\$ - \$\$
Valproate (Depakene)	\$\$ - \$\$
Stimulants	
Amphetamine Mixture (Adderall, Adderall XR) CII	\$\$ - \$\$
Atomoxetine (Strattera)	\$\$ - \$\$\$\$
Dextroamphetamine (Dexedrine) C-II (<u>Rarely used in adults</u>)	\$ - \$\$
Methylphenidate (Ritalin, Concerta) C-II (<u>Rarely used in adults</u>)	\$ - \$\$

SEE "PSYCHOTROPIC DOSAGE GUIDELINES", PAGE 11

Miscellaneous Psychotropic Agents

busPIRone (BuSpar)	\$\$ - \$\$\$\$
hydrOXYzine (Atarax)	\$
Naloxone (Narcan)	\$ - \$\$
Naltrexone (Trexan, ReVia)	\$\$\$ - \$\$\$\$\$

SEDATIVES AND HYPNOTICS

Barbiturates

Amobarbital (Amytal) C-II - RESERVE USE	\$\$\$\$
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Benzodiazepines

Alprazolam (Xanax)	\$ - \$
Clonazepam (Klonopin)	\$\$ - \$\$\$\$
Diazepam (Valium)	\$
Lorazepam (Ativan)	\$ - \$\$\$
Midazolam (Versed)	\$\$\$ - \$\$\$\$\$
Oxazepam (Serax)	\$
Temazepam (Restoril)	\$
Triazolam (Halcion)	\$ - \$

Miscellaneous Sedative and Hypnotics

Chloral Hydrate (Noctec) C-IV	\$ - \$\$
diphenhydrAMINE (Benadryl)	\$
Midazolam (Versed)	\$\$\$ - \$\$\$\$\$
Trazodone (Desyrel)	\$ - \$
Zaleplon (Sonata)	\$\$
Zolpidem (Ambien) C-IV	\$\$

ANTICONVULSANTS

Barbiturates

Mephobarbital (Mebaral) C-IV	\$ - \$\$
Phenobarbital (Luminal) C-IV	\$ - \$\$
Primidone (Mysoline)	\$\$ - \$\$

Benzodiazepines

Clonazepam (Klonopin) C-IV	\$\$ - \$\$
Clorazepate (Tranxene, Tranxene SD) C-IV	\$ - \$\$
Diazepam (Valium, Diastat) C-IV	\$ - \$\$\$\$\$\$
Lorazepam (Ativan) C-IV	\$ - \$\$\$

Hydantoins

Fosphenytoin (Cerebyx)	\$\$\$\$\$\$\$
Phenytoin (Dilantin)	\$\$ - \$\$

Succinimides

Ethosuximide (Zarontin)	\$ - \$\$\$
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Miscellaneous Anticonvulsants

Carbamazepine (Tegretol)	\$\$ - \$\$\$\$
Divalproex (Depakote)	\$\$ - \$\$\$\$
Felbamate (Felbatol) - RESERVE USE	\$\$ - \$\$\$\$
Gabapentin (Neurontin)	\$\$ - \$\$\$
Lamotrigine (Lamictal)	\$\$ - \$\$\$
Levetiracetam (Keppra)	\$\$\$-\$\$\$\$
Oxcarbazepine (Trileptal)	\$\$-\$\$\$\$
Tiagabine (Gabatril)	\$\$\$ - \$\$\$\$
Topiramate (Topamax)	\$\$\$ - \$\$\$\$
Valproate (Depakene)	\$ - \$\$\$\$
Zonisamide (Zonegran)	\$\$ - \$\$\$\$

MUSCLE RELAXANTS

Baclofen (Lioresal)	\$\$ - \$
Dantrolene (Dantrium)	\$\$ - \$\$\$\$
Diazepam (Valium) C-IV	\$ - \$\$
Methocarbamol (Robaxin)	\$ - \$\$\$
Tizanidine (Zanaflex) - RESERVE USE	\$\$

ANTIPARKINSON AGENTS

Amantadine (Symmetrel)	\$\$
Benzotropine (Cogentin)	\$ - \$\$\$\$
Biperiden (Akineton)	\$
Bromocriptine (Parlodel)	\$\$ - \$\$\$\$\$\$
Levodopa (Larodopa)	\$ - \$\$
Levodopa/Carbidopa (Sinemet)	\$\$ - \$\$\$\$
Trihexyphenidyl (Artane)	\$ - \$\$

AGENTS FOR MIGRAINE

Atenolol (Tenormin)	\$
Divalproex (Depakote, Depakote ER- RESERVE USE)	\$\$ - \$\$\$\$
Metoprolol (Lopressor)	\$ - \$\$
Nadolol (Corgard)	\$ - \$\$\$
Naproxen (Naprosyn)	\$\$
Propranolol (Inderal)	\$ - \$\$\$
Sumatriptan (Imitrex)	\$\$\$\$ - \$\$\$\$\$\$
Valproate (Depakene)	\$ - \$\$\$
Verapamil (Calan, Isoptin)	\$ - \$\$

MISCELLANEOUS CENTRAL NERVOUS SYSTEM AGENTS

Donepezil (Aricept) - RESERVE USE	\$\$\$
Galantamine (Reminyl)	\$\$\$
Rivastigmine (Exelon) - RESERVE USE	\$\$\$

ENDOCRINE AGENTS

ESTROGENS

Estradiol (Estrace, Vivelle, Alora, Climara, Estraderm)	\$ - \$\$\$\$\$\$
Estrogens, Conjugated (Premarin)	\$\$

PROGESTERONES

medroxyPROGESTERone (Provera)	\$ - \$\$
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COMBINATION PRODUCTS

Estrogen/medroxyPROGESTERone (PremPro)	\$\$
Ethinyl Estradiol/Norethindrone (Loestrin, Ortho-Novum 777)	\$\$\$\$\$\$
Ethinyl Estradiol/Norgestrel (Ovral, Lo-Ovral)	\$\$\$\$\$\$
Levonorgestrel/Ethinyl Estradiol (Tri-Levlen, Triphasil)	\$\$\$\$\$\$
Norgestimate/Ethinyl Estradiol (Ortho Tri-Cyclen)	\$\$\$\$\$\$

ANDROGENS

methylTESTOSTERone (Android, Oreton) C-IV	\$\$ - \$\$\$
Testosterone (Androlan) C-IV	\$\$ - \$\$\$

ADRENAL CORTICAL STEROIDS

Cortisone	\$ - \$\$
Dexamethasone (Decadron)	\$ - \$\$
Fludrocortisone (Florinef)	\$ - \$\$
Hydrocortisone	\$\$ - \$\$\$\$\$
Methylprednisolone (Medrol)	\$ - \$\$\$\$
prednisolONE (Delta-Cortef)	\$ - \$\$
predniSONE (Meticorten, Deltasone)	\$ - \$\$\$\$
Triamcinolone (Aristocort, Kenacort)	\$ - \$\$\$\$\$

THYROID AGENTS

Levothyroxine (Synthroid)	\$
Liotrix (Thyrolar, Euthroid)	\$\$
Methimazole (Tapazole)	\$\$ - \$\$
Propylthiouracil	\$
Thyroid, Desiccated (Thyroid)	\$

MISCELLANEOUS ENDOCRINE AGENTS

Alendronate (Fosamax)	\$\$
Allopurinol (Zyloprim)	\$
Calcitonin-Salmon (Miacalcin)	\$\$\$
Colchicine	\$
Corticotropin (ACTH)	\$\$\$\$
Desmopressin (DDAVP, Stimate)	\$\$\$ - \$\$\$\$
Probenecid (Benemid)	\$
Raloxifene (Evista)	\$\$

GASTROINTESTINAL AGENTS

ANTACIDS

Aluminum Hydroxide (Amphojel)	\$ - \$\$
Aluminum Hydroxide/Magnesium Trisilicate (Gaviscon)	\$ - \$\$
Aluminum Hydroxide/Magnesium Hydroxide (Maalox)	\$ - \$
Aluminum Hydroxide/Magnesium Hydroxide/ Simethicone (Mylanta, Aludrox)	\$ - \$
Calcium Carbonate (Os-Cal, Titalac) - 40% elemental calcium	\$

ANTISPASMODICS/ANTICHOLINERGIC AGENTS

Dicyclomine (Bentyl)	\$ - \$\$
Propantheline (Pro-Banthine)	\$ - \$\$

HISTAMINE (H₂) ANTAGONISTS

Preferred Agent: Famotidine (Pepcid)	\$ - \$\$\$\$
<i>Others:</i> Ranitidine (Zantac)	\$ - \$\$\$\$

PROTON PUMP INHIBITORS

Preferred Agent: Lansoprazole (Prevacid)	\$\$\$
Pantoprazole (Protonix) – price based on market share	\$\$ - \$\$\$
<i>Others:</i> Omeprazole (Prilosec)	\$\$\$

ANTIFLATULENTS

Simethicone (Mylicon)	\$ - \$\$
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STIMULANTS

Metoclopramide (Reglan)	\$ - \$\$
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LAXATIVES

Saline Laxatives

Magnesium Citrate	\$
Magnesium Hydroxide (Milk of Magnesia)	\$
Magnesium Sulfate (Epsom Salt)	\$\$
Sodium Phosphate/Biphosphate (Fleet Phospho-Soda, Fleet's Enema)	\$\$ - \$\$

Irritant/Stimulant Laxatives

Bisacodyl (Dulcolax)	\$
Cascara Sagrada (Cascara Aromatic)	\$
Senna (Senokot)	\$ - \$

Bulk Laxatives

Cellulose (Unifiber)	\$
Methylcellulose (Citrucel)	\$
Polycarbophil (Fibercon, Fiber-Lax)	\$ - \$\$\$\$\$\$\$
Psyllium (Metamucil)	\$

Osmotic Laxatives

Lactulose (Cephulac)	\$ - \$\$
Polyethylene Glycol (MiraLax)	\$ - \$\$
Propylene Glycol Electrolyte Solution (PEG, Co-Lyte, GoLYTELY, OCL)	\$
Sorbitol	\$ - \$

Combination Laxatives

Docusate Sodium/Casanthrol (Peri-Colace)	\$
Docusate Sodium/Sennosides (Peri-Colace)	\$

Surfactants

Docusate Calcium (Surfak)	\$
Docusate Sodium (Colace, Doxinate)	\$

Miscellaneous Laxatives

Glycerin Suppository (Sani-Supp)	\$
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ANTIDIARRHEALS

Attapulgite	\$\$ - \$\$
Bismuth Subsalicylate (Pepto-Bismol, Bismatrol, Kaopectate)	\$ - \$
Kaolin-Pectin	\$\$ - \$\$
Lactobacillus Acidophilus (Lactinex, Bacid)	\$\$ - \$\$
Loperamide (Imodium)	\$ - \$\$

RECTAL AGENTS

Pramoxine (Tronothane)	\$ - \$\$
Rectal Hemorrhoidal Cream with Hydrocortisone	\$\$\$
Rectal Hemorrhoidal Ointment (Anusol)	\$\$
Rectal Hemorrhoidal Suppositories (Wyanoids, Anusol)	\$
Rectal Hemorrhoidal Suppositories with Hydrocortisone (Anusol-HC)	\$ - \$\$

MISCELLANEOUS GASTROINTESTINAL AGENTS

Activated Charcoal	
Bismuth Subsalicylate (Pepto-Bismol, Bismatrol)	\$ - \$
Ipecac Syrup	
Meclizine (Antivert, Bonine)	\$
Mesalamine (Asacol, Pentasa, Rowasa)	\$\$\$ - \$\$\$\$\$
Misoprostol (Cytotec)	\$\$
Pancrelipase (Pancrease, Creon)	\$\$ - \$\$\$\$\$
Prochlorperazine (Compazine)	\$ - \$\$\$
Sucralfate (Carafate)	\$ - \$\$\$\$
Sulfasalazine (Azulfidine)	\$\$
Trimethobenzamide (Tigan)	\$\$

GENITOURINARY AGENTS

INTERSTITIAL CYSTITIS AGENTS

Phenazopyridine (Pyridium)	\$ - \$\$
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GENITOURINARY IRRIGANTS

Sodium Chloride	\$\$\$
Water for Irrigation	\$ - \$\$

URINARY ALKALINIZERS

Potassium Citrate (Urocit K)	\$ - \$\$\$\$
Potassium Citrate Combinations (Polycitra, Polycitra-LC, Polycitra K, Citrolith)	\$\$ - \$\$
Sodium Bicarbonate	\$ - \$\$
Sodium Citrate/Citric Acid (Bicitra, Oracit)	\$\$ - \$\$\$

URINARY ANTICHOLINERGICS

Flavoxate (Urispas)	\$\$\$
Oxybutynin (Ditropan, Ditropan XL)	\$\$ - \$\$
Tolterodine (Detrol, Detrol LA)	\$\$ - \$\$\$

URINARY CHOLINERGICS

Bethanechol (Urecholine)	\$ - \$\$\$
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VAGINAL ANTIFUNGALS

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

MISCELLANEOUS GENITOURINARY AGENTS

Estradiol (Estrace)	\$\$ - \$\$\$\$\$\$
Estrogens, Conjugated (Premarin)	\$\$\$\$\$
Nitrofurantoin (Macrochantin)	\$\$ - \$\$\$\$
Sevelamer (Renagel)	\$\$\$ - \$\$\$\$

IMMUNOLOGICAL AGENTS

IMMUNE SERUMS

Hepatitis B Immune Globulin (HBIG)	\$\$\$\$\$\$
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BACTERIAL VACCINES

Pneumococcal Vaccine, Polyvalent (Pneumovax)	\$\$\$\$
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VIRAL VACCINES

Hepatitis A Vaccine (Vaqta)	\$\$\$\$\$\$\$
Hepatitis B Virus Vaccine, Recombinant (Recombivax HB, Engerix-B)	\$\$\$\$\$\$\$
Influenza Virus Vaccine (Fluzone, Fluviron)	\$\$
Measles, Mumps and Rubella Virus Vaccine, Live (MMR II)	\$\$\$\$\$\$\$
Poliovirus Vaccine, Inactivated (IPOL)	\$\$\$\$\$
Rubella Virus Vaccine Live (Meruvax II)	\$\$\$\$\$
Varicella Virus Vaccine, Live (Varivax)	\$\$\$\$\$\$\$

TOXOIDS

Diphtheria & Tetanus Toxoids Adsorbed (DT)	\$\$\$\$
Diphtheria & Tetanus Toxoids Adsorbed for Adult Use (Td)	\$\$\$

***IN-VIVO* DIAGNOSTIC BIOLOGICALS**

Tuberculin, Purified Protein Derivative (P.P.D.)	\$\$ - \$\$\$\$\$\$
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INFECTIOUS DISEASE AGENTS

ANTIBIOTICS

Penicillins

Amoxicillin (Amoxil, Polymox)	\$ - \$\$\$\$
Amoxicillin/Clavulanate (Augmentin)	\$\$\$ - \$\$\$\$\$
Ampicillin (Polycillin, Omnipen)	\$ - \$\$\$\$
Cloxacillin (Cloxapen, Tegopen) or Dicloxacillin (Dycill, Dynapen, Pathocil)	\$ - \$\$\$\$\$
Nafcillin (Unipen) or Oxacillin (Prostaphlin)	\$\$\$ - \$\$\$\$\$\$
Penicillin G Benzathine (Bicillin)	\$\$\$ - \$\$\$\$\$\$
Penicillin G Benzathine/Penicillin G Procaine (Bicillin C-R)	\$\$\$\$
Penicillin G Procaine (Wycillin)	\$\$ - \$\$\$\$\$\$
Penicillin G Sodium	\$\$ - \$\$\$\$
Penicillin V Potassium (Pen-Vee K, V-Cillin K)	\$ - \$\$
Ticarcillin (Ticar)	\$\$\$\$\$ - \$\$\$\$\$\$
Ticarcillin/Clavulanate (Timentin)	\$\$\$\$\$\$\$

Cephalosporins	
Cefazolin (Kefzol, Ancef)	\$\$\$\$ - \$\$\$\$\$
Cefoperazone (Cefobid)	\$\$\$\$\$\$
Ceftriaxone (Rocephin)	\$\$\$\$\$\$
Cefuroxime Axetil (Ceftin) - Oral form only -	\$\$\$ - \$\$\$\$\$
RESERVE USE	
Cephalexin (Keflex)	\$ - \$
Macrolides	
Azithromycin (Zithromax) - RESERVE USE	\$\$\$\$\$\$
Clarithromycin (Biaxin) - RESERVE USE	\$\$\$ - \$\$\$\$
Erythromycin (Erythrocin)	\$ - \$
Erythromycin Ethylsuccinate/Sulfisoxazole Suspension (Pediazole)	\$ - \$\$
Tetracyclines	
Doxycycline (Vibramycin)	\$ - \$\$\$\$\$
Tetracycline (Achromycin, Panmycin)	\$ - \$\$
Quinolones	
Ciprofloxacin (Cipro)	\$\$\$\$ - \$\$\$\$\$\$
Levofloxacin (Levaquin)	\$\$\$\$\$ - \$\$\$\$\$\$
Aminoglycosides	
Gentamicin (Garamycin)	\$\$
Neomycin (Mycifradin)	\$\$ - \$\$\$\$
Tobramycin (Nebcin)	\$\$\$ - \$\$\$\$
Miscellaneous Antibiotics	
Clindamycin (Cleocin)	\$ - \$\$\$\$\$\$
Metronidazole (Flagyl)	\$ - \$\$\$\$\$\$
Trimethoprim/Sulfamethoxazole (Co- Trimoxazole, Bactrim, Septra)	\$ - \$\$\$\$\$\$
Vancomycin (Vancocin)	\$\$\$\$ - \$\$\$\$\$\$

ANTIFUNGALS

Fluconazole (Diflucan)	\$\$\$\$ - \$\$\$\$\$
Griseofulvin (Fulvicin)	\$
Ketoconazole (Nizoral)	\$\$ - \$\$\$
Nystatin (Mycostatin)	\$\$ - \$\$

ANTIMALARIALS

Chloroquine (Aralen)	\$\$\$
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ANTITUBERCULARS

Ethambutol (Myambutol)	\$\$ - \$\$\$\$
Ethionamide	\$\$\$
Isoniazid (INH)	\$
Pyrazinamide	\$ - \$\$\$
Rifampin (Rifadin)	\$\$ - \$\$\$\$\$\$\$
Rifampin/Isoniazid (Rifamate)	\$\$

ANTIVIRALS

Acyclovir (Zovirax)	\$\$ - \$\$\$\$
Amantadine (Symmetrel)	\$\$ - \$\$
Delavirdine (DLV, Rescriptor)	\$\$\$\$
Didanosine (ddl, Videx)	\$\$\$\$
Indinavir (Crixivan)	\$\$\$\$\$
Lamivudine (Epivir)	\$\$\$\$
Lamivudine/Zidovudine (Combivir)	\$\$\$\$\$\$
Nelfinavir (Viracept)	\$\$\$\$\$\$
Nevirapine (NVP, Viramune)	\$\$\$\$
Ritonavir (Norvir)	\$\$\$\$ - \$\$\$\$\$\$
Saquinavir (Invirase, Fortovase)	\$\$\$\$
Stavudine (d4T, Zerit)	\$\$\$\$
Zidovudine (AZT, Retrovir)	\$\$\$\$ - \$\$\$\$\$

ANTIHELMINTICS

Mebendazole (Vermox)	\$\$\$ - \$\$\$\$\$
Pyrantel (Antiminth)	\$ - \$\$\$\$
Thiabendazole (Mintezol)	\$\$\$\$

URINARY ANTI-INFECTIVES

Nitrofurantoin (Macrochantin)	\$\$ - \$\$\$\$
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MISCELLANEOUS ANTI-INFECTIVES

Pentamidine (Pentam) - RESERVE USE	\$\$\$\$\$\$
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INTRAVENOUS SOLUTIONS AND ADDITIVES

INTRAVENOUS SOLUTIONS

Amino Acid Injection (Aminosyn)	\$\$\$\$ - \$\$\$\$\$\$
Dextran (Gentran, LMD, Macrodex, Rheomacrodex)	\$\$\$\$\$ - \$\$\$\$\$\$
Dextrose/Sodium Chloride Intravenous Solution	\$\$\$\$
Dextrose 5% in 0.2% Sodium Chloride	
Dextrose 5% in 0.45% Sodium Chloride	
Dextrose 5% in 0.9% Sodium Chloride	
Dextrose 5% in Water	\$ - \$\$
Dextrose 5% in Ringer's Lactate	\$
Dextrose 5% with Multiple Electrolytes (D5 E75, Baxter)	\$\$\$
Dextrose 5%/Sodium Chloride/Potassium Chloride Intravenous Solution	\$\$\$\$\$\$ - \$\$\$\$\$\$
Dextrose 5%/Sodium Chloride 0.2%/Potassium Chloride	
Dextrose 5%/Sodium Chloride 0.45%/Potassium Chloride	
Dextrose 5%/Sodium Chloride 0.9%/Potassium Chloride	
Dextrose 50% in Water	\$\$\$\$ - \$\$\$\$\$
Ringer's Lactate Solution (Hartmann's Solution)	\$\$
Sodium Chloride Intravenous Solution	\$\$\$\$ - \$\$\$\$\$
Sodium Chloride 0.2%	\$ - \$\$\$
Sodium Chloride 0.45%	
Sodium Chloride 0.9%	
Water for Injection	\$\$ - \$\$\$\$

ELECTROLYTE REPLACEMENT ADDITIVES

Calcium Gluconate	\$\$
Magnesium Sulfate	\$ - \$
Potassium Chloride	\$ - \$\$
Sodium Bicarbonate	\$ - \$\$
Sodium Chloride	\$ - \$\$
Sodium Lactate	\$\$\$\$
Zinc Sulfate	\$ - \$\$

NUTRITIONAL AGENTS

VITAMINS

Ascorbic Acid (Vitamin C)	\$ - \$
Cyanocobalamin (Vitamin B ₁₂)	\$ - \$\$\$\$\$\$\$
Folic Acid (Folvite)	\$ - \$\$\$\$
Leucovorin (Wellcovorin)	\$\$ - \$\$\$\$
Niacin/Nicotinamide (Nicobid)	\$
Phytonadione (Vitamin K ₁ , Mephyton, Konakion)	\$\$ - \$\$\$
Pyridoxine (Vitamin B ₆)	\$ - \$\$
Thiamine (Vitamin B ₁)	\$ - \$
Vitamin A (Aquasol A)	\$ - \$\$\$\$\$\$\$
Vitamin D (Ergocalciferol, Calciferol, Drisdol)	\$
Vitamin E (Aquasol E)	\$ - \$\$\$\$\$\$\$

MINERALS TRACE ELEMENTS AND ELECTROLYTES

Calcium Carbonate (Os-Cal, Titalac) - 40% elemental calcium	\$
Calcium Citrate (Citracal)	\$
Calcium Glubionate (Neo-Calglucon) - 6% elemental calcium	\$ - \$\$
Calcium Gluconate - 9% elemental calcium	\$\$
Ferrous Fumarate/Docusate Sodium (Ferro-Sequels) - 33% elemental iron	\$\$
Ferrous Sulfate (Feosol, Fer-In-Sol) -20% elemental iron	\$
Iron Dextran Complex (Imferon)	\$\$\$\$\$\$\$
Zinc Sulfate	\$ - \$\$

COMBINATION PRODUCTS

Calcium Carbonate/Vitamin D (Oscal + D)	\$
Multivitamin (Unicap, Hexavitamins)	\$ - \$
Multivitamin/Minerals	\$ - \$
Multivitamins, Pediatric (Poly-Vi-Sol)	\$\$
Multivitamins, Prenatal (Filibon)	\$
Vitamin B Complex/Vitamin C (Stresscaps, Allbee with C)	\$
Vitamin B Complex/Vitamin C/Zinc	\$

RESPIRATORY AGENTS

BRONCHODILATORS

Albuterol (Proventil, Ventolin)	\$ - \$\$\$
Aminophylline	\$\$ - \$\$
Metaproterenol (Alupent)	\$ - \$\$\$\$\$\$
Salmeterol (Serevent)	\$\$\$\$\$\$\$\$
Terbutaline (Brethine)	\$ - \$\$\$\$\$\$
Theophylline (Elixophyllin)	\$ - \$\$

DECONGESTANTS

Pseudoephedrine (Sudafed)	\$ - \$\$
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STEROIDS

Beclomethasone (Vanceril, Beconase)	\$\$\$\$\$\$\$\$
Fluticasone (Flonase, Flovent)	\$\$\$\$\$\$\$\$
Mometasone (Nasonex)	\$\$\$\$\$\$\$\$
Triamcinolone (Azmacort, Nasacort)	\$\$\$\$\$\$\$\$

ANTITUSSIVES

Dextromethorphan	\$ - \$\$
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EXPECTORANTS

Guaifenesin (Robitussin)	\$ - \$\$
Potassium Iodide (SSKI)	\$ - \$

COUGH AND COLD PREPARATIONS

Brompheniramine/Pseudoephedrine (Bromfed)	\$\$
Chlorpheniramine (Chlor-Trimeton, Teldrin)	\$ - \$\$
diphenhydrAMINE (Benadryl)	\$
Fexofenadine (Allegra)	\$\$
Fexofenadine/Pseudoephedrine (Allegra-D)	\$\$
Guaifenesin/Dextromethorphan (Robitussin DM)	\$ - \$\$
Guaifenesin/Pseudoephedrine (Entex PSE)	\$
Hydrocodone/Guaifenesin (Hycotuss, Kwelcof)	\$\$
Loratadine (Claritin)	\$\$
Triprolidine/Pseudoephedrine (Actifed)	\$

MISCELLANEOUS RESPIRATORY DRUGS

Acetylcysteine (Mucomyst)	\$\$\$\$ - \$\$\$\$\$\$
Cromolyn (Intal)	\$\$\$\$\$\$
Ipratropium (Atrovent Inhaler)	\$\$\$\$\$\$
Sodium Chloride	\$ - \$
Zafirlukast (Accolate)	\$\$

TOPICAL AGENTS

OPHTHALMICS

Agents for Glaucoma

Betaxolol (Betoptic S)	\$\$\$\$
Bimatoprost (Lumigan)	\$\$\$\$\$\$
Brimonidine (Alphagan)	\$\$\$\$\$\$
Latanoprost (Xalatan)	\$\$\$\$\$\$
Pilocarpine (Isopto Carpine)	\$ - \$\$\$\$\$\$
Timolol (Timoptic)	\$\$ - \$\$\$\$\$\$
Timolol/Dorzolamide (Cosopt)	\$\$\$\$\$\$
Travoprost (Travatan)	\$\$\$\$\$\$

Antibiotics

Bacitracin (Baciguent)	\$
Ciprofloxacin (Ciloxan)	\$\$\$\$\$ - \$\$\$\$\$\$
Erythromycin	\$\$
Gentamicin (Garamycin)	\$\$
Polymyxin B/Bacitracin (Polysporin)	\$\$\$\$\$
Polymyxin B/Trimethoprim (Polytrim)	\$\$\$
Sulfacetamide Sodium (Sulamyd)	\$ - \$\$\$\$\$\$
Tobramycin (Tobrex)	\$\$ - \$\$\$\$\$\$

Mydriatics

Atropine Sulfate (Isopto Atropine)	\$\$
Homatropine (Isopto Homatropine)	\$\$ - \$\$\$\$
Phenylephrine (Neo-Synephrine)	\$\$ - \$\$\$\$
Scopolamine (Isopto Hyoscine)	\$\$ - \$\$\$
Tropicamide (Mydracil)	\$\$ - \$\$\$\$

Lubricants

Ophthalmic Lubricant (HypoTears, HypoTears PF) [preservative-free, lanolin-free]	\$ - \$\$\$\$
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Decongestant/Antiallergy	
Naphazoline (Naphcon, AK-Con)	\$\$
Olopatadine (Patanol)	\$\$\$\$\$\$\$
Tetrahydrozoline (Visine Allergy Relief, Visine Moisturizing)	\$\$\$
Miscellaneous Ophthalmics	
Dexamethasone (Decadron) - RESERVE USE	\$\$
Fluorescein Sodium	\$ - \$\$\$
Proparacaine (Alcaine)	\$\$
Sodium Chloride	\$\$ - \$\$\$\$
Tobramycin/Dexamethasone (TobraDex)- RESERVE USE	\$\$\$\$\$\$ - \$\$\$\$\$\$

OTICS

Acetic Acid (Acetasol, VoSol)	\$\$
Acetic Acid/Aluminum Acetate (Domeboro Otic)	\$
Acetic Acid/Hydrocortisone/Propylene Glycol/ Sodium Acetate/Benzethonium (VoSol HC)	\$\$
Antipyrine/Benzocaine (Allergen, Auralgan)	\$ - \$\$
Carbamide Peroxide/Glycerin/Propylene Glycol/ Sodium Stannate (Debrox)	\$
Ciprofloxacin/Hydrocortisone (Cipro HC Otic)	\$\$\$\$\$\$\$
Mineral Oil	\$\$
Neomycin/Polymyxin B/Hydrocortisone (Cortisporin - ear drops only)	\$\$\$

NASAL, MOUTH AND THROAT AGENTS

Benzocaine	\$\$ - \$\$\$
Carbamide Peroxide/Glycerin/Propylene Glycol/ Sodium Stannate (Gly-Oxide)	\$\$\$
Carboxymethylcellulose/Electrolytes (Saliva Substitute, Moi-Stir, Salivart, MouthKote, Salix)	\$ - \$\$\$
Cetylpyridinium (Cepacol)	\$ - \$\$\$
Chlorhexidine (Peridex)	\$\$
Clotrimazole (Mycelex, Fungoid)	\$\$
Doxycycline (Periostat)	\$\$\$
Nystatin (Mycostatin)	\$\$ - \$\$\$
Oxymetazoline (Afrin)	\$
Phenol (Chloraseptic)	\$\$
Phenylephrine (Neo-Synephrine)	\$\$
Sodium Fluoride	\$
Stannous Fluoride (OmniMed, PerioMed)	\$\$\$\$
Triamcinolone in Oral Adhesive Base (Kenalog in Orabase)	\$\$

DERMATOLOGICALS

Acne Agents

Adapalene (Differin)	\$\$\$\$\$\$\$
Benzoyl Peroxide	\$ - \$\$
Benzoyl Peroxide/Clindamycin (BenzaClin)	\$\$\$\$\$\$\$
Clindamycin (Cleocin T)	\$\$\$ - \$\$\$\$\$
Erythromycin/Benzoyl Peroxide (Benzamycin)	\$\$\$\$\$\$\$
Metronidazole (Noritate, MetroGel)	\$\$\$\$\$\$\$
Sulfur/Resorcinol (Sulforcin, Rezamid)	\$\$\$\$
Tretinoin Gel (Retin-A)	\$\$\$\$\$\$\$ - \$\$\$\$\$\$

Skin Cleansers

Abrasive Cleanser (Brasivol, Pernox)	\$\$\$\$
Non-Soap Cleanser (Cetaphil)	\$\$\$ - \$\$\$\$

Sunscreens

Cream/Lotion: contains a minimum SPF of 15	\$\$\$\$
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Burn Agents

Bacitracin (Baciguent)	\$
Silver Sulfadiazine (Silvadene)	\$\$ - \$\$\$\$\$\$

Diaper Rash Agents

Diaper Rash Ointment (Desitin, Vitamin A&D Ointment, Diaperene)	\$ - \$\$
Diaper Rash Powder (Mexsana)	\$\$

Antiseborrheic Agents	
Selenium Sulfide (Selsun)	\$\$ - \$\$\$\$
Sulfacetamide Sodium (Sebizon)	\$\$\$\$\$\$\$
Antipsoriatics	
Calcipotriene (Dovonex)	\$\$\$\$\$\$\$
Methotrexate	\$\$\$\$
Selenium Sulfide (Selsun)	\$\$ - \$\$\$\$
Tazarotene (Tazorac, Avage)	\$\$\$\$\$\$\$
Anti-Histamine Agents	
Calamine/Zinc Oxide/Glycerin (Calamine Lotion)	\$
Calamine/Pramoxine (Caladryl)	\$\$\$
diphenhydrAMINE (Benadryl)	\$
Antiseptics & Germicides	
Benzalkonium Chloride (Zephiran)	\$\$ - \$\$\$\$
Chlorhexidine (Hibiclens, Bactoshield)	\$\$ - \$\$\$
Hexachlorophene (pHisoHex)	\$\$\$ - \$\$\$\$\$\$
Povidone-Iodine (Betadine)	\$ - \$\$\$\$\$
Anti-Infectives	
Antibiotics	
Bacitracin (Baciguent)	\$
Bacitracin/Polymyxin B (Polysporin)	\$\$\$ - \$\$\$\$
Clindamycin (Cleocin T)	\$\$\$ - \$\$\$\$\$\$
Gentamicin (Garamycin)	\$\$\$
Metronidazole (Noritate, MetroGel)	\$\$\$\$\$\$\$
Mupirocin (Bactroban)	\$\$\$\$\$\$\$
Neomycin/Polymyxin B/Bacitracin (Triple Antibiotic Ointment)	\$
Polymyxin B/Neomycin (Neosporin)	\$\$ - \$\$\$\$\$\$
Antiviral	
Acyclovir (Zovirax)	\$\$\$\$\$\$\$

Antifungals	
Benzoic and Salicylic Acids (Whitfield's)	\$\$
Calcium Undecylenate (Caldesene)	\$\$
Clotrimazole (Lotrimin, Fungoid)	\$\$\$\$\$\$
Ketoconazole (Nizoral)	\$\$\$\$\$\$ - \$\$\$\$\$\$\$
Miconazole (Monistat)	\$\$\$ - \$\$\$\$\$
Nystatin (Mycostatin)	\$\$ - \$\$\$\$\$
Terbinafine (Lamisil)	\$\$\$\$\$\$
Tolnaftate (Tinactin)	\$\$ - \$\$\$
Zinc Undecylenate (Desenex)	\$\$\$ - \$\$\$\$
Scabicides & Pediculicides	
Crotamiton (Eurax)	\$\$\$\$
Lindane (Gamma Benzene Hexachloride, Kwell)	\$\$\$\$
Permethrin 1% Liquid (NIX)	\$\$\$
Permethrin 5% Cream (Elimite)	\$\$\$\$
Pyrethins/Piperonyl Butoxide (A-200, RID)	\$\$\$\$
Corticosteroids	
Betamethasone Valerate (Valisone)	\$\$ - \$\$\$\$
Clobetasol (Temovate) - RESERVE USE	\$\$\$\$\$\$
Fluocinolone or Fluocinonide (Synalar, Lidex)	\$\$ - \$\$\$\$
Hydrocortisone Acetate (Lanacort, Corticaine)	\$ - \$\$\$\$\$
Local Anesthetics	
Benzocaine (Lanacaine)	\$ - \$\$\$
Bupivacaine (Marcaine)	\$\$
Dibucaine (Nupercainal)	\$ - \$\$\$
Ethyl Chloride	\$\$\$\$
Lidocaine (Xylocaine)	\$\$ - \$\$\$\$\$
Pramoxine (Tronothane)	\$\$\$ - \$\$\$\$\$
Emollients	
Emollient Lotion/Cream (Lubriderm, Allercreme, Keri Lotion, Cetaphil, Lac- Hydrin)	\$\$ - \$\$\$
Emollient Ointment (Lanolin)	\$ - \$\$\$\$
Skin Protectants	
Benzoin, Compound Tincture	\$\$
Silver Sulfadiazine (Silvadene)	\$\$ - \$\$\$\$\$
Zinc Oxide	\$\$\$ - \$\$\$\$\$
Ointment & Lotion Bases	
Petrolatum, White (Vaseline)	\$\$

Tar-Containing Agents	
Coal Tar (Ionil-T, Tegrin)	\$\$\$
Wet Dressings & Soaks	
Aluminum Acetate (Burow's Solution)	\$\$ - \$\$\$\$\$
Rubs and Liniments	
Methyl Salicylate (Ben-Gay)	\$
Keratolytics	
Podophyllum Resin	\$\$\$\$\$\$
Salicylic Acid	\$\$ - \$\$\$\$
Miscellaneous Dermatologicals	
Benzoic and Salicylic Acids (Whitfield's)	\$\$
Camphor-Phenol (Campho-Phenique)	\$\$
Collagenase (Santyl)	\$\$\$\$\$\$
Hydrogen Peroxide	\$
Silver Nitrate	\$
Trypsin/Balsam Peru/Castor Oil (Granulex)	\$\$\$\$
Zinc Oxide	\$\$\$ - \$\$\$\$\$

IRRIGATION SOLUTIONS

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

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A-200	65, 105	Ambien	17, 77, 86
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Aldactone	69, 80	Aripiprazole	13, 27, 85
Aldomet	54, 82	Aristocort	74, 89
Alendronate	25, 90	Artane	74, 88
Allbee with C	76, 99	Asacol	53, 93
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Alphagan	30, 101	Atomoxetine	27, 86
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Aludrox	26, 90	Atropine Sulfate	28, 102
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Aluminum Hydroxide	25, 90	Attapulgate	28, 92
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Vitamin B ₁₂	36, 99	Zonisamide.....	77, 87
Vitamin B ₆	65, 99	Zovirax.....	25, 97, 105
Vitamin C	27, 99	Zydis	59, 85
Vitamin D	76, 99	Zyloprim.....	25, 90
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Vitamin K ₁	61, 79, 80, 99		

APPENDIX 1: NEW DRUG APPLICATION FORM

415 — C
EXHIBIT A

TEXAS DEPARTMENT OF MENTAL HEALTH AND MENTAL RETARDATION

NEW DRUG APPLICATION
(for inclusion in the *TDMHMR Drug Formulary*)

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

Date: _____

Name of practitioner submitting the application: _____

Name of entity with which the practitioner is associated by employment or contract (i.e., state hospital, state school, state center, or local authority (state-operated community services (SOCS) or community MHMR center)):

Information regarding new drug:

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

Explain the pharmacological action or use of this drug:

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

State which drugs this new drug would replace or supplement:

application is approved

signature of chairman of facility pharmacy and therapeutics committee

OR

application is appropriate and complete

signature of clinical/medical director or designee

Section 415.108 of TDMHMR rules governing the use and maintenance of the *TDMHMR Drug Formulary* (25 TAC, Chapter 415, Subchapter C) describes the procedures for applying to have a drug added to the formulary, which are:

§415.108. Applying to Have a Drug Added to the Formulary.

- (a) Any member of the Executive Formulary Committee, any service system component* practitioner, or any contract practitioner may apply to have a drug added to the *TDMHMR Drug Formulary* by completing the New Drug Application Form DF-1, referenced as Exhibit A in §415.112 of this title (relating to Exhibit) and including:
 - (1) published articles in biomedical literature that substantiate the efficacy and safety of the proposed drug;
 - (2) information on the advantages of the proposed drug compared with similar formulary drugs;
 - (3) a list of formulary drugs that the proposed drug would replace or supplement; and
 - (4) cost effectiveness data.
- (b) Submitting the application.
 - (1) If the person submitting the application is a facility** practitioner or a facility contract practitioner, then that practitioner submits the application to the facility's pharmacy and therapeutics committee for approval. If the committee approves the application, then it forwards the application to the Executive Formulary Committee.
 - (2) If the person submitting the application is a non-facility service system component practitioner or a non-facility service system component contract practitioner, then that practitioner submits the application to the component's clinical/medical director or designee who determines if the application is appropriate and complete, and if so, forwards the application to the Executive Formulary Committee.
 - (3) If the person completing the application is a member of the Executive Formulary Committee, then that person submits the application directly to Executive Formulary Committee.
- (c) The Executive Formulary Committee considers the drug application and recommends:
 - (1) approving the proposed drug's inclusion and, if appropriate, approving audit criteria and recommending dosage guidelines;
 - (2) denying the proposed drug's inclusion;
 - (3) approving the proposed drug on a trial basis for a specified period of time;
 - (4) approving the proposed drug as a reserve drug, with guidelines; or
 - (5) postponing the decision until a later meeting.

* The term "service system component" means a state hospital, state school, state center, or local authority (state-operated community services (SOCS) or community MHMR center).

** The term "facility" means a state hospital, state school, or state center.

APPENDIX 2: NON-FORMULARY DRUG JUSTIFICATION FORM

TEXAS DEPARTMENT OF MENTAL HEALTH
AND MENTAL RETARDATION

Non-Formulary Drug Justification

Facility/Component _____

Drug Name

(Generic)

(Trade)

(Strength)

(AHFS Therapeutic Class)

The purpose of the *Formulary* is to ensure that the treatments available to TDMHMR consumers are consistent with need, effectiveness, risk, and cost. Exceptions to the *Formulary* are limited to the three categories listed below.

This request is for:

- an individual patient treatment course. Is this chronic or acute therapy?
- more than one patient/course of therapy. It is estimated that _____ patients will be treated with this drug. Is this chronic or acute therapy?

Reason for request:

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

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

- Alternative drugs are available on the *TXMHMR Formulary*.

Attending Physician (signature)

Date

Was the drug ordered yes or no?

<input type="checkbox"/> AGREE	<input type="checkbox"/> DISAGREE	
_____ Pharmacy Director or designee (signature)	_____ Date	
<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED	<input type="checkbox"/> EMERGENCY Facility clinical/medical director's approval must be obtained within three working days.
_____ Facility clinical/medical director or designee (signature)	_____ Date	

APPENDIX 3: ADVERSE DRUG REACTION REPORTING (MEDWATCH) FORM



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

Form Approved: OMB No. 0910-0281 Expires: 11/30/09
See OMB statement on reverse

FDA Use Only

Triage unit
sequence #

Page ___ of ___

A. Patient information

1. Patient identifier In confidence	2. Age at time of event: or _____ Date of birth: _____	3. Sex <input type="checkbox"/> female <input type="checkbox"/> male	4. Weight ____ lbs or ____ kgs
--------------------------------------------	--------------------------------------------------------------	----------------------------------------------------------------------------	-----------------------------------------

B. Adverse event or product problem

1. Adverse event and/or Product problem (e.g., defects/malfunctions)

2. Outcomes attributed to adverse event (check all that apply)

<input type="checkbox"/> death _____ (mo/day/yr)	<input type="checkbox"/> disability
<input type="checkbox"/> life-threatening	<input type="checkbox"/> congenital anomaly
<input type="checkbox"/> hospitalization -- initial or prolonged	<input type="checkbox"/> required intervention to prevent permanent impairment/damage
	<input type="checkbox"/> other: _____

3. Date of event (mo/day/yr)

4. Date of this report (mo/day/yr)

5. Describe event or problem

6. Relevant tests/laboratory data, including dates

7. Other relevant history, including preexisting medical conditions (e.g., allergies, race, pregnancy, smoking and alcohol use, hepatic/renal dysfunction, etc.)

C. Suspect medication(s)

1. Name (give labeled strength & mfr/labeler, if known)

#1 _____

#2 _____

2. Dose, frequency & route used	3. Therapy dates (if unknown, give duration) from/to (or best estimate)
#1 _____	#1 _____
#2 _____	#2 _____

4. Diagnosis for use (indication)

#1 _____

#2 _____

5. Event abated after use stopped or dose reduced

#1 yes no doesn't apply

#2 yes no doesn't apply

6. Lot # (if known)

#1 _____

#2 _____

7. Exp. date (if known)

#1 _____

#2 _____

8. Event reappeared after reintroduction

#1 yes no doesn't apply

#2 yes no doesn't apply

9. NDC # (for product problems only)

#1 _____

#2 _____

10. Concomitant medical products and therapy dates (exclude treatment of event)

D. Suspect medical device

1. Brand name

2. Type of device

3. Manufacturer name & address	4. Operator of device <input type="checkbox"/> health professional <input type="checkbox"/> lay user/patient <input type="checkbox"/> other: _____
5. Expiration date (mo/day/yr)	6. model # _____
7. If implanted, give date (mo/day/yr)	8. If explanted, give date (mo/day/yr)
9. Device available for evaluation? (Do not send to FDA) <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> returned to manufacturer on _____ (mo/day/yr)	6. catalog # _____
	7. serial # _____
	8. lot # _____
	9. other # _____

10. Concomitant medical products and therapy dates (exclude treatment of event)

E. Reporter (see confidentiality section on back)

1. Name & address _____ phone # _____

2. Health professional? <input type="checkbox"/> yes <input type="checkbox"/> no	3. Occupation _____	4. Also reported to <input type="checkbox"/> manufacturer <input type="checkbox"/> user/facility <input type="checkbox"/> distributor
5. If you do NOT want your identity disclosed to the manufacturer, place an "X" in this box. <input type="checkbox"/>		

PLEASE TYPE OR USE BLACK INK



Mail to: MEDWATCH
5600 Fishers Lane
Rockville, MD 20852-9787

or FAX to:
1-800-FDA-0178

FDA Form 3500

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

ADVICE ABOUT VOLUNTARY REPORTING

Report experiences with:

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

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

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

Report even if:

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

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

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

How to report:

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

Important numbers:

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

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

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

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

OHHS Reports Clearance Office
Paperwork Reduction Project (0910-0291)
Robert H. Humphrey Building, Room 5371-H
200 Independence Avenue, S.W.
Washington, DC 20201

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

Please **DO NOT**
RETURN this form
to this address.

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

FDA Form 3500-back

Please Use Address Provided Below – Just Fold In Thirds, Tape and Mail

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

Official Business
Penalty for Private Use \$300

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FIRST CLASS MAIL PERMIT NO. 946 ROCKVILLE, MD

POSTAGE WILL BE PAID BY FOOD AND DRUG ADMINISTRATION

MEDWATCH

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

Medication Audit Criteria and Guidelines

-- INDEX --

The audit criteria and guidelines are developed for use in the treatment of psychiatric conditions and not medical conditions.

Criteria and Drug Audit Form Number	Description
CURRENT #	
Appendix A	Purpose of Laboratory Monitoring
Table A	Cytochrome P450 Drug Metabolism/Inhibition
1.	CARBAMAZEPINE (TEGRETOL®)
2.	LAMOTRIGINE (LAMICTAL®)
3.	LITHIUM (ESKALITH®, LITHOBID®, ESKALITH CR®, etc.)
4.	OXCARBAZEPINE (TRILEPTAL®)
5.	TOPIRAMATE (TOPAMAX®)
6.	VALPROIC ACID (DEPAKENE®), DIVALPROEX SODIUM (DEPAKOTE®)
7.	VERAPAMIL (CALAN®, ISOPTIN®)
8.	BENZODIAZEPINES alprazolam (Xanax®), chlordiazepoxide (Librium®), clorazepate (Tranxene®), diazepam (Valium®), lorazepam (Ativan®), Oxazepam (Serax®), temazepam (Restoril®), triazolam (Halcion®), Clonazepam (Klonopin®)
9.	BUSPIRONE (BUSPAR®)
10.	AMOXAPINE (ASENDIN®)
11.	BUPROPION (WELLBUTRIN® and WELLBUTRIN® SR)
12.	MIRTAZAPINE (REMERON®)
13.	MONOAMINE OXIDASE INHIBITORS phenelzine (Nardil®), tranylcypromine (Parnate®)
14.	NEFAZODONE (SERZONE®)
15.	SSRIs: CITALORPAM (CELEX®), FLUOXETINE (PROZAC®), SERTRALINE (ZOLOFT®), PAROXETINE (PAXIL®), FLUVOXAMINE (LUVOX®)
16.	TRAZODONE (DESYREL®)
17.	TRICYCLIC ANTIDEPRESSANTS amitriptyline (Elavil®), desipramine (Norpramin®), Pertofrane®), doxepin (Sinequan®), imipramine (Tofranil®), maprotiline (Ludiomil®), nortriptyline (Pamelor®, Aventyl®), protriptyline (Vivactil®), trimipramine (Surmontil®)
18.	VENLAFAXINE (EFFEXOR® and EFFEXOR® ER)
19.	ANTIPSYCHOTICS chlorpromazine (Thorazine®), fluphenazine (Prolixin®), haloperidol (Haldol®), loxapine (Loxitane®), molindone (Moban®), perphenazine (Trilafon®), thiothixene (Navane®), trifluoperazine (Stelazine®)
20.	ANTIPSYCHOTICS mesoridazine (Serentil®)thioridazine (Mellaril®)
21.	CLOZAPINE (CLOZARIL®)
22.	DECANOATES fluphenazine decanoate (Prolixin® Decanoate), haloperidol decanoate (Haldol® Decanoate)

Criteria and Drug Audit Form Number CURRENT #	Description
23.	RISPERIDONE (RISPERDAL®), OLANZAPINE (ZYPREXA®), QUETIAPINE (SEROQUEL®), ZIPRASIDONE (GEODON®)
24.	SEDATING ANTIHISTAMINES diphenhydramine HCL (Benadryl®), hydroxyzine HCL (Atarax®)
25.	ZALEPLON (SONATA®)
26.	ZOLPIDEM (AMBIEN®)
27.	BETA-BLOCKERS propranolol (Inderal®), atenolol (Tenormin®), metoprolol (Lopressor®), nadolol (Corgard®)
28.	CLOMIPRAMINE (ANAFRANIL®)
29.	GABAPENTIN (NEURONTIN®)
30.	NALTREXONE (REVIA®)
31.	STIMULANTS methylphenidate (Ritalin®, Concerta™), dextroamphetamine (Dexedrine®), dextroamphetamine/amphetamine mixture (Adderall®)

Medication Audit Criteria and Guidelines

Purpose of Laboratory Monitoring

This document was developed based on the premise that the laboratory tests needed for prescribing psychotropic medications are apart from the laboratory tests obtained for the evaluation of the patient's general health status. The required laboratory tests listed are specific for risk factors associated with that particular psychotropic medication. The required psychotropic medication laboratory screening does not substitute for a good history and physical and subsequent healthcare screening needed for the provision of good general medical care for the person who has become a psychiatric patient.

The specific laboratory tests required for the use of psychotropic medication can be obtained from other treatment settings provided:

- The laboratory tests were obtained within 90 days prior to initiation of treatment.
- The actual values of the tests are documented in the chart. Other documentation shall include the date the lab work was obtained and the name of the laboratory.
- There are no intervening illnesses within those 90 days which would necessitate repeating the lab work.

The laboratory tests listed in this document are minimum requirements. The clinician is encouraged to obtain any necessary lab work which he/she feels is clinically justified.

Table A

Cytochrome P450 Drug Metabolism/Inhibition

Adapted from *Bazire and Benefield's Psychotropic Drug Directory 2001, Alden Press, Oxford, UK*

CYP1A2

Substrates	Significant enzyme inducers	Significant enzyme inhibitors
Caffeine Clozapine (most) Dizaepam Fluvoxamine (partly) Haloperidol Mairtazapijne Olanzapine Ondansetron Pimozide Propranolol? Tacrine Tamoxifen Theophlline Tricyclic antidepressants Verapamil Wargfarin Ziprasidone	Caffeine Charcoal broiled foods Cigarette smoke Omeprazole Phenobarbital (weak) Pheytoin (weak) Rifampin Ritonavir	Cimetidine Ciprofoxacin Clarithromycin Erythomycin Fluvoxamine (potent – other SSRIs very weak) Isonazid Ketoconazole Mirtazapine (very weak) Nefazodone (very weak) Norfloxacin Omeprazole

CYP2C family

Substrates	Significant enzyme inducers	Significant enzyme inhibitors
Amitriptyline Clomipramine Imipramine Diazepam Omeprazole NSAIDs (some) Phenytoin Tolbutamide Warfarin	Carbamazepine (weak) Phenobarbital (weak) Phenytoin (weak) Rifampin (weak)	Fluoxetine? Fluvoxamine? Sertraline?

CYP2C9/19

Substrates	Significant enzyme inducers	Significant enzyme inhibitors
Barbiturates (19) Bupropion (9) Citalopram (19) Diazepam (19) Fluoxetine (9) Mephenytoin (19) NSAIDs (9) Omeprazole (19) Propranolol (partly 19) Tricyclic antidepressants Tolbutamide (19) Topiramate (19) Warfarin (9/19)	Rifampin (9)	Amiodarone (9) Carbamazepine (9) Chloramphenical (9) Cimetidine (9) Fluconazole Fluoxetine (9-weak, 19-moderate) Fluvoxamine (9/19) Ketoconazole Omeprazole (9/19) Oxcarbazepine (19) Sertraline (9 – moderate) Topiramate Venlafaxine (weak)

Cytochrome P450 Drug Metabolism/Inhibition (continued)

Adapted from *Bazire and Benfield's Psychotropic Drug Directory 2001*, Alden Press, Oxford, UK

CYP3A3/4 (THE MOST IMPORTANT P450 ENZYME)

Substrates	Significant enzyme inducers	Significant enzyme inhibitors
Amiodarone	Barbiturates (all)	Acetazolamide
Benzodiazepines (not lorazepam)	Carbamazepine	Amiodarone
Buspirone	Cortisol	Cannabinoids
Calcium Channel Blockers	Dexamethasone	Cimetidine (moderate)
Cannabinoids	Ethosuximide	Citalopram (weak)
Carbamazepine	Oxcarbazepine	Clarithromycin
Cisapride (restricted use)	Phenytoin	Clotrimazole
Citalopram (major)	Prednisone	Diltiazem (weak)
Clindamycin	Rifampin	Fluconazole (strong)
Clozapine (partly)	Troglitazone	Fluoxetine (weak)
Cocaine		Fluvoxamine (moderate)
Codeine		Grapefruit juice (weaker)
Cortisol		Indinavir (moderate)
Cyclosporin		Itraconazole (strong)
Dapsone		Ketoconazole (strong)
Dexamethasone		Macrolides (erythromycin, clarithromycin)
Disopyramine		Metronidazole
Donepezil		Miconazole (strong)
Doxorubicin		Mirtazapine (very weak)
Estradiol		Nefazodone (strong)
Ethosuximide		Nelfinavir
Fentanyl		Norfluoxetine (moderate)
Fluoxetine		Omeprazole (weak)
Flyburide		Paroxetine (weak)
Indinavir		Quinine
Itraconazole		Ritonavir (moderate)
Ketoconazole		Sertraline (minor/moderate – dose dependant)
Lidocaine		Trazodone
Lortadine		Tricyclics (moderate)
Lovastatin		Troleandomycin (strong)
Macrolides (not azythromycin)		Venlafaxine (weak)
Miconazole		Verapamil
Mirtazapine (partly)		
Nefazodone		
Omeprazole		
Ondansetrol		
Pimozide (mostly)		
Pravastatin		
Prednisone		
Progesterone		
Quetiapine		
Quinidine		
Rifampin		
Risperidone		
Ritonavir		
Saquinavir		
Sertraline		
Testosterone		
Tamoxifen		
Tertiary Tricyclics		
Valproic acid		
Venlafzine		
Vinblastine		
Vincristine		
Warfarin		
Zaleplon (secondary route)		
Ziprasidone (major)		
Zolpidem (mainly)		

CARBAMAZEPINE (TEGRETOL®)

INDICATIONS

- 1) Cyclic mood disorders
- 2) Aggressive behavior secondary to a psychiatric disorder
- 3) Chronic Pain
- 4) Acute mania

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to carbamazepine or tricyclic antidepressants

Relative:

- | | |
|---------------------------------------|---------------------------------------------|
| 1) History of blood dyscrasias | 4) History of bone marrow -suppression |
| 2) Myoclonic seizure, atonic seizures | 5) Pregnancy/nursing mothers |
| 3) AV heart block | 6) Concomitant use of clozapine (Clozaril®) |

Precautions

- | | |
|----------------------------------------------------------|------------------------------|
| 1) Diabetes Mellitus | 5) Coronary artery disease |
| 2) SIADH | 6) Hyponatremia, dilutional |
| 3) Glaucoma or urinary retention | 7) Renal function impairment |
| 4) Concomitant use of monoamine oxidase (MAO) inhibitors | |

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

- | | |
|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| 1) Anticoagulants, coumadin | 10) Estrogens, including estramustine |
| 2) Anticonvulsants, hydantoin, succinimide, primidone, felbamate | 11) Quinidine |
| 3) Barbiturates | 12) Corticosteroids |
| 4) Benzodiazepines metabolized via hepatic microsomal enzymes, especially clonazepam | 13) Calcium channel blockers (especially diltiazem and verapamil) |
| 5) Valproic acid | 14) Isoniazid |
| 6) Antidepressants, tricyclic | 15) Monoamine oxidase (MAO) inhibitors, including furazolidone and procarbazine |
| 7) Cimetidine | 16) Propoxyphene |
| 8) Clarithromycin, erythromycin or troleandomycin | 17) Antipsychotics (especially haloperidol and risperidone) |
| 9) Contraceptives, estrogen-containing, oral | 18) Nefazodone |

SEE TABLE A: **Cytochrome P450 Drug Metabolism/Inhibition**

PRECAUTIONS TO CONSIDER (continued)

Age-Specific considerations

None

Side Effects Which Require Medical Attention

- 1) Blurred or double vision
- 2) Rash
- 3) Sore throat or fever
- 4) Worsening confusion or disorientation
- 5) Nausea, vomiting diarrhea or abdominal discomfort
- 6) Drowsiness, lethargy
- 7) Headache
- 8) Bone or joint pain

PATIENT MONITORING

Patient Monitoring Parameters

- 1) CBC with platelets – baseline and 1 to 2 weeks after each dose increase and as clinically indicated
- 2) Hepatic function panel and electrolytes; baseline and as clinically indicated.
- 3) Pregnancy Test – as clinically indicated
- 4) Carbamazepine Levels – 3-4 weeks after dose adjustment, then as clinically indicated

Usual therapeutic levels 4-12 mcg/ml

Therapeutic ranges for the lab used should be listed on the report.

Dosing

Take with food to avoid stomach upset

See TDMHMR Formulary for dosage guidelines.

LAMOTRIGINE (LAMICTAL®)

INDICATIONS

- 1) Cyclic mood disorders

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction and similarly severe significant hypersensitivity to medication prescribed

Relative:

- 1) Pregnancy/nursing mothers
- 2) Age less than 16 years of age

Precautions

- 1) Combined use with Valproic acid
- 2) Photosensitivity
- 3) Renal or hepatic impairment

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

- 1) Valproic acid
- 2) Acetaminophen
- 3) Carbamazepine, phenytoin, phenobarbital

Age-Specific Considerations

- 1) Safety and efficacy in children < 16 has not been established

Side Effects Which Require Medical Attention

- 1) Rash
- 2) Headache
- 3) Diplopia
- 4) Rhinitis
- 5) Nausea, vomiting, diarrhea or abdominal discomfort
- 6) Drowsiness, lethargy, dizziness

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Renal Function Test - baseline and as clinically indicated
- 2) Hepatic Function Test - baseline, yearly and as clinically indicated
- 3) Pregnancy Test - as clinically indicated

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

LITHIUM (ESKALITH®, LITHOBID®, ESKALITH CR®, etc.)

INDICATIONS

- 1) Cyclic mood disorders
- 2) Augmentation of antidepressant therapy
- 3) Aggressive behavior secondary to a psychiatric disorder
- 4) Acute mania

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed

Relative:

- | | |
|-----------------------------|---------------------------------|
| 1) Cardiovascular disease | 5) Pregnancy/nursing mothers |
| 2) Severe dehydration | 6) Renal insufficiency |
| 3) Goiter or hypothyroidism | 7) Hyperparathyroidism |
| 4) Psoriasis | 8) Concomitant use of diuretics |

Precautions

- | | |
|------------------------------------|----------------------|
| 1) Diagnosis of a seizure disorder | 6) Urinary retention |
| 2) Parkinson's disease | 7) Thyroid disorders |
| 3) Dehydration | 8) Psoriasis |
| 4) Severe infections | 9) Severe acne |
| 5) Dementia, brain injuries | |

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category D.

Drug Interactions of Major Significance

- 1) Concomitant use of diuretics
- 2) Concomitant use of non-steroidal anti-inflammatory drugs
- 3) Iodine containing substances
- 4) Antipsychotics

Age-Specific Considerations

Monitoring of skeletal development in children if chronic lithium therapy is advised. Geriatric patients usually require lower doses and more frequent monitoring.

PRECAUTIONS TO CONSIDER

Side Effects Which Require Medical Attention

- 1) Weight gain
- 2) Edema
- 3) Hypothyroidism
- 4) Slurred speech
- 5) Drowsiness, lethargy
- 6) Nausea, vomiting, diarrhea
- 7) Ataxia
- 8) Trembling
- 9) Polydipsia
- 10) Polyuria
- 11) Headache

PATIENT MONITORING

Patient Monitoring Parameters

- 1) EKG (mandatory for everyone – baseline, yearly and as clinically indicated)
- 2) CBC – baseline, yearly and as clinically indicated
- 3) Thyroid studies – baseline; then TSH every 6 months and as clinically indicated
- 4) BUN, creatinine, glucose and electrolytes; baseline and as clinically indicated.
- 5) UA - baseline and as clinically indicated
- 6) Pregnancy Test - as clinically indicated
- 7) Lithium Levels – one week after initiation or dosage change and as clinically indicated
- 8) Calcium and phosphate, in children under 12, prior to initiation and as clinically indicated

Usual therapeutic Level: 0.6-1.5 meq/L (12 hour post dose)

Therapeutic ranges for the lab used should be listed on the report.

Dosing

Take with food to avoid stomach upset

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

OXCARBAZEPINE (TRILEPTAL®)

INDICATIONS

- 1) Cyclic mood disorders

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to carbamazepine or oxcarbazepine

Relative:

- 1) Hyponatremia

Precautions

- 1) Renal insufficiency

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

- 1) Oral contraceptives
- 2) Phenytoin

Age-Specific considerations

None

Side Effects Which Require Medical Attention

- 1) Psychomotor retardation
- 2) Concentration difficulties
- 3) Somnolence and fatigue
- 4) Ataxia, gait disturbances
- 5) Nausea, vomiting
- 6) Signs and symptoms of hyponatremia

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Electrolytes – baseline and as clinically indicated
- 2) Pregnancy Test – as clinically indicated

Dosing

See TDMHMR Formulary for dosage guidelines.

TOPIRAMATE (TOPAMAX®)

INDICATIONS

- 1) Cyclic mood disorders

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction and similarly severe significant hypersensitivity to medication prescribed

Relative:

- 1) Pregnancy/nursing mothers

Precautions

- 1) Kidney stones
- 2) Parasthesias
- 3) Renal or hepatic impairment

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

- 1) oral contraceptives
- 2) carbonic anhydrase inhibitors
- 3) valproic acid, carbamazepine, phenytoin

Age-Specific Considerations

- 1) Safety and efficacy in children have not been established

Side Effects Which May Require Medical Attention

- | | |
|-------------------------------|-------------------------------------|
| 1) Psychomotor slowing | 6) Nervousness |
| 2) Headache | 7) Drowsiness, lethargy, somnolence |
| 3) Diplopia | 8) Depression |
| 4) Dizziness | 9) Weight loss |
| 5) Nausea, vomiting, anorexia | |

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Renal Function Test - baseline, and as clinically indicated
- 2) Hepatic Function Test - baseline, and as clinically indicated
- 3) Pregnancy Test - as clinically indicated

Dosing

See TDMHMR Drug Formulary for dosage guidelines.
Exceptions to maximum dosage must be justified as per medication rule.

VALPROIC ACID (DEPAKENE®), DIVALPROEX SODIUM (DEPAKOTE®)

INDICATIONS

- 1) Cyclic mood disorders
- 2) Aggressive behavior secondary to a psychiatric disorder
- 3) Chronic Pain
- 4) Acute mania

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed

Relative

- 1) Hepatic disease/impairment
- 2) Blood dyscrasias, clotting disorders or concomitant drugs that alter clotting function (aspirin, non-steroidal anti-inflammatory drugs, warfarin, heparin, low molecular weight heparins, clopidogrel etc.)
- 3) Pregnancy/nursing mothers

Precautions

- 1) Hypoalbuminemia
- 2) Renal impairment

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category D.

Drug Interactions of Major Significance

- | | |
|----------------------------------------|------------------------------------------|
| 1) Concomitant CNS depressants | 7) Phenytoin |
| 2) Anticoagulants | 8) Lamotrigine |
| 3) Carbamazepine | 9) Non-steroidal anti-inflammatory drugs |
| 4) Felbamate | 10) Aspirin |
| 5) Concomitant hepatotoxic medications | 11) Phenobarbital |
| 6) Mefloquine | 12) Diazepam |

Age-specific Considerations

Age younger than 10 years old due to high risk of hepatic toxicity

Geriatric patients have increased amounts of free drug (use lower total plasma concentration or get free VPA plasma concentration)

Side Effects Which Require Medical Attention

- 1) Worsening confusion or disorientation
- 2) Nausea, vomiting, diarrhea, abdominal discomfort or anorexia
- 3) Bruising or bleeding
- 4) Clinically significant weight gain
- 5) Tremors

PATIENT MONITORING

Patient Monitoring Parameters

- 1) CBC - with differential and platelet count - baseline then one (1) to two (2) weeks after each dosage increase, and as clinically indicated
- 2) Hepatic function panel- baseline and as clinically indicated
- 3) Pregnancy Test – baseline and as clinically indicated
- 4) Valproic acid level – 1-2 weeks after initiation and dosage change, then as clinically indicated.
- 5) Serum creatinine and BUN at baseline and as clinically indicated

Usual therapeutic levels 50-150 mcg/ml

Therapeutic ranges for the lab used should be listed on the report.

Dosing

Take with food to avoid stomach upset

See TDMHMR Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

VERAPAMIL (CALAN®, ISOPTIN®)

INDICATIONS

- 1) Cyclic mood disorders

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction and similarly severe significant hypersensitivity to medication prescribed
- 2) Severe left ventricular dysfunction
- 3) Hypotension (systolic pressure < 90 mm Hg) or cardiogenic shock
- 4) Sick sinus syndrome (except in patients with a functioning artificial ventricular pacemaker)
- 5) Second or third AV block (except in patients with a functioning artificial ventricular pacemaker)
- 6) Patients with atrial flutter or atrial fibrillation and an accessory bypass tract (Wolff-Parkinson-White)

Relative:

- 1) Hepatic function impairment
- 2) Renal impairment
- 3) Cardiac conduction disturbances not outlined in absolute contraindications

Precautions

Pregnancy/nursing mothers

Pregnancy and Breast-Feeding

See precautions. FDA Pregnancy Category C.

Drug Interactions of Major Significance

- 1) Carbamazepine
- 2) Lithium

SEE TABLE A: Cytochrome P450 Drug Metabolism/Inhibition

Age-Specific Considerations

Safety and efficacy not established for those under 18 years old.

Side Effects Which Require Medical Attention

- | | |
|-----------------|-----------------------------------|
| 1) Hypotension | 4) Headache, chronic or recurrent |
| 2) Constipation | 5) Dizziness or lightheadedness |
| 3) Nausea | 6) Bradycardia |

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated
- 2) Renal and Liver Function Test - baseline and as clinically indicated
- 3) Vital signs with initial dosing and with any dosage change.
- 4) EKG within one year prior to initiation of drug.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

BENZODIAZEPINES

alprazolam (Xanax®), chlordiazepoxide (Librium®), clorazepate (Tranxene®), diazepam (Valium®), lorazepam (Ativan®), Oxazepam (Serax®), temazepam (Restoril®), triazolam (Halcion®), Clonazepam (Klonopin®)

INDICATIONS

- | | |
|-------------------------------------------------|----------------------------------------------------------------|
| 1) Anxiety disorders | 6) Akathisia |
| 2) Panic disorder | 7) Acute intervention for agitation/violent behavior |
| 3) Anxiety associated with depression | 8) Bipolar disorder, mania - adjunctive or second line therapy |
| 4) Short term use for the treatment of insomnia | 9) Alcohol/substance abuse withdrawal |
| 5) Sedative hypnotic withdrawal | |

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed

Relative:

- 1) Pregnancy/nursing mothers
- 2) Myasthenia gravis
- 3) Severe COPD

Precautions

- | | |
|----------------------------------------------|----------------------------------------------------|
| 1) Hepatic impairment | 6) Discontinuation or rapid dose reduction |
| 2) Porphyria | 7) Attention Deficit Hyperactivity Disorder (ADHD) |
| 3) History of alcohol and drug abuse | 8) Dementias/delirium |
| 4) Sleep apnea | |
| 5) Sedative hypnotic intoxication/dependence | |

Pregnancy and Breast-Feeding

See relative contraindications. Most benzodiazepines are FDA Pregnancy Category D or X.

Drug Interactions of Major Significance

- 1) Alcohol or CNS depressants
- 2) Clozapine (excessive sedation or respiratory depression)
- 3) Other drugs with respiratory depression

SEE TABLE A: **Cytochrome P450 Drug Metabolism/Inhibition**

Age-Specific Considerations

- 1) Lower doses should be used in children and elderly
- 2) Avoid long half-life drugs in elderly (causes falls)
- 3) May cause excitability in children, elderly and persons with developmental disabilities

Side Effects Which Require Medical Attention

- 1) Worsening agitation, disinhibition or aggression
- 2) Obtundation
- 3) Ataxia
- 4) Redness, swelling or pain at injection site

BENZODIAZEPINES - continued

alprazolam (Xanax®), chlordiazepoxide (Librium®), clorazepate (Tranxene®), diazepam (Valium®), lorazepam (Ativan®), Oxazepam (Serax®), temazepam (Restoril®), triazolam (Halcion®), Clonazepam (Klonopin®)

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

BUSPIRONE (BUSPAR®)

INDICATIONS

- | | |
|------------------------|------------------------------------------|
| 1) Anxiety Disorder | 3) Self injurious behavior |
| 2) Aggressive behavior | 4) Augmentation for resistant depression |

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed

Relative:

- 1) Hepatic function impairment
- 2) Renal impairment

Precautions

- 1) Pregnancy/nursing mothers
- 2) Doses > 45 mg.day in patients with developmental disabilities

Pregnancy and Breast-Feeding

See precautions. FDA Pregnancy Category B.

Drug Interactions of Major Significance

- 1) Concomitant monoamine oxidase (MAO) inhibitors
- 2) Erythromycin
- 3) Itraconazole
- 4) Nefazodone

Age-Specific Considerations

Safety and efficacy not established for those under 18 years old.

Side Effects Which Require Medical Attention

- 1) Worsening confusion or agitation
- 2) Restlessness (akathisia)
- 3) Nausea
- 4) Headache, chronic or recurrent
- 5) Dizziness or lightheadedness

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated

Dosing

See TDMHMR Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

AMOXAPINE (ASENDIN®)

INDICATIONS

- 1) Depression with psychotic features

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed
- 2) Recovery phase of myocardial infarction

Relative:

- 1) Pregnancy/nursing mothers
- 2) History of neuroleptic malignant syndrome

Precautions

Alcohol intoxication, bipolar disorder in the absence of a mood stabilizer, recent or current blood dyscrasias, cardiovascular disorders including arrhythmia, heart block and failure, patients at risk for paralytic ileus, glaucoma, hepatic function impairment, hyperthyroidism, prostatic hypertrophy, renal failure, diagnosis of a seizure disorder, urinary retention, Parkinson's disease, tardive dyskinesia or history of EPS.

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

None

Age-Specific Considerations

- 1) Not indicated in children under age 16

Side Effects Which Require Medical Attention

- 1) Anticholinergic effects
- 2) Sexual function impairment
- 3) Seizures
- 4) Dizziness, lightheadedness or fainting
- 5) EPS
- 6) Akathisia
- 6) Tardive dyskinesia
- 7) Symptoms of prolactin elevation (galactorrhea, amenorrhea, gynecomastia)
- 8) Signs and symptoms of neuroleptic malignant syndrome

PATIENT MONITORING

Patient Monitoring Parameters

- 1) EKG – baseline and as clinically indicated.
- 2) Pregnancy test - as clinically indicated.
- 3) Screening for abnormal involuntary movements using a standardized test-prior to initiation, six months, annually and as clinically indicated.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

BUPROPION (WELLBUTRIN® and WELLBUTRIN® SR)

INDICATIONS

- 1) Depressive Disorders
- 2) Attention deficit hyperactivity disorder
- 3) Nicotine Dependence

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed
- 2) Anorexia nervosa and bulimia
- 3) Diagnosis of a seizure disorder

Relative:

None

Precautions

Bipolar disorder in the absence of a mood stabilizer, hepatic function impairment, renal failure, CNS tumor, head trauma or history of seizures, pregnancy/nursing mothers.

Pregnancy and Breast-Feeding

See precautions. FDA Pregnancy Category B.

Drug Interactions of Major Significance

- 1) Concomitant monoamine oxidase inhibitors (furazolidone, procarbazine, selegiline, tranylcypromine, phenelzine, isoniazid)
- 2) Concomitant use of CNS depressants
- 3) Cimetidine
- 4) Concomitant use of medications with anticholinergic effects
- 5) Noradrenergic anti-hypertensive agents (clonidine, guanabenz, guanadrel, guanethidine)
- 6) Concomitant use of drugs that lower seizure threshold

Age-Specific Considerations

None

Side Effects Which Require Medical Attention

- 1) Delirium or cognitive dysfunction
- 2) Seizure
- 3) Headache, severe
- 4) Restlessness

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy test - as clinically indicated.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

MIRTAZAPINE (REMERON®)

INDICATIONS

- 1) Depressive Disorders
- 2) Insomnia

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction and similarly severe significant hypersensitivity to medication prescribed

Relative:

- 1) Pregnancy/nursing mothers

Precautions

Bipolar disorder in the absence of mood stabilizer, recovery phase of myocardial infarction, hepatic function impairment, renal failure, diagnosis of a seizure disorder

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

Concomitant monoamine oxidase inhibitors (or within 14 days of an MAOI)

Age-Specific Considerations

No data available in individuals under the age of 18

Side Effects Which Require Medical Attention

- 1) Agranulocytosis (or signs of infection: sore throat, fever, etc.)
- 2) Elevated cholesterol
- 3) Dizziness, unsteadiness, lightheadedness or fainting
- 4) Increased weight gain/appetite
- 5) Elevation in liver enzymes (ALT)
- 6) Orthostatic hypotension

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

MONOAMINE OXIDASE INHIBITORS

phenelzine (Nardil®), tranylcypromine (Parnate®)

INDICATIONS

- 1) Depressive Disorders
- 2) Panic Disorders
- 3) Anxiety Disorders

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed
- 2) Pheochromocytoma
- 3) Congestive heart failure
- 4) Concomitant use of another monoamine oxidase inhibitor
- 5) Concomitant use with meperidine
- 6) Concomitant use with SSRI's, buspirone or venlafaxine
- 7) Concomitant use of pressor amines (e.g. ephedrine, phenylpropanolamine, pseudoephedrine)
- 8) Stimulants

Relative:

- 1) Impaired renal function
- 2) Severe hepatic disease
- 3) Pregnancy/nursing mothers
- 4) Hyperthyroidism
- 5) Concomitant use of tricyclic antidepressant, methyl dopa, dopamine, levodopa, selegiline, dextromethorphan

Precautions

Bipolar disorder in the absence of a mood stabilizer, hepatic function impairment, renal function impairment, hypertension or history of hypertension, diagnosis of a seizure disorder or history of seizures, recent cardiac disease including myocardial infarction, concomitant use of antihypertensives.

Pregnancy and Breast-Feeding

See relative contraindications. Phenelzine and tranylcypromine are FDA Pregnancy Category C.

Age-Specific Considerations

No data available in individuals under the age of 18.

Side Effects Which Require Medical Attention

- 1) Headache
- 2) Sexual dysfunction
- 3) Blood pressure alteration, especially hypertension
- 4) Delirium
- 4) Dizziness, lightheadedness or fainting (orthostatic hypotension)
- 5) Clinically significant weight gain

MONOAMINE OXIDASE INHIBITORS - continued
phenelzine (Nardil®), tranylcypromine (Parnate®)

PRECAUTIONS TO CONSIDER (continued)

Drug Interactions of Major Significance

See absolute and relative contraindications

FOODS CONTAINING TYRAMINE

****High Amounts of Tyramine***

Smoked, aged or pickled meat or fish
Sauerkraut
Aged Cheeses such as Swiss and Cheddar
Yeast extracts
Fava beans

*****Moderate Amounts of Tyramine***

Beer
Avocados
Meat extracts
Red wines such as Chianti

******Low Amounts of Tyramine***

Caffeine-containing beverages
Distilled spirits
Chocolate
Soy sauce
Cottage and cream cheeses
Yogurt and sour cream

*May not consume

**May consume in moderation

***May consume

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

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Blood chemistries with emphasis on hepatic and renal functions; baseline, yearly and as clinically indicated during prolonged or high dose therapy.
- 2) Pregnancy test – as clinically indicated.
- 3) Blood pressure at baseline and during dosage adjustments and as clinically indicated. Therapeutic ranges for the lab used should be listed on the report.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

NEFAZODONE (SERZONE®)

INDICATIONS

- 1) Depressive Disorders

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed or trazodone.
- 2) Patients who were withdrawn from nefazodone because of evidence of liver injury.

Relative:

- 1) Pregnancy/nursing mothers

Precautions

- 1) Bipolar disorder in the absence of a mood stabilizer, recovery phase of myocardial infarction, hepatic function impairment, renal failure, diagnosis of a seizure disorder.
- 2) Active liver disease, elevated baseline serum transaminases.

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

- 1) Concomitant monoamine oxidase inhibitors (or within 14 days of an MAOI)
- 2) Alprazolam, triazolam
- 3) Carbamazepine
- 4) Pimozide

SEE TABLE A: **Cytochrome P450 Drug Metabolism/Inhibition**

Age-Specific Considerations

No data available in individuals under the age of 18.

Side Effects Which Require Medical Attention

- | | |
|------------------------------------------------------------|--------------------------------------------------|
| 1) Priapism | 5) Tinnitus |
| 2) Dizziness, unsteadiness,
lightheadedness or fainting | 6) Bradycardia less than 50 beats/min. |
| 3) Visual changes | 7) Elevated liver function tests |
| 4) Rash | 8) Dark urine, anorexia, malaise and GI symptoms |

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy test – as clinically indicated.
- 2) ALT and AST – baseline, at 1, 2, 4, 6 and 12 months, then annually and as clinically indicated. Stop drug if AST or ALT levels are 3 times (or greater) the upper limit of normal.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

SSRIs: CITALORPAM (CELEX®), FLUOXETINE (PROZAC®), SERTRALINE (ZOLOFT®), PAROXETINE (PAXIL®), FLUVOXAMINE (LUVOX®)

INDICATIONS

- | | |
|----------------------------------|-------------------------------|
| 1) Depressive Disorders | 5) Self injurious behavior |
| 2) Obsessive-compulsive disorder | 6) Late Luteal Phase Disorder |
| 3) Panic disorder | 7) Anxiety Disorders |
| 4) Eating disorders | 8) Social Phobia |

PRECAUTIONS TO CONSIDER

Contraindications

Absolute

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed
- 2) Concurrent administration of MAOI (or within 14 days of receiving citalopram, sertraline, paroxetine or fluvoxamine; or within 35 days of receiving fluoxetine)

Relative

- 1) Severe hepatic function impairment
- 2) Severe renal function impairment
- 3) Seizure disorder or history of seizure disorder

Precautions

Bipolar disorder in the absence of a mood stabilizer, hepatic function impairment, renal failure, diagnosis of a seizure disorder, diabetes mellitus, pregnancy/nursing mothers.

Pregnancy and Breast-Feeding

See precautions. FDA Pregnancy Category B

Drug Interactions of Major Significance

- | | |
|---------------------------------------|-------------------------------------|
| 1) See contraindications | 5) Valproic acid, divalproex sodium |
| 2) Alcohol | 6) Tolbutamide |
| 3) Concomitant use of CNS depressants | 7) Carbamazepine |
| 4) Phenytoin | |

SEE TABLE A: **Cytochrome P450 Drug Metabolism/Inhibition**

Age-Specific Considerations

None

Side Effects Which Require Medical Attention

- | | |
|-------------------------|-------------------------------|
| 1) Chills or fever | 6) Sexual function impairment |
| 2) Joint or muscle pain | 7) Severe GI distress |
| 3) Skin rash | 8) Akathisia |
| 4) Hives or itching | 9) Hyponatremia |
| 5) Trouble breathing | 10) Hypothyroidism |

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy test - as clinically indicated.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

TRAZODONE (DESYREL®)

INDICATIONS

- 1) Depressive Disorders
- 2) Insomnia

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed or nefazodone
- 2) Recovery phase of myocardial infarction

Relative:

- 1) Pregnancy/nursing mothers

Precautions

Alcohol intoxication, bipolar disorder in the absence of a mood stabilizer, cardiovascular disorders including arrhythmia, heart block and failure, hepatic function impairment, renal failure, diagnosis of a seizure disorder, hypotension and history of priapism.

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

None

Age-Specific Considerations

Has not been studied in persons younger than 18.

Side Effects Which Require Medical Attention

- 1) Priapism
- 2) Dizziness, lightheadedness or fainting

PATIENT MONITORING

Patient Monitoring Parameters

- 1) EKG - as clinically.
- 2) Pregnancy test - as clinically indicated.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.
Exceptions to maximum dosage must be justified as per medication rule.

TRICYCLIC ANTIDEPRESSANTS

amitriptyline (Elavil®), desipramine (Norpramin®, Pertofrane®), doxepin (Sinequan®), imipramine (Tofranil®), maprotiline (Ludiomil®), nortriptyline (Pamelor®, Aventyl®), protriptyline (Vivactil®), trimipramine (Surmontil®)

INDICATIONS

- | | |
|---------------------------------------------|----------------------------------|
| 1) Depressive Disorders | 6) Anxiety disorders |
| 2) Panic disorder | 7) Chronic Pain |
| 3) Bulimia nervosa | 8) Insomnia |
| 4) Attention deficit hyperactivity disorder | 9) Obsessive-Compulsive Disorder |
| 5) Functional enuresis | |

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed
- 2) Recovery phase of myocardial infarction
- 3) Pheochromocytoma

Relative:

- 1) Pregnancy/nursing mothers

Precautions

Alcohol intoxication, bipolar disorder in the absence of a mood stabilizer, recent or current blood dyscrasias, cardiovascular disorders including arrhythmia, diseases states where increased anticholinergic activity may complicate disease course (narrow-angle glaucoma, benign prostatic hypertrophy), heart block and failure, lower respiratory tract symptoms (asthma), , hepatic function impairment, hyperthyroidism, renal failure, diagnosis of a seizure disorder.

Pregnancy and Breast-Feeding

See relative contraindications. Most tricyclic antidepressants are FDA Pregnancy Category C or D.

Drug Interactions of Major Significance

- 1) Concomitant monoamine oxidase inhibitors (furazolidone, procarbazine, selegiline, tranylcypromine, phenelzine, isoniazid)
- 2) Concomitant use of CNS depressants
- 3) Cimetidine
- 4) Concomitant use of medications with anticholinergic effects
- 5) Noradrenergic anti-hypertensive agents (clonidine, guanabenz, guanadrel, guanethidine)
- 6) SSRI

SEE TABLE A: Cytochrome P450 Drug Metabolism/Inhibition

Age-Specific Considerations

Most agents are not recommended for use in children; if used, conservative dosing, EKG prior to dosage increase and plasma concentration monitoring are advised.

TRICYCLIC ANTIDEPRESSANTS

- continued

amitriptyline (Elavil®), desipramine (Norpramin®, Pertofrane®), doxepin (Sinequan®), imipramine (Tofranil®), maprotiline (Ludiomil®), nortriptyline (Pamelor®, Aventyl®), protriptyline (Vivactil®), trimipramine (Surmontil®)

PRECAUTIONS TO CONSIDER (continued)

Side Effects Which Require Medical Attention

- 1) Anticholinergic effects
- 2) Sexual function impairment
- 3) Seizures
- 4) Dizziness, lightheadedness or fainting (orthostatic hypotension)
- 5) Tachycardia greater than 100 beats/min
- 6) Jaundice
- 7) QTc >500 msec

PATIENT MONITORING

Patient Monitoring Parameters

- 1) EKG – baseline and as clinically indicated.
- 2) Pregnancy test - as clinically indicated.
- 3) Blood levels as clinically indicated. Therapeutic ranges for the lab used should be listed on the report. See Antidepressant Table in current TDMHMR Drug Formulary Book.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.
Exceptions to maximum dosage must be justified as per medication rule.

VENLAFAXINE (EFFEXOR® and EFFEXOR® ER)

INDICATIONS

- | | |
|---------------------------------------------|----------------------|
| 1) Depressive Disorders | 3) Anxiety disorders |
| 2) Attention deficit hyperactivity disorder | 4) Chronic Pain |

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed
- 2) Pheochromocytoma
- 3) Concomitant use of monoamine oxidase inhibitor

Relative:

- | | |
|------------------------------|--------------------------------------------|
| 1) Impaired renal function | 4) Hyperthyroidism |
| 2) Severe hepatic disease | 5) Hypertension or history of hypertension |
| 3) Pregnancy/nursing mothers | |

Precautions

Bipolar disorder in the absence of a mood stabilizer, hepatic function impairment, renal function impairment, diagnosis of a seizure disorder or history of seizures.

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

- 1) Concurrent administration of MAOI, or within 14 days of MAOI
- 2) SSRIs or other serotonergic drugs

SEE TABLE A: **Cytochrome P450 Drug Metabolism/Inhibition**

Age-specific Considerations

No data available in individuals under the age of 18.

Side Effects Which Require Medical Attention

- | | |
|-------------------------------------------------------|------------------------|
| 1) Headache | 4) Delirium |
| 2) Sexual dysfunction | 5) Visual disturbances |
| 3) Blood pressure alteration, especially hypertension | |

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy test – as clinically indicated.
- 2) Blood pressure during dosage titration and as clinically necessary.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

ANTIPSYCHOTICS

chlorpromazine (Thorazine®), fluphenazine (Prolixin®), haloperidol (Haldol®), loxapine (Loxitane®), molindone (Moban®), perphenazine (Trilafon®), thiothixene (Navane®), trifluoperazine (Stelazine®)

INDICATIONS

- 1) Disorders with psychotic symptoms (schizophrenia, schizoaffective disorder, manic disorders, depression with psychotic features, drug-induced psychosis, psychosis associated with other organic conditions)
- 2) Tourette's disorder (haloperidol only)
- 3) Personality disorders – schizotypal, paranoid and borderline
- 4) Acute and/or short term use for management of aggressive or violent behavior
- 5) Stereotypies

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction and similarly severe significant hypersensitivity to medication prescribed or structurally related medication
- 2) Severe CNS depression

Relative:

- 1) Pregnancy/nursing mothers
- 2) History of drug-induced agranulocytosis or leukopenia
- 3) Breast cancer
- 4) History of neuroleptic malignant syndrome
- 5) Narrow angle glaucoma (for chlorpromazine)
- 6) Impaired hepatic function
- 7) Prostatic hypertrophy (for chlorpromazine)
- 8) Parkinson's disease
- 9) Severe cardiovascular diseases, including certain conduction disturbances

Precautions

Alcoholism (active), recent or current blood dyscrasias, hepatic function impairment, angina, hypotension, congestive heart failure, arrhythmias, breast cancer, glaucoma, history of neuroleptic malignant syndrome, benign prostatic hypertrophy, Parkinson's disease, poorly controlled seizure disorder, urinary retention, patients at risk for paralytic ileus.

Pregnancy and Breast-Feeding

See relative contraindications. Most antipsychotics are FDA Pregnancy Category C.

ANTIPSYCHOTICS - continued

chlorpromazine (Thorazine®), fluphenazine (Prolixin®), haloperidol (Haldol®), loxapine (Loxitane®), molindone (Moban®), perphenazine (Trilafon®), thiothixene (Navane®), trifluoperazine (Stelazine®)

PRECAUTIONS TO CONSIDER (continued)

Drug Interactions of Major Significance

- 1) Concomitant use of CNS depressants
- 2) Antithyroid agents
- 3) Concomitant use of agents that cause EPS (including droperidol metoclopramide, amoxapine, metyrosine, pimozide, reserpine)
- 4) Concomitant use of hypotension producing agents
- 5) Levodopa
- 6) Concomitant anticholinergic drugs (for chlorpromazine)

SEE TABLE A: **Cytochrome P450 Drug Metabolism/Inhibition**

Age-Specific Considerations

- 1) Conservative dosing and careful monitoring are advised in children and the elderly

Side Effects Which Require Medical Attention

- 1) Anticholinergic effects (for chlorpromazine)
- 2) Acute extrapyramidal side effects (dystonia, pseudo-Parkinsonism)
- 3) Akathisia
- 4) Hypotension
- 5) Rashes, photosensitivity and altered pigmentation
- 6) Tardive dyskinesia or other late-onset EPS
- 7) Visual changes
- 8) Early symptoms of agranulocytosis effects (fever, sore throat, weakness)
- 9) Fluctuating vital signs
- 10) Altered consciousness
- 11) Galactorrhea
- 12) Amenorrhea
- 13) Gynecomastia
- 14) Poikilothermia
- 15) Signs and symptoms of neuroleptic malignant syndrome

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated
- 2) **Screening for abnormal involuntary movements using a standardized test - prior to initiation, six months, annually and as clinically indicated**
- 3) Eye exams (prolonged or high-dose therapy with chlorpromazine dose of 2,000mg/day) yearly or as indicated
- 4) EKG - as clinically indicated.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.
Exceptions to maximum dosage must be justified as per medication rule.

ANTIPSYCHOTICS

mesoridazine (Serentil®), thioridazine (Mellaril®)

INDICATIONS

- 1) Schizophrenia, refractory (failed other classes of antipsychotics)

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction and similarly severe significant hypersensitivity to medication prescribed or structurally related medication
- 2) Severe CNS depression
- 3) QTc > 450 msec
- 4) Hypomagnesemia
- 5) Hypokalemia
- 6) Retinitis Pigmentosa
- 7) Concomitant use of other drugs known to prolong QTc interval

Relative:

- 1) Pregnancy/nursing mothers
- 2) History of drug induced agranulocytosis or leukopenia
- 3) Breast cancer
- 4) History of neuroleptic malignant syndrome
- 5) Narrow angle glaucoma
- 6) Impaired hepatic function
- 7) Prostatic hypertrophy
- 8) Parkinson's disease
- 9) Severe cardiovascular diseases, including certain conduction disturbances

Precautions

Alcoholism (active), recent or current blood dyscrasias, hepatic function impairment, angina, hypotension, congestive heart failure, arrhythmias, breast cancer, glaucoma, history of neuroleptic malignant syndrome, prostatic hypertrophy, Parkinson's disease, poorly controlled seizure disorder, urinary retention, patients at risk for paralytic ileus.

Pregnancy and Breast-Feeding

See relative contraindications. Most antipsychotics are FDA Pregnancy Category C.

ANTIPSYCHOTICS - continued

mesoridazine (Serentil®), thioridazine (Mellaril®)

PRECAUTIONS TO CONSIDER (continued)

Drug Interactions of Major Significance

- 1) Concomitant use of CNS depressants
- 2) Antithyroid agents
- 3) Concomitant use of agents that cause EPS (including droperidol metoclopramide, amoxapine, metyrosine, pimozide, reserpine)
- 4) Concomitant use of hypotension producing agents
- 5) Levodopa
- 6) Concomitant anticholinergic drugs

SEE TABLE A: Cytochrome P450 Drug Metabolism/Inhibition

Age-Specific Considerations

- 1) Conservative dosing and careful monitoring are advised in children and the elderly

Side Effects Which Require Medical Attention

- 1) Anticholinergic effects
- 2) Acute extrapyramidal side effects (akathisia, dystonia, pseudo-Parkinsonism)
- 3) Hypotension
- 4) Rashes, photosensitivity and altered pigmentation
- 5) Tardive dyskinesia or other late-onset EPS
- 6) Visual changes
- 7) Early symptoms of agranulocytosis effects (fever, sore throat, weakness)
- 8) Fluctuating vital signs
- 9) Altered consciousness
- 10) Galactorrhea
- 11) Amenorrhea
- 12) Gynecomastia

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated
- 2) Screening for abnormal involuntary movements using a standardized test - prior to initiation, six months, annually and as clinically indicated
- 3) Eye exams (prolonged or high-dose therapy with thioridazine dose if 800 mg/day) yearly or as indicated
- 4) EKG - baseline; 7-14 days after dosage change; 7-14 days after other medication changes that could significantly alter the cardiac effects of mesoridazine and thioridazine; every six months, and as clinically indicated
- 5) Serum potassium level – baseline, every six months, and as clinically indicated
- 6) Serum magnesium level – baseline and as clinically indicated (especially if potassium level is low)

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

CLOZAPINE (CLOZARIL®)

INDICATIONS

- 1) For use in patients with refractory schizophrenia or schizoaffective disorder, defined as failure on two antipsychotics from two different chemical families given for sufficient time (6-12 weeks) at a sufficient dose (1000 mg/day of chlorpromazine equivalents).
- 2) For use in schizophrenic or schizoaffective patients who cannot tolerate other antipsychotics.
- 3) Psychosis associated with other organic conditions, (who have failed two antipsychotics, or who cannot tolerate other antipsychotics)
- 4) Manic disorders with psychosis (in patients who have failed two antipsychotics)

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed
- 2) Myeloproliferative disorders
- 3) History of clozapine-induced agranulocytosis

Relative:

- 1) History of drug induced agranulocytosis or leukopenia
- 2) Breast cancer
- 3) History of neuroleptic malignant syndrome
- 4) Narrow angle glaucoma
- 5) Impaired hepatic function
- 6) Prostatic hypertrophy
- 7) Parkinson's disease
- 8) Severe cardiovascular diseases
- 9) Concomitant use of agents that may cause bone marrow suppression, including carbamazepine (Tegretol®)

Precautions

Alcoholism (active), recent or current blood dyscrasias, diabetes mellitus, hepatic function impairment, angina, hypotension, congestive heart failure, arrhythmias, breast cancer, glaucoma, history of neuroleptic malignant syndrome, prostatic hypertrophy, obesity, Parkinson's disease, diagnosis of a seizure disorder, urinary retention, patients at risk for paralytic ileus, pregnancy/nursing mothers.

Pregnancy and Breast-Feeding

See precautions. FDA Pregnancy Category B.

PRECAUTIONS TO CONSIDER

Drug Interactions of Major Significance

- 1) Concomitant use of CNS depressants
- 2) Antithyroid agents
- 3) Concomitant use of agents that cause EPS (including droperidol, metoclopramide, amoxapine, metyrosine, pimozide, reserpine)
- 4) Concomitant use of hypotension producing agents
- 5) Levodopa

SEE TABLE A: **Cytochrome P450 Drug Metabolism/Inhibition**

Age-Specific Considerations

Safety and efficiency have not been established in children under the age of 16. Geriatric patients may be more susceptible to orthostatic and anticholinergic effects.

Side Effects Which Require Medical Attention

- 1) Anticholinergic effects
- 2) Hypotension
- 3) Rashes, photosensitivity and altered pigmentation
- 4) Tardive dyskinesia or other late-onset EPS
- 5) Visual changes
- 6) Early symptoms of agranulocytosis (fever, sore throat, weakness)
- 7) Fluctuating vital signs
- 8) Altered consciousness
- 9) Fever
- 10) Drooling
- 11) Hyperglycemia
- 12) Clinically significant weight gain
- 13) Seizure

PATIENT MONITORING

Patient Monitoring Parameters

- 1) CBC as indicated by guidelines established by the manufacturer.
- 2) Pregnancy Test – as clinically indicated
- 3) Screening for abnormal involuntary movements using a standardized test - prior to initiation, annually and as clinically indicated.
- 4) EKG and CPK – as clinically indicated
- 5) Fasting glucose monitoring (finger stick or serum) every three months
- 6) HgbA_{1c} as clinically indicated

Dosing

See TDMHMR Drug Formulary for dosage guidelines.
Exceptions to maximum dosage must be justified as per medication rule.

DECANOATES

fluphenazine decanoate (Prolixin® Decanoate), haloperidol decanoate (Haldol® Decanoate)

INDICATIONS

- 1) Chronic psychotic disorder requiring prolonged parenteral treatment

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction and similarly severe significant hypersensitivity to medication prescribed or structurally related medication
- 2) Severe CNS depression

Relative:

- 1) Pregnancy/nursing mothers
- 2) History of drug induced agranulocytosis or leukopenia
- 3) Breast cancer
- 4) History of neuroleptic malignant syndrome
- 5) Impaired hepatic function
- 6) Parkinson's disease
- 7) Severe cardiovascular diseases

Precautions

Alcoholism (active), recent or current blood dyscrasias, hepatic function impairment, angina, hypotension, congestive heart failure, arrhythmias, breast cancer, , history of neuroleptic malignant syndrome, Parkinson's disease, poorly controlled seizure disorder.

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

- 1) Concomitant use of CNS depressants
- 2) Antithyroid agents
- 3) Concomitant use of agents that cause EPS (including droperidol, metoclopramide, amoxapine, metyrosine, pimozide, reserpine)
- 4) Levodopa

DECANOATES - continued

fluphenazine decanoate (Prolixin® Decanoate), haloperidol decanoate (Haldol® Decanoate)

PRECAUTIONS TO CONSIDER

Age-Specific Considerations

Conservative dosing and careful monitoring are advised in children and the elderly

Side Effects Which Require Medical Attention

- 1) Extrapyramidal side effects
- 2) Akathisia
- 3) Rashes
- 4) Tardive dyskinesia or other late-onset EPS
- 5) Early symptoms of agranulocytosis (fever, sore throat, weakness)
- 6) Fluctuating vital signs
- 7) Altered consciousness
- 8) Galactorrhea
- 9) Amenorrhea
- 10) Gynecomastia
- 11) Signs and symptoms of neuroleptic malignant syndrome

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test – as clinically indicated.
- 2) Screening for abnormal involuntary movements using a standardized test - prior to initiation, six months, annually and as clinically indicated.
- 3) Blood levels as clinically indicated. Therapeutic ranges for the lab used should be listed on the report.
- 4) EKG - as clinically indicated.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.
Exceptions to maximum dosage must be justified as per medication rule.

RISPERIDONE (RISPERDAL®), OLANZAPINE (ZYPREXA®), QUETIAPINE (SEROQUEL®), ZIPRASIDONE (GEODON®)

INDICATIONS

- 1) Disorders with psychotic symptoms (schizophrenia, schizoaffective disorder, manic disorders, depression with psychotic features, drug-induced psychosis, psychosis associated with other medical conditions)
- 2) Severe aggression secondary to a psychiatric disorder
- 3) Self Injurious Behavior secondary to a psychiatric disorder

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction and similarly severe significant hypersensitivity to medication prescribed
- 2) Severe CNS depression
- 3) QTc > 500 msec
- 4) For ziprasidone - Recent myocardial infarction, uncompensated congestive heart failure or when other drugs are being used that also prolong the QT interval such as (not complete list) quinidine, dofetilide, pimozide, sotalol, thioridazine, moxiflocin, and sparfloxacin

Relative:

- | | |
|----------------------------------------------------------|-----------------------------------|
| 1) Pregnancy/nursing mothers | 5) Impaired hepatic function |
| 2) History of drug induced agranulocytosis or leukopenia | 6) Parkinson's disease |
| 3) Breast cancer | 7) Severe cardiovascular diseases |
| 4) History of neuroleptic malignant syndrome | |

Precautions

Alcoholism (active), cataracts (quetiapine) recent or current blood dyscrasias, diabetes mellitus (olanzapine), hepatic function impairment, , angina, hypotension, congestive heart failure, arrhythmias, breast cancer, history of neuroleptic malignant syndrome, obesity, Parkinson's disease, poorly controlled seizure disorder.

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

- 1) Concomitant use of CNS depressants
- 2) Concomitant use of agents that cause EPS (including droperidol, metoclopramide, amoxapine, metyrosine, pimozide, reserpine)
- 3) Concomitant use of hypotension producing agents
- 4) Levodopa
- 5) Antithyroid agents
- 6) Drugs that prolong the QT interval

SEE TABLE A: **Cytochrome P450 Drug Metabolism/Inhibition**

RISPERIDONE (RISPERDAL®), OLANZAPINE (ZYPREXA®), QUETIAPINE (SEROQUEL®), ZIPRASIDONE (GEODON®) - continued

PRECAUTIONS TO CONSIDER - continued

Age-Specific Considerations

Safety and efficacy have not been established in children under the age of 18. Conservative dosing is advised in the elderly.

Side Effects Which Require Medical Attention

- 1) Anticholinergic effects
- 2) Acute extrapyramidal side effects (dystonia, pseudo-Parkinsonism)
- 3) Akathisia
- 3) Hypotension
- 4) Rashes, photosensitivity and altered pigmentation
- 5) Tardive dyskinesia or other late-onset EPS
- 6) Visual changes
- 7) Early symptoms of agranulocytosis (fever, sore throat, weakness)
- 8) Fluctuating vital signs
- 9) Altered consciousness
- 10) Galactorrhea (risperidone)
- 11) Amenorrhea (risperidone)
- 12) Gynecomastia (risperidone)
- 13) Hyperglycemia (olanzapine)
- 14) Weight gain
- 15) Cataracts (quetiapine)
- 16) QTc > 500 msec

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated
- 2) Screening for abnormal involuntary movements using a standardized test - prior to initiation, annually and as clinically indicated.
- 3) Quetiapine (Seroquel®) – Eye exam (direct ophthalmoscope or slit lamp) at initiation or shortly thereafter within 4 to 6 weeks and every six (6) months while on drug. This is completed for the monitoring of cataracts.
- 4) EKG – as clinically indicated
- 5) Glucose monitoring every three months (olanzapine)
- 6) HgbA_{1c} as clinically indicated (olanzapine)
- 7) Patients at risk for hypokalemia (and/or hypomagnesemia) should have baseline serum potassium and magnesium before starting ziprasidone

Dosing

See TDMHMR Drug Formulary for dosage guidelines.
Exceptions to maximum dosage must be justified as per medication rule.

SEDATING ANTIHISTAMINES

diphenhydramine HCL (Benadryl®), hydroxyzine HCL (Atarax®)

INDICATIONS

- | | |
|-----------------------------|-------------------------------|
| 1) Anxiety | 3) Parkinsonism and other EPS |
| 2) Aggression and agitation | 4) Insomnia |

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) Delirium
- 2) Anticholinergic intoxication

Relative:

- 1) Nursing mothers
- 2) Renal impairment
- 3) Hepatic impairment
- 4) Elderly, debilitated patients
- 5) Lower respiratory tract symptoms (asthma)
- 6) Diseases states where increased anticholinergic activity may complicate disease course (narrow-angle glaucoma, benign prostatic hypertrophy)

Precautions

- 1) Photosensitivity
- 2) Respiratory impairment

Pregnancy and Breast-Feeding

FDA Pregnancy Category B (diphenhydramine), Category C (hydroxyzine)

Drug Interactions of Major Significance

- 1) Concomitant use of monoamine oxidase (MAO) inhibitors

Age-Specific Considerations

- 1) May cause excitability in children, elderly and persons with developmental disabilities

Side Effects Which Require Medical Attention

- 1) Worsening confusion or agitation
- 2) Somnolence
- 3) Nausea
- 4) Headache
- 5) Dizziness or lightheadedness

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

ZALEPLON (SONATA®)

INDICATIONS

- 1) Short term treatment of insomnia

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly significant hypersensitivity to the medication prescribed

Relative:

None

Precautions

- 1) Pregnancy/nursing mothers
- 2) Impaired hepatic function
- 3) History of alcohol or drug abuse
- 4) Sleep Apnea

Pregnancy and Breast-Feeding

See precautions. FDA Pregnancy Category C.

Drug interactions of major significance

- 1) Alcohol or CNS Depressants
- 2) Cimetidine

Age-Specific considerations

- 1) Safety and efficacy not established for those under 18 years old.

Side Effects Which Require Medical Attention

- 1) Ataxia
- 2) Confusion or disorientation
- 3) Rash
- 4) Falling or dizziness
- 5) Worsening agitation, disinhibition or aggression

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated

Dosing

See TDMHMR Drug Formulary for dosage guidelines.
See medication rule for exceptions (documentation required).

ZOLPIDEM (AMBIEN®)

INDICATIONS

- 1) Short term treatment of insomnia

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly significant hypersensitivity to the medication prescribed

Relative:

None

Precautions

- 1) Pregnancy/nursing mothers
- 2) Impaired hepatic function
- 3) History of alcohol or drug abuse
- 4) Sleep Apnea

Pregnancy and Breast-Feeding

See precautions. FDA Pregnancy Category B.

Drug interactions of major significance

- 1) Alcohol or CNS Depressants

Age-Specific considerations

- 1) Safety and efficacy not established for those under 18 years old.

Side Effects Which Require Medical Attention

- 1) Ataxia
- 2) Confusion or disorientation
- 3) Rash
- 4) Falling or dizziness
- 5) Worsening agitation, disinhibition or aggression

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

See medication rule for exceptions (documentation required).

BETA-BLOCKERS

propranolol (Inderal®), atenolol (Tenormin®), metoprolol (Lopressor®), nadolol (Corgard®)

INDICATIONS

- 1) Aggressive behavior
- 2) Performance anxiety
- 3) Lithium- or valproic acid- induced tremors
- 4) Akathisia

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) Second and third degree heart block
- 2) Cardiogenic shock
- 3) Sinus bradycardia
- 4) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed

Relative:

- 1) Impaired pulmonary function (COPD, etc.)
- 2) Pregnancy/nursing mothers
- 3) Diabetes mellitus
- 4) Asthma

Precautions

- 1) Hyperthyroidism
- 2) Peripheral vascular disease
- 3) Diabetes mellitus
- 4) Hepatic function impairment
- 5) Myasthenia Gravis
- 6) Psoriasis
- 7) Renal function impairment
- 8) Hyperlipidemia
- 9) Discontinuation or rapid dose reduction
- 10) Congestive heart failure

Pregnancy and Breast-Feeding

See relative contraindications. Most beta-blockers are Pregnancy Category B, C, or D.

Drug Interactions of Major Significance

- 1) Allergy extracts
- 2) Antidiabetic agents
- 3) Antihypertensives
- 4) Sympathomimetics
- 5) Xanthenes (caffeine, theophylline)

SEE TABLE A: **Cytochrome P450 Drug Metabolism/Inhibition**

BETA-BLOCKERS- continued

propranolol (Inderal®), atenolol (Tenormin®), metoprolol (Lopressor®), nadolol (Corgard®)

PRECAUTIONS TO CONSIDER (continued)

Age-Specific Considerations

None

Side Effects Which Require Medical Attention

- 1) Dizziness
- 2) Difficulty breathing
- 3) Edema or swelling
- 4) Cold hands or feet
- 5) Tiredness or weakness
- 6) Nightmares
- 7) Confusion or disorientation
- 8) Bradycardia or hypotension

PATIENT MONITORING

Patient Monitoring Parameters

- 1) EKG (Age 45 or over) - baseline and as clinically indicated
- 2) Pregnancy Test - as clinically indicated
- 3) Pulse rate, blood pressure – baseline, prior to each dosage increase, quarterly, and as clinically indicated

Dosing

See TDMHMR Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

CLOMIPRAMINE (ANAFRANIL®)

INDICATIONS

- 1) Obsessive - compulsive disorder

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed
- 2) Recovery phase of myocardial infarction
- 3) Pheochromocytoma

Relative:

- 1) Pregnancy/nursing mothers

Precautions

Alcohol intoxication, bipolar disorder in the absence of a mood stabilizer, recent or current blood dyscrasias, cardiovascular disorders including arrhythmia, diseases states where increased anticholinergic activity may complicate disease course (narrow-angle glaucoma, benign prostatic hypertrophy), heart block and failure, hepatic function impairment, hyperthyroidism, renal failure, diagnosis of a seizure disorder

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category D.

Drug Interactions of Major Significance

- 1) Concomitant monoamine oxidase inhibitors (furazolidone, procarbazine, selegiline, tranylcypromine, phenelzine, isoniazid)
- 2) Concomitant use of CNS depressants
- 3) Cimetidine
- 4) Concomitant use of medications with anticholinergic effects
- 5) Noradrenergic anti-hypertensive agents (clonidine, guanabenz, guanadrel, guanethidine)
- 6) SSRI

SEE TABLE A: Cytochrome P450 Drug Metabolism/Inhibition

Age-Specific Considerations

Not recommended for use in children under age 10, conservative dosing is advised. EKG prior to dosage increase.

Side Effects Which Require Medical Attention

- 1) Anticholinergic effects
- 2) Sexual function impairment
- 3) Seizures
- 4) Dizziness, lightheadedness or fainting (orthostatic hypotension)
- 5) Tachycardia greater than 100 beats/min.
- 8) Jaundice
- 9) QTc >500 msec

PATIENT MONITORING

Patient Monitoring Parameters

- 1) EKG – baseline and as clinically indicated.
- 2) Pregnancy test – as clinically indicated.

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

GABAPENTIN (NEURONTIN®)

INDICATIONS

- 1) Chronic Pain Disorders

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction and similarly severe significant hypersensitivity to medication prescribed

Relative:

- 1) Renal Failure
- 2) Pregnancy/nursing mothers

Precautions

- 1) Compromised renal function

Pregnancy and Breast-Feeding

See relative contraindications. FDA Pregnancy Category C.

Drug Interactions of Major Significance

- 1) Antacids
- 2) Cimetidine
- 3) Oral contraceptives

Age-Specific Considerations

Safety and efficacy in children <12 has not been established

Side Effects Which Require Medical Attention

- 1) Blurred or double vision
- 2) Clinically significant weight gain
- 3) Rhinitis
- 4) Tremor
- 5) Nausea, vomiting diarrhea or abdominal discomfort
- 6) Drowsiness, lethargy
- 7) Nystagmus

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Renal Function Test - baseline and as clinically indicated

Dosing

See TDMHMR Drug Formulary for dosage guidelines.

Exceptions to maximum dosage must be justified as per medication rule.

NALTREXONE (REVIA®)

INDICATIONS

- | | |
|-----------------------|----------------------------|
| 1) Alcoholism | 3) Self injurious behavior |
| 2) Narcotic addiction | 4) Eating disorders |

PRECAUTIONS TO CONSIDER

Contraindications

Absolute:

- 1) History of anaphylactic reaction and similarly severe significant hypersensitivity to medication prescribed
- 2) Acute hepatitis or liver failure

Relative:

- 1) Hepatic function impairment
- 2) Renal impairment

Precautions

- 1) Pregnancy/nursing mothers

Pregnancy and Breast-Feeding

See precautions. FDA Pregnancy Category C.

Drug Interactions of Major Significance

Concomitant opioid-containing products

Age-Specific Considerations

Safety and efficacy not established for those under 18 years old.

Side Effects Which Require Medical Attention

- 1) Hepatotoxicity
- 2) Opioid withdrawal
- 3) Nausea
- 4) Headache, chronic or recurrent
- 5) Dizziness or lightheadedness

PATIENT MONITORING

Patient Monitoring Parameters

- 1) Pregnancy Test - as clinically indicated
- 2) Hepatic Function Panel - baseline and as clinically indicated

Dosing

See TDMHMR Drug Formulary for dosage guidelines.
Exceptions to maximum dosage must be justified as per medication rule.

STIMULANTS

methylphenidate (Ritalin®, Concerta™), dextroamphetamine (Dexedrine®), dextroamphetamine/amphetamine mixture (Adderall®)

INDICATIONS

- 1) Attention deficit disorder, with or without hyperactivity
- 2) Narcolepsy (methylphenidate; dextroamphetamine; dextroamphetamine/amphetamine mixture)
- 3) Severe treatment resistant depression or depression in medically compromised patients

PRECAUTIONS TO CONSIDER

Contraindications

Absolute

- 1) History of anaphylactic reaction or similarly severe significant hypersensitivity to the medication prescribed
- 2) Severe depression in children (methylphenidate)

Relative

- 1) Tourette's syndrome or other motor or vocal tics
- 2) Pre-existing psychosis
- 3) Hypertension
- 4) Cardiovascular disease (dextroamphetamine, dextroamphetamine/amphetamine mixture)
- 5) Glaucoma (dextroamphetamine, methylphenidate, dextroamphetamine/amphetamine mixture)
- 6) History of drug abuse/dependence
- 7) Hyperthyroidism
- 8) Pregnant or nursing mothers

Precautions

- 1) Family history of tics
- 2) Epilepsy or other seizure history

Pregnancy and Breast-Feeding

See relative contraindications. Stimulant either are FDA Pregnancy Category C or unknown.

Drug Interactions of Major Significance

- 1) Monoamine oxidase (MAO) inhibitors
- 2) Stimulants/Sympathomimetics
- 3) Beta-Blockers (amphetamine)
- 4) Antidepressants (amphetamine)
- 5) Digitalis glycosides (amphetamine)
- 6) Meperidine (amphetamine)
- 7) Thyroid hormones (amphetamine)

STIMULANTS

- continued

methylphenidate (Ritalin®, Concerta™), dextroamphetamine (Dexedrine®), dextroamphetamine/amphetamine mixture (Adderall®)

PRECAUTIONS TO CONSIDER (continued)Age-Specific Considerations

None

Side Effects Which Require Medical Attention

- 1) Hypertension
- 2) Tachycardia
- 3) Weight loss
- 4) Abnormal motor movements or tics
- 5) Psychosis
- 6) Hyperthermia
- 7) Irritability or nervousness
- 8) Insomnia
- 9) Chest pain

PATIENT MONITORINGPatient Monitoring Parameters

- 1) Height and weight in children (baseline and as clinically indicated)

Dosing

See TDMHMR Drug Formulary for dosage guidelines

Exceptions to maximum dosage must be justified as per medication rule.