

INTERIM FORMULARY UPDATE

Draft

The following recommendations, made at the February 10, 2006 meeting of the Executive Formulary Committee, are approved:

Product(s) **approved to be added** to the DADS/DSHS Drug Formulary based on the Formulary Review:

| Generic Name | Brand Name | Dosage Form | Classification |
|--------------|------------|---|--|
| Valsartan | Diovan® | Tablet: 40 mg, 80 mg, 160 mg, 320 mg | Angiotensin II Receptor Blocking Agent (ARBs) |
| Olmesartan | Benicar® | Tablet: 5 mg, 20 mg, 40 mg | Angiotensin II Receptor Blocking Agent (ARBs) |

Product(s) **approved to be added** to the DADS/DSHS Drug Formulary based on the Sectional Reviews for Gastrointestinal, Genitourinary Agents: **Not completed will be presented at next meeting.**

Dosage strength/formulations **recommended to be deleted** from the DADS/DSHS Drug Formulary based on the Sectional Review: **Not completed will be presented at next meeting.**

Previously, the Executive Formulary Committee requested input from the field regarding the following drugs proposed for deletion from the DADS/DSHS Drug Formulary. Based on the field's response, the following drugs are deleted from the Drug Formulary.

Products **deleted** from the DADS/DSHS Drug Formulary based on these previous Sectional Reviews: for Infectious Disease Agents:

| Generic Name | Brand Name | Dosage Form | Dosage Forms Still Available |
|-----------------------------|------------------------|---|------------------------------|
| Cefoperazone | Cefobid® | Infusion, premixed in dextrose: 1 g, 2 g | None |
| Chloroquine | Aralen® | Tablet: 250 mg, 500 mg | None |
| Cloxacillin | Cloxapen®, Tegopen® | Capsule: 250 mg, 500 mg Powder for oral suspension: 125 mg/5 ml | None |
| Ethionamide | | Tablet, sugar-coated: 250 mg | None |
| Pentamidine | Pentam® | Inhalation: 300 mg Powder for injection: 300 mg | None |
| Pyrantel | Antiminth® | Capsule: 180 mg Liquid, oral: 50 mg/ml Suspension, oral: 50 mg/ml | None |
| Thiabendazole | Mintezol® | Suspension, oral: 500 mg/5 ml Tablet, chewable: 500 mg | None |
| Ticarcillin | Ticar® | Powder for injection: 1 g, 3 g, 6 g, 20 g, 30 g | None |
| Ticarcillin/ clavulanate | Timentin® | Powder for injection: 3.1 g | None |

Other recommendations:

- All drug audit criteria be changed from hepatic function panel to hepatic function testing and TDMHMR Drug Formulary to DSHS/DADS Drug Formulary.
- The statement “Monitor for emergence of suicidal ideation or behavior” be added to all antidepressant audit criteria as a monitoring parameter.

Other recommendation(s)/addition(s)/revisions(s) to the DADS/DSHS Drug Formulary:

- Add ARBs valsartan and olmesartan to the reserve category. Criteria for use of the ARBs will be: Prior failure to ACE inhibitor therapy due to intolerable side effects.
- Remove divalproex ER from the reserve category.

Approved:



Steven P. Shon, M.D, Medical Director
Behavioral Health and Community
Services

Date: April 10, 2006