INTERIM FORMULARY UPDATE

The following recommendations, made at the September 25, 2009 meeting of the Executive Formulary Committee, are approved:

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

Generic Name	Brand Name	Dosage Form	Classification
Cycloserine	Seromycin®	Capsule: 250 mg	Infectious Disease
			Agents; Antibiotic;
			Miscellaneous
			(Reserve)
Paliperidone	Invega® Sustenna TM	Injection, Long-Acting: 39 mg,	Psychotropic Agents;
palmitate		78 mg, 117 mg, 156 mg,	Antipsychotic
		234 mg	
Epoetin alfa	Epogen [®] , Procrit [®]	Injection: 2,000 Units/ml,	Blood Modifying
		3,000 Units/ml,	Agents; Miscellaneous
		4,000 Units/ml,	(Reserve)
		10,000 Units/ml,	
		20,000 Units/ml,	
		40,000 Units/ml	

Product(s) **recommended to be added** to the DADS/DSHS Drug Formulary based on the Sectional Review for Agents for Migraine:

Generic Name	Brand Name	Dosage Form	Classification
Aspirin/	Excedrin®	Tablet: 250/250/65	Agents for Migraine
Acetaminophen/			
caffeine			

Dosage strength(s) added to the DADS/DSHS Drug Formulary based on an additional review of the Formulary:

- Brimonidine
 - o Solution, ophthalmic: 0.1%
- Trizanidine
 - o Capsule: 2 mg, 4 mg.
- Calcipotriene
 - o Solution, topical: 0.005%
- Donepezil
 - o Tablet, oral disintegrating: 10 mg

Approved:

Ann Richards, Pharm.D. BCPP

Pharmacy Services Director, San Antonio State Hospital

10-22-09

Date: