UPDATE 14
Ontario Drug Benefit
Formulary/Comparative Drug Index
No. 39
Effective January 2, 2007

SUMMARY OF CHANGES

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New Single Source Drug(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02246360	Aranesp	150mcg/0.3mL	Pref Syr-0.3mL Pk	AMG	402.0000
09857185	Aranesp	200mcg/0.4mL	Pref Syr-0.4mL Pk	AMG	552.0000
09857186	Aranesp	300mcg/0.6mL	Pref Syr-0.6mL Pk	AMG	828.0000
09857187	Aranesp	500mcg/1.0mL	Pref Syr-1.0mL Pk	AMG	1380.0000

These products must be prescribed based on the following criteria:

For the treatment of chemotherapy-induced anemia in patients with malignant cancer undergoing myelosuppressive chemotherapy with a hemoglobin count of less than 100g/L and MCV level between 75fL and 120fL.

Note: Darbepoietin therapy should be re-assessed after 3 months of therapy and should not be continued for those patients who do not respond to therapy (i.e. Hgb level has not improved by at least 15g/L or transfusions were required after first 2 weeks of therapy) or who are no longer anemic.

The following dosage regimens for Aranesp are recommended by the Committee to Evaluate Drugs:

I. 200mcg q2weekly x 6 weeks, then increase to 300mcg q2weekly if inadequate response; OR
II. 500mcg q3weekly x maximum duration of 3 cycles, then decrease to 300mcg q3weekly for maintenance; OR
III. 150mcg qweekly.

02241112	Avandia	2mg	Tab	GSK	1.2853
02241113	Avandia	4mg	Tab	GSK	2.0169
02241114	Avandia	8mg	Tab	GSK	2.8842

Note:
These products must be prescribed based on the following criteria for the treatment of type 2 diabetes in a patient with:

a. Inadequate glycemic control (HbA1C>7%) using maximal doses of glyburide (10mg/day) AND metformin (2000mg/day); OR
b. Inadequate glycemic control and demonstrated intolerance or contraindication to metformin and are on maximal doses of glyburide; OR
c. Inadequate glycemic control and demonstrated intolerance or contraindication to glyburide and are on maximal doses of metformin; OR
d. Demonstrated intolerance or contraindication to both glyburide AND metformin; OR
e. Adequate glycemic control (HbA1c <=7%) who develops intolerance or contraindication to glyburide or metformin; OR
f. HbA1c <=7% and greater than 50% of fasting blood glucose (FBG >7mmol/L) or post-prandial plasma glucose (PPG>10mmol/L) levels are not within target range and using maximally tolerated doses of glyburide and metformin.

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02273233	Caduet	5mg/10mg	Tab	PFI	2.4500
02273241	Caduet	5mg/20mg	Tab	PFI	3.2000
02273268	Caduet	5mg/40mg	Tab	PFI	3.2000
02273276	Caduet	5mg/80mg	Tab	PFI	3.2000
02273284	Caduet	10mg/10mg	Tab	PFI	2.4500
02273292	Caduet	10mg/20mg	Tab	PFI	3.2000
02273306	Caduet	10mg/40mg	Tab	PFI	3.2000
02273314	Caduet	10mg/80mg	Tab	PFI	3.2000

Note: Patients should be stabilized on a statin or a calcium channel blocker before being initiated on Caduet.

02265540	Crestor	5mg	Tab	AZC	1.2900

02231587	Eprex	10,000IU/mL	Pref Syr - 1mL Pk	JNO	142.5000
02206072	Eprex	20,000IU/mL	Inj Sol-1mL Vial Pk	JNO	267.9000
02240722	Eprex	40,000IU/mL	Pref Syr - 1mL Pk	JNO	401.8500

These products must be prescribed based on the following criteria:

For the treatment of chemotherapy-induced anemia in patients with malignant cancer undergoing myelosuppressive chemotherapy with a hemoglobin count of less than 100g/L and MCV level between 75fL and 120fL.

Note: Erythropoietin therapy should be re-assessed after 3 months of therapy and should not be continued for those patients who do not respond to therapy (i.e. Hgb level has not improved by at least 15g/L or transfusions were required after first 2 weeks of therapy) or who are no longer anemic.

The following dosage regimens for Eprex are recommended by the Committee to Evaluate Drugs:

I. 150 IU/kg subcutaneously 3 times a week for 4 weeks. If no response, the dose may be increased to 300 IU/kg subcutaneously 3 times a week;OR

II. 40,000 IU once weekly. If no response after 4 weeks, the dose may be increased to 60,000 IU once weekly for 4 weeks.

02276429	Fosavance	70mg/70mcg	Tab	MFC	9.4800

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02253275	Gleevec	100mg	Tab	NOV	25.5821
02253283	Gleevec	400mg	Tab	NOV	102.3283

These products must be prescribed based on the following criteria:

1) For the treatment of Philadelphia chromosome-positive chronic myeloid leukemia (CML) in chronic phase.

The initial dose is 400 mg/day. The dose may be increased up to a maximum of 800 mg/day in patients who do not have an adequate hematologic response at 3 months or cytogenetic response at 1 year; or if there has been loss of a previously achieved hematologic and/or cytogenetic response.

2) For the treatment of Philadelphia chromosome-positive chronic myeloid leukemia (CML) in blast crisis or accelerated phase.

The initial dose is 600 mg/day. The dose may be increased to a maximum of 800 mg/day in patients who do not have an adequate hematologic response at 3 months or cytogenetic response at 1 year; or loss of a previously achieved hematologic and/or cytogenetic response.

02279320	Invirase	500mg	Tab	HLR	4.2000

Note: For the treatment of HIV/AIDS, the prescriber must be approved for the Facilitated Access mechanism.

02243797	Pariet	20mg	Tab	JNO	1.3000
00839191	Sandostatin	50mcg/mL	Inj Sol-1mL Amp Pk	NOV	4.9900
00839205	Sandostatin	100mcg/mL	Inj Sol-1mL Amp Pk	NOV	9.4200
00839213	Sandostatin	500mcg/mL	Inj Sol-1mL Amp Pk	NOV	44.2700
02049392	Sandostatin	200mcg/mL	Inj Sol-5mL Vial Pk	NOV	90.6000
02239323	Sandostatin LAR	10mg	Inj Kit Pk	NOV	1183.3100
02239324	Sandostatin LAR	20mg	Inj Kit Pk	NOV	1578.4600
02239325	Sandostatin LAR	30mg	Inj Kit Pk	NOV	1975.7600
02240000	Trelstar (1Month)	3.75mg/Vial	Inj Pd-Vial Pk	PAL	291.0000
09857199	Trelstar (1Month)	3.75mg/Vial	Inj Pd with Sterile Water-Vial Pk	PAL	291.0000
02243856	Trelstar LA (3 Month)	11.25mg/Vial	Inj Pd-Vial Pk	PAL	891.0000
09857200	Trelstar LA (3 Month)	11.25mg/Vial	Inj Pd with Sterile Water-Vial Pk	PAL	891.0000
02247128	Viread	300mg	Tab	GIL	16.2500

Note: For the treatment of HIV/AIDS, the prescriber must be approved for the Facilitated Access mechanism.

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP

New Multi-Source Drug(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02284987	Apo-Cilazapril/HCTZ (Interchangeable with Inhibace Plus)	5mg/12.5mg	Tab	APX	0.3950
02286629	Apo-Mirtazapine (Interchangeable with Remeron)	30mg	Tab	APX	0.6200
02266393	Apo-Salvent Ipravent Sterules (Interchangeable with Combivent UDV)	500mcg/2.5mg/2.5mL	Inh Sol-2.5mL Pk	APX	0.7340

Reason for Use Code — **Clinical Criteria**

For the vast majority of patients, a metered dose inhaler is the preferred therapy. Nebulizer therapy will be reimnursed for patients who are unable to use a metered dose inhaler, including an inhaler with a spacer attachment, or a turbuhaler.

256 — Patients who have a tracheostomy.
LU Authorization Period: Indefinite.

257 — Patients with cystic fibrosis in whom nebulizer therapy is indicated;
LU Authorization Period: Indefinite.

258 — Patients with severe mental or physical disabilities;
LU Authorization Period: Indefinite.

259 — Patients who have previously used nebulizer therapy within the last 12 months period.
LU Authorization Period: Indefinite.

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02285975	Novo-Acyclovir (Interchangeable with Zovirax)	800mg	Tab	NOP	2.2664

Reason for Use Code — **Clinical Criteria**

In contrast to bacterial infections, viral relication precedes clinical signs and symptoms. Since antiviral agents are only active against replicating viruses, clinical benefit in reducing severity of symptoms and duration of illness is only marginal, at best. Therefore, treatment initiated beyond the stated time frames below is of no value, and treatment of mild cases should be carefully considered, in light of the minimal benefit which will be achieved. In addition, the balance of evidence indicates that the use of acyclovir in normal hosts in an attempt to prevent post-herpetic neuralgia is of no value.

Where specified, treatment must begin within the time frames indicated for the product to be reimbursed. There is no benefit from the therapy begun after these time frames.
Acyclovir tablets will be reimbursed when prescribed for:

95 — Herpes zoster in immunocompetent patients 50 years of age or older, up to 72 hours after appearance of lesions. Dose: 800mg 5 times/day for 7 days.
LU Authorization Period: 1 year.

96 — Herpes zoster ophthalmicus regardless of age, up to 72 hours after appearance of lesions.
Dose: 800mg 5 times/day for 7 days
LU Authorization Period: 1 year.

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
97	Herpes zoster in immunocompromised patients regardless of age and time elapsed from onset. Dose: 800mg 5 times/day for 7 days LU Authorization Period: 1 year.				
314	Varicella zoster in immunocompetent patients greater than or equal to 12 years of age, up to 24 hours after appearance of lesions. Dose: 20mg/kg/dose (max. 800mg) 4 times/day for 5 days. NETWORK NOTE; Network will limit supply up to 7 days and up to 35 tablets. LU Authorization Period: 1 year.				
02281392	Novo-Tamsulosin SR (Interchangeable with Flomax)	0.4mg	Cap	NOP	0.6000
Reason for Use Code	**Clinical Criteria**				
351	For the management of benign prostatic hyperplasia where six weeks of treatment with other formulary alpha blockers (e.g., doxazosin, terazosin) have been ineffective. LU Authorization Period: Indefinite.				
352	For the management of benign prostatic hyperplasia where other formulary alpha blockers have produced intolerable side effects. LU Authorization Period: Indefinite.				
02275023	Novo-Venlafaxine XR	37.5mg	ER Cap	NOP	0.5879
02275031	Novo-Venlafaxine XR	75mg	ER Cap	NOP	1.1758
02275058	Novo-Venlafaxine XR (Interchangeable with Effexor XR)	150mg	ER Cap	NOP	1.2414
02274388	PMS-Azithromycin	100mg/5mL	O/L	PMS	0.7467
02274396	PMS-Azithromycin (Interchangeable with Zithromax)	200mg/5mL	O/L	PMS	1.0578
02273551	PMS-Fenofibrate Micro (Interchangeable with Lipidil Micro)	200mg	Cap	PMS	1.0890
02282941	Ratio-Fentanyl	25mcg/hr	Trans Patch	RPH	4.2500
02282968	Ratio-Fentanyl	50mcg/hr	Trans Patch	RPH	8.0000
02282976	Ratio-Fentanyl	75mcg/hr	Trans Patch	RPH	11.2500
02282984	Ratio-Fentanyl (Interchangeable with Duragesic)	100mcg/hr	Trans Patch	RPH	14.0000
Reason for Use Code	**Clinical Criteria**				
201	For the treatment of chronic pain in patients who cannot tolerate, or have failed treatment with a listed long-acting opioid. LU Authorization Period: 1 Year.				

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02264757	Ratio-Risperidone	0.25mg	Tab	RPH	0.2075
02264765	Ratio-Risperidone	0.5mg	Tab	RPH	0.3475
02264773	Ratio-Risperidone	1mg	Tab	RPH	0.4800
02264781	Ratio-Risperidone	2mg	Tab	RPH	0.9583
02264803	Ratio-Risperidone	3mg	Tab	RPH	1.4375
02264811	Ratio-Risperidone (Interchangeable with Risperdal)	4mg	Tab	RPH	1.9167
02277344	Ratio-Trazodone	50mg	Tab	RPH	0.2214
02277352	Ratio-Trazodone (Interchangeable with Desyrel)	100mg	Tab	RPH	0.3956
02277360	Ratio-Trazodone (Interchangeable with Desyrel Dividose)	150mg	Tab	RPH	0.5812
02247074	Sandoz Cyclosporine (Interchangeable with Neoral)	50mg	Cap	SDZ	1.9400

Reason for Use Code	Clinical Criteria
177	For the treatment of psoriasis in patients who have failed, or are intolerant to, other systemic therapies, including methotrexate, acitretin or PUVA: LU Authorization Period: Indefinite
178	For the treatment of rheumatoid arthritis in patients who have failed, or are intolerant to, other systemic therapies, including Disease-Modifying Antirheumatic Drugs (DMARDs). LU Authorization Period: Indefinite

02278650	Sandoz Famciclovir (Interchangeable with Famvir)	500mg	Tab	SDZ	4.2280

Reason for Use Dose	Clinical Criteria
147	Herpes zoster in patients 50 years of age or older, up to 72 hours*after appearance of lesions. Dose: 500mg 3 times/day for 7 days. *The patient must begin treatment within the time frame specified for the product to be reimbursed. There is no benefit from the therapy begun after this time frame. NETWORK NOTE: Network will limit supply to 7 days and 21 tablets. LU Authorization Period: 1 Year.

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02280264	Sandoz Felodipine	5mg	ER Tab	SDZ	0.4620
02280272	Sandoz Felodipine (Interchangeable with Plendil)	10mg	ER Tab	SDZ	0.6925
09857203	Sandoz Felodipine	5mg	SR Tab	SDZ	0.4620
09857204	Sandoz Felodipine (Interchangeable with Renedil)	10mg	SR Tab	SDZ	0.6925
02283964	Sandoz Leflunomide	10mg	Tab	SDZ	4.7950
02283972	Sandoz Leflunomide (Interchangeable with Arava)	20mg	Tab	SDZ	4.7950
Reason for Use Code	**Clinical Criteria**				
331	For the treatment of rheumatoid arthritis in patients who have failed, or are intolerant to, one or more of the listed Disease-Modifying Anti-Rheumatic Drugs (DMARDs) LU Authorization Period: Indefinite.				
02279983	Taro-Mupirocin (Interchangeable with Bactroban)	2%	Oint	TAR	0.2482

Manufacturer Requested Discontinued Drug(s)

Please note that these disontinued products will remain on the formulary until the current stock is depleted.

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
00603279	Apo-Ampi	250mg	Cap	APX
00603295	Apo-Ampi	500mg	Cap	APX
00441708	Apo-Methazide-15	250mg & 15mg	Tab	APX
00441716	Apo-Methazide-25	250mg & 25mg	Tab	APX
00441724	Apo-Oxtriphylline	100mg	Tab	APX
00441732	Apo-Oxtriphylline	200mg	Tab	APX
00511692	Apo-Oxtriphylline	300mg	Tab	APX
02231089	Apo-Oxybutynin	1mg/mL	O/L	APX
00713325	Apo-Procainamide	250mg	Cap	APX
00713333	Apo-Procainamide	375mg	Cap	APX
00713341	Apo-Procainamide	500mg	Cap	APX
02231780	PMS-Fenofibrate Micro	200mg	Cap	PMS
02053187	Ratio-Trazodone	50mg	Tab	RPH
02053195	Ratio-Trazodone	100mg	Tab	RPH
02053209	Ratio-Trazodone	150mg	Tab	RPH
00010383	Sintrom	1mg	Tab	PEN
00010391	Sintrom	4mg	Tab	PEN
02214997	Ventodisk	200mcg/blister	Pd Inh-120 Dose Pk	GLW
02215004	Ventodisk	400mcg/blister	Pd Inh-120 Dose Pk	GLW

Delisted Drug(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
02238903	Benztropine Omega	2mg/2mL	Inj Sol-2mL Pk	OMG

New Drug Identification Number(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
01928783	Balminil DM	3mg/mL	O/L	TCH

New Drug Benefit Price(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02243087	Zyprexa Zydis	10mg	Rapid Disslove Tab	LIL	6.7500

New Manufacturer Name(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
02246714	Amcort	0.1%	Cr	TAR
00436895	Balminil DM	3mg/mL	O/L	ROG

Not-A-Benefit Drug(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
02232570	Airomir HFA	100mcg /Metered Dose	Inh-200 Dose Pk	MMH
00016578	Aldomet	250mg	Tab	MSD
00249920	Alupent	2mg/mL	O/L	BOE
01919636	Ancef	500mg	Inj Pd-Vial Pk	SMJ
02017539	Aralen	250mg	Tab	SAO
00631353	Atasol	80mg/mL	O/L	HOR
00293504	Atasol-15	15mg	Tab	HOR
00293512	Atasol-30	30mg	Tab	HOR
00272469	Bactrim	400mg & 80mg	Tab	HLR
00272485	Bactrim Sugar Free	40mg & 8mg/mL	O/L	HLR
00371823	Bactrim-DS	800mg & 160mg	Tab	HLR
00016616	Benemid	500mg	Tab	MSD
00716618	Betaderm	0.05%	Cr	TAR
00716642	Betaderm	0.05%	Oint	TAR
00716626	Betaderm	0.1%	Cr	TAR
00716650	Betaderm	0.1%	Oint	TAR
02100193	Betnovate	0.1%	Lot	SHI
02084082	Bezalip	200mg	Tab	HLR
00027901	Celestoderm-V	0.1%	Cr	SCH
00028363	Celestoderm-V	0.1%	Oint	SCH
00027898	Celestoderm-V/2	0.05%	Cr	SCH
00028355	Celestoderm-V/2	0.05%	Oint	SCH
00476390	Choledyl	10mg/mL	O/L	PDA
00476412	Choledyl	200mg	Tab	PDA
00016128	Cogentin	2mg/2mL	Inj Sol 2mL Pk	MSD
00016357	Cogentin	2mg	Tab	MSD
00677442	Colyte		Pd-4L Pk	ZYN
00607126	Corgard	40mg	Tab	BQU
00463256	Corgard	80mg	Tab	BQU
00523372	Corgard	160mg	Tab	BQU
00502200	Cortate	1%	Cr	SCH
00502197	Cortate	1%	Oint	SCH
00813966	Cytotec	100mcg	Tab	SEA
00632600	Cytotec	200mcg	Tab	SEA
00012696	Dalmane	15mg	Cap	ICN
00012718	Dalmane	30mg	Cap	ICN
00016462	Decadron	0.5mg	Tab	MSD
00354309	Decadron	4mg	Tab	MSD
00252417	Deltasone	50mg	Tab	UPJ
02229552	Diarr-eze	2mg	Caplet	PMS
01924753	Ditropan	1mg/mL	O/L	JNO
00587699	Dolobid	250mg	Tab	FRS
00000299	EES-200	40mg/mL	O/L	ABB
00453617	EES-400	80mg/mL	O/L	ABB

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
00583782	EES-600	600mg	Tab	ABB
02213230	Eltroxin	0.3mg	Tab	GLW
00666130	Empracet-30	300mg & 30mg	Tab	BWE
00000434	Erythrocin	250mg	Tab	ABB
00632716	Feldene	20mg	Sup	PFI
00604402	Glysennid	8.6mg	Tab	NOV
00512559	Halcion	0.125mg	Tab	UPJ
00010413	Hygroton	50mg	Tab	GEI
02063859	Kaochlor-10	1.33mEq/mL	O/L	PMJ
02063840	Kaon	1.33mEq/mL	O/L	PMJ
00004758	Kemadrin	5mg	Tab	BWE
01999796	Kenalog	0.1%	Oint	WSQ
02163152	Lidemol	0.05%	Emol Cr	MEC
02161923	Lidex	0.05%	Cr	MEC
02161966	Lidex	0.05%	Oint	MEC
00360503	Ludiomil	50mg	Tab	NOV
00360511	Ludiomil	75mg	Tab	NOV
01997637	Macrodantin	50mg	Cap	PGP
00386391	Megace	40mg	Tab	BQU
02170671	Methotrexate	50mg/2mL	Inj Sol-2mL Pk	WAY
00599956	Mexitil	100mg	Cap	BOE
00599964	Mexitil	200mg	Cap	BOE
00487805	Midamor	5mg	Tab	MSD
00349917	Modecate	125mg/5mL	Inj Susp-5mL Pk	BQU
02036290	Monitan	100mg	Tab	WAY
02036436	Monitan	200mg	Tab	WAY
02036444	Monitan	400mg	Tab	WAY
02042363	Mysoline	125mg	Tab	WAY
02042355	Mysoline	250mg	Tab	WAY
02162458	Naprosyn	500mg	Sup	HLR
02162474	Naprosyn	250mg	Tab	HLR
02162482	Naprosyn	375mg	Tab	HLR
02162490	Naprosyn	500mg	Tab	HLR
00325449	Nebcin	80mg/2mL	Inj Sol-2mL Pk	LIL
02048477	Nolvadex	10mg	Tab	AZC
00643025	Noroxin	400mg	Tab	MSD
02099144	Norpramin	75mg	Tab	HMR
00216666	Novasen	325mg	Ent Tab	NOP
01927647	Nozinan	2mg	Tab	AVE
01926411	Orudis	100mg	Sup	AVE
00568643	Parlodel	5mg	Cap	NOV
00010448	Pertofrane	25mg	Tab	GEI
00155225	Ponstan	250mg	Cap	PFI
00675229	Proloprim	100mg	Tab	BWE
00677590	Proloprim	200mg	Tab	BWE
00029076	Pronestyl	250mg	Cap	BQU
00296031	Pronestyl	375mg	Cap	BQU
00353523	Pronestyl	500mg	Cap	BQU
00476714	Pyridium	100mg	Tab	PDA
00634093	Questran		Oral Pd-42 Dose Pk	BQU
00464880	Questran 9g Pk		Oral Pd-Pouch Pk	BQU

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
01918486	Questran Light 4g Pk		Oral Pd-Pouch Pk	BQU
02166372	Roychlor	1.33mEq/mL	O/L	WAB
00029165	Rubramin	1mg/mL	Inj Sol-10mL Pk	BQU
00270644	Septra	40mg & 8mg/mL	O/L	BWE
00270636	Septra	400mg & 80mg	Tab	BWE
00368040	Septra DS	800mg & 160mg	Tab	BWE
00584274	Sinequan	150mg	Cap	PFI
00483923	Sotacor	160mg	Tab	BQU
01927752	Stemetil	5mg	Tab	AVE
01927760	Stemetil	10mg	Tab	AVE
00028053	Sulamyd	10%	Oph Sol	SCH
01916750	Tagamet	60mg/mL	O/L	SMJ
00461008	Theo-Dur	300mg	LA Tab	AZC
02161974	Topsyn	0.05%	Gel	MEC
00264938	Tranxene	3.75mg	Cap	ABB
02154862	Tridesilon	0.05%	Cr	CPL
02154870	Tridesilon	0.05%	Oint	CPL

Discontinued Drug(s) (Removed from Payment & Listing)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
00587702	Apo-Haloperidol	2mg/mL	O/L	APX
00441740	Apo-Quinidine Sulfate	200mg	Tab	APX
02046741	Apo-Salvent	5mg/mL	Inh Sol-10mL Pk	APX
00441759	Apo-Sulfinpyrazone	100mg	Tab	APX
00360228	Apo-Thioridazine	10mg	Tab	APX
00360198	Apo-Thioridazine	25mg	Tab	APX
00360236	Apo-Thioridazine	50mg	Tab	APX
00360244	Apo-Thioridazine	100mg	Tab	APX
02046253	ASAdol	325mg	Ent Tab	PMS
00176222	Cafergot-PB		Tab	NOV
00364134	Calmurid-HC	1% & 10%	Cr	GAC
00016438	Cortone	5mg	Tab	MSD
00497894	Cuprimine	125mg	Cap	MSD
00016497	Edecrin	50mg	Tab	MSD
00016306	Elavil	2mg/mL	O/L	MSD
00015709	Ergotrate	0.2mg	Tab	LIL
00716804	Fluoderm	0.01%	Oint	TAR
00028266	Fulvicin U/F	125mg	Tab	SCH
00028274	Fulvicin U/F	250mg	Tab	SCH
00028282	Fulvicin U/F	500mg	Tab	SCH
00223824	Garamycin	80mg/2mL	Inj Sol-2ml Pk	SCH
02219468	Gen Cromoglycate	1%	Inh Sol-2mL Pk	GEN
02229705	Humalog	100U/mL	Inj Susp-5X1.5mL Pk	LIL
09853847	Humulin 20/80 Cartridge	100U/mL	Inj Susp-5X3mL Pk	LIL
00646148	Humulin L Lente	1000U/10mL	Inj Susp-10mL Pk	LIL
00733075	Humulin-U Ultralente	1000U/10mL	Inj Susp-10mL Pk	LIL
00514551	Iletin II NPH	1000U/10mL	Inj Susp-10mL Pk	LIL
00513644	Iletin II Regular	1000U/10mL	Inj Susp-10mL Pk	LIL
00005517	Ismelin	25mg	Tab	CIB
00641855	Ludiomil	10mg	Tab	NOV
00009938	Megacillin 500	100000IU/mL	O/L	FRS
00027375	Mellaril	2mg/mL	O/L	NOV
00345504	Nalfon	600mg	Tab	LIL
00325457	Nebcin	20mg/2mL	Inj Sol-2mL Pk	LIL
00694371	Neosporin	10000U & 2.5mg & 0.025mg/mL	Oph/Ot Sol	BWE
02156083	Novo-Keto	100mg	Sup	NOP
02176130	Novo-Methacin	50mg	Sup	NOP
02176149	Novo-Methacin	100mg	Sup	NOP
00549657	Novo-Pranol	120mg	Tab	NOP
00151416	Novo-Tetra	25mg/mL	O/L	NOP
00717657	Nu-Ampi	250mg	Cap	NXP
00717673	Nu-Ampi	500mg	Cap	NXP
00717495	Nu-Ampi	125mg/5mL	Susp	NXP
00717649	Nu-Ampi	250mg/5mL	Susp	NXP
01913204	Nu-Hydral	10mg	Tab	NXP
00717509	Nu-Medopa	250mg	Tab	NXP

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
00717576	Nu-Medopa	500mg	Tab	NXP
02185415	Nu-Megestrol	40mg	Tab	NXP
00865621	Nu-Naprox	125mg	Tab	NXP
02165368	Nu-Salbutamol	2mg	Tab	NXP
02165376	Nu-Salbutamol	4mg	Tab	NXP
00717606	Nu-Tetra	250mg	Cap	NXP
02043041	Ovral	0.05mg & 0.25mg	Tab-28 Pk	WAY
02229617	Pen-Vee	60mg/mL	O/L	PMS
02162245	Prodiem Plain		Gran	NOV
00248835	PVF 500	60mg/mL	O/L	FRS
00677485	Ratio-Alprazolam	0.25mg	Tab	RPH
00677477	Ratio-Alprazolam	0.5mg	Tab	RPH
02236799	Ratio-Azathioprine	50mg	Tab	RPH
00851639	Ratio-Captopril	12.5mg	Tab	RPH
00851833	Ratio-Captopril	25mg	Tab	RPH
00851647	Ratio-Captopril	50mg	Tab	RPH
00851655	Ratio-Captopril	100mg	Tab	RPH
01948806	Ratio-Desipramine	75mg	Tab	RPH
02032376	Ratio-Dipivefrin	0.1%	Oph Sol	RPH
02243215	Ratio-Doxazosin	1mg	Tab	RPH
02243216	Ratio-Doxazosin	2mg	Tab	RPH
02243217	Ratio-Doxazosin	4mg	Tab	RPH
02242327	Ratio-Famotidine	20mg	Tab	RPH
02242328	Ratio-Famotidine	40mg	Tab	RPH
00675199	Ratio-Flurbiprofen	100mg	Tab	RPH
00552429	Ratio-Haloperidol	2mg/mL	O/L	RPH
02143364	Ratio-Indomethacin	25mg	Cap	RPH
02143372	Ratio-Indomethacin	50mg	Cap	RPH
01934147	Ratio-Indomethacin	50mg	Sup	RPH
02126176	Ratio-Levodopa/Carbidopa	100mg/10mg	Tab	RPH
02126168	Ratio-Levodopa/Carbidopa	100mg/25mg	Tab	RPH
02126184	Ratio-Levodopa/Carbidopa	250mg/25mg	Tab	RPH
02218410	Ratio-Moclobemide	150mg	Tab	RPH
00851663	Ratio-Nadolol	40mg	Tab	RPH
00851671	Ratio-Nadolol	80mg	Tab	RPH
00851698	Ratio-Nadolol	160mg	Tab	RPH
00756814	Ratio-Naproxen	500mg	Sup	RPH
00615315	Ratio-Naproxen	250mg	Tab	RPH
00615323	Ratio-Naproxen	375mg	Tab	RPH
00615331	Ratio-Naproxen	500mg	Tab	RPH
02152568	Ratio-Orciprenaline	2mg/mL	O/L	RPH
02240249	Ratio-Timolol Maleate	0.5%	Oph Sol	RPH
02204541	Rhodacine	25mg	Cap	RHO
02204568	Rhodacine	50mg	Cap	RHO
02240622	Rhoxal-Famotidine	20mg	Tab	RHO
02240623	Rhoxal-Famotidine	40mg	Tab	RHO
01934805	Robigesic	16mg/mL	O/L	WHB
02217015	Roferon-A	3mu/Vial	Inj Sol-1mL Pk	HLR
01911996	Roferon-A	9mu/Vial	Pd for Inj	HLR
02217066	Roferon-A	18mu/Vial	Inj Sol-3mL Pk	HLR
01912003	Roferon-A	18mu/Vial	Pd for Inj	HLR

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
00637793	Salbutamol	2mg	Tab	EVM
00637807	Salbutamol	4mg	Tab	EVM
01902628	Sans-Acne	2% & 44%	Top Sol	GAC
00027456	Serentil	25mg	Tab	NOV
00534579	Slow -Trasicor	80mg	LA Tab	NOV
00534587	Slow -Trasicor	160mg	LA Tab	NOV
00855774	Solganal	50mg/mL	Inj Sol-10ml Pk	SCH
00028061	Sulamyd	30%	Oph Sol	SCH
00030392	Synalar Mild	0.01%	Oint	SYN
00030422	Synalar Regular	0.025%	Cr	SYN
02162512	Synalar Regular	0.025%	Oint	MEC
02162504	Synalar Solution	0.01%	Top Sol	MEC
00424927	Synamol Mild	0.01%	Emol Cr	SYN
00424935	Synamol Regular	0.025%	Emol Cr	SYN
01944436	Taro-Sone	0.05%	Oint	TAR
00509353	Timolide	10mg & 25mg	Tab	FRS
00028169	Trilafon Conc.	3.2mg/mL	O/L	SCH
00322741	Triptil	10mg	Tab	MSD
00015431	Velbe Inj		Pd-10mg Pk	LIL
00010308	Warfilone	5mg	Tab	FRS

Not-A-Benefit Drug(s) (Removed From Listing)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
00027529	Mellaril	10mg	Tab	SAN
00027537	Mellaril	25mg	Tab	SAN
00027545	Mellaril	50mg	Tab	SAN
00027553	Mellaril	100mg	Tab	SAN

Status Change(s) from Limited Use to General Benefit

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02248728	Apo-Alendronate	10mg	Tab	APX	0.8775
02248730	Apo-Alendronate	70mg	Tab	APX	4.4250
02258110	Co-Alendronate	70mg	Tab	COB	4.4250
02201011	Fosamax	10mg	Tab	MFC	1.8800
02245329	Fosamax	70mg	Tab	MFC	9.4800
02270129	Gen-Alendronate	10mg	Tab	GEN	0.8775
02247373	Novo-Alendronate	10mg	Tab	NOP	0.8775
02261715	Novo-Alendronate	70mg	Tab	NOP	4.4250
02273179	PMS-Alendronate	70mg	Tab	PMS	4.4250
02275279	Ratio-Alendronate	70mg	Tab	RPH	4.4250

Trade Name Change(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
00436895	Koffex DM	3mg/mL	O/L	TCH
02246714	Taro-Amcinonide	0.1%	Cr	TPH

Change(s) to Nutrition Product(s)

PIN	PRODUCT	MFR	COST PACKAGE	AMT MOH PAYS	AMT PATIENT PAYS
G. PEDIATRIC FORMULA, CHEMICALLY DEFINED 1. OLIGOMERIC (SEMI-ELEMENTAL)					
97972630	Nutramigen 4.94kcal/g Pd-400g Pk	MJN	16.0400	16.0400	0.0000

Other Changes

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02192683	3TC	150mg	Tab	GSK	4.5187
02192691	3TC	10mg/mL	O/L	GSK	
02247825	3TC	300mg	Tab	GSK	9.0373
01919385	Abenol	120mg	Sup	PEN	0.5417
01919393	Abenol	325mg	Sup	PEN	0.6692
01919407	Abenol	650mg	Sup	PEN	0.7683
02230434	Acet 120	120mg	Sup	PMS	0.5367
02230436	Acet 325	325mg	Sup	PMS	0.6625
02230437	Acet 650	650mg	Sup	PEN	0.7608
00589241	Acetaminophen	325mg	Tab	DPC	
00589233	Acetaminophen Extra Strength	500mg	Tab	DPC	
02242572	Actos	15mg	Tab	LIL	2.1463
02242573	Actos	30mg	Tab	LIL	3.0070
02242574	Actos	45mg	Tab	LIL	4.5213
02245126	Advair 125	25/125mcg/Metered Dose	Inh 120-Dose Pk	GSK	89.7000
02245127	Advair 250	25/250mcg/Metered Dose	Inh 120-Dose Pk	GSK	127.3300
02240835	Advair Diskus	50/100mcg	Inh 60-Dose Pk	GSK	74.9300
02240836	Advair Diskus	50/250mcg	Inh 60-Dose Pk	GSK	89.7000
02240837	Advair Diskus	50/500mcg	Inh 60-Dose Pk	GSK	127.3300
02243541	Agenerase	50mg	Cap	GSK	
02243542	Agenerase	150mg	Cap	GSK	
02243543	Agenerase	15mg/mL	O/L	GSK	
02236974	Alesse	20mcg & 100mcg	Tab-21 Pk	WAY	12.9800
02236975	Alesse	20mcg & 100mcg	Tab-28 Pk	WAY	12.9800
00004715	Alkeran	2mg	Tab	GSK	1.4644
00621447	Anuzinc	0.5%	Oint	SDZ	0.1033
00621439	Anuzinc	10mg	Sup	SDZ	0.3542
00550957	Apo-Prednisone	50mg	Tab	APX	0.0913
02245531	Arixtra	2.5mg	Inj 0.5mL Pk	GSK	14.4200
00040851	ASA	325mg	Tab	PMS	0.0585
02239091	Atacand	8mg	Tab	AZC	1.1123
02239092	Atacand	16mg	Tab	AZC	1.1123
02244021	Atacand Plus	16mg & 12.5mg	Tab	AZC	1.1117
01916947	Bactroban	2%	Oint	GSK	0.5080
02239757	Bactroban	2%	Cr	GSK	0.5080
01925180	Benzac W5	5%	Gel	GAC	0.1250
00402540	Betaloc	100mg	Tab	AZC	0.3965
00402605	Betaloc	50mg	Tab	AZC	0.2315
02146908	Biaxin	125mg/5mL	Ped Gran	ABB	0.2758
02244641	Biaxin	250mg/5mL	Susp	ABB	0.5517
01984853	Biaxin	250mg	Tab	ABB	1.5721
00786616	Bricanyl Turbuhaler	0.5mg/Dose	Inh-200 Dose Pk	AZC	14.7000
02264102	Canesten 1 Comfortab Combi-Pak	500mg & 1%	Tab & Cr	BAY	
02150867	Canesten 1% Topical Cream	10mg/g	Cr	BAY	
02150905	Canesten 3 Cream	20mg/g	Vag Cr-App	BAY	

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02150891	Canesten 6 Cream	10mg/g	Vag Cr-App	BAY	
01958100	Cardura-1	1mg	Tab	AZC	0.5665
01958097	Cardura-2	2mg	Tab	AZC	0.6795
01958119	Cardura-4	4mg	Tab	AZC	0.8835
02212307	Ceftin	125mg/5mL	Susp	GSK	0.1671
02212277	Ceftin	250mg	Tab	GSK	1.5125
02212285	Ceftin	500mg	Tab	GSK	2.9963
01916882	Clavulin	25mg & 6.25mg/mL	O/L	GSK	0.1117
01916874	Clavulin	50mg & 12.5mg/mL	O/L	GSK	0.1879
01916866	Clavulin	250mg & 125mg	Tab	GSK	0.9439
01916858	Clavulin	500mg & 125mg	Tab	GSK	1.4158
02238831	Clavulin (Bid)	200mg & 28.5mg/5mL	Susp	GSK	0.1377
02238830	Clavulin (Bid)	400mg & 57mg/5mL	Susp	GSK	0.2573
02238829	Clavulin (Bid)	875mg & 125mg	Tab	GSK	2.1237
02230540	Clindamycin Phosphate Injection USP	300mg/2mL	Inj Sol-2mL Pk	SDZ	4.5740
02239213	Combivir	150mg & 300mg	Tab	GSK	9.7565
02229650	Coreg	3.125mg	Tab	GSK	1.3508
02229651	Coreg	6.25mg	Tab	GSK	1.3508
02229652	Coreg	12.5mg	Tab	GSK	1.3508
02229653	Coreg	25mg	Tab	GSK	1.3508
00513288	Cortate	0.5%	Cr	SCH	0.1333
00513261	Cortate	0.5%	Oint	SCH	0.1333
01912828	Cortisporin	10000U & 5mg & 10mg/mL	Ot Sol	GSK	1.1970
00716685	Cortoderm	0.5%	Oint	TAR	0.1400
00716693	Cortoderm	1%	Oint	TAR	0.0390
02240113	Cosopt	2% & 0.5%	Oph Sol	MFC	5.3560
02182815	Cozaar	25mg	Tab	MFC	1.1783
02182874	Cozaar	50mg	Tab	MFC	1.1783
02182882	Cozaar	100mg	Tab	MFC	1.1783
00016055	Cuprimine	250mg	Cap	MFC	0.7941
02247073	Cyclosporine	25mg	Cap	SDZ	0.9952
02242821	Cyclosporine	100mg	Cap	SDZ	3.8815
02162695	Cytovene	500mg/Vial	Pd Inj-10mL Pk	HLR	41.2140
00443832	Depakene	50mg/mL	O/L	ABB	0.0993
00443840	Depakene	250mg	Cap	ABB	0.4766
00507989	Depakene	500mg	Ent Cap	ABB	0.9532
01924516	Dexedrine	5mg	Tab	GSK	0.5112
02237279	Effexor XR	37.5mg	ER Cap	WAY	0.8399
02237280	Effexor XR	75mg	ER Cap	WAY	1.6797
02237282	Effexor XR	150mg	ER Cap	WAY	1.7735
00851744	Elocom	0.1%	Cr	SCH	0.5985
00871095	Elocom	0.1%	Lot	SCH	0.4320
00851736	Elocom	0.1%	Oint	SCH	0.5985
02213192	Eltroxin	0.05mg	Tab	GSK	0.0262
02213206	Eltroxin	0.1mg	Tab	GSK	0.0321
02213214	Eltroxin	0.15mg	Tab	GSK	0.0356
02213222	Eltroxin	0.2mg	Tab	GSK	0.0377
01916548	Endocet	5mg & 325mg	Tab	BQU	
02096900	Enemol	160mg & 60mg/mL	Rect Sol	DPC	0.0205
00010332	Entrophen	325mg	Ent Tab	PEN	0.0280

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
00010340	Entrophen	650mg	Ent Tab	PEN	0.0862
00596418	Epival	125mg	Ent Tab	ABB	0.2526
00596426	Epival	250mg	Ent Tab	ABB	0.4539
00596434	Epival	500mg	Ent Tab	ABB	0.9084
00720933	Euglucon	2.5mg	Tab	PMS	
00720941	Euglucon	5mg	Tab	PMS	
02214415	Eumovate	0.05%	Cr	GSK	
02239028	Evista	60mg	Tab	LIL	1.7418
00762954	Fer-In-Sol	75mg/mL	O/L	MJS	0.2436
02237246	Flovent Diskus	250mcg/Blister	Pd Inh-60 Dose Pk	GSK	38.5700
02237247	Flovent Diskus	500mcg/Blister	Pd Inh-60 Dose Pk	GSK	77.1300
02244291	Flovent HFA	50mcg/Metered Dose	Inh 120-Dose Pk	GSK	23.4600
02244292	Flovent HFA	125mcg/Metered Dose	Inh 120-Dose Pk	GSK	38.5700
02244293	Flovent HFA	250mcg/Metered Dose	Inh 120-Dose Pk	GSK	77.1300
02239083	Fortovase	200mg	Cap	HLR	1.0557
02201011	Fosamax	10mg	Tab	MFC	1.8800
02245329	Fosamax	70mg	Tab	MFC	9.4800
09853936	Fraxiparine	9500IU/mL	Pref Syr-0.3mL Pk	GSK	
09853944	Fraxiparine	9500IU/mL	Pref Syr-0.4mL Pk	GSK	
09853952	Fraxiparine	9500IU/mL	Pref Syr-0.6mL Pk	GSK	
09853979	Fraxiparine	9500IU/mL	Pref Syr-0.8mL Pk	GSK	
09853987	Fraxiparine	9500IU/mL	Pref Syr-1.0mL Pk	GSK	
02240114	Fraxiparine Forte	19000IU/mL	Pref Syr-0.6mL Pk	GSK	
09854100	Fraxiparine Forte	19000IU/mL	Pref Syr-0.8mL Pk	GSK	
09854118	Fraxiparine Forte	19000IU/mL	Pref Syr-1.0mL Pk	GSK	
02221799	Frisium	10mg	Tab	PEN	0.4393
02223066	Froben	50mg	Tab	ABB	0.3710
00512192	Garamycin	0.3%	Oph Sol	SCH	0.4060
00682217	Garasone	3mg & 1mg/mL	Oph Ot Drops	SCH	1.2813
02190885	Glucobay	50mg	Tab	BAY	
02190893	Glucobay	100mg	Tab	BAY	
00808652	Haloperidol	5mg/mL	Inj Sol-1mL Pk	SDZ	3.8620
02238525	Hp-PAC	30mg & 500mg & 500mg	Tab/Cap Pack	ABB	78.2400
02229704	Humalog	100U/mL	Inj Sol-10mL Pk	LIL	25.7900
09853715	Humalog	100U/mL	Inj Sol-5x3mL Pk	LIL	51.5900
02240294	Humalog Mix25	25% & 75%	Inj Susp-5X3mL Pk	LIL	51.5900
00795879	Humulin 30/70	1000U/10mL	Inj Susp-10mL Pk	LIL	17.2000
09853855	Humulin 30/70	100U/mL	Inj Susp-5X3mL Pk	LIL	35.6800
09853804	Humulin N	100U/mL	Inj Susp-5X3mL Pk	LIL	35.6800
00587737	Humulin NPH	1000U/10mL	Inj Susp-10mL Pk	LIL	17.2000
09853766	Humulin R	100U/mL	Inj Sol-5x3mL Pk	LIL	35.6800
00586714	Humulin Regular	1000U/10mL	Inj Sol-10mL Pk	LIL	17.2000
00716839	Hyderm	1%	Cr	TAR	0.0364
00818658	Hytrin	1mg	Tab	ABB	0.6402
00818682	Hytrin	2mg	Tab	ABB	0.8138
00818666	Hytrin	5mg	Tab	ABB	1.1052
00818674	Hytrin	10mg	Tab	ABB	1.6178
02230047	Hyzaar	50mg/12.5mg	Tab	MFC	1.1783
02241007	Hyzaar DS	100mg/25mg	Tab	MFC	1.1783
00004596	Imuran	50mg	Tab	GSK	0.8987
01911465	Inhibace	1mg	Tab	HLR	0.6107

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
01911473	Inhibace	2.5mg	Tab	HLR	0.7038
01911481	Inhibace	5mg	Tab	HLR	0.8177
02181479	Inhibace Plus	5mg/12.5mg	Tab	HLR	0.8175
01934317	Isoptin SR	180mg	LA Tab	ABB	1.3276
00742554	Isoptin SR	240mg	LA Tab	ABB	1.7704
01918303	K-10	1.33mEq/mL	O/L	GSK	0.0144
02243643	Kaletra	133.3mg/33.3mg	Cap	ABB	3.4954
02243644	Kaletra	80mg/mL & 20mg/mL	O/L	ABB	2.0973
02245662	Ketoderm	2%	Cr	TAR	0.3167
01926438	Kidrolase		Inj Pd-10000IU Pk	OPS	
02269341	Kivexa	600mg/300mg	Tab	GSK	
00481211	K-Lor	20mEq/Pouch	Oral Pd-3g Pk	ABB	0.2917
02231348	Kwellada-P	5%	Lot	GSK	0.2485
02231480	Kwellada-P	1%	Cr Rinse	GSK	
02142082	Lamictal	25mg	Tab	GSK	0.3497
02142104	Lamictal	100mg	Tab	GSK	1.3960
02142112	Lamictal	150mg	Tab	GSK	2.1060
00282081	Lanvis	40mg	Tab	GSK	3.9140
00682314	Lectopam	1.5mg	Tab	HLR	0.1082
00518123	Lectopam	3mg	Tab	HLR	0.1470
00518131	Lectopam	6mg	Tab	HLR	0.2147
02170493	Leucovorin Calcium	5mg	Tab	WAY	5.6900
00004626	Leukeran	2mg	Tab	GSK	1.2660
00884502	Lupron Depot PDS	3.75mg	Inj-Kit	ABB	323.0000
02239834	Lupron Depot PDS	11.25mg	Inj-Kit	ABB	969.0200
00716863	Lyderm	0.05%	Cr	TAR	0.2617
02236997	Lyderm	0.05%	Gel	TAR	0.3418
02236996	Lyderm	0.05%	Oint	TAR	0.3373
00899356	Manerix	150mg	Tab	HLR	0.5939
02166747	Manerix	300mg	Tab	HLR	1.1663
00012750	Matulane	50mg	Cap	SIG	
01914030	Mesasal	500mg	Ent Tab	GSK	0.5742
02092832	Metrogel	0.75%	Top Gel	GAC	0.6000
00795852	Mevacor	40mg	Tab	MFC	3.4207
00795860	Mevacor	20mg	Tab	MFC	1.8547
02163527	Minitran	0.4mg/Hr/13.3 Sq Cm	Patch	MMH	0.6593
02163535	Minitran	0.6mg/Hr/20 Sq Cm	Patch	MMH	0.6597
02042320	Min-Ovral	0.03mg & 0.15mg	Tab-21 Pk	WAY	12.9800
02042339	Min-Ovral	0.03mg & 0.15mg	Tab-28 Pk	WAY	12.9800
00392561	Morphine Sulfate	15mg/mL	Inj Sol Amp	SDZ	0.9000
00599875	Mucillium		Oral Pd	PMS	0.1225
00004618	Myleran	2mg	Tab	GSK	1.3432
02162431	Naprosyn	25mg/mL	O/L	HLR	0.0601
02219905	Nix Dermal Cream	5%	Cr	GSK	
02048485	Nolvadex D	20mg	Tab	AZC	0.3600
02229145	Norvir	80mg/mL	O/L	ABB	1.1333
02241480	Norvir Sec	100mg	Cap	ABB	1.4169
00020877	Novo-Ampicillin	250mg	Cap	NOP	0.3071
00020885	Novo-Ampicillin	500mg	Cap	NOP	0.5955
00021261	Novo-Chloroquine	250mg	Tab	NOP	0.3208
00232823	Novo-Chlorpromazine	25mg	Tab	NOP	0.1365

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
00232807	Novo-Chlorpromazine	50mg	Tab	NOP	0.1565
00232831	Novo-Chlorpromazine	100mg	Tab	NOP	0.3200
00595829	Novo-Fibre		Tab	NOP	0.0565
02231015	Novo-Furantoin	50mg	Cap	NOP	0.3187
02231016	Novo-Furantoin	100mg	Cap	NOP	0.6110
02158612	Novo-Maprotiline	25mg	Tab	NOP	0.5493
02158620	Novo-Maprotiline	50mg	Tab	NOP	1.0401
02158639	Novo-Maprotiline	75mg	Tab	NOP	1.4204
02230359	Novo-Mexiletine	100mg	Cap	NOP	0.8162
02230360	Novo-Mexiletine	200mg	Cap	NOP	1.0930
00232378	Novo-Prednisone	50mg	Tab	NOP	0.0913
00021172	Novo-Rythro Estolate	25mg/mL	O/L	NOP	0.0368
00262595	Novo-Rythro Estolate	50mg/mL	O/L	NOP	0.0713
00605859	Novo-Rythro Ethyl Succinate	40mg/mL	O/L	NOP	0.0669
00652318	Novo-Rythro Ethyl Succinate	80mg/mL	O/L	NOP	0.1013
01927078	Ostac	400mg	Cap	HLR	1.8137
00009830	Ostoforte	50000IU	Cap	MFC	0.2169
02043033	Ovral	0.05mg & 0.25mg	Tab-21 Pk	WAY	12.9800
02237225	Oxeze Turbuhaler	6mcg/Metered Dose	Pd Inh-60 Dose Pk	AZC	32.7000
02237224	Oxeze Turbuhaler	12mcg/Metered Dose	Pd Inh-60 Dose Pk	AZC	43.5500
01923420	Palafer	300mg	Cap	GSK	0.1956
01923439	Palafer	60mg/mL	O/L	GSK	0.0832
01919598	Parnate	10mg	Tab	GSK	0.3441
01940473	Paxil	30mg	Tab	GSK	1.7927
01940481	Paxil	20mg	Tab	GSK	1.6872
00769991	PCE Dispertab	333mg	Tab	ABB	0.5200
00981095	Pedialyte Flavored		O/L	ABB	0.0074
00630365	Pedialyte Regular		O/L	ABB	0.0074
00583405	Pediazole	40mg & 120mg/mL	O/L	ABB	0.1209
00777838	Peglyte		Pd-4L Pk	PMS	16.4500
00710113	Pepcid	40mg	Tab	MFC	1.8223
00710121	Pepcid	20mg	Tab	MFC	1.0023
00851779	Plendil	5mg	ER Tab	AZC	0.6797
00851787	Plendil	10mg	ER Tab	AZC	1.0197
02057778	Plendil	2.5mg	ER Tab	AZC	0.5087
00816027	PMS-Acetaminophen with Codeine	160mg & 8mg/5mL	O/L	PMS	0.0586
02240331	PMS-Bezafibrate	200mg	Tab	PMS	0.8833
02185830	PMS-Cefaclor	250mg	Cap	PMS	0.5104
02185849	PMS-Cefaclor	500mg	Cap	PMS	1.0020
02185857	PMS-Cefaclor	25mg/mL	Oral Susp	PMS	0.0545
02185865	PMS-Cefaclor	50mg/mL	Oral Susp	PMS	0.0997
02185873	PMS-Cefaclor	375mg/5mL	Oral Susp	PMS	0.1436
02177781	PMS-Cephalexin	250mg	Tab	PMS	0.1185
02177803	PMS-Cephalexin	500mg	Tab	PMS	0.2370
02177811	PMS-Cephalexin 125	25mg/mL	Pd for Oral Susp	PMS	0.0229
02177838	PMS-Cephalexin 250	50mg/mL	Pd for Oral Susp	PMS	0.0474
00890960	PMS-Cholestyramine Sugar Free 5g Pk		Oral Pd-Pouch Pk	PMS	1.3167

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02210320	PMS-Cholestyramine 9g Pk		Oral Pd-Pouch Pk	PMS	1.3167
02229315	PMS-Desonide	0.05%	Cr	PMS	0.2610
02229323	PMS-Desonide	0.05%	Oint	PMS	0.2610
02237868	PMS-Dipivefrin	0.1%	Oph Sol	PMS	0.7905
00776521	PMS-Gentamicin	0.3%	Oph Sol	PMS	0.2650
01916386	PMS-Hydromorphone	1mg/mL	Oral Sol	PMS	0.0652
02015951	PMS-Ketoprofen	100mg	Sup	PMS	0.9930
02145413	PMS-Metoprolol-B	50mg	Tab	PMS	0.1080
02145421	PMS-Metoprolol-B	100mg	Tab	PMS	0.1830
02244125	PMS-Misoprostol	200mcg	Tab	PMS	0.2265
00792942	PMS-Oxtriphylline	20mg/mL	O/L	PMS	0.0229
02154463	PMS-Piroxicam	20mg	Sup	PMS	1.6460
02074087	PMS-Potassium Gluconate	1.33mEq/mL	O/L	PMS	0.0152
02245532	PMS-Prednisolone	6.7mg/5mL	O/L	PMS	0.0671
00649392	PMS-Procyclidine	2.5mg	Tab	PMS	0.0555
02091186	PMS-Salbutamol	0.4mg/mL	O/L	PMS	0.0476
00598461	PMS-Sulfasalazine	500mg	Tab	PMS	0.1804
00598488	PMS-Sulfasalazine-E.C.	500mg	Ent Tab	PMS	0.2816
00575151	PMS-Theoheophylline	5.3mg/mL	O/L	PMS	0.0028
02243327	PMS-Ticlopidine	250mg	Tab	PMS	0.5465
02239156	Polysporin	10000U & 0.025mg/mL	Oph/Ot Sol	PFI	0.6920
02239157	Polysporin	10000U & 500U/g	Oph Oint 3.5g Pk	PFI	5.5400
02043394	Premarin	0.3mg	Tab	WAY	0.1215
02043440	Premarin	0.625mg/g	Vag Cr	WAY	0.5800
00839388	Prinivil	5mg	Tab	MFC	0.5387
00839396	Prinivil	10mg	Tab	MFC	0.6473
00839418	Prinivil	20mg	Tab	MFC	0.7780
00884413	Prinzide	20mg & 12.5mg	Tab	MFC	0.8012
02108194	Prinzide	10mg & 12.5mg	Tab	MFC	0.6667
00789747	Prochlorperazine Mesylate	10mg/2mL	Inj Sol-2mL Pk	SDZ	1.3380
02176009	Prograf	5mg/mL	Amp	FUJ	124.5000
00386464	Prolopa 100-25	100mg & 25mg	Cap	HLR	0.4410
00386472	Prolopa 200-50	200mg & 50mg	Cap	HLR	0.7403
00522597	Prolopa 50-12.5	50mg & 12.5mg	Cap	HLR	0.2678
02010909	Proscar	5mg	Tab	MFC	1.7463
00636622	Prozac	20mg	Cap	LIL	1.7789
01978918	Pulmicort Nebuamp	0.25mg/mL	Inh Susp	AZC	0.4125
01978926	Pulmicort Nebuamp	0.5mg/mL	Inh Susp	AZC	0.8250
02229099	Pulmicort Nebuamp	0.125mg/mL	Inh Susp	AZC	0.2063
00852074	Pulmicort Turbuhaler	100mcg/Metered Dose	Pd Inh-200 Dose Pk	AZC	30.4000
00851752	Pulmicort Turbuhaler	200mcg/Metered Dose	Pd Inh-200 Dose Pk	AZC	60.8500
00851760	Pulmicort Turbuhaler	400mcg/Metered Dose	Pd Inh-200 Dose Pk	AZC	109.5000
02242029	QVAR	50mcg/Metered Dose	Aero Inh-200 Dose Pk	MMH	29.2000
02242030	QVAR	100mcg/Metered Dose	Aero Inh-200 Dose Pk	MMH	58.4000
02125447	R & C Shampoo /Conditioner	0.3% & 3% & 1.2%	Top Sol	GSK	
02243237	Rapamune	1mg/mL	O/L	WAY	7.0143
02247111	Rapamune	1mg	Tab	WAY	7.0143

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02244646	Ratio-Aclavulanate	25mg & 6.25mg/mL	O/L	RPH	0.0517
02244647	Ratio-Aclavulanate	50mg & 12.5mg/mL	O/L	RPH	0.0869
02243770	Ratio-Aclavulanate	250mg & 125mg	Tab	RPH	0.4366
02243771	Ratio-Aclavulanate	500mg & 125mg	Tab	RPH	0.6673
02247021	Ratio-Aclavulanate	875mg & 125mg	Tab	RPH	1.0009
02247098	Ratio-Amcinonide	0.1%	Cr	RPH	0.1955
02247097	Ratio-Amcinonide	0.1%	Lot	RPH	0.2270
02247096	Ratio-Amcinonide	0.1%	Oint	RPH	0.2740
00404802	Ratio-Bisacodyl	10mg	Sup	RPH	0.4681
02243026	Ratio-Brimonidine	0.2%	Oph Sol	RPH	1.6500
02242656	Ratio-Cefuroxime	250mg	Tab	RPH	0.7237
02242657	Ratio-Cefuroxime	500mg	Tab	RPH	1.4337
02238797	Ratio-Clobazam	10mg	Tab	RPH	0.1709
01910272	Ratio-Clobetasol	0.05%	Cr	RPH	0.3256
01910280	Ratio-Clobetasol	0.05%	Oint	RPH	0.3256
01910299	Ratio-Clobetasol	0.05%	Scalp Lot	RPH	0.2843
02103656	Ratio-Clonazepam	0.5mg	Tab	RPH	0.0925
02103737	Ratio-Clonazepam	2mg	Tab	RPH	0.1595
01948784	Ratio-Desipramine	25mg	Tab	RPH	0.1729
00608882	Ratio-Emtec	300mg & 30mg	Tab	RPH	0.1300
02247461	Ratio-Ketorolac	0.5%	Oph Sol	RPH	1.6000
00653241	Ratio-Lenoltec No.2	15mg	Tab	RPH	0.0476
00653276	Ratio-Lenoltec No.3	30mg	Tab	RPH	0.0524
02248130	Ratio-Mometasone	0.1%	Oint	RPH	0.2771
02244790	Ratio-Morphine SR	15mg	SR Tab	RPH	0.2977
02244791	Ratio-Morphine SR	30mg	SR Tab	RPH	0.4495
02244792	Ratio-Morphine SR	60mg	SR Tab	RPH	0.7924
02194198	Ratio-Nystatin	500000U	Tab	RPH	0.1680
00608165	Ratio-Oxycocet	5mg & 325mg	Tab	RPH	0.1995
00608157	Ratio-Oxycodan	5mg & 325mg	Tab	RPH	0.2576
00700401	Ratio-Prednisolone	1%	Oph Susp	RPH	2.4400
02244914	Ratio-Salbutamol HFA	100mcg/Metered Dose	Inh-200 Dose Pk	RPH	7.7300
02243023	Ratio-Temazepam	15mg	Cap	RPH	0.0875
02243024	Ratio-Temazepam	30mg	Cap	RPH	0.1053
02232565	Requip	0.25mg	Tab	GSK	0.2652
02232567	Requip	1mg	Tab	GSK	1.0609
02232568	Requip	2mg	Tab	GSK	1.1670
02232569	Requip	5mg	Tab	GSK	3.2888
02231923	Rhinocort Aqua	64mcg/Metered Dose	Nas Sp-120 Dose Pk	AZC	10.2000
02035324	Rhinocort Turbuhaler	100mcg/Metered Dose	Nas Aero 200 Dose	AZC	22.7000
00382825	Rivotril	0.5mg	Tab	HLR	0.1943
00382841	Rivotril	2mg	Tab	HLR	0.3350
00481823	Rocaltrol	0.25mcg	Cap	HLR	0.9098
00481815	Rocaltrol	0.5mcg	Cap	HLR	1.4469
00657387	Rocephin	0.25g Vial	Inj Pd-1 Vial Pk	HLR	11.0650
00657417	Rocephin	1g Vial	Inj Pd-1 Vial Pk	HLR	35.0000
00657409	Rocephin	2g Vial	Inj Pd-1 Vial Pk	HLR	68.9700
00603708	Rythmol	150mg	Tab	ABB	1.0345
00603716	Rythmol	300mg	Tab	ABB	1.8235
02231799	Sab-Indomethacin	50mg	Sup	SDZ	0.8020
02065819	Sabril	500mg	Tab	OVA	0.9110
00329320	Sandomigran	0.5mg	Tab	PEN	0.3475

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
00511552	Sandomigran DS	1mg	Tab	PEN	
02214261	Serevent Diskhaler Disks	50mcg/Blister	Diskhaler-60 Disk Pk	GSK	52.4200
02231129	Serevent Diskus	50mcg	Pd Inh-60 Dose Pk	GSK	52.4200
02236951	Seroquel	25mg	Tab	AZC	0.4940
02236952	Seroquel	100mg	Tab	AZC	1.3180
02240862	Seroquel	150mg	Tab	AZC	2.0390
02236953	Seroquel	200mg	Tab	AZC	2.6467
02244107	Seroquel	300mg	Tab	AZC	3.8625
02243602	Singulair	4mg	Chew Tab	MFC	1.3583
00010383	Sintrom	1mg	Tab	PEN	
00010391	Sintrom	4mg	Tab	PEN	
02245456	Sodium Aurothiomalate	10mg/mL	Inj Sol-1mL Pk	SDZ	6.3100
02245457	Sodium Aurothiomalate	25mg/mL	Inj Sol-1mL Pk	SDZ	7.6567
02245458	Sodium Aurothiomalate	50mg/mL	Inj Sol-1mL Pk	SDZ	11.8900
02070847	Soriatane	10mg	Cap	HLR	1.6240
02070863	Soriatane	25mg	Cap	HLR	2.8527
02172062	Synthroid	0.025mg	Tab	ABB	0.0753
02172070	Synthroid	0.05mg	Tab	ABB	0.0491
02172089	Synthroid	0.075mg	Tab	ABB	0.0813
02172097	Synthroid	0.088mg	Tab	ABB	0.0813
02172100	Synthroid	0.1mg	Tab	ABB	0.0607
02171228	Synthroid	0.112mg	Tab	ABB	0.0859
02172119	Synthroid	0.125mg	Tab	ABB	0.0873
02172127	Synthroid	0.15mg	Tab	ABB	0.0651
02172135	Synthroid	0.175mg	Tab	ABB	0.0932
02172143	Synthroid	0.2mg	Tab	ABB	0.0694
02172151	Synthroid	0.3mg	Tab	ABB	0.0946
01966197	Tambocor	50mg	Tab	MMH	0.5171
01966200	Tambocor	100mg	Tab	MMH	1.0342
01966065	Tantum	0.15%	Oral Rinse	MMH	0.1019
02247651	Taro-Terconazole	0.4%	Cr	TAR	0.2726
02261545	Telzir	700mg	Tab	GSK	7.7647
02049988	Tenoretic 100/25	100 & 25mg	Tab	AZC	1.0471
02049961	Tenoretic 50/25	50 & 25mg	Tab	AZC	0.6389
02039532	Tenormin	50mg	Tab	AZC	0.5746
02039540	Tenormin	100mg	Tab	AZC	0.9446
00598933	Tiamol	0.05%	Emol Cr	TAR	0.2433
02162776	Ticlid	250mg	Tab	HLR	1.2564
00451193	Timoptic	0.25%	Oph Sol	MFC	2.7650
00451207	Timoptic	0.5%	Oph Sol	MFC	3.2710
02171880	Timoptic-XE	0.25%	Oph Gellan Sol	MFC	3.4920
02171899	Timoptic-XE	0.5%	Oph Gellan Sol	MFC	4.1780
02241210	Tobramycin	80mg/2mL	Inj Sol-2mL Pk	SDZ	4.3380
09857128	Triamcinolone Acetonide	200mg/5mL	Inj Susp-5mL Pk	SDZ	16.7100
02043726	Triphasil	3 Phase	Tab-21 Pk	WAY	12.9800
02043734	Triphasil	3 Phase	Tab-28 Pk	WAY	12.9800
02244757	Trizivir	300mg/150mg/300mg	Tab	GSK	16.1752
02216205	Trusopt	2%	Oph Sol	MFC	3.5340
02219492	Valtrex	500mg	Cap	GSK	3.2448
00851795	Vasotec	2.5mg	Tab	MFC	0.7233
00708879	Vasotec	5mg	Tab	MFC	0.8557

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
00670901	Vasotec	10mg	Tab	MFC	1.0283
00670928	Vasotec	20mg	Tab	MFC	1.2407
02214997	Ventodisk	200mcg/Blister	Pd Inh-120 Dose Pk	GSK	21.0200
02215004	Ventodisk	400mcg/Blister	Pd Inh-120 Dose Pk	GSK	29.2100
02212390	Ventolin	0.4mg/mL	O/L	GSK	
02213486	Ventolin	5mg/mL	Inh Sol-10mL Pk	GSK	8.8060
02213419	Ventolin Nebules P.F.	1mg/mL	Inh Sol-2.5mL Pk	GSK	
00001686	Xylocaine Viscous	2%	O/L	AZC	0.0875
02212374	Zantac	15mg/mL	Oral Sol	GSK	0.1948
02212366	Zantac	50mg/2mL	inj Sol-2mL Pk	GSK	2.6770
02212331	Zantac	150mg	Tab	GSK	1.1447
02212358	Zantac	300mg	Tab	GSK	2.1547
02103729	Zestoretic	10mg & 12.5mg	Tab	AZC	0.8335
02045737	Zestoretic	20mg & 12.5mg	Tab	AZC	1.0016
02049333	Zestril	5mg	Tab	AZC	0.6937
02049376	Zestril	10mg	Tab	AZC	0.8335
02049384	Zestril	20mg	Tab	AZC	1.0016
02240358	Ziagen	20mg/mL	O/L	GSK	0.4279
02240357	Ziagen	300mg	Tab	GSK	6.4188
00884324	Zocor	5mg	Tab	MFC	0.9640
00884332	Zocor	10mg	Tab	MFC	1.9070
00884340	Zocor	20mg	Tab	MFC	2.3567
00884359	Zocor	40mg	Tab	MFC	2.3567
02240332	Zocor	80mg	Tab	MFC	2.3567
02229639	Zofran	4mg/5mL	O/L	GSK	1.9102
02213567	Zofran	4mg	Tab	GSK	12.5190
02213575	Zofran	8mg	Tab	GSK	19.1030
02239372	Zofran ODT	4mg	Tab	GSK	12.5190
02239373	Zofran ODT	8mg	Tab	GSK	19.1030
02225905	Zoladex LA	10.8mg	Depot Inj	AZC	1087.9800
01911635	Zovirax	800mg	Tab	GSK	4.7368