UPDATE 15
Ontario Drug Benefit
Formulary/Comparative Drug Index
No. 39
Effective March 09, 2007

SUMMARY OF CHANGES

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New Single Source Drug(s)

DIN	PRODUCT	GENERIC NAME	MFR	DBP
02280213	Avalide 300mg & 25mg Tab	IRBESARTAN AND HYDROCHLOROTHIAZIDE	SAV	1.1424

New Multi-Source Drug(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02291134	Apo-Cilazapril	1mg	Tab	APX	0.2950
02291142	Apo-Cilazapril	2.5mg	Tab	APX	0.3400
02291150	Apo-Cilazapril (Interchangeable with Inhibace)	5mg	Tab	APX	0.3950
02277298	Apo-Medroxy (Interchangeable with Provera)	10mg	Tab	APX	0.2515
02288184	Apo-Ondansetron	4mg	Tab	APX	5.9884
02288192	Apo-Ondansetron (Interchangeable with Zofran)	8mg	Tab	APX	9.1402

Reason for Use Code	Clinical Criteria
215	For the treatment of emesis in cancer patients receiving highly emetogenic chemotherapy. LU Authorization Period: 1 year.
216	For patients receiving intravenous chemotherapy or radiation therapy who have not experienced adequate control with other available anti-emetics. LU Authorization Period: 1 year.
217	For patients receiving intravenous chemotherapy or radiation therapy who experience intolerable side effects with other anti-emetics. LU Authorization Period: 1 year.
218	For the treatment of emesis in patients receiving radiation therapy which consists of single fraction treatment to the abdominal cavity, hemi-body irradiation and total body irradiation. NOTE: The therapeutic value of Zofran more than 24 hours after the last dose of chemotherapy is unproven. LU Authorization Period: 1 year.

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02251515	Apo-Ramipril	1.25mg	Cap	APX	0.3250
02251531	Apo-Ramipril	2.5mg	Cap	APX	0.3750
02251574	Apo-Ramipril	5mg	Cap	APX	0.3750
02251582	Apo-Ramipril (Interchangeable with Altace)	10mg	Cap	APX	0.4750
02286335	Gen-Alendronate (Interchangeable with Fosamax)	70mg	Tab	GEN	4.4250
02287498	Gen-Warfarin (Interchangeable with Coumadin)	3mg	Tab	GEN	0.1910
02269309	Novo-Pramipexole (Interchangeable with Mirapex PIN# 09857268)	0.25mg	Tab	NOP	0.4950
02269325	Novo-Pramipexole (Interchangeable with Mirapex PIN# 09857269)	1.0mg	Tab	NOP	0.9900
02269333	Novo-Pramipexole (Interchangeable with Mirapex PIN# 09857270)	1.5mg	Tab	NOP	0.9900

Note: Mirapex is indicated for both the symptomatic treatment of idiopathic Parkinson's Disease and moderate to severe idiopathic Restless Legs Syndrome under the manufacturer's Drug Indentification Number (DIN). Mirapex has also been assigned a Product Indentification Number (PIN) for the indication of Parkinson's Disease specifically. Novo-Pramipexole and PMS-Pramipexole products are interchangeable with Mirapex for the treatment of Parkinson's Disease.

02284006	PMS-Alendronate - FC (Interchangeable with Fosamax)	70mg	Tab	PMS	4.4250

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02278111	PMS-Famciclovir (Interchangeable with Famvir)	500mg	Tab	PMS	3.2026

Reason for Use Code	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 7days. *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.

02290111	PMS-Pramipexole (Interchangeable with Mirapex PIN# 09857268)	0.25mg	Tab	PMS	0.4950
02290146	PMS-Pramipexole (Interchangeable with Mirapex PIN# 09857269)	1.0mg	Tab	PMS	0.9900
02290154	PMS-Pramipexole (Interchangeable with Mirapex PIN# 09857270)	1.5mg	Tab	PMS	0.9900

Note: Mirapex is indicated for both the symptomatic treatment of idiopathic Parkinson's Disease and moderate to severe idiopathic Restless Legs Syndrome under the manufacturer's Drug Indentification Number (DIN). Mirapex has also been assigned a Product Indentification Number (PIN) for the indication of Parkinson's Disease specifically. Novo-Pramipexole and PMS-Pramipexole products are interchangeable with Mirapex for the treatment of Parkinson's Disease.

02285657	Ratio-Bupropion SR	100mg	Tab	RPH	0.2667
02285665	Ratio-Bupropion SR (Interchangeable with Wellbutrin SR)	150mg	Tab	RPH	0.4000

Reason for Use Code	Clinical Criteria
315	For the treatment of depression. LU Authorization Period: Indefinite.

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
02260867	Ratio-Omeprazole DR Tab (Interchangeable with Losec DR Tab DIN # 02190915)	20mg		RPH	1.1000

Reason for Use Code	Clinical Criteria
293	Gastroesophageal Reflux Disease (GERD) For the treatment of erosive GERD or upper GI malignancy; OR For the treatment of non-erosive GERD after failure of H2-receptor antagonist therapy. Patients with GERD should be reassessed within 6 months after initial treatment with a PPI. The reassessment could include confirmation of need for PPI with endoscopy, a trial of PPI withdrawal, or step-down therapy to H2-receptor antagonist therapy. Note: There is a lack of published evidence to support double-dose PPI therapy in this setting. LU Authorization Period: 1 Year
297	Confirmed Peptic Ulcers or NSAID-induced Ulcer Prophylaxis: For the treatment of confirmed peptic ulcers and NSAID-induced ulcers; OR For the prophylaxis of NSAID-induced ulcers for patients at increased risk of GI bleeding. Note: There is a lack of published evidence to support double-dose PPI therapy in this setting. LU Authorization Period: 1 Year
401	Other Gastrointestinal Disorders For the treatment of gastroduodenal Crohn's disease, short-gut syndrome, scleroderma, or pancreatitis. Note: There is a lack of published evidence to support double-dose PPI therapy in these settings LU Authorization Period: 1 Year
402	Severe Conditions: For the treatment of severe esophagitis, Zollinger-Ellison syndrome, esophageal stricture, persistent symptoms of GERD or persistent erosive esophagitis, or upon hospital discharge following a gastrointestinal bleed. For patients receiving double-dose therapy, the need to continue treatment at higher doses should be reassessed after eight weeks. For re-treatment at higher doses, a four-week period should have elapsed from the end of the previous treatment. Reassessment could include a procedural assessment of the condition or step-down therapy to lower-dose proton pump inhibitor (PPI) therapy. LU Authorization Period: 1 Year

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
09857267	Ratio-Omeprazole (Interchangeable with Losec DR Tab PIN # 09857195)	20mg	DR Tab	RPH	1.1000

Reason for Use Code	Clinical Criteria
295	H. pylori-positive Peptic Ulcers For the treatment of H. pylori-positive peptic ulcers where H. pylori is documented, by serology, urea breath test or endoscopy, for a one-week course in combination with antimicrobial therapy. Retreatment of H. pylori-positive peptic ulcers must be documented by persistent H. pylori infection on urea breath test or endoscopy. Maximum duration: 7 days (for retreatment, a four-week period must elapse since the end of the previous treatment). LU Authorization Period: 1 Year

02287692	Ratio-Ramipril	1.25mg	Cap	RPH	0.3250
02287706	Ratio-Ramipril	2.5mg	Cap	RPH	0.3750
02287714	Ratio-Ramipril	5mg	Cap	RPH	0.3750
02287722	Ratio-Ramipril (Interchangeable with Altace)	10mg	Cap	RPH	0.4750
02288087	Sandoz Alendronate	10mg	Tab	SDZ	0.8775
02288109	Sandoz Alendronate (Interchangeable with Fosamax)	70mg	Tab	SDZ	4.4250
02288052	Sandoz Fenofibrate S (Interchangeable with Lipidil Supra)	160mg	Tab	SDZ	0.6231

Manufacturer Requested Discontinued Drug(s)

Please note that these discontinued products will remain on the formulary until the current stock is depleted:

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
00731439	Atrovent	250mcg/mL	Inh Sol-20mL Pk	BOE
02026759	Atrovent UDV	125mcg/mL	Inh Sol-2mL UDV Pk	BOE
01950681	Atrovent UDV	250mcg/mL	Inh Sol-2mL UDV Pk	BOE
02006383	Berotec		Inh Pd-200 Dose Pk	BOE
00541389	Berotec	0.1%	Inh Sol-20mL Pk	BOE
02243327	PMS-Ticlopidine	250mg	Tab	PMS
01927582	Vaponefrin	2.25%	Inh Sol-30mL Pk	SAV

New Drug Benefit Price(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
01968300	Acular	0.5%	Oph Sol	ALL	3.3600
02237618	Adalat XL	20mg	ER Tab	BAH	0.8382
02155907	Adalat XL	30mg	ER Tab	BAH	1.0542
02155990	Adalat XL	60mg	ER Tab	BAH	1.6604
02242119	Aggrenox	200mg/25mg	Cap	BOE	0.8230
00402818	Apo-Allopurinol	100mg	Tab	APX	0.0406
00479799	Apo-Allopurinol	200mg	Tab	APX	0.0805
00402796	Apo-Allopurinol	300mg	Tab	APX	0.1219
00545031	Apo-Ferrous Gluconate	300mg	Tab	APX	0.0212
00396788	Apo-Furosemide	20mg	Tab	APX	0.0348
00362166	Apo-Furosemide	40mg	Tab	APX	0.0526
00326844	Apo-Hydro 25	25mg	Tab	APX	0.0366
00312800	Apo-Hydro 50	50mg	Tab	APX	0.0511
00312770	Apo-Prednisone	5mg	Tab	APX	0.0220
00441775	Apo-Triazide	25mg & 50mg	Tab	APX	0.0450
00723754	Apresoline	20mg/mL	Inj Sol-1mL Pk	STE	11.6500
00731439	Atrovent	250mcg/mL	Inh Sol-20mL Pk	BOE	18.0400
02163705	Atrovent	0.03%	Nasal Spray	BOE	0.9930
02247686	Atrovent HFA	20mcg/Metered Dose	Inh-200 Dose Pk	BOE	18.3400
02026759	Atrovent UDV	125mcg/mL	Inh Sol-2mL UDV Pk	BOE	1.3535
01950681	Atrovent UDV	250mcg/mL	Inh Sol-2mL UDV Pk	BOE	2.7070
02242965	Avelox	400mg	Tab	BAH	5.4213
02006383	Berotec		Inh Pd-200 Dose Pk	BOE	10.7200
00541389	Berotec	0.1%	Inh Sol-20mL Pk	BOE	15.3300
00637661	Betagan	0.5%	Oph Sol	ALL	2.5920
01981501	Botox	100U Vial	Pd Inj-100U Vial Pk	ALL	357.0000
02264102	Canesten 1 Comfortab Combi-Pak	500mg & 1%	Tab & Cr	BAY	12.0800
02150867	Canesten 1% Topical Cream	10mg/g	Cr	BAY	0.0999
02150905	Canesten 3 Cream	20mg/g	Vag Cr-App	BAY	0.4424
02150891	Canesten 6 Cream	10mg/g	Vag Cr-App	BAY	0.2212
00259527	Catapres	0.1mg	Tab	BOE	0.1853
00291889	Catapres	0.2mg	Tab	BOE	0.3306
02237514	Cipro	10g/100mL	Oral Susp	BAH	0.5420
02155958	Cipro	250mg	Tab	BAH	2.4022
02155966	Cipro	500mg	Tab	BAH	2.7102
02155974	Cipro	750mg	Tab	BAH	5.1118
02247916	Cipro XL	500mg	ER Tab	BAH	2.8222
02251787	Cipro XL	1000mg	ER Tab	BAH	2.8222
02163721	Combivent	20mcg/100mcg/md	Aero Inh	BOE	21.2400
02231675	Combivent UDV	500mcg/2.5mg/2.5mL	Inh Sol-2.5mL Pk	BOE	1.5075
00254142	Dulcolax	5mg	Ent Tab	BOE	0.1860
00003867	Dulcolax	5mg	Sup	BOE	1.0933

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
00003875	Dulcolax	10mg	Sup	BOE	1.1000
00247855	FML	0.1%	Oph Susp	ALL	1.5830
02190885	Glucobay	50mg	Tab	BAY	0.2444
02190893	Glucobay	100mg	Tab	BAY	0.3385
00210889	Lacri-Lube	55%/42.5%	Oph Oint-3.5g Pk	ALL	6.6500
02242320	Lanoxin	0.05mg/mL	O/L	VRO	0.3561
02242321	Lanoxin	0.0625mg	Tab	VRO	0.2177
02242322	Lanoxin	0.125mg	Tab	VRO	0.2060
02242323	Lanoxin	0.25mg	Tab	VRO	0.2060
00045616	Liquifilm Tears	1.4%	Oph-Sol	ALL	0.5793
02245860	Lumigan	0.03%	Oph Sol-2.5mL Pk	ALL	27.0250
02174812	Metamucil Fibre Therapy-Original Texture		Oral Pd	PGI	0.0246
02240769	Micardis	40mg	Tab	BOE	1.1296
02240770	Micardis	80mg	Tab	BOE	1.1296
02244344	Micardis Plus	80mg/12.5mg	Tab	BOE	1.1296
02237145	Mirapex	0.25mg	Tab	BOE	1.0513
09857268	Mirapex	0.25mg	Tab	BOE	1.0513
02237146	Mirapex	1.0mg	Tab	BOE	2.1028
09857269	Mirapex	1.0mg	Tab	BOE	2.1028
02237147	Mirapex	1.5mg	Tab	BOE	2.1028
09857270	Mirapex	1.5mg	Tab	BOE	2.1028
02243005	Mirena	52mg	Insert	BEX	303.8000
02242785	Mobicox	7.5mg	Tab	BOE	0.8011
02242786	Mobicox	15mg	Tab	BOE	0.9243
00599875	Mucillium		Oral Pd	PMS	0.0175
02155923	Nimotop	30mg	SG Cap	BAH	5.9209
02271605	Novo-Diltiazem HCL ER	120mg	SR Cap	BIO	0.4043
02271613	Novo-Diltiazem HCL ER	180mg	SR Cap	BIO	0.5366
02271621	Novo-Diltiazem HCL ER	240mg	SR Cap	BIO	0.7118
02271648	Novo-Diltiazem HCL ER	300mg	SR Cap	BIO	0.8897
02271656	Novo-Diltiazem HCL ER	360mg	SR Cap	BIO	1.0732
00021458	Novo-Ferrogluc	300mg	Tab	NOP	0.0212
00021474	Novo-Hydrazide	25mg	Tab	NOP	0.0366
00021482	Novo-Hydrazide	50mg	Tab	NOP	0.0511
00648035	Novo-Metoprolol	50mg	Tab	NOP	0.0968
00021695	Novo-Prednisone	5mg	Tab	NOP	0.0220
00364282	Novo-Purol	100mg	Tab	NOP	0.0406
00565342	Novo-Purol	200mg	Tab	NOP	0.0805
00363693	Novo-Purol	300mg	Tab	NOP	0.1219
00337730	Novo-Semide	20mg	Tab	NOP	0.0348
00337749	Novo-Semide	40mg	Tab	NOP	0.0526
00532657	Novo-Triamzide	25mg & 50mg	Tab	NOP	0.0450
02143291	Ocuflox	0.3%	Oph Sol	ALL	2.0380
02230621	Opticrom	2%	Oph Sol	ALL	0.9980
00990507	Piportil L4	50mg/mL	Inj Sol-1mL Pk	RPP	22.6800
00299405	Pred Mild	0.12%	Oph Susp	ALL	1.4970
00535427	Ratio-Ectosone Mild	0.05%	Cr	RPH	0.0611

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
00535435	Ratio-Ectosone Regular	0.1%	Cr	RPH	0.0911
01910140	Rhotral	100mg	Tab	SAV	0.1294
01910159	Rhotral	200mg	Tab	SAV	0.1936
01910167	Rhotral	400mg	Tab	SAV	0.3847
00579408	Tears Plus		Oph Sol	ALL	0.3553
00707600	Triquilar 21	3 Phase	Tab-21Pk	BEX	11.3000
00707503	Triquilar 28	3 Phase	Tab-28Pk	BEX	11.3000
02238748	Viramune	200mg	Tab	BOE	4.9383
02049333	Zestril	5mg	Tab	AZC	0.5388
02049376	Zestril	10mg	Tab	AZC	0.6474
02049384	Zestril	20mg	Tab	AZC	0.7779

New Manufacturer Name(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
02237618	Adalat XL	20mg	ER Tab	BAY
02155907	Adalat XL	30mg	ER Tab	BAY
02155990	Adalat XL	60mg	ER Tab	BAY
00704431	Androcur	50mg	Tab	BAY
02242965	Avelox	400mg	Tab	BAY
01984845	Bonefos	400mg	Cap	BAY
02237514	Cipro	10g/100mL	Oral Susp	BAY
02155958	Cipro	250mg	Tab	BAY
02155966	Cipro	500mg	Tab	BAY
02155974	Cipro	750mg	Tab	BAY
02247916	Cipro XL	500mg	ER Tab	BAY
02251787	Cipro XL	1000mg	ER Tab	BAY
02246226	Fludara	10mg	Tab	BAY
02243005	Mirena	52mg	Insert	BAY
02155923	Nimotop	30mg	SG Cap	BAY
02271605	Novo-Diltiazem HCL ER	120mg	SR Cap	NOP
02271613	Novo-Diltiazem HCL ER	180mg	SR Cap	NOP
02271621	Novo-Diltiazem HCL ER	240mg	SR Cap	NOP
02271648	Novo-Diltiazem HCL ER	300mg	SR Cap	NOP
02271656	Novo-Diltiazem HCL ER	360mg	SR Cap	NOP
00990507	Piportil L4	50mg/mL	Inj Sol-1mL Pk	SAV
00707600	Triquilar 21	3 Phase	Tab-21 Pk	BAY
00707503	Triquilar 28	3 Phase	Tab-28 Pk	BAY

Not-A-Benefit Drug(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
01919385	Abenol	120mg	Sup	PEN
01919393	Abenol	325mg	Sup	PEN
01919407	Abenol	650mg	Sup	PEN
00229296	Novasen	650mg	Ent Tab	NOP
01927779	Stemetil	10mg/2mL	Inj Sol-2mL Pk	SAV

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

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
02240862	Seroquel	150mg	Tab	AZC

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

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
02234510	282	15mg	Tab	PEN
01919636	Ancef	500mg	Inj Pd-Vial Pk	SMJ
00010510	Anturan	100mg	Tab	GEI
01937960	Aquasol A	50000IU	Cap	RPR
02150832	Canesten	100mg	Vag Tab	BAY
00016128	Cogentin	2mg/2mL	Inj Sol-2mL Pk	MSD
00017582	Haldol	2mg/mL	O/L	OMC
02162350	Maalox TC	600mg & 300mg	Chew Tab	NOV
00750808	Murocel	1%	Oph Sol	BSH
00002151	Orbenin	250mg	Inj Pd-Vial Pk	AYE
02223864	Panoxyl Aquagel	20%	Gel	STI
00002410	Penbritin	25mg/mL	O/L	AYE
00002429	Penbritin	50mg/mL	O/L	AYE
00022926	Phenobarbital	4mg/mL	O/L	PDA
00024686	Tetracyn	25mg/mL	O/L	PFI

Palliative Care Drug(S)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
09857245	Apo-Gabapentin	100mg	Cap	APX
09857252	Apo-Gabapentin	300mg	Cap	APX
09857260	Apo-Gabapentin	400mg	Cap	APX
09857213	Buscopan	20mg/mL	Inj Sol	BOE
09857215	Buscopan	10mg	Tab	BOE
09857248	Co-Gabapentin	100mg	Cap	COB
09857255	Co-Gabapentin	300mg	Cap	COB
09857263	Co-Gabapentin	400mg	Cap	COB
09857258	Gabapentin	300mg	Cap	GEN
09857247	Gen-Gabapentin	100mg	Cap	GEN
09857254	Gen-Gabapentin	300mg	Cap	GEN
09857262	Gen-Gabapentin	400mg	Cap	GEN
09857236	Hospira-Scopolamine	0.4mg/mL	Inj Sol	HOS
09857237	Hospira-Scopolamine	0.6mg/mL	Inj-1mL Pk	HOS
09857221	Metadol	1mg/mL	O/L	PMS
09857223	Metadol	10mg/mL	O/L	PMS
09857217	Metadol	1mg	Tab	PMS
09857218	Metadol	5mg	Tab	PMS
09857219	Metadol	10mg	Tab	PMS
09857220	Metadol	25mg	Tab	PMS
09857244	Neurontin	100mg	Cap	PFI
09857251	Neurontin	300mg	Cap	PFI
09857259	Neurontin	400mg	Cap	PFI
09857246	Novo-Gabapentin	100mg	Cap	NOP
09857253	Novo-Gabapentin	300mg	Cap	NOP
09857261	Novo-Gabapentin	400mg	Cap	NOP
09857241	Oxy-IR	10mg	Tab	PFP
09857242	Oxy-IR	20mg	Tab	PFP
09857243	Oxy-IR	5mg	Tab	PFP
09857209	PMS-Gabapentin	100mg	Cap	PMS
09857210	PMS-Gabapentin	300mg	Cap	PMS
09857211	PMS-Gabapentin	400mg	Cap	PMS
09857250	Ratio-Gabapentin	100mg	Cap	RPH
09857256	Ratio-Gabapentin	300mg	Cap	RPH
09857264	Ratio-Gabapentin	400mg	Cap	RPH
09857240	Sandoz Diazepam	5mg/mL	Inj-2mL Pk	SDZ
09857207	Sandoz Dimenhydrinate	50mg/mL	Inj-5mL Pk	SDZ
09857208	Sandoz Furosemide	10mg/mL	Inj Sol-2mL Pk	SDZ
09857212	Sandoz Glycopyrrolate	0.2mg/mL	Inj-1mL Amp	SDZ
09857216	Sandoz Lorazepam	4mg/mL	Inj-1mL Pk	SDZ
09857224	Sandoz Metoclopramide	10mg/2mL	Inj-2mL Pk	SDZ
09857225	Sandoz Midazolam	5mg/mL	Inj-1mL Pk	SDZ
09857226	Sandoz Morphine	2mg/mL	Inj Sol Amp	SDZ
09857227	Sandoz Morphine	10mg/mL	Inj Sol Amp	SDZ

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
09857235	Sandoz Phenytoin	50mg/mL	Inj-2mL Pk	SDZ
09857232	Supeudol	5mg	Tab	SIL
09857233	Supeudol	10mg	Tab	SIL
09857234	Supeudol	20mg	Tab	SIL

New Product Identification Number(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
09857268	Mirapex	0.25mg	Tab	BOE	0.9900
09857269	Mirapex	1.0mg	Tab	BOE	1.9800
09857270	Mirapex	1.5mg	Tab	BOE	1.9800

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ReInstated Drug(S) (Added To Payment)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR	DBP
00716642	Betaderm	0.05%	Oint	TAR	0.0606
00716650	Betaderm	0.1%	Oint	TAR	0.0903
02242733	Lin-Fosinopril	10mg	Tab	LON	0.3950
02242734	Lin-Fosinopril	20mg	Tab	LON	0.4750

Limited Use Change(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
02242705	Aromasin	25mg	Tab	PFI

Reason for Use Code	Clinical Criteria
180	For the hormonal treatment of metastatic breast cancer in hormone receptor positive post-menopausal women who have disease progression following tamoxifen therapy. LU Authorization Period: Indefinite.
407	For the sequential treatment of postmenopausal women with estrogen receptor-positive early breast cancer who have received 2-3 years of initial adjuvant tamoxifen therapy. LU Authorization Period: Treatment period required to complete a total of 5 years of adjuvant therapy.

Trade Name Change(s)

DIN	BRAND	STRENGTH	DOSAGE FORM	MFR
00621447	Sandoz Anuzinc	0.5%	Oint	SDZ
02229441	Sandoz Gentamicin	0.3%	Ot Sol	SDZ
02241715	Sandoz Levobunolol	0.25%	Oph Sol	SDZ
02241716	Sandoz Levobunolol	0.5%	Oph Sol	SDZ
02247920	Sandoz Opticort	5mg & 50mcg & 0.5mg/mL	Oph/Ot Sol	SDZ
02244999	Sandoz Pentasone	3mg & 1mg/mL	Oph/Ot Drops	SDZ
02166712	Sandoz Timolol	0.25%	Oph Sol	SDZ
02166720	Sandoz Timolol	0.5%	Oph Sol	SDZ
02241755	Sandoz Tobramycin	0.3%	Oph Sol	SDZ
02245523	Taro-Clobetasol Cream USP	0.05%	Cr	TAR
02245524	Taro-Clobetasol Ointment USP	0.05%	Oint	TAR
02245522	Taro-Clobetasol Topical Solution USP	0.05%	Scalp Lot	TAR

Change(s) to Nutrition Product(s)

PIN	PRODUCT	MFR
A. COMPLETE POLYMERIC, 1. LACTOSE FREE		
97983420	Isocal Liq-250mL Pk	NON
A. COMPLETE POLYMERIC, 3. FIBRE CONTAINING		
09853111	Isocal with Fibre Liq-250mL Pk	NON
A. COMPLETE POLYMERIC, 4. HIGH NITROGEN		
09854177	Boost Plus Calories Liq-237mL Pk	NON
D. CHEMICALLY DEFINED FORMULA		
97980820	Criticare HN Liq-235mL Pk	NON