

UPDATE B
Ontario Drug Benefit
Formulary/Comparative Drug Index
No. 39
Effective April 19, 2006

SUMMARY OF CHANGES

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New Single Source Drug(s)

The following product(s) have been added to Part III of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006:

<u>DIN</u>	<u>PRODUCT</u>	<u>GENERIC NAME</u>	<u>MFR</u>	<u>DBP</u>
02267217	Asacol 800mg Tab	5-AMINOSALICYLIC ACID	PGP	0.9900
02239090	Atacand 4mg Tab	CANDESARTAN CILEXETIL	AZC	0.6800
02254794	Pico-Salax 3.5g/12g/10mg Pd for Sol-12g Pk	MAGNESIUM OXIDE, CITRIC ACID & SODIUM PICO	FEI	12.0000
02268086	Risperdal M-Tab 3mg Orally Disintegrating Tab	RISPERIDONE	JNO	2.8750
02268094	Risperdal M-Tab 4mg Orally Disintegrating Tab	RISPERIDONE	JNO	3.8333

New Multi-Source Drug(s)

The following product(s) have been added to Part III of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, on effective date(s) as indicated below :

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>	<u>DBP</u>
<u>Effective October 6, 2005</u>					
02267640	Apo-Medroxy (Interchangeable with Provera)	100mg	Tab	APX	0.8543
02270129	Gen-Alendronate (Interchangeable with Fosamax)	10mg	Tab	GEN	1.1057
	Reason for Use Code	Clinical Criteria			
		For the treatment of osteoporosis in patients who have:			
	369	Two out of the following three criteria: BMD at least 3.0 standard deviations below the young adult mean, age of 75 or greater, prior osteoporosis-related fracture.			
		LU Authorization Period: Indefinite.			
	370	Failed* or, experienced intractable side effects, or have a contraindication to, cyclical etidronate (Didrocal) therapy.			
		*Failure is defined as: continued loss of bone mineral density (loss of more than 3%) after two years of therapy; or a new osteoporosis related fracture after one year of therapy.			
		LU Authorization Period: Indefinite.			
02182777	Methotrexate (Interchangeable with Methotrexate)	50mg/2mL	Inj Sol- 2mL Pk	MAY	12.4800
02265885	Taro-Simvastatin	10mg	Tab	TAR	1.1214
02265893	Taro-Simvastatin	20mg	Tab	TAR	1.3860
02265907	Taro-Simvastatin (Interchangeable with Zocor)	40mg	Tab	TAR	1.3860

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE</u> <u>FORM</u>	<u>MFR</u>	<u>DBP</u>
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Effective November 8, 2005

02257092	Gen-Pravastatin	10mg	Tab	GEN	0.9530
02257106	Gen-Pravastatin	20mg	Tab	GEN	1.1243
02257114	Gen-Pravastatin (Interchangeable with Pravachol)	40mg	Tab	GEN	1.3543

02263351	Gen-Topiramate	25mg	Tab	GEN	0.7350
02263378	Gen-Topiramate	100mg	Tab	GEN	1.3930
02263386	Gen-Topiramate	200mg	Tab	GEN	2.2050
02248860	Novo-Topiramate	25mg	Tab	NOP	0.7350
02248861	Novo-Topiramate	100mg	Tab	NOP	1.3930
02248862	Novo-Topiramate	200mg	Tab	NOP	2.2050
02262991	PMS-Topiramate	25mg	Tab	PMS	0.7350
02263009	PMS-Topiramate	100mg	Tab	PMS	1.3930
02263017	PMS-Topiramate	200mg	Tab	PMS	2.2050
02256827	Ratio-Topiramate	25mg	Tab	RPH	0.7350
02256835	Ratio-Topiramate	100mg	Tab	RPH	1.3930
02256843	Ratio-Topiramate	200mg	Tab	RPH	2.2050
02260050	Rhoxal-Topiramate	25mg	Tab	RHO	0.7350
02260069	Rhoxal-Topiramate	100mg	Tab	RHO	1.3930
02267837	Rhoxal-Topiramate (Interchangeable with Topamax)	200mg	Tab	RHO	2.2050

**Reason for
Use Code**

Clinical Criteria

223

As adjunctive therapy in the treatment of seizure disorders where control by other listed anticonvulsants has been unsatisfactory.

NOTE: Because a large number of patients may become refractory to the anticonvulsant effects of the drug over a period of time, the effectiveness of this drug must be re-evaluated after a period of six months.

LU Authorization Period: Indefinite.

02250896	Taro-Phenytoin (Interchangeable with Dilantin)	25mg/mL	O/L	TAR	0.0311
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DINBRANDSTRENGTHDOSAGE
FORMMFRDBP**Effective December 6, 2005**

02046741 Apo-Salvent	5mg/mL	Inh Sol- 10mL Pk	APX	5.9031
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(Interchangeable with Ventolin)

**Reason for
Use Code****Clinical Criteria**

For the vast majority of patients, a metered dose inhaler is the preferred therapy. Nebulizer therapy will be reimbursed 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 month period.
LU Authorization Period: Indefinite. |

02240485 Novo-Sertraline	25mg	Cap	NOP	0.5040
02240484 Novo-Sertraline	50mg	Cap	NOP	1.0080
02240481 Novo-Sertraline	100mg	Cap	NOP	1.1025

(Interchangeable with Zoloft)

02246284 PMS-Brimonidine	0.2%	Oph Sol	PMS	2.0790
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(Interchangeable with Alphagan)

**Reason for
Use Code****Clinical Criteria**

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|-----|--|
| 171 | As first line treatment of elevated intraocular pressure in patients who cannot tolerate an ophthalmic beta-blocking agent or where beta-blocking agents are contraindicated;
LU Authorization Period: Indefinite. |
| 172 | As a second line monotherapy or combination therapy in patients who do not have an adequate intraocular pressure lowering response to ophthalmic beta-blocking agents.
LU Authorization Period: Indefinite. |
| 387 | For use as adjunctive therapy with an ophthalmic beta-blocking agent in an urgent situation (e.g. patients with a high baseline intraocular pressure) where monotherapy is unlikely to be effective.
LU Authorization Period: Indefinite. |

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE</u> <u>FORM</u>	<u>MFR</u>	<u>DBP</u>
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02268027	Ran-Carvedilol	3.125mg	Tab	RAN	0.8001
02268035	Ran-Carvedilol	6.25mg	Tab	RAN	0.8001
02268043	Ran-Carvedilol	12.5mg	Tab	RAN	0.8001
02268051	Ran-Carvedilol (Interchangeable with Coreg)	25mg	Tab	RAN	0.8001

**Reason for
Use Code**

Clinical Criteria

183

For patients with:
a) NYHA Class II or III Congestive Heart Failure (CHF);
and
b) Currently being treated with an angiotension converting
enzyme (ACE) inhibitor, diuretics with or without digoxin, or
previously treated, and failed these agents; and
c) An ejection fraction less than or equal to 35%; and
d) At least one episode of symptomatic CHF within a 12
month period while receiving optimal management.

LU Authorization Period: Indefinite.

02267969	Ran-Lovastatin	20mg	Tab	RAN	1.0907
02267977	Ran-Lovastatin (Interchangeable with Mevacor)	40mg	Tab	RAN	2.0117
02267292	Rhoxal-Mirtazapine FC (Interchangeable with Remeron)	30mg	Tab	RHO	0.7812
02247920	Sab-Opticort (Interchangeable with Sofracort)	5mg & 50mcg & 0.5mg/mL	Oph/Ot Sol	SIL	0.9800
02264749	Taro-Mometasone (Interchangeable with Elocom)	0.1%	Oint	TAR	0.3491

Manufacturer Requested Discontinued Drug(s)

The following product(s) have been revised in Part III of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006. Please note that these discontinued products will remain on the formulary until the current stock is depleted:

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>
02060833	Bacitracin	500U/g	Oint	SHI
02237864	Capril	100mg	Tab	TCH
09853847	Humulin 20/80 Cartridge	100U/mL	Inj Susp-5x3mL Pk	LIL
00288217	Nadostine	100000U/g	Cr	NDA
00288195	Nadostine	100000U/g	Oint	NDA
02074087	PMS-Potassium Gluconate	1.33mEq/mL	O/L	PMS
02230321	Ratio-Methylphenidate	10mg	Tab	RPH
02240622	Rhoxal-Famotidine	20mg	Tab	RHO
02240623	Rhoxal-Famotidine	40mg	Tab	RHO
02247827	Rhoxal-Simvastatin	5mg	Tab	RHO
02240862	Seroquel	150mg	Tab	AZC
02230543	Tilade	2mg/Metered Dose	Inh	AVE

New Drug Identification Number(s)

The following product(s) have been revised in Part III of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006:

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>
02106256	Colace	100mg	Cap	BQU

New Generic Name(s)

The following product(s) have been revised in Part III of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006:

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>
02182963	Apo-Methotrexate	2.5mg	Tab	MAY
02182777	Methotrexate	50mg/2mL	Inj Sol-2mL Pk	MAY
02170671	Methotrexate	50mg/2mL	Inj Sol-2mL Pk	WAY
02170698	Methotrexate	2.5mg	Tab	WAY
02182947	Methotrexate Sodium	20mg/2mL	Inj Sol-2mL Pk	FAU
02244798	Ratio-Methotrexate Sodium	2.5mg	Tab	RPH

(Revised generic name: METHOTREXATE)

New Drug Benefit Price(s)

The following product(s) have been revised in Part III of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006:

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>	<u>DBP</u>
02245330	Gen-Etidronate	200mg	Tab	GEN	0.8257
02248013	Gen-Paroxetine	20mg	Tab	GEN	1.0017
02248014	Gen-Paroxetine	30mg	Tab	GEN	1.0647
02244769	PMS-Mometasone	0.1%	Oint	PMS	0.3491

New Manufacturer Name(s)

The following product(s) have been revised in Part III of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006:

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>
02194058	Aristocort R	0.1%	Cr	VAE
02194031	Aristocort R	0.1%	Oint	VAE
00461733	Carbolith	150mg	Cap	VAL
00236683	Carbolith	300mg	Cap	VAL
02239941	Celebrex	100mg	Cap	PFI
02239942	Celebrex	200mg	Cap	PFI
00548375	Cesamet	1mg	Cap	VAL
00464767	Colace	100mg	Cap	WEL
00012696	Dalmane	15mg	Cap	VAL
00012718	Dalmane	30mg	Cap	VAL
00330582	Efudex	5%	Cr	VAL
02248239	Eligard	7.5mg	Inj Pref Syr-Kit	SAS
02248240	Eligard	22.5mg	Inj Pref Syr-Kit	SAS
02248999	Eligard	30mg	Inj Pref Syr-Kit	SAS
00247960	Etibi	100mg	Tab	VAL
00247979	Etibi	400mg	Tab	VAL
02229516	Glycon	500mg	Tab	VAL
00716863	Lyderm	0.05%	Cr	TPH
02236997	Lyderm	0.05%	Gel	TPH
02236996	Lyderm	0.05%	Oint	TPH
00486582	M.O.S.	1mg/mL	O/L	VAL
00690201	M.O.S.-20	20mg	Tab	VAL
00869953	Mestinon	180mg	LA Tab	VAL
00511528	Mogadon	5mg	Tab	VAL
00511536	Mogadon	10mg	Tab	VAL
02063786	Mycobutin	150mg	Cap	PFI
00268585	Niacin-ICN	100mg	Tab	VAL
02229654	Nitrazadon	5mg	Tab	VAL
02229655	Nitrazadon	10mg	Tab	VAL
01946374	Oxsoralen	10mg	Cap	VAL
02220059	Oxybutyn	5mg	Tab	VAL
00271489	Phenazo	100mg	Tab	VAL
00454583	Phenazo	200mg	Tab	VAL
00869945	Prostigmin	15mg	Tab	VAL
00393444	Rofact	150mg	Cap	VAL
00343617	Rofact	300mg	Cap	VAL
02065819	Sabril	500mg	Tab	OVA
00283991	Tebrazid	500mg	Tab	VAL
00268607	Vitamin B6-ICN	25mg	Tab	VAL
00271373	Winpred	1mg	Tab	VAL
02246619	Xalacom	50mcg/mL & 5mg/mL	Oph Sol-2.5mL Pk	PFI

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

The following product(s) will be removed from Part III of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006:

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>
00254134	Alupent		Inh Pd-300 Dose Pk	BOE
02231676	Chronovera	180mg	SR Tab	PHA
02231677	Chronovera	240mg	SR Tab	PHA
02212978	Dexamethasone Sodium	0.1%	Oph/Ot Sol	RIV
00001104	Epifrin	1%	Oph Sol	ALL
02212927	Gentamicin Sulfate	0.3%	Oph Sol	RIV
02133318	Inflamase Forte	1%	Oph Sol	CBV
02231714	Levobunolol Hydrochloride	0.25%	Oph Sol	RIV
02231715	Levobunolol Hydrochloride	0.5%	Oph Sol	RIV
00093521	Phenobarbital	30mg	Tab	DCL
00093556	Phenobarbital	60mg	Tab	DCL
02213036	Pilocarpine HCL	1%	Oph Sol	RIV
02213044	Pilocarpine HCL	2%	Oph Sol	RIV
02213052	Pilocarpine HCL	4%	Oph Sol	RIV
02209071	Probeta	0.5% & 0.1%	Oph Sol	ALL
01910086	Staticin	1.5%	Lot	WSQ
02052423	Taro-Carbamazepine	200mg	Tab	TAR
01905082	Timpilo 2	0.5% & 2%	Oph Sol	MSD
01905090	Timpilo 4	0.5% & 4%	Oph Sol	MSD
02239148	Tobramycin	0.3%	Oph Sol	RIV

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

The following product(s) will be removed from Part III of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006:

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>
00023809	Phenobarbital	30mg	Tab	PDA
00023817	Phenobarbital	60mg	Tab	PDA

Limited Use Change(s)

The following product(s) have been revised in Part III of Edition 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006:

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>	<u>DBP</u>
02231384	Femara	2.5mg	Tab	NOV	4.9500
	Reason for Use Code	Clinical Criteria			
	365	For the treatment of metastatic breast cancer in hormone receptor positive post-menopausal women. LU Authorization Period: Indefinite.			
	403	For the treatment of hormone receptor positive early breast cancer in postmenopausal women who have received 5 years of adjuvant tamoxifen therapy. LU Authorization Period: 5 years.			

Trade Name Change(s)

The following product(s) have been revised in Part III & Part IX of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006:

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>
02248239	Eligard	7.5mg	Pd Susp Inj - Pref Syr Kit	SAO
02248240	Eligard	22.5mg	Pd Susp Inj - Pref Syr Kit	SAO
02248999	Eligard	30mg	Pd Susp Inj - Pref Syr Kit	SAO
02108186	Estracomb	250/50	Transdermal Patch - 8 Patch Pk	NOV
09854444	Osmolite 1 Cal	1.06kcal/mL	Liq-1000mL Pk	ABB
09854452	Osmolite 1 Cal	1.06kcal/mL	Liq-1500mL Pk	ABB
09854487	Osmolite 1.2 Cal	1.2kcal/mL	Liq-1000mL Pk	ABB
09857095	Osmolite 1.2 Cal	1.2kcal/mL	Liq-1500mL Pk	ABB

Change(s) to Diabetic Testing Agent(s)

The following product(s) have been added/revised in Part IX of Edition No. 39 of the Drug Benefit Formulary/Comparative Drug Index, effective April 19, 2006:

<u>PIN</u>	<u>PRODUCT</u>	<u>MFR</u>	<u>COST/ UNIT</u>	<u>AMT MOH PAYS</u>	<u>AMT PATIENT PAYS</u>
09857178	+ Accu-Chek Aviva Strip	ROD	0.7404	0.7290	0.0114

CONSOLIDATED INDEX

<u>PRODUCT, STRENGTH & DOSAGE FORM</u>	<u>DIN</u>	<u>MFR</u>	<u>UPDATE</u>	<u>PAGE NO.</u>
10-Benzagel 10% Gel	02220385	DER	A	5
5-AMINOSALICYLIC ACID			B	2
Abenol 120mg Sup	01919385	PEN	A	10
Abenol 325mg Sup	01919393	PEN	A	10
Abenol 650mg Sup	01919407	PEN	A	10
Accu-Chek Aviva - Strip	09857178	ROD	B	16
Acilac 666.7mg/mL O/L	00854409	RPH	A	10
Aldomet 250mg Tab	00016578	MSD	A	5
ALENDRONATE			A	3
			B	3
Alti-Cefuroxime 250mg Tab	02242656	RPH	A	10
Alti-Cefuroxime 500mg Tab	02242657	RPH	A	10
Alti-Salbutamol Sulphate 2mg/mL Inh Sol- 2.5mL Pk	02239366	RPH	A	10
Alupent Inh Pd-300 Dose Pk	00254134	BOE	B	12
Amcort 0.1% Cr	02246714	TPH	A	10
AMETHOPTERIN (SODIUM)			B	3
Anafranil 10mg Tab	00330566	ORY	A	10
Anafranil 25mg Tab	00324019	ORY	A	10
Anafranil 50mg Tab	00402591	ORY	A	10
Ancef 500mg Inj Pd-Vial Pk	01919636	SMJ	A	5
Andriol 40mg Cap	00782327	ORG	A	13
Apo-Alendronate 70mg Tab	02248730	APX	A	9
Apo-Ipravent 0.03% Nasal Spray	02246083	APX	A	3
Apo-Medroxy 100mg Tab	02267640	APX	B	3
Apo-Methotrexate 2.5mg Tab	02182963	MAY	B	9
Apo-Phenylbutazone 100mg Tab	00312789	APX	A	6
Apo-Salvent 5mg/mL Inh Sol-10mL Pk	02046741	APX	B	5
Apresoline 20mg/mL Inj Sol-1mL Pk	00723754	STE	A	10
Apresoline 25mg Tab	00005533	STE	A	10
Aralen 250mg Tab	02017539	SAO	A	5
Aristocort R 0.1% Cr	02194058	VAE	B	11
Aristocort R 0.1% Oint	02194031	VAE	B	11
Asacol 800mg Tab	02267217	PGP	B	2
Atacand 4mg Tab	02239090	AZC	B	2
Bacitracin 500U/g Oint	02060833	SHI	B	7
BenzaClin 1% & 5% Top Gel	02248472	DER	A	2
BISOPROLOL FUMARATE			A	3
BRIMONIDINE			B	5
C.E.S. 0.625mg Tab	00265470	ICN	A	13
C.E.S. 1.25mg Tab	00265489	ICN	A	13
CANDESARTAN CILEXETIL			B	2
Capril 100mg Tab	02237864	TCH	B	7
Carbolith 150mg Cap	00461733	VAL	B	11
Carbolith 300mg Cap	00236683	VAL	B	11
CARVEDILOL			B	6
Celebrex 100mg Cap	02239941	PFI	B	11
Celebrex 200mg Cap	02239942	PFI	B	11
Cerubidine Inj Pd-20mg Pk	01926683	ERF	A	10
Cesamet 1mg Cap	00548375	VAL	B	11
Chronovera 180mg SR Tab	02231676	PHA	B	12

<u>PRODUCT, STRENGTH & DOSAGE FORM</u>	<u>DIN</u>	<u>MFR</u>	<u>UPDATE</u>	<u>PAGE NO.</u>
Chronovera 240mg SR Tab	02231677	PHA	B	12
Climara 50 50mcg/day Transdermal Patch	02231509	BEX	A	7
Climara 100 100mcg/day Transdermal Patch	02231510	BEX	A	7
CLINDAMYCIN PHOSPHATE & BENZOYL PEROXIDE			A	2
Co-Alendronate 70mg Tab	02258110	COB	A	3
Colace 100mg Cap	02106256	BQU	B	8
	00464767	WEL	B	11
Colace 4mg/mL O/L	02086018	WEL	A	10
Colace 10mg/mL O/L	02090163	WEL	A	10
Compleat Pediatric 1kcal/mL Liq-250mL Pk	09857173	NON	A	17
Dalacin C 15mg/mL O/L	00225851	PFI	A	10
Dalacin C Flavoured Granules 15mg/mL Pd for Oral Susp	00225851	UPJ	A	16
Dalmane 15mg Cap	00012696	VAL	B	11
Dalmane 30mg Cap	00012718	VAL	B	11
Delatestryl 1000mg/5mL Oily Inj Sol-5mL Pk	00029246	THE	A	14
Depo-Testosterone 100mg/mL Oily Inj Sol-10mL Pk	00030783	UPJ	A	14
Dermovate 0.05% Cr	02213265	TPH	A	10
Dermovate 0.05% Oint	02213273	TPH	A	10
Dermovate 0.05% Scalp Lot	02213281	TPH	A	10
Dexamethasone Sodium 0.1% Oph/Ot Sol	02212978	RIV	B	12
DTIC Inj Pd-200mg Pk	02154854	BAH	A	5
Edecrin 50mg Tab	00016497	MSD	A	5
EES-600 600mg Tab	00583782	ABB	A	5
Efudex 5% Cr	00330582	VAL	B	11
Eligard 7.5mg Inj Pref Syr-Kit	02248239	SAS	B	11
Eligard 22.5mg Inj Pref Syr-Kit	02248240	SAS	B	11
Eligard 30mg Inj Pref Syr-Kit	02248999	SAS	B	11
Eligard 7.5mg Pd Susp Inj - Pref Syr Kit	02248239	SAO	B	15
Eligard 22.5mg Pd Susp Inj - Pref Syr Kit	02248240	SAO	B	15
Eligard 30mg Pd Susp Inj - Pref Syr Kit	02248999	SAO	B	15
Endo Levodopa/Carbid 100mg & 10mg Tab	02126176	RPH	A	10
Endo Levodopa/Carbid 100mg & 25mg Tab	02126168	RPH	A	10
Endo Levodopa/Carbid 250mg & 25mg Tab	02126184	RPH	A	10
Enfamil EnfaCare A+ 22kcal/30mL Powder for Liq-363g Pk	09857172	MJS	A	17
Epifrin 1% Oph Sol	00001104	ALL	B	12
Estalis Transdermal Pad 140/50mcg 2.7mg/0.62mg Patch	02241835	NOV	A	7
Estalis Transdermal Pad 250/50mcg 4.8mg/0.51mg Patch	02241837	NOV	A	7
Estalis-Sequi 140/50 4.33mg plus 2.7mg/0.62mg Trans Patch - 28 Day Pk	02243529	NOV	A	7
Estalis-Sequi 250/50 4.33mg plus 4.8mg/0.51mg Trans Patch - 28 Day Pk	02243530	NOV	A	7
Estracomb 250/50 Transdermal Patch	02108186	NOV	A	7
Estracomb 250/50 Transdermal Patch - 8 Patch Pk	02108186	NOV	B	15
Estraderm 25ug Patch	00756849	NOV	A	7
Estraderm 50ug Patch	00756857	NOV	A	7
Estraderm 100ug Patch	00756792	NOV	A	7
Estradot 37.5mcg Patch	02243999	NOV	A	7
Estradot 50mcg Patch	02244000	NOV	A	7
Estradot 75mcg Patch	02244001	NOV	A	7

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Estradot 100mcg Patch	02244002	NOV	A	7
Estroge1 0.06% Metered Dose Pump - Pk	02238704	SCH	A	7
Etibi 100mg Tab	00247960	VAL	B	11
Etibi 400mg Tab	00247979	VAL	B	11
Femara 2.5mg Tab	02231384	NOV	B	14
FOSAMPRENAVIR CALCIUM			A	2
FRAMYCETIN SULFATE & GRAMICIDIN & DEXAMETHASONE			B	6
GALANTAMINE HYDROBROMIDE			A	2
Gastrolyte Oral Pd-1 Sach Pk	01931563	SAV	A	10
Gen-Alendronate 10mg Tab	02270129	GEN	B	3
Gen-Etidronate 200mg Tab	02245330	GEN	B	10
Gen-Paroxetine 20mg Tab	02248013	GEN	B	10
Gen-Paroxetine 30mg Tab	02248014	GEN	B	10
Gen-Pravastatin 10mg Tab	02257092	GEN	B	4
Gen-Pravastatin 20mg Tab	02257106	GEN	B	4
Gen-Pravastatin 40mg Tab	02257114	GEN	B	4
Gentamicin Sulfate 0.3% Oph Sol	02212927	RIV	B	12
Gen-Topiramate 25mg Tab	02263351	GEN	B	4
Gen-Topiramate 100mg Tab	02263378	GEN	B	4
Gen-Topiramate 200mg Tab	02263386	GEN	B	4
Glycon 500mg Tab	02229516	VAL	B	11
Humulin 20/80 Cartridge 100U/mL Inj Susp-5x3mL Pk	09853847	LIL	B	7
Humulin L Lente 1000U/10mL Inj Susp-10mL Pk	00646148	LIL	A	5
Humulin-U Ultralente 1000U/10mL Inj Susp-10mL Pk	00733075	LIL	A	5
Hydroval 0.2% Cr	02242984	TPH	A	10
Hydroval 0.2% Oint	02242985	TPH	A	10
Hytakerol 0.125mg Cap	02017601	SAO	A	5
Iletin II NPH 1000U/10mL Inj Susp-10mL Pk	00514551	LIL	A	5
Iletin II Regular 1000U/10mL Inj Sol-10mL Pk	00513644	LIL	A	5
Inflamase Forte 1% Oph Sol	02133318	CBV	B	12
Intal Spincaps 20mg/Cart Pd Inh	00261238	AVE	A	5
IPRATROPIUM BROMIDE			A	3
Kefzol 500mg Inj Pd-Vial Pk	00322288	LIL	A	5
Kefzol 1000mg Inj Pd-Vial Pk	00322296	LIL	A	5
Ketoderm 2% Cr	02245662	TPH	A	10
K-Lyte/Cl 25mEq/Pouch Oral Pd-7.8g Pk	02089580	WEL	A	10
Levobunolol Hydrochloride 0.25% Oph Sol	02231714	RIV	B	12
Levobunolol Hydrochloride 0.5% Oph Sol	02231715	RIV	B	12
LOVASTATIN			B	6
Lyderm 0.05% Cr	00716863	TPH	B	11
Lyderm 0.05% Gel	02236997	TPH	B	11
Lyderm 0.05% Oint	02236996	TPH	B	11
M.O.S. 1mg/mL O/L	00486582	VAL	B	11
M.O.S.-20 20mg Tab	00690201	VAL	B	11
MAGNESIUM OXIDE, CITRIC ACID & SODIUM PICO			B	2
MEDROXYPROGESTERONE ACETATE			B	3
Mellaril 30mg/mL O/L	00027359	SAN	A	6
Mestinon 180mg LA Tab	00869953	VAL	B	11
Methotrexate 50mg/2mL Inj Sol-2mL Pk	02182777	MAY	B	9
	02170671	WAY	B	9
	02182777	MAY	B	3
Methotrexate 2.5mg Tab	02170698	WAY	B	9

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Methotrexate Sodium 20mg/2mL Inj Sol-2mL Pk	02182947	FAU	B	9
MIRTAZAPINE			B	6
Mogadon 5mg Tab	00511528	VAL	B	11
Mogadon 10mg Tab	00511536	VAL	B	11
MOMETASONE FUROATE			B	6
Mycobutin 150mg Cap	02063786	PFI	B	11
MYCOPHENOLATE SODIUM			A	2
Myfortic 180mg Ent Coated Tab	02264560	NOV	A	2
Myfortic 360mg Ent Coated Tab	02264579	NOV	A	2
Nadostine 100000U/g Cr	00288217	NDA	B	7
Nadostine 100000U/g Oint	00288195	NDA	B	7
Neuleptil 5mg Cap	01926780	ERF	A	10
Neuleptil 10mg Cap	01926772	ERF	A	10
Neuleptil 10mg/mL O/L	01926756	ERF	A	10
Niacin-ICN 100mg Tab	00268585	VAL	B	11
Nilstat 100000U/g Cr	02194236	RPH	A	10
Nilstat 100000U/g Oint	02194228	RPH	A	10
Nilstat 100000U/g Vag Cr	02194163	RPH	A	10
Nilstat 100000U Vag Tab	02194171	RPH	A	10
Nitrazadon 5mg Tab	02229654	VAL	B	11
Nitrazadon 10mg Tab	02229655	VAL	B	11
Noroxin 400mg Tab	00643025	MSD	A	5
Novo-Alendronate 70mg Tab	02261715	NOP	A	3
Novo-Bisoprolol 5mg Tab	02267470	NOP	A	3
Novo-Bisoprolol 10mg Tab	02267489	NOP	A	3
Novo-Butazone 100mg Tab	00021660	NOP	A	6
Novo-Sertraline 25mg Cap	02240485	NOP	B	5
Novo-Sertraline 50mg Cap	02240484	NOP	B	5
Novo-Sertraline 100mg Cap	02240481	NOP	B	5
Novo-Topiramate 25mg Tab	02248860	NOP	B	4
Novo-Topiramate 100mg Tab	02248861	NOP	B	4
Novo-Topiramate 200mg Tab	02248862	NOP	B	4
Novo-Warfarin 1mg Tab	02265273	NOP	A	4
Novo-Warfarin 2mg Tab	02265281	NOP	A	4
Novo-Warfarin 2.5mg Tab	02265303	NOP	A	4
Novo-Warfarin 3mg Tab	02265311	NOP	A	4
Novo-Warfarin 4mg Tab	02265338	NOP	A	4
Novo-Warfarin 5mg Tab	02265346	NOP	A	4
Nu-Naprox 125mg Tab	00865621	NXP	A	5
Oesclim 50mcg Patch	02237808	FOU	A	7
	02243724	FOU	A	8
	02237808	PAL	A	10
Ogen 1.25 1.5mg Tab	02089769	UPJ	A	14
Ogen 2.5 3mg Tab	02089777	UPJ	A	14
Ophtho-Tate 1% Oph Susp	00700401	RPH	A	10
Osmolite 1 Cal 1.06kcal/mL Liq-1000mL Pk	09854444	ABB	B	15
Osmolite 1 Cal 1.06kcal/mL Liq-1500mL Pk	09854452	ABB	B	15
Osmolite 1.2 Cal 1.2kcal/mL Liq-1000mL Pk	09854487	ABB	B	15
Osmolite 1.2 Cal 1.2kcal/mL Liq-1500mL Pk	09857095	ABB	B	15
Oxsoralen 10mg Cap	01946374	VAL	B	11
Oxybutyn 5mg Tab	02220059	VAL	B	11
Parsitan 50mg Tab	01927744	ERF	A	10
Permax 0.05mg Tab	02123320	SBI	A	10

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Permax 0.25mg Tab	02123339	SBI	A	10
Permax 1mg Tab	02123347	SBI	A	10
Phenazo 100mg Tab	00271489	VAL	B	11
Phenazo 200mg Tab	00454583	VAL	B	11
Phenobarbital 30mg Tab	00093521	DCL	B	12
	00023809	PDA	B	13
Phenobarbital 60mg Tab	00093556	DCL	B	12
	00023817	PDA	B	13
PHENYTOIN (DIPHENYLHYDANTOIN)			B	4
Pico-Salax 3.5g/12g/10mg Pd for Sol-12g Pk	02254794	FEI	B	2
Pilocarpine HCL 1% Oph Sol	02213036	RIV	B	12
Pilocarpine HCL 2% Oph Sol	02213044	RIV	B	12
Pilocarpine HCL 4% Oph Sol	02213052	RIV	B	12
PMS-Brimonidine 0.2% Oph Sol	02246284	PMS	B	5
PMS-Ipratropium 0.03% Nasal Spray	02239627	PMS	A	9
PMS-Mometasone 0.1% Oint	02244769	PMS	A	9
	02244769	PMS	B	10
PMS-Potassium Gluconate 1.33mEq/mL O/L	02074087	PMS	B	7
PMS-Thioridazine 30mg/mL O/L	00775320	PMS	A	6
PMS-Topiramate 25mg Tab	02262991	PMS	B	4
PMS-Topiramate 100mg Tab	02263009	PMS	B	4
PMS-Topiramate 200mg Tab	02263017	PMS	B	4
PRAVASTATIN SODIUM			B	4
Premarin 0.3mg Tab	02043394	WAY	A	15
Premarin 0.625mg Tab	02043408	WAY	A	15
Premarin 1.25mg Tab	02043424	WAY	A	15
Premplus 0.625mg/2.5mg Tab-28 Day Pk	02242878	WAY	A	15
Premplus 0.625mg/5mg Tab-28 Day Pk	02242879	WAY	A	15
Probeta 0.5% & 0.1% Oph Sol	02209071	ALL	B	12
Prostigmin 15mg Tab	00869945	VAL	B	11
Purinethol 50mg Tab	00004723	NOP	A	10
Ran-Carvedilol 3.125mg Tab	02268027	RAN	B	6
Ran-Carvedilol 6.25mg Tab	02268035	RAN	B	6
Ran-Carvedilol 12.5mg Tab	02268043	RAN	B	6
Ran-Carvedilol 25mg Tab	02268051	RAN	B	6
Ranitidine 150mg Tab	00828823	RPH	A	10
Ranitidine 300mg Tab	00828688	RPH	A	10
Ran-Lovastatin 20mg Tab	02267969	RAN	B	6
Ran-Lovastatin 40mg Tab	02267977	RAN	B	6
Ratio-Brimonidine 0.2% Oph Sol	02243026	RPH	A	9
Ratio-Cefuroxime 250mg Tab	02242656	ALT	A	16
Ratio-Cefuroxime 500mg Tab	02242657	ALT	A	16
Ratio-Lactulose 666.7mg/mL O/L	00854409	TCH	A	16
Ratio-Levodopa/Carbidopa 100mg & 10mg Tab	02126176	DUP	A	16
Ratio-Levodopa/Carbidopa 100mg & 25mg Tab	02126168	DUP	A	16
Ratio-Levodopa/Carbidopa 250mg & 25mg Tab	02126184	DUP	A	16
Ratio-Methotrexate Sodium 2.5mg Tab	02244798	RPH	B	9
Ratio-Methylphenidate 10mg Tab	02230321	RPH	B	7
Ratio-Mometasone 0.1% Oint	02248130	RPH	A	9
Ratio-Nystatin 100000U/g Cr	02194236	TCH	A	16
Ratio-Nystatin 100000U/g Oint	02194228	TCH	A	16
Ratio-Nystatin 100000U/g Vag Cr	02194163	TCH	A	16
Ratio-Nystatin 100000U Vag Tab	02194171	TCH	A	16

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Ratio-Prednisolone 1% Oph Susp	00700401	KNR	A	16
Ratio-Ranitidine 150mg Tab	00828823	KNR	A	16
Ratio-Ranitidine 300mg Tab	00828688	KNR	A	16
Ratio-Salbutamol 2mg/mL Inh Sol- 2.5mL Pk	02239366	ALT	A	16
Ratio-Sulfasalazine 500mg Tab	00685933	KNR	A	16
Ratio-Sulfasalazine EN 500mg Ent Tab	00685925	KNR	A	16
Ratio-Topiramate 25mg Tab	02256827	RPH	B	4
Ratio-Topiramate 100mg Tab	02256835	RPH	B	4
Ratio-Topiramate 200mg Tab	02256843	RPH	B	4
Reminyl ER 8mg ER Cap	02266717	JNO	A	2
Reminyl ER 16mg ER Cap	02266725	JNO	A	2
Reminyl ER 24mg ER Cap	02266733	JNO	A	2
Restoril 15mg Cap	00604453	ORY	A	10
Restoril 30mg Cap	00604461	ORY	A	10
Rho-Atenolol 50mg Tab	02231731	RHO	A	11
Rho-Atenolol 100mg Tab	02231733	RHO	A	11
Rho-Salbutamol 5mg/mL Inh Sol-10mL Pk	02154412	RHO	A	11
Rhoxal-Atenolol 50mg Tab	02231731	RHP	A	16
Rhoxal-Atenolol 100mg Tab	02231733	RHP	A	16
Rhoxal-Estradiol Derm - 50 50mcg/day Patch	02246967	RHO	A	7
Rhoxal-Estradiol Derm - 75 75mcg/day Patch	02246968	RHO	A	7
Rhoxal-Estradiol Derm - 100 100mcg/day Patch	02246969	RHO	A	7
Rhoxal-Famotidine 20mg Tab	02240622	RHO	B	7
Rhoxal-Famotidine 40mg Tab	02240623	RHO	B	7
Rhoxal-Mirtazapine FC 30mg Tab	02267292	RHO	B	6
Rhoxal-Salbutamol 5mg/mL Inh Sol-10mL Pk	02154412	RHP	A	16
Rhoxal-Simvastatin 5mg Tab	02247827	RHO	B	7
Rhoxal-Topiramate 25mg Tab	02260050	RHO	B	4
Rhoxal-Topiramate 100mg Tab	02260069	RHO	B	4
Rhoxal-Topiramate 200mg Tab	02267837	RHO	B	4
Risperdal M-Tab 3mg Orally Disintegrating Tab	02268086	JNO	B	2
Risperdal M-Tab 4mg Orally Disintegrating Tab	02268094	JNO	B	2
RISPERIDONE			B	2
Rofact 150mg Cap	00393444	VAL	B	11
Rofact 300mg Cap	00343617	VAL	B	11
Roferon-A 3mu/Vial Inj Sol-1mL Pk	02217015	HLR	A	5
Roferon-A 18mu/Vial Inj Sol-3mL Pk	02217066	HLR	A	5
Roferon-A 9mu/Vial Pd for Inj	01911996	HLR	A	5
Roferon-A 18mu/Vial Pd for Inj	01912003	HLR	A	5
Sab-Opticort 5mg & 50mcg & 0.5mg/mL Oph/Ot Sol	02247920	SIL	B	6
Sabril 500mg Tab	02065819	OVA	B	11
SALBUTAMOL			B	5
Seroquel 150mg Tab	02240862	AZC	B	7
SERTRALINE HCL			B	5
SIMVASTATIN			B	3
SODIUM AUROTHIOMALATE			A	4
Sodium Aurothiomalate 10mg/mL Inj Sol-1mL Pk	02245456	SIL	A	4
Sodium Aurothiomalate 25mg/mL Inj Sol-1mL Pk	02245457	SIL	A	4
Sodium Aurothiomalate 50mg/mL Inj Sol-1mL Pk	02245458	SIL	A	4
Staticin 1.5% Lot	01910086	WSQ	B	12
Sulfasalazine 500mg Ent Tab	00685925	RPH	A	11
Sulfasalazine 500mg Tab	00685933	RPH	A	11
Tamiflu 75mg Cap	02241472	HLR	A	9

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Taro-Carbamazepine 200mg Tab	02052423	TAR	B	12
Taro-Mometasone 0.1% Oint	02264749	TAR	B	6
Taro-Phenytoin 25mg/mL O/L	02250896	TAR	B	4
Taro-Simvastatin 10mg Tab	02265885	TAR	B	3
Taro-Simvastatin 20mg Tab	02265893	TAR	B	3
Taro-Simvastatin 40mg Tab	02265907	TAR	B	3
Tebrazid 500mg Tab	00283991	VAL	B	11
Telzir 700mg Tab	02261545	GSK	A	2
Tilade 2mg/Metered Dose Inh	02230543	AVE	B	7
Timolide 10mg & 25mg Tab	00509353	FRS	A	5
Timpilo 2 0.5% & 2% Oph Sol	01905082	MSD	B	12
Timpilo 4 0.5% & 4% Oph Sol	01905090	MSD	B	12
Tobramycin 0.3% Oph Sol	02239148	RIV	B	12
TOPIRAMATE			B	4
Vfend 50mg Tab	02256460	PFI	A	12
Vfend 200mg Tab	02256479	PFI	A	12
Vitamin B6-ICN 25mg Tab	00268607	VAL	B	11
Vivelle 50mcg/day Patch	02204428	NOV	A	7
Vivelle 75mcg/day Patch	02204436	NOV	A	7
Vivelle 100mcg/day Patch	02204444	NOV	A	7
WARFARIN			A	4
Wellbutrin SR 100mg Tab	02237824	BIO	A	11
Wellbutrin SR 150mg Tab	02237825	BIO	A	11
Winpred 1mg Tab	00271373	VAL	B	11
Xalacom 50mcg/mL & 5mg/mL Oph Sol-2.5mL Pk	02246619	PFI	B	11
Xalatan 0.005% Oph Sol-2.5mL Pk	02231493	PFI	A	11