

UPDATE 2
Ontario Drug Benefit
Formulary/Comparative Drug Index
No. 40
Effective June 06, 2007

SUMMARY OF CHANGES

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New Single Source Drug(s)

<u>DIN</u>	<u>PRODUCT</u>	<u>GENERIC NAME</u>	<u>MFR</u>	<u>DBP</u>
02283131	Altace HCT 2.5mg & 12.5mg Tab	RAMIPRIL & HYDROCHLOROTHIAZIDE	SAV	0.7500
02283158	Altace HCT 5mg & 12.5mg Tab	RAMIPRIL & HYDROCHLOROTHIAZIDE	SAV	0.7500
02283166	Altace HCT 10mg & 12.5mg Tab	RAMIPRIL & HYDROCHLOROTHIAZIDE	SAV	0.9500
02283174	Altace HCT 5mg & 25mg Tab	RAMIPRIL & HYDROCHLOROTHIAZIDE	SAV	0.7500
02283182	Altace HCT 10mg & 25mg Tab	RAMIPRIL & HYDROCHLOROTHIAZIDE	SAV	0.9500
02285606	Alvesco 100mcg/Actuation Inh-120 Dose Pk	CICLESONIDE	ALA	41.4000
02285614	Alvesco 200mcg/Actuation Inh-120 Dose Pk	CICLESONIDE	ALA	68.4000
02284995	DDAVP Melt 60mcg Orally Disintegrating Tab	DESMOPRESSIN ACETATE	FEI	0.9913
02285002	DDAVP Melt 120mcg Orally Disintegrating Tab	DESMOPRESSIN ACETATE	FEI	1.9826
02261723	Yasmin 21 3.0mg & 0.03mg Tab-21 Pk	DROSPIRENONE & ETHINYL ESTRADIOL	BAH	11.6000
02261731	Yasmin 28 3.0mg & 0.03mg Tab-28 Pk	DROSPIRENONE & ETHINYL ESTRADIOL	BAH	11.6000

New Multi-Source Drug(s)

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE</u> <u>FORM</u>	<u>MFR</u>	<u>DBP</u>
02292998	Apo-Cefprozil	250mg	Tab	APX	0.8092
02293005	Apo-Cefprozil (Interchangeable with Cefzil)	500mg	Tab	APX	1.5867
02245247	Apo-Gliclazide (Interchangeable with Diamicon)	80mg	Tab	APX	0.1863

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.

02289091	Novo-Fenofibrate-S (Interchangeable with Lipidil Supra)	160mg	Tab	NOP	0.6231
02238103	Novo-Gliclazide (Interchangeable with Diamicon)	80mg	Tab	NOP	0.1863

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.

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE</u> <u>FORM</u>	<u>MFR</u>	<u>DBP</u>
02283891	Novo-Ramipril	1.25mg	Cap	NOP	0.3250
02247945	Novo-Ramipril	2.5mg	Cap	NOP	0.3750
02247946	Novo-Ramipril	5mg	Cap	NOP	0.3750
02247947	Novo-Ramipril (Interchangeable with Altace)	10mg	Cap	NOP	0.4750
02288265	PMS-Leflunomide	10mg	Tab	PMS	4.7950
02288273	PMS-Leflunomide (Interchangeable with Arava)	20mg	Tab	PMS	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.					
02293528	Ran-Cefprozil	250mg	Tab	RAN	0.8092
02293536	Ran-Cefprozil (Interchangeable with Cefzil)	500mg	Tab	RAN	1.5867
02294265	Ratio-Tamsulosin (Interchangeable with Flomax)	0.4mg	Cap	RPH	0.4750
Note: Randomized controlled trials have shown no significant differences in efficacy between daily doses of 0.4mg and 0.8mg of tamsulosin. Therefore, the daily tamsulosin dose should not exceed 0.4mg.					
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					

Manufacturer Requested Discontinued Drug(s)

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>
02273853	Gabapentin	300mg	Cap	GEN
09857258	Gabapentin	300mg	Cap	GEN
02030799	Norpace	100mg	Cap	RBT
02030802	Norpace	150mg	Cap	RBT
02240755	Novo-Misoprostol	200mcg	Tab	NOP
02240072	Ratio-Ipratropium	0.03%	Nasal Spray	RPH
02194171	Ratio-Nystatin	100000U	Vag Tab	RPH

New Drug Benefit Price(s)

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>	<u>DBP</u>
02238645	292	30mg	Tab	PEN	0.1020
00609129	Diclectin	10mg & 10mg	SR Tab	DUI	1.2000
02279983	Taro-Mupirocin	2%	Oint	TAR	0.3556
02250896	Taro-Phenytoin	25mg/mL	O/L	TAR	0.0323

Off Formulary Interchangeable Product(s)

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE</u> <u>FORM</u>	<u>MFR</u>	<u>DBP</u>
02248732	Apo-Clonidine (Interchangeable with Dixarit)	0.025mg	Tab	APX	0.1817
02244366	Apo-Mefloquine (Interchangeable with Lariam)	250mg	Tab	APX	3.5688
02240907	Apo-Paroxetine (Interchangeable with Paxil)	10mg	Tab	APX	1.0430
02268388	Apo-Sumatriptan	50mg	Tab	APX	9.0650
02268396	Apo-Sumatriptan (Interchangeable with Imitrex)	100mg	Tab	APX	9.9867
02259893	Apo-Tizanidine (Interchangeable with Zanaflex)	4mg	Tab	APX	0.5106
02262746	Co Paroxetine (Interchangeable with Paxil)	10mg	Tab	COB	1.0430
02257882	Co Sumatriptan	25mg	Tab	COB	8.9900
02257890	Co Sumatriptan	50mg	Tab	COB	9.0650
02257904	Co Sumatriptan (Interchangeable with Imitrex)	100mg	Tab	COB	9.9867
02279061	Gen-Glimepiride	1mg	Tab	GEN	0.4900
02279088	Gen-Glimepiride	2mg	Tab	GEN	0.4900
02279126	Gen-Glimepiride (Interchangeable with Amaryl)	4mg	Tab	GEN	0.4900
02248012	Gen-Paroxetine (Interchangeable with Paxil)	10mg	Tab	GEN	1.0430
02268906	Gen-Sumatriptan	25mg	Tab	GEN	8.9900
02268914	Gen-Sumatriptan	50mg	Tab	GEN	9.0650
02268922	Gen-Sumatriptan (Interchangeable with Imitrex)	100mg	Tab	GEN	9.9867
02272059	Gen-Tizanidine (Interchangeable with Zanaflex)	4mg	Tab	GEN	0.5106

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE</u> <u>FORM</u>	<u>MFR</u>	<u>DBP</u>
02248457	Novo-Gabapentin	600mg	Tab	NOP	1.3045
02247346	Novo-Gabapentin (Interchangeable with Neurontin)	800mg	Tab	NOP	1.7393
02273756	Novo-Glimepiride	1mg	Tab	NOP	0.4900
02273764	Novo-Glimepiride	2mg	Tab	NOP	0.4900
02273772	Novo-Glimepiride (Interchangeable with Amaryl)	4mg	Tab	NOP	0.4900
02248556	Novo-Paroxetine (Interchangeable with Paxil)	10mg	Tab	NOP	1.0430
02286815	Novo-Sumatriptan DF	25mg	Tab	NOP	8.9900
02286823	Novo-Sumatriptan DF	50mg	Tab	NOP	9.0650
02286831	Novo-Sumatriptan DF (Interchangeable with Imitrex DF)	100mg	Tab	NOP	9.9866
02255898	PMS-Gabapentin	600mg	Tab	PMS	1.3045
02255901	PMS-Gabapentin (Interchangeable with Neurontin)	800mg	Tab	PMS	1.7393
02247750	PMS-Paroxetine (Interchangeable with Paxil)	10mg	Tab	PMS	1.0430
02256428	PMS-Sumatriptan	25mg	Tab	PMS	8.9900
02256436	PMS-Sumatriptan	50mg	Tab	PMS	9.0650
02256444	PMS-Sumatriptan (Interchangeable with Imitrex)	100mg	Tab	PMS	9.9867
02260913	Ratio-Gabapentin	600mg	Tab	RPH	1.3045
02260921	Ratio-Gabapentin (Interchangeable with Neurontin)	800mg	Tab	RPH	1.7393
02271583	Ratio-Sumatriptan	50mg	Tab	RPH	9.0650
02271591	Ratio-Sumatriptan (Interchangeable with Imitrex)	100mg	Tab	RPH	9.9867
02269589	Sandoz Glimepiride	1mg	Tab	SDZ	0.4900
02269597	Sandoz Glimepiride	2mg	Tab	SDZ	0.4900
02269619	Sandoz Glimepiride (Interchangeable with Amaryl)	4mg	Tab	SDZ	0.4900

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE</u> <u>FORM</u>	<u>MFR</u>	<u>DBP</u>
02263025	Sandoz Sumatriptan	50mg	Tab	SDZ	9.0650
02263033	Sandoz Sumatriptan (Interchangeable with Imitrex)	100mg	Tab	SDZ	9.9867

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

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>
00001287	Bleph-10	10%	Oph Sol	ALL
00028053	Sulamyd	10%	Oph Sol	SCH

Status Change(s) from Limited Use to General Benefit

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>	<u>DBP</u>
02242518	Actonel	5mg	Tab	PGP	1.7550
02239146	Actonel	30mg	Tab	PGP	11.3700
02246896	Actonel	35mg	Tab	PGP	9.3600

Trade Name Change(s)

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>
00040851	PMS-ASA	325mg	Tab	PMS
00783137	PMS-Metronidazole	500mg	Cap	PMS

Change(s) to Diabetic Testing Agent(s)

<u>PIN</u>	<u>PRODUCT</u>	<u>MFR</u>	<u>COST/ UNIT</u>	<u>AMT MOH PAYS</u>	<u>AMT PATIENT PAYS</u>
09853693	Ascensia Autodisc Strip	BAY	0.7290	0.7290	0.0000
09854088	Ascensia Elite Strip	BAY	0.7290	0.7290	0.0000
09857127	Ascensia Microfill Strip	BAY	0.7290	0.7290	0.0000

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

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE</u> <u>FORM</u>	<u>MFR</u>
02237868	PMS-Dipivefrin	0.1%	Oph Sol	PMS

Reinstated Drug(S) (Added To Payment)

<u>DIN</u>	<u>BRAND</u>	<u>STRENGTH</u>	<u>DOSAGE FORM</u>	<u>MFR</u>	<u>DBP</u>
01927612	Myochrysine	25mg/mL	Inj Sol-1mL Pk	SAV	12.0600

CONSOLIDATED INDEX

<u>PRODUCT, STRENGTH & DOSAGE FORM</u>	<u>DIN</u>	<u>MFR</u>	<u>UPDATE</u>	<u>PAGE NO.</u>
292 30mg Tab	02238645	PEN	2	6
Actonel 5mg Tab	02242518	PGP	2	11
Actonel 30mg Tab	02239146	PGP	2	11
Actonel 35mg Tab	02246896	PGP	2	11
Altace HCT 2.5mg & 12.5mg Tab	02283131	SAV	2	2
Altace HCT 5mg & 12.5mg Tab	02283158	SAV	2	2
Altace HCT 5mg & 25mg Tab	02283174	SAV	2	2
Altace HCT 10mg & 12.5mg Tab	02283166	SAV	2	2
Altace HCT 10mg & 25mg Tab	02283182	SAV	2	2
Alvesco 100mcg/Actuation Inh-120 Dose Pk	02285606	ALA	2	2
Alvesco 200mcg/Actuation Inh-120 Dose Pk	02285614	ALA	2	2
Amatine 2.5mg Tab	01934392	SHI	1	6
Amatine 5mg Tab	01934406	SHI	1	6
Apo-Cefprozil 250mg Tab	02292998	APX	2	3
Apo-Cefprozil 500mg Tab	02293005	APX	2	3
Apo-Cimetidine 60mg/mL O/L	02243085	APX	1	9
Apo-Clonidine 0.025mg Tab	02248732	APX	2	7
Apo-Cyclosporine 100mg/mL O/L	02244324	APX	1	9
Apo-Doxepin 150mg Cap	02050056	APX	1	9
Apo-Gliclazide 80mg Tab	02245247	APX	2	3
Apo-Ipravent 125mcg/mL Inh Sol-2mL UDV Pk	02243827	APX	1	9
Apo-Ipravent Sterule 250mcg/mL Inh Sol-2mL UDV Pk	02231494	APX	1	9
Apo-Mefloquine 250mg Tab	02244366	APX	2	7
Apo-Paroxetine 10mg Tab	02240907	APX	2	7
Apo-Sumatriptan 50mg Tab	02268388	APX	2	7
Apo-Sumatriptan 100mg Tab	02268396	APX	2	7
Apo-Tizanidine 4mg Tab	02259893	APX	2	7
Apo-Tobramycin 0.3% Oph Sol	02245698	APX	1	9
Ascensia Autodisc Strip	09853693	BAY	1	12
	09853693	BAY	2	13
Ascensia Elite Strip	09854088	BAY	1	12
	09854088	BAY	2	13
Ascensia Microfill Strip	09857127	BAY	1	12
	09857127	BAY	2	13
Balminil DM 3mg/mL O/L	00436895	TCH	1	9
Betagan 0.25% Oph Sol	00751286	ALL	1	9
Bleph-10 10% Oph Sol	00001287	ALL	2	10
CEFPROZIL			2	3
Ceftriaxone 1g/Vial Inj Pd-1 Vial Pk	02292270	SDZ	1	3
Ceftriaxone 2g/Vial Inj Pd-1 Vial Pk	02292289	SDZ	1	3
CEFTRIAZONE DISODIUM			1	3
CICLESONIDE			2	2
CITALOPRAM HYDROBROMIDE			1	3

<u>PRODUCT, STRENGTH & DOSAGE FORM</u>	<u>DIN</u>	<u>MFR</u>	<u>UPDATE</u>	<u>PAGE NO.</u>
CLONIDINE HCL			2	7
Co Paroxetine 10mg Tab	02262746	COB	2	7
Co Sumatriptan 25mg Tab	02257882	COB	2	7
Co Sumatriptan 50mg Tab	02257890	COB	2	7
Co Sumatriptan 100mg Tab	02257904	COB	2	7
Cytovene 500mg/Vial Pd Inj-10mL Pk	00865516	SYN	1	9
DARUNAVIR			1	2
DDAVP Melt 60mcg Orally Disintegrating Tab	02284995	FEI	2	2
DDAVP Melt 120mcg Orally Disintegrating Tab	02285002	FEI	2	2
DESMOPRESSIN ACETATE			2	2
Diclectin 10mg & 10mg SR Tab	00609129	DUI	2	6
Diocarpine 1% Oph Sol	02023725	DKT	1	8
Diocarpine 2% Oph Sol	02023741	DKT	1	8
Ditropan 5mg Tab	01924761	PGP	1	8
DROSPIRENONE & ETHINYL ESTRADIOL			2	2
FENOFIBRATE			2	3
Flomax 0.4mg Cap	02238123	BOE	1	8
Florinef 0.1mg Tab	02086026	SHI	1	6
Floxin 300mg Tab	01968416	JNO	1	8
Floxin 400mg Tab	01968408	JNO	1	8
GABAPENTIN			2	8
Gabapentin 300mg Cap	02273853	GEN	2	5
	09857258	GEN	2	5
Gen-Glimepiride 1mg Tab	02279061	GEN	2	7
Gen-Glimepiride 2mg Tab	02279088	GEN	2	7
Gen-Glimepiride 4mg Tab	02279126	GEN	2	7
Gen-Paroxetine 10mg Tab	02248012	GEN	2	7
Gen-Sumatriptan 25mg Tab	02268906	GEN	2	7
Gen-Sumatriptan 50mg Tab	02268914	GEN	2	7
Gen-Sumatriptan 100mg Tab	02268922	GEN	2	7
Gen-Tizanidine 4mg Tab	02272059	GEN	2	7
GLICLAZIDE			2	3
GLIMEPIRIDE			2	7
Kaon 1.33mEq/mL O/L	02063840	PMJ	1	10
Kidrolase Inj Pd-10000IU Pk	01926438	OPS	1	5
LEFLUNOMIDE			2	4
MEFLOQUINE HCL			2	7
Myochrysine 25mg/mL Inj Sol-1mL Pk	01927612	SAV	1	8
	01927612	SAV	2	15
Nitrazadon 5mg Tab	02229654	VAL	1	6
Nitrazadon 10mg Tab	02229655	VAL	1	6
Norpace 100mg Cap	02030799	RBT	2	5
Norpace 150mg Cap	02030802	RBT	2	5
Novo-Diflunisal 500mg Tab	02048507	NOP	1	4
Novo-Fenofibrate-S 160mg Tab	02289091	NOP	2	3
Novo-Gabapentin 600mg Tab	02248457	NOP	2	8
Novo-Gabapentin 800mg Tab	02247346	NOP	2	8

<u>PRODUCT, STRENGTH & DOSAGE FORM</u>	<u>DIN</u>	<u>MFR</u>	<u>UPDATE</u>	<u>PAGE NO.</u>
Novo-Gliclazide 80mg Tab	02238103	NOP	2	3
Novo-Glimepiride 1mg Tab	02273756	NOP	2	8
Novo-Glimepiride 2mg Tab	02273764	NOP	2	8
Novo-Glimepiride 4mg Tab	02273772	NOP	2	8
Novo-Misoprostol 200mcg Tab	02240755	NOP	2	5
Novo-Naprox 750mg SR Tab	02231327	NOP	1	4
Novo-Paroxetine 10mg Tab	02248556	NOP	2	8
Novo-Ramipril 1.25mg Cap	02283891	NOP	2	4
Novo-Ramipril 2.5mg Cap	02247945	NOP	2	4
Novo-Ramipril 5mg Cap	02247946	NOP	2	4
Novo-Ramipril 10mg Cap	02247947	NOP	2	4
Novo-Sumatriptan DF 25mg Tab	02286815	NOP	2	8
Novo-Sumatriptan DF 50mg Tab	02286823	NOP	2	8
Novo-Sumatriptan DF 100mg Tab	02286831	NOP	2	8
Ocufen 0.03% Oph Sol	00766046	ALL	1	9
Orap 2mg Tab	00313815	PHE	1	7
Orap 4mg Tab	00313823	PHE	1	7
PAROXETINE HCL			2	7
Permax 0.05mg Tab	02123320	SHI	1	6
Permax 0.25mg Tab	02123339	SHI	1	6
Permax 1mg Tab	02123347	SHI	1	6
PMS-ASA 325mg Tab	00040851	PMS	2	12
PMS-Dipivefrin 0.1% Oph Sol	02237868	PMS	2	14
PMS-Gabapentin 600mg Tab	02255898	PMS	2	8
PMS-Gabapentin 800mg Tab	02255901	PMS	2	8
PMS-Leflunomide 10mg Tab	02288265	PMS	2	4
PMS-Leflunomide 20mg Tab	02288273	PMS	2	4
PMS-Metronidazole 500mg Cap	00783137	PMS	2	12
PMS-Paroxetine 10mg Tab	02247750	PMS	2	8
PMS-Potassium Gluconate 1.33mEq/mL O/L	02074087	PMS	1	9
PMS-Sumatriptan 25mg Tab	02256428	PMS	2	8
PMS-Sumatriptan 50mg Tab	02256436	PMS	2	8
PMS-Sumatriptan 100mg Tab	02256444	PMS	2	8
Prezista 300mg Tab	02284057	JNO	1	2
Propaderm 0.025% Cr	02089602	SHI	1	6
Propine 0.1% Oph Sol	00529117	ALL	1	9
Quinidine 200mg Tab	00004782	BWE	1	10
RAMIPRIL			2	4
RAMIPRIL & HYDROCHLOROTHIAZIDE			2	2
Ran-Cefprozil 250mg Tab	02293528	RAN	2	4
Ran-Cefprozil 500mg Tab	02293536	RAN	2	4
Ran-Citalo 20mg Tab	02285622	RAN	1	3
Ran-Citalo 40mg Tab	02285630	RAN	1	3
Ratio-Gabapentin 600mg Tab	02260913	RPH	2	8
Ratio-Gabapentin 800mg Tab	02260921	RPH	2	8
Ratio-Ipratropium 0.03% Nasal Spray	02240072	RPH	2	5
Ratio-Methylphenidate 10mg Tab	02230321	RPH	1	9

<u>PRODUCT, STRENGTH & DOSAGE FORM</u>	<u>DIN</u>	<u>MFR</u>	<u>UPDATE</u>	<u>PAGE NO.</u>
Ratio-Nystatin 100000U Vag Tab	02194171	RPH	2	5
Ratio-Sumatriptan 50mg Tab	02271583	RPH	2	8
Ratio-Sumatriptan 100mg Tab	02271591	RPH	2	8
Ratio-Tamsulosin 0.4mg Cap	02294265	RPH	2	4
Reminyl 4mg Tab	02244298	JNO	1	9
Reminyl 8mg Tab	02244299	JNO	1	9
Reminyl 12mg Tab	02244300	JNO	1	9
RISPERIDONE			1	3
Sandoz Glimepiride 1mg Tab	02269589	SDZ	2	8
Sandoz Glimepiride 2mg Tab	02269597	SDZ	2	8
Sandoz Glimepiride 4mg Tab	02269619	SDZ	2	8
Sandoz Risperidone 0.25mg Tab	02292807	SDZ	1	3
	02279509	SDZ	1	4
Sandoz Sumatriptan 50mg Tab	02263025	SDZ	2	9
Sandoz Sumatriptan 100mg Tab	02263033	SDZ	2	9
Sinemet 100mg & 10mg Tab	00355658	MFC	1	6
Sinemet 100mg & 25mg Tab	00513997	MFC	1	6
Sinemet 250mg & 25mg Tab	00328219	MFC	1	6
Sinemet CR 100mg & 25mg Tab	02028786	MFC	1	6
Sinemet CR 200mg & 50mg Tab	00870935	MFC	1	6
Sintrom 1mg Tab	00010383	PEN	1	9
Sintrom 4mg Tab	00010391	PEN	1	9
Sulamyd 10% Oph Sol	00028053	SCH	2	10
SUMATRIPTAN SUCCINATE			2	7
Tagamet 60mg/mL O/L	01916750	SMJ	1	10
TAMSULOSIN HCL			2	4
Taro-Mupirocin 2% Oint	02279983	TAR	2	6
Taro-Phenytoin 25mg/mL O/L	02250896	TAR	2	6
Timolol Maleate Oph Gel Forming Solution 0.25% Oph Gellan Sol	02242275	ALC	1	6
Timolol Maleate Oph Gel Forming Solution 0.5% Oph Gellan Sol	02242276	ALC	1	6
TIZANIDINE HCL			2	7
Trandate 100mg Tab	02106272	SHI	1	6
Trandate 200mg Tab	02106280	SHI	1	6
Travatan 0.004% Oph Sol	02244896	ALC	1	11
Yasmin 21 3.0mg & 0.03mg Tab-21 Pk	02261723	BAH	2	2
Yasmin 28 3.0mg & 0.03mg Tab-28 Pk	02261731	BAH	2	2
ZOPICLONE			2	8
Zyloprim 200mg Tab	00506370	BWE	1	4