



TEXAS
Health and Human
Services



Psychiatric Drug Formulary

**State Hospitals
&
State Supported Living Centers
&
Community Mental Health Centers**

2025

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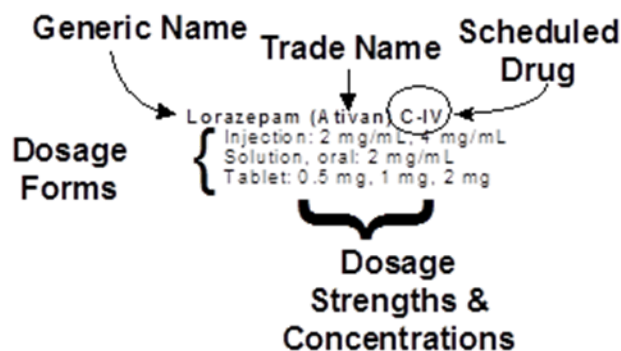
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Introduction

The Texas Health and Human Services Psychiatric Drug Formulary is the publication that outlines the medications that have been approved for use in Community Mental Health Centers, Mental Health State Hospitals and the State Supported Living Centers. The formulary is updated and published at least annually. This document is divided into three sections (Alphabetical Listing, Therapeutic Classification/Cost Index, and Alphabetical Index) to facilitate usage.

Alphabetical Listing:

This section lists all the medications alphabetically by generic (nonproprietary) name. Trade (proprietary) names and abbreviations are listed in parenthesis after the generic name. Trade names that have been discontinued will have [DSC] after the name. In this section, all approved dosage forms are listed. All available strengths of approved dosage forms are considered formulary unless specifically noted otherwise.



Therapeutic Classification/Cost Index:

This section groups the medications by therapeutic usage and lists them alphabetically by generic (nonproprietary) name. Medications may be listed in multiple categories. For trade names, consult the alphabetical index. Also in this section is a relative cost index so that medications used in similar situations can be evaluated keeping cost of care in mind. Relative cost is noted as either low, moderate, or high and is based on cost per day of a typical dose. The relative cost of bulk items is indexed per unit (gram, ml).

Alphabetical Index:

This section lists all the medications alphabetically by trade name, generic name, and abbreviations. Page numbers for each of the listings is provided.

The purpose of the HHSC Psychiatric Executive Formulary Committee is to maintain and update the *Formulary* and to recommend standards for drug use within the Community Mental Health Centers, State Hospitals and the State Supported Living Centers. The Committee is concerned with maintaining the highest standards for drug use. To assist the clinician in prescribing the most cost effective agents, a Therapeutic Classification with relative cost data is provided.

Because of their frequency of use, the highest level of concern and vigilance centers on the psychotropic medications. For the clinician's reference, the *Formulary* provides tables summarizing the recommended dosage limits for the psychotropic drugs; however, these guidelines are not intended to replace other references or the clinician's clinical judgment. The clinician is urged to check with other references, including the Texas Administrative Code, Title 25, Part 1, Chapter 415, Subchapter A, Prescribing of Psychoactive Medication, US Food and Drug Administration product labeling, *The American Hospital Formulary Service Drug Information*, and *Facts & Comparisons* among other reliable sources.

This *Formulary*, is not intended to be a reference for drug use. Rather it is to serve the clinician as a listing of drugs, which are approved for use. Approval of a drug entity for inclusion in the *Formulary* does not imply approval of all formulations containing that entity. The HHSC Psychiatric Executive Formulary Committee will decide which formulations are approved for use. Not all drugs listed in the *Formulary* will be stocked at each facility's pharmacy.

If a physician, dentist, nurse or pharmacist desires to have a drug added to the *Formulary*, he or she should complete and submit the appropriate form (New Drug Application, see Appendix A) to the facility's Pharmacy and Therapeutics Committee. If it is approved at the facility level, the facility's Director of Pharmacy must then forward the request to the HHSC Psychiatric Executive Formulary Committee in care of the State Hospitals. Attempts will be made to consider requests received at least 60 days prior to the quarterly meeting at that meeting. Requests received less than 60 days before the meeting may not be considered until the following meeting. Clinicians and facilities should submit supporting documents with their formulary request.

The HHSC Psychiatric Executive Formulary Committee will evaluate the submission's appropriateness based upon the efficacy and safety of the proposed drug compared with existing formulary items and cost effectiveness of the new agent. When appropriate, the HHSC Psychiatric Executive Formulary Committee will add the new drug or replace old agents in the same pharmacological/therapeutic category with the new agent. If the HHSC Executive Formulary Committee declines to add the new drug to the formulary, the new drug will not be reconsidered for addition to the formulary for at least one year and only if additional evidence is available for review. If a new drug application is resubmitted for a drug already considered and not added to the formulary, supporting evidence must be provided with the application.

The Formulary consists of routine and reserve drugs. Drugs in the reserve class have specific guidelines for use printed in the *Formulary*.

As a means of preventing medication errors, the *Formulary* has incorporated TALL MAN characters to assist in distinguishing look-alike drug names. TALL MAN characters are being implemented in various parts of the pharmaceutical industry in order to prevent medication errors. Even though the *Formulary* may not play a major role in preventing medication errors, hopefully this change will stimulate the awareness of TALL MAN characters and assist in implementing this print style in other areas of our medication use process.

The HHSC System utilizes a closed formulary system. Only drugs listed in the *Formulary* are to be stocked, prescribed and dispensed in State Hospitals and State Supported Living Centers including pharmaceutical products recommended by consultants for specialized treatments. When a patient's condition requires a drug not listed in the *Formulary*, limited quantities can be obtained for use in that particular patient. However, documentation (Non-Formulary Drug Justification Form, see Appendix D) or other appropriate pharmacy software generated report should be submitted to the facility Medical Director and the State Hospital Chief Medical Director's office where it will be reviewed by the HHSC Psychiatric Executive Formulary Committee to assure reasonable compliance with the *Formulary*.

When requested by the Commissioner, the HHSC Psychiatric Executive Formulary Committee will make other recommendations regarding drug use. If facility clinicians have topics for committee consideration, these requests should be sent to the HHSC Psychiatric Executive Formulary Committee in care of the State Hospitals electronically (HHSC_Psychiatric_Formulary_Committee@hhs.texas.gov). The Committee also appreciates your comments concerning the printing of the *Formulary* and Committee deliberations and decisions. Please feel free to provide input.

David Moron, M.D.

David Moron, M.D.
Chairperson
HHSC Psychiatric Executive Formulary Committee
October 2024

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HHS Psychiatric Drug Formulary editor

Kasey L. Peña, PharmD

Procedure for Addition of Drugs to the Formulary

A physician, dentist, nurse or pharmacist desiring that a new drug be added to the Formulary should submit a new drug application (New Drug Application, see Appendix A) to the facility's formulary committee. If approved, the new drug application should be forwarded to the HHSC Psychiatric Executive Formulary Committee. The following information should accompany the application:

1. published articles in the biomedical literature that substantiate the efficacy and safety of the proposed new drug;
2. advantages of the proposed new drug compared with similar therapeutic agents presently in the Formulary;
3. drugs in the Formulary which the proposed agent will replace or supplement;
4. cost effectiveness data.

New drug applications should be received by the secretary of the committee sixty days prior to the committee's scheduled meeting date. Applications received after this time will be considered at the next meeting.

The chairperson will assign a committee member or a non-committee member to present an objective treatise and recommendations concerning the proposed new drug to the HHSC Psychiatric Executive Formulary Committee. The committee may decide to approve or deny the drug's inclusion, approve the drug on a trial basis, or postpone a decision until the following meeting of the committee. The committee, at its discretion, may approve a drug's inclusion in the Formulary as a reserve drug, subject to specific limitations (e.g., recommendation by qualified specialists or consultants).

HHSC Psychiatric Executive Formulary Committee

HHSC_Psychiatric_Formulary_Committee@hhs.texas.gov

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Psychotropic Dosage Guidelines

The following is a list of psychotropic drug dosages. These guidelines are not intended to establish rigid standards of treatment but to assist in monitoring the pharmacotherapy of the patient. Furthermore, guidelines for special patient populations are not intended to be absolute. For those medications that have a well-established therapeutic serum range, the dosage should be based upon the desired serum range and response rather than a specific maximum administered daily dosage. These guidelines should be used in conjunction with sound clinical judgment and the prescriber's experience.

In children and adolescents, metabolic and physiologic differences from adults should be considered when prescribing. Dosing based on body weight may be more accurate when treating these patients.

Different dosage requirements are usually necessary in the geriatric population. Since there is no standard definition for "geriatric", the arbitrary age of 65 has been chosen to identify geriatric patients. In general, geriatric patient dosing guidelines should reflect a "go low, go slow" approach. Standard reference books should be consulted if needed for appropriate dosages when treating this population.

In general, when treating patients with intellectual disabilities, a "go low, go slow" approach is recommended when increasing or decreasing psychotropic medication. The use of psychotropic medication can be therapeutic and empowering for a person with both intellectual disabilities and mental illness. The primary goal is to obtain an accurate diagnosis of behavioral and psychiatric symptoms so that the patients' treatment is appropriate.

Prescribing psychotropic medication should be based on the following resources:

- Texas Administrative Code, Title 25, Part 1, Chapter 415, Subchapter A, Prescribing of Psychoactive Medications

Other useful resources that reflect current Standards of Care for the mentally ill include but are not limited to the following:

- American Psychiatric Association Practice Guidelines

- Texas Health and Human Services: Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health

Children and Adolescent Treatment of Acute Agitation

Quick reference for the Treatment of Acute Agitation: [Acute Agitation Treatment Reference \(texas.gov\)](https://www.texas.gov)

Intramuscular Short-Acting Agents

Children (< 12 y/o)

| Drug | Maximum Single dose (mg) | Minimum Interval (hrs) | Maximum Total Dose per day (mg) |
|------------------------------|-----------------------------------|------------------------|---------------------------------|
| chlorproMAZINE ^a | 0.55 mg/kg Up to 25 mg | 6 | < 5 y/o: 40 ≥ 5 y/o: 75 |
| diphenhydrAMINE ^b | 1 mg/kg Up to 50 mg | 4 | 100 |
| Haloperidol | 0.025-0.075 mg/kg Up to 2.5 mg | 0.5 | 15-40 kg: 6 Over 40 kg: 15 |
| LORazepam | 0.05-0.1 mg/kg Up to 2 mg | 0.5 | 4 |
| OLANZapine | 5 mg | 0.5 | 10-20 |
| Ziprasidone ^c | 0.2 mg/kg Up to 10 mg | 2 | 20 |

^a Use of chlorpromazine for the treatment of behavioral emergencies is discouraged due to significant risk of QTc prolongation, hypotension, and reduction of the seizure threshold.

^b Use diphenhydramine with caution in behavioral emergencies due to increased risk of paradoxical reactions in this population.

^c Gerson and colleagues do not recommend ziprasidone due to activating potential and QT prolongation.

Adolescent (12 y/o to < 18 y/o)

| Drug | Maximum Single dose (mg) | Minimum Interval (hrs) | Maximum Total Dose per day (mg) |
|------------------------------|-------------------------------|------------------------|---------------------------------|
| chlorproMAZINE ^a | 0.55 mg/kg Up to 25 mg | 6 | 75 |
| diphenhydrAMINE ^b | 1 mg/kg Up to 50 mg | 4 | 200 |
| Haloperidol | 0.05-0.15 mg/kg Up to 5 mg | 0.5 | 15-40 kg: 6 Over 40 kg: 15 |

| Drug | Maximum Single dose (mg) | Minimum Interval (hrs) | Maximum Total Dose per day (mg) |
|--------------------------|---------------------------------|-------------------------------|--|
| LORazepam | 0.05-0.1 mg/kg Up to 2 mg | 0.5 | 8 |
| OLANzapine | 10 | 0.5 | 20 |
| Ziprasidone ^c | 0.2 mg/kg Up to 20 mg | 2 | 40 |

^a Use of chlorpromazine for the treatment of behavioral emergencies is discouraged due to significant risk of QTc prolongation, hypotension, and reduction of the seizure threshold.

^b Use diphenhydramine with caution in behavioral emergencies due to increased risk of paradoxical reactions in this population.

^c Gerson and colleagues do not recommend ziprasidone due to activating potential and QT prolongation.

Sources:

1. Gerson R, Malas N, Feuer V, et. Al. Best Practices for Evaluation and Treatment of agitated children and Adolescents (BETA) in the Emergency Department: Consensus Statement of the American Association of Emergency Psychiatry. West J of Emerg Med. 2019;20(2):409-418.
2. Chun TH, Mace SE, Katz ER. Evaluation and Management of Children and Adolescents with Acute Mental Health or Behavioral Problems. Part I: Common Clinical Challenges of Patients with Mental Health and/or Behavioral Emergencies. Pediatrics. 2016;138(3):e1-e22.
3. Carubia B, Becker A, Levine BH. Child Psychiatric Emergencies: Updates on Trends, Clinical Care, and Practice Challenges Curr Psychiatry Rep. 2016;18(41):1-8.
4. Sonnier L, Barzman D. Pharmacologic Management of Acutely Agitated Pediatric Patients. Pediatr Drugs. 2011;13(1):1-10.
5. Savarese, DMF, & Zand, JM. (2020). In JM Zand (Ed.), UpToDate. Cited September 8, 2020, from <https://www.uptodate.com/contents/search>.
6. Drug Facts and Comparisons. eFacts [online]. 2020. Available from Wolters Kluwer Health, Inc. Accessed September 18, 2023.
7. Micromedex® [electronic version]. Truven Health Analytics, Greenwood Village, CO, USA (cited 09-10-20).

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Adult Treatment of Acute Agitation

Quick reference for the Treatment of Acute Agitation: [Acute Agitation Treatment Reference \(texas.gov\)](https://www.texas.gov)

Intramuscular Short-Acting Agents

| Drug | Maximum Single dose (mg) | Minimum Interval (hrs) | Maximum Total Dose per day (mg) |
|-----------------------------|--------------------------|---|---------------------------------|
| chlorproMAZINE ^a | 100 ^b | 2 ^b | 200 |
| diphenhydrAMINE | 100 | 1 | 400 |
| fluPHENAZine ^c | 5 | 6 | 10 ^d |
| Haloperidol | 10 | 0.5 | 30 |
| hydroOXYzine ^c | 100 | 4 | 400 |
| LORazepam | 4 | 0.5 | 10 |
| OLANzapine | 10 Dementia: 5 | 0.5 Dementia: 2 after 1 st dose; 1 after 2 nd dose | 30 Dementia: 12.5 |
| Ziprasidone | 10 20 | 2 4 | 40 |

^a Use of chlorpromazine for the treatment of behavioral emergencies is discouraged due to significant risk of QTc prolongation, hypotension, and reduction of the seizure threshold.

^b Usual chlorpromazine dose 25-50 mg, initial dose is not recommended to be greater than 50 mg if tolerability is unknown and may give additional dose in 1 hour based on response and tolerability.

^c There is minimal evidence to support the use of these agents for treatment of behavioral emergencies.

^d Use doses exceeding 10 mg of fluphenazine daily with caution.

Sources:

1. Allen MG, Currier GW, Carpenter D, et al. Treatment of Behavioral Emergencies Expert Consensus Guidelines Series. Journal of Psychiatric Practice 2005; 11 [Suppl 1]:1-108.
2. Moore G MD JD, Moore M MD. (2023). Assessment and emergency management of the acutely agitated or violent adult, UpToDate. Cited September 18, 2023, from <https://www.uptodate.com/contents/search>.
3. Micromedex® [electronic version]. Truven Health Analytics, Greenwood Village, CO, USA (cited 07-24-20).
4. Lukens TW, Wolf SJ, Edlow JA, et al. Clinical Policy: Critical Issues in the Diagnosis and Management of the Adult Psychiatric Patient in the Emergency Department. From the

American College of Emergency Physicians Clinical Policies Subcommittee (Writing Committee) on Critical Issues in the Diagnosis and Management of the Adult Psychiatric Patient in the Emergency Department. *Ann Emerg Med* 2006; 47:79-99.

5. Drug Facts and Comparisons. eFacts [online]. 2023. Available from Wolters Kluwer Health, Inc. Accessed September 18, 2023.
6. Roppolo LP, Morris DW, Khan F, et al. Improving the management of acutely agitated patients in the emergency department through implementation of Project BETA (Best Practices in the Evaluation and Treatment of Agitation). *J Am Coll Emerg Physicians Open*. 2020. 1(5):898-907.

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Antipsychotics

Suggested maximum doses (mg/day)

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|---|--|--|---|
| ARIPiprazole (Abilify) | 30 Adjunct in MDD: 15 | 4-11 y/o: 15 (Lit) Bipolar mania/mixed (10-11 y/o): 30 Tourette's Disorder (6-11 y/o): <50 kg: 10 ≥50 kg: 20 Irritability Assoc w/ Autistic Disorder (6-11 y/o): 15 | Schizophrenia (13-17 y/o): 30 Bipolar mania/mixed (12-17 y/o): 30 Tourette's Disorder: <50 kg: 10 ≥50 kg: 20 Irritability Assoc w/ Autistic Disorder: 15 |
| ARIPiprazole Extended Release (Abilify Maintena) | 400 per 4 weeks | NL | NL |
| ARIPiprazole Extended Release (Abilify Asimtufii) | 960 per 8 weeks | NL | NL |
| ARIPiprazole lauroxil (Aristada Initio) RESERVE USE | 675 once, along with 30 mg oral once | NL | NL |
| ARIPiprazole lauroxil (Aristada) | 882 per 4 weeks 1064 per 8 weeks | NL | NL |
| Asenapine (Saphris) Asenapine (Secuado) NON-Formulary | 20 Patch: 7.6 | Bipolar mania/mixed (10-11 y/o): 20 | Bipolar mania/mixed: 20 |
| Brexpiprazole (Rexulti) | 4 Agitation assoc with dementia due to Alzheimer's disease, Adjunct in MDD: 3 | R-NR | Schizophrenia (13-17 y/o): 4 |

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|--|--|--|---|
| Cariprazine (Vraylar) | Schizophrenia, Bipolar mania/mixed: 6 Bipolar depression, Adjunct in MDD: 3 | Bipolar I disorder (10-11 y/o): 4.5 (Lit) | Schizophrenia (13-17 y/o): 4.5 (Lit) Bipolar I disorder: 4.5 (Lit) |
| chlorproMAZINE (Thorazine [DSC]) | 1,000 2,000 (for short periods) | <5 y/o: 40 (Lit) 5-11 y/o: 75 (Lit) Severe behavior problems, outpatient (1-11 y/o) ^b : 0.55 mg/kg every 4-6 hr prn | 12 y/o: 75 (Lit) >12 y/o: 800 (Lit) Severe behavior problems, outpatient (12 y/o): 0.55 mg/kg every 4-6 hr prn Psychotic disorders: 500 |
| cloZAPine (Clozaril, Fazaclo [DSC], Versacloz) RESERVE USE | 900 Psychosis due to Parkinson's disease: 50 (Lit) | 8-11 y/o: 300 (Lit) | 600 (Lit) |
| fluPHENAZine (oral) (Prolixin [DSC]) | 40 | NL | NL |
| fluPHENAZine Decanoate (Prolixin Decanoate [DSC]) | 100 per 2 weeks | NL | NL |
| Haloperidol (oral) (Haldol [DSC]) | 100 | 3-11 y/o: Lesser of 0.15 mg/kg or 6 (Lit) | 12 y/o: Lesser of 0.15 mg/kg or 6 (Lit) >12 y/o: Acute agitation: 10/dose (Lit) Psychosis, Tourette's Disorder and severe behavioral problems: 15 mg (Lit) |
| Haloperidol Decanoate (Haldol Decanoate) | 450 per 4 weeks | NL | NL |
| Iloperidone (Fanapt) RESERVE USE | 24 | R-NR | R-NR |
| Loxapine (Loxitane [DSC]) | 250 | NL | NL |

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|--|--|---|---|
| Lumateperone (Caplyta) | 42 | R-NR | R-NR |
| Lurasidone (Latuda) | 160 Adjunct in Bipolar I depression: 120 | Bipolar I depression (10-11 y/o): 80 | Schizophrenia (13-17 y/o): 80 Bipolar I depression (12-17 y/o): 80 |
| OLANZapine (ZyPREXA, ZyPREXA Zydis) | 30 (Lit) Bipolar mania/mixed: 20 Treatment Resistant Schizophrenia: 40 (Lit) | 4-5 y/o: 12.5 (Lit) 6-11 y/o: 20 (Lit) | 12-17 y/o: 20 (Lit) Schizophrenia, Bipolar mania/mixed (13-17 y/o): 20 |
| OLANZapine pamoate (ZyPREXA Relprevv) RESERVE USE | 300 per 2 weeks 405 per 4 weeks | NL | NL |
| Paliperidone (Invega) | 12 | R-NR | Schizophrenia: < 51 kg: 6 ≥ 51 kg: 12 |
| Paliperidone palmitate (Invega Sustenna) | 234 per 4 weeks | NL | NL |
| Paliperidone palmitate (Invega Trinza) RESERVE USE | 819 per 12 weeks | NL | NL |
| Perphenazine (Trilafon [DSC]) | 32 (outpatient) 64 (inpatient) | R-NR | >12 y/o: 64 (Lit) Psychotic disorders: 24 (outpatient) 64 (inpatient) |
| QUetiapine (SEROquel) | 800 Bipolar depressive episode, Adjunct in MDD: 300 | 5-9 y/o: 400 (Lit) 10-11 y/o: 800 (Lit) Bipolar mania (10-11 y/o): 600 | 800 (Lit) Schizophrenia (13-17 y/o): 800 Bipolar mania (12-17 y/o): 600 |

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|---|------------------------------------|---|--|
| risperiDONE (RisperDAL, RisperDAL M-Tab [DSC]) | 8 ^a Bipolar mania: 6 | 4 -11 y/o: 3 (Lit) Bipolar mania/mixed (10-11 y/o): 6 Irritability in Autistic Disorder (5-11 y/o): 3 | Schizophrenia (13-17 y/o): 6 Bipolar mania/mixed (12-17 y/o): 6 Irritability in Autistic Disorder (12-17 y/o): 3 |
| risperiDONE (RisperDAL Consta) | 50 per 2 weeks | NL | NL |
| risperiDONE (Uzedy) | 125 per 4 weeks 250 per 8 weeks | NL | NL |
| Thioridazine (Mellaril [DSC]) RESERVE USE | (ABSOLUTE) 800 | NL | NL |
| Thiothixene (Navane [DSC]) | 60 | NL | NL |
| Trifluoperazine (Stelazine [DSC]) | 40 | NL | NL |
| Ziprasidone (Geodon) | 160 | Bipolar Disorder: (10-11 y/o): ≤ 45 kg: 80 (Lit) > 45 kg: 160 (Lit) | Bipolar Disorder: ≤ 45 kg: 80 (Lit) > 45 kg: 160 (Lit) |

^a Note that manufacturer package insert max dose for risperidone is 16mg, but no consistent evidence of additional clinical benefit at doses above 8mg.

^b Note that chlorpromazine was approved by the FDA at a time when requirements were much less strict. It is doubtful that it would have been approved in the young age group with the same data today.

Lit= Literature support

MDD= Major Depressive Disorder

NL= Not Listed. Not listed in Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health: Medication Tables (7th Version) 2023, thus not recommended.

R-NR= Reviewed, not recommended. Reviewed for Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health: Medication Tables (7th Version) 2023 but not recommended.

Reviewed October 2024

Antidepressants

Suggested maximum doses (mg/day)

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|---|-----------------------------------|---|--|
| Amitriptyline (Elavil [DSC]) | 300 | R-NR | R-NR |
| buPROPion (Wellbutrin) | 450 (with no single dose >150) | 6-11 y/o: Lesser of 6 mg/kg or 300 (Lit) (with no single dose > 150) | Lesser of 6 mg/kg or 300 (Lit) (with no single dose >150) |
| buPROPion SR (Wellbutrin SR) | 400 (with no single dose >200) | 6-11 y/o: 400 (Lit) (with no single dose >200) | 400 (Lit) (with no single dose >200) |
| buPROPion XL (Wellbutrin XL) | 450 | 6-11 y/o: 450 (Lit) | 450 (Lit) |
| Citalopram (CeleXA) | 40 | 6-11 y/o: 40 (Lit) | 40 (Lit) |
| clomiPRAMINE (Anafranil) | 250 | OCD (10-11 y/o): Lesser of 3 mg/kg or 200 mg | OCD: Lesser of 3 mg/kg or 200 mg |
| Desipramine (Norpramin) | 300 | NL | NL |
| Desvenlafaxine (Pristiq, Khedezla) NON-Formulary | 200 | 7-11 y/o: 50 (Lit) | 50 (Lit) |
| Doxepin (SINEquan [DSC]) | 300 | NL | NL |
| DULoxetine (Cymbalta) | 120 | GAD (7-11 y/o): 120 | GAD: 120 |
| Escitalopram (Lexapro) | 20 OCD: 60 | 6-11 y/o: 20 (Lit) | ≥ 12 y/o: 20 |
| FLUoxetine (PROzac) | 80 OCD: 120 | 6-11 y/o: 60 (Lit) | OCD: 60 |
| fluvoxamine (Luvox [DSC]) | 300 OCD: 450 | OCD (8-11 y/o): 200 | OCD: 300 |

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|--|-------------------------------------|---------------------------------|---|
| Imipramine (Tofranil [DSC]) | 300 | R-NR | R-NR |
| Levomilnacipran (Fetzima) NON-Formulary | 120 | R-NR | R-NR |
| Mirtazapine (Remeron) | 45 | 7-11 y/o: 45 (Lit) | 45 (Lit) |
| Nortriptyline (Pamelor) | 150 ^a | NL | NL |
| PARoxetine (Paxil) | 50 OCD/Panic Disorder: 100 | R-NR, evidence of possible harm | R-NR, evidence of possible harm |
| Phenelzine (Nardil) | 90 | NL | NL |
| Protriptyline (Vivactil) NON-Formulary | 60 | NL | NL |
| Sertraline (Zoloft) | 200 OCD: 400 | OCD (≥ 6 y/o): 200 | OCD: 200 |
| Tranylcypromine (Parnate) | 60 | NL | NL |
| traZODone (Desyrel) | 400 (outpatient) 600 (inpatient) | IE | 150 (Lit) |
| Venlafaxine (Effexor) | 225 (outpatient) 375 (inpatient) | R-NR, evidence of possible harm | R-NR, evidence of possible harm |
| Venlafaxine XR (Effexor XR) | 225 | R-NR, evidence of possible harm | R-NR, evidence of possible harm |
| Vilazodone (Viibryd) NON-Formulary | 40 | 7-11 y/o: 30 (Lit) | 30 (Lit) |
| Vortioxetine (Trintellix) RESERVE USE | 20 | 20 (Lit) | 20 (Lit) |

^a Plasma concentration monitoring for daily dose > 100 mg

OCD= Obsessive Compulsive Disorder

IE= Insufficient evidence to suggest support regarding its efficacy or to provide maximum dosing guidelines in this patient group

Lit= Literature support

NL= Not Listed. Not listed in Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health: Medication Tables (7th Version) 2023, thus not recommended.

R-NR= Reviewed, not recommended. Reviewed for Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health: Medication Tables (7th Version) 2023 but not recommended.

Reviewed October 2024

Mood Stabilizers

Suggested maximum doses (mg/day)

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|--|---|--|---|
| carBAMazepine (TEGretol, TEGretol XR, Carbatrol, Equetro) | 1600 | 4-5 y/o: 35 mg/kg 6-11 y/o: 800 (Lit) Seizures (6-11 y/o): 1000 | 12 y/o: 800 (Lit) 13-15 y/o: 1000 ^a >15 y/o: 1200 ^a |
| lamoTRIGine (LaMICTal) Bipolar disorder | With VPA: 100 Monotherapy: 200 Without VPA but with inducer ^b : 400 | 10-11 y/o ^c With VPA: lesser of 3 mg/kg or 100 Monotherapy: lesser of 6 mg/kg or 200 Without VPA but with inducer ^b : lesser of 12 mg/kg or 300 | 12 y/o ^c : With VPA: lesser of 3 mg/kg or 100 Monotherapy: lesser of 6 mg/kg or 200 Without VPA but with inducer ^b : lesser of 12 mg/kg or 300 13-17 y/o ^c With VPA: 150 Monotherapy: 300 Without VPA but with inducer ^b : 400 |
| lamoTRIGine (LaMICTal) Epilepsy, Adjunctive therapy | With VPA: 200 Monotherapy: 375 With VPA and inducer ^b : 400 Without VPA but with inducer ^b : 500 | 2-11 y/o ^d With VPA: 3 mg/kg With VPA and inducer ^b : 5 mg/kg or 200 Monotherapy: lesser of 7.5 mg/kg or 300 Without VPA but with inducer ^b : lesser of 15 mg/kg or 400 | 12 y/o ^d : With VPA: 3 mg/kg With VPA and inducer ^b : 5 mg/kg or 200 Monotherapy: lesser of 7.5 mg/kg or 300 Without VPA but with inducer ^b : lesser of 15 mg/kg or 400 13-17 y/o: Same as adult dosing |
| Lithium (Lithobid, Eskalith [DSC]) | 1800 ^a | 7-11 y/o 20-30 kg: Acute: 1500 ^a Maintenance: 1200 ^a >30 kg: 1800 ^a | 1800 or 12-hour post dose serum concentration (Acute/Maintenance) 1.2 mEq/L ^e |

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|---|----------|--|--|
| OXcarbazepine (Trileptal) ^e | 2400 | 7-11 y/o ^b : Lesser of 60 mg/kg or 1500 (Lit) | 12 y/o ^b : Lesser of 60 mg/kg or 1500 (Lit) 13-17 y/o ^b : Lesser of 60 mg/kg or 2100 (Lit) |
| Valproic Acid/Valproate, Divalproex (Depakene [DSC], Depakote, Depakote ER) | 60 mg/kg | 6-11 y/o: 60 mg/kg or serum concentration 125 mcg/ml ^a Seizures (10-11 y/o): 60 mg/kg or serum concentration 100 mcg/ml ^a | >12 y/o: 60 mg/kg or serum concentration 125 mcg/ml ^a Seizures (≥12y/o): 60 mg/kg or serum concentration 100 mcg/ml ^a |

Plasma concentration monitoring recommended if these doses are exceeded.

^a Maximum daily dose typically determined by drug serum concentration and individual patient tolerability

^b Carbamazepine (CBZ), phenytoin (PHT), phenobarbital, primidone, estrogen-containing oral contraceptives, rifampin, and the protease inhibitors lopinavir/ritonavir and atazanavir/ritonavir induce lamotrigine glucuronidation and clearance. Patients on rifampin and protease inhibitor lopinavir/ritonavir should follow the same dosing titration/maintenance regimen used with antiepileptic drugs that induce glucuronidation and increase clearance. Dosing recommendations for use of lamotrigine with oral contraceptives and atazanavir/ritonavir can be found in LAMICTAL package insert (Dosage and Administration [2.1], General Dosing Considerations.)

^c Not FDA approved for treatment of bipolar disorder in patients < 18 yo. See dose titration tables in Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health: Medication Tables (7th Version) 2023.

^d Per the package insert (Table 2, Escalation Regimen for LAMICTAL in pts aged 2-12 y/o with epilepsy), maintenance doses in patients < 30 kg may need to be increased by as much as 50%, based on clinical response.

^e Not FDA approved for treatment of bipolar disorder in adults

Lit= Literature support

VPA= valproic acid-valproate

Reviewed October 2024

Stimulants

Suggested maximum doses (mg/day)

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|--|----------|--|--|
| Amphetamine Mixed Salts immediate release (Adderall [DSC]) | 60 (Lit) | 3-5 y/o: 30 6-11 y/o: ≤50 kg: 40 >50 kg: 60 (Lit) | ≤50 kg: 40 >50 kg: 60 (Lit) |
| Amphetamine Mixed Salts extended release (Adderall XR) | 60 (Lit) | 6-11 y/o: ≤50 kg: 30 >50 kg: 60 (Lit) | ≤50 kg: 30 >50 kg: 60 (Lit) |
| Dexmethylphenidate extended release (Focalin XR) | 40 | 6-11 y/o: 50 (Lit) ^a | 50 (Lit) |
| Dextroamphetamine immediate release (Dexedrine [DSC], Zenzedi) | 60 | 3-5 y/o: 40 (Lit) 6-11 y/o: ≤50 kg: 40 >50 kg: 60 (Lit) | ≤50 kg: 40 >50 kg: 60 (Lit) |
| Dextroamphetamine sustained release (Dexedrine Spansule) | 60 | 6-11 y/o: ≤50 kg: 40 >50 kg: 60 (Lit) | ≤50 kg: 40 >50 kg: 60 (Lit) |
| Lisdexamfetamine (Vyvanse) RESERVE USE | 70 | 4-5 y/o: 30 (Lit) 6-11 y/o: 70 | 70 |
| Methylphenidate immediate release (Ritalin, extended release (Ritalin SR [DSC])) | 60 | 3-5 y/o: 22.5 (Lit) 6-11 y/o: ≤50 kg: 60 >50 kg: 100 (Lit) ^b | ≤ 50 kg: 60 > 50 kg: 100 (Lit) ^b |
| Methylphenidate extended release osmotic release (Concerta) | 72 | 3-5 y/o: 36 (Lit) 6-11 y/o: 72 (Lit) | 12 y/o: 72 (Lit) ≥13 y/o: lesser of 72 or 2 mg/kg |

^a Doses exceeding 30 mg/day should be used with caution and with attentive monitoring

^b Doses exceeding 60 mg/day should be used with caution and with attentive monitoring

Lit= Literature support

Reviewed October 2024

Miscellaneous Drugs Used for Psychotropic Purposes

Suggested maximum doses (mg/day)

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|---|--------------------------------|---|--|
| acamprosate (Campral [DSC]) | 1998 | NL | NL |
| atoMOXetine (Strattera) | 100 | 6-11 y/o: Lesser of 1.8 mg/kg (Lit) or 100 | Lesser of 1.8 mg/kg (Lit) or 100 |
| buprenorphine (Subutex [DSC]) | IE | NL | NL |
| cloNIDine (Catapres [DSC]) | 1.2 | (Lit) 6-11 y/o ^a : 27-40.5 kg: 0.2 40.5-45 kg: 0.3 >45 kg: 0.4 | (Lit) 12-17 y/o ^a : 27-40.5 kg: 0.2 40.5-45 kg: 0.3 >45 kg: 0.4 |
| cloNIDine Extended Release (Kapvay [DSC]) | 0.4 | 6-11 y/o: 0.4 | 0.4 |
| deutetrabenazine (Austedo) RESERVE USE | 48 | IE | IE |
| guanFACINE (Tenex [DSC]) | 3 | (Lit) 6-11 y/o ^a : 27-40.5 kg: 2 40.5-45 kg: 3 >45 kg: 4 | (Lit) 12-17 y/o ^a : 27-40.5 kg: 2 40.5-45 kg: 3 >45 kg: 4 |
| guanFACINE Extended Release (Intuniv) | IE | 6-11 y/o: 4 | 12 y/o: 4 ≥13 y/o: 7 |
| naltrexone (ReVia [DSC]) RESERVE USE | 200 AUD: 100 | NL | NL |
| Naltrexone microspheres (Vivitrol) RESERVE USE | 380 every 4 weeks ^b | NL | NL |
| Propranolol (Inderal) | Anxiety: 60 ^c | NL | NL |

| Drug | Adult | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|-------------------------------------|--|----------------------------|---|
| topiramate (Topamax) | Migraine: 100 AUD: 300 Binge eating disorder, tremor, seizure: 400 | NL | NL |
| viloxazine (Qelbree) RESERVE USE | 600 | 400 | 400 |

^a For ADHD

^b Shorter interval may be appropriate in some individuals

^c Maximum dose has not been determined for aggression or self-injurious behavior (SIB)

Lit= Literature support

IE= Insufficient evidence to suggest support regarding its efficacy or to provide maximum dose guidelines for this patient population.

NL= Not Listed. Not listed in Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health: Medication Tables (7th Version) 2023, thus not recommended.

AUD= Alcohol use disorder

Sources:

1. London EB, Yoo JH, Fethke ED, Zimmerman-Bier B. The safety and effectiveness of high-dose propranolol as a treatment for challenging behaviors in individuals with autism spectrum disorders. J Clin Psychopharmacol. 2020;40(2):122-129.
2. Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health: Medication Tables (7th Version)
3. Facts and Comparisons (Formerly Lexicomp) accessed August 2024.
4. Micromedex accessed August 2024

Reviewed October 2024

Anxiolytics

Suggested maximum doses (mg/day)

| Drug | Under 65 years (mg/day) | 65 years and over (mg/day) |
|---|---|--|
| ALPRAZolam (Xanax) | 4 Panic Disorder: 10 | 2 Panic Disorder: 0.75 ^a |
| busPIRone (BuSpar [DSC]) | 60 Depression: 90 | 60 |
| chlordiazepOXIDE (Librium) | 100 ^b Alcohol withdrawal syndrome: 300 | 20 ^b |
| clonazepAM (KlonoPIN) | 4 ^c Seizure disorder: 20 | 4 ^c |
| Clorazepate (Tranxene) | 90 ^b | 60 ^b |
| diazepAM (Valium) | 60 | 5 ^a |
| hydrOXYzine (Atarax [DSC], Vistaril) | 400 | Avoid use |
| LORazepam (Ativan) | 10 ^b | 2 ^{b,c} |
| Oxazepam (Serax [DSC]) | 120 | 60 |

^a Except when documentation shows higher doses are necessary to maintain or improve patient's function

^b Larger doses may be necessary in some cases of alcohol or other substance withdrawal

^c Initiate with low doses and observe closely, increase gradually as needed and tolerated

Source:

1. Rickels K, Amsterdam JD, Clary C, Puzzuoli G, Schweizer E. Buspirone in major depression: a controlled study. J Clin Psychiatry. 1991 Jan;52(1):34-8. PMID: 1988416.

Reviewed October 2024

Hypnotics

Suggested maximum doses (mg/day)

| Drug | Under 65 years (mg/day) | 65 years and older (mg/day) | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|--|---|--|---|---|
| diphenhydrAMINE (Benadryl) ^{a,b} | Insomnia: 50 Other indications: 300 | Insomnia: 50 Other indications: 300 | Insomnia: Lesser of 50 or 1mg/kg (Lit) Other indications: 300 | Insomnia: Lesser of 50 or 1mg/kg (Lit) Other indications: 300 |
| Eszopiclone (Lunesta) ^a | 3 | 2 | R-NR | R-NR |
| hydroOXYzine (Atarax [DSC], Vistaril) ^a | Insomnia: 100 Other indications: 400 | Insomnia: 100 Other indications: 400 | <6 y/o: 50 6-11 y/o: 100 (Lit) | ≥12 y/o: 100 (Lit) |
| Ramelteon (Rozerem) NON-Formulary | 8 | 8 | R-NR | R-NR |
| Suvorexant (Belsomra) NON-Formulary | 20 | 20 | R-NR | R-NR |
| Tasimelteon (Hetlioz) NON-formulary | 20 | 20 | R-NR (Lit) ^c | R-NR (Lit) ^c |
| Temazepam (Restoril) ^a | 30 | 15 (Lit) | R-NR | R-NR |
| traZODone (Desyrel [DSC]) | Insomnia: 200 Depression: 400 (outpatient) 600 (inpatient) | 150 | IE | 150 (Lit) |
| Triazolam (Halcion) ^a | 0.5 | 0.25 | NL | NL |
| Zolpidem (Ambien) ^a | 10 | 5 | R-NR | R-NR |

| Drug | Under 65 years (mg/day) | 65 years and older (mg/day) | Child (< 12 y/o) | Adolescent (12 y/o to < 18 y/o) |
|---|------------------------------------|--|--------------------------------|---|
| Zolpidem extended release (Ambien CR) ^a NON-Formulary | 12.5 | 6.25 | R-NR | R-NR |
| Zolpidem SL (Intermezzo [DSC]) ^a NON-Formulary | Women: 1.75 Men: 3.5 | Women: 1.75 Men: 3.5 | R-NR | R-NR |

^a Medication found on the 2023 American Geriatrics Society (AGS) Beers Criteria Medication List

^b Evidence suggests that tolerance develops to the hypnotic effects within 5-7 nights of continuous use.

^c FDA approved for nighttime sleep disturbances in Smith-Magenis Syndrome (SMS) in adults and children ≥ 3 y/o [FDA approval based on a very small study (n=26, ages 3-39 y/o with SMS)]. There is insufficient evidence for routine use in children and adolescents with insomnia.

IE= Insufficient evidence to suggest support regarding its efficacy or to provide maximum dosing guidelines in this patient group

NL= Not Listed. Not listed in Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health: Medication Tables (7th Version) 2023, thus not recommended.

R-NR= Reviewed, not recommended. Reviewed for Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health: Medication Tables (7th Version) 2023 but not recommended.

Lit= Literature support

Reviewed October 2024

Reserve Drugs

The purpose of the reserve drug class is to stimulate thought and promote care in prescribing. Discussions and interaction with other prescribers is strongly encouraged and references to treatment guidelines and other resources are provided. When reserve status drugs are utilized, documentation of justification in the patient's progress notes is mandated. The PEFC has developed guidelines to help prescribers select patients who would benefit from reserve medications and, for some of the medications, audit criteria with specific monitoring instructions.

| Drug | Guidelines for Use |
|---|--|
| Any combination of three or more antipsychotics | <ol style="list-style-type: none"> 1. Documented justification for use of antipsychotic polypharmacy. 2. Written approval by the Clinical Director or designee prior to initiation of therapy. |
| Any combination of two or more antipsychotics | Documented justification for use of antipsychotic polypharmacy. |
| ARIPrazole lauroxil (Aristada Initio) | <ol style="list-style-type: none"> 1. To be used if the patient has demonstrated tolerability to ARIPrazole through either a two-week trial of oral ARIPrazole or a history of ARIPrazole LAI use; and 2. To be used if provider believes patient will not take oral aripiprazole for 21 days of overlap. |
| Adenosine (Adenocard) | To be used in an ECT suite or under the direction of an anesthesiologist. |
| Betamethasone dipropionate, augmented (Diprolene A/F) | To be used under the direction of a dermatologist. |
| Cannabidiol (Epidiolex) | <ol style="list-style-type: none"> 1. To be used in patients with a diagnosis of Lennox-Gastaut syndrome or Dravet syndrome, or tuberous sclerosis complex in patients 1 year of age and older; and 2. Having treatment-resistant seizures after failed trials of adequate dose and duration of two other antiepileptic agents; and 3. When recommended by a neurologist. |
| CloBAZam (Onfi) | To be used for the treatment of seizures. |
| Clobetasol (Temovate [DSC], Clobex) | To be used under the direction of a dermatologist. |

| Drug | Guidelines for Use |
|--|---|
| cloZAPine (Clozaril, Fazaclo [DSC], Versacloz) | <ol style="list-style-type: none"> 1. For use in patients with refractory schizophrenia or schizoaffective disorder [defined as failure on two antipsychotics from two different chemical families given for sufficient time (6-12 weeks) at a sufficient dose (1,000 mg/day of chlorpromazine equivalents); or 2. For use in patients with schizophrenia or schizoaffective disorder who cannot tolerate other antipsychotics; or 3. Psychosis associated with other organic conditions who have failed two antipsychotics or who cannot tolerate other antipsychotics; or 4. Manic disorders with psychosis in patients who have failed two antipsychotics; or 5. Reduction in the risk of aggression or recurrent suicidal behavior in patients with schizophrenia or schizoaffective disorder; or 6. For use in patients diagnosed with Parkinson's Disease Psychosis <p>See clozapine medication audit criteria/guidelines</p> |
| Deutetrabenazine (Austedo) | <p>To be used only for indications of Huntington's Disease or Tardive Dyskinesia. If using for Tardive Dyskinesia, follow the Treatment Algorithm for Tardive Dyskinesia, also available under Resources.</p> |
| dexmedeTOMIDine (Igalmi) | <ol style="list-style-type: none"> 1. This medication must be administered under the supervision of a healthcare provider (i.e., RN or LVN) with monitoring of vital signs and alertness for at least two hours after each dosage administration; and 2. This medication should be used in adults only and for the acute treatment of agitation. This medication should not be used scheduled; and; 3. Use with caution in patients on alpha-2 agonists due to risk of hypotension and bradycardia. |
| DOPamine (Intropin [DSC]) | <p>To be used in an ECT Suite or under the direction of an anesthesiologist.</p> |
| Epoetin alfa (Epogen, Procrit) | <p>When recommended by a consultant physician</p> |
| Esketamine (Spravato) | <ol style="list-style-type: none"> 1. The patient must have a history of inadequate response to two or more antidepressant trials of adequate dose and duration involving more than one class of antidepressant; and 2. Esketamine should be administered in conjunction with an oral antidepressant; and 3. The severity of the depression should be measured using a validated rating scale at baseline and then weekly for the first four weeks of treatment. After four weeks, evaluate for evidence of therapeutic benefit to determine need for continued treatment; and 4. All REMS requirements must be followed. <p>See esketamine (Spravato) medication audit criteria/guidelines</p> |

| Drug | Guidelines for Use |
|----------------------------|--|
| Felbamate (Felbatol) | To be used under the direction of a neurologist. |
| Iloperidone (Fanapt) | For use in patients that have failed on two antipsychotics given for a sufficient time; or for patients who cannot tolerate other antipsychotics due to akathisia. See Antipsychotics, Atypical medication audit criteria/guidelines |
| Ketamine (Ketalar) | For use in patients experiencing a depressive episode (severe, treatment resistant) associated with major depressive disorder. See: CANMAT Task Force Recommendations for the Use of Racemic Ketamine in Adults with Major Depressive Disorder. The Canadian Journal of Psychiatry 2021, Vol 66(2), 113-125. See: A Consensus Statement on the Use of Ketamine in the Treatment of Mood Disorders. JAMA Psychiatry 2017;74(4): 399-405. |
| Linaclotide (Linzess) | 1. Patients with chronic constipation who have failed first-line agent combinations (e.g. osmotic laxatives, stimulant laxatives); or 2. Patients who are receiving enteral nutrition or who require a modified diet texture |
| Linezolid (Zyvox) | When recommended by a consultant physician |
| Lisdexamfetamine (Vyvanse) | Continued therapy on admission; or failed other stimulants |
| Meropenem (Merrem) | To provide continuation of therapy post hospital discharge |
| Methadone (Methadone) | 1. Treatment of chronic pain under the direction of pain management, palliative care, or a hospice provider; or 2. Treatment of opioid use disorder (OUD) and/or opioid withdrawal under the care of a provider who is familiar with methadone's unique risk profile and has been trained in the use of methadone for this indication. See: CDC Clinical Practice Guideline for Prescribing Opioids for Pain – United States 2022. Centers for Disease Control and Prevention MMWR Recommendations and Reports. November 4, 2022, Vol 71(3). See: The ASAM National Practice Guidelines for the Treatment of Opioid Use Disorder 2020 Focused Update. American Society of Addiction Medicine 2020. See: FDA's Risk Evaluation and Mitigation Strategy (REMS) for all opioid analgesic products intended for outpatient use (www.opioidanalgesicrems.com). |
| Mirabegron (Myrbetriq) | Unable to tolerate anticholinergic medications |

| Drug | Guidelines for Use |
|--|--|
| Moxifloxacin (Moxeza [DSC], Vigamox) | For bacterial conjunctivitis where MRSA or gram-negative microorganisms is identified or suspected. |
| Nabumetone (Relafen) | For the treatment of chronic osteoarthritis or chronic rheumatoid arthritis |
| Naltrexone (ReVia [DSC]) | Not to be used for the treatment of opioid use disorders, unless establishing tolerability for 3-7 days before planning to administer Naltrexone (Vivitrol) injection. |
| Naltrexone microspheres (Vivitrol) | <p>For those that are not candidates for or who have not responded to or tolerated other available formulary therapies for alcohol use disorders and do not have a contraindication to the use of naltrexone microspheres (Vivitrol).</p> <p>OR</p> <p>For those with opioid use disorder for whom opioid agonist treatment (buprenorphine/naloxone, methadone) is contraindicated, unacceptable, unavailable, or discontinued and who have established abstinence for a sufficient period of time.</p> <ol style="list-style-type: none"> 1. Use should be part of a comprehensive management program that includes psychosocial support for the specific substance use; and 2. FDA REMS process must be followed which includes review of the potential risks associated with the use of naltrexone microspheres (Vivitrol); and 3. Medication Guide must be provided to patients before each administration; and 4. In case of emergency, patients must be given a safety bracelet and wallet card that indicates treatment with naltrexone microspheres (Vivitrol); and 5. Hospital use requires MHA approval prior to initiation. <p>See naltrexone audit criteria and guidelines.</p> |
| Norepinephrine or Levarterenol (Levophed) | To be used in an ECT Suite or under the direction of an anesthesiologist. |
| OLANzapine pamoate (ZyPREXA Relprevv) | <ol style="list-style-type: none"> 1. Written approval by the Hospital Clinical Director and the local mental health authority clinical director prior to initiation of therapy with olanzapine pamoate; and 2. Compliance with the Risk Evaluation and Mitigation Strategy (REMS) |
| Ophthalmic agents containing a steroid (i.e. dexamethasone, prednisolone, tobramycin/ dexamethasone) | Consultation with an Ophthalmologist or Therapeutic Optometrist prior to initiation. |

| Drug | Guidelines for Use |
|--|---|
| Paliperidone palmitate (Invega Trinza) | <ol style="list-style-type: none"> 1. Written approval by the local mental health authority clinical director prior to initiation in the inpatient setting; and 2. Patient must be stabilized on Invega Sustenna for at least 4 months prior to initiation. |
| Pentamidine (Pentam) | <ol style="list-style-type: none"> 1. Prophylaxis post-treatment of documented <i>Pneumocystis jiroveci</i> pneumonia (PJP); or 2. Prophylaxis of <i>Pneumocystis jiroveci</i> pneumonia (PJP) in patients with CD4 counts less than 200 |
| Pimavanserin (Nuplazid) | For use in patients diagnosed with Parkinson's Disease Psychosis who are not able to use or have not benefitted from clozapine or quetiapine. |
| Thioridazine (Mellaril [DSC]) | <p>Reserve for use in patients with refractory schizophrenia (failed other classes of antipsychotics) due to the potential for significant, possibly life-threatening, proarrhythmic effects.</p> <p>See thioridazine audit criteria/guidelines</p> |
| Valbenazine (Ingrezza) | Follow the Treatment Algorithm for Tardive Dyskinesia , also available under Resources. |
| Viloxazine (Qelbree) | To be used only after a trial of atomoxetine has not been successful. |
| Vortioxetine (Trintellix) | <ol style="list-style-type: none"> 1. History of positive response or currently stable upon admission on vortioxetine; or 2. Previously completed two or more adequate antidepressant trials. |

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Therapeutic Reference Ranges

| Drug | Therapeutic Reference Range |
|---------------|---|
| Amitriptyline | 80-200 ng/mL (amitriptyline plus nortriptyline) ^{1,2,3} |
| carBAMazepine | 4-12 mcg/mL ¹ Mood: 4-10 mcg/mL ² Anticonvulsant: 4-12 mcg/mL ² ; 4-8 mcg/mL if given with other antiseizure medications ¹ |
| citalopram | 50-110 ng/mL ^{2,3} |
| clomiPRAMINE | 230-450 ng/mL (clomipramine plus N-desmethyl-clomipramine) ^{1,2,3} |
| cloZAPine | 350-600 ng/mL ^{1,2,3} |
| Desipramine | 100-300 ng/mL ^{1,2,3} |
| Doxepin | 50-150 ng/mL (doxepin plus N-desmethyldoxepin) ^{1,2,3} |
| Ethosuximide | 40-100 mcg/mL ^{1,2,3} |
| fluPHENAZine | 1-10 ng/mL ^{1,2,3} |
| Haloperidol | 1-10 ng/mL ^{1,2,3} |
| Imipramine | 175-300ng/mL (imipramine plus desipramine) ^{1,2,3} |
| lamoTRIGine | Bipolar Disorder: 1-6 mcg/mL ^{1,2} Epilepsy: 2.5-15 mcg/mL ^{1,2,3} |
| Lithium | 0.5-1.2 mEq/L ² Older adults: 0.4-0.8 mEq/L ⁵ Acute Mania: 0.8-1.2 mEq/L ^{1,4} Maintenance: 0.6-1.2 mEq/L ^{3,4} Major Depressive Disorder: 0.6-0.9 mEq/L ¹ |
| Nortriptyline | 70-170 ng/mL ^{1,2,3} |
| OLANZapine | 20-80 ng/mL ^{1,2,3} |
| Perphenazine | 0.6-2.4 ng/mL ^{1,2} |
| PHENobarbital | 10-40 mcg/mL ^{1,2,3} |

| Drug | Therapeutic Reference Range |
|---|--|
| Thioridazine | 100-200 ng/mL ^{1,2} |
| Phenytoin | Phenytoin total: 10-20 mcg/mL ^{1,2,3} Phenytoin free: 1-2 mcg/mL ^{1,3} |
| Valproic Acid/ Valproate, Divalproex | 6 to <18 y/o: max 125 mcg/ml (Lit) ⁴ Valproic Acid Total: 50–100 mcg/mL ^{2,3} <ul style="list-style-type: none"> Epilepsy: 50-100 mcg/mL¹ Bipolar disorder: 50-125 mcg/mL¹ Valproic Acid Free: 5-15 mcg/mL ¹ |

Specific Labs may have different reporting ranges based on lab variability and source data. Serum concentrations are useful in the evaluation of therapy. However, they should only be considered as a guide to treatment, not the sole criterion for determination of dosage regimens.

The following anticonvulsants do not have an established therapeutic serum concentration range. Routine monitoring of these anticonvulsants is not warranted as serum concentrations cannot be correlated with clinical efficacy.

| | |
|-----------------|-----------------------------|
| Benzodiazepines | cloBAZam RESERVE USE |
| Gabapentin | Lacosamide |
| levETIRAcetam | OXcarbazepine |
| Pregabalin | Rufinamide |
| tiaGABine | Topiramate |
| Zonisamide | |

Sources:

1. Facts and Comparisons (Formerly Lexicomp) accessed August 2024
2. Consensus Guidelines for Therapeutic Drug Monitoring in Neuropsychopharmacology: Update 2017 (Pharmacopsychiatry 2018; 51:9-62)
3. Micromedex accessed August 2024
4. Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health: Medication Tables (7th Version) 2023
5. UpToDate, Lexidrug accessed September 2024

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Alphabetical Listing

Acamprosate (Campral [DSC])

Tablet, delayed release

Acetaminophen (Tylenol)

Capsule, oral

Liquid, oral

Suppository, rectal

Tablet, oral

Tablet, chewable, oral

Acetaminophen-Codeine C-III, C-V

Liquid, oral (C-V)

Tablet (C-III)

Acetaminophen-HYDROcodone (Lortab [DSC], Vicodin [DSC], Vicodin ES [DSC]) C-II

Elixir

Tablet

AcetaZOLAMIDE (Diamox [DSC])

Capsule, sustained release, oral

Tablet, oral

Acetic Acid (VoSol)

Solution, otic

Acetic Acid-Hydrocortisone (VoSol HC)

Solution, otic

Acetylcysteine

Capsule, oral

Solution, inhalation

Acyclovir (Zovirax)

Capsule, oral

Cream, topical

Injection

Ointment, topical

Suspension, oral

Tablet, oral

Adapalene (Differin)

Cream, topical

Gel, topical

Adenosine (Adenocard)- RESERVE USE

Injection

Albuterol (ProAir, ProAir Respiclick, Proventil, Ventolin)

Aerosol, oral inhalation

Powder, oral inhalation
Nebulization solution, oral inhalation
Tablet, oral

Albuterol-Ipratropium (Combivent, Combivent Respimat)

Nebulization solution, oral inhalation
Solution, oral inhalation

Alendronate (Fosamax, Binosto)

Solution, oral
Tablet, oral
Tablet, effervescent, oral

Allopurinol (Zyloprim)

Tablet, oral

ALPRAZolam (Xanax, Xanax XR) C-IV

Tablet, oral
Tablet, sustained release, oral

Aluminum Chloride Hexahydrate (Drysol)

Liquid, topical

Aluminum Hydroxide

Suspension/gel, oral

Aluminum Hydroxide-Magnesium Trisilicate (Gaviscon)

Tablet, chewable, oral
Suspension, oral

Aluminum Hydroxide-Magnesium Hydroxide (Maalox)

Suspension, oral

Aluminum Hydroxide-Magnesium Hydroxide-Simethicone (Mylanta)

Suspension, oral
Tablet, oral

Amantadine

Capsule, oral
Syrup, oral

Amikacin

Injection

Amino Acid Injection (Aminosyn)

Infusion

Amino Acid Injection-Dextrose-Electrolytes (Clinimix E)

Infusion

Amiodarone (Pacerone, Cordarone)

Tablet, oral

Amitriptyline (Elavil [DSC])

Tablet, oral

amLODIPine (Norvasc)

Tablet, oral

Amoxicillin (Amoxil, Polymox [DSC])

Capsule, oral

Powder for suspension, oral

Tablet, oral

Tablet, chewable, oral

Amoxicillin-Clavulanate (Augmentin)

Suspension, oral

Tablet, oral

Tablet, chewable, oral

Tablet, extended release, oral

Amphetamine Mixed Salts (Adderall [DSC], Adderall XR) CII

Capsule, extended release, oral

Tablet, oral

Ampicillin (Polycillin [DSC], Omnipen [DSC])

Capsule, oral

Powder for suspension, oral

Powder for injection

Antineoplastic Agents

In consultation with the oncologist or field specialist

Antiviral Agents

All commercially available antiviral agents used in the treatment of AIDS/HIV are considered to be formulary agents.

Apixaban (Eliquis)

Tablet, oral

ARIPiprazole (Abilify, Abilify Discmelt [DSC], Abilify Asimtufii, Abilify Maintena, Aristada, Aristada Initio)

Injection, extended release (Abilify Asimtufii)

Injection, extended release (Abilify Maintena)

Injection, extended release (Aristada)

Injection, extended release (Aristada Initio) **RESERVE USE**

Solution, oral

Tablet, oral

Tablet, rapid dissolving, oral

Ascorbic Acid (Vitamin C)

Solution, oral

Tablet, oral

Tablet, chewable, oral

Asenapine (Saphris)

Tablet, sublingual

Aspirin

Suppository, rectal

Tablet, oral

Tablet, buffered, oral

Tablet, chewable, oral

Tablet, enteric coated, oral

Aspirin-Acetaminophen-Caffeine (Excedrin Migraine)

Tablet, oral

Atenolol (Tenormin)

Tablet, oral

atoMOXetine (Strattera)

Capsule, oral

atorvaSTATin (Lipitor)

Tablet, oral

Atropine Sulfate (Isopto Atropine)

Solution, ophthalmic

Azelastine

Spray, nasal inhalation

Azithromycin (Zithromax)

Powder for solution, oral

Tablet, oral

Bacitracin

Ointment, ophthalmic

Ointment, topical

Bacitracin-Polymyxin B (Polysporin)

Ointment, ophthalmic

Ointment, topical

Baclofen

Tablet, oral

Balanced Salt Solution Ophthalmic Irrigating Solution (BSS, Eye Stream)

Solution, ophthalmic

Beclomethasone (QVAR Redihaler, Beconase [DSC])

Aerosol, oral inhalation

Suspension, nasal inhalation

Benazepril (Lotensin)

Tablet, oral

Benzocaine

Topical, dermatologic:

Cream, topical

Ointment

Spray

Topical, Mouth-Throat preparations:

Gel

Liquid

Lozenge

Benzocaine-Menthol (Orajel, Cepacol)

Gel, oral

Lozenge, oral

Benzoin, Compound Tincture

Tincture, topical (may also contain aloe, storax, tolu balsam, 74% to 80% alcohol)

Benzonatate

Capsule, oral

Benzoyl Peroxide

Gel, topical

Liquid, topical

Wash, topical

Benzoyl Peroxide-Clindamycin (BenzaClin [DSC])

Gel, topical: Benzoyl Peroxide 5%-Clindamycin 1%

Benztropine (Cogentin)

Injection

Tablet, oral

Betamethasone dipropionate (Diprolene)

Cream, topical

Lotion, topical

Ointment, topical

Betamethasone dipropionate, augmented (Diprolene A/F)- RESERVE USE

Cream, topical

Gel, topical

Lotion, topical

Ointment, topical

Betamethasone Valerate (Valisone)

Cream, topical

Lotion, topical

Ointment, topical

Betaxolol (Betoptic S)

Solution, ophthalmic

Suspension, ophthalmic

Bethanechol (Urecholine [DSC])

Tablet, oral

Bimatoprost (Lumigan)

Solution, ophthalmic

Bisacodyl (Dulcolax)

Suppository, rectal

Tablet, enteric coated, oral

Bismuth Subsalicylate (Pepto-Bismol, Bismatrol, Kaopectate)

Liquid, oral

Tablet, chewable, oral

Brexpiprazole (Rexulti)

Tablet, oral

Brimonidine (Alphagan P)

Solution, ophthalmic

Bromocriptine

Capsule, oral

Tablet, oral

Brompheniramine-Phenylephrine (Dimetapp Children's Cold and Allergy)

Liquid, oral

Brompheniramine-Pseudoephedrine (Rynex PSE)

Liquid, oral

Budesonide (Pulmicort)

Nebulization suspension, oral inhalation

Powder, oral inhalation

Budesonide-Formoterol (Symbicort)

Aerosol, oral inhalation

Buprenorphine (Subutex [DSC])

Tablet, sublingual

Buprenorphine-naloxone (Suboxone)

Film, sublingual

Tablet, sublingual

buPROPion (Wellbutrin, Zyban [DSC])

Tablet, oral

Tablet, sustained release, oral

Tablet, extended release, oral

busPIRone (BuSpar [DSC])

Tablet, oral

Calamine-Zinc Oxide-Glycerin (Calamine Lotion)

Lotion, topical

Calamine-Pramoxine (Caladryl)

Lotion, topical

Calcipotriene (Dovonex)

Cream, topical

Ointment, topical

Solution, topical

Calcium Carbonate (Os-Cal, Tums) [40% elemental calcium]

Suspension, oral

Tablet, oral

Tablet, oral, chewable

Calcium Carbonate-Vitamin D3 (Os-Cal + D, Os-Cal chewable)

Tablet, oral

Tablet, chewable, oral

Calcium Citrate (Citracal) [20% elemental calcium]

Tablet, oral

Calcium Citrate-Vitamin D3 (Citracal-D)

Tablet, oral

Camphor-Phenol (Campho-Phenique)

Liquid, topical: Camphor 10.8%-Phenol 4.7% [with eucalyptus oil and mineral oil]

Canagliflozin (Invokana)

Tablet, oral

Cannabidiol (Epidiolex) C-V RESERVE USE

Solution, oral

Captopril (Capoten [DSC])

Tablet, oral

carBAMazepine (TEGretol, TEGretol XR, Carbatrol, Equetro)

Capsule, extended release 12 h, oral

Suspension, oral

Tablet, oral

Tablet, chewable, oral

Tablet, extended release 12 hr, oral

Carbamide Peroxide (Debrox, Gly-Oxide)

Solution, mouth/throat mucous membrane

Solution, otic

Carbidopa-Levodopa (Sinemet)

Tablet, oral:

Tablet, Sustained release, oral

Carboxymethylcellulose

Liquigel, ophthalmic

Cariprazine (Vraylar)

Capsule, oral

Carvedilol (Coreg, Coreg CR)

Tablet, oral

Capsule, extended release 24 hr, oral

Cefadroxil (Duricef [DSC])

Capsule, oral

Powder for suspension, oral

ceFAZolin (Kefzol [DSC])

Injection

Cefdinir (Omnicef [DSC])

Capsule, oral

Powder for suspension, oral

Cefepime (Maxipime [DSC])

Injection

cefTRIAxone (Rocephin [DSC])

Solution premixed in dextrose for injection

Powder for injection

Cefuroxime Axetil (Ceftin [DSC]) - Oral form only -

Tablet, oral

Celecoxib (CeleBREX)

Capsule, oral

Cellulose (Unifiber)

Powder, oral

Cephalexin (Keflex [DSC])

Capsule, oral

Powder for suspension, oral

Tablet, oral

Cetirizine (ZyrTEC)

Syrup, oral

Tablet, oral

Cetirizine-Pseudoephedrine (ZyrTEC D)

Tablet, 12hr, oral

chlordiazePOXIDE (Librium) - oral form only - C-IV

Capsule, oral

Chlorhexidine (Peridex)

Liquid, topical, with 4% isopropyl alcohol

Rinse, oral, with 12% alcohol

Chlorpheniramine

Syrup, oral

Tablet, oral

Tablet, timed release, oral

chlorproMAZINE (Thorazine [DSC])

Injection

Tablet, oral

Chlorthalidone

Tablet, oral

Cholestyramine

****Product may contain phenylalanine****

Powder, oral

Powder for oral suspension light (aspartame)

Ciclopirox (Loprox, Penlac [DSC])

Cream, topical

Shampoo, topical

Solution, topical

Ciprofloxacin (Cipro, Ciloxan)

Injection

Ointment, ophthalmic

Solution, ophthalmic

Suspension, oral

Tablet, oral

Ciprofloxacin-dexAMETHasone (Ciprodex)

Suspension, otic

Ciprofloxacin-Hydrocortisone (Cipro HC Otic)

Solution, otic

Citalopram (CeleXA)

Solution, oral

Tablet, oral

Clarithromycin (Biaxin)

Granules for suspension, oral

Tablet, film coated, oral

Clindamycin (Cleocin, Cleocin T)

Capsule, oral

Gel, topical
Granules for solution, oral
Injection
Lotion, topical
Solution, topical

cloBAZam (Onfi) C-IV RESERVE USE

Suspension, oral
Tablet, oral

Clobetasol (Temovate [DSC], Cormax, Clobex)- RESERVE USE

Cream, topical
Cream, topical, in emollient base
Gel, topical
Lotion, topical
Ointment, topical
Solution, topical scalp application

clomiPRAMINE (Anafranil)

Capsule, oral

clonazePAM (KlonoPIN) C-IV

Tablet, oral
Tablet, oral disintegrating, oral

cloNIDine (Catapres [DSC], Kapvay [DSC])

Patch, weekly transdermal
Tablet, oral
Tablet, extended release, oral

Clopidogrel (Plavix)

Tablet, oral

Clorazepate (Tranxene) C-IV

Tablet, oral

Clotrimazole (Lotrimin, Gyne-Lotrimin)

Cream, topical
Cream, vaginal
Solution, topical
Troche, oral

Clotrimazole-Betamethasone dipropionate (Lotrisone [DSC])

Cream, topical

cloZAPine (Clozaril, Fazaclo [DSC], Versacloz)- RESERVE USE

Suspension, oral
Tablet, oral
Tablet, oral disintegrating, oral

Coal Tar

Shampoo, topical

Solution, topical

Cod Liver Oil-Zinc Oxide-Talc (Desitin)

Ointment, topical: Zinc Oxide 40% [with Cod Liver Oil, Talc, Petrolatum, Lanolin, and Methylparaben]

Colchicine

Tablet, oral

Capsule, oral

Collagenase (Santyl)

Ointment, topical

Oral Contraceptives

All commercially available oral contraceptive agents are considered to be formulary agents.

Cromolyn (Intal [DSC])

Solution, ophthalmic

Cyanocobalamin (Vitamin B12)

Injection

Tablet, oral

Tablet, sublingual

Cyclobenzaprine

Tablet, oral

Cyproheptadine (Periactin)

Syrup, oral

Tablet, oral

Dantrolene (Dantrium)

Capsule, oral

Powder for injection

Dapsone

Tablet, oral

Darifenacin (Enablex [DSC])

Tablet, extended release 24 hour, oral

Denosumab (Prolia)

Injection

Desipramine (Norpramin)

Tablet, oral

Desmopressin (DDAVP, Stimate)

Injection

Solution, nasal inhalation

Tablet, oral

Desonide (Desowen, Tridesilon)

Cream, topical
Lotion, topical
Ointment, topical

Deutetrabenazine (Austedo) RESERVE USE

Tablet, oral
Tablet, extended release, oral

dexAMETHasone

Injection, as sodium phosphate
Solution, oral
Suspension, ophthalmic **RESERVE USE**
Tablet, oral

dexmedeTOMIDine (Igalmi) RESERVE USE

Film, sublingual

Dexmethylphenidate extended release (Focalin XR) CII

Capsule, oral, extended release

Dextroamphetamine (Dexedrine [DSC], Dexedrine Spansule, Zenzedi) C-II

Capsule, sustained release 24 hr, oral
Tablet, oral

Dextromethorphan

Any combination of drugs with dextromethorphan for cough suppression are considered to be formulary agents as long as the individual ingredients are on formulary and the dosage form is listed as being on formulary.

Capsule, oral
Liquid, oral
Liquid, sustained release, oral
Lozenge, oral

Dextrose 5%-Sodium Chloride Intravenous Solution

Infusion

Dextrose 5%-Sodium Chloride-Potassium Chloride Intravenous Solution

Infusion

Dextrose 5% in Water

Infusion

Dextrose 5% in Ringer's Lactate

Infusion

Dextrose 50% in Water

Infusion
Syringe
Vials

Diaper Rash Ointment

Diaper Rash Powder (Mexsana)

Powder, topical: contains kaolin, eucalyptus oil, camphor, corn starch, lemon oil, zinc oxide

diazepam (Valium, Diastat) C-IV

Gel, rectal

Injection

Solution, oral

Tablet, oral

Diclofenac Gel (Voltaren Gel)

Gel, topical

Dicyclomine (Bentyl)

Capsule, oral

Injection

Syrup, oral

Tablet, oral

Digoxin (Lanoxin)

Elixir, oral

Injection

Tablet, oral

diltiazem (Cardizem)

Capsule, extended release 12 hr

Capsule, extended release 24 hr

Tablet

Tablet, sustained release 24 hr

diphenhydramine (Benadryl)

Capsule, oral

Cream, topical

Injection

Liquid, oral

Tablet, oral

Disulfiram (Antabuse [DSC])

Tablet, oral

Divalproex (Depakote, Depakote ER)

Capsule, delayed release sprinkles, oral

Tablet, delayed release, oral

Tablet, extended release 24 hr, oral

Docusate Calcium (Surfak)

Capsule, oral

Docusate Sodium (Colace)

Capsule, oral

Liquid, oral

Docosate Sodium-Sennosides (Peri-Colace [DSC])

Tablet, oral

Donepezil (Aricept)

Tablet, oral

Tablet, oral disintegrating

DOPamine (Intropin [DSC])- RESERVE USE

Infusion in D5W

Injection

Doxepin (SINEquan [DSC])

Capsule, oral

Concentrate, oral

Doxycycline (Vibramycin)

Capsule, oral

Powder for suspension, oral

Tablet, oral

Dulaglutide (Trulicity)

Injection

DULoxetine (Cymbalta)

Capsule, delayed release, oral

Emollient Gel

Gel, topical

Emollient Lotion-Cream (Lubriderm, Keri Lotion, Cetaphil, Eucerin, Nutraderm)

Cream, topical

Lotion, topical

Emollient Ointment (Lanolin, Aquaphor)

Ointment, topical

Empagliflozin (Jardiance)

Tablet, oral

Enalapril (Vasotec)

Tablet, oral

Enoxaparin (Lovenox)

Injection

Entacapone (Comtan)

Tablet, oral

EPINEPHrine (Adrenalin, EpiPen)

Auto-injector

Injection

Epoetin alfa (Epogen, Procrit)- RESERVE USE

Injection

Ergocalciferol (Calciferol, Drisdol)

See Vitamin D₂

Erythromycin

Ointment, ophthalmic

Erythromycin base (Eryc, Erythrocin):

Capsule, delayed release, oral

Tablet, film coated, oral

Erythromycin Ethylsuccinate (EryPed, E.E.S.):

Granules/Powder for oral suspension

Suspension, oral

Tablet, oral

Erythromycin-Benzoyl Peroxide (Benzamycin)

Gel, topical: Erythromycin 3%-Benzoyl Peroxide 5% (with 20% alcohol)

Escitalopram (Lexapro)

Solution, oral

Tablet, oral

Esketamine (Spravato) C-III - RESERVE USE

Spray, nasal

Esomeprazole (NexIUM)

Capsule, oral

Suspension packet, oral

Estradiol (Estrace, Estraderm [DSC], Vivelle, Alora, Climara, Vagifem)

Cream, vaginal

Systems, transdermal

Tablet, oral

Tablet, vaginal

Estrogen-medroxyPROGESTERone (PremPro, Premphase)

Tablet, oral

Estrogens, Conjugated (Premarin)

Cream, vaginal

Injection

Tablet, oral

Eszopiclone (Lunesta)

Tablet, oral

Ethambutol (Myambutol)

Tablet, oral

Ethionamide (Trecator)

Tablet, sugar coated, oral

Ethosuximide (Zarontin)

Capsule, oral

Syrup, oral

Ethyl Chloride

Spray, topical

Ezetimibe (Zetia)

Tablet, oral

Famotidine (Pepcid)

Injection

Powder for oral suspension

Tablet, oral

Felbamate (Felbatol) - RESERVE USE

Suspension, oral

Tablet, oral

Fenofibrate (Antara, Lofibra, Tricor, Triglide)

Capsule, oral

Capsule, micronized, oral

Tablet, oral

Tablet, nanocrystallized, oral

fentaNYL (Duragesic) C-II

Patch, transdermal

Ferrous Fumarate-Docusate Sodium (Ferro-Sequels)[contains 33% elemental iron]

Tablet, timed released, oral

Ferrous Sulfate (Feosol, Fer-In-Sol) [contains 20% elemental iron]

Elixir with 5% alcohol, oral

Tablet, oral

Tablet, enteric coated, oral

Tablet, extended release, oral

Fexofenadine (Allegra)

Tablet, oral

Fexofenadine - Pseudoephedrine (Allegra-D)

Tablet, extended release 12 hour, oral

Tablet, extended release 24 hour, oral

Finasteride (Proscar)

Tablet, oral

Fish Oil

Capsule, oral

Fluconazole (Diflucan)

Suspension, oral

Tablet, oral

Fludrocortisone

Tablet, oral

Fluocinolone (Capex, Derma-Smooth/FS, Synalar)

Cream, topical

Oil, topical

Ointment, topical

Shampoo

Solution, topical

Fluocinonide

Cream, topical

Gel, topical

Ointment, topical

Solution, topical

Fluorescein Sodium (Bio Glo, FUL-GLO)

Strip, ophthalmic

Fluorescein-benoxinate (Altafluor Benox)

Solution, ophthalmic: fluorescein sodium 0.25% and benoxinate hydrochloride 0.4%

Fluoride (PerioMed)

Solution, oral

Tablet, chewable, oral

FLUoxetine (PROzac)

Capsule, oral

Liquid, oral

Tablet, oral

fluPHENAZine (Prolixin [DSC])

Concentrate, oral, 14% alcohol

Elixir, oral, with 14% alcohol

Injection, as decanoate

Injection, as hydrochloride

Tablet, oral

Fluticasone (Flonase, Flovent)

Aerosol, oral inhalation

Solution, nasal inhalation

Powder, oral inhalation diskus

Fluticasone-Salmeterol (Advair)

Aerosol, oral inhalation

Powder, oral inhalation

fluvoxamine (Luvox)

Tablet, oral

Folic Acid (Vitamin B₉, Folate, Folvite)

Tablet, oral

Fondaparinux (Arixtra)

Injection

Fosfomycin (Monurol)

Sachet, oral

Fosphenytoin (Cerebyx)

Injection

Furosemide (Lasix)

Injection

Solution, oral

Tablet, oral

Gabapentin (Neurontin)

Capsule, oral

Solution, oral

Tablet, oral

Galantamine (Razadyne)

Capsule, 24hr, oral

Solution, oral

Tablet, film coated, oral

Gentamicin

Cream, topical

Infusion, premixed in NS

Injection

Ointment, ophthalmic

Ointment, topical

Solution, ophthalmic

glipizide (Glucotrol)

Tablet, oral

Tablet, extended release, oral

Glucosamine

Capsule, oral

Tablet, oral

Glucagon

Powder for injection

Glucose

Gel, oral

Tablet, oral

Glycerin (Sani-Supp)

Suppository, rectal

Glycopyrrolate (Robinul)

Tablet, oral

Griseofulvin (Fulvicin, Grifulvin V [DSC], Gris-Peg)

Suspension, Microsize, oral

Tablet, Microsize, oral

Tablet, Ultramicrosize, oral

guaiFENesin (Robitussin, Mucinex)

Any combination of drugs with guaifenesin are considered to be formulary agents as long as the individual ingredients are on formulary and the dosage form is listed as being on formulary.

Liquid, oral

Tablet, oral

Tablet, sustained release, oral

guaifenesin-Codeine C-V

Syrup, oral

guaifenesin-Dextromethorphan

Liquid, oral

Tablet, sustained release

guaifenesin-Pseudoephedrine (Mucinex D)

Tablet, oral

guanFACINE (Tenex [DSC], Intuniv)

Tablet, oral

Tablet, extended release 24 hr, oral

Haloperidol (Haldol)

Concentrate, oral

Injection, as decanoate

Injection, as lactate

Tablet, oral

Heparin

Injection

Hepatitis B Immune Globulin (HBIG)

Injection, single dose

Homatropine (Homatropaire)

Solution, ophthalmic

hydrALAZINE

Tablet, oral

hydroCHLORothiazide

Capsule, oral

Tablet, oral

Hydrocortisone (Cortef, Lanacort, Corticaine, Anusol-HC, Proctofoam-HC)

Injection, as sodium succinate

Cream, topical

Lotion, topical

Ointment, topical

Cream, rectal

Foam, rectal

Suppositories, rectal

Tablet, oral

Hydrogen Peroxide

Solution, topical

hydrOXYzine (Atarax [DSC], Vistaril)

Capsule, oral

Injection, as hydrochloride

Syrup, as hydrochloride, oral

Tablet, oral

Ibandronate (Boniva [DSC])

Tablet, oral

Injection

Ibuprofen (Motrin)

Capsule, oral

Suspension, oral

Tablet, oral

Tablet, chewable, oral

Iloperidone (Fanapt) - RESERVE USE

Tablet, oral

Imipramine (Tofranil)

Tablet, oral

Insulin, Aspart (NovoLOG)

Injection: 100 units/mL

Insulin, Combination (70/30)

Injection: 100 units/mL

Insulin, Glargine (Lantus)

Injection: 100 units/mL

Insulin, Lispro (HumaLOG)

Injection: 100 units/mL

Insulin, Lispro protamine suspension-insulin lispro, (HumaLOG Mix 75/25), HumaLOG Mix 50/50

Injection: 100 units/mL

Insulin, NPH

Injection: 100 units/mL

Insulin, Regular (HumuLIN, NovoLIN)

Injection: 100 units/mL

Ipratropium (Atrovent)

Aerosol, oral inhalation

Nebulization solution, oral inhalation

Solution, nasal inhalation

Iron salts with or without vitamins and/or other minerals (Hemocyte Plus, Niferex-150, Niferex-150 Forte)

Capsule, oral

Solution, oral

Tablet, oral

Tablet, enteric coated, oral

Isoniazid (INH [DSC])

Syrup, oral

Tablet, oral

Isoorbide Dinitrate (Isordil)

Capsule, sustained release, oral

Tablet, oral

Tablet, sustained release, oral

Isoorbide Mononitrate

Tablet, oral

Tablet, extended release, oral

Ivermectin (Stromectol)

Tablet, oral

Ketamine (Ketalar) C-III - RESERVE USE

Intravenous

Ketoconazole (Nizoral)

Cream, topical

Shampoo, topical

Tablet, oral

Ketorolac (Toradol [DSC])

Injection

Tablet, oral

Ketotifen (Zaditor)

Solution, ophthalmic

Labetalol (Normodyne [DSC])

Tablet, oral

Lacosamide (Vimpat) C-V

Solution, oral

Solution, intravenous

Tablet, oral

Lactobacillus Acidophilus (Lactinex, Bacid, Florajen)

Capsule, oral

Granules, oral

Tablet, chewable, oral

Lactulose (Enulose)

Syrup, oral

lamoTRIgine (LaMICtal)

Tablet, oral

Tablet, chewable, oral

Tablet, dispersible, oral

Lansoprazole (Prevacid)

Capsule, enteric coated granules, oral

Latanoprost (Xalatan)

Solution, ophthalmic

Levalbuterol (Xopenex)

Aerosol, oral inhalation

Nebulization Solution, oral inhalation

Levarterenol (Levophed) or Norepinephrine - RESERVE USE

Injection

levETIRAcetam (Keppra)

Solution, oral

Tablet, oral

levOCARNitine (Carnitor)

Tablet, oral

Solution, oral

levoFLOXacin (Levaquin [DSC])

Injection

Solution, oral

Tablet, oral

Levothyroxine (Synthroid, Levoxyl)

Powder for injection

Tablet, oral

Lidocaine (Lidoderm, Xylocaine)

Injection

Gel, topical

Liquid, viscous, oral
Ointment, topical
Patch, topical
Solution, topical

Lidocaine-Prilocaine (EMLA)

Cream, topical

Linezolid (Zyvox)- RESERVE USE

Suspension, oral
Tablet, oral

Linaclotide (Linzess)- RESERVE USE

Capsule, oral

Liraglutide (Victoza)

Injection

Lisdexamfetamine (Vyvanse) C-II- RESERVE USE

Capsule, oral

Lisinopril (Prinivil [DSC], Zestril)

Tablet, oral

Lithium Carbonate (Eskalith [DSC], Lithobid)

Capsule, oral
Tablet, oral
Tablet, controlled release, oral
Tablet, slow release, oral

Lithium Citrate

Syrup, oral

Loperamide (Imodium)

Capsule, oral
Liquid, oral
Tablet, oral

Loratadine (Claritin)

Liquid, oral
Tablet, oral

Loratadine-Pseudoephedrine (Claritin D)

Tablet, 12 hour sustained release, oral
Tablet, 24 hour sustained release, oral

LORazepam (Ativan) C-IV

Injection
Solution, oral
Tablet, oral

Losartan (Cozaar)

Tablet, oral

Loxapine (Loxitane [DSC])

Capsule, oral

Lubiprostone (Amitiza)

Capsule, oral

Lumateperone (Caplyta)

Capsule, oral

Lurasidone (Latuda)

Tablet, oral

Magnesium Citrate

Solution, oral

Magnesium Hydroxide (Milk of Magnesia)

Suspension, oral

Tablet, chewable

Magnesium L-lactate dihydrate (Mag-Tab SR)

Tablet, oral

Magnesium Oxide (Mag-Ox)

Capsule, Oral

Tablet, oral

Magnesium Sulfate (Epsom Salt)

Granules, topical

Injection

Infusion, premixed

Meclizine (Antivert, Bonine)

Tablet, oral

medroxyPROGESTERone (Provera)

Injection

Tablet, oral

Megestrol (Megace, Megace ES)

Suspension, oral

Tablet, oral

Melatonin

Capsule, oral

Tablet, oral

Tablet, sublingual

Tablet, sustained release, oral

Meloxicam (Mobic)

Tablet, oral

Memantine (Namenda)

Tablet, oral

Menthol**Menthol-Methyl Salicylate (Ben-Gay)**

Cream, topical

Ointment, topical

Menthol-Zinc Oxide (Calmoseptine, Risamine)

Ointment, topical

Meropenem (Merrem) - RESERVE USE

Solution premixed in NS for injection

Powder for injection

Mesalamine (Asacol HD [DSC], Pentasa, Rowasa, Canasa)

Capsule, controlled release, oral

Suppository, rectal

Suspension, rectal enema

Tablet, delayed release, oral

metFORMIN (Glucophage, Glucophage XR)

Tablet, oral

Tablet, extended release, oral

Solution, oral

Methadone (Dolophine [DSC]) C-II - RESERVE USE

Solution, oral

Tablet, oral

Tablet for oral suspension

methIMazole (Tapazole)

Tablet, oral

Methocarbamol (Robaxin)

Tablet, oral

Methylcellulose (Citrucel)

Powder, oral

Methyldopa

Injection

Tablet, oral

Methylphenidate immediate release (Ritalin) C-II

Tablet, oral

Methylphenidate extended release (Ritalin SR [DSC], Concerta, Metadate CD) C-II

Capsule, extended release, oral (Metadate CD)

Tablet, extended release, oral (Concerta)

Tablet, extended release, oral (Ritalin SR)

methyIPREDNISolone (Medrol, DEPO-Medrol, SOLU-Medrol)

Injection, as acetate

Injection, as sodium succinate

Tablet, oral

Metoclopramide (Reglan)

Injection

Liquid, oral

Tablet, oral

Metoprolol (Lopressor, Toprol XL)

Tablet, oral

Tablet, extended release, oral

metronIDAZOLE (Flagyl, Noritate, MetroGel)

Capsule, oral

Cream, topical

Gel, topical

Gel, vaginal

Injection

Tablet, oral

Miconazole

Cream, topical

Cream, vaginal

Spray, topical

Suppository, vaginal

Midazolam (Versed [DSC], Nayzilam) C-IV

Injection

Spray, nasal

Syrup, oral

Mineral Oil - for topical use only

Mineral Oil-Petrolatum (Refresh Lacrilube)

Ointment, ophthalmic

Minocycline

Capsule, oral

Mirabegron (Myrbetriq)- RESERVE USE

Tablet, extended release 24 hr, oral

Mirtazapine (Remeron, Remeron SolTab)

Tablet, oral

Tablet, rapid dissolving, oral

miSOPROStol (Cytotec)

Tablet, oral

Mometasone (Nasonex)

Inhalation, nasal

Montelukast (Singulair)

Tablet, chewable, oral

Tablet, oral

Morphine C-II

Injection

Solution, oral

Suppository, rectal

Tablet, controlled release, oral

Moxifloxacin (Avelox, Moxeza [DSC], Vigamox)

Solution, Ophthalmic: **RESERVE USE**

Tablet, oral

Multivitamin (Unicap, Hexavitamins)

Liquid, oral

Tablet, oral

Tablet, chewable, oral

Multivitamin-Minerals

Liquid, oral

Tablet, oral

Tablet, chewable, oral

Multivitamins, Pediatric (Poly-Vi-Sol)

Liquid, oral

Multivitamin, Prenatal

Tablet, oral

Mupirocin (Bactroban [DSC])

Cream, topical

Ointment, intranasal

Ointment, topical

Nabumetone (Relafen)- RESERVE USE

Tablet, oral

Nafcillin

Powder for injection

Naloxone (Narcan)

Injection

Solution, nasal

Naltrexone (ReVia [DSC]), Naltrexone microspheres (Vivitrol)

Tablet, oral- **RESERVE USE**

Injection, long-acting - **RESERVE USE**

Naphazoline

Solution, ophthalmic

Naproxen (Naprosyn)

Tablet, oral

Tablet, delayed release, oral

Neomycin

Tablet, oral

Neomycin-Polymyxin B-Bacitracin (Triple Antibiotic Ointment)

Ointment, topical

Neomycin-Polymyxin B-Hydrocortisone (Cortisporin)

Cream, topical

Solution, otic

Suspension, otic

Niacin (Vitamin B₃)

Capsule, oral

Capsule, sustained release, oral

Capsule, timed release, oral

Tablet, oral

Tablet, extended release, oral

Nicotine (Nicoderm, Nicorette)

Patch, transdermal

Gum, chewing, as polacrilex

Lozenge, oral

NIFedipine (Procardia, Procardia XL)

Capsule, liquid-filled, oral

Tablet, sustained release, oral

Nirmatrelvir-ritonavir (Paxlovid)

Tablet, oral

Nitrofurantoin (Macrochantin, Macrobid)

Capsule, macrocrystal, oral

Capsule, macrocrystal/monohydrate, oral

Suspension, oral

Nitroglycerin

Capsule, sustained release, oral

Ointment, topical

Patch 24 hour, transdermal

Spray, translingual

Tablet, sublingual

Non-Soap Cleanser (Cetaphil)

Bar

Cleansing lotion

Norepinephrine or Levarterenol (Levophed)- RESERVE USE

Injection

Nortriptyline (Pamelor)

Capsule, oral

Solution, oral

Nystatin (Mycostatin [DSC])

Cream, topical

Ointment, topical

Powder, topical

Suspension, oral

Tablet, oral

Ofloxacin (Ocuflox, Floxin [DSC])

Solution, ophthalmic

Solution, otic

OLANzapine (ZyPREXA, ZyPREXA Zydis, ZyPREXA Relprevv)

Injection

Injection as pamoate- **RESERVE USE**

Tablet, oral

Tablet, rapid dissolving, oral

Olmesartan (Benicar)

Tablet, oral

Olopatadine (Pataday, Patanol [DSC])

Solution, ophthalmic

Omega-3-acid ethyl esters (Lovaza)

Capsule, oral

Omeprazole (PriLOSEC)

Capsule, delayed release, oral

Suspension, oral

Tablet, oral

Ondansetron (Zofran, Zofran ODT)

Injection

Tablet, oral

Tablet, oral disintegrating

Oseltamivir (Tamiflu)

Capsule, oral

Suspension, oral

Oxazepam (Serax [DSC]) C-IV

Capsule, oral

OXcarbazepine (Trileptal)

Suspension, oral

Tablet, oral

Oxybenzone-PDO-Pet Hy-Phl (Vaseline Lip Therapy)

Ointment, topical

OxyBUTYnin (Ditropan XL)

Syrup, oral

Tablet, oral

Tablet, extended release, oral

oxyCODONE (OxyCONTIN) C-II

Tablet, oral

Tablet, controlled release, oral

Oxymetazoline (Afrin)

Solution, drops, nasal inhalation

Solution, spray, nasal inhalation

Paliperidone (Invega, Invega Sustenna, Invega Trinza)

Tablet, extended release, oral

Injection, long acting (Sustenna)

Injection, long acting (Trinza) **RESERVE USE**

Pancrelipase (Pancreaze, Creon)

Capsule, oral: contains lipase, protease and amylase

Pantoprazole (Protonix)

Injection

Suspension Packets, oral

Tablet, oral

PARoxetine (Paxil)

Suspension, oral

Tablet, oral

Tablet, extended release 24 hr, oral

penicillin G Benzathine (Bicillin LA)

Injection

penicillin V Potassium (Pen-Vee K [DSC], V-Cillin K)

Powder for solution, oral

Tablet, oral

Pentamidine (Pentam)- RESERVE USE

Inhalation

Powder for injection

Permethrin (Elimite, NIX)

Cream, topical

Lotion, topical

Cream rinse, topical

Perphenazine (Trilafon [DSC])

Tablet, oral

Petrolatum, White (Vaseline)

Ointment, topical

Phenazopyridine (Pyridium)

Tablet, oral

Phenelzine (Nardil)

Tablet, oral

PHENobarbital (Luminal [DSC]) C-IV

Injection

Solution, oral

Tablet, oral

Phenol (Chloraseptic)

Mouthwash/Gargle

Throat Spray

Phenylephrine (Neo-Synephrine, Preparation H)

Ointment, rectal

Cream, rectal

Suppository, rectal

Solution, drops, nasal inhalation

Solution, spray, nasal inhalation

Solution, ophthalmic

Phenytoin (Dilantin)

Capsule, extended release, oral

Injection

Suspension, oral

Tablet, chewable, oral

Phytonadione (Vitamin K1, Mephyton)

Tablet, oral

Pilocarpine (Isopto Carpine)

Solution, ophthalmic, as hydrochloride

Pimavanserin (Nuplazid) RESERVE USE

Capsule, oral

Tablet, oral

Pimecrolimus (Elidel)

Cream, topical

Pioglitazone (Actos)

Tablet, oral

Piperacillin-Tazobactam (Zosyn)

Injection

Podophyllum Resin (Podocon-25)

Liquid, topical

Polycarbophil (Fibercon, Fiber-Lax)

Tablet, oral

Polyethylene Glycol (MiraLax)

Powder for oral solution

Polyethylene Glycol Electrolyte Solution (PEG, Co-Lyte, GoLYTELY)

Powder for oral solution

Polymyxin B-Bacitracin (Polysporin)

Ointment, ophthalmic

Ointment, topical

Powder, topical

Polymyxin B-Trimethoprim (Polytrim [DSC])

Solution, ophthalmic

Polyvinyl Alcohol (Artificial Tears)

Solution, ophthalmic

Potassium Chloride

Capsule, sustained release, oral

Liquid, oral

Powder for suspension, oral

Tablet, controlled release (microencapsulated)

Tablet, controlled release (wax matrix)

Potassium Citrate (Urocit K)

Tablet, oral

Tablet, extended release, oral

Potassium Citrate Combinations

Solution, oral: containing Sodium Citrate-Potassium Citrate-Citric Acid

Solution, oral: containing Sodium Citrate-Potassium Citrate

Potassium Iodide (SSKI)

Solution, oral

Potassium Phosphate (Neutra-Phos-K)

Powder for oral solution

Povidone-Iodine (Betadine)

Ointment, topical

Surgical scrub, topical

Solution, topical

Pramipexole (Mirapex)

Tablet, oral

Pramoxine

Cream, topical

Foam, topical

Gel, topical

Lotion, topical

Spray, topical

Pramoxine-Hydrocortisone (Analpram HC)

Cream, Rectal

Pramoxine-Zinc (Caladryl Clear)

Lotion, topical

Pravastatin (Pravachol)

Tablet, oral

Prazosin (Minipress)

Capsule, oral

prednisoLONE (Pred Mild, Pred Forte)

Solution, oral

Syrup, oral

Tablet, oral

Solution, ophthalmic **RESERVE USE**

predniSONE (Deltasone)

Solution, oral

Tablet, oral

Pregabalin (Lyrica) C-V

Capsule, oral

Primidone (Mysoline)

Tablet, oral

Prochlorperazine (Compazine)

Injection

Suppository, rectal
Tablet, oral

Promethazine (Phenergan)

Suppository, rectal
Syrup, oral
Tablet, oral

Proparacaine (Alcaine)

Solution, ophthalmic

Propranolol (Inderal)

Capsule, sustained release, oral
Injection
Solution, oral
Tablet, oral

Propylthiouracil

Tablet, oral

Pseudoephedrine (Sudafed)

Liquid, oral
Tablet, immediate release, oral
Tablet, extended release, oral

Psyllium (Konsyl, Metamucil)

All products of psyllium, psyllium husk, and psyllium seed, alone or in combination with dextrose, aspartame, sugar or sucrose are considered to be formulary agents.

Pyrazinamide

Tablet, oral

Pyrethins 0.33%-Piperonyl Butoxide 4% (Pronto, RID)

Liquid, topical
Shampoo, topical

Pyridoxine (Vitamin B6)

Injection
Tablet, oral

QUetiapine (SEROquel)

Tablet, oral

Raloxifene (Evista)

Tablet, oral

Rasagiline (Azilect)

Tablet, oral

Repaglinide (Prandin [DSC])

Tablet, oral

Rifabutin (Mycobutin)

Capsule, oral

rifAMPin (Rifadin)

Capsule, oral

Injection

Risedronate (Actonel)

Tablet, oral

risperiDONE (RisperDAL, RisperDAL M-Tab [DSC], RisperDAL Consta, Uzedy)

Injection, long acting (RisperDAL Consta)

Injection, long acting (Uzedy)

Solution, oral

Tablet, oral

Tablet, orally disintegrating

Rivaroxaban (Xarelto)

Tablet, oral

Rivastigmine (Exelon, Exelon Patches)

Capsule, oral

Patch, transdermal

Rosuvastatin (Crestor)

Tablet, oral

Rufinamide (Banzel)

Tablet, oral

Saccharomyces boulardii (Florastor)

Capsule, oral

Salicylic Acid

All available salicylic acid products as a single agent are considered to be formulary agents.

Salicylic Acid-Sulfur

All commercially available forms are considered to be formulary agents.

Saliva Substitute (Biotene)

Gel

Mouthwash

Spray

Salmeterol (Serevent)

Powder, oral inhalation

Selegiline (Eldepryl [DSC])

Capsule, oral

Tablet, oral

Selenium Sulfide

Shampoo, topical

Semaglutide (Ozempic, Rybelsus)

Injection

Tablet, oral

Senna (Senokot)

Tablet, oral

Sertraline (Zoloft)

Concentrate, oral

Tablet, oral

Sevelamer (Renagel)

Tablet, oral

Silver Nitrate

Applicator sticks, topical

Silver SulfADIAZINE (Silvadene)

Cream, topical

Simethicone (Gas-X, Phazyme)

Drops, oral

Tablet, chewable, oral

Simvastatin (Zocor)

Tablet, oral

SITagliptin (Januvia)

Tablet, oral

Sodium Bicarbonate

Tablet, oral

Sodium Chloride

Drops, nasal

Infusion

Injection, bacteriostatic

Injection, for admixtures

Injection, for reconstitution

Nebulization solution, oral inhalation

Ointment, ophthalmic

Solution, irrigation, topical

Solution, nasal inhalation

Solution, ophthalmic

Tablet, oral

Tablet, enteric coated, oral

Tablet, slow release, oral

Sodium Chloride Intravenous Solution

Infusion

Sodium Citrate-Citric Acid (Oracit)

Solution, oral

Sodium Polystyrene Sulfonate

Powder for suspension, oral

Suspension, oral (with sorbitol and alcohol)

Solifenacin (Vesicare)

Tablet, oral

Sorbitol

Solution, oral

Spirolactone (Aldactone)

Tablet, oral

Spirolactone-hydroCHLOROthiazide (Aldactazide)

Tablet, oral

Sucralfate (Carafate)

Suspension, oral

Tablet, oral

Sulfacetamide Sodium (Bleph-10)

Lotion, topical

Ointment, ophthalmic

Solution, ophthalmic

Sulfamethoxazole-Trimethoprim (Bactrim)

The 5:1 ratio of Sulfamethoxazole to Trimethoprim is constant in all dosage forms

Injection

Suspension, oral

Tablet, oral

sulfaSALazine (Azulfidine)

Tablet, oral

Tablet, delayed release, oral

Sulindac (Clinoril)

Tablet, oral

SUMatriptan (Imitrex)

Injection

Spray, nasal

Tablet, oral

Sunscreen-Block

Cream-Lotion, topical: contains a minimum SPF of 15

Tacrolimus (Protopic)

Ointment, topical

Tamoxifen

Tablet, oral

Tamsulosin (Flomax)

Capsule, oral

Tazarotene (Tazorac, Avage)

Cream, topical

Gel, topical

Temazepam (Restoril) C-IV

Capsule, oral

Terbinafine (LamISIL)

Cream, topical

Tablet, oral

Testosterone (Androlan [DSC]) C-IV

Injection, in oil, as cypionate

Tetracycline

Capsule, oral

Tetrahydrozoline (Visine Allergy Relief, Visine Moisturizing)

Solution, ophthalmic

Tetrahydrozoline-Zinc Sulfate (Visine A.C.)

Solution, ophthalmic

Thiamine (Vitamin B1)

Injection

Tablet, oral

Thioridazine (Mellaril [DSC]) - RESERVE USE

Tablet, oral

Thiothixene (Navane [DSC])

Capsule, oral

tiaGABine (Gabitril)

Tablet, oral

Timolol (Timoptic, Timoptic XE)

Gel, ophthalmic

Solution, as maleate, ophthalmic

Solution, as maleate, ophthalmic, preservative free, single use

Timolol-Dorzolamide (Cosopt)

Solution, ophthalmic

Tioconazole

Ointment, vaginal

Tiotropium (Spiriva, Spiriva Respimat)

Capsule, oral inhalation (with device)

Aerosol solution, oral inhalation

tiZANidine (Zanaflex)

Capsule, oral

Tablet, oral

Tobramycin (Tobrex)

Injection

Ointment, ophthalmic

Solution, ophthalmic

Tobramycin-dexAMETHasone (TobraDex) [contains Benzalkonium]- RESERVE USE

Ointment, ophthalmic

Suspension, ophthalmic

Tolnaftate (Tinactin)

Aerosol, topical, liquid

Aerosol, topical, powder

Cream, topical

Powder, topical

Solution, topical

Tolterodine (Detrol, Detrol LA)

Capsule, extended release, oral

Tablet, oral

Topiramate (Topamax)

Capsule, sprinkle, oral

Tablet, oral

traMADol (Ultram [DSC]) C-IV

Tablet, oral

Tranlycypromine (Parnate)

Tablet, oral

Travoprost (Travatan Z)

Solution, ophthalmic

traZODone (Desyrel [DSC])

Tablet, oral

Tretinoin (Retin-A)

Cream, topical

Gel, topical

Triamcinolone (Nasacort)

Aerosol, topical
Cream, topical
Lotion, topical
Ointment, topical
Paste, dental
Spray, nasal inhalation

Triamterene-hydroCHLOROthiazide (Dyazide, Maxzide)

Capsule, oral
Tablet, oral

Triazolam (Halcion) C-IV

Tablet, oral

Trifluoperazine (Stelazine [DSC])

Tablet, oral

Trihexyphenidyl (Artane [DSC])

Elixir, oral
Tablet, oral

Trimethobenzamide (Tigan)

Capsule, oral
Injection, oral

Tripolidine-Pseudoephedrine (Aprodine)

Tablet, oral

Tropicamide (Mydrigyl)

Solution, ophthalmic

Trospium

Tablet, oral
Capsule, extended release 24 hour, oral

Trypsin-Balsam Peru-Castor Oil (Granulex, Revina)

Aerosol, topical
Ointment, topical

Tuberculin, Purified Protein Derivative (P.P.D.)

Intermediate test strength: 5 TU/0.1 mL

Urea

Balm, topical
Cream, topical
Gel, topical
Emulsion, topical
Lotion, topical
Ointment, topical

Shampoo, topical

valACYclovir (Valtrex)

Caplet, oral

Tablet, oral

Valbenazine (Ingrezza) RESERVE USE

Capsule, oral

Valproic Acid/Valproate (Depakene [DSC])

Capsule, oral

Solution, oral

Valsartan (Diovan)

Tablet, oral

Vancomycin (Vancocin)

Capsule, oral

Powder for injection

Varenicline (Chantix)

Tablet, oral

Venlafaxine (Effexor)

Capsule, extended release 24 hr, oral

Tablet, oral

Tablet, extended release 24 hr, oral

Verapamil (Calan [DSC]), (Isoptin [DSC]), Verelan, Verelan PM)

Capsule, sustained release, oral

Injection

Tablet, immediate release, oral

Tablet, sustained release, oral

Viloxazine (Qelbree) RESERVE USE

Capsule, extended release 24 hr, oral

Vitamin A (Aquasol A)

Capsule, oral

Vitamin A&D Topical

Ointment, topical

Vitamin B Complex with or without other vitamins and/or minerals

Capsule, oral

Tablet, oral

Vitamin D2 (Ergocalciferol, Calciferol, Drisdol)

Capsule, oral

Drops, oral

Tablet, oral

Vitamin D3 (Cholecalciferol)

Capsule, oral
Chewable, oral
Drops, oral
Softgel, oral
Tablets, oral

1,25-dihydroxyvitamin D3 (Calcitriol, Rocaltrol)

Capsule, oral
Solution, oral

Vitamin E (Aquasol E)

Capsule, oral

Vortioxetine (Trintellix) RESERVE USE

Tablet, oral

Warfarin (Coumadin)

Tablet, oral

Water for Injection

Injection, for constitution

Water for Irrigation

Solution, irrigation, topical

Wound Cleanser (Carrington Clara-Klenz)

Spray, topical

Xylitol(Act Dry Mouth, Biotene, Xylimelts)

Gum
Lozenge
Melt
Spray

Zanamivir (Relenza)

Powder for Inhalation

Zinc Oxide

Ointment, topical
Paste, topical

Zinc Oxide-Petrolatum-Imidazolidinyl Urea (Diaperene)

Ointment, topical

Zinc Sulfate

Capsule, oral
Tablet, oral

Ziprasidone (Geodon)

Capsule, oral

Injection

Zoledronic Acid (Reclast)

Injection

Zolpidem (Ambien) C-IV

Tablet, oral

Zonisamide (Zonegran)

Capsule, oral

Therapeutic Classification/Cost Index

Antidiabetic Agents

| Insulins, Human | Cost Index |
|--|------------|
| Insulin, Aspart (NovoLOG) | Moderate |
| Insulin, Combination (70/30) | Moderate |
| Insulin, Glargine (Lantus) | Moderate |
| Insulin, Lispro (HumaLOG) | Moderate |
| Insulin, Combination, lispro protamine suspension-insulin lispro, (HumaLOG Mix 75/25, HumaLOG Mix 50/50) | Moderate |
| Insulin, NPH | Moderate |
| Insulin, Regular (HumuLIN, NovoLIN) | Moderate |

| Sulfonylureas | Cost Index |
|-----------------------|------------|
| glipiZIDE (Glucotrol) | Low |

| Miscellaneous Antidiabetic Agents | Cost Index |
|---------------------------------------|------------|
| Canagliflozin (Invokana) | High |
| Dulaglutide (Trulicity) | High |
| Empagliflozin (Jardiance) | High |
| Liraglutide (Victoza) | High |
| metFORMIN (Glucophage, Glucophage XR) | Low-High |
| Pioglitazone (Actos) | High |
| Repaglinide (Prandin [DSC]) | Moderate |
| Semaglutide (Ozempic, Rybelsus) | High |
| SITagliptin (Januvia) | High |

Antidotes

| Antidotes | Cost Index |
|-------------------------------------|------------|
| Acetylcysteine | Low |
| EPINEPHrine (EpiPen) | High |
| Glucagon | High |
| Glucose, oral | Moderate |
| Naloxone (Narcan) | High |
| Phytonadione (Vitamin K1, Mephyton) | Low-High |
| Sodium Polystyrene Sulfonate | Low-High |

Antineoplastic Agents

| Antineoplastic Agents | Cost Index |
|-----------------------|------------|
| Tamoxifen | Low |

All commercially available oncologic agents used in the treatment of cancer are considered to be formulary agents, if prescribed by an oncologist for the active treatment of cancer. All commercially available oncologic agents prescribed by field specialists are considered to be formulary agents.

Blood Modifying Agents

| Antiplatelet Agents | Cost Index |
|----------------------|------------|
| Aspirin | Low |
| Clopidogrel (Plavix) | Low |

| Anticoagulants | Cost Index |
|------------------------|------------|
| Apixaban (Eliquis) | High |
| Enoxaparin (Lovenox) | High |
| Fondaparinux (Arixtra) | High |

| Anticoagulants | Cost Index |
|-----------------------|------------|
| Heparin | Moderate |
| Rivaroxaban (Xarelto) | High |
| Warfarin (Coumadin) | Low |

| Anticoagulation Antagonists | Cost Index |
|--|------------|
| Phytonadione (Vitamin K ₁ , Mephyton) | Low-High |

| Miscellaneous Blood Modifying Agents | Cost Index |
|---|------------|
| Epoetin alfa (Epogen, Procrit) RESERVE USE | High |
| Ferrous Fumarate-Docusate Sodium (Ferro-Sequels) [33% elemental iron] | Low |
| Ferrous Sulfate (Feosol, Fer-In-Sol) [20% elemental iron] | Low |

Cardiovascular Agents

| Diuretics-Thiazides & Related Diuretics | Cost Index |
|---|------------|
| Chlorthalidone | Low |
| hydroCHLOROthiazide | Low |

| Diuretics-Loop Diuretics | Cost Index |
|--------------------------|------------|
| Furosemide (Lasix) | Low |

| Diuretics-Potassium-Sparing Diuretics | Cost Index |
|---------------------------------------|------------|
| Spironolactone (Aldactone) | Low |

| Diuretics-Carbonic Anhydrase Inhibitors | Cost Index |
|---|------------|
| acetaZOLAMIDE (Diamox [DSC]) | Moderate |

| Diuretics-Combination Diuretics | Cost Index |
|--|-------------------|
| Spironolactone-hydroCHLOROthiazide (Aldactazide) | Low |
| Triamterene-hydroCHLOROthiazide (Dyazide, Maxzide) | Low |

| Cardiac Glycosides | Cost Index |
|---------------------------|-------------------|
| Digoxin (Lanoxin) | Moderate |

| Antianginals | Cost Index |
|--------------------------------|-------------------|
| Isosorbide Dinitrate (Isordil) | Low-Moderate |
| Isosorbide Mononitrate | Low-Moderate |
| Nitroglycerin | Low-Moderate |

| Antiarrhythmics | Cost Index |
|-----------------------------------|-------------------|
| Adenosine (Adenocard) Reserve Use | Moderate-High |
| Amiodarone (Pacerone, Cordarone) | Low |

| Calcium Channel Blockers | Cost Index |
|--|-------------------|
| amLODIPine (Norvasc) | Low |
| dilTIAZem (Cardizem) | Low-High |
| NIFEdipine (Procardia, Procardia XL) | Moderate |
| Verapamil (Calan [DSC]), (Isoptin [DSC]), Verelan, Verelan PM) | Low-High |

| Beta-Adrenergic Blockers | Cost Index |
|-----------------------------------|-------------------|
| Atenolol (Tenormin) | Low |
| Carvedilol (Coreg, Coreg CR) | Moderate-High |
| Labetalol (Normodyne [DSC]) | Low |
| Metoprolol (Lopressor, Toprol XL) | Low |

| Beta-Adrenergic Blockers | Cost Index |
|---------------------------------|-------------------|
| Propranolol (Inderal) | Low-Moderate |

| Antihyperlipidemics | Cost Index |
|---|-------------------|
| atorvaSTATin (Lipitor) | Low |
| Cholestyramine | Moderate |
| Ezetimibe (Zetia) | High |
| Fenofibrate (Antara, Lofibra, Tricor, Triglide) | Low-Moderate |
| Niacin (Vitamin B ₃) | Low |
| Pravastatin (Pravachol) | Low |
| Rosuvastatin (Crestor) | Moderate |
| Simvastatin (Zocor) | Low |
| Omega-3-acid ethyl esters (Lovaza) | Moderate |

| Angiotensin Converting Enzyme Inhibitors | Cost Index |
|---|-------------------|
| Benazepril (Lotensin) | Low |
| Captopril (Capoten [DSC]) | Moderate |
| Enalapril (Vasotec) | Low |
| Lisinopril (Prinivil [DSC], Zestril) | Low |

| Angiotensin Receptor Blockers | Cost Index |
|--------------------------------------|-------------------|
| Losartan (Cozaar) | Low |
| Olmesartan (Benicar) | High |
| Valsartan (Diovan) | Low |

| Vasopressors | Cost Index |
|--|-------------------|
| DOPamine (Intropin [DSC]) RESERVE USE | Moderate-High |
| EPINEPHrine (Adrenalin) | High |
| Norepinephrine or Levarterenol (Levophed) RESERVE USE | High |

| Miscellaneous Antihypertensives | Cost Index |
|--|-------------------|
| cloNIDine (Catapres [DSC]) | Low-High |
| hydrALAZINE | Low |
| Methyldopa | Low |

Central Nervous System Agents

| Agents for Migraine | Cost Index |
|---|-------------------|
| Amitriptyline (Elavil [DSC]) | Moderate |
| Aspirin-Acetaminophen-Caffeine (Excedrine Migraine) | Low |
| Atenolol (Tenormin) | Moderate |
| Divalproex (Depakote, Depakote ER) | Low-Moderate |
| Metoprolol (Lopressor, Toprol XL) | Low-Moderate |
| Naproxen (Naprosyn) | Low-High |
| Propranolol (Inderal) | Moderate-High |
| SUMATriptan (Imitrex) | High |
| Topiramate (Topamax) | Moderate-High |
| Valproic Acid/Valproate (Depakene [DSC]) | Moderate-High |
| Venlafaxine (Effexor) | High |
| Verapamil (Verelan, Verelan PM) | Low-High |

| Analgesics-Nonsteroidal Anti-Inflammatory Agents | Cost Index |
|---|-------------------|
| Aspirin | Low |
| Celecoxib (CeleBREX) | Low |
| Ibuprofen (Motrin) | Low |
| Ketorolac (Toradol [DSC]) | Moderate-High |
| Meloxicam (Mobic) | Moderate |
| Nabumetone (Relafen) - RESERVE USE | Moderate |
| Naproxen (Naprosyn) | Low-Moderate |
| Sulindac (Clinoril) | Low |

| Analgesics-Opiate Agonists | Cost Index |
|--|-------------------|
| Acetaminophen-Codeine C-III | Low-Moderate |
| Acetaminophen-HYDROcodone (Lortab [DSC], Vicodin [DSC], Vicodin ES [DSC]) C-II | Low-Moderate |
| Methadone (Dolophine [DSC]) C-II - RESERVE USE | Low |
| Morphine C-II | Low-Moderate |
| oxyCODONE (OxyCONTIN) C-II | Moderate-High |
| traMADol (Ultram [DSC]) C-IV | Low |

Opiate agonists include a range of dosage forms and strengths. Dosing of each is dependent on the individual patient and condition treated.

| Miscellaneous Analgesic, Antipyretic, & Anti-Inflammatory Agents | Cost Index |
|---|-------------------|
| Acetaminophen (Tylenol) | Low |
| Colchicine | High |

| Anticonvulsants-Barbiturates | Cost Index |
|-------------------------------------|-------------------|
| PHENobarbital (Luminal [DSC]) C-IV | Low |
| Primidone (Mysoline) | Moderate |

| Anticonvulsants-Benzodiazepines | Cost Index |
|--|-------------------|
| cloBAZam (Onfi) C-IV RESERVE USE | Moderate |
| clonazepam (Klonopin) C-IV | Low-Moderate |
| Clorazepate (Tranxene) C-IV | Moderate-High |
| diazepam (Valium, Diastat) C-IV | Low-High |
| LORazepam (Ativan) C-IV | Low-Moderate |
| Midazolam (Nayzilam) C-IV | High |

| Anticonvulsants-Hydantoins | Cost Index |
|-----------------------------------|-------------------|
| Fosphenytoin (Cerebyx) | High |
| Phenytoin (Dilantin) | Low-High |

| Anticonvulsants-Succinimides | Cost Index |
|-------------------------------------|-------------------|
| Ethosuximide (Zarontin) | Moderate-High |

| Miscellaneous Anticonvulsants | Cost Index |
|---|-------------------|
| Cannabidiol (Epidiolex) C-V RESERVE USE | High |
| carbamazepine (TEGretol, TEGretol XR, Carbatrol, Equetro) | Low-High |
| Divalproex (Depakote) | Low-Moderate |
| Felbamate (Felbatol) - RESERVE USE | High |
| Gabapentin (Neurontin) | Low-High |
| Lacosamide (Vimpat) C-V | Moderate-High |
| lamoTRIgine (LaMICTal) | Low-High |
| levETIRAcetam (Keppra) | Low-Moderate |
| OXcarbazepine (Trileptal) | Moderate |
| Pregabalin (Lyrica) C-V | Moderate |

| Miscellaneous Anticonvulsants | Cost Index |
|--|-------------------|
| Rufinamide (Banzel) | High |
| tiaGABine (Gabitril) | High |
| Topiramate (Topamax) | Low |
| Valproic Acid/Valproate (Depakene [DSC]) | Moderate |
| Zonisamide (Zonegran) | Moderate |

| Antiemetics-Antivertigo | Cost Index |
|--|-------------------|
| diphenhydrAMINE (Benadryl) | Low |
| hydrOXYzine (Atarax [DSC], Vistaril) | Moderate-High |
| Meclizine (Antivert, Bonine) | Low |
| Metoclopramide (Reglan) | Low-Moderate |
| Ondansetron (Zofran [DSC], Zofran ODT) | Low-High |
| Prochlorperazine (Compazine) | Moderate-High |
| Promethazine (Phenergan) | Low-High |
| Trimethobenzamide (Tigan) | Moderate-High |

| Antiparkinson Agents | Cost Index |
|------------------------------|-------------------|
| Amantadine | Low-Moderate |
| Benztropine (Cogentin) | Low-High |
| Bromocriptine | Moderate |
| Entacapone (Comtan) | Moderate |
| Carbidopa-Levodopa (Sinemet) | Low |
| Pramipexole (Mirapex) | Low |
| Rasagiline (Azilect) | Moderate |
| Selegiline (Eldepryl [DSC]) | Moderate-High |

| Antiparkinson Agents | Cost Index |
|--------------------------------|-------------------|
| Trihexyphenidyl (Artane [DSC]) | Low |

| Dementia Agents | Cost Index |
|---------------------------------------|-------------------|
| Donepezil (Aricept) | High |
| Galantamine (Razadyne [DSC]) | High |
| Memantine (Namenda) | Moderate |
| Rivastigmine (Exelon, Exelon Patches) | High |

| Muscle Relaxants-Antispasticity Agents | Cost Index |
|---|-------------------|
| Baclofen | Low |
| Dantrolene (Dantrium) | Moderate-High |
| diazepam (Valium) C-IV | Low-High |
| tizanidine (Zanaflex) | Low-Moderate |

| Muscle Relaxants-Muscle Relaxant Agents | Cost Index |
|--|-------------------|
| Cyclobenzaprine | Low |
| diazepam (Valium) C-IV | Low-high |
| Methocarbamol (Robaxin) | Moderate |

| Agents for Tardive Dyskinesia- VMAT-2 inhibitors | Cost Index |
|---|-------------------|
| Deutetrabenazine (Austedo) – RESERVE USE | High |
| Valbenazine (Ingrezza) – RESERVE USE | High |

| Psychotropic Agents-Benzodiazepine Anxiolytics and Hypnotics | Cost Index |
|---|-------------------|
| ALPRAZolam (Xanax, Xanax XR) C-IV | Moderate |
| chlorthalidone (Librium) C-IV | Moderate |

| Psychotropic Agents-Benzodiazepine Anxiolytics and Hypnotics | Cost Index |
|---|-------------------|
| clonazepam (Klonopin) C-IV | Moderate |
| Clorazepate (Tranxene) C-IV | High |
| diazepam (Valium) C-IV | Low-High |
| LORazepam (Ativan) C-IV | Moderate |
| Midazolam (Versed [DSC]) C-IV | Moderate |
| Oxazepam (Serax [DSC]) C-IV | Moderate |
| Temazepam (Restoril) C-IV | Low |
| Triazolam (Halcion) C-IV | Moderate |

| Psychotropic Agents-Miscellaneous Anxiolytics and Hypnotics | Cost Index |
|--|-------------------|
| buspirone (BuSpar [DSC]) | Moderate |
| dexmedetomidine (Igalmi) RESERVE USE | High |
| diphenhydramine (Benadryl) | Low-Moderate |
| Eszopiclone (Lunesta) | High |
| hydroxyzine (Atarax [DSC], Vistaril) | Moderate-High |
| Prazosin (Minipress) | Moderate |
| trazodone (Desyrel [DSC]) | Low |
| Zolpidem (Ambien) C-IV | Moderate |

| Psychotropic Agents-Antidepressants-Monoamine Oxidase Inhibitors (MAOI) | Cost Index |
|--|-------------------|
| Phenelzine (Nardil) | Moderate |
| Tranylcypromine (Parnate) | High |

| Psychotropic Agents-Antidepressants-Serotonin Selective Reuptake Inhibitors (SSRI) | Cost Index |
|---|-------------------|
| Citalopram (CeleXA) | Low-Moderate |
| Escitalopram (Lexapro) | Low-Moderate |
| FLUoxetine (PROzac) | Moderate |
| fluvoxamine (Luvox) | Moderate |
| PARoxetine (Paxil) | Low-High |
| Sertraline (Zoloft) | Low |

| Psychotropic Agents-Antidepressants-Serotonin Norepinephrine Reuptake Inhibitors (SNRI) | Cost Index |
|--|-------------------|
| DULoxetine (Cymbalta) | Moderate |
| Venlafaxine (Effexor) | Low-High |

| Psychotropic Agents-Antidepressants-Tricyclic Agents | Cost Index |
|---|-------------------|
| Amitriptyline (Elavil [DSC]) | Moderate |
| clomipramine (Anafranil) | High |
| Desipramine (Norpramin) | Moderate-High |
| Doxepin (SINEquan [DSC]) | Moderate |
| Imipramine (Tofranil) | Low |
| Nortriptyline (Pamelor) | Low |

| Psychotropic Agents-Miscellaneous Antidepressants | Cost Index |
|--|-------------------|
| buPROPion (Wellbutrin, Zyban [DSC]) | Low-Moderate |
| Mirtazapine (Remeron, Remeron SolTab) | Low-Moderate |
| traZODone (Desyrel [DSC]) | Low |
| Esketamine (Spravato) C-III RESERVE USE | High |

| Psychotropic Agents-Miscellaneous Antidepressants | Cost Index |
|--|-------------------|
| Ketamine (Ketalar) C-III RESERVE USE | High |
| Vortioxetine (Trintellix) RESERVE USE | High |

| Psychotropic Agents-Antipsychotics |
|--|
| See: Antipsychotic Relative Cost Index |

| Psychotropic Agents-Mood Stabilizers | Cost Index |
|---|-------------------|
| carBAMazepine (TEGretol, TEGretol XR, Carbatrol, Equetro) | Low-Moderate |
| Divalproex (Depakote) | Low-Moderate |
| lamoTRIgine (LaMICTal) | Low-High |
| Lithium Carbonate (Eskalith [DSC], Lithobid) | Low |
| Lithium Citrate | Moderate |
| OXcarbazepine (Trileptal) | Low-Moderate |
| Topiramate (Topamax) | Moderate |
| Valproic Acid/Valproate (Depakene [DSC]) | Low |

| Psychotropic Agents-Stimulants | Cost Index |
|---|-------------------|
| Amphetamine Mixed Salts (Adderall [DSC], Adderall XR) CII | Low-Moderate |
| Dexmethylphenidate extended release (Focalin XR) CII | High |
| <i>Rarely used in adults</i> Dextroamphetamine (Dexedrine [DSC], Dexedrine Spansule, Zenzedi)C-II | Moderate |
| Lisdexamfetamine (Vyvanse) C-II RESERVE USE | High |
| <i>Rarely used in adults</i> Methylphenidate immediate release (Ritalin) C-II | Moderate |
| <i>Rarely used in adults</i> Methylphenidate extended release (Ritalin SR [DSC], Metadate CD, Concerta) C-II | High |

| Psychotropic Agents-Other ADHD Agents | Cost Index |
|--|-------------------|
| atoMOXetine (Strattera) | High |
| cloNIDine (Kapvay [DSC]) | Low-Moderate |
| guanFACINE (Intuniv) | Low-High |
| Viloxazine (Qelbree) RESERVE USE | High |

| Substance Use Treatments | Cost Index |
|---|-------------------|
| Acamprosate (Campral [DSC]) | High |
| Buprenorphine (Subutex [DSC]) | Moderate |
| Buprenorphine-naloxone (Suboxone) | Moderate |
| Disulfiram (Antabuse [DSC]) | Moderate |
| Naltrexone (ReVia [DSC]), Naltrexone microspheres (Vivitrol) RESERVE USE | Moderate-High |
| Nicotine (Nicoderm, Nicorette) | Low-Moderate |
| Topiramate (Topamax) | Low |
| Varenicline (Chantix) | High |

| Miscellaneous Central Nervous System Agents | Cost Index |
|--|-------------------|
| Megestrol (Megace [DSC], Megace ES) | Moderate-High |

Endocrine Agents

| Estrogens | Cost Index |
|--|-------------------|
| Estradiol (Estrace, Estraderm [DSC], Vivelle, Alora, Climara, Vagifem) | Low-High |
| Estrogens, Conjugated (Premarin) | High |

| Progestones | Cost Index |
|-------------------------------|-------------------|
| medroxyPROGESTERone (Provera) | Low |

| Combination Products | Cost Index |
|---|-------------------|
| Estrogen-medroxyPROGESTERone (PremPro, Premphase) | High |

All commercially available oral contraceptive agents are considered to be formulary agents.

| Androgens | Cost Index |
|-----------------------------------|-------------------|
| Testosterone(Androlan [DSC]) C-IV | Moderate |

| Osteoporosis Agents | Cost Index |
|--------------------------------|-------------------|
| Alendronate (Fosamax, Binosto) | Moderate-High |
| Denosumab (Prolia) | High |
| Ibandronate (Boniva [DSC]) | Moderate |
| Raloxifene (Evista) | High |
| Risedronate (Actonel) | High |
| Zoledronic Acid (Reclast) | High |

| Adrenal Cortical Steroids | Cost Index |
|---|-------------------|
| dexAMETHasone | Low-Moderate |
| Fludrocortisone | Low |
| Hydrocortisone (Cortef) | Low-High |
| methyIPREDNISolone (Medrol, DEPO-Medrol, SOLU-Medrol) | Low-High |
| prednisoLONE | Moderate-High |
| predniSONE (Deltasone) | Low |

| Thyroid Agents | Cost Index |
|------------------------------------|-------------------|
| Levothyroxine (Synthroid, Levoxyl) | Low |
| methIMazole (Tapazole) | Low |
| Propylthiouracil | Moderate |

| Miscellaneous Endocrine Agents | Cost Index |
|---------------------------------------|-------------------|
| Allopurinol (Zyloprim) | Low |
| Desmopressin (DDAVP, Stimate) | Moderate-High |

Gastrointestinal Agents

| Antacids | Cost Index |
|--|-------------------|
| Aluminum Hydroxide | Low |
| Aluminum Hydroxide-Magnesium Trisilicate (Gaviscon) | Low |
| Aluminum Hydroxide-Magnesium Hydroxide (Maalox) | Low |
| Aluminum Hydroxide-Magnesium Hydroxide-Simethicone (Mylanta) | Low |
| Calcium Carbonate (Os-Cal, Os-Cal chewable, Tums) - 40% elemental calcium | Low |

| Antispasmodics/Anticholinergic Agents | Cost Index |
|--|-------------------|
| Dicyclomine (Bentyl) | Moderate |
| Glycopyrrolate (Robinul) | Low |

| Histamine (H2) Antagonists | Cost Index |
|-----------------------------------|-------------------|
| Famotidine (Pepcid) | Low-Moderate |

| Proton Pump Inhibitors | Cost Index |
|-------------------------------|-------------------|
| Lansoprazole (Prevacid) | High |
| Pantoprazole (Protonix) | Low-High |
| Esomeprazole (NexIUM) | Low-High |
| Omeprazole (PriLOSEC) | Low-Moderate |

| Antiflatulants | Cost Index |
|-------------------------------|-------------------|
| Simethicone (Gas-X, Phazyme) | Low |

| Stimulants | Cost Index |
|-------------------------|-------------------|
| Metoclopramide (Reglan) | Low-Moderate |

| Laxatives-Saline Osmotic | Cost Index |
|--|-------------------|
| Magnesium Citrate | Low |
| Magnesium Hydroxide (Milk of Magnesia) | Low |
| Magnesium Oxide (Mag-Ox) | Low |

| Laxatives-Irritant/Stimulant | Cost Index |
|-------------------------------------|-------------------|
| Bisacodyl (Dulcolax) | Low |
| Senna (Senokot) | Low |

| Laxatives-Bulking Agents | Cost Index |
|-------------------------------------|-------------------|
| Cellulose (Unifiber) | Low |
| Methylcellulose (Citrucel) | Low |
| Polycarbophil (Fibercon, Fiber-Lax) | Low |
| Psyllium (Konsyl, Metamucil) | Low |

All products of psyllium, psyllium husk, and psyllium seed, alone or in combination with dextrose, aspartame, sugar or sucrose are considered to be formulary agents.

| Laxatives-Osmotic | Cost Index |
|---|-------------------|
| Lactulose (Enulose) | Low |
| Polyethylene Glycol (MiraLax) | Low |
| Polyethylene Glycol Electrolyte Solution (PEG, Co-Lyte, GoLYTELY,) | Low |
| Sorbitol | Low |

| Laxatives-Combination Agents | Cost Index |
|--|-------------------|
| Docusate Sodium-Sennosides (Peri-Colace [DSC]) | Low |

| Laxatives-Surfactants | Cost Index |
|------------------------------|-------------------|
| Docusate Calcium (Surfak) | Low |
| Docusate Sodium (Colace) | Low |

| Laxatives-Calcium Channel Activators | Cost Index |
|---|-------------------|
| Linaclotide (Linzess) RESERVE USE | High |
| Lubiprostone (Amitiza) | High |

| Miscellaneous Laxatives | Cost Index |
|----------------------------------|-------------------|
| Glycerin Suppository (Sani-Supp) | Low |

| Antidiarrheals | Cost Index |
|---|-------------------|
| Bismuth Subsalicylate (Pepto-Bismol, Bismatrol, Kaopectate) | Low |
| Saccharomyces boulardii (Florastor) | Low |
| Lactobacillus Acidophilus (Lactinex, Bacid, Florajen) | Low-Moderate |
| Loperamide (Imodium) | Low |

| Rectal Agents | Cost Index |
|---|-------------------|
| Hydrocortisone Rectal Foam, suppositories, cream, ointment (Proctofoam-HC, Anusol-HC) | Low-High |
| Pramoxine-Hydrocortisone (Analpram HC) | High |
| Phenylephrine Rectal cream, ointment, suppositories (Preparation H) | Low |

| Miscellaneous Gastrointestinal Agents | Cost Index |
|---|-------------------|
| Bismuth Subsalicylate (Pepto-Bismol, Bismatrol, Kaopectate) | Low |
| Mesalamine (Asacol HD [DSC], Pentasa, Rowasa, Canasa) | Moderate-High |
| miSOPROStol (Cytotec) | Moderate |
| Pancrelipase (Pancreaze, Creon) | Moderate-High |
| Sucralfate (Carafate) | Moderate |

| Miscellaneous Gastrointestinal Agents | Cost Index |
|--|-------------------|
| sulfaSALazine (Azulfidine) | Low |

Genitourinary Agents

| Interstitial Cystitis Agents | Cost Index |
|-------------------------------------|-------------------|
| Phenazopyridine (Pyridium) | High |

| Genitourinary Irrigants | Cost Index |
|--------------------------------|-------------------|
| Sodium Chloride | Moderate-High |
| Water for Irrigation | Moderate-High |

| Medications for BPH | Cost Index |
|----------------------------|-------------------|
| Finasteride (Proscar) | Low |
| Tamsulosin (Flomax) | Low |

| Urinary Alkalinizers | Cost Index |
|-------------------------------------|-------------------|
| Potassium Citrate (Urocit K) | Moderate |
| Potassium Citrate Combinations | Low-Moderate |
| Sodium Bicarbonate | Low |
| Sodium Citrate-Citric Acid (Oracit) | Moderate |

| Urinary Anticholinergics | Cost Index |
|---------------------------------|-------------------|
| Darifenacin (Enablex [DSC]) | High |
| OxyBUTYnin (Ditropan XL) | Low |
| Solifenacin (Vesicare) | High |
| Trospium | Moderate-High |
| Tolterodine (Detrol, Detrol LA) | Moderate-High |

| Urinary Cholinergics | Cost Index |
|--------------------------------|------------|
| Bethanechol (Urecholine [DSC]) | Moderate |

| Vaginal Antifungals | Cost Index |
|------------------------------|--------------|
| Clotrimazole (Gyne-Lotrimin) | Low |
| Miconazole | Low-Moderate |
| Tioconazole | High |

| Miscellaneous Genitourinary Agents | Cost Index |
|---|------------|
| Mirabegron (Myrbetriq) RESERVE USE | High |
| Sevelamer (Renagel) | High |

Immunological Agents

All commercially available and FDA approved vaccinations recommended by the CDC/ACIP are considered to be formulary agents.

| Immune Serums | Cost Index |
|------------------------------------|------------|
| Hepatitis B Immune Globulin (HBIG) | High |

| In-Vivo Diagnostic Biologicals | Cost Index |
|--|------------|
| Tuberculin, Purified Protein Derivative (P.P.D.) | High |

Infectious Disease Agents

| Antibiotics-Penicillins | Cost Index |
|--|------------|
| Amoxicillin (Amoxil, Polymox [DSC]) | Low |
| Amoxicillin-Clavulanate (Augmentin) | Low-High |
| Ampicillin (Polycillin [DSC], Omnipen [DSC]) | Low-High |
| Nafcillin | High |

| Antibiotics-Penicillins | Cost Index |
|--|-------------------|
| Penicillin G Benzathine (Bicillin LA) | High |
| Penicillin V Potassium (Pen-Vee K [DSC], V-Cillin K) | Low |
| Piperacillin-Tazobactam (Zosyn) | High |

| Antibiotics-Cephalosporins | Cost Index |
|---|-------------------|
| Cefadroxil (Duricef [DSC]) | Moderate-High |
| ceFAZolin (Kefzol [DSC]) | Moderate |
| cefdinir (Omnicef [DSC]) | Moderate-High |
| Cefepime (Maxipime [DSC]) | High |
| cefTRIAxone (Rocephin [DSC]) | Moderate-High |
| Cefuroxime Axetil (Ceftin [DSC]) - Oral form only | High |
| Cephalexin (Keflex [DSC]) | Low-Moderate |

| Antibiotics-Macrolides | Cost Index |
|--|-------------------|
| Azithromycin (Zithromax) | Low-Moderate |
| Clarithromycin (Biaxin) | Moderate-High |
| Erythromycin base (Eryc, Erythrocin), Erythromycin Ethylsuccinate (EryPed, E.E.S.) | High |

| Antibiotics-Tetracyclines | Cost Index |
|----------------------------------|-------------------|
| Doxycycline (Vibramycin) | Low-Moderate |
| Minocycline | Moderate |
| Tetracycline | High |

| Antibiotics-Quinolones | Cost Index |
|-------------------------------|-------------------|
| Ciprofloxacin (Cipro) | Low-Moderate |

| Antibiotics-Quinolones | Cost Index |
|-------------------------------|-------------------|
| levoFLOXacin (Levaquin [DSC]) | Moderate-High |
| Moxifloxacin (Avelox) | High |

| Antibiotics-Aminoglycosides | Cost Index |
|------------------------------------|-------------------|
| Amikacin | High |
| Gentamicin | Moderate |
| Neomycin | Moderate |
| Tobramycin | Moderate |

| Miscellaneous Antibiotics | Cost Index |
|--|-------------------|
| Clindamycin (Cleocin) | Low-Moderate |
| Fosfomycin (Monurol) | High |
| Linezolid (Zyvox) RESERVE USE | High |
| Meropenem (Merrem) RESERVE USE | Moderate-High |
| metroNIDAZOLE (Flagyl) | Low-High |
| Sulfamethoxazole -Trimethoprim (Bactrim) <i>The 5:1 ratio of Sulfamethoxazole to Trimethoprim is constant in all dosage forms</i> | Low-High |
| Vancomycin (Vancocin) | High |

| Antifungals | Cost Index |
|--|-------------------|
| Fluconazole (Diflucan) | Low-Moderate |
| Griseofulvin (Fulvicin, Grifulvin V [DSC], Gris-Peg) | Moderate-High |
| Ketoconazole (Nizoral) | Low-Moderate |
| Nystatin (Mycostatin [DSC]) | Low-High |
| Terbinafine (LamISIL) | Low-High |

| Antituberculars | Cost Index |
|------------------------|-------------------|
| Ethambutol (Myambutol) | Low |
| Ethionamide (Trecator) | High |
| Isoniazid (INH [DSC]) | Low |
| Pyrazinamide | High |
| Rifabutin (Mycobutin) | High |
| rifAMPin (Rifadin) | Moderate-High |

| Antivirals | Cost Index |
|-----------------------------------|-------------------|
| Acyclovir (Zovirax) | Moderate-High |
| Nirmatrelvir-ritonavir (Paxlovid) | High |
| Oseltamivir (Tamiflu) | Moderate-High |
| valACYclovir (Valtrex) | Moderate-High |
| Zanamivir (Relenza) | Moderate |

All commercially available antiviral agents used in the treatment of AIDS/HIV are considered to be formulary agents.

| Antihelmintics | Cost Index |
|-------------------------|-------------------|
| Ivermectin (Stromectol) | Moderate |

| Urinary Anti-Infectives | Cost Index |
|---|-------------------|
| Nitrofurantoin (Macrochantin, Macrobid) | Moderate-High |

| Miscellaneous Anti-Infectives | Cost Index |
|---|-------------------|
| Dapsone | Moderate |
| Pentamidine (Pentam) - RESERVE USE | High |

Parenteral Solutions and Additives

| Parenteral Solutions | Cost Index |
|---|------------|
| Amino Acid Injection (Aminosyn) | High |
| Amino Acid Injection-Dextrose-Electrolytes (Clinimix E) | High |
| Dextrose 5%-Sodium Chloride Intravenous Solution | Moderate |
| Dextrose 5% in Water | Moderate |
| Dextrose 5% in Ringer's Lactate | Moderate |
| Dextrose 5%-Sodium Chloride-Potassium Chloride Intravenous Solution | Moderate |
| Dextrose 50% in Water | High |
| Sodium Chloride Intravenous Solution | Moderate |
| Sodium Chloride | Moderate |
| Water for Injection | Moderate |

| Electrolyte Replacement Additives | Cost Index |
|-----------------------------------|------------|
| Magnesium Sulfate | Moderate |
| Sodium Chloride | Low |

Respiratory Agents

| Beta ₂ Agonist-Short acting (SABA) | Cost Index |
|--|--------------|
| Albuterol (ProAir, ProAir Respiclick, Proventil, Ventolin) | Low-High |
| Levalbuterol (Xopenex) | Low-Moderate |

| Beta ₂ Agonist-Long Acting (LABA) | Cost Index |
|--|------------|
| Salmeterol (Serevent) | High |

| Anticholinergics-Short Acting (SAMA) | Cost Index |
|--------------------------------------|--------------|
| Ipratropium (Atrovent) | Low-Moderate |

| Anticholinergics-Long Acting (LAMA) | Cost Index |
|--|-------------------|
| Tiotropium (Spiriva, Spiriva Respimat) | High |

| Combination Short-Acting Beta₂ Agonists Plus Anticholinergics (SABA/SAMA) | Cost Index |
|---|-------------------|
| Albuterol-Ipratropium (Combivent [DSC], Combivent Respimat) | Low-High |

| Combination Long Acting Beta-2 Agonists Plus Corticosteroids (LABA/ICS) | Cost Index |
|--|-------------------|
| Budesonide-Formoterol (Symbicort) | Moderate |
| Fluticasone-Salmeterol (Advair) | Moderate-High |

| Inhaled Corticosteroids (ICS) | Cost Index |
|--------------------------------------|-------------------|
| Beclomethasone (QVAR Redihaler) | Moderate |
| Budesonide (Pulmicort) | Moderate-High |
| Fluticasone (Flovent) | Low-Moderate |

| Miscellaneous Respiratory Drugs | Cost Index |
|--|-------------------|
| Acetylcysteine | High |
| Montelukast (Singulair) | Low-Moderate |
| Sodium Chloride | Low |

| Antihistamine, Cough and Decongestant Preparations | Cost Index |
|--|-------------------|
| Benzonatate Antitussive | Low |
| Brompheniramine-Phenylephrine (Dimetapp Children's Cold and Allergy) | Low |
| Brompheniramine-Pseudoephedrine (Rynex PSE) | Low |
| Cetirizine (Zyrtec) | Low |
| Cetirizine-Pseudoephedrine (Zyrtec D) | Low |

| Antihistamine, Cough and Decongestant Preparations | Cost Index |
|---|-------------------|
| Chlorpheniramine | Low |
| Cyproheptadine (Periactin) | Low-Moderate |
| *Dextromethorphan Antitussive | Low |
| diphenhydrAMINE (Benadryl) | Low |
| Fexofenadine (Allegra) | Low |
| Fexofenadine - Pseudoephedrine (Allegra-D) | Moderate |
| guaifENesin-Codeine C-V | Low |
| *guaifENesin-Dextromethorphan | Low |
| guaifENesin-Pseudoephedrine (Mucinex D) | Moderate |
| hydroXYzine (Atarax [DSC], Vistaril) | Moderate-High |
| Loratadine (Claritin) | Low |
| Loratadine-Pseudoephedrine (Claritin D) | Moderate |
| Pseudoephedrine (Sudafed) Decongestant | Low |
| Tripolidine-Pseudoephedrine (Aprodine) | Low |

*Any combination of products containing dextromethorphan for cough suppression or guaifenesin are considered to be formulary agents if individual ingredients are on formulary and the dosage form is on formulary.

| Expectorants | Cost Index |
|------------------------------------|-------------------|
| *guaifENesin (Robitussin, Mucinex) | Low |
| Potassium Iodide (SSKI) | Moderate |

*Any combination of products containing dextromethorphan for cough suppression or guaifenesin are considered to be formulary agents if individual ingredients are on formulary and the dosage form is on formulary.

Topical Agents

| Ophthalmics-Agents for Glaucoma | Cost Index |
|--|-------------------|
| Betaxolol (Betoptic S) | High |

| Ophthalmics-Agents for Glaucoma | Cost Index |
|--|-------------------|
| Bimatoprost (Lumigan) | High |
| Brimonidine (Alphagan P) | High |
| Latanoprost (Xalatan) | Low |
| Pilocarpine (Isopto Carpine) | High |
| Timolol (Timoptic, Timoptic XE) | Low-High |
| Timolol-Dorzolamide (Cosopt) | Moderate |
| Travoprost (Travatan Z) | High |

| Ophthalmics-Antibiotics | Cost Index |
|--|-------------------|
| Bacitracin | High |
| Ciprofloxacin (Ciloxan) | Moderate-High |
| Erythromycin | High |
| Gentamicin | Moderate |
| Moxifloxacin (Moxeza [DSC], Vigamox) Reserve Use | High |
| Ofloxacin (Ocuflox) | Moderate |
| Polymyxin B-Bacitracin (Polysporin) | Low |
| Polymyxin B-Trimethoprim (Polytrim [DSC]) | Low |
| Sulfacetamide Sodium (Bleph-10) | Moderate |
| Tobramycin (Tobrex) | Low-High |

| Ophthalmics-Mydriatics | Cost Index |
|------------------------------------|-------------------|
| Atropine Sulfate (Isopto Atropine) | Moderate |
| Homatropine (Homatropaire) | Moderate |
| Phenylephrine (Neo-Synephrine) | Moderate-High |
| Tropicamide (Mydracyl) | Low |

| Ophthalmics-Decongestant/Antiallergy | Cost Index |
|---|------------|
| Ketotifen (Zaditor) | Moderate |
| Naphazoline | Low |
| Olopatadine (Pataday, Patanol [DSC]) | Moderate |
| Tetrahydrozoline (Visine Allergy Relief, Visine Moisturizing) | Low |
| Tetrahydrozoline-Zinc Sulfate (Visine A.C.) | Low |

| Miscellaneous Ophthalmics | Cost Index |
|---|--------------|
| Balanced Salt Solution Ophthalmic Irrigating Solution (BSS, Eye Stream) | Low |
| Carboxymethylcellulose | Low |
| Cromolyn (Intal [DSC]) | Low |
| dexAMETHasone - RESERVE USE | High |
| Fluorescein Sodium (Bio Glo, FUL-GLO) | Low |
| Fluorescein-benoxinate (Altafluor Benox) | Moderate |
| Mineral Oil-Petrolatum (Refresh Lacrilube) | Low |
| Polyvinyl Alcohol (Artificial Tears) | Low |
| prednisoLONE (Pred Mild, Pred Forte) RESERVE USE | High |
| Proparacaine (Alcaine) | Moderate |
| Sodium Chloride | Low-Moderate |
| Tobramycin-dexAMETHasone (TobraDex)- RESERVE USE | High |

| Otics | Cost Index |
|--|------------|
| Acetic Acid (VoSol) | Moderate |
| Acetic Acid-Hydrocortisone (VoSol HC) | High |
| Carbamide Peroxide (Debrox) | Low |
| Ciprofloxacin-dexAMETHasone (Ciprodex) | High |

| Otics | Cost Index |
|---|---------------|
| Ciprofloxacin-Hydrocortisone (Cipro HC Otic) | High |
| Hydrogen Peroxide | Low |
| Mineral Oil | Low |
| Neomycin-Polymyxin B-Hydrocortisone (Cortisporin) | Moderate-High |
| Ofloxacin (Floxin [DSC]) | High |

| Mouth and Throat Agents | Cost Index |
|--|------------|
| Benzocaine | Low |
| Benzocaine-Menthol (Orajel, Cepacol) | Low |
| Carbamide Peroxide (Gly-Oxide) | Low |
| Chlorhexidine (Peridex) | Low |
| Clotrimazole | Low |
| Doxycycline | Moderate |
| Fluoride (PerioMed) | Low |
| Lidocaine | Low |
| Nystatin | Low |
| Phenol (Chloraseptic) | Low |
| Saliva Substitute(Biotene) | Low |
| Triamcinolone | High |
| Xylitol(Act Dry Mouth, Biotene, Xylimelts) | Low |

| Nasal Agents | Cost Index |
|--------------------------------|------------|
| Azelastine | Low |
| Beclomethasone (Beconase[DSC]) | Moderate |
| Fluticasone (Flonase) | Low |

| Nasal Agents | Cost Index |
|--------------------------------|-------------------|
| Mometasone (Nasonex) | Low |
| Oxymetazoline (Afrin) | Low |
| Phenylephrine (Neo-Synephrine) | Low |
| Sodium Chloride | Low |
| Triamcinolone (Nasacort) | Low |

| Dermatologicals-Acne Agents | Cost Index |
|--|-------------------|
| Adapalene (Differin) | Low-High |
| Benzoyl Peroxide | Low |
| Benzoyl Peroxide-Clindamycin (BenzaClin [DSC]) | Moderate |
| Clindamycin (Cleocin T) | Low-Moderate |
| Erythromycin-Benzoyl Peroxide (Benzamycin) | High |
| Salicylic Acid-Sulfur | Low |
| Sulfacetamide Sodium | Moderate |
| Tazarotene (Tazorac, Avage) | High |
| Tretinoin (Retin-A) | Moderate-High |

| Dermatologicals-Analgesics | Cost Index |
|-----------------------------------|-------------------|
| Diclofenac Gel (Voltaren Gel) | Low |

| Dermatologicals-Anesthetics, local | Cost Index |
|---|-------------------|
| Benzocaine | Low |
| Ethyl Chloride | Low |
| Lidocaine (Lidoderm, Xylocaine) | Low-Moderate |
| Lidocaine-Prilocaine (EMLA) | Low |
| Pramoxine | Low-High |

| Dermatologicals-Anti-Infectives-Antibiotics | Cost Index |
|--|-------------------|
| Bacitracin | Low |
| Bacitracin-Polymyxin B (Polysporin) | Low |
| Clindamycin (Cleocin T) | Low-Moderate |
| Gentamicin | Moderate |
| metroNIDAZOLE (Noritate, MetroGel) | Low-Moderate |
| Mupirocin (Bactroban [DSC]) | Low-High |
| Neomycin-Polymyxin B-Bacitracin (Triple Antibiotic Ointment) | Low |

| Dermatologicals-Anti-Infectives-Antifungals | Cost Index |
|---|-------------------|
| Ciclopirox (Loprox, Penlac[DSC]) | Low-Moderate |
| Clotrimazole (Lotrimin | Low-Moderate |
| Clotrimazole-Betamethasone dipropionate (Lotrisone [DSC]) | Moderate |
| Ketoconazole (Nizoral) | Low |
| Miconazole | Low |
| Nystatin (Mycostatin [DSC]) | Low-Moderate |
| Terbinafine (Lamisil) | Low |
| Tolnaftate (Tinactin) | Low |

| Dermatologicals-Anti-Infectives-Antiviral | Cost Index |
|--|-------------------|
| Acyclovir (Zovirax) | Low-High |

| Dermatologicals-Anti-Itch/Anti-Irritation Agents | Cost Index |
|---|-------------------|
| Calamine-Zinc Oxide-Glycerin (Calamine Lotion) | Low |
| Calamine-Pramoxine (Caladryl) | Low |
| diphenhydramine (Benadryl) | Low |

| Dermatologicals-Anti-Itch/Anti-Irritation Agents | Cost Index |
|---|-------------------|
| Pramoxine-Zinc (Caladryl Clear) | Low |

| Dermatologicals-Antipsoriatics | Cost Index |
|---------------------------------------|-------------------|
| Calcipotriene (Dovonex) | High |
| Coal Tar | Low |
| Selenium Sulfide | Low |
| Tazarotene (Tazorac, Avage) | High |

| Dermatologicals-Antiseborrheic Agents | Cost Index |
|--|-------------------|
| Coal Tar | Low |
| Salicylic Acid-Sulfur | Low |
| Selenium Sulfide | Low |
| Sulfacetamide Sodium | Moderate |

| Dermatologicals-Antiseptics & Germicides | Cost Index |
|---|-------------------|
| Chlorhexidine | Low |
| Povidone-Iodine (Betadine) | Low |

| Dermatologicals-Burn Agents | Cost Index |
|------------------------------------|-------------------|
| Silver SulfADIAZINE (Silvadene) | Low |

| Dermatologicals-Corticosteroids-Ultra High Potency | Cost Index |
|--|-------------------|
| Betamethasone dipropionate, augmented (Diprolene A/F) - RESERVE USE | Low |
| Clobetasol (Clobex, Cormax,Temovate [DSC]) - RESERVE USE | Low-Moderate |

| Dermatologicals-Corticosteroids- High Potency | Cost Index |
|--|-------------------|
| Betamethasone dipropionate (Diprolene) | Low |
| Fluocinonide | Low |

| Dermatologicals-Corticosteroids- Medium Potency | Cost Index |
|--|-------------------|
| Betamethasone Valerate (Valisone) | Low-Moderate |
| Fluocinolone (Capex, Derma-Smooth/FS, Synalar) | Low-High |
| Triamcinolone | Low-Moderate |

| Dermatologicals-Corticosteroids- Low Potency | Cost Index |
|---|-------------------|
| Desonide (Desowen, Tridesilon) | Low-High |
| Hydrocortisone (Lanacort, Corticaine) | Low |

| Dermatologicals-Diaper Rash Agents | Cost Index |
|---|-------------------|
| Diaper Rash Ointment | Low |
| Diaper Rash Powder (Mexsana) | Low |
| Zinc Oxide | Low |
| Zinc Oxide-Petrolatum-Imidazolidinyl Urea (Diaperene) | Low |

| Dermatologicals-Emollients | Cost Index |
|---|-------------------|
| Emollient Gel | Low |
| Emollient Lotion-Cream (Lubriderm, Keri Lotion, Cetaphil, Eucerin, Nutraderm) | Low |
| Emollient Ointment (Lanolin, Aquaphor) | Low |

| Dermatologicals-Keratolytics | Cost Index |
|-------------------------------------|-------------------|
| Podophyllum Resin (Podocon-25) | High |

| Dermatologicals-Keratolytics | Cost Index |
|--|-------------------|
| Salicylic Acid All available salicylic acid products as a single agent are considered to be formulary agents. | Low-High |
| Urea | Low |

| Dermatologicals-Ointments | Cost Index |
|--|-------------------|
| Petrolatum, White (Vaseline) | Low |
| Oxybenzone-PDO-Pet Hy-Phl (Vaseline Lip Therapy) | Low |

| Dermatologicals-Rubs and Liniments | Cost Index |
|---|-------------------|
| Menthol | Low |
| Menthol-Methyl Salicylate (Ben-Gay) | Low |

| Dermatologicals-Skin Cleansers | Cost Index |
|--|-------------------|
| Abrasive Cleanser (Brasivol, Pernox, Salac, Seba-Nil) | Low |
| Non-Soap Cleanser (Cetaphil) | Low |
| Salicylic Acid-Sulfur All commercially available salicylic acid sulfur forms are considered to be formulary agents. | Low |

| Dermatologicals-Scabicides & Pediculicides | Cost Index |
|---|-------------------|
| Permethrin 1% Liquid (NIX) | Low |
| Permethrin 5% Cream (Elimite) | Low |
| Pyrethins 0.33%-Piperonyl Butoxide 4% (Pronto, RID) | Low |

| Dermatologicals-Skin Protectants | Cost Index |
|---|-------------------|
| Benzoin, Compound Tincture | Low |
| Menthol-Zinc Oxide (Calmoseptine, Risamine) | Low |

| Dermatologicals-Skin Protectants | Cost Index |
|---|-------------------|
| Silver SulfADIAZINE (Silvadene) | Low |
| Zinc Oxide | Low |

| Dermatologicals-Sunscreens | Cost Index |
|--|-------------------|
| Sunscreen-Block- Contains minimum SPF 15 | Low |

| Dermatologicals-Tar-Containing Agents | Cost Index |
|--|-------------------|
| Coal Tar | Low |

| Dermatologicals-Wound Agents | Cost Index |
|---|-------------------|
| Collagenase (Santyl) | High |
| Trypsin-Balsam Peru-Castor Oil (Granulex, Revina) | Low |
| Wound Cleanser (Carrington Clara-Klenz) | Low |

| Miscellaneous Dermatologicals | Cost Index |
|---|-------------------|
| Aluminum Chloride Hexahydrate (Drysol) | Low |
| Camphor-Phenol (Campho-Phenique) | Low |
| Hydrogen Peroxide | Low |
| Pimecrolimus (Elidel) | High |
| Silver Nitrate | Low |
| Tacrolimus (Protopic) | Moderate |
| Trypsin-Balsam Peru-Castor Oil (Granulex) | Low |

| Irrigation Solutions | Cost Index |
|---|-------------------|
| Sodium Chloride Solution, irrigation: 0.45%, 0.9% | Moderate-High |
| Water for Irrigation | Low |

Nutritional Agents

| Vitamins | Cost Index |
|--|--------------|
| Ascorbic Acid (Vitamin C) | Low |
| Cyanocobalamin (Vitamin B12) | Low-High |
| Folic Acid (Vitamin B9, Folate, Folvite [DSC]) | Low |
| Pyridoxine (Vitamin B6) | Low-High |
| Thiamine (Vitamin B1) | Low-High |
| Vitamin A (Aquasol A) | Low |
| Vitamin D2 (Ergocalciferol, Calciferol [DSC], Drisdol) | Low-Moderate |
| Vitamin D3 (Cholecalciferol) | Low |
| 1,25-dihydroxyvitamin D3 (Calcitriol, Rocaltrol) | Low-High |
| Vitamin E (Aquasol E) | Low |

| Minerals, Trace Elements, and Electrolytes | Cost Index |
|---|--------------|
| Calcium Carbonate (Os-Cal, Os-Cal chewable, Tums) - 40% elemental calcium | Low |
| Calcium Citrate (Citracal) 20% elemental calcium | Low |
| Ferrous Sulfate (Feosol, Fer-In-Sol) -20% elemental iron | Low |
| Magnesium L-lactate dihydrate (Mag-Tab SR) | Low |
| Potassium Chloride | Low-Moderate |
| Sodium Chloride | Low |
| Zinc Sulfate | Low |

| Combination Products | Cost Index |
|--|------------|
| Calcium Carbonate-Vitamin D3 (Os-Cal + D) 40% elemental calcium | Low |
| Calcium Citrate-Vitamin D3 (Citracal-D) 20% elemental calcium | Low |
| Iron salts with or without vitamins and/or other minerals (Hemocyte Plus, Niferex-150 Forte) | Low |

| Combination Products | Cost Index |
|--|-------------------|
| Multivitamin (Unicap, Hexavitamins) | Low |
| Multivitamin-Minerals | Low |
| Multivitamins, Pediatric (Poly-Vi-Sol) | Low |
| Multivitamins, Prenatal | Low |
| Vitamin B Complex with or without other vitamins and/or minerals | Low |

| Miscellaneous nutritional agents | Cost Index |
|---|-------------------|
| Acetylcysteine | Low |
| Fish Oil | Low |
| Glucosamine | Low |
| levOCARNitine (Carnitor) | Low |
| Melatonin | Low |

| Certification Process |
|---|
| <p>Current Good Manufacturing Practices (CGMP): FDA ensures the quality of drug products by carefully monitoring drug manufacturer's compliance with its CGMP regulations. The CGMP regulations for drugs contain minimum requirements for the methods, facilities, and controls used in manufacturing, processing, and packing of a drug product. The regulations make sure that a product is safe for use, and that it has the ingredients and strength it claims to have. The approval process for new and generic drug marketing applications includes a review of the manufacturer's compliance with the CGMPs. FDA assessors and investigators determine whether the firm has the necessary facilities, equipment, and ability to manufacture the drug it intends to market.</p> <p>https://www.fda.gov/drugs/pharmaceutical-quality-resources/current-good-manufacturing-practice-cgmp-regulations</p> |

Certification Process

Consumer Lab (CL): CL is a third-party group certifying the quality of dietary supplements. CL freely publishes its testing methods and quality criteria/standards.

Products are tested, whenever possible, for each of the following:

- Identity: Does the product meet recognized standards of identity and does the product meet the level of quality claimed on the label?
- Strength (quantity): Does the product contain the amount of ingredient claimed on the label?
- Purity: Is the product free of specified contaminants?
- Disintegration: Does the product break apart properly so that it may be used by the body?

These quality criteria must be met to be considered approved by CL. If a manufacturer seeks to use the CL Seal of Approval on the product, the product must be tested for these criteria every twelve months based on a random sample purchased on the open market.

<https://www.consumerlab.com/about/>

United States Pharmacopoeia (USP): USP is a nonprofit scientific organization founded in 1820 in Washington, D.C., that develops and disseminates public compendial quality standards for medicines and other articles. USP's mission is "to improve global health through public standards and related programs that help ensure the quality, safety, and benefit of medicines and foods." USP's primary compendia of standards are the United States Pharmacopeia and the National Formulary (USP-NF). USP standards may be adapted or adopted by any organization or government worldwide. USP has no role in enforcement; that is left to FDA and other government authorities in the U.S. and elsewhere.

Brands that display the USP Verified Mark signal to the public that what's on their label is what's in the bottle, allowing their vetted product to stand apart from a majority of the competition.

<https://www.usp.org/frequently-asked-questions/usp-and-its-standards>

National Sanitation Foundation (NSF): NSF International has been dedicated to protecting and improving global human health since 1944. Manufacturers, regulators and consumers look to NSF to facilitate the development of public health standards and provide certifications that help protect food, water, consumer products and the environment. As a global, independent organization, NSF standards team facilitates development of public health standards. NSF service teams test, audit and certify products and services. The NSF mark assures consumers, retailers and regulators that certified products have been rigorously tested to comply with all standard requirements.

<https://www.nsf.org/about-nsf>

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Appendix A. New Drug Application Form

Texas HHSC Psychiatric Executive Formulary Committee

NEW DRUG APPLICATION FORM

[Online Fillable Form](#)

For consideration of inclusion into the HHSC Psychiatric Drug Formulary

Date: _____

Name of practitioner submitting the application: _____

Name of entity with which the practitioner is associated by employment or contract (i.e., state hospital, state supported living center, state center, or local authority (state-operated community services (SOCS) or community MHMR center)): _____

Information regarding new drug:

| | |
|-----------------------------------|--|
| Therapeutic Classification | |
| Generic Name | |
| Trade Name(s) | |
| Manufacturer(s) | |
| Dosage Form(s) | |
| Average Wholesale Price | |

Evidence to substantiate the efficacy and safety of the proposed new drug: _____

Explain the advantages of this drug over those listed in the formulary: _____

State which drugs this new drug would replace or supplement: _____

Include cost effectiveness data: _____

☐ application is approved

signature of chairman of facility pharmacy and therapeutics committee

OR

☐ application is appropriate and complete

signature of clinical/medical director or designee OR PEFC member submitting application

Section 306.357 of HHSC rules governing the use and maintenance of the *HHSC Psychiatric Drug Formulary* (26 TAC, Part 1, Chapter 306, Subchapter G) describes the procedures for applying to have a drug added to the formulary, which are:

(1) Any member of the PEFC, any service system component* practitioner, or any contract practitioner may apply to have a drug added to the HHSC Psychiatric Drug Formulary by completing the New Drug Application form found in the HHSC Psychiatric Drug Formulary on the HHSC Psychiatric Formulary website.

(2) Include the following with the New Drug Application form:

(A) published articles in biomedical literature that substantiate the efficacy and safety of the proposed drug;

(B) information on the advantages of the proposed drug compared with similar formulary drugs;

(C) a list of formulary drugs that the proposed drug would replace or supplement; and

(D) cost effectiveness data.

(b) Submitting the application.

(1) An HHSC facility** practitioner or HHSC facility contract practitioner shall submit the application to the facility's pharmacy and therapeutics committee for approval. If the committee approves the application, the committee forwards the application to the PEFC.

(2) A non-facility service system component practitioner or non-facility service system component contract practitioner shall submit the application to the component's clinical/medical director or designee who determines if the application is appropriate and complete, and if so, shall forward the application to the PEFC.

(3) A member of the PEFC shall submit the application directly to the PEFC.

(c) Considering the application. The PEFC considers the drug application and shall:

(1) approve the proposed drug's inclusion and, if appropriate, approve audit criteria and recommend dosage guidelines;

(2) approve the proposed drug on a trial basis for a specified period of time;

(3) approve the proposed drug as a reserve drug, with guidelines;

(4) postpone the decision until a later meeting; or

(5) deny the proposed drug's inclusion.

* The term "service system component" refers to HHSC, an HHSC facility, and a local authority.

** The term "facility" refers to a facility operated by HHSC, including state hospitals and state supported living centers.

Appendix B. PEFC Conflict of Interest Policy

Policy

The HHSC Psychiatric Executive Formulary Committee (PEFC) must ensure balance, independence, objectivity and scientific rigor in determining which drugs should be on the formulary and their use in special populations. It is the policy of the PEFC to prohibit any apparent or actual conflict of interest. As such, each member of the PEFC, individuals preparing drug monographs, each requesting practitioner, and those appointed to work groups that report to the PEFC shall abide by this policy and submit a Conflict of Interest Disclosure Statement. The intent of this disclosure is not to prevent those with a significant financial interest or other relationship from participating in the formulary process, but rather to provide information to committee members and to the public so that conflicts can be resolved prior to the decision making process. It remains for the members of the committee to determine whether the individual's interests or relationships may influence them with regard to exposition or conclusions. A conflict of interest for these purposes includes any situation in which a Committee member, individual preparing a drug monograph, individual submitting a request to the PEFC, work group member or a first degree relative of said person has a private or personal interest sufficient to appear to influence the objective exercise of his/her duties for the agency. An apparent conflict of interest is one in which a reasonable person would think that the person's judgment is potentially compromised.

All committee members, individuals submitting drug monographs, individuals requesting drugs for addition to the formulary, and work group members are expected to disclose any financial interest or other relationship with (a) the manufacturer(s) of any commercial product and/or provider of commercial services for drugs on the formulary or being considered for the formulary (b) any commercial support for these drugs. Significant financial interest or other relationship can include such things as grants or research support, employee, consultant, major stockholder, member of speaker's bureau, etc. The disclosure shall include any conflict of interest of a first degree relative.

PEFC members shall also abide by the HHS Ethics Policy.

Definitions

"Companies" – includes pharmaceutical and biotechnology companies.

"Compensation" - includes direct and indirect remuneration or royalties, and may also include, among other things, items and services at reduced prices, or with discounts or rebates.

"Controlling Interest" - a direct or indirect ownership or beneficial interest, individually or in conjunction with members of your family, which permits election or selection of a majority of the governing body of a company and/or which permits the exercise of control over the affairs of such company.

"Financial Interest" – a direct or indirect, through business, investment or family:

(a) Ownership Interest or investment interest in a company;

(b) Compensation arrangement with a company or any of its affiliates; or

- (c) Ownership Interest or investment interest in, or compensation arrangement with, any company or individual with which that company or any of its affiliates is negotiating a transaction or arrangement.

“First Degree Relative” – spouse, parent, siblings, children

“Gifts” or “Gratuities” - includes, among other things, meals, entertainment or recreational items, subsidies given *directly* to a healthcare professional for continuing medical education (CME), educational (i.e., anatomical models) and non-educational and practice-related items (i.e., items that do not advance disease or treatment education).

“Ownership Interest” - owning or controlling directly, indirectly, or beneficially through such person’s family, in excess of five percent (5%) of the total value of all securities of a Company.

Procedure

1. Committee members shall submit Disclosure Statements at least annually and as needed as their situation changes. See Appendix C for the “HHSC Psychiatric Executive Formulary Committee Disclosure Form.”
2. Individuals submitting requests for addition to the formulary or completing drug monographs shall submit the “HHSC Psychiatric Executive Formulary Committee Disclosure Form” along with the New Drug Application or drug monograph, respectively.
3. Members of work groups appointed by the PEFC shall submit Disclosure Statements no later than the first meeting and then annually if the work group exists for more than a year. The work group shall forward each work group members’ conflict of interest to the PEFC for their review.
4. A review of committee members’ conflict of interest shall be completed for all individuals present at each meeting. This information shall be documented in the minutes of each meeting.
5. Each facility Pharmacy and Therapeutics Committee or similarly functioning committee is encouraged to adopt a similar policy.
6. New Drug Applications submitted without the HHSC Psychiatric Executive Formulary Committee Disclosure Form will be considered incomplete and returned to the requestor.
7. Failure to disclose will result in written notification and may be reported to the individual’s facility. The determination of the action shall be based on the nature on the non-disclosure.

Determining Conflict of Interest: Committee members present at the meeting shall determine if a conflict of interest exists and if it exists, the degree of conflict. The degree of conflict shall be determined based on the involvement of the individual with the manufacturer(s) as well as the role the individual plays within the Committee membership or meeting. For example, conflicts by an individual preparing a monograph for presentation at a meeting maybe viewed differently than a Committee member voting on a formulary addition.

Determination of conflict of interest is not limited to the manufacturer of the drug in the New Drug Application but shall include all relationships with manufacturers. For example, individuals shall be identified with a conflict of interest for any activities related to the products of any manufacturer that paid them, and any competing products.

Action Taken for Conflict of Interest: Action taken to minimize bias from the individual identified as having a conflict of interest shall be based on the individual's role and relationship to the committee and the degree of conflict. Actions taken may include but are not limited to:

Committee Member identified with a significant conflict of interest

- Removal from the room during the discussion and voting on a formulary addition
- Removal from the Committee
- Having no communication with other committee members regarding the specific New Drug Application prior to any deliberations and voting.

Individual completing a monograph that is identified with a significant conflict of interest

- Identifying the specific conflict in relationship regarding the monograph verbally prior to and after the presentation of the monograph at the meeting
- Identifying the specific conflict in relationship regarding the monograph in writing at the end of monograph
- Not allowing the individual to develop a monograph

Individual submitting a New Drug Application that is identified with a significant conflict of interest

- Declining to review the New Drug Application request

Identification of conflict of interest and action taken regarding conflict of interest shall be documented in the minutes.

This policy applies to members of work groups as appointed by PEFC. Work groups will follow the same procedure and consequences for reporting, determining and action taken for conflict of interest.

Appendix C. PEFC Disclosure Form

HHSC Psychiatric Executive Formulary Committee (PEFC) Disclosure Form

Name: _____

Date: _____

Facility: _____

| | | |
|---|--------|-------|
| Member of Executive Formulary Committee? | Yes___ | No___ |
| Member of EFC-appointed work group? | Yes___ | No___ |
| Submitting a New Drug Application (NDA)? | Yes___ | No___ |
| Did anyone from industry ask you to submit the NDA? | Yes___ | No___ |
| Preparing the Drug Monograph? | Yes___ | No___ |

I have read the HHSC Psychiatric Executive Formulary Committee policy on conflicts of interest. In agreement with this policy, I hereby disclose the following for the past 12 months regarding my relationship or relationship of my first degree relatives:

_____ I have no conflicts of interest to disclose

Or

_____The following is a list of my potential conflicts of interest:

| Person | Company | Consultant | Grant Research | Speaker's Bureau/ Advisory Board | Major Stockholder | Other (e.g. meals, gifts, travel, etc.) |
|--------|---------|------------|----------------|-------------------------------------|-------------------|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Attach an additional sheet describing your potential conflict of interest.

I have made all of the required disclosures. I understand that it is my continuing obligation to provide disclosure of potential conflicts of interest. If I become aware of any specific conflicts, or if there is a change in my professional activities, financial interests, or employment, I will submit an additional disclosure form in accordance with HHSC Psychiatric Executive Formulary Committee policies.

Signature_____

Date_____

Date Reviewed by HHSC Psychiatric Executive Formulary Committee _____

Appendix D. Non-Formulary Drug Justification Form

Facility: _____

Drug name: _____
(generic) (Trade) (strength) (AHFS Therapeutic Class)

The purpose of the *Formulary* is to ensure that the treatments available to the Texas HHSC consumers are consistent with need, effectiveness, risk, and cost.

This request is for:

- ☐ An individual patient treatment course: _____
Is this ☐ chronic or ☐ acute therapy?
- ☐ More than one patient/course of therapy. It is estimated that _____ patients will be treated with this drug. Is this ☐ chronic or ☐ acute therapy?

Reason for request:

- ☐ An illness for which no *Formulary* drug is as safe or effective. Provide reasoning: _____

- ☐ To prevent interruption of course of therapy established prior to admission.

- ☐ Emergency

| Quantity Ordered | Cost/unit | Total Purchase Cost | Estimate Course Chronic Cost per Month | Estimate Course Acute Cost |
|------------------|-----------|---------------------|--|----------------------------|
| | | | | |

Prescriber (signature)

Date

Was the drug ordered ☐ yes or ☐ no?

☐ AGREE

☐ DISAGREE

Pharmacy Director or designee (signature)

Date

☐ APPROVED

☐ DISAPPROVED

☐ EMERGENCY

Facility clinical/medical
director's approval obtained
within three working days

Facility clinical/medical director or designee (signature)

Date