# WHO Model List of Essential Medicines

# 20th List

(March 2017)

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http://www.who.int/medicines/publications/essentialmedicines/en/



# 20th edition

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# **Explanatory notes**

The **core list** presents a list of minimum medicine needs for a basic health-care system, listing the most efficacious, safe and cost–effective medicines for priority conditions. Priority conditions are selected on the basis of current and estimated future public health relevance, and potential for safe and cost-effective treatment.

The **complementary list** presents essential medicines for priority diseases, for which specialized diagnostic or monitoring facilities, and/or specialist medical care, and/or specialist training are needed. In case of doubt medicines may also be listed as complementary on the basis of consistent higher costs or less attractive cost-effectiveness in a variety of settings.

The **square box symbol** ( $\square$ ) is primarily intended to indicate similar clinical performance within a pharmacological class. The listed medicine should be the example of the class for which there is the best evidence for effectiveness and safety. In some cases, this may be the first medicine that is licensed for marketing; in other instances, subsequently licensed compounds may be safer or more effective. Where there is no difference in terms of efficacy and safety data, the listed medicine should be the one that is generally available at the lowest price, based on international drug price information sources. Not all square boxes are applicable to medicine selection for children — see the second EMLc for details.

Therapeutic equivalence is indicated only on the basis of reviews of efficacy and safety and when consistent with WHO clinical guidelines. National lists should not use a similar symbol and should be specific in their final selection, which would depend on local availability and price.

The **a** symbol indicates that there is an age or weight restriction on use of the medicine; details for each medicine can be found in Table 1.1.

Where the **[c]** symbol is placed next to the complementary list it signifies that the medicine(s) require(s) specialist diagnostic or monitoring facilities, and/or specialist medical care, and/or specialist training for their use in children.

Where the **[c]** symbol is placed next to an individual medicine or strength of medicine it signifies that there is a specific indication for restricting its use to children.

The presence of an entry on the Essential Medicines List carries no assurance as to pharmaceutical quality. It is the responsibility of the relevant national or regional drug regulatory authority to ensure that each product is of appropriate pharmaceutical quality (including stability) and that, when relevant, different products are interchangeable.

For recommendations and advice concerning all aspects of the quality assurance of medicines see the WHO Medicines website <a href="http://www.who.int/medicines/areas/quality\_safety/quality\_assurance/en/">http://www.who.int/medicines/areas/quality\_safety/quality\_assurance/en/</a>.

Medicines and dosage forms are listed in alphabetical order within each section and there is no implication of preference for one form over another. Standard treatment guidelines should be consulted for information on appropriate dosage forms.

The main terms used for dosage forms in the Essential Medicines List can be found in Table 1.2.

Definitions of many of these terms and pharmaceutical quality requirements applicable to the different categories are published in the current edition of *The International Pharmacopoeia* <a href="http://www.who.int/medicines/publications/pharmacopoeia">http://www.who.int/medicines/publications/pharmacopoeia</a>.

1. ANAESTHETICS, PREOPERAT	IVE MEDICINES AND MEDICAL GASES		
1.1 General anaesthetics and o	xygen		
1.1.1 Inhalational medicines			
halothane	Inhalation.		
isoflurane	Inhalation.		
nitrous oxide	Inhalation.		
oxygen	Inhalation (medical gas).		
1.1.2 Injectable medicines			
ketamine	Injection: 50 mg (as hydrochloride)/ mL in 10- mL vial.		
	Injection: 10 mg/ mL; 20 mg/ mL.		
propofol*			
1.2 Local anaesthetics			
	Injection: 0.25%; 0.5% (hydrochloride) in vial.		
□ bupivacaine	<b>Injection for spinal anaesthesia:</b> 0.5% (hydrochloride) in 4- mL ampoule to be mixed with 7.5% glucose solution.		
	Injection: 1%; 2% (hydrochloride) in vial.		
□ lidocaine	<b>Injection for spinal anaesthesia:</b> 5% (hydrochloride) in 2- mL ampoule to be mixed with 7.5% glucose solution.		
	<b>Topical forms:</b> 2% to 4% (hydrochloride).		
	<b>Dental cartridge:</b> 2% (hydrochloride) + epinephrine 1:80 000.		
lidocaine + epinephrine (adrenaline)	<b>Injection:</b> 1%; 2% (hydrochloride <b>or</b> sulfate) + epinephrine 1:200 000 in vial.		
Complementary List			
ephedrine	Injection: 30 mg (hydrochloride)/ mL in 1- mL ampoule.		
ερπείπτητε	(For use in spinal anaesthesia during delivery, to prevent hypotension).		
1.3 Preoperative medication an	d sedation for short-term procedures		
atropine	Injection: 1 mg (sulfate) in 1- mL ampoule.		
	Injection: 1 mg/ mL.		
□ midazolam	Oral liquid: 2 mg/ mL [c].		
	<b>Tablet:</b> 7.5 mg; 15 mg.		
morphine	<b>Injection:</b> 10 mg (sulfate <b>or</b> hydrochloride) in 1- mL ampoule.		

1.4 Medical gases	
	Inhalation
	For use in the management of hypoxaemia.
oxygen*	*No more than 30% oxygen should be used to initiate resuscitation of neonates less than or equal to 32 weeks of gestation.
2. MEDICINES FOR PAIN AN	D PALLIATIVE CARE
2.1 Non-opioids and non-stero	idal anti-inflammatory medicines (NSAIMs)
( 1 . 1' - 1' 1	Suppository: 50 mg to 150 mg.
acetylsalicylic acid	<b>Tablet:</b> 100 mg to 500 mg.
	Oral liquid: 200 mg/5 mL.
ibuprofen <b>a</b>	<b>Tablet:</b> 200 mg; 400 mg; 600 mg.
	a Not in children less than 3 months.
	<b>Oral liquid:</b> 120 mg/5 mL; 125 mg/5 mL.
	Suppository: 100 mg.
paracetamol*	<b>Tablet:</b> 100 mg to 500 mg.
	* Not recommended for anti-inflammatory use due to lack of proven benefit to that effect.
2.2 Opioid analgesics	
codeine	Tablet: 30 mg (phosphate).
fentanyl*	<b>Transdermal patch:</b> 12 micrograms/hr; 25 micrograms/hr; 50 micrograms/hr; 75 micrograms/hr; 100 micrograms/hr
	*for the management of cancer pain
	Granules (slow-release; to mix with water): 20 mg –200 mg (morphine sulfate).
	<b>Injection:</b> 10 mg (morphine hydrochloride <b>or</b> morphine sulfate) in 1- mL ampoule.
□ morphine*	<b>Oral liquid:</b> 10 mg (morphine hydrochloride <b>or</b> morphine sulfate)/5 mL.
	<b>Tablet (slow release):</b> 10 mg–200mg (morphine hydrochloride <b>or</b> morphine sulfate).
	<b>Tablet (immediate release):</b> 10 mg (morphine sulfate).
	*Alternatives limited to hydromorphone and oxycodone

Complementary list		
	Tablet: 5 mg; 10 mg (as hydrochloride)	
methadone*	Oral liquid: 5mg/5mL; 10mg/5mL (as hydrochloride)	
	Concentrate for oral liquid: 5 mg/ mL; 10mg/ mL (as hydrochloride)	
	*For the management of cancer pain.	
2.3 Medicines for other com	mon symptoms in palliative care	
amitriptyline	<b>Tablet:</b> 10 mg; 25 mg; 75 mg.	
avalizina [c]	Injection: 50 mg/ mL.	
cyclizine [c]	Tablet: 50 mg.	
	<b>Injection:</b> 4 mg/ mL in 1- mL ampoule (as disodium phosphate salt).	
dexamethasone	Oral liquid: 2 mg/5 mL.	
	<b>Tablet:</b> 2 mg <b>[c]</b> ; 4 mg.	
diazepam	Injection: 5 mg/ mL.	
	Oral liquid: 2 mg/5 mL.	
	Rectal solution: 2.5 mg; 5 mg; 10 mg.	
	<b>Tablet:</b> 5 mg; 10 mg.	
docusate sodium	Capsule: 100 mg.	
docusate soutum	Oral liquid: 50 mg/5 mL.	
fluoxetine <b>a</b>	Solid oral dosage form: 20 mg (as hydrochloride).	
nuoxetine <b>G</b>	<b>a</b> >8 years.	
	Injection: 5 mg in 1- mL ampoule.	
haloperidol	Oral liquid: 2 mg/ mL.	
	<b>Solid oral dosage form:</b> 0.5 mg; 2mg; 5 mg.	
hyoscine butylbromide	Injection: 20 mg/ mL.	
hyoscine hydrobromide [c]	Injection: 400 micrograms/ mL; 600 micrograms/ mL.	
nyoschie nydrobionide [C]	<b>Transdermal patches:</b> 1 mg/72 hours.	
lactulose [c]	<b>Oral liquid:</b> 3.1–3.7 g/5 mL.	
loperamide	Solid oral dosage form: 2 mg.	
	Injection: 5 mg (hydrochloride)/mL in 2-mL ampoule.	
metoclopramide	Oral liquid: 5 mg/5 mL.	
	Solid oral form: 10 mg (hydrochloride).	
	Injection: 1 mg/ mL; 5 mg/ mL.	
midazolam	Solid oral dosage form: 7.5 mg; 15 mg.	
	Oral liquid: 2mg/ mL [c].	

	<b>Injection:</b> 2 mg base/ mL in 2- mL ampoule (as hydrochloride).	
ondansetron [c] a	Oral liquid: 4 mg base/5 mL.	
	<b>Solid oral dosage form:</b> Eq 4 mg base; Eq 8 mg base.	
	a >1 month.	
senna	Oral liquid: 7.5 mg/5 mL.	
3. ANTIALLERGICS AND MEDIC	INES USED IN ANAPHYLAXIS	
dexamethasone	<b>Injection:</b> 4 mg/ mL in 1- mL ampoule (as disodium phosphate salt).	
epinephrine (adrenaline)	<b>Injection:</b> 1 mg (as hydrochloride <b>or</b> hydrogen tartrate) in 1- mL ampoule.	
hydrocortisone	<b>Powder for injection:</b> 100 mg (as sodium succinate) in vial.	
	Oral liquid: 1 mg/ mL.	
□ loratadine *	Tablet: 10 mg.	
	*There may be a role for sedating antihistamines for limited indications (EMLc).	
- 1:1	Oral liquid: 5 mg/ mL [c].	
□ prednisolone	<b>Tablet:</b> 5 mg; 25 mg.	
4. ANTIDOTES AND OTHER SUB	STANCES USED IN POISONINGS	
4.1 Non-specific		
charcoal, activated	Powder.	
4.2 Specific		
. 1	Injection: 200 mg/ mL in 10- mL ampoule.	
acetylcysteine	Oral liquid: 10% [c]; 20% [c].	
atropine	Injection: 1 mg (sulfate) in 1- mL ampoule.	
calcium gluconate	Injection: 100 mg/ mL in 10- mL ampoule.	
methylthioninium chloride (methylene blue)	Injection: 10 mg/ mL in 10- mL ampoule.	
naloxone	Injection: 400 micrograms (hydrochloride) in 1- mL ampoule.	
penicillamine	Solid oral dosage form: 250 mg.	
potassium ferric hexacyano-ferrate(II) - 2H <sub>2</sub> O(Prussian blue)	Powder for oral administration.	
sodium nitrite	Injection: 30 mg/ mL in 10- mL ampoule.	
sodium thiosulfate	Injection: 250 mg/ mL in 50- mL ampoule.	
Complementary List		
deferoxamine	Powder for injection: 500 mg (mesilate) in vial.	
dimercaprol	Injection in oil: 50 mg/ mL in 2- mL ampoule.	
uiniercuproi	injection in our so mg, me in e me imponie.	

fomepizole	Injection: 5 mg/ mL (sulfate) in 20- mL ampoule or 1 g/ mL (base) in 1.5- mL ampoule.		
sodium calcium edetate	Injection: 200 mg/ mL in 5- mL ampoule.		
succimer	Solid oral dosage form: 100 mg.		
5. ANTICONVULSANTS/ANT	TIEPILEPTICS		
	Oral liquid: 100 mg/5 mL.		
carbamazepine	Tablet (chewable): 100 mg; 200 mg.		
	Tablet (scored): 100 mg; 200 mg.		
diazepam	<b>Gel or rectal solution:</b> 5 mg/ mL in 0.5 mL; 2- mL; 4- mL tubes.		
	<b>Tablet:</b> 25 mg; 50 mg; 100 mg; 200 mg.		
lamotrigine*	<b>Tablet (chewable, dispersible):</b> 2 mg; 5 mg; 25 mg; 50 mg; 100 mg; 200 mg.		
	*as adjunctive therapy for treatment-resistant partial or generalized seizures.		
□ lorazepam	<b>Parenteral formulation:</b> 2 mg/ mL in 1- mL ampoule; 4 mg/ mL in 1- mL ampoule.		
magnesium sulfate*	Injection: 0.5g/ mL in 2- mL ampoule (equivalent to 1 g in 2 mL; 50% weight/volume); 0.5g/ mL in 10- mL ampoule (equivalent to 5 g in 10 mL; 50% weight/volume).		
	* For use in eclampsia and severe pre-eclampsia and not for other convulsant disorders.		
	Solution for oromucosal administration: 5 mg/mL; 10 mg/mL		
	Ampoule*: 1 mg/ mL; 10 mg/mL		
midazolam	*for buccal administration when solution for oromucosal administration is not available		
	Injection: 200 mg/ mL (sodium).		
phenobarbital	Oral liquid: 15 mg/5 mL.		
	Tablet: 15 mg to 100 mg.		
	Injection: 50 mg/ mL in 5- mL vial (sodium salt).		
phenytoin	Oral liquid: 25 mg to 30 mg/5 mL.*		
	Solid oral dosage form: 25 mg; 50 mg; 100 mg (sodium salt).		
	Tablet (chewable): 50 mg.		
	* The presence of both 25 mg/5 mL and 30 mg/5 mL strengths on the same market would cause confusion in prescribing and dispensing and should be avoided.		

	Oral liquid: 200 mg/5 mL.	
valproic acid (sodium valproate)	Tablet (crushable): 100 mg.	
	<b>Tablet (enteric-coated):</b> 200 mg; 500 mg (sodium valproate).	
Complementary List		
ethosuximide	Capsule: 250 mg.	
einosuximiae	Oral liquid: 250 mg/5 mL.	
valproic acid (sodium valproate)	Injection: 100 mg/ mL in 4- mL ampoule; 100 mg/ mL in 10- mL ampoule.	
6. ANTI-INFECTIVE MEDICINE	S	
6.1 Anthelminthics		
6.1.1 Intestinal anthelminthics	S	
albendazole	Tablet (chewable): 400 mg.	
ivermectin	Tablet (scored): 3 mg.	
levamisole	<b>Tablet:</b> 50 mg; 150 mg (as hydrochloride).	
mebendazole	Tablet (chewable): 100 mg; 500 mg.	
niclosamide	Tablet (chewable): 500 mg.	
praziquantel	<b>Tablet:</b> 150 mg; 600 mg.	
nymantal .	Oral liquid: 50 mg (as embonate or pamoate)/ mL.	
pyrantel	<b>Tablet (chewable):</b> 250 mg (as embonate <b>or</b> pamoate).	
6.1.2 Antifilarials		
albendazole	Tablet (chewable): 400 mg.	
diethylcarbamazine	<b>Tablet:</b> 50 mg; 100 mg (dihydrogen citrate).	
ivermectin	Tablet (scored): 3 mg.	
6.1.3 Antischistosomals and ot	ther antitrematode medicines	
praziquantel	Tablet: 600 mg.	
triclabendazole	Tablet: 250 mg.	

Complementary List	
	Capsule: 250 mg.
oxamniquine*	Oral liquid: 250 mg/5 mL.
	* Oxamniquine is listed for use when praziquantel treatment fails.

#### 6.2 Antibacterials

To assist in the development of tools for antibiotic stewardship at local, national and global levels and to reduce antimicrobial resistance, three different categories were developed – ACCESS, WATCH and RESERVE groups.

#### **Group 1 - KEY ACCESS ANTIBIOTICS**

To improve both access and clinical outcomes antibiotics that were first or second choice antibiotics in at least one of the reviewed syndromes are designated as key ACCESS antibiotics, emphasizing their role as the antibiotics that should be widely available, affordable and quality-assured. ACCESS antibiotics are listed below. Selected ACCESS antibiotics may also be included in the WATCH group.

6.2.1 Beta-lactam medicines		6.2.2 Other antibacterials	
amoxicillin	cefotaxime*	amikacin	gentamicin
amoxicillin + clavulanic acid	ceftriaxone*	azithromycin*	metronidazole
ampicillin	cloxacillin	chloramphenicol	nitrofurantoin
benzathine benzylpenicillin	phenoxymethylpenicillin	ciprofloxacin*	spectinomycin (EML only)
benzylpenicillin	piperacillin + tazobactam*	clarithromycin*	sulfamethoxazole + trimethoprim
cefalexin	procaine benzyl penicillin	clindamycin	vancomycin (oral)*
cefazolin	meropenem*	doxycycline	vancomycin (parenteral)*
cefixime*			

Italics = complementary list

The 2017 Expert Committee identified the following antibiotics or antibiotic classes that should be the subject of a specific stewardship focus. Antibiotics or antibiotic classes in these groups are designated accordingly in the EML/EMLc. The "WATCH" and "RESERVE" stewardship groups could assist in activities such as local, national and global monitoring of use; development of guidelines and educational activities.

#### **Group 2 - WATCH GROUP ANTIBIOTICS**

This group includes antibiotic classes that have higher resistance potential and so are recommended as first or second choice treatments only for a specific, limited number of indications. These medicines should be prioritized as key targets of stewardship programs and monitoring.

This group includes most of the highest priority agents among the Critically Important Antimicrobials for Human Medicine<sup>1</sup> and/or antibiotics that are at relatively high risk of selection of bacterial resistance.

Watch group antibiotics
Quinolones and fluoroquinolones
e.g. ciprofloxacin, levofloxacin, moxifloxacin, norfloxacin
3rd-generation cephalosporins (with or without beta-lactamase inhibitor)
e.g. cefixime, ceftriaxone, cefotaxime, ceftazidime
Macrolides
e.g. azithromycin, clarithromycin, erythromycin
Glycopeptides
e.g. teicoplanin, vancomycin
Antipseudomonal penicillins + beta-lactamase inhibitor
e.g. piperacillin-tazobactam
Carbapenems
e.g. meropenem, imipenem + cilastatin
Penems
e.g. faropenem

<sup>\*</sup>Watch group antibiotics included in the EML/EMLc only for specific, limited indications

# **Group 3 - RESERVE GROUP ANTIBIOTICS**

This group includes antibiotics that should be treated as "last resort" options that should be accessible, but whose use should be tailored to highly specific patients and settings, when all alternatives have failed (e.g., serious, life-threatening infections due to multi-drug resistant bacteria). These medicines could be protected and prioritized as key targets of national and international stewardship programs involving monitoring and utilization reporting, to preserve their effectiveness.

Reserve group antibiotics		
Aztreonam	Fosfomycin (IV)	
4th generation cephalosporins	Oxazolidinones	
e.g. cefepime	e.g. linezolid	
5th generation cephalosporins	Tigecycline	
e.g. ceftaroline		
Polymyxins	Daptomycin	
e.g. polymyxin B, colistin		

#### 6.2.1 Beta-lactam medicines

	<b>Powder for oral liquid:</b> 125 mg (as trihydrate)/5 mL; 250 mg (as trihydrate)/5 mL <b>[c]</b> .		
	Solid oral dosage form: 250 mg; 500 mg (as trihydrate).  Powder for injection: 250 mg; 500 mg; 1 g (as sodium) in vial.		
	FIRST CHOICE	SECOND CHOICE	
amoxicillin	- community acquired pneumonia (mild to moderate)	- acute bacterial meningitis	
	- community acquired pneumonia (severe) [c] - complicated severe acute malnutrition [c] - exacerbations of COPD		
	- lower urinary tract infections - otitis media		
	- pharyngitis - sepsis in neonates and children [C]		
	- sinusitis - uncomplicated severe acute malnutrition [c]		
amoxicillin + clavulanic acid	<b>Oral liquid:</b> 125 mg amoxicillin + 31.25 mg clavulanic acid/5 mL AND 250 mg amoxicillin + 62.5 mg clavulanic acid/5 mL <b>[c]</b> .		
amoxiciiiii + ciavuianic acid	<b>Tablet:</b> 500 mg (as trihydrate) + 125 mg (as potassium salt).		
<b>Powder for injection:</b> 500 mg (as sodium) + 100 mg (as potassium salt) mg (as sodium) + 200 mg (as potassium salt) in vial.		G 1 1	

	FIRST CHOICE	SECOND CHOICE	
	- community acquired pneumonia (severe) [c] - complicated intraabdominal infections (mild to moderate) - exacerbations of COPD - hospital acquired pneumonia - low-risk febrile neutropenia - lower urinary tract infections - sinusitis - skin and soft tissue infections	<ul> <li>bone and joint infections</li> <li>community-acquired pneumonia</li> <li>(mild to moderate)</li> <li>community acquired pneumonia</li> <li>(severe)</li> <li>otitis media</li> </ul>	
	<b>Powder for injection:</b> 500 mg; 1 g (as sodium	salt) in vial.	
	FIRST CHOICE	SECOND CHOICE	
ampicillin	- community acquired pneumonia (severe) [c] - complicated severe acute malnutrition [c] - sepsis in neonates and children [c]	- acute bacterial meningitis	
benzathine benzylpenicillin	Powder for injection: 900 mg benzylpenicillin (= 1.2 million IU) in 5- mL vial benzathine benzylpenicillin (= 2.4 million IU) in 5- mL vial.		
	FIRST CHOICE	SECOND CHOICE	
	- syphilis		
	<b>Powder for injection:</b> 600 mg (= 1 million IU); 3 g (= 5 million IU) (sodium <b>or</b> potassium salt) in vial.		
benzylpenicillin	FIRST CHOICE	SECOND CHOICE	
benzyrpeniciini	-community acquired pneumonia (severe) [c] - complicated severe acute malnutrition [c] - sepsis in neonates and children [c] - syphilis	- acute bacterial meningitis <b>[c]</b>	
	<b>Powder for reconstitution with water:</b> 125 mg/5 mL; 250 mg/5 mL (anhydrous).		
	Solid oral dosage form: 250 mg (as monohyd	lrate).	
cefalexin	FIRST CHOICE	SECOND CHOICE	
		<ul><li>- exacerbations of COPD</li><li>- pharyngitis</li><li>- skin and soft tissue infections</li></ul>	
	<b>Powder for injection:</b> 1 g (as sodium salt) in vial.		
	* also indicated for surgical prophylaxis.		
cefazolin* <b>a</b>	a >1 month.		
_	FIRST CHOICE	SECOND CHOICE	
		- bone and joint infections	

	Capsule or tablet: 200 mg; 400 mg (as trihydr	rate).	
	Powder for oral liquid: 100 mg /5 mL [c]		
cefixime	FIRST CHOICE	SECOND CHOICE	
WATCH GROUP		- acute invasive bacterial diarrhoea / dysentery - Neisseria gonorrhoeae	
	<b>Powder for injection:</b> 250 mg per vial (as sod	ium salt)	
	* 3rd generation cephalosporin of choice for t	use in hospitalized neonates.	
	FIRST CHOICE	SECOND CHOICE	
cefotaxime* WATCH GROUP	<ul> <li>- acute bacterial meningitis</li> <li>-community acquired pneumonia (severe)</li> <li>- complicated intraabdominal infections (mild to moderate)</li> <li>- complicated intrabdominal infections (severe)</li> <li>- hospital acquired pneumonia</li> <li>-pyelonephritis or prostatitis (severe)</li> </ul>	- bone and joint infections -pyelonephritis or prostatitis (mild to moderate) - sepsis in neonates and children <b>[c]</b>	
	<b>Powder for injection:</b> 250 mg; 1 g (as sodium salt) in vial.		
	* Do not administer with calcium and avoid in infants with hyperbilirubinaemia.		
	a >41 weeks corrected gestational age.		
	FIRST CHOICE	SECOND CHOICE	
ceftriaxone* <b>a</b> WATCH GROUP	<ul> <li>- acute bacterial meningitis</li> <li>-community acquired pneumonia (severe)</li> <li>- complicated intraabdominal infections (mild to moderate)</li> <li>- complicated intrabdominal infections (severe)</li> <li>- hospital acquired pneumonia</li> <li>- Neisseria gonorrhoeae</li> <li>-pyelonephritis or prostatitis (severe)</li> </ul>	- acute invasive bacterial diarrhoea / dysentery - bone and joint infections - pyelonephritis or prostatitis (mild to moderate) - sepsis in neonates and children [c]	
	Capsule: 500 mg; 1 g (as sodium salt).		
	Powder for injection: 500 mg (as sodium salt) in vial.		
	Powder for oral liquid: 125 mg (as sodium salt)/5 mL.		
□ cloxacillin*	*cloxacillin, dicloxacillin and flucloxacillin are preferred for oral administration due to better bioavailability.		
	FIRST CHOICE	SECOND CHOICE	
	- bone and joint infections - skin and soft tissue infections	- sepsis in neonates and children <b>[c]</b>	

	Powder for or	al liquid: 250 mg (as pot	assium salt)/5 mL.
	Tablet: 250 mg (as potassium salt).		
phenoxymethylpenicillin	FIRST CHOIC	CE	SECOND CHOICE
	- community ac	quired pneumonia (mild to	
	moderate)		
	- pharyngitis		
	Powder for in	<b>jection:</b> 2 g (as sodium s	alt) + 250 mg (as sodium salt); 4 g (as
	sodium salt) +	500 mg (as sodium salt)	in vial
piperacillin + tazobactam	FIRST CHOIC	CE	SECOND CHOICE
WATCH GROUP		traabdominal infections (se	evere)
	- high-risk febri - hospital acqui	•	
	, ,	, 	
	·		J); 3 g (=3 million IU) in vial.
		, <u>, , , , , , , , , , , , , , , , , , </u>	nmended as first-line treatment for high neonatal mortality, when given by
procaine benzylpenicillin*			hospital care is not achievable.
procume verizy speritement	FIRST CHOIC	CE	SECOND CHOICE
	- syphilis [c]		- syphilis
Complementary List			1
ceftazidime	Dozuđen fon im	ication 250 mg on 1 g (go	noutaluduata) in mial
WATCH GROUP	Powder jor inj	jection: 250 mg or 1 g (as	pentunyurute) in otat.
	Powder for inj	<b>iection:</b> 500 mg (as trihydi	rate); 1 g (as trihydrate) in vial
	<b>a</b> >3 months.		
meropenem* <b>a</b>	*imipenem + cilastatin is an alternative except for acute bacterial meningitis where meropenem is preferred.		cept for acute bacterial meningitis where
WATCH GROUP	FIRST CHOIC	CE	SECOND CHOICE
			- acute bacterial meningitis in neonates [c]
			- complicated intraabdominal infections (severe)
			- high-risk febrile neutropenia
Complementary List -	  - RESERVE GRO	UP	
aztreonam		Powder for injection: 1	g; 2 g in vial
fifth generation cephalosp	orins	,	
(with or without beta-lac		Powder for injection: 4	.00 mg; 600 mg (as fosamil) in vial
e.g, ceftaroline			0. 0. 7
<i>y</i> ,			

fourth generation cep	halosporins			
(with or without beta	-lactamase inhibitor)	Powder for injection: 5	500 mg; 1g; 2g (as hydrochloride) in vial	
e.g., cefepime				
6.2.2 Other antibact	erials			
	Injection: 250	Injection: 250 mg (as sulfate)/mL in 2- mL vial		
amikacin	FIRST CHOIC	CE	SECOND CHOICE	
anukaciii	-pyelonephritis	or prostatitis (severe)	- high-risk febrile neutropenia - sepsis in neonates and children <b>[c]</b>	
	Capsule: 250 r	mg; 500 mg (anhydrous).		
	Oral liquid: 20	00 mg/5 mL.		
azithromycin*	* also listed for	r single-dose treatment o	of trachoma and yaws.	
WATCH GROUP	FIRST CHOIC	CE	SECOND CHOICE	
- ( - (	- Chlamydia tra - cholera <b>[c]</b> - Neisseria gono		- acute invasive bacterial diarrhoea / dysentery - Neisseria gonorrhoeae	
	Capsule: 250 r	Capsule: 250 mg.		
	Oily suspensi ampoule.	<b>Oily suspension for injection*:</b> 0.5 g (as sodium succinate)/ mL in 2- mL ampoule.		
		* Only for the presumptive treatment of epidemic meningitis in children older than 2 years and in adults.		
chloramphenicol	Oral liquid: 15	Oral liquid: 150 mg (as palmitate)/5 mL.		
	Powder for in	<b>Powder for injection:</b> 1 g (sodium succinate) in vial.		
	FIRST CHOIC	CE	SECOND CHOICE	
			- acute bacterial meningitis	
	Oral liquid: 25	Oral liquid: 250 mg/5 mL (anhydrous) [c].		
	Solution for I	Solution for IV infusion: 2 mg/ mL (as hyclate) [c].		
	Tablet: 250 mg	<b>Tablet:</b> 250 mg (as hydrochloride).		
ciprofloxacin	FIRST CHOIC	CE	SECOND CHOICE	
WATCH GROUP	dysentery - low-risk febrild	bacterial diarrhoea / e neutropenia or prostatitis (mild to	-cholera - complicated intraabdominal infections (mild to moderate)	

	Solid oral dosage form: 500 mg.		
	Powder for oral liquid: 125 mg/5 mL; 250 mg/5 mL		
	<b>Powder for injection:</b> 500 mg in vial		
clarithromycin*†	*erythromycin may be an alternative.		
WATCH GROUP	tclarithromycin is also listed for use in combination regimens for eradication of <i>H. pylori</i> in adults.		
	FIRST CHOICE	SECOND CHOICE	
	-community acquired pneumonia (severe)	- pharyngitis	
	Capsule: 150 mg (as hydrochloride).		
	Injection: 150 mg (as phosphate)/ mL.		
clindamycin	Oral liquid: 75 mg/5 mL (as palmitate)	c].	
	FIRST CHOICE	SECOND CHOICE	
		- bone and joint infections	
	Oral liquid: 25 mg/5 mL [c]; 50 mg/5 m	L (anhydrous) [c].	
	Solid oral dosage form: 50 mg [c]; 100 mg (as hyclate).		
	<b>Powder for injection</b> : 100 mg in vial		
doxycycline <b>a</b>	a Use in children <8 years only for life-threatening infections when no alternative exists.		
doxycycinic w	FIRST CHOICE	SECOND CHOICE	
	- Chlamydia trachomatis - cholera	- cholera <b>[c]</b> -community acquired pneumonia (mild to moderate) - exacerbations of COPD	
	Injection: 10 mg; 40 mg (as sulfate)/ mL in 2- mL vial.		
	FIRST CHOICE	SECOND CHOICE	
gentamicin	- community acquired pneumonia (severe)  [c] - complicated severe acute malnutrition [c] - sepsis in neonates and children [c]	- Neisseria gonorrhoeae	
	Injection: 500 mg in 100- mL vial.		
metronidazole	Oral liquid: 200 mg (as benzoate)/5 mL.		
	Suppository: 500 mg; 1 g.		
	<b>Tablet:</b> 200 mg to 500 mg.		

	FIRST CHO	DICE	SECOND CHOICE	
	(mild to mod	l intraabdominal infections lerate) l intrabdominal infections	- complicated intraabdominal infections (mild to moderate)	
	Oral liquid	: 25 mg/5 mL <b>[c]</b> .		
nitrofurantoin	Tablet: 100	mg.		
	FIRST CHO	DICE	SECOND CHOICE	
	- lower urin	ary tract infections		
	Powder for	injection: 2 g (as hydrochlo	oride) in vial.	
spectinomycin	FIRST CHO	DICE	SECOND CHOICE	
			- Neisseria gonorrhoeae	
	Injection:			
	_	80 mg + 16 mg/ mL in 5- mL ampoule; 80 mg + 16 mg/ mL in 10- mL ampoule.		
	Oral liquid	<b>Oral liquid:</b> 200 mg + 40 mg/5 mL.		
sulfamethoxazole +	Tablet: 100	<b>Tablet:</b> 100 mg + 20 mg; 400 mg + 80 mg; 800 mg + 160 mg.		
trimethoprim*	*single agei	*single agent trimethoprim may be an alternative for lower urinary tract infection.		
	FIRST CHO	DICE	SECOND CHOICE	
	- lower urini	ary tract infections	- acute invasive diarrhoea / bacterial dysentery	
	Capsule: 1	Capsule: 125 mg; 250 mg (as hydrochloride).		
vancomycin			SECOND CHOICE	
WATCH GROUP			- C. difficile infection	
Complementary List				
		<b>Powder for injection:</b> 250 t	ng (as hydrochloride) in vial.	
vancomycin		FIRST CHOICE	SECOND CHOICE	
WATCH GROUP			-high-risk febrile neutropenia	
Complementary List	– RESERVE GR	OUP		
daptomycin		<b>Powder for injection:</b> 350 t	ng; 500 mg in vial	
fosfomycin		Powder for injection: 2 g; 4 g (as sodium) in vial		

oxazolindinones e.g., linezolid	Injection for intravenous administration: 2 mg/ mL in 300 mL bag.  Powder for oral liquid: 100 mg/5 mL.  Tablet: 400 mg; 600 mg.
polymyxins e.g., colistin	Powder for injection: 1 million I.U. (as colistemethate sodium) in vial
tigecycline	Powder for injection: 50 mg in vial

### 6.2.3 Antileprosy medicines

Medicines used in the treatment of leprosy should never be used except in combination. Combination therapy is essential to prevent the emergence of drug resistance. Colour-coded blister packs (MDT blister packs) containing standard two-medicine (paucibacillary leprosy) or three-medicine (multibacillary leprosy) combinations for adult and childhood leprosy should be used. MDT blister packs can be supplied free of charge through WHO.

clofazimine	Capsule: 50 mg; 100 mg.
dapsone	<b>Tablet:</b> 25 mg; 50 mg; 100 mg.
rifampicin	Solid oral dosage form: 150 mg; 300 mg.

#### 6.2.4 Antituberculosis medicines

WHO recommends and endorses the use of fixed-dose combinations and the development of appropriate new fixed-dose combinations, including modified dosage forms, non-refrigerated products and paediatric dosage forms of assured pharmaceutical quality.

	Oral liquid: 25 mg/ mL [c].
ethambutol	Tablet: 100 mg to 400 mg (hydrochloride).
ethambutol + isoniazid	<b>Tablet:</b> 400 mg + 150 mg.
ethambutol + isoniazid + pyrazinamide + rifampicin	<b>Tablet:</b> 275 mg + 75 mg + 400 mg + 150 mg.
ethambutol + isoniazid + rifampicin	<b>Tablet:</b> 275 mg + 75 mg + 150 mg.
	Oral liquid: 50 mg/5 mL [c].
isoniazid	<b>Tablet:</b> 100 mg to 300 mg.
	Tablet (scored): 50 mg.
isoniazid + pyrazinamide + rifampicin	Tablet:  75 mg + 400 mg + 150 mg.  150 mg + 500 mg + 150 mg (For intermittent use three times weekly).  Tablet (dispersible): 50 mg + 150 mg + 75 mg [c].
isoniazid + rifampicin	Tablet:  75 mg + 150 mg; 150 mg + 300 mg.  60 mg + 60 mg (For intermittent use three times weekly).  150 mg + 150 mg (For intermittent use three times weekly).  Tablet (dispersible): 50 mg + 75 mg [c].

	Oral liquid: 30 mg/ mL [c].
pyrazinamide	Tablet: 400 mg.
	Tablet (dispersible): 150 mg.
rifabutin	Tablet (scored): 150 mg.
	Capsule: 150 mg.*
Hiabutiii	* For use only in patients with HIV receiving protease inhibitors.
rifampicin	Oral liquid: 20 mg/ mL [c].
manipen	Solid oral dosage form: 150 mg; 300 mg.
rifapentine*	Tablet: 150 mg
Паренине	*For treatment of latent TB infection (LTBI) only
Complementary List	
Reserve second-line drugs for the treats in specialized centres adhering to WHO	ment of multidrug-resistant tuberculosis (MDR-TB) should be used O standards for TB control.
amikacin	<b>Powder for injection:</b> 100 mg; 500 mg; 1 g (as sulfate) in vial.
bedaquiline	<b>Tablet:</b> 100 mg.
capreomycin	Powder for injection: 1 g (as sulfate) in vial.
clofazimine	Capsule: 50 mg; 100 mg.
cycloserine*	Solid oral dosage form: 250 mg.
cycloserme	*Terizidone may be an alternative
delamanid <b>a</b>	Tablet: 50 mg.
исштини 🙃	a >6 years
ethionamide*	Tablet: 125 mg; 250 mg.
emonumue	*Protionamide may be an alternative.
kanamycin	Powder for injection: 1 g (as sulfate) in vial.
levofloxacin	<b>Tablet:</b> 250mg; 500 mg; 750 mg.
	<b>Injection for intravenous administration:</b> 2 mg/ mL in 300 mL bag.
linezolid	Powder for oral liquid: 100 mg/5 mL.
	Tablet: 400 mg; 600 mg.
moxifloxacin	Tablet: 400 mg.
	Granules: 4 g in sachet.
p-aminosalicylic acid	T 11 ( 500
p-aminosalicylic acid	<b>Tablet:</b> 500 mg.

amphotericin B	<b>Powder for injection:</b> 50 mg in vial (as sodium deoxycholate <b>or</b> liposomal complex).
clotrimazole	Vaginal cream: 1%; 10%.
	Vaginal tablet: 100 mg; 500 mg.
	Capsule: 50 mg.
fluconazole	Injection: 2 mg/ mL in vial.
	Oral liquid: 50 mg/5 mL.
fluoritacina	Capsule: 250 mg.
flucytosine	Infusion: 2.5 g in 250 mL.
griseofulvin	Oral liquid: 125 mg/5 mL [c].
griscorurvin	Solid oral dosage form: 125 mg; 250 mg.
	Capsule: 100 mg.
	Oral liquid: 10 mg/mL.
itraconazole*	* For treatment of chronic pulmonary aspergillosis, histoplasmosis, sporotrichosis, paracoccidiodomycosis, mycoses caused by <i>T. marneffei</i> and chromoblastomycosis; and prophylaxis of histoplasmosis and infections caused by <i>T. marneffei</i> in AIDS patients.
	Lozenge: 100 000 IU.
nystatin	Oral liquid: 50 mg/5 mL [c]; 100 000 IU/ mL [c].
nystam	Pessary: 100 000 IU.
	<b>Tablet:</b> 100 000 IU; 500 000 IU.
	<b>Tablet:</b> 50 mg; 200 mg
	<b>Powder for injection:</b> 200 mg in vial
voriconazole*	Powder for oral liquid: 40 mg/mL
	*For treatment of chronic pulmonary aspergillosis and acute invasive aspergillosis.
Complementary List	•
potassium iodide	Saturated solution.

6.4 Antiviral medicines	
6.4.1 Antiherpes medicines	
	Oral liquid: 200 mg/5 mL [c].
□ aciclovir	<b>Powder for injection:</b> 250 mg (as sodium salt) in vial.
	Tablet: 200 mg.

#### 6.4.2 Antiretrovirals

Based on current evidence and experience of use, medicines in the following three classes of antiretrovirals are included as essential medicines for treatment and prevention of HIV (prevention of mother-to-child transmission, pre-exposure prophylaxsis (where indicated) and post-exposure prophylaxis). WHO emphasizes the importance of using these products in accordance with global and national guidelines. WHO recommends and endorses the use of fixed-dose combinations and the development of appropriate new fixed-dose combinations, including modified dosage forms, non-refrigerated products and paediatric dosage forms of assured pharmaceutical quality.

Scored tablets can be used in children and therefore can be considered for inclusion in the listing of tablets, provided that adequate quality products are available.

# 6.4.2.1 Nucleoside/Nucleotide reverse transcriptase inhibitors

abacavir (ABC)	Tablet: 300 mg (as sulfate).  Tablet (dispersible, scored): 60 mg (as sulfate) [c].
lamivudine (3TC)	Oral liquid: 50 mg/5 mL [c]. Tablet: 150 mg.
tenofovir disoproxil fumarate† (TDF)	<b>Tablet:</b> 300 mg (tenofovir disoproxil fumarate – equivalent to 245 mg tenofovir disoproxil). talso indicated for pre-exposure prophylaxis.
zidovudine (ZDV <b>or</b> AZT)	Capsule: 250 mg.  Oral liquid: 50 mg/5 mL.  Solution for IV infusion injection: 10 mg/ mL in 20- mL vial.  Tablet: 300 mg.  Tablet (dispersible, scored): 60 mg [c].

## 6.4.2.2 Non-nucleoside reverse transcriptase inhibitors

efavirenz (EFV <b>or</b> EFZ) <b>a</b>	Tablet: 200 mg (scored); 600 mg.
	a >3 years or >10 kg weight.
	Oral liquid: 50 mg/5 mL.
nevirapine (NVP) <b>a</b>	Tablet: 50 mg (dispersible); 200 mg.
	a> 6 weeks

# 6.4.2.3 Protease inhibitors

Selection of protease inhibitor(s) from the Model List will need to be determined by each country after consideration of international and national treatment guidelines and experience. Ritonavir is recommended for use in combination as a pharmacological booster, and not as an antiretroviral in its own right. All other protease inhibitors should be used in boosted forms (e.g. with ritonavir).

innibitors snould be used in boosted forms	Ge.g. with ritonavir).
atazanavir <b>a</b>	Solid oral dosage form: 100 mg; 300 mg (as sulfate).
	<b>a</b> >25 kg.
atazanavir + ritonavir	<b>Tablet (heat stable):</b> 300 mg (as sulfate) + 100 mg.
darunavir <b>a</b>	<b>Tablet:</b> 75 mg; 400 mg; 600 mg; 800 mg
lopinavir + ritonavir (LPV/r)	Oral liquid: 400 mg + 100 mg/5 mL.  Tablet (heat stable): 100 mg + 25 mg; 200 mg + 50 mg.  Capsule containing oral pellets: 40 mg + 10 mg [c].
ritonavir	Oral liquid: 400 mg/5 mL.  Tablet (heat stable): 25 mg; 100 mg.
6.4.2.4 Integrase inhibitors	
dolutegravir	Tablet: 50 mg
	Tablet (chewable): 25 mg; 100 mg.
raltegravir*	Tablet: 400 mg
Tallegravii	*for use in pregnant women and in second-line regimens in accordance with WHO treatemnt guidelines.
FIXED-DOSE COMBINATIONS	•
abacavir + lamivudine	<b>Tablet (dispersible, scored):</b> 60 mg (as sulfate) + 30 mg; 120 mg (as sulfate) + 60 mg.
efavirenz + emtricitabine* + tenofovir	Tablet: 600 mg + 200 mg + 300 mg (disoproxil fumarate equivalent to 245 mg tenofovir disoproxil).  *Emtricitabine (FTC) is an acceptable alternative to 3TC, based on knowledge of the pharmacology, the resistance patterns and clinical trials of antiretrovirals.
efavirenz + lamivudine + tenofovir	<b>Tablet:</b> 400 mg + 300 mg + 300 mg (disoproxil fumarate equivalent to 245 mg tenofovir disoproxil)
emtricitabine* + tenofovir†	Tablet: 200 mg + 300 mg (disoproxil fumarate equivalent to 245 mg tenofovir disoproxil).  *Emtricitabine (FTC) is an acceptable alternative to 3TC, based on knowledge of the pharmacology, the resistance patterns and clinical trials of antiretrovirals.  † combination also indicated for pre-exposure prophylaxis
lamivudine + nevirapine + zidovudine	<b>Tablet:</b> 30 mg + 50 mg + 60 mg <b>[c]</b> ; 150 mg + 200 mg + 300 mg.

lamivudine + zidovudine	<b>Tablet:</b> 30 mg + 60 mg <b>[c]</b> ; 150 mg + 300 mg.
6.4.2.5 Medicines for prevention of H	HIV-related opportunistic infections
isoniazid + pyridoxine + sulfamethoxazole + trimethoprim	<b>Tablet (scored):</b> 300 mg + 25 mg + 800 mg + 160 mg
6.4.3 Other antivirals	
	<b>Injection for intravenous administration:</b> 800 mg and 1 g in 10-mL phosphate buffer solution.
ribavirin*	Solid oral dosage form: 200 mg; 400 mg; 600 mg.
	* For the treatment of viral haemorrhagic fevers
	Tablet: 450 mg.
valganciclovir*	*For the treatment of cytomegalovirus retinitis (CMVr).
Complementary list	
	Capsule: 30 mg; 45 mg; 75 mg (as phosphate).
ocaltamiziu*	Oral powder: 12 mg/ mL.
oseltamivir*	* severe illness due to confirmed or suspected influenza virus infection in critically ill hospitalized patients
6.4.4 Antihepatitis medicines	
6.4.4.1 Medicines for hepatitis B	
6.4.4.1.1 Nucleoside/Nucleotide rev	verse transcriptase inhibitors
	Oral liquid: 0.05 mg/ mL
entecavir	Tablet: 0.5 mg; 1 mg
tenofovir disoproxil fumarate (TDF)	<b>Tablet:</b> 300 mg (tenofovir disoproxil fumarate – equivalent to 245 mg tenofovir disoproxil).
6.4.4.2 Medicines for hepatitis C	
	ollowing classes of direct acting antiviral medicines are included as C virus infection. WHO guidelines recommend specific a different classes.
6.4.4.2.1 Nucleotide polymerase inf	nibitors
sofosbuvir	Tablet: 400 mg
6.4.4.2.2 Protease inhibitors	1
simeprevir	Capsule 150 mg
6.4.4.2.3 NS5A inhibitors	1
daclatasvir	Tablet: 30 mg; 60 mg (as hydrochloride)
6.4.4.2.4 Non-nucleoside polymeras	se inhibitors
dasabuvir	Tablet: 250 mg
6.4.4.2.5 Other antivirals	1

ribavirin*	<b>Injection for intravenous administration:</b> 800 mg and 1 g in 10-mL phosphate buffer solution.
	Solid oral dosage form: 200 mg; 400 mg; 600 mg.
	* For the treatment of hepatitis C, in combination with peginterferon and/or direct acting anti-viral medicines
Complementary List	
	Vial or prefilled syringe:
manulated intenferon also (2g on 2h) *	180 micrograms (peginterferon alfa-2a),
pegylated interferon alfa (2a or 2b) *	80 microgram, 100 microgram (peginterferon alfa-2b).
	* To be used in combination with ribavirin.
FIXED-DOSE COMBINATIONS	
Alternative combinations of DAAs from	different pharmacological classes are possible.
ledipasvir + sofosbuvir	<b>Tablet:</b> 90 mg + 400 mg.
ombitasvir + paritaprevir + ritonavir	<b>Tablet:</b> 12.5 mg + 75 mg + 50 mg
sofosbovir + velpatasvir	<b>Tablet:</b> 400 mg + 100 mg
6.5 Antiprotozoal medicines	
6.5.1 Antiamoebic and antigiardias	sis medicines
diloxanide <b>a</b>	Tablet: 500 mg (furoate).
diloxariide <b>a</b>	<b>a</b> >25 kg.
	Injection: 500 mg in 100- mL vial.
□ metronidazole	Oral liquid: 200 mg (as benzoate)/5 mL.
	<b>Tablet:</b> 200 mg to 500 mg.
6.5.2 Antileishmaniasis medicines	
amphotericin B	<b>Powder for injection:</b> 50 mg in vial (as sodium deoxycholate <b>or</b> liposomal complex).
miltefosine	Solid oral dosage form: 10 mg; 50 mg.
paromomycin	<b>Solution for intramuscular injection:</b> 750 mg of paromomycin base (as the sulfate).
sodium stibogluconate <b>or</b> meglumine antimoniate	<b>Injection:</b> 100 mg/ mL, 1 vial = 30 mL <b>or</b> 30%, equivalent to approximately 8.1% antimony (pentavalent) in 5- mL ampoule.

## 6.5.3 Antimalarial medicines

#### 6.5.3.1 For curative treatment

Medicines for the treatment of *P. falciparum* malaria cases should be used in combination. The list currently recommends combinations according to treatment guidelines. WHO recognizes that not all of the fixed dose combinations (FDCs) in the WHO treatment guidelines exist, and encourages their development and rigorous testing. WHO also encourages development and testing of rectal dosage formulations.

testing. WTO also encourages development and testing of fectal dosage formulations.		
amodiaquine*	<b>Tablet:</b> 153 mg <b>or</b> 200 mg (as hydrochloride).	
	* To be used in combination with artesunate 50 mg.	
artemether*	Oily injection: 80 mg/ mL in 1- mL ampoule.	
	* For use in the management of severe malaria.	
	<b>Tablet:</b> 20 mg + 120 mg.	
artemether + lumefantrine*	Tablet (dispersible): 20 mg + 120 mg [c].	
	* Not recommended in the first trimester of pregnancy <b>or</b> in children below 5 kg.	
artesunate*	<b>Injection:</b> ampoules, containing 60 mg anhydrous artesunic acid with a separate ampoule of 5% sodium bicarbonate solution. For use in the management of severe malaria.	
	Rectal dosage form: 50 mg [c]; 100 mg [c]; 200 mg capsules (for pre-referral treatment of severe malaria only; patients should be taken to an appropriate health facility for follow-up care) [c].	
	Tablet: 50 mg.	
	* To be used in combination with either amodiaquine, mefloquine <b>or</b> sulfadoxine + pyrimethamine.	
	<b>Tablet:</b> 25 mg + 67.5 mg; 50 mg + 135 mg; 100 mg + 270 mg.	
artesunate + amodiaquine*	* Other combinations that deliver the target doses required such as 153 mg <b>or</b> 200 mg (as hydrochloride) with 50 mg artesunate can be alternatives.	
artesunate + mefloquine	<b>Tablet:</b> 25 mg + 55 mg; 100 mg + 220 mg.	
artesunate + pyronaridine tetraphosphate <b>a</b>	Tablet: 60 mg + 180 mg  Granules: 20 mg + 60 mg [c].  a > 5 kg	
	Oral liquid: 50 mg (as phosphate or sulfate)/5 mL.	
chloroquine*	<b>Tablet:</b> 100 mg; 150 mg (as phosphate <b>or</b> sulfate).	
	* For use only for the treatment of <i>P.vivax</i> infection.	
dihydroartemisinin + piperaquine phosphate	<b>Tablet:</b> 20 mg + 160 mg; 40 mg + 320 mg	
<u>a</u>	<b>a</b> > 5 kg	

doxycycline*  mefloquine*	Capsule: 100 mg (as hydrochloride or hyclate).		
	<b>Tablet (dispersible):</b> 100 mg (as monohydrate).		
	* For use only in combination with quinine.		
	Tablet: 250 mg (as hydrochloride).		
	* To be used in combination with artesunate 50 mg.		
	Tablet: 7.5 mg; 15 mg (as diphosphate).		
primaquine*	* Only for use to achieve radical cure of <i>P.vivax</i> and <i>P.ovale</i> infections, given for 14 days.		
	<b>Injection:</b> 300 mg quinine hydrochloride/ mL in 2- mL ampoule.		
quinine*	Tablet: 300 mg (quinine sulfate) or 300 mg (quinine bisulfate).		
quimic	* For use only in the management of severe malaria, and should be used in combination with doxycycline.		
	<b>Tablet:</b> 500 mg + 25 mg.		
sulfadoxine + pyrimethamine*	* Only in combination with artesunate 50 mg.		
6.5.3.2 For prophylaxis			
	Oral liquid: 50 mg (as phosphate or sulfate)/5 mL.		
chloroquine*	Tablet: 150 mg (as phosphate or sulfate).		
	* For use only in central American regions, for <i>P.vivax</i> infections.		
, , , ,	Solid oral dosage form: 100 mg (as hydrochloride or hyclate).		
doxycycline <b>a</b>	a >8 years.		
and a min . A	Tablet: 250 mg (as hydrochloride).		
mefloquine <b>a</b>	<b>a</b> >5 kg <b>or</b> >3 months.		
11*	Tablet: 100 mg (as hydrochloride).		
proguanil*	* For use only in combination with chloroquine.		
6.5.4 Antipneumocystosis and an	6.5.4 Antipneumocystosis and antitoxoplasmosis medicines		
pyrimethamine	Tablet: 25 mg.		
sulfadiazine	Tablet: 500 mg.		
	Injection:		
sulfamethoxazole + trimethoprim	80 mg + 16 mg/ mL in 5- mL ampoule; 80 mg + 16 mg/ mL in 10- mL ampoule.		
	Oral liquid: 200 mg + 40 mg/5 mL [c].		
	<b>Tablet:</b> 100 mg + 20 mg; 400 mg + 80 mg <b>[c]</b> .		
Complementary List			
pentamidine	Tablet: 200 mg; 300 mg (as isethionate).		
	l		

can trypanosomiasis
Powder for injection: 200 mg (as isetionate) in vial.
* To be used for the treatment of <i>Trypanosoma brucei gambiense</i> infection.
Powder for injection: 1 g in vial.
* To be used for the treatment of the initial phase of <i>Trypanosoma brucei rhodesiense</i> infection.
ican trypanosomiasis
Injection: 200 mg (hydrochloride)/ mL in 100- mL bottle.
* To be used for the treatment of <i>Trypanosoma brucei gambiense</i> infection.
<b>Injection:</b> 3.6% solution, 5- mL ampoule (180 mg of active compound).
Tablet: 120 mg.
* Only to be used in combination with eflornithine, for the treatment of <i>Trypanosoma brucei gambiense</i> infection.
<b>Injection:</b> 3.6% solution in 5- mL ampoule (180 mg of active compound).
<b>Tablet:</b> 12.5 mg <b>[c]</b> ;100 mg.
Tablet (scored): 50 mg.
<b>Tablet:</b> 30 mg; 120 mg; 250 mg.
<b>Tablet:</b> 300 mg to 500 mg.
<b>Tablet:</b> 200 mg; 400 mg.
Oral liquid: 120 mg/5 mL [c]; 125 mg/5 mL [c].
<b>Tablet:</b> 300 mg to 500 mg.
Tablet: 20 mg; 40 mg (hydrochloride).

	cines listed below should be used according to protocols for treatment of the diseases.	
Immunosuppressive medicines		
Complementary List		
azathioprine	Powder for injection: 100 mg (as sodium salt) in vial.	
	Tablet (scored): 50 mg.	
	Capsule: 25 mg.	
ciclosporin	Concentrate for injection: 50 mg/ mL in 1- mL ampoule for organitransplantation.	
Cytotoxic and adjuvant medi	cines	
Complementary List		
H	Capsule: 10 mg.	
all-trans retinoid acid (ATRA)	– Acute promyelocytic leukaemia.	
allopurinol <b>[c]</b>	Tablet: 100 mg; 300 mg.	
	Powder for injection: 10 000 IU in vial.	
asparaginase	– Acute lymphoblastic leukaemia.	
	Injection: 45 mg/0.5 mL; 180 mg/2 mL.	
bendamustine	– Chronic lymphocytic leukaemia	
	– Follicular lymphoma	
	Powder for injection: 15 mg (as sulfate) in vial.	
11	– Hodgkin lymphoma	
bleomycin	– Kaposi sarcoma	
	<ul><li>Ovarian germ cell tumour</li><li>Testicular germ cell tumour</li></ul>	
	Injection: 3 mg/ mL in 10- mL ampoule.	
	Tablet: 15 mg.	
calcium folinate	– Early stage colon cancer	
	- Early stage rectal cancer	
	<ul><li>Gestational trophoblastic neoplasia</li><li>Metastatic colorectal cancer</li></ul>	
	– Metastatic colorectal cancer – Osteosarcoma	
	– Osteosarcoma – Burkitt lymphoma	
	Tablet:         150 mg; 500 mg.	
capecitabine	Early stage colon cancer	
	- Early stage rectal cancer  Metal discharged cancer	
	<ul><li>Metastatic breast cancer</li><li>Metastatic colorectal cancer</li></ul>	

carboplatin	Injection: 50 mg/5 mL; 150 mg/15 mL; 450 mg/45 mL; 600 mg/60 mL.  - Early stage breast cancer - Epithelial ovarian cancer - Nasopharyngeal cancer - Non-small cell lung cancer - Osteosarcoma - Retinoblastoma
chlorambucil	Tablet: 2 mg.  – Chronic lymphocytic leukaemia.
cisplatin	Injection: 50 mg/50 mL; 100 mg/100 mL.  - Cervical cancer (as a radio-sensitizer)  - Head and neck cancer (as a radio-sensitizer)  - Nasopharyngeal cancer (as a radio-sensitizer)  - Non-small cell lung cancer  - Osteosarcoma  - Ovarian germ cell tumour  - Testicular germ cell tumour
cyclophosphamide	Powder for injection: 500 mg in vial.  Tablet: 25 mg.  - Chronic lymphocytic leukaemia - Diffuse large B-cell lymphoma - Early stage breast cancer - Gestational trophoblastic neoplasia - Hodgkin lymphoma - Follicular lymphoma - Rhabdomyosarcoma - Ewing sarcoma - Acute lymphoblastic leukaemia - Burkitt lymphoma - Metastatic breast cancer.
cytarabine	Powder for injection: 100 mg in vial.  - Acute myelogenous leukaemia  - Acute lymphoblastic leukaemia  - Acute promyelocytic leukaemia  - Burkitt lymphoma.
dacarbazine	Powder for injection: 100 mg in vial.  - Hodgkin lymphoma
dactinomycin	Powder for injection: 500 micrograms in vial.  - Gestational trophoblastic neoplasia  - Rhabdomyosarcoma  - Wilms tumour

dasatinib	<b>Tablet:</b> 20 mg; 50 mg; 70 mg; 80 mg; 100 mg; 140 mg.
	– Imatinib-resistant chronic myeloid leukaemia
	Powder for injection: 50 mg (hydrochloride) in vial.
	– Acute lymphoblastic leukaemia
daunorubicin	– Acute myelogenous leukaemia
	– Acute promyelocytic leukaemia
	Injection: 20 mg/ mL; 40 mg/ mL.
docetaxel	– Early stage breast cancer
	– Metastatic breast cancer
	– Metastatic prostate cancer
	Powder for injection: 10 mg; 50 mg (hydrochloride) in vial.
	– Diffuse large B-cell lymphoma
	– Early stage breast cancer
	– Hodgkin lymphoma
	– Kaposi sarcoma
doxorubicin	– Follicular lymphoma
	– Metastatic breast cancer
	– Osteosarcoma
	– Ewing sarcoma
	– Acute lymphoblastic leukaemia
	– Wilms tumour
	– Burkitt lymphoma
	Capsule: 100 mg.
	<i>Injection:</i> 20 mg/ mL in 5- mL ampoule.
	– Testicular germ cell tumour
	– Gestational trophoblastic neoplasia
etoposide	- Hodgkin lymphoma
	<ul><li>Non-small cell lung cancer</li><li>Ovarian germ cell tumour</li></ul>
	– Gourtan germ cen tumour – Retinoblastoma
	– Ewing sarcoma
	– Acute lymphoblastic leukaemia
	– Burkitt lymphoma
filgrastim	Injection: 120 micrograms/0.2 mL; 300 micrograms/0.5 mL; 480
	micrograms/0.8 mL in pre-filled syringe 300 micrograms/mL in 1- mL
	vial, 480 mg/1.6 mL in 1.6- mL vial.
	Primary prophylaxis in patients at high risk for developing
	febrile neutropenia associated with myelotoxic chemotherapy.
	Secondary prophylaxis for patients who have experienced
	neutropenia following prior myelotoxic chemotherapy
	To facilitate administration of dose dense chemotherapy
	regimens

fludarabine	Powder for injection: 50 mg (phosphate) in vial.
	Tablet: 10 mg
	– Chronic lymphocytic leukaemia.
	Injection: 50 mg/ mL in 5- mL ampoule.
fluorouracil	<ul> <li>Early stage breast cancer</li> <li>Early stage colon cancer</li> <li>Early stage rectal cancer</li> <li>Metastatic colorectal cancer</li> </ul>
	- Nasopharyngeal cancer.
gemcitabine	Powder for injection: 200 mg in vial, 1 g in vial.  - Epithelial ovarian cancer  - Non-small cell lung cancer
hydroxycarbamide	<b>Solid oral dosage form:</b> 200 mg; 250 mg; 300 mg; 400 mg; 500 mg; 1 g.
	– Chronic myeloid leukaemia.
	Powder for injection: 500 mg vial; 1-g vial; 2-g vial.
ifosfamide	<ul> <li>Testicular germ cell tumour</li> <li>Ovarian germ cell tumour</li> <li>Osteosarcoma</li> <li>Rhabdomyosarcoma</li> <li>Ewing sarcoma</li> </ul>
imatinib	Tablet: 100 mg; 400 mg.  – Chronic myeloid leukaemia  – Gastrointestinal stromal tumour
irinotecan	Injection: 40 mg/2 mL in 2- mL vial; 100 mg/5 mL in 5- mL vial; 500 mg/25 mL in 25- mL vial.  - Metastatic colorectal cancer.
mercaptopurine	Tablet: 50 mg.  — Acute lymphoblastic leukaemia  — Acute promyelocytic leukaemia.
mesna	Injection: 100 mg/ mL in 4- mL and 10- mL ampoules.  Tablet: 400 mg; 600 mg.  - Testicular germ cell tumour  - Ovarian germ cell tumour  - Osteosarcoma  - Rhabdomyosarcoma  - Ewing sarcoma.

methotrexate	Powder for injection: 50 mg (as sodium salt) in vial.
	Tablet: 2.5 mg (as sodium salt).
	<ul> <li>Early stage breast cancer</li> <li>Gestational trophoblastic neoplasia</li> <li>Osteosarcoma</li> <li>Acute lymphoblastic leukaemia</li> <li>Acute promyelocytic leukaemia</li> </ul>
	Capsule: 150 mg; 200 mg.
nilotinib	– Imatinib-resistant chronic myeloid leukaemia
	Injection: 50 mg/10 mL in 10- mL vial; 100 mg/20 mL in 20- mL vial; 200 mg/40 mL in 40- mL vial.
oxaliplatin	Powder for injection: 50 mg, 100 mg in vial.
	<ul><li>Early stage colon cancer</li><li>Metastatic colorectal cancer</li></ul>
	Powder for injection: 6 mg/ mL.
paclitaxel	<ul> <li>Epithelial ovarian cancer</li> <li>Early stage breast cancer</li> <li>Metastatic breast cancer</li> <li>Kaposi sarcoma</li> <li>Nasopharyngeal cancer</li> <li>Non-small cell lung cancer</li> <li>Ovarian germ cell tumour</li> </ul>
procarbazine	Capsule: 50 mg (as hydrochloride).
rituximab	Injection: 100 mg/10 mL in 10- mL vial; 500 mg/50 mL in 50- mL vial.  — Diffuse large B-cell lymphoma  — Chronic lymphocytic leukaemia  — Follicular lymphoma.
	Solid oral dosage form: 40 mg.
tioguanine <b>[c]</b>	– Acute lymphoblastic leukaemia.
	Powder for injection: 60 mg; 150 mg; 440 mg in vial
trastuzumab	<ul> <li>Early stage HER2 positive breast cancer</li> <li>Metastatic HER2 positive breast cancer.</li> </ul>
vinblastine	Powder for injection: 10 mg (sulfate) in vial.
	<ul> <li>Hodgkin lymphoma</li> <li>Kaposi sarcoma.</li> <li>Testicular germ cell tumour</li> <li>Ovarian germ cell tumour</li> </ul>

	Down London State of London Control of Line 1
vincristine	<b>Powder for injection:</b> 1 mg; 5 mg (sulfate) in vial.
	– Diffuse large B-cell lymphoma
	– Gestational trophoblastic neoplasia
	– Hodgkin lymphoma
	– Kaposi sarcoma
	– Follicular lymphoma
	– Retinoblastoma
	– Rhabdomyosarcoma
	– Ewing sarcoma
	– Acute lymphoblastic leukaemia
	– Wilms tumour
	– Burkitt lymphoma.
	Injection: 10 mg/mL in 1- mL vial; 50 mg/5 mL in 5- mL vial.
vinorelbine	– Non-small cell lung cancer
	– Metastatic breast cancer
	Concentrate solution for infusion: 4 mg/5 mL in 5- mL vial.
zoledronic acid	<b>Solution for infusion</b> : 4 mg/100 mL in 100- mL bottle.
	– Malignancy-related bone disease
8.3 Hormones and antihormones	1
Complementary List	
	Tablet: 1 mg.
$\square$ anastrozole	– Early stage breast cancer
	– Metastatic breast cancer.
□ bisolute:J-	Tablet: 50 mg.
□ bicalutamide	– Metastatic prostate cancer.
	<i>Injection:</i> 4 mg/ mL in 1- mL ampoule (as disodium phosphate salt).
dexamethasone	Oral liquid: 2 mg/5 mL [c].
	– Acute lymphoblastic leukaemia.
	Dose form
□ leuprorelin	– Early stage breast cancer
	<ul> <li>Metastatic prostate cancer</li> </ul>
	Powder for injection: 100 mg (as sodium succinate) in vial.
hydrocortisone	– Acute lymphoblastic leukaemia.
	Injection: 40 mg/ mL (as sodium succinate) in 1- mL single-dose vial
methylprednisolone <b>[c]</b>	and
	5- mL multi-dose vials; 80 mg/ mL (as sodium succinate) in 1- mL
	single-dose vial.
	– Acute lymphoblastic leukamia.

	Oral liquid: 5 mg/ mL [c].
□ prednisolone	Tablet: 5 mg; 25 mg.
	<ul> <li>Chronic lymphocytic leukaemia</li> <li>Diffuse large B-cell lymphoma</li> <li>Hodgkin lymphoma</li> <li>Follicular lymphoma</li> <li>Acute lymphoblastic leukaemia</li> <li>Burkitt lymphoma</li> </ul>
tamoxifen	Tablet: 10 mg; 20 mg (as citrate).
	<ul><li>Early stage breast cancer</li><li>Metastatic breast cancer</li></ul>
9. ANTIPARKINSONISM MEDICINES	
□ biperiden	Injection: 5 mg (lactate) in 1- mL ampoule.
L biperiden	Tablet: 2 mg (hydrochloride).
levodopa + □ carbidopa	<b>Tablet:</b> 100 mg + 10 mg; 100 mg + 25 mg; 250 mg + 25 mg
10. MEDICINES AFFECTING THE BLO	OD
10.1 Antianaemia medicines	
ferrous salt	Oral liquid: equivalent to 25 mg iron (as sulfate)/ mL.
lerrous sait	Tablet: equivalent to 60 mg iron.
ferrous salt + folic acid	<b>Tablet:</b> equivalent to 60 mg iron + 400 micrograms folic acid (nutritional supplement for use during pregnancy).
	Tablet: 400 micrograms*; 1 mg; 5 mg.
folic acid	*periconceptual use for prevention of first occurrence of neural tube defects
hydroxocobalamin	<b>Injection:</b> 1 mg (as acetate, as hydrochloride <b>or</b> as sulfate) in 1-mL ampoule.
Complementary List	
□erythropoiesis-stimulating agents*	Injection: pre-filled syringe
	1000IU/ 0.5 mL; 2000IU/ 0.5 mL; 3000IU/ 0.3 mL; 4000IU/ 0.4 mL; 5000IU/ 0.5 mL; 6000IU/ 0.6 mL; 8000IU/ 0.8mL; 10 000IU/ 1 mL; 20 000IU/ 0.5 mL; 40 000IU/ 1 mL
	* the square box applies to epoetin alfa, beta and theta, darbepoetin alfa, methoxy polyethylene glycol-epoetin beta, and their respective biosimilars.
10.2 Medicines affecting coagulation	
	Injection: ampoule or pre-filled syringe
□ enoxaparin*	20 mg/0.2 mL; 40 mg/0.4 mL; 60 mg/0.6 mL; 80 mg/0.8 mL; 100 mg/1 mL; 120 mg/0.8 mL; 150 mg/1 mL
	*Alternatives are limited to nadroparin and dalteparin

heparin sodium	Injection: 1000 IU/ mL; 5000 IU/ mL; 20 000 IU/ mL in 1- mL ampoule.
alestono en adicar o	Injection: 1 mg/ mL [c]; 10 mg/ mL in 5- mL ampoule.
phytomenadione	Tablet: 10 mg.
protamine sulfate	Injection: 10 mg/ mL in 5- mL ampoule.
tranexamic acid	Injection: 100 mg/ mL in 10- mL ampoule.
□ warfarin	Tablet: 1 mg; 2 mg; 5 mg (sodium salt).
Complementary List <b>[c]</b>	
I	Injection: 4 micrograms/ mL (as acetate) in 1- mL ampoule.
desmopressin	Nasal spray: 10 micrograms (as acetate) per dose
heparin sodium	Injection: 1000 IU/ mL; 5000 IU/ mL in 1- mL ampoule.
protamine sulfate	Injection: 10 mg/ mL in 5- mL ampoule.
□ warfarin	Tablet: 0.5 mg; 1 mg; 2 mg; 5 mg (sodium salt).
10.3 Other medicines for haemo	oglobinopathies
Complementary List	
deferoxamine*	Powder for injection: 500 mg (mesilate) in vial.  * Deferasirox oral form may be an alternative, depending on cost and
	availability.
hydroxycarbamide	availability.  Solid oral dosage form: 200 mg; 500 mg; 1 g.
	· ·
	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES
11. BLOOD PRODUCTS OF HU 11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES
11. BLOOD PRODUCTS OF HU 11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the shortages and meet the transfusion requi	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES  Its  Issembly resolution WHA63.12, WHO recognizes that achieving self- is preclude it, in the supply of safe blood components based on voluntary, the security of that supply are important national goals to prevent blood
11. BLOOD PRODUCTS OF HU 11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the shortages and meet the transfusion requi- with the WHO requirements.	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES  Its  Issembly resolution WHA63.12, WHO recognizes that achieving self- is preclude it, in the supply of safe blood components based on voluntary, the security of that supply are important national goals to prevent blood
11. BLOOD PRODUCTS OF HU 11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the shortages and meet the transfusion requi- with the WHO requirements.  fresh-frozen plasma	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES  Its  Issembly resolution WHA63.12, WHO recognizes that achieving self- is preclude it, in the supply of safe blood components based on voluntary, the security of that supply are important national goals to prevent blood
11. BLOOD PRODUCTS OF HU  11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the shortages and meet the transfusion requiwith the WHO requirements.  fresh-frozen plasma platelets	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES  Its  Issembly resolution WHA63.12, WHO recognizes that achieving self- is preclude it, in the supply of safe blood components based on voluntary, the security of that supply are important national goals to prevent blood
11. BLOOD PRODUCTS OF HU  11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the shortages and meet the transfusion requirements.  fresh-frozen plasma platelets red blood cells	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES  Its  Issembly resolution WHA63.12, WHO recognizes that achieving self- is preclude it, in the supply of safe blood components based on voluntary, the security of that supply are important national goals to prevent blood
11. BLOOD PRODUCTS OF HU  11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the shortages and meet the transfusion requiwith the WHO requirements.  fresh-frozen plasma platelets red blood cells whole blood  11.2 Plasma-derived medicines	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES  Its  Issembly resolution WHA63.12, WHO recognizes that achieving self- is preclude it, in the supply of safe blood components based on voluntary, the security of that supply are important national goals to prevent blood
11. BLOOD PRODUCTS OF HU  11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the shortages and meet the transfusion requiwith the WHO requirements.  fresh-frozen plasma platelets red blood cells whole blood  11.2 Plasma-derived medicines	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES  Its  Issembly resolution WHA63.12, WHO recognizes that achieving self- preclude it, in the supply of safe blood components based on voluntary, the security of that supply are important national goals to prevent blood irements of the patient population. All preparations should comply  anould comply with the WHO requirements.
11. BLOOD PRODUCTS OF HU  11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the shortages and meet the transfusion requiwith the WHO requirements.  fresh-frozen plasma platelets red blood cells whole blood  11.2 Plasma-derived medicines All human plasma-derived medicines shows	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES  Its  Issembly resolution WHA63.12, WHO recognizes that achieving self- preclude it, in the supply of safe blood components based on voluntary, the security of that supply are important national goals to prevent blood irements of the patient population. All preparations should comply  anould comply with the WHO requirements.
11. BLOOD PRODUCTS OF HU  11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the shortages and meet the transfusion requiwith the WHO requirements.  fresh-frozen plasma  platelets  red blood cells  whole blood  11.2 Plasma-derived medicines All human plasma-derived medicines should be a shoul	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES  Its  Issembly resolution WHA63.12, WHO recognizes that achieving self- is preclude it, in the supply of safe blood components based on voluntary, in esecurity of that supply are important national goals to prevent blood irements of the patient population. All preparations should comply  Indicate the provided HTML requirements and the provided HTML requirements.
11. BLOOD PRODUCTS OF HU  11.1 Blood and blood componen In accordance with the World Health Ass sufficiency, unless special circumstances non-remunerated blood donation, and the shortages and meet the transfusion requive with the WHO requirements.  fresh-frozen plasma platelets red blood cells whole blood  11.2 Plasma-derived medicines All human plasma-derived medicines should be an immunoglobulins anti-D immunoglobulin	Solid oral dosage form: 200 mg; 500 mg; 1 g.  IMAN ORIGIN AND PLASMA SUBSTITUTES  Its  Issembly resolution WHA63.12, WHO recognizes that achieving self- is preclude it, in the supply of safe blood components based on voluntary, the security of that supply are important national goals to prevent blood irements of the patient population. All preparations should comply  Injection: 250 micrograms in single-dose vial.

	Intramuscular administration: 16% protein solution.*
	Intravenous administration: 5%; 10% protein solution.**
normal immunoglobulin	Subcutaneous administration: 15%; 16% protein solution.*
	* Indicated for primary immune deficiency. **Indicated for primary immune deficiency and Kawasaki disease.
11.2.2 Blood coagulation factors	
Complementary List	
□ coagulation factor VIII	Powder for injection: 500 IU/vial.
□ coagulation factor IX	Powder for injection: 500 IU/vial, 1000 IU/vial.
11.3 Plasma substitutes	
	Injectable solution: 6%.
□ dextran 70*	* Polygeline, injectable solution, 3.5% is considered as equivalent.
12. CARDIOVASCULAR MEDICINES	
concomitantly, including increased adherence an	diseases may have advantages over the single medicines given and reduced pill burden. The potential value of fixed-dose combinations latory approval and demonstrated bioavailability for the management ized.
12.1 Antianginal medicines	
□ bisoprolol*	<b>Tablet:</b> 1.25 mg; 5 mg.
□ bisopioioi	* □ includes metoprolol and carvedilol as alternatives.
glyceryl trinitrate	Tablet (sublingual): 500 micrograms.
□ isosorbide dinitrate	Tablet (sublingual): 5 mg.
verapamil	Tablet: 40 mg; 80 mg (hydrochloride).
12.2 Antiarrhythmic medicines	
□ bisoprolol*	<b>Tablet:</b> 1.25 mg; 5 mg.
□ bisopioioi	* □ includes metoprolol and carvedilol as alternatives.
	Injection: 250 micrograms/ mL in 2- mL ampoule.
digoxin	Oral liquid: 50 micrograms/ mL.
	Tablet: 62.5 micrograms; 250 micrograms.
epinephrine (adrenaline)	Injection: 100 micrograms/ mL (as acid tartrate or hydrochloride) in 10- mL ampoule.
lidocaine	Injection: 20 mg (hydrochloride)/ mL in 5- mL ampoule.
voranamil	Injection: 2.5 mg (hydrochloride)/ mL in 2- mL ampoule.
verapamil	<b>Tablet:</b> 40 mg; 80 mg (hydrochloride).
Complementary List	

	Injection: 50 mg/ mL in 3- mL ampoule (hydrochloride).
amiodarone	Tablet: 100 mg; 200 mg; 400 mg (hydrochloride).
12.3 Antihypertensive medicines	
□ amlodipine	Tablet: 5 mg (as maleate, mesylate or besylate).
	<b>Tablet:</b> 1.25 mg; 5 mg.
□ bisoprolol*	* includes atenolol, metoprolol and carvedilol as alternatives. Atenolol should not be used as a first-line agent in uncomplicated hypertension in patients >60 years
□ enalapril	Tablet: 2.5 mg; 5 mg (as hydrogen maleate).
	Powder for injection: 20 mg (hydrochloride) in ampoule.
	Tablet: 25 mg; 50 mg (hydrochloride).
hydralazine*	* Hydralazine is listed for use only in the acute management of severe pregnancy-induced hypertension. Its use in the treatment of essential hypertension is not recommended in view of the evidence of greater efficacy and safety of other medicines.
□ hydrochlorothiazide	Oral liquid: 50 mg/5 mL.
2 Hydrochiofodiazae	Solid oral dosage form: 12.5 mg; 25 mg.
	Tablet: 250 mg.
methyldopa*	* Methyldopa is listed for use only in the management of pregnancy-induced hypertension. Its use in the treatment of essential hypertension is not recommended in view of the evidence of greater efficacy and safety of other medicines.
□ losartan	<b>Tablet:</b> 25 mg; 50 mg; 100 mg.
Complementary List	
sodium nitroprusside	Powder for infusion: 50 mg in ampoule.
12.4 Medicines used in heart failure	
□ bisoprolol*	<b>Tablet:</b> 1.25 mg; 5 mg.
L bisoproioi	*□ includes metoprolol and carvedilol as alternatives.
	Injection: 250 micrograms/ mL in 2- mL ampoule.
digoxin	Oral liquid: 50 micrograms/ mL.
	Tablet: 62.5 micrograms; 250 micrograms.
□ enalapril	Tablet: 2.5 mg; 5 mg (as hydrogen maleate).
	Injection: 10 mg/ mL in 2- mL ampoule.
□ furosemide	Oral liquid: 20 mg/5 mL [c].
	Tablet: 40 mg.
□ hydrochlorothiazide	Oral liquid: 50 mg/5 mL.
in Try at oct motor mazine	Solid oral dosage form: 25 mg.

□ losartan	<b>Tablet:</b> 25 mg; 50 mg; 100 mg
spironolactone	Tablet: 25 mg.
Complementary List	
dopamine	Injection: 40 mg/ mL (hydrochloride) in 5- mL vial.
12.5 Antithrombotic medici	nes
12.5.1 Anti-platelet medicin	nes
acetylsalicylic acid	Tablet: 100 mg.
clopidogrel	<b>Tablet:</b> 75 mg; 300 mg
12.5.2 Thrombolytic medici	nes
Complementary List	
streptokinase	<b>Powder for injection:</b> 1.5 million IU in vial.
12.6 Lipid-lowering agents	
□ simvastatin*	<b>Tablet:</b> 5 mg; 10 mg; 20 mg; 40 mg.
2 Sint vastatiit	* For use in high-risk patients.
13. DERMATOLOGICAL MED	ICINES (topical)
13.1 Antifungal medicines	
□ miconazole	Cream or ointment: 2% (nitrate).
selenium sulfide	Detergent-based suspension: 2%.
sodium thiosulfate	Solution: 15%.
terbinafine	Cream: 1% or Ointment: 1% terbinafine hydrochloride.
13.2 Anti-infective medicine	es
mupirocin	Cream (as mupirocin calcium): 2%.
пирпост	Ointment: 2%.
potassium permanganate	Aqueous solution: 1:10 000.
silver sulfadiazine <b>a</b>	Cream: 1%.
snver sunaurazme d	a >2 months.

13.3 Anti-inflammatory and antiprur	itic medicines
□ betamethasone <b>a</b>	Cream or ointment: 0.1% (as valerate).
in betametrasone <b>a</b>	a Hydrocortisone preferred in neonates.
□ calamine	Lotion.
□ hydrocortisone	Cream or ointment: 1% (acetate).
13.4 Medicines affecting skin differe	ntiation and proliferation
benzoyl peroxide	Cream or lotion: 5%.
coal tar	Solution: 5%.
fluorouracil	Ointment: 5%.
□ podophyllum resin	<b>Solution:</b> 10% to 25%.
salicylic acid	Solution: 5%.
urea	Cream or ointment: 5%; 10%.
13.5 Scabicides and pediculicides	
□ benzyl benzoate <b>a</b>	Lotion: 25%.
L belizyi belizoate	a >2 years.
permethrin	Cream: 5%.
permediant	Lotion: 1%.
14. DIAGNOSTIC AGENTS	
14.1 Ophthalmic medicines	
fluorescein	Eye drops: 1% (sodium salt).
□ tropicamide	Eye drops: 0.5%.
14.2 Radiocontrast media	
□ amidotrizoate	<b>Injection:</b> 140 mg to 420 mg iodine (as sodium <b>or</b> meglumine salt)/ mL in 20- mL ampoule.
barium sulfate	Aqueous suspension.
□iohexol	<b>Injection:</b> 140 mg to 350 mg iodine/ mL in 5- mL; 10- mL; 20- mL ampoules.
Complementary List	
barium sulfate <b>[c]</b>	Aqueous suspension.
□ meglumine iotroxate	Solution: 5 g to 8 g iodine in 100 mL to 250 mL.
15. DISINFECTANTS AND ANTISEPTI	cs
15.1 Antiseptics	
□ chlorhexidine	Solution: 5% (digluconate).
□ ethanol	Solution: 70% (denatured).
□ povidone iodine	<b>Solution:</b> 10% (equivalent to 1% available iodine).

15.2 Disinfectants	
	Solution: containing ethanol 80% volume /volume
alcohol based hand rub	<b>Solution:</b> containing isopropyl alcohol 75% volume/volume
☐ chlorine base compound	<b>Powder:</b> (0.1% available chlorine) for solution.
□ chloroxylenol	Solution: 4.8%.
glutaral	Solution: 2%.
16. DIURETICS	
amiloride	Tablet: 5 mg (hydrochloride).
	Injection: 10 mg/ mL in 2- mL ampoule.
□ furosemide	Oral liquid: 20 mg/5 mL [c].
	<b>Tablet:</b> 10 mg <b>[c]</b> ; 20 mg <b>[c]</b> ; 40 mg.
□ hydrochlorothiazide	Solid oral dosage form: 25 mg.
mannitol	Injectable solution: 10%; 20%.
spironolactone	Tablet: 25 mg.
Complementary List <b>[c]</b>	
□ hydrochlorothiazide	Tablet (scored): 25 mg.
mannitol	Injectable solution: 10%; 20%.
spironolactone	Oral liquid: 5 mg/5 mL; 10 mg/5 mL; 25 mg/5 mL.
<i>οριτοποιαειόπε</i>	Tablet: 25 mg.
17. GASTROINTESTINAL MEDIC	INES
Complementary List <b>[c]</b>	
□ pancreatic enzymes	Age-appropriate formulations and doses including lipase, protease and amylase.
17.1 Antiulcer medicines	
	Powder for injection: 40 mg in vial
□ omeprazole	<b>Powder for oral liquid:</b> 20 mg; 40 mg sachets.
	<b>Solid oral dosage form:</b> 10 mg; 20 mg; 40 mg.
	<b>Injection:</b> 25 mg/ mL (as hydrochloride) in 2- mL ampoule.
□ ranitidine	Oral liquid: 75 mg/5 mL (as hydrochloride).
	<b>Tablet:</b> 150 mg (as hydrochloride).

17.2 Antiemetic medicines	
	<b>Injection:</b> 4 mg/ mL in 1- mL ampoule (as disodium phosphate salt).
dexamethasone	Oral liquid: 0.5 mg/5 mL; 2 mg/5 mL.
	Solid oral dosage form: 0.5 mg; 0.75 mg; 1.5 mg; 4 mg.
	Injection: 5 mg (hydrochloride)/ mL in 2- mL ampoule.
metoclopramide <b>a</b>	Oral liquid: 5 mg/5 mL [c].
metocropramide <b>a</b>	Tablet: 10 mg (hydrochloride).
	a Not in neonates.
	Injection: 2 mg base/ mL in 2- mL ampoule (as hydrochloride).
_	Oral liquid: 4 mg base/5 mL.
ondansetron <b>a</b>	<b>Solid oral dosage form:</b> Eq 4 mg base; Eq 8 mg base; Eq 24 mg base.
	<b>a</b> >1 month.
17.3 Anti-inflammatory medicines	
	Retention enema.
□ sulfasalazine	Suppository: 500 mg.
	Tablet: 500 mg.
Complementary List	
	Retention enema.
□ hydrocortisone	Suppository: 25 mg (acetate).
	(the $\square$ only applies to hydrocortisone retention enema).
17.4 Laxatives	
□ senna	<b>Tablet:</b> 7.5 mg (sennosides) (or traditional dosage forms).

17.5 Medicines used in diarrhoea		
17.5.1 Oral rehydration		
	Powder for dilution in	200 mL; 500 mL; 1 L.
oral rehydration salts	hydrogen carbonate (so the stability of this latte	75 mEq 75 mEq or mmol/L 65 mEq or mmol/L 20 mEq or mmol/L 10 mmol/L 245 mOsm/L 13.5 g/L 2.6 g/L 1.5 g/L trate*: 2.9 g/L drate may be replaced by sodium odium bicarbonate) 2.5 g/L. However, as er formulation is very poor under tropical mended only when manufactured for
17.5.2 Medicines for diarrhoea	1	
	Solid oral dosage form	ı: 20 mg.
zinc sulfate*	* In acute diarrhoea zin oral rehydration salts.	c sulfate should be used as an adjunct to
18. HORMONES, OTHER ENDOCRI	NE MEDICINES AND CO	ONTRACEPTIVES
18.1 Adrenal hormones and synti	netic substitutes	
fludrocortisone	Tablet: 100 micrograms	s (acetate).
hydrocortisone	<b>Tablet:</b> 5 mg; 10 mg; 20	mg.
18.2 Androgens	1	
Complementary List		
testosterone	Injection: 200 mg (enan	thate) in 1- mL ampoule.
18.3 Contraceptives	1	
18.3.1 Oral hormonal contracepti	ves	
$\square$ ethinylestradiol + $\square$ levonorgestrel	Tablet: 30 micrograms	+ 150 micrograms.
□ ethinylestradiol + □ norethisterone	Tablet: 35 micrograms	+ 1 mg.
levonorgestrel	Tablet: 30 micrograms;	750 micrograms (pack of two); 1.5 mg.
ulipristal	Tablet: 30 mg (as aceta	te)

18.3.2 Injectable hormonal contrace	eptives
estradiol cypionate + medroxyprogesterone acetate	<b>Injection:</b> 5 mg + 25 mg.
	Injection (intramuscular): 150 mg/ mL in 1- mL vial.
medroxyprogesterone acetate	<b>Injection (subcutaneous):</b> 104 mg/0.65 mL in pre-filled syringe or single-dose injection delivery system.
norethisterone enantate	Oily solution: 200 mg/ mL in 1- mL ampoule.
18.3.3 Intrauterine devices	
copper-containing device	
levonorgestrel-releasing intrauterine system	Intrauterine system with reservoir containing 52 mg of levonorestrel
18.3.4 Barrier methods	1
condoms	
diaphragms	
18.3.5 Implantable contraceptives	1
etonogestrel-releasing implant	Single-rod etonogestrel-releasing implant, containing 68 mg of etonogestrel.
levonorgestrel-releasing implant	Two-rod levonorgestrel-releasing implant, each rod containing 75 mg of levonorgestrel (150 mg total).
18.3.6 Intravaginal contraceptives	1
progesterone vaginal ring*	Progesterone-releasing vaginal ring containing 2.074 g of micronized progesterone.
progesterone vagniai fing	*For use in women actively breastfeeding at least 4 times per day
18.4 Estrogens	•
18.5 Insulins and other medicines u	sed for diabetes
□ gliclazide*	Solid oral dosage form: (controlled-release tablets) 30 mg; 60 mg;
	80 mg.
alueacon	* glibenclamide not suitable above 60 years.
glucagon	Injection: 1 mg/ mL.
insulin injection (soluble)	Injection: 40 IU/ mL in 10- mL vial; 100 IU/ mL in 10- mL vial.
intermediate-acting insulin	<b>Injection:</b> 40 IU/ mL in 10- mL vial; 100 IU/ mL in 10- mL vial (as compound insulin zinc suspension <b>or</b> isophane insulin).
metformin	Tablet: 500 mg (hydrochloride).
Complementary List <b>[c]</b>	
metformin	Tablet: 500 mg (hydrochloride).

18.6 Ovulation inducers	
Complementary List	
clomifene	Tablet: 50 mg (citrate).
18.7 Progestogens	
□ medroxyprogesterone acetate	Tablet: 5 mg.
18.8 Thyroid hormones and antithyro	oid medicines
levothyroxine	<b>Tablet:</b> 25 micrograms <b>[c]</b> ; 50 micrograms; 100 micrograms (sodium salt).
potassium iodide	Tablet: 60 mg.
□ propylthiouracil	Tablet: 50 mg.
Complementary List <b>[c]</b>	
Lugol's solution	Oral liquid: about 130 mg total iodine/ mL.
potassium iodide	Tablet: 60 mg.
propylthiouracil	Tablet: 50 mg.
19. IMMUNOLOGICALS	
19.1 Diagnostic agents	
All tuberculins should comply with the WHO	requirements for tuberculins.
tuberculin, purified protein derivative (PPD)	Injection.
19.2 Sera and immunoglobulins	
All plasma fractions should comply with the W	/HO requirements.
Anti yonom immunoglobulin*	Injection.
Anti-venom immunoglobulin*	* Exact type to be defined locally.
diphtheria antitoxin	<b>Injection:</b> 10 000 IU; 20 000 IU in vial.

#### 19.3 Vaccines

WHO immunization policy recommendations are published in vaccine position papers on the basis of recommendations made by the Strategic Advisory Group of Experts on Immunization (SAGE).

WHO vaccine position papers are updated three to four times per year. The list below details the vaccines for which there is a recommendation from SAGE and a corresponding WHO position paper as at **10 February 2017**. The most recent versions of the WHO position papers, reflecting the current evidence related to a specific vaccine and the related recommendations, can be accessed at any time on the WHO website at:

http://www.who.int/immunization/documents/positionpapers/en/index.html.

Vaccine recommendations may be universal or conditional (e.g., in certain regions, in some high-risk populations or as part of immunization programmes with certain characteristics). Details are available in the relevant position papers, and in the Summary Tables of WHO Routine Immunization Recommendations available on the WHO website at:

http://www.who.int/immunization/policy/immunization\_tables/en/index.html.

Selection of vaccines from the Model List will need to be determined by each country after consideration of international recommendations, epidemiology and national priorities.

All vaccines should comply with the WHO requirements for biological substances.

WHO noted the need for vaccines used in children to be polyvalent.

Recommendations for all	
BCG vaccine	
diphtheria vaccine	
Haemophilus influenzae type b vaccine	
hepatitis B vaccine	
HPV vaccine	
measles vaccine	
pertussis vaccine	
pneumococcal vaccine	
poliomyelitis vaccine	
rotavirus vaccine	
rubella vaccine	
tetanus vaccine	
Recommendations for certain regions	
Japanese encephalitis vaccine	
yellow fever vaccine	
tick-borne encephalitis vaccine	
Recommendations for some high-risk populati	ons

cholera vaccine	
hepatitis A vaccine	
meningococcal meningitis vaccine	
rabies vaccine	
typhoid vaccine	
Recommendations for immunization programm	nes with certain characteristics
influenza vaccine (seasonal)	
mumps vaccine	
varicella vaccine	
20. MUSCLE RELAXANTS (PERIPHERA	ALLY-ACTING) AND CHOLINESTERASE INHIBITORS
20. MUSCLE RELAXANTS (PERIPHERA  □ atracurium	ALLY-ACTING) AND CHOLINESTERASE INHIBITORS  Injection: 10 mg/ mL (besylate).
-	-
□ atracurium	Injection: 10 mg/ mL (besylate).  Injection: 500 micrograms in 1- mL ampoule; 2.5 mg
□ atracurium  neostigmine	Injection: 10 mg/ mL (besylate).  Injection: 500 micrograms in 1- mL ampoule; 2.5 mg (metilsulfate) in 1- mL ampoule.
□ atracurium	Injection: 10 mg/ mL (besylate).  Injection: 500 micrograms in 1- mL ampoule; 2.5 mg (metilsulfate) in 1- mL ampoule.  Tablet: 15 mg (bromide).
□ atracurium  neostigmine	Injection: 10 mg/ mL (besylate).  Injection: 500 micrograms in 1- mL ampoule; 2.5 mg (metilsulfate) in 1- mL ampoule.  Tablet: 15 mg (bromide).  Injection: 50 mg (chloride)/ mL in 2- mL ampoule.
□ atracurium  neostigmine  suxamethonium	Injection: 10 mg/ mL (besylate).  Injection: 500 micrograms in 1- mL ampoule; 2.5 mg (metilsulfate) in 1- mL ampoule.  Tablet: 15 mg (bromide).  Injection: 50 mg (chloride)/ mL in 2- mL ampoule.  Powder for injection (chloride), in vial.
□ atracurium  neostigmine  suxamethonium  □ vecuronium [c]  Complementary List	Injection: 10 mg/ mL (besylate).  Injection: 500 micrograms in 1- mL ampoule; 2.5 mg (metilsulfate) in 1- mL ampoule.  Tablet: 15 mg (bromide).  Injection: 50 mg (chloride)/ mL in 2- mL ampoule.  Powder for injection (chloride), in vial.
□ atracurium  neostigmine  suxamethonium  □ vecuronium [c]	Injection: 10 mg/ mL (besylate).  Injection: 500 micrograms in 1- mL ampoule; 2.5 mg (metilsulfate) in 1- mL ampoule.  Tablet: 15 mg (bromide).  Injection: 50 mg (chloride)/ mL in 2- mL ampoule.  Powder for injection (chloride), in vial.  Powder for injection: 10 mg (bromide) in vial.

21. OPHTHALMOLOGICAL PRE	PARATIONS			
21.1 Anti-infective agents				
aciclovir Ointment: 3% W/W.				
azithromycin	Solution (eye drops): 1.5%.			
erythromycin*	Ointment: 0.5% [c]			
erythtomychi	*Infections due to Chlamydia trachomatis or Neisseria gonorrhoea.			
□ gentamicin	Solution (eye drops): 0.3% (sulfate).			
natamycin	Suspension: (eye drops): 5%			
□ ofloxacin	Solution (eye drops): 0.3%.			
□ tetracycline	Eye ointment: 1% (hydrochloride).			
21.2 Anti-inflammatory agent	s			
□ prednisolone	<b>Solution (eye drops):</b> 0.5% (sodium phosphate).			
21.3 Local anaesthetics				
□ tetracaine <b>a</b>	Solution (eye drops): 0.5% (hydrochloride).			
in tetracante a	a Not in preterm neonates.			
21.4 Miotics and antiglaucoma	a medicines			
acetazolamide	Tablet: 250 mg.			
latanoprost	Solution (eye drops): latanoprost 50 micrograms/mL			
□ pilocarpine	Solution (eye drops): 2%; 4% (hydrochloride or nitrate).			
□ timolol	Solution (eye drops): 0.25%; 0.5% (as hydrogen maleate).			
21.5 Mydriatics				
	<b>Solution (eye drops):</b> 0.1%; 0.5%; 1% (sulfate).			
atropine* <b>a</b>	* <b>[c]</b> Or homatropine (hydrobromide) or cyclopentolate (hydrochloride).			
	a >3 months.			
Complementary List				
epinephrine (adrenaline)	Solution (eye drops): 2% (as hydrochloride).			
21.6 Anti-vascular endothelia	growth factor (VEGF) preparations			
Complementary List				
bevacizumab	Injection: 25 mg/ mL.			
22. OXYTOCICS AND ANTIOXY	TOCICS			
22.1 Oxytocics				
□ ergometrine	<b>Injection:</b> 200 micrograms (hydrogen maleate) in 1- mL ampoule.			
	I .			

	Tablet: 200 micrograms.	
	<ul> <li>Management of incomplete abortion and miscarriage;</li> </ul>	
	<ul> <li>Prevention and treatment of postpartum haemorrhage where oxytocin is not available or cannot be safely used</li> </ul>	
misoprostol	Vaginal tablet: 25 micrograms.*	
	* Only for use for induction of labour where appropriate	
	facilities are available.	
oxytocin	Injection: 10 IU in 1- mL.	
Complementary List		
mifepristone* – misoprostol*		
Where permitted under national law and	Tablet 200 mg – tablet 200 micrograms.	
where culturally acceptable.	* Requires close medical supervision.	
22.2 Antioxytocics (tocolytics)		
nifedipine	Immediate-release capsule: 10 mg.	
23. PERITONEAL DIALYSIS SOLU	•	
Complementary List		
intraneritoneal dialusis solution		
intraperitoneal dialysis solution	Department colution	
intraperitoneal dialysis solution (of appropriate composition)	Parenteral solution.	
(of appropriate composition)	Parenteral solution.  AND BEHAVIOURAL DISORDERS	
(of appropriate composition)	AND BEHAVIOURAL DISORDERS	
(of appropriate composition)  24. MEDICINES FOR MENTAL A	AND BEHAVIOURAL DISORDERS	
(of appropriate composition)  24. MEDICINES FOR MENTAL A	AND BEHAVIOURAL DISORDERS disorders	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic	AND BEHAVIOURAL DISORDERS  disorders  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic	AND BEHAVIOURAL DISORDERS  disorders  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL.	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic  □ chlorpromazine  □ fluphenazine	AND BEHAVIOURAL DISORDERS  disorders  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL.  Tablet: 100 mg (hydrochloride).	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic  □ chlorpromazine	AND BEHAVIOURAL DISORDERS  disorders  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL.  Tablet: 100 mg (hydrochloride).  Injection: 25 mg (decanoate or enantate) in 1- mL ampoule.	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic  □ chlorpromazine  □ fluphenazine	AND BEHAVIOURAL DISORDERS  disorders  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL.  Tablet: 100 mg (hydrochloride).  Injection: 25 mg (decanoate or enantate) in 1- mL ampoule.  Injection: 5 mg in 1- mL ampoule.	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic  □ chlorpromazine  □ fluphenazine  □ haloperidol	AND BEHAVIOURAL DISORDERS  disorders  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL.  Tablet: 100 mg (hydrochloride).  Injection: 25 mg (decanoate or enantate) in 1- mL ampoule.  Injection: 5 mg in 1- mL ampoule.  Tablet: 2 mg; 5 mg.	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic  □ chlorpromazine  □ fluphenazine □ haloperidol risperidone	AND BEHAVIOURAL DISORDERS  disorders  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL.  Tablet: 100 mg (hydrochloride).  Injection: 25 mg (decanoate or enantate) in 1- mL ampoule.  Injection: 5 mg in 1- mL ampoule.  Tablet: 2 mg; 5 mg.	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic  □ chlorpromazine  □ fluphenazine □ haloperidol risperidone	Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule. Oral liquid: 25 mg (hydrochloride)/5 mL. Tablet: 100 mg (hydrochloride).  Injection: 25 mg (decanoate or enantate) in 1- mL ampoule.  Injection: 5 mg in 1- mL ampoule.  Tablet: 2 mg; 5 mg.  Solid oral dosage form: 0.25 mg to 6.0 mg.	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic  □ chlorpromazine  □ fluphenazine □ haloperidol  risperidone  Complementary List	Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule. Oral liquid: 25 mg (hydrochloride)/5 mL. Tablet: 100 mg (hydrochloride).  Injection: 25 mg (decanoate or enantate) in 1- mL ampoule.  Injection: 5 mg in 1- mL ampoule.  Tablet: 2 mg; 5 mg.  Solid oral dosage form: 0.25 mg to 6.0 mg.  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic  □ chlorpromazine  □ fluphenazine □ haloperidol  risperidone  Complementary List	Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL.  Tablet: 100 mg (hydrochloride).  Injection: 25 mg (decanoate or enantate) in 1- mL ampoule.  Injection: 5 mg in 1- mL ampoule.  Tablet: 2 mg; 5 mg.  Solid oral dosage form: 0.25 mg to 6.0 mg.  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL.	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic  □ chlorpromazine  □ fluphenazine □ haloperidol  risperidone  Complementary List  chlorpromazine [c]	Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL.  Tablet: 100 mg (hydrochloride).  Injection: 25 mg (decanoate or enantate) in 1- mL ampoule.  Injection: 5 mg in 1- mL ampoule.  Tablet: 2 mg; 5 mg.  Solid oral dosage form: 0.25 mg to 6.0 mg.  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL.  Tablet: 10 mg; 25 mg; 50 mg; 100 mg (hydrochloride).	
(of appropriate composition)  24. MEDICINES FOR MENTAL A  24.1 Medicines used in psychotic  □ chlorpromazine  □ fluphenazine □ haloperidol  risperidone  Complementary List  chlorpromazine [c]	Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule. Oral liquid: 25 mg (hydrochloride)/5 mL. Tablet: 100 mg (hydrochloride).  Injection: 25 mg (decanoate or enantate) in 1- mL ampoule.  Injection: 5 mg in 1- mL ampoule.  Tablet: 2 mg; 5 mg.  Solid oral dosage form: 0.25 mg to 6.0 mg.  Injection: 25 mg (hydrochloride)/ mL in 2- mL ampoule.  Oral liquid: 25 mg (hydrochloride)/5 mL. Tablet: 10 mg; 25 mg; 50 mg; 100 mg (hydrochloride).  Solid oral dosage form: 25 to 200 mg.	

24.2.1 Medicines used in depress	sive disorders		
□ amitriptyline	Tablet: 25 mg; 75mg. (hydrochloride).		
fluoxetine	Solid oral dosage form: 20 mg (as hydrochloride).		
Complementary List <b>[c]</b>			
fluoxetine <b>a</b>	Solid oral dosage form: 20 mg (as hydrochloride).		
jiuoxeiine <mark>u</mark>	a >8 years.		
24.2.2 Medicines used in bipolar	disorders		
carbamazepine	Tablet (scored): 100 mg; 200 mg.		
lithium carbonate	Solid oral dosage form: 300 mg.		
valproic acid (sodium valproate)	<b>Tablet (enteric-coated):</b> 200 mg; 500 mg (sodium valproate).		
24.3 Medicines for anxiety disord	lers		
□ diazepam	Tablet (scored): 2 mg; 5 mg.		
24.4 Medicines used for obsessiv	e compulsive disorders		
clomipramine	Capsule: 10 mg; 25 mg (hydrochloride).		
24.5 Medicines for disorders due	to psychoactive substance use		
nicotine replacement therapy (NRT)	Chewing gum: 2 mg; 4 mg (as polacrilex).		
meotile replacement incrapy (IVXI)	<b>Transdermal patch:</b> 5 mg to 30 mg/16 hrs; 7 mg to 21 mg/24 hrs.		
Complementary List			
	Concentrate for oral liquid: 5 mg/ mL; 10 mg/ mL (hydrochloride).		
□ methadone*	Oral liquid: 5 mg/5 mL; 10 mg/5 mL (hydrochloride).		
- memasone	* The square box is added to include buprenorphine. The medicines		
	should only be used within an established support programme.		
25. MEDICINES ACTING ON THE			
25.1 Antiasthmatic and medicine	s for chronic obstructive pulmonary disease		
□ beclometasone	Inhalation (aerosol): 50 micrograms (dipropionate) per dose; 100 micrograms (dipropionate) per dose (as CFC free forms).		
□ budesonide <b>[c]</b>	<b>Inhalation (aerosol):</b> 100 micrograms per dose; 200 micrograms per dose.		
□ budesonide + formoterol	<b>Dry powder inhaler:</b> 100 micrograms + 6 micrograms per dose; 200 micrograms + 6 micrograms per dose		
epinephrine (adrenaline)	<b>Injection:</b> 1 mg (as hydrochloride <b>or</b> hydrogen tartrate) in 1- mL ampoule.		
ipratropium bromide	Inhalation (aerosol): 20 micrograms/metered dose.		

	Inhalation (aerosol): 100 micrograms (as sulfate) per dose.	
	<b>Injection:</b> 50 micrograms (as sulfate)/ mL in 5- mL ampoule.	
□ salbutamol	<b>Metered dose inhaler (aerosol):</b> 100 micrograms (as sulfate) per dose.	
	<b>Respirator solution for use in nebulizers:</b> 5 mg (as sulfate)/ mL.	
26. SOLUTIONS CORRECTING WATER	R, ELECTROLYTE AND ACID-BASE DISTURBANCES	
26.1 Oral		
oral rehydration salts	See section 17.5.1.	
potassium chloride	Powder for solution.	
26.2 Parenteral		
glucose	<b>Injectable solution:</b> 5% (isotonic); 10% (hypertonic); 50% (hypertonic).	
	<b>Injectable solution:</b> 4% glucose, 0.18% sodium chloride (equivalent to Na+30 mmol/L, Cl- 30 mmol/L).	
glucose with sodium chloride	Injectable solution: 5% glucose, 0.9% sodium chloride (equivalent to Na+ 150 mmol/L and Cl- 150 mmol/L); 5% glucose, 0.45% sodium chloride (equivalent to Na+ 75 mmol/L and Cl- 75 mmol/L) [c].	
potassium chloride	Solution: 11.2% in 20- mL ampoule (equivalent to K+ 1.5 mmol/ mL, Cl- 1.5 mmol/ mL).  Solution for dilution: 7.5% (equivalent to K 1 mmol/ mL and Cl	
	1 mmol/ mL) [c]; 15% (equivalent to K 2 mmol/ mL and Cl 2 mmol/ mL) [c].	
sodium chloride	Injectable solution: 0.9% isotonic (equivalent to Na+ 154 mmol/L, Cl- 154 mmol/L).	
sodium hydrogen carbonate	<b>Injectable solution:</b> 1.4% isotonic (equivalent to Na+ 167 mmol/L, HCO <sub>3</sub> - 167 mmol/L).	
30drum nydrogen carbonate	<b>Solution:</b> 8.4% in 10- mL ampoule (equivalent to Na+ 1000 mmol/L, HCO <sub>3</sub> -1000 mmol/L).	
☐ sodium lactate, compound solution	Injectable solution.	
26.3 Miscellaneous		
water for injection	2- mL; 5- mL; 10- mL ampoules.	
27. VITAMINS AND MINERALS		
ascorbic acid	Tablet: 50 mg.	
calcium	Tablet: 500 mg (elemental).	
	Oral liquid: 400 IU/ mL.	
colecalciferol [c]	Solid oral dosage form: 400 IU; 1000 IU.	
	* Ergocalciferol can be used as an alternative.	

iodine  Capsule: 2  Iodized oi ampoule (or dispenser left)  □ nicotinamide  □ pyridoxine  Tablet: 50  Capsule: 5  Oral oily sortispenser.  Tablet (sugmater)  Water-mis 2- mL amp  riboflavin  Tablet: 5 m  sodium fluoride  thiamine  Tablet: 50  Complementary List	d: 1 mL (480 mg iodine); 0.5 mL (240 mg iodine) in oral <b>or</b> injectable); 0.57 mL (308 mg iodine) in pottle.
iodine  Iodized oi ampoule (o dispenser la pyridoxine  Tablet: 50  pyridoxine  Tablet: 25  Capsule: 5 Oral oily statispenser.  Tablet (sugarter la pyridoxine)  Tablet: 5 m  sodium fluoride  thiamine  Tablet: 50  Complementary List  calcium gluconate  Injection: 5	d: 1 mL (480 mg iodine); 0.5 mL (240 mg iodine) in oral <b>or</b> injectable); 0.57 mL (308 mg iodine) in oottle.  mg.  mg (hydrochloride).  0 000 IU; 100 000 IU; 200 000 IU (as palmitate).
ampoule (dispenser land)  □ nicotinamide  pyridoxine  Tablet: 50  Capsule: 5  Oral oily so dispenser.  Tablet (sugartise)  Water-mis 2- mL ampoule (dispenser land)  Tablet: 50  Complementary List  calcium gluconate  Injection: 5	oral <b>or</b> injectable); 0.57 mL (308 mg iodine) in bottle.  mg.  mg (hydrochloride).  0 000 IU; 100 000 IU; 200 000 IU (as palmitate).
pyridoxine  Tablet: 25  Capsule: 5 Oral oily s dispenser.  Tablet (sus Water-mis 2- mL amp  riboflavin  Tablet: 5 m sodium fluoride  In any app  thiamine  Tablet: 50  Complementary List  calcium gluconate  Injection: 2	mg (hydrochloride). 0 000 IU; 100 000 IU; 200 000 IU (as palmitate).
retinol  Capsule: 5 Oral oily s dispenser.  Tablet (sugater-mis) 2- mL amp  riboflavin  Tablet: 5 m sodium fluoride  In any app thiamine  Tablet: 50  Complementary List  calcium gluconate  Injection: 2	0 000 IU; 100 000 IU; 200 000 IU (as palmitate).
retinol  Oral oily s dispenser.  Tablet (sugate water-mis 2- mL amp)  riboflavin  riboflavin  Tablet: 5 m  sodium fluoride  In any app  thiamine  Tablet: 50  Complementary List  calcium gluconate  Injection: 2	
retinol dispenser.  Tablet (sug Water-mis 2- mL amp riboflavin Tablet: 5 m sodium fluoride In any app thiamine Tablet: 50  Complementary List  calcium gluconate Injection: 5	olution: 100 000 IU (as palmitate)/ mL in multidose
Tablet (sug Water-mis 2- mL amp riboflavin Tablet: 5 m sodium fluoride In any app thiamine Tablet: 50  Complementary List  calcium gluconate Injection: 5	
riboflavin  riboflavin  sodium fluoride  In any app  thiamine  Tablet: 50  Complementary List  calcium gluconate  Injection: 3	gar-coated): 10 000 IU (as palmitate).
sodium fluoride In any app thiamine Tablet: 50  Complementary List  calcium gluconate Injection: 3	<b>cible injection:</b> 100 000 IU (as palmitate) in oule.
thiamine  Complementary List  calcium gluconate  Injection: 2	ng.
Complementary List  calcium gluconate  Injection: 1	ropriate topical formulation.
calcium gluconate Injection: I	mg (hydrochloride).
·	
28. EAR, NOSE AND THROAT MEDICINES [	100 mg/ mL in 10- mL ampoule.
	c]
acetic acid Topical: 29	%, in alcohol.
□ budesonide Nasal spra	y: 100 micrograms per dose.
□ ciprofloxacin <b>Topical:</b> 0.	3% drops (as hydrochloride).
Nasal spra	<b>y</b> : 0.05%.
□ xylometazoline a Not in chi	ldren less than 3 months.
29. SPECIFIC MEDICINES FOR NEONATAL	CARE
29.1 Medicines administered to the neonate [c	]
caffeine citrate	20 mg/ mL (equivalent to 10 mg caffeine base/ mL).
	d: 20 mg/ mL (equivalent to 10 mg caffeine base/ mL).
	<b>r gel:</b> 7.1% (digluconate) delivering 4% chlorhexidine cal cord care) <b>[c]</b> .
Complementary List	
□ ibuprofen Solution fo	w inication E malmI
Solution fo	or injection: 5 mg/ mL.
	or injection:
surfactant  Suspension mL.	

29.2 Medicines administered to the	mother		
dexamethasone	<b>Injection:</b> 4 mg/ mL dexamethasone phosphate (as disodium salt)		
30. MEDICINES FOR DISEASES OF JOINTS			
30.1 Medicines used to treat gout			
opurinol Tablet: 100 mg.			
30.2 Disease-modifying agents used	in rheumatoid disorders (DMARDs)		
nloroquine Tablet: 100 mg; 150 mg (as phosphate or sulfate).			
Complementary List	1		
azathioprine	Tablet: 50 mg.		
hydroxychloroquine <b>[c]</b>	Solid oral dosage form: 200 mg (as sulfate).		
methotrexate	Tablet: 2.5 mg (as sodium salt).		
penicillamine	Solid oral dosage form: 250 mg.		
sulfasalazine	Tablet: 500 mg.		
30.3 Juvenile joint diseases			
	Suppository: 50 mg to 150 mg.		
acetylsalicylic acid* (acute or chronic use)	Tablet: 100 mg to 500 mg.		
	* For use for rheumatic fever, juvenile arthritis, Kawasaki disease.		

Table 1.1: Medicines with age or weight restrictions

artesunate + pyronaridine tetraphosphate	>5 kg
atazanavir	>25 kg
atropine	>3 months
benzyl benzoate	>2 years
betamethasone topical preparations	hydrocortisone preferred in neonates
cefazolin	>1 month
ceftriaxone	>41 weeks corrected gestational age
darunavir	>3 years
delamanid	>6 years
dihydroartemisinin + piperaquine phosphate	>5 kg
diloxanide	>25 kg
doxycycline	>8 years (except for serious infections e.g. cholera)
efavirenz	>3 years or >10 kg
fluoxetine	>8 years
ibuprofen	>3 months (except IV form for patent ductus arteriosus)
mefloquine	>5 kg or >3 months
metoclopramide	Not in neonates
nevirapine	> 6 weeks
ondansetron	>1 month
silver sulfadiazine	>2 months
tetracaine	Not in preterm neonates
trimethoprim	>6 months
xylometazoline	>3 months

## Table 1.2: Explanation of dosage forms

#### A. Principal dosage forms used in EML – oral administration

Term	Definition
Solid oral dosage form	Refers to tablets or capsules or other solid dosage forms such as 'melts' that are immediate-release preparations. It implies that there is no difference in clinical efficacy or safety between the available dosage forms, and countries should therefore choose the form(s) to be listed depending on quality and availability.  The term 'solid oral dosage form' is <i>never</i> intended to allow any type of
	modified-release tablet.
	Refers to:
	uncoated or coated (film-coated or sugar-coated) tablets that are intended to be swallowed whole;
	<ul> <li>unscored and scored*;</li> <li>tablets that are intended to be chewed before being swallowed;</li> </ul>
Tablets	<ul> <li>tablets that are intended to be dispersed or dissolved in water or another suitable liquid before being swallowed;</li> <li>tablets that are intended to be crushed before being swallowed.</li> </ul>
	The term 'tablet' without qualification is <i>never</i> intended to allow any type of modified-release tablet.
	Refers to a specific type of tablet:
	<b>chewable</b> - tablets that are intended to be chewed before being swallowed;
	<b>dispersible</b> - tablets that are intended to be dispersed in water or
	another suitable liquid before being swallowed; soluble - tablets that are intended to be dissolved in water or another
	suitable liquid before being swallowed;
	<b>crushable</b> - tablets that are intended to be crushed before being swallowed;
Tablets (qualified)	scored - tablets bearing a break mark or marks where sub-division is
	intended in order to provide doses of less than one tablet; <b>sublingual</b> - tablets that are intended to be placed beneath the tongue.
	submingual - tablets that are interfaced to be placed beneath the tongue.
	The term 'tablet' is <i>always</i> qualified with an additional term (in
	parentheses) in entries where one of the following types of tablet is intended: <b>gastro-resistant</b> (such tablets may sometimes be described as
	enteric-coated or as delayed-release), <b>prolonged-release</b> or another modified-release form.

<sup>\*</sup> Scored tablets may be divided for ease of swallowing, provided that dose is a whole number of tablets.

	Refers to hard or soft capsules.
Capsules	The term 'capsule' without qualification is <i>never</i> intended to allow any type of modified-release capsule.
Capsules (qualified)	The term 'capsule' with qualification refers to <b>gastro-resistant</b> (such capsules may sometimes be described as enteric-coated or as delayed-release), <b>prolonged-release</b> or another modified-release form.
Granules	Preparations that are issued to patient as granules to be swallowed without further preparation, to be chewed, or to be taken in or with water or another suitable liquid.
	The term 'granules' without further qualification is <i>never</i> intended to allow any type of modified-release granules.
Oral powder	Preparations that are issued to patient as powder (usually as singledose) to be taken in or with water or another suitable liquid.
Oral liquid	Liquid preparations intended to be <i>swallowed</i> i.e. oral solutions, suspensions, emulsions and oral drops, including those constituted from powders or granules, but <i>not</i> those preparations intended for <i>oromucosal administration</i> e.g. gargles and mouthwashes.  Oral liquids presented as powders or granules may offer benefits in the form of better stability and lower transport costs. If more than one type
	of oral liquid is available on the same market (e.g. solution, suspension, granules for reconstitution), they may be interchanged and in such cases should be bioequivalent. It is preferable that oral liquids do not contain sugar and that solutions for children do not contain alcohol.

## B. Principal dosage forms used in EML – parenteral administration

Term	Definition
Injection	Refers to solutions, suspensions and emulsions including those
	constituted from powders or concentrated solutions.
Injection (qualified)	Route of administration is indicated in parentheses where relevant.
Injection (oily)	The term `injection' is qualified by `(oily)' in relevant entries.
Intravenous infusion	Refers to solutions and emulsions including those constituted from
	powders or concentrated solutions.

## C. Other dosage forms

Mode of	Term to be used	
administration		
To the eye	Eye drops, eye ointments.	
Topical	For liquids: lotions, paints.	
	For semi-solids: cream, ointment.	
Rectal	Suppositories, gel or solution.	
Vaginal	Pessaries or vaginal tablets.	
Inhalation	Powder for inhalation, pressurized inhalation, nebulizer.	

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