

## Comprehensive Drug List

The Absolute Total Care Comprehensive Drug List (CDL) lists drugs covered by your prescription benefit. The CDL is updated often and may change. For more information, you may view the latest CDL on our website at [absolutetotalcare.com](https://absolutetotalcare.com) or call us at 1-866-433-6041 (TTY: 711).

### Comprehensive Drug List Medication Locator Instructions:

1. With the PDF open, click on the Edit menu, then click Find.
2. In the Find box type the name of the medicine you want to locate.
3. Click the Next button until you find the medicine(s) you are looking for.

## Notice of Non-Discrimination

Absolute Total Care (ATC) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation or gender identity. ATC does not exclude people or treat them differently because of race, color, national origin, age, disability, sex, sexual orientation or gender identity.

ATC provides free aids and services to people with disabilities, such as qualified sign language interpreters and written information in other formats (large print, braille, audio, accessible electronic formats, other formats). We provide free language services to people whose primary language is not English, such as qualified interpreters and information written in other languages. If you need these services, contact our Manager of Member Services, by mail at: 100 Center Point Circle, Columbia, SC 29210; by phone at: 1-866-433-6041 (TTY: 711); or by email at: ATCMBRSVC@centene.com.

If you believe that ATC has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, sex, sexual orientation or gender identity, you can file a grievance using the contact information provided above. You can file a grievance in person or by mail or email. If you need help filing a grievance, we are available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/smartscreen/main.jsf> or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201 or by phone at: 800-368-1019, 800-537-7697 (TDD). Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>. Language assistance services are available. Please visit our Language Assistance page for more information.

## Language Services

**If your primary language is not English, language assistance services are available to you, free of charge. Call: 1-866-433-6041 (TTY: 711).**

**Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-866-433-6041 (TTY: 711).**

إذا كانت لغتك الأساسية غير اللغة الانكليزية فان خدمات المساعدات اللغوية متوفرة لك مجاناً. اتصل على الرقم:  
1-866-433-6041 (رقم هاتف الصم والبكم 711)

**Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-866-433-6041 (TTY: 711).**

**Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-866-433-6041 (телетайп: 711).**

**Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-866-433-6041 (TTY: 711).**

**Se você fala português do Brasil, os serviços de assistência em sua língua estão disponíveis para você de forma gratuita. Chame 1-866-433-6041 (TTY: 711)**

如果您使用繁體中文，您可以免費獲得語言援助服務。請致電1-866-433-6041 (TTY: 711)

**Falam tawng thiam tu na si le tawng let nak asi mi 1-866-433-6041 (TTY: 711) ah tang ka pek tul lo in na ko thei.**

**धयद आप हदी बोलते ह तो आपके िलए मुफ्त म भाषा सहायता सेवाएं उपलब्ध ह। 1-866-433-6041 (TTY: 711) पर कॉल कर।**

한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-866-433-6041 (TTY: 711)번으로 전화해 주십시오.

**Haka tawng thiam tu na si le tawng let asi mi 1-866-433-6041 (TTY: 711) ah tang ka pek tul lo in ko thei.**

**Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-866-433-6041 (ATS: 711).**

နမူကတိ ကညီ ကျိအယိ, နမနူ ကျိအတိမၤစၢလၢ တလၢ်ဘျၢ်လၢ်စ့ၤ နိတံၤဘျၢ်သ့န့ၢ်လီၤ. ကိး  
866-433-6041 (TTY: 711)

ማስታወሻ: የግንኙነት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች: በነጻ ሊያግዝዎት ተዘጋጅተዋል: ወደ ሚክላው ቁጥር ይደውሉ 1-866-433-6041 (መስማት ስተሳናቸው: 711).

အကယ်၍ သင်သည် မြန်မာစကားကို ပြောပါက၊ ဘာသာစကား အကူအညီ၊ အခမဲ့၊ သင့် ငွ်အတွက် စီစဉ်ဆောင်ရွက်ပေးပါမည်။ ဖုန်းနံပါတ် 1-866-433-6041 (TTY: 711) သို့ ခေါ်ဆိုပါ။

## Pharmacy Program

It's important to Absolute Total Care that our members receive medications that are appropriate and high quality. We work hard to make sure you have access to safe and effective medications that are proven to help you get healthy and stay healthy.

The pharmacy program does not cover all medicines. Some medicines require prior authorization (PA). Some have limits on age, dosage and maximum quantities.

## Comprehensive Drug List (CDL)

The Absolute Total Care CDL is the list of covered drugs. The CDL applies to drugs you can receive at retail pharmacies. The Absolute Total Care CDL is reviewed often by Absolute Total Care to make sure the use of medicines is appropriate.

## Pharmacy Benefit Manager

Absolute Total Care works with Pharmacy Services to process pharmacy claims for prescribed drugs. Some drugs on the Absolute Total Care CDL may require PA. Pharmacy Services is responsible for the PA process. Express Scripts is our Pharmacy Benefit Manager (PBM).

## Specialty Drugs

The preferred specialty pharmacy provider of Absolute Total Care is AcariaHealth Specialty Pharmacy. All specialty drugs must have PA to be approved for payment by Absolute Total Care. The Absolute Total Care Medical Director and Absolute Total Care Pharmacy Director are in charge of the clinical review of these PA requests.

AcariaHealth Specialty Pharmacy provides the following services:

- Delivers drugs to your home or provider's office
- Provides staff pharmacists. The pharmacists can help you 24 hours a day, seven days a week to answer your questions and offer help with your drugs
- Gives you information, materials and ongoing support to help you take the drugs to manage your health condition
- Hepatitis C agents

## Dispensing Limits

Drugs may be filled up to a maximum of 31 days' supply for each new prescription or refill. A total of 80% of the days' supply or 25 days must have passed before the prescription can be refilled for non-controlled-substance CDL drugs. A total of 90% of the days' supply must have passed before the prescription can be refilled for controlled substances and narcotic CDL drugs.

## Appropriate Use and Safety Edits

The health and safety of our members is important to Absolute Total Care. One way we make sure our members are safe is through point-of-sale (POS) edits. This happens at the time a prescription is

processed at the pharmacy. These edits are based on U.S. Food and Drug Administration (FDA) recommendations. They promote safe and effective medicine use.

### Prior Authorizations (PAs)

Some medicines listed on the Absolute Total Care CDL may need PA. The information for PAs should be sent to Pharmacy Services. The information should be sent by your provider or pharmacist. They can fill this information out on the **Medication Prior Authorization Form**. This form should be **faxed to Pharmacy Services at 1-833-982-4001**. This document can be found on the Absolute Total Care website, [absolutetotalcare.com](http://absolutetotalcare.com). All completed authorizations are reviewed within 24 hours from the time of receipt.

Absolute Total Care will cover the medicine if it is determined that:

1. There is a medical reason the member needs the specific medicine.
2. Depending on the medicine, other medicines on the CDL have not worked.

PA requests are reviewed by a licensed clinical pharmacist. The pharmacist uses criteria established by the Centene Corporate P&T Committee. If the request is approved, the provider will be notified by fax. If the information provided does not meet the criteria for the requested medicine, member and their provider will be notified. Alternative options and appeal process information will also be provided.

### Step Therapy

Sometimes Absolute Total Care requires you to do step therapy. This means you will have to try medicines in the CDL in a certain order before we cover another medicine.

If Absolute Total Care has record that the first medicine was tried and did not work, the next medicine is automatically covered. If Absolute Total Care does not have a record that the required medicine was tried, the provider may have to send more information about the request.

If Absolute Total Care does not approve the PA, we will notify the member and their provider. We will also send information about the appeal process.

### Quantity Limits

Sometimes, Absolute Total Care limits how much of a certain medicine a member can get at once. If your provider thinks that you have a reason to get more than the limit, they can submit a PA. If Absolute Total Care does not approve the PA, we will notify the member and their provider. They will also send information about the appeal process.

### Age Limits

Sometimes, medicines on the Absolute Total Care CDL have age limits. This is because of drug maker, FDA or clinical guidelines. It is to keep you healthy and safe. Age limits meet FDA alerts for the appropriate use of pharmaceuticals. They also align with South Carolina Healthy Connections Medicaid Guidelines.

## Medical Necessity Requests

Sometimes, a member needs a medicine that is not listed in the CDL. When this happens, the member's provider can make a medical necessity (MN) request for the medicine. A MN request does not happen often. This is because the list of medicines on the CDL treat most medical conditions.

For a MN request, Absolute Total Care requires:

- Documented failure of at least two CDL drugs within the same therapeutic class for the same diagnosis. This is required as long as two drugs are listed in the same category with comparable labeled indications; or
- Documented intolerance or contraindication to at least two CDL drugs within the same therapeutic class. This is required as long as two drugs are listed in the same category with comparable labeled indications; or
- Documented clinical history or presentation where the patient is not a candidate for any of the CDL drugs for the indication.

These requests are reviewed by a licensed clinical pharmacist. The pharmacist uses criteria established by the Centene Corporate P&T Committee. If the request is approved, the provider will be notified by fax. If the information provided does not meet the criteria for the requested medicine, member and provider will be notified. Alternative options and appeal process information will also be provided.

## Emergency Supply Policy

State and federal law require that a pharmacy fill a 72-hour supply of CDL medicine to any member awaiting PA determination. This is so the member's therapy is not interrupted or delayed. All participating pharmacies are authorized to provide a 72-hour supply of medicine. They are reimbursed for the ingredient cost and dispensing fee of the 72-hour supply of medication. They are reimbursed whether or not the PA request ends up being approved or denied. If the pharmacy has any questions, they may call the Pharmacy Help Desk at **1-833-750-4506**.

## Exclusions

The following drug categories are not part of the Absolute Total Care CDL, unless noted as covered on the CDL. They are also not covered by the 72-hour emergency supply policy:

- Weight control products
- Pharmaceuticals used for cosmetic purposes or hair growth
- Investigational pharmaceuticals or products
- Immunizing agents
- Drug Efficacy Study Implementation (DESI) and Identical, Related, and Similar (IRS) drugs that are classified as ineffective
- Fertility products
- Erectile dysfunction products prescribed to treat impotence

- Nutritional supplements
- Injectables (except those listed in the CDL)
- Infusion supplies
- Gender transition pharmaceuticals or products

### Newly-Approved Products

Absolute Total Care reviews new drugs before adding them to the CDL. While the new drugs are being reviewed, access to them will be considered through the PA review process. If Absolute Total Care does not approve PA, we will notify the member and their practitioner. We will also provide information about the appeal process.

### Over-The-Counter (OTC) Medications

Absolute Total Care covers many OTC medicines. These medicines can be found in the Absolute Total Care CDL. These products are covered as long as you have a prescription from a licensed practitioner that meets all the legal requirements for a prescription.

### Generic Drugs

Generic drugs are made up of the same active ingredient as brand-name drugs. When generic drugs are available, the brand-name drug will not be covered without Absolute Total Care PA unless the Brand name drug is preferred by the SCDHHS Single PDL.

If you or your provider think a brand-name drug is medically necessary, the provider must request the drug using the PA process. Absolute Total Care will cover the brand-name drug according to our clinical guidelines if there is a medical reason the member needs the particular brand-name drug. If Absolute Total Care does not approve the PA, we will notify the member and their provider. We will also send information about the appeal process.

### Drug Efficacy Study Implementation (DESI) Drugs

DESI products and known related drug products are defined as less than effective by the FDA. This is because there is not much evidence that it is effective for all labeling indications. It is also because *justification* for their medical need has not been established. DESI products are not covered by Absolute Total Care.

### Filling a Prescription

Members can have prescriptions filled at an Absolute Total Care network pharmacy. You can find a network pharmacy near you by contacting **Absolute Total Care Member Services at 1-866-433--6041 (TTY: 711)**. You can also visit Absolute Total Care's website at [absolutetotalcare.com](http://absolutetotalcare.com) and click Find a Provider to locate a pharmacy. You can type in your address or zip code and see pharmacies that are close by. At the pharmacy, you will need to provide your prescription and your Absolute Total Care member ID card.

If members are traveling more than 30 miles from the South Carolina border, they can have a one-time fill of their medicine. All necessary prescriptions are required to be filled on the same day for a maximum 31-day supply.

### Copayments

Effective July 1, 2024, Absolute Total Care charges \$0.00 for each prescription.

### Drug Tiers

The following notations define the comprehensive drug list status in the Drug Tier column.

P:	Preferred
NP:	Non-preferred
PA:	Preferred with Clinical PA

Non-managed/Supplemental (clinical criteria may apply):

C:	Non-Managed Covered
NC:	Non-Managed Not Covered
X:	Pharmacy Benefit Exclusion

### Abbreviations

The following notations and abbreviations may be found in the drug listing requirements/limits column.

AL:	Age Limit	Drug is limited to a specific age.
QL:	Quantity Limit	There is a limit on the amount of drug covered per prescription, or within a specific timeframe.
Max Day(s) Supply:	Day(s) Supply	There is a limit on the amount of the drug that is covered per time.
Max Fill:	Fill Limit	There is a limit on the number of times the drug can be filled.
Opioid Smart PA:	Unique Limits for Opioid Drugs	There may be limits on use such as a maximum seven-day supply for short-acting opioids or prior authorization required. Exceptions exist for specific diagnoses and/or history of use.
PA, Smart PA:	Prior Authorization	Prior authorization is required before prescription can be filled.
Pack Lmt:	Package Limit	There is a limit on the number of packages covered per prescription.
Rtl:	Retail	The limit or restriction applies to coverage at a retail pharmacy.

RX/OTC:	Prescription/Over-the-counter	The drug is available as both prescription and over-the-counter.
SP:	Specialty Drug	High-cost drugs used to treat complex or rare conditions, such as multiple sclerosis, rheumatoid arthritis, hepatitis C and hemophilia.
ST:	Step Therapy	Requires trial and failure of one or more preferred products prior to coverage.

#### Clinical Edit Descriptions

Edit Name	Edit Description
Opioid	<p>Short-acting opioid medicines can only be filled for 7-days at a time when no opioids are filled in the past 180 days (Treatment-Naïve). This limit is extended to 30-day fills when a member has a medical history of cancer, sickle cell, or palliative care in their records. Treatment-Naïve*</p> <p>Limits:</p> <ul style="list-style-type: none"> <li>• Daily Dose Max = 90 MME**</li> <li>• Day Supply Max = 7 days</li> <li>• Must use short-acting opioids before long-acting opioids</li> </ul> <p>*Treatment-Naïve means no opioid fill in last 180 days  **MME = Morphine Milligram Equivalent</p>
Test Strips	Insulin users are limited to 150 strips per 30 days; Non-insulin users are limited to 100 strips per 90 days.

#### Contact Information

Absolute Total Care	Phone: 1-866-433-6041 Fax: 1-855-865-9469 Website: <a href="http://www.absolutetotalcare.com">www.absolutetotalcare.com</a>
AcariaHealth Specialty Pharmacy	Phone: 1-855-535-1815 Fax: 1-855-217-0926 Website: <a href="http://www.acariahealth.com">www.acariahealth.com</a>
Pharmacy Services	PA Phone: 1-866-399-0928 PA Fax: 1-833-982-4001 Help Desk: 1-800-460-8988
Pharmacy Help Desk	Phone: 1-833-750-4506



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to Treat ADHD, Sleep and Eating Disorders</b>					
Amphetamines					
ADDERALL XR CP24 (Use amphetamine-dextroamphetamine)	P	QL(1 ea daily); AL(At least 6 yrs old)	amphetamine-dextroamphetamine TABS 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 1.875 MG-1.875 MG-1.875 MG, 2.5 MG-2.5 MG-2.5 MG, 3.125 MG-3.125 MG-3.125 MG-3.125 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG	NC	QL(2 ea daily); AL(At least 3 yrs old)
ADDERALL TABS (Use amphetamine-dextroamphetamine)	P	QL(2 ea daily); AL(At least 3 yrs old)	amphetamine-dextroamphetamine TABS	P	QL(2 ea daily); AL(At least 3 yrs old)
ADZENYS XR-ODT TBED	NP		DEXEDRINE CP24 10 MG, 15 MG (Use dextroamphetamine sulfate)	NP	QL(2 ea daily); AL(At least 6 yrs old)
amphetamine sulfate TABS	NP		dextroamphetamine sulfate CP24 5 MG	P	QL(1 ea daily); AL(At least 6 yrs old)
amphetamine-dextroamphetamine CP24 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG, 7.5 MG-7.5 MG-7.5 MG-7.5 MG	NC	QL(1 ea daily); AL(At least 6 yrs old)	dextroamphetamine sulfate CP24 10 MG, 15 MG	P	QL(2 ea daily); AL(At least 6 yrs old)
amphetamine-dextroamphetamine CP24 12.5 MG-12.5 MG-12.5 MG-12.5 MG, 3.125 MG-3.125 MG-3.125 MG-3.125 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG, 9.375 MG-9.375 MG-9.375 MG-9.375 MG	NP		dextroamphetamine sulfate SOLN	NP	
amphetamine-dextroamphetamine CP24 1.25 MG-1.25 MG-1.25 MG-1.25 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG, 7.5 MG-7.5 MG-7.5 MG-7.5 MG	NP	QL(1 ea daily); AL(At least 6 yrs old)	dextroamphetamine sulfate TABS 5 MG, 10 MG	P	QL(2 ea daily); AL(At least 3 yrs old)
			dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG	NP	
			dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG	P	
			dextroamphetamine sulfate TABS 5 MG, 10 MG	NC	QL(2 ea daily); AL(At least 3 yrs old)
			dextroamphetamine sulfate TABS 5 MG, 10 MG	NP	QL(2 ea daily); AL(At least 3 yrs old)
			DYANAVEL XR CHER	NP	
			DYANAVEL XR SUER	NC	
			DYANAVEL XR SUER	P	

Drug Name	Drug Tier	Requirements/Limits
EVEKEO ODT TBDP	NP	
EVEKEO TABS (Use amphetamine sulfate)	NP	
<i>lisdexamfetamine dimesylate CAPS</i>	NP	QL(1 ea daily)
<i>lisdexamfetamine dimesylate CHEW</i>	NC	
<i>lisdexamfetamine dimesylate CHEW</i>	NP	
<i>methamphetamine hcl</i>	NP	
MYDAYIS CP24 (Use amphetamine-dextroamphetamine)	NP	
VYVANSE CAPS	P	QL(1 ea daily)
VYVANSE CHEW	P	
XELSTRYM	NP	
<b>Analeptics</b>		
CAFCIT SOLN IV 60 MG/3ML (Use caffeine citrate)	NC	
<i>caffeine &amp; sodium benzoate</i>	NC	
CAFFEINE ANHYDROUS POWD	NC	RX/OTC
CAFFEINE CITRATED POWD	NC	
<i>caffeine citrate SOLN IV 60 MG/3ML</i>	NC	
<i>caffeine citrate SOLN OR</i>	C	Limit 2 fills per Lifetime; QL(45 ml per fill retail); 2 max fill(s) per 999 day(s) retail
DOPRAM	NC	
<b>Anorexiants Non-Amphetamine</b>		
<i>diethylpropion hcl TABS</i>	NC	
<i>diethylpropion hcl TB24</i>	NC	
<b>Anti-Obesity Agents</b>		
IMCIVREE	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>orlistat</i>	NC	
SAXENDA	NC	
WEGOVY 0.25 MG/0.5ML, 0.5 MG/0.5ML, 1 MG/0.5ML	NC	QL(2 ml per 28 day(s) retail; 2 ml per 28 days mail)
WEGOVY 1.7 MG/0.75ML, 2.4 MG/0.75ML	NC	QL(3 ml per 28 day(s) retail; 2 ml per 28 days mail)
ZEPBOUND SOAJ	NC	
ZEPBOUND SOLN	NC	
<b>Attention-Deficit/Hyperactivity Disorder (ADHD) Agents</b>		
<i>atomoxetine hcl</i>	P	AL(At least 6 yrs old)
<i>clonidine hcl (adhd) TB12</i>	NC	
<i>clonidine hcl (adhd) TB12</i>	P	
<i>guanfacine hcl (adhd)</i>	P	QL(1 ea daily); AL(At least 6 yrs old)
INTUNIV (Use <i>guanfacine hcl (adhd)</i> )	NP	QL(1 ea daily); AL(At least 6 yrs old)
KAPVAY TB12 (Use <i>clonidine hcl (adhd)</i> )	NC	
QELBREE	NP	
STRATTERA (Use <i>atomoxetine hcl</i> )	NP	AL(At least 6 yrs old)
<b>Dopamine and Norepinephrine Reuptake Inhibitors (DNRIs)</b>		
SUNOSI 75 MG	NC	
SUNOSI	NP	
<b>Histamine H3-Receptor Antagonist/Inverse Agonists</b>		
WAKIX	NP	SP
<b>Stimulants - Misc.</b>		
APTENSIO XR CP24 (Use <i>methylphenidate hcl</i> )	NP	
<i>armodafinil</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
AZSTARYS	NP	
CONCERTA TBCR 18 MG, 27 MG, 54 MG (Use methylphenidate hcl)	P	QL(1 ea daily); AL(At least 6 yrs old)
CONCERTA TBCR 36 MG (Use methylphenidate hcl)	P	QL(2 ea daily); AL(At least 6 yrs old)
DAYTRANA PTCH (Use methylphenidate)	P	
dexmethylphenidate hcl CP24	NC	
dexmethylphenidate hcl CP24	P	
dexmethylphenidate hcl TABS	NC	QL(2 ea daily); AL(At least 6 yrs old)
dexmethylphenidate hcl TABS	P	QL(2 ea daily); AL(At least 6 yrs old)
FOCALIN XR CP24 (Use dexmethylphenidate hcl)	NP	
FOCALIN TABS (Use dexmethylphenidate hcl)	NP	QL(2 ea daily); AL(At least 6 yrs old)
JORNAY PM CP24	NP	
METADATE CD CPCR (Use methylphenidate hcl)	NC	QL(1 ea daily); AL(At least 6 yrs old)
METHYLIN SOLN (Use methylphenidate hcl)	NP	
methylphenidate hcl CHEW	NC	
methylphenidate hcl CHEW	NP	
methylphenidate hcl CP24	NP	
methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG	P	
methylphenidate hcl CPCR	P	QL(1 ea daily); AL(At least 6 yrs old)
methylphenidate hcl SOLN	P	

Drug Name	Drug Tier	Requirements/Limits
methylphenidate hcl TABS 10 MG, 20 MG	NC	QL(3 ea daily); AL(At least 3 yrs old)
methylphenidate hcl TABS 5 MG	NC	QL(6 ea daily); AL(At least 3 yrs old)
methylphenidate hcl TABS 10 MG, 20 MG	P	QL(3 ea daily); AL(At least 3 yrs old)
methylphenidate hcl TABS 5 MG	P	QL(6 ea daily); AL(At least 3 yrs old)
methylphenidate hcl TB24 36 MG	NP	QL(2 ea daily)
methylphenidate hcl TB24 18 MG, 27 MG, 54 MG	NP	QL(1 ea daily)
methylphenidate hcl TBCR 36 MG	NP	QL(2 ea daily); AL(At least 6 yrs old)
methylphenidate hcl TBCR 10 MG, 20 MG	P	QL(2 ea daily); AL(At least 6 yrs old)
methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG	NC	QL(1 ea daily); AL(At least 6 yrs old)
methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG	NP	QL(1 ea daily); AL(At least 6 yrs old)
methylphenidate hcl TBCR 36 MG	NC	QL(2 ea daily); AL(At least 6 yrs old)
methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG	NP	
methylphenidate PTCH	NP	
modafinil	NP	
modafinil	NC	
NUVIGIL (Use armodafinil)	NP	
PROVIGIL (Use modafinil)	NP	
QUILLICHEW ER CHER	P	
QUILLIVANT XR SRER	P	
RELEXXII TBCR 36 MG	NC	QL(2 ea daily); AL(At least 6 yrs old)

Drug Name	Drug Tier	Requirements/Limits
RELEXXII TBCR 18 MG, 27 MG, 54 MG	NC	QL(1 ea daily); AL(At least 6 yrs old)
RELEXXII TBCR 18 MG, 27 MG, 36 MG, 45 MG, 54 MG, 63 MG (Use methylphenidate hcl)	NC	
RELEXXII TBCR 72 MG	NP	
RELEXXII TBCR	NC	
RITALIN LA CP24 (Use methylphenidate hcl)	NP	
RITALIN TABS 5 MG (Use methylphenidate hcl)	NP	QL(6 ea daily); AL(At least 3 yrs old)
RITALIN TABS 10 MG, 20 MG (Use methylphenidate hcl)	NP	QL(3 ea daily); AL(At least 3 yrs old)
<b>ALLERGENIC EXTRACTS/BIOLOGICALS MISC</b>		
Allergenic Extracts		
GRASTEK SUBL	C	QL(1 ea daily); AL(At least 5 yrs old - Up to 65 yrs old)
ODACTRA SUBL	NC	
ORALAIR ADULT STARTER PACK SUBL	NC	
ORALAIR SUBL	NC	
PALFORZIA INITIAL DOSE ESCALATION CSPK	NC	SP
PALFORZIA LEVEL 10 CSPK	NC	SP
PALFORZIA LEVEL 11 (MAINTENANCE) PACK	NC	SP
PALFORZIA LEVEL 11 (TITRATION) PACK	NC	SP
PALFORZIA LEVEL 1 CSPK	NC	SP
PALFORZIA LEVEL 2 CSPK	NC	SP
PALFORZIA LEVEL 3 CSPK	NC	SP

Drug Name	Drug Tier	Requirements/Limits
PALFORZIA LEVEL 4 CSPK	NC	SP
PALFORZIA LEVEL 5 CSPK	NC	SP
PALFORZIA LEVEL 6 CSPK	NC	SP
PALFORZIA LEVEL 7 CSPK	NC	SP
PALFORZIA LEVEL 8 CSPK	NC	SP
PALFORZIA LEVEL 9 CSPK	NC	SP
RAGWITEK SUBL	C	QL(1 ea daily); AL(At least 18 yrs old - Up to 65 yrs old)
<b>ALTERNATIVE MEDICINES</b>		
Alternative Medicine Combinations		
MIDNITE SLEEP AID	NC	
SLOWMAG MG CALM+SLEEP	NC	
<b>AMEBICIDES</b>		
Amebicides		
IODOQUINOL POWD	NC	
<b>AMINOGLYCOSIDES - Drugs to Treat Bacterial Infections</b>		
Aminoglycosides		
AMIKACIN SULFATE POWD	NC	
<i>amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML</i>	NC	
ARIKAYCE	NP	SP
BETHKIS NEBU (Use tobramycin)	NP	
<i>gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %, 2 MG/ML-0.9 %</i>	NC	
<i>gentamicin sulfate IJ</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>neomycin sulfate TABS</i>	NC	
<i>neomycin sulfate TABS</i>	NP	
STREPTOMYCIN SULFATE POWD	NC	
<i>streptomycin sulfate SOLR</i>	NC	
TOBRAMYCIN SULFATE POWD	NC	
<i>tobramycin sulfate SOLN IJ 40 MG/ML</i>	NC	
<i>tobramycin sulfate SOLN IJ 1.2 GM/30ML, 10 MG/ML, 80 MG/2ML</i>	C	PA
<i>tobramycin sulfate SOLR</i>	C	PA
<i>tobramycin NEBU</i>	NP	
ZEMDRI	NC	
<b>ANALGESICS - ANTI-INFLAMMATORY - Drugs to Treat Pain, Swelling, Muscle and Joint Conditions</b>		
Antirheumatic - Enzyme Inhibitors		
OLUMIANT	NP	SP
RINVOQ TB24 15 MG	NP	
RINVOQ TB24	NP	SP
XELJANZ XR TB24	NP	SP
XELJANZ SOLN	NP	
XELJANZ SOLN	NP	SP
XELJANZ TABS	NP	SP
Antirheumatic Antimetabolites		
OTREXUP SOAJ 10 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	NP	
OTREXUP SOAJ 10 MG/0.4ML, 12.5 MG/0.4ML, 15 MG/0.4ML, 17.5 MG/0.4ML, 20 MG/0.4ML, 22.5 MG/0.4ML, 25 MG/0.4ML	NP	SP

Drug Name	Drug Tier	Requirements/Limits
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	NC	SP
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML	P	SP
RASUVO SOAJ 20 MG/0.4ML	P	
REDITREX SOSY	NP	
REDITREX SOSY	NP	SP
Anti-TNF-alpha - Monoclonal Antibodies		
ABRILADA 1-PEN KIT AJKT	NP	
ABRILADA 2-PEN KIT AJKT	NP	
ABRILADA PSKT	NP	
ADALIMUMAB-AACF (2 PEN) AJKT	NP	
ADALIMUMAB-AATY 1-PEN KIT AJKT	NP	
ADALIMUMAB-AATY 2-PEN KIT AJKT	NP	
ADALIMUMAB-AATY 2-SYRINGE KIT PSKT 20 MG/0.2ML	NP	
ADALIMUMAB-ADAZ SOAJ	NP	
ADALIMUMAB-ADAZ SOAJ	NC	
ADALIMUMAB-ADAZ SOSY	NP	
ADALIMUMAB-ADAZ SOSY	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADALIMUMAB-ADBM CROHNS/UC/HS STARTER AJKT	NP		HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML	P	QL(3 ea per 365 day(s) retail); AL(At least 2 yrs old); SP
ADALIMUMAB-ADBM PSORIASIS/UVEITIS STARTER AJKT	NP		HUMIRA PEN-CD/UC/HS STARTER PNKT 80 MG/0.8ML	P	QL(3 ea per 365 day(s) retail); AL(At least 2 yrs old); SP
ADALIMUMAB-ADBM AJKT	NP		HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT	P	QL(4 ea per 365 day(s) retail); AL(At least 2 yrs old); SP
ADALIMUMAB-ADBM PSKT	NP		HUMIRA PEN PNKT 80 MG/0.8ML	P	QL(2 ea per 28 day(s) retail); AL(At least 2 yrs old); SP
ADALIMUMAB-FKJP AJKT	NP		HUMIRA PEN PNKT 40 MG/0.8ML	P	QL(0.14 ea daily; 4 ea per 28 day(s) retail); AL(At least 2 yrs old); SP
ADALIMUMAB-FKJP PSKT	NP		HUMIRA PEN PNKT 40 MG/0.4ML	P	QL(4 ea per 28 day(s) retail); AL(At least 2 yrs old); SP
ADALIMUMAB-RYVK (2 PEN) AJKT	NP		HUMIRA PEN PNKT 40 MG/0.4ML	P	SP
ADALIMUMAB-RYVK PSKT	NP		HUMIRA PEN PNKT	NC	SP
AMJEVITA SOAJ	NP		HUMIRA PEN-PS/UV STARTER PNKT	NC	SP
AMJEVITA SOAJ	NP	SP	HUMIRA PEN-PS/UV STARTER PNKT	P	QL(3 ea per 365 day(s) retail); AL(At least 2 yrs old); SP
AMJEVITA SOSY	NP	SP	HUMIRA PSKT	NC	SP
AMJEVITA SOSY 40 MG/0.4ML	NP		HUMIRA PSKT 10 MG/0.1ML, 20 MG/0.2ML	P	QL(2 ea per 28 day(s) retail); AL(At least 2 yrs old); SP
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT	NP		HUMIRA PSKT 40 MG/0.4ML	P	QL(4 ea per 28 day(s) retail); AL(At least 2 yrs old); SP
CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT	NP				
CYLTEZO AJKT	NP				
CYLTEZO PSKT	NP				
HADLIMA PUSHTOUCH SOAJ	NP				
HADLIMA SOSY	NP				
HULIO AJKT	NP				
HULIO PSKT	NP				
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT	P	QL(2 ea per 365 day(s) retail); AL(At least 2 yrs old); SP			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HUMIRA PSKT 40 MG/0.8ML	P	QL(0.14 ea daily; 4 ea per 28 day(s) retail); AL(At least 2 yrs old); SP	YUFLYMA 2-PEN KIT AJKT	NP	
			YUFLYMA 2-SYRINGE KIT PSKT	NP	
			YUFLYMA CD/UC/HS STARTER AJKT	NP	
			YUSIMRY	NP	
HYRIMOZ CROHN'S DISEASE AND ULCERATIVE COLITIS STARTER PACK SOAJ	NP		Gold Compounds		
HYRIMOZ PEDIATRIC CROHNSDISEASE STARTER PACK SOSY	NP		RIDAURA	NC	
HYRIMOZ PEDIATRIC CROHN'SDISEASE STARTER PACK SOSY	NP		Interleukin-1 Blockers		
HYRIMOZ PLAQUE PSORIASISSTARTER PACK SOAJ	NC		ARCALYST	NP	
HYRIMOZ PLAQUE PSORIASISSTARTER PACK SOAJ	NP		Interleukin-1 Receptor Antagonist (IL-1Ra)		
HYRIMOZ SENSOREADY PENS SOAJ	NC		KINERET SOSY	NP	
HYRIMOZ SOAJ	NP		KINERET SOSY	NP	SP
HYRIMOZ SOAJ 40 MG/0.4ML	NC		Interleukin-6 Receptor Inhibitors		
HYRIMOZ SOSY	NP		ACTEMRA ACTPEN SOAJ	NP	SP
HYRIMOZ SOSY	NC		ACTEMRA SOLN	C	SP; PA
IDACIO STARTER PACKAGE FOR CROHNS DISEASE AJKT	NP		ACTEMRA SOSY	NP	SP
IDACIO STARTER PACKAGE FOR PLAQUE PSORIASIS AJKT	NP		KEVZARA SOAJ	NP	SP
SIMLANDI 1-PEN KIT AJKT	NP		KEVZARA SOSY	NP	SP
SIMLANDI 2-PEN KIT AJKT	NP		TYENNE SOLN	NC	
SIMPONI ARIA SOLN	NC	SP	Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
SIMPONI SOAJ	NP	SP	ADVIL TABS (Use ibuprofen)	NC	
SIMPONI SOSY	NP	SP	ALEVE ARTHRITIS TABS (Use naproxen sodium)	NC	QL(2 ea daily)
YUFLYMA 1-PEN KIT AJKT 40 MG/0.4ML	NP		ALEVE TABS (Use naproxen sodium)	NC	QL(2 ea daily)
			ANAPROX DS TABS (Use naproxen sodium)	NC	
			ARTHROTEC 50 TBEC (Use diclofenac w/ misoprostol)	NP	
			ARTHROTEC 75 TBEC (Use diclofenac w/ misoprostol)	NP	
			CALDOLOR SOLN	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CELEBREX (Use celecoxib)	NC	QL(2 ea daily); PA	ibuprofen-acetaminophen TABS	NC	
celecoxib	C	QL(2 ea daily); PA	ibuprofen CHEW	C	
COMBOGESIC SOLN	NC		ibuprofen-famotidine	NP	
DAYPRO TABS (Use oxaprozin)	NP		IBUPROFEN POWD	NC	
diclofenac potassium CAPS	NC		ibuprofen SUSP 100 MG/5ML	P	RX/OTC
diclofenac potassium CAPS	NP		ibuprofen SUSP 40 MG/ML, 50 MG/1.25ML	C	
diclofenac potassium TABS	NP		ibuprofen SUSP 100 MG/5ML	NC	RX/OTC
diclofenac potassium TABS	NC		ibuprofen TABS 400 MG, 600 MG, 800 MG	P	
diclofenac sodium TB24	P		ibuprofen TABS 200 MG	C	
diclofenac sodium TBEC	P		ibuprofen TABS 400 MG, 600 MG, 800 MG	NC	
diclofenac sodium TBEC 50 MG, 75 MG	NC		INDOMETHACIN	NC	
diclofenac w/ misoprostol TBEC	NC		indomethacin sodium	NC	
diclofenac w/ misoprostol TBEC	NP		indomethacin CAPS 25 MG, 50 MG	P	
DUEXIS (Use ibuprofen-famotidine)	NP		indomethacin CAPS 25 MG, 50 MG	NC	
EC-NAPROSYN TBEC (Use naproxen)	NC	QL(2 ea daily)	indomethacin CPCR	NC	
etodolac CAPS	NP		indomethacin CPCR	NP	
etodolac TABS	NP		INDOMETHACIN POWD	NC	
etodolac TB24	NP		indomethacin SUPP	NP	
FELDENE CAPS (Use piroxicam)	NP		indomethacin SUSP	NP	
fenoprofen calcium CAPS 400 MG	NP		INFANTS ADVIL SUSP (Use ibuprofen)	NC	
FENOPROFEN CALCIUM POWD	NC		ketoprofen CAPS 25 MG	NP	
fenoprofen calcium TABS	NP		ketoprofen CP24	NP	
FLURBIPROFEN POWD	NC		ketorolac tromethamine SOLN IM 30 MG/ML, 60 MG/2ML	NC	
flurbiprofen TABS 100 MG	NP		KETOROLAC TROMETHAMINE SOLN IJ 30 MG/ML	NC	
flurbiprofen TABS 100 MG	NC		KETOROLAC TROMETHAMINE SOLN NA 15.75 MG/SPRAY	NP	
ibuprofen lysine	NC				



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>ketorolac tromethamine TABS</i>	P	QL(20 ea per 31 day(s) retail); AL(At least 17 yrs old)	<i>naproxen-esomeprazole magnesium</i>	NP	
<i>meclofenamate sodium CAPS</i>	NP		<i>naproxen-esomeprazole magnesium 375 MG-20 MG</i>	NC	
MECLOFENAMATE SODIUM POWD	NC		NAPROXEN POWD	NC	
<i>mefenamic acid CAPS</i>	NP		<i>naproxen SUSP</i>	NC	
MEFENAMIC ACID POWD	NC		<i>naproxen SUSP</i>	P	
<i>meloxicam CAPS</i>	NP		<i>naproxen TABS</i>	P	
<i>meloxicam TABS 15 MG</i>	NC		<i>naproxen TABS</i>	NC	
<i>meloxicam TABS</i>	P		<i>naproxen TBEC</i>	NP	QL(2 ea daily)
MOTRIN CHILDRENS CHEW (Use <i>ibuprofen</i> )	NC		<i>naproxen TBEC</i>	P	QL(2 ea daily)
MOTRIN INFANTS DROPS SUSP (Use <i>ibuprofen</i> )	NC		<i>naproxen TBEC</i>	NC	QL(2 ea daily)
<i>nabumetone</i>	P		<i>oxaprozin TABS</i>	NP	
NALFON CAPS (Use <i>fenoprofen calcium</i> )	NP		<i>oxaprozin TABS</i>	NC	
NALFON TABS (Use <i>fenoprofen calcium</i> )	NP		PHENYLBUTAZONE	NC	
NAPRELAN TB24 500 MG (Use <i>naproxen sodium</i> )	NC		<i>piroxicam CAPS</i>	P	
NAPRELAN TB24 (Use <i>naproxen sodium</i> )	NP		<i>piroxicam CAPS 10 MG</i>	NC	
NAPROSYN SUSP (Use <i>naproxen</i> )	NP		PIROXICAM POWD	NC	
NAPROSYN TABS 500 MG (Use <i>naproxen</i> )	NC		RELAFEN DS	NP	
NAPROTIN	NC		SPRIX SOLN NA	NC	
NAPROXEN SODIUM POWD	NC		SULINDAC POWD	NC	
<i>naproxen sodium TABS 220 MG</i>	C	QL(2 ea daily)	<i>sulindac TABS</i>	P	
<i>naproxen sodium TABS 275 MG, 550 MG</i>	NP		TOLECTIN 600 TABS	NP	
<i>naproxen sodium TB24</i>	NP		<i>tolmetin sodium CAPS</i>	NP	
<i>naproxen sodium TB24</i>	NC		<i>tolmetin sodium TABS 600 MG</i>	NP	
			VIMOVO (Use <i>naproxen-esomeprazole magnesium</i> )	NP	
			ZIPSOR CAPS (Use <i>diclofenac potassium</i> )	NC	
			ZYNRELEF	NC	
			Phosphodiesterase 4 (PDE4) Inhibitors		
			OTEZLA TABS 30 MG	NP	SP
			OTEZLA TABS	NP	
			OTEZLA TBPK	NP	
			OTEZLA TBPK	NP	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Pyrimidine Synthesis Inhibitors			<i>butalbital-acetaminophen CAPS 50 MG-300 MG</i>	NC	
ARAVA (Use leflunomide)	NC	QL(1 ea daily)	<i>butalbital-acetaminophen TABS 50 MG-300 MG</i>	NC	
<i>leflunomide</i>	C	QL(1 ea daily)	<i>butalbital-acetaminophen TABS 50 MG-325 MG</i>	C	
Selective Costimulation Modulators			<i>butalbital-aspirin-caffeine CAPS</i>	C	QL(4 ea daily)
ORENCIA CLICKJECT SOAJ	NP	SP	ESGIC TABS (Use <i>butalbital-acetaminophen-caffeine</i> )	NC	QL(4 ea daily)
ORENCIA SOLR	NC	SP	Analgesics Other		
ORENCIA SOSY	NP	SP	<i>acetaminophen CHEW</i>	C	
Soluble Tumor Necrosis Factor Receptor Agents			<i>acetaminophen LIQD 160 MG/5ML</i>	C	
ENBREL MINI SOCT	P	QL(8 ml per 28 day(s) retail); AL(At least 2 yrs old); SP	<i>acetaminophen SOLN OR 160 MG/5ML, 325 MG/10.15ML, 650 MG/20.3ML</i>	C	QL(240 ml per fill retail)
ENBREL SURECLICK SOAJ	P	QL(8 ml per 28 day(s) retail); AL(At least 2 yrs old); SP	<i>acetaminophen SOLN IV 10 MG/ML, 1000 MG/100ML</i>	NC	
ENBREL SOLN	P	QL(4 ml per 28 day(s) retail); AL(At least 2 yrs old); SP	<i>acetaminophen SUPP 120 MG, 650 MG</i>	C	QL(12 ea per 31 day(s) retail)
ENBREL SOSY 50 MG/ML	P	QL(8 ml per 28 day(s) retail); AL(At least 2 yrs old); SP	<i>acetaminophen SUSP 80 MG/2.5ML, 160 MG/5ML, 650 MG/20.3ML</i>	C	
ENBREL SOSY 25 MG/0.5ML	P	QL(4 ml per 28 day(s) retail); AL(At least 2 yrs old)	<i>acetaminophen TABS 325 MG, 500 MG</i>	C	
<b>ANALGESICS - NonNarcotic - Drugs to Treat Pain, Muscle and Joint Conditions</b>			<i>clonidine hcl (analgesia) EP</i>	NC	
Analgesic Combinations			CLONIDINE HYDROCHLORIDE XX	NC	
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG</i>	C	QL(4 ea daily)	FEVERALL JUNIOR STRENGTH SUPP	C	QL(12 ea per 31 day(s) retail)
<i>butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG</i>	NC		TYLENOL CHILDRENS CHEWABLES/PAIN + FEVER CHEW (Use <i>acetaminophen</i> )	NC	
<i>butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG</i>	C	QL(4 ea daily)	TYLENOL CHILDRENS PAIN +FEVER SUSP (Use <i>acetaminophen</i> )	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TYLENOL CHILDRENS SUSP (Use acetaminophen)	NC		SODIUM SALICYLATE CRYSTALS	NC	
TYLENOL EXTRA STRENGTH TABS (Use acetaminophen)	NC		SODIUM SALICYLATE POWD	NC	
TYLENOL FOR CHILDREN/ADULTS SUSP (Use acetaminophen)	NC		<b>ANALGESICS - OPIOID - Drugs to Treat Pain, Muscle and Joint Conditions</b>		
TYLENOL INFANTS PAIN+FEVER SUSP (Use acetaminophen)	NC		<b>Opioid Agonists</b>		
TYLENOL TABS (Use acetaminophen)	NC		ACTIQ LPOP (Use fentanyl citrate)	NC	
<b>Salicylates</b>			CODEINE PHOSPHATE POWD	NC	
ACETYL SALICYLIC ACID POWD	NC	RX/OTC	codeine sulfate TABS 30 MG	P	Opioid Smart PA; AL(At least 12 yrs old)
aspirin buffered (cal carb-mag carb-mag oxide)	C		CODEINE SULFATE TABS	P	Opioid Smart PA; AL(At least 12 yrs old)
aspirin CHEW	C		CONZIP CP24 (Use tramadol hcl)	NP	
ASPIRIN POWD	NC	RX/OTC	DEMEROL SOLN IJ	NC	
ASPIRIN SUPP 300 MG	C	QL(12 ea per 31 day(s) retail)	DILAUDID LIQD (Use hydromorphone hcl)	NP	
aspirin TABS 325 MG	C		DILAUDID SOLN IJ	NC	
aspirin TBEC 81 MG, 325 MG	C		DILAUDID TABS 8 MG (Use hydromorphone hcl)	NP	Opioid Smart PA; QL(4 ea daily)
BUFFERIN (Use aspirin buffered (cal carb-mag carb-mag oxide))	NC		DILAUDID TABS 2 MG (Use hydromorphone hcl)	NP	Opioid Smart PA; QL(8 ea daily)
DIFLUNISAL POWD	NC		DILAUDID TABS 4 MG (Use hydromorphone hcl)	NP	Opioid Smart PA
diflunisal TABS	NC		DSUVIA SUBL	NP	
diflunisal TABS	NP		fentanyl citrate LPOP	NP	
ECOTRIN ARTHRITIS PAIN TBEC (Use aspirin)	NC		FENTANYL CITRATE POWD	NC	
ECOTRIN REGULAR STRENGTH TBEC (Use aspirin)	NC		fentanyl citrate SOLN IJ 50 MCG/ML, 100 MCG/2ML, 250 MCG/5ML, 500 MCG/10ML, 1000 MCG/20ML, 2500 MCG/50ML	NC	
ECOTRIN TBEC (Use aspirin)	NC				
salsalate	C				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FENTANYL CITRATE SOLN IJ (Use fentanyl citrate)	NC		hydromorphone hcl TABS 4 MG	P	Opioid Smart PA
FENTANYL CITRATE SOLN XX 500 MG/50ML	NC		hydromorphone hcl TABS 8 MG	P	Opioid Smart PA; QL(4 ea daily)
fentanyl citrate SOSY IJ	NC		hydromorphone hcl TABS 2 MG	P	Opioid Smart PA; QL(8 ea daily)
FENTANYL CITRATE SOSY IJ 25 MCG/0.5ML, 50 MCG/ML, 100 MCG/2ML	NC		hydromorphone hcl TB24	NP	
fentanyl citrate TABS	NP		HYDROMORPHONE HYDROCHLORIDE SOLN IJ	NC	
fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	NC	Opioid Smart PA; QL(0.34 ea daily)	HYSINGLA ER T24A	NP	
fentanyl PT72 12 MCG/HR, 25 MCG/HR, 50 MCG/HR, 75 MCG/HR, 100 MCG/HR	P	Opioid Smart PA; QL(0.34 ea daily)	levorphanol tartrate TABS 3 MG	NC	
fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR	NC		levorphanol tartrate TABS	NP	
fentanyl PT72 37.5 MCG/HR, 62.5 MCG/HR, 87.5 MCG/HR	NP		MEPERIDINE HCL POWD	NC	
FENTORA TABS (Use fentanyl citrate)	NP		meperidine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML	NC	
hydrocodone bitartrate CP12	NP		meperidine hcl SOLN OR 50 MG/5ML	P	Opioid Smart PA
hydrocodone bitartrate T24A	NP		meperidine hcl TABS 50 MG	P	Opioid Smart PA; QL(6 ea daily)
hydromorphone hcl LIQD	P		methadone hcl CONC	NC	
HYDROMORPHONE HCL POWD	NC		METHADONE HCL POWD	NC	
hydromorphone hcl SOLN IJ 1 MG/ML, 2 MG/ML, 4 MG/ML, 10 MG/ML, 50 MG/5ML, 500 MG/50ML	NC		methadone hcl SOLN IJ 10 MG/ML	NC	
HYDROMORPHONE HCL SUPP	P	Opioid Smart PA; QL(2 ea daily)	METHADONE HCL SOLN IJ	NC	
hydromorphone hcl TABS 2 MG	NC	Opioid Smart PA; QL(8 ea daily)	methadone hcl TABS 10 MG	C	QL(10 ea daily); PA
			methadone hcl TABS 5 MG	C	QL(4 ea daily); PA
			methadone hcl TBSO	NC	
			morphine sulfate beads	NP	
			morphine sulfate for continuous microinfusion	NC	
			MORPHINE SULFATE/SODIUM CHLORIDE SOLN IV	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MORPHINE SULFATE/SODIUM CHLORIDE SOSY IJ 2 MG/2ML-0.9 %	NC		<i>oxycodone hcl CONC 100 MG/5ML</i>	NC	Opioid Smart PA; QL(4 ml daily)
<i>morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG</i>	NP		<i>oxycodone hcl CONC 100 MG/5ML</i>	P	Opioid Smart PA; QL(4 ml daily)
MORPHINE SULFATE POWD	NC		OXYCODONE HCL POWD	NC	
<i>morphine sulfate SOLN OR 20 MG/ML</i>	NC	Opioid Smart PA	<i>oxycodone hcl SOLN</i>	P	Opioid Smart PA
<i>morphine sulfate SOLN OR 10 MG/5ML, 20 MG/5ML</i>	P	Opioid Smart PA; QL(16.67 ml daily)	<i>oxycodone hcl SOLN</i>	NC	Opioid Smart PA
<i>morphine sulfate SOLN IV 4 MG/ML, 8 MG/ML, 10 MG/ML, 50 MG/ML</i>	NC		<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	NC	
<i>morphine sulfate SOLN OR 20 MG/ML, 100 MG/5ML</i>	P	Opioid Smart PA	<i>oxycodone hcl T12A 10 MG, 20 MG, 40 MG, 80 MG</i>	NP	
MORPHINE SULFATE SOLN IV 2 MG/ML, 4 MG/ML, 8 MG/ML, 10 MG/ML, 50 MG/ML	NC		<i>oxycodone hcl TABA</i>	NC	
<i>morphine sulfate SUPP</i>	P	Opioid Smart PA; QL(0.78 ea daily)	<i>oxycodone hcl TABS 15 MG, 30 MG</i>	P	QL(6 ea daily)
<i>morphine sulfate TABS</i>	P	Opioid Smart PA; QL(6 ea daily)	<i>oxycodone hcl TABS 5 MG, 10 MG, 20 MG</i>	P	Opioid Smart PA; QL(6 ea daily)
<i>morphine sulfate TBCR</i>	P	QL(3 ea daily)	<i>oxycodone hcl TABS 15 MG, 30 MG</i>	NC	QL(6 ea daily)
<i>morphine sulfate TBCR</i>	NC	QL(3 ea daily)	OXYCONTIN T12A	NP	
MS CONTIN TBCR (Use <i>morphine sulfate</i> )	NP	Opioid Smart PA; QL(3 ea daily)	<i>oxymorphone hcl TABS</i>	NP	
NUCYNTA ER TB12	NP		<i>oxymorphone hcl TABS</i>	NC	
NUCYNTA TABS	NP		<i>oxymorphone hcl TB12</i>	NP	
OLINVYK	NC		QDOLO SOLN (Use <i>tramadol hcl</i> )	NP	
OXAYDO TABS 5 MG	NC	Opioid Smart PA; QL(6 ea daily)	<i>remifentanil hcl</i>	NC	
<i>oxycodone hcl CAPS</i>	P	Opioid Smart PA; QL(6 ea daily)	ROXICODONE TABS 15 MG, 30 MG (Use <i>oxycodone hcl</i> )	NP	Opioid Smart PA; QL(6 ea daily)
			ROXYBOND TABA	NP	
			<i>sufentanil citrate SOLN IV 50 MCG/ML</i>	NC	
			SUFENTANIL CITRATE SOLN XX	NC	
			SUFENTANIL CITRATE SOLN IV 50 MCG/ML (Use <i>sufentanil citrate</i> )	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>tramadol hcl CP24 100 MG, 200 MG, 300 MG</i>	NP		<i>acetaminophen w/ codeine TABS 60 MG-300 MG</i>	NC	Opioid Smart PA; QL(6 ea daily); AL(At least 12 yrs old)
<i>tramadol hcl SOLN</i>	NP		<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	P	QL(6 ea daily); AL(At least 12 yrs old)
<i>tramadol hcl TABS 50 MG</i>	P	Opioid Smart PA; QL(8 ea daily); AL(At least 18 yrs old)	<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	NP	
<i>tramadol hcl TABS 100 MG</i>	NP		<i>acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG</i>	NC	
<i>tramadol hcl TABS 50 MG</i>	NC	Opioid Smart PA; QL(8 ea daily); AL(At least 18 yrs old)	<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-300 MG</i>	P	
<i>tramadol hcl TABS 25 MG</i>	P		<i>butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG</i>	P	Opioid Smart PA; QL(4 ea daily); AL(At least 12 yrs old)
<i>tramadol hcl TB24</i>	NP		<i>butalbital-aspirin-caffeine w/cod</i>	NC	Opioid Smart PA; QL(4 ea daily); AL(At least 12 yrs old)
<i>tramadol hcl TB24</i>	P		<i>butalbital-aspirin-caffeine w/cod</i>	P	Opioid Smart PA; QL(4 ea daily); AL(At least 12 yrs old)
TRAMADOL HYDROCHLORIDE SOLN (Use tramadol hcl)	NP		<i>butalbital-aspirin-caffeine w/cod</i>	NP	Opioid Smart PA; QL(4 ea daily); AL(At least 12 yrs old)
ULTRAM TABS (Use tramadol hcl)	NC	Opioid Smart PA; QL(8 ea daily); AL(At least 18 yrs old)	FIORICET/CODEINE 30 MG-40 MG-50 MG-300 MG (Use butalbital-acetaminophen-caffeine w/ codeine)	NP	
XTAMPZA ER	P				
Opioid Combinations					
<i>acetaminophen w/ codeine SOLN</i>	NC	Opioid Smart PA; QL(30 ml daily); AL(At least 12 yrs old)			
<i>acetaminophen w/ codeine SOLN</i>	P	Opioid Smart PA; QL(30 ml daily); AL(At least 12 yrs old)			
<i>acetaminophen w/ codeine TABS 15 MG-300 MG, 30 MG-300 MG, 60 MG-300 MG</i>	P	Opioid Smart PA; QL(6 ea daily); AL(At least 12 yrs old)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML</i>	P	Opioid Smart PA; QL(180 ml daily)	<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	P	
<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	P		OXYCODONE/ACETAMINOPHEN TABS	NC	
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	NC	Opioid Smart PA; QL(10 ea daily)	PERCOCET TABS 325 MG-2.5 MG ( <i>Use oxycodone w/ acetaminophen</i> )	NP	
<i>hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Opioid Smart PA; QL(10 ea daily)	PERCOCET TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG ( <i>Use oxycodone w/ acetaminophen</i> )	NP	Opioid Smart PA; QL(6 ea daily)
<i>hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG</i>	NC		PROLATE SOLN	NP	
<i>hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG</i>	P		PROLATE TABS	NP	
NALOCET TABS	NP		PROLATE TABS	NC	
NALOCET TABS	NC		SEGLENTIS	NP	
OXYCODONE AND ACETAMINOPHEN TABS	NC		<i>tramadol-acetaminophen</i>	P	Opioid Smart PA; QL(4 ea daily); AL(At least 18 yrs old)
OXYCODONE HYDROCHLORIDE/ACETAMINOPHEN SOLN	NC		<i>tramadol-acetaminophen</i>	NC	Opioid Smart PA; QL(4 ea daily); AL(At least 18 yrs old)
<i>oxycodone w/ acetaminophen SOLN</i>	NP	Opioid Smart PA	ULTRACET ( <i>Use tramadol-acetaminophen</i> )	NC	Opioid Smart PA; QL(4 ea daily); AL(At least 18 yrs old)
<i>oxycodone w/ acetaminophen TABS 325 MG-2.5 MG</i>	NC		<b>Opioid Partial Agonists</b>		
<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	NC	Opioid Smart PA; QL(6 ea daily)	BELBUCA FILM	NP	
<i>oxycodone w/ acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG</i>	P	Opioid Smart PA; QL(6 ea daily)	BRIXADI SOSY 32 MG/0.64ML, 64 MG/0.18ML, 96 MG/0.27ML	NP	
			BUPRENEX SOLN ( <i>Use buprenorphine hcl</i> )	NC	
			<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG</i>	NP	QL(3 ea daily); AL(At least 16 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 1 MG-4 MG</i>	NC	QL(3 ea daily); AL(At least 16 yrs old)	SUBOXONE FILM SL 2 MG-8 MG, 3 MG-12 MG (Use <i>buprenorphine hcl-naloxone hcl dihydrate</i> )	P	QL(2 ea daily); AL(At least 16 yrs old)
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG, 3 MG-12 MG</i>	NP	QL(2 ea daily); AL(At least 16 yrs old)	<b>ANDROGENS-ANABOLIC - Drugs to Regulate Hormones</b>		
<i>buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG, 3 MG-12 MG</i>	NC	QL(2 ea daily); AL(At least 16 yrs old)	Anabolic Steroids		
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG</i>	P	QL(12 ea daily); AL(At least 16 yrs old)	<i>oxandrolone</i>	NC	
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG</i>	P	QL(3 ea daily); AL(At least 16 yrs old)	Androgens		
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG</i>	NC	QL(12 ea daily); AL(At least 16 yrs old)	ANDRODERM PT24 2 MG/24HR, 4 MG/24HR	NP	
<i>buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG</i>	NC	QL(3 ea daily); AL(At least 16 yrs old)	ANDROGEL PUMP GEL TD 1.62 % (Use <i>testosterone</i> )	NP	
<i>buprenorphine hcl SOLN</i>	NC		ANDROGEL PUMP GEL TD 1.62 % (Use <i>testosterone</i> )	NC	
<i>buprenorphine hcl SUBL</i>	P		ANDROGEL GEL TD 25 MG/2.5GM, 40.5 MG/2.5GM, 50 MG/5GM (Use <i>testosterone</i> )	NP	
<i>buprenorphine hcl SUBL</i>	NC		ANDROGEL GEL TD 25 MG/2.5GM, 40.5 MG/2.5GM, 50 MG/5GM (Use <i>testosterone</i> )	NC	
<i>buprenorphine PTWK</i>	NP		<i>danazol CAPS</i>	NC	
<i>butorphanol tartrate NA 10 MG/ML</i>	NP		DANAZOL POWD	NC	
<i>butorphanol tartrate IJ 1 MG/ML, 2 MG/ML</i>	NC		FORTESTA GEL TD (Use <i>testosterone</i> )	NP	
BUTRANS PTWK (Use <i>buprenorphine</i> )	P		JATENZO CAPS	NC	
<i>nalbuphine hcl</i>	NC		METHITEST TABS	C	
<i>pentazocine w/ naloxone hcl</i>	NP		<i>methyltestosterone CAPS</i>	NC	
SUBLOCADE SOSY	P	SP	METHYLTESTOSTERONE POWD	NC	
SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG (Use <i>buprenorphine hcl-naloxone hcl dihydrate</i> )	P	QL(3 ea daily); AL(At least 16 yrs old)	NATESTO GEL NA	NC	
			NATESTO GEL NA	NP	
			TESTIM GEL TD (Use <i>testosterone</i> )	PA	PA
			<i>testosterone cypionate SOLN IM 200 MG/ML</i>	C	QL(4 ml per 31 day(s) retail)



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>testosterone cypionate SOLN IM 100 MG/ML</i>	C	QL(0.2858 ml daily)	LIDOCAINE HCL-HYDROCORTISONE ACETATE WITH ALOE GEL	NC	
<i>testosterone enanthate SOLN IM</i>	C	QL(0.1429 ml daily)	<i>lidocaine-hydrocortisone acetate (rectal) CREA EX</i>	NC	
<i>testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM, 50 MG/5GM</i>	NP		<i>lidocaine-hydrocortisone acetate (rectal) KIT</i>	NC	
<i>testosterone GEL TD 1.62 %</i>	PA	PA	PROCTOFOAM HC FOAM EX	NC	
<i>testosterone GEL TD 1 %, 1.62 %, 20.25 MG/1.25GM, 25 MG/2.5GM, 50 MG/5GM</i>	NC		<b>Rectal Steroids</b>		
<i>testosterone SOLN</i>	NP		ANUSOL-HC EX ( <i>Use hydrocortisone (rectal)</i> )	NC	
TLANDO CAPS	NC		<i>hydrocortisone (rectal) EX 1 %</i>	C	1 package(s) per fill retail; RX/OTC
VOGELXO PUMP GEL TD ( <i>Use testosterone</i> )	NP		<i>hydrocortisone (rectal) EX 2.5 %</i>	C	
VOGELXO GEL TD ( <i>Use testosterone</i> )	NP		<i>hydrocortisone acetate (rectal)</i>	NC	
VOGELXO GEL TD ( <i>Use testosterone</i> )	NC		<b>Vasodilating Agents</b>		
XYOSTED SOAJ	NC		<i>nitroglycerin (intra-anal)</i>	NC	
<b>ANORECTAL AND RELATED PRODUCTS - Rectal Drugs to Treat Pain, Swelling and Itching</b>			<b>ANTACIDS</b>		
<b>Intrarectal Steroids</b>			<b>Antacid Combinations</b>		
<i>budesonide (intrarectal)</i>	NP		<i>alum &amp; mag hydrox-simethicone LIQD</i>	C	QL(24 ml daily)
CORTENEMA ( <i>Use hydrocortisone (intrarectal)</i> )	NC		<i>alum &amp; mag hydrox-simethicone SUSP 1200 MG/30ML-120 MG/30ML-1200 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 200 MG/5ML-200 MG/5ML-20 MG/5ML-200 MG/5ML-200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML</i>	C	QL(24 ml daily)
CORTIFOAM EX 10 %	NC		CIDATRINE-TM TABS	NC	
<i>hydrocortisone (intrarectal)</i>	C		PHAZYME GAS & ACID MAXIMUM STRENGTH CHEW	NC	
UCERIS ( <i>Use budesonide (intrarectal)</i> )	NP		SENTRIVA-ES CHEW	NC	
<b>Rectal Combinations</b>					
<i>hydrocortisone acetate w/ pramoxine CREA EX 1 %-1 %</i>	NC				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SINTRA-ES TABS	NC		PIPERAZINE CITRATE	NC	
Antacids - Aluminum Salts			<i>praziquantel</i>	NC	
ALUMINUM HYDROXIDE SUSP 320 MG/5ML	C		THIABENDAZOLE POWD	NC	
Antacids - Bicarbonate			<b>ANTIANGINAL AGENTS - Drugs to Treat Chest Pain</b>		
<i>sodium bicarbonate (antacid) TABS 325 MG, 650 MG</i>	C	QL(3.34 ea daily)	Antianginals-Other		
Antacids - Calcium Salts			ASPRUZYO SPRINKLE PACK	NP	
<i>calcium carbonate (antacid) CHEW 500 MG</i>	C		RANEXA TB12 ( <i>Use ranolazine</i> )	NC	
TUMS LASTING EFFECTS CHEW ( <i>Use calcium carbonate (antacid)</i> )	NC		<i>ranolazine TB12</i>	P	
TUMS CHEW ( <i>Use calcium carbonate (antacid)</i> )	NC		Nitrates		
Antacids - Magnesium Salts			GONITRO PACK	NC	
MAGNESIUM CARBONATE GRAN	NC		ISORDIL TITRADOSE TABS ( <i>Use isosorbide dinitrate</i> )	NC	
MAGNESIUM OXIDE HEAVY POWD	NC	RX/OTC	<i>isosorbide dinitrate TABS 40 MG</i>	NC	
MAGNESIUM OXIDE LIGHT POWD	NC	RX/OTC	<i>isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG</i>	C	
<i>magnesium oxide TABS 400 MG</i>	C		<i>isosorbide mononitrate TABS</i>	C	QL(2 ea daily)
MAGNESIUM TRISILICATE	NC		<i>isosorbide mononitrate TB24</i>	C	QL(1 ea daily)
MAGNESIUM TRISILICATE HYDRATE	NC		NITRO-BID OINT	C	
<b>ANTHELMINTICS - Drugs to Treat Worm Infections</b>			NITRO-DUR PT24	NC	
Anthelmintics			NITRO-DUR PT24 ( <i>Use nitroglycerin</i> )	NC	
<i>albendazole</i>	NC		<i>nitroglycerin in d5w</i>	NC	
EMVERM CHEW	C	QL(1 ea per fill retail)	<i>nitroglycerin CPCR</i>	C	
<i>ivermectin</i>	NC		<i>nitroglycerin PT24</i>	C	
MEBENDAZOLE POWD	NC		<i>nitroglycerin SOLN TL 0.4 MG/SPRAY</i>	NC	
			NITROGLYCERIN SOLN IV	NC	
			<i>nitroglycerin SUBL</i>	C	
			NITROSTAT SUBL ( <i>Use nitroglycerin</i> )	NC	

Drug Name	Drug Tier	Requirements/Limits
<b>ANTI-ANXIETY AGENTS - Drugs to Treat Anxiety</b>		
Antianxiety Agents - Misc.		
<i>buspirone hcl 7.5 MG, 30 MG</i>	C	QL(3 ea daily)
<i>buspirone hcl 5 MG, 10 MG</i>	C	QL(6 ea daily)
<i>buspirone hcl 15 MG</i>	C	QL(4 ea daily)
DROPERIDOL/SODIUM CHLORIDE SOSY	NC	
DROPERIDOL POWD	NC	
<i>droperidol SOLN 2.5 MG/ML</i>	NC	
<i>hydroxyzine hcl SOLN 25 MG/ML, 50 MG/ML</i>	NC	
<i>hydroxyzine hcl SYRP</i>	C	
<i>hydroxyzine hcl TABS</i>	C	
<i>hydroxyzine pamoate CAPS</i>	C	
HYDROXYZINE PAMOATE POWD	NC	
<i>meprobamate</i>	C	
VISTARIL CAPS ( <i>Use hydroxyzine pamoate</i> )	NC	
Benzodiazepines		
ALPRAZOLAM INTENSOL CONC	NC	
<i>alprazolam TABS</i>	C	QL(3 ea daily)
<i>alprazolam TB24</i>	NC	
<i>alprazolam TBP</i>	NC	
ATIVAN TABS 0.5 MG, 2 MG ( <i>Use lorazepam</i> )	NC	QL(3 ea daily)
ATIVAN TABS 1 MG ( <i>Use lorazepam</i> )	NC	QL(4 ea daily)
<i>chlordiazepoxide hcl CAPS</i>	C	QL(4 ea daily)
<i>clorazepate dipotassium TABS</i>	C	QL(3 ea daily)
<i>diazepam CONC</i>	NC	
DIAZEPAM SOAJ	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>diazepam SOLN OR 5 MG/5ML</i>	C	
<i>diazepam SOLN IJ 5 MG/ML, 10 MG/2ML, 50 MG/10ML</i>	NC	
DIAZEPAM SOLN IJ 5 MG/ML	NC	
<i>diazepam TABS</i>	C	QL(4 ea daily)
<i>lorazepam CONC</i>	NC	
<i>lorazepam SOLN</i>	NC	
<i>lorazepam TABS 1 MG</i>	C	QL(4 ea daily)
<i>lorazepam TABS 0.5 MG, 2 MG</i>	C	QL(3 ea daily)
LOREEV XR CS24	NC	
<i>oxazepam CAPS</i>	C	QL(4 ea daily)
TRANXENE T TABS 7.5 MG ( <i>Use clorazepate dipotassium</i> )	NC	QL(3 ea daily)
VALIUM TABS ( <i>Use diazepam</i> )	NC	QL(4 ea daily)
XANAX TABS ( <i>Use alprazolam</i> )	NC	QL(3 ea daily)
<b>ANTIARRHYTHMICS - Drugs to treat abnormal heart rhythms</b>		
Antiarrhythmics - Misc.		
<i>adenosine SOLN 6 MG/2ML, 12 MG/4ML</i>	NC	
Antiarrhythmics Type I-A		
<i>disopyramide phosphate CAPS</i>	C	
NORPACE CR CP12 100 MG	NC	
NORPACE CR CP12 150 MG	C	
NORPACE CAPS ( <i>Use disopyramide phosphate</i> )	NC	
PROCAINAMIDE HCL POWD	NC	
<i>procainamide hcl SOLN</i>	NC	
<i>quinidine gluconate TBCR</i>	C	

Drug Name	Drug Tier	Requirements/Limits
<i>quinidine sulfate TABS</i>	C	
<b>Antiarrhythmics Type I-B</b>		
<i>lidocaine hcl (cardiac) SOSY</i>	NC	
LIDOCAINE HCL SOLN	NC	
<i>lidocaine in d5w 5 %-4 MG/ML, 5 %-8 MG/ML</i>	NC	
<i>mexiletine hcl</i>	C	
<b>Antiarrhythmics Type I-C</b>		
<i>flecainide acetate</i>	C	
<i>propafenone hcl CP12</i>	C	
<i>propafenone hcl TABS</i>	C	
RYTHMOL SR CP12 ( <i>Use propafenone hcl</i> )	NC	
<b>Antiarrhythmics Type III</b>		
<i>amiodarone hcl SOLN 50 MG/ML, 450 MG/9ML, 900 MG/18ML</i>	NC	
<i>amiodarone hcl TABS 200 MG</i>	C	
<i>amiodarone hcl TABS 100 MG, 400 MG</i>	NC	
<i>dofetilide</i>	C	
<i>ibutilide fumarate</i>	NC	
MULTAQ	NC	
NEXTERONE	NC	
TIKOSYN ( <i>Use dofetilide</i> )	NC	
<b>ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to Treat Lung Conditions</b>		
<b>Antiasthmatic - Monoclonal Antibodies</b>		
FASENRA PEN SOAJ	NC	SP
FASENRA SOSY	NC	SP
XOLAIR SOLR	C	SP; PA
XOLAIR SOSY	C	SP; PA
<b>Anti-Inflammatory Agents</b>		
<i>cromolyn sodium NEBU</i>	C	QL(8 ml daily)

Drug Name	Drug Tier	Requirements/Limits
CROMOLYN SODIUM POWD	NC	
<b>Bronchodilators - Anticholinergics</b>		
ATROVENT HFA	P	1 package(s) per 31 day(s) retail
INCRUSE ELLIPTA	P	1 package(s) per 31 day(s) retail
IPRATROPIUM BROMIDE MONOHYDRATE POWD	NC	
IPRATROPIUM BROMIDE POWD	NC	
<i>ipratropium bromide SOLN 0.02 %</i>	NC	QL(375 ml per 25 day(s) retail)
<i>ipratropium bromide SOLN 0.02 %</i>	NP	QL(375 ml per 25 day(s) retail)
SPIRIVA HANDIHALER CAPS ( <i>Use tiotropium bromide monohydrate</i> )	P	
SPIRIVA RESPIMAT AERS	NP	
<i>tiotropium bromide monohydrate CAPS</i>	NP	
TUDORZA PRESSAIR	NC	1 package(s) per 31 day(s) retail
TUDORZA PRESSAIR	NP	1 package(s) per 31 day(s) retail
YUPELRI	NP	
<b>Leukotriene Modulators</b>		
ACCOLATE ( <i>Use zafirlukast</i> )	NP	
<i>montelukast sodium CHEW</i>	P	QL(1 ea daily)
<i>montelukast sodium CHEW</i>	NC	QL(1 ea daily)
<i>montelukast sodium PACK</i>	NC	QL(1 ea daily)
<i>montelukast sodium PACK</i>	P	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
montelukast sodium TABS	NC	QL(1 ea daily)
montelukast sodium TABS	P	QL(1 ea daily)
SINGULAIR CHEW (Use montelukast sodium)	NP	QL(1 ea daily)
SINGULAIR PACK (Use montelukast sodium)	NP	QL(1 ea daily)
SINGULAIR TABS (Use montelukast sodium)	NP	QL(1 ea daily)
zafirlukast	P	
zafirlukast 20 MG	NC	
zileuton TB12	NC	
zileuton TB12	NP	
ZYFLO TABS	NP	
Phosphodiesterase 3 & 4 (PDE3 & PDE4) Inhibitors		
OHTUVAYRE	NP	
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP (Use roflumilast)	NP	QL(1 ea daily)
roflumilast	NP	QL(1 ea daily)
Steroid Inhalants		
ALVESCO	P	
ARMONAIR DIGIHALER	NP	
ARNUIITY ELLIPTA	P	QL(1 ea daily)
ASMANEX HFA AERO	P	QL(0.44 gm daily)
ASMANEX TWISTHALER 120 METERED DOSES AEPB	P	
ASMANEX TWISTHALER 14 METERED DOSES AEPB	P	
ASMANEX TWISTHALER 30 METERED DOSES AEPB	P	
ASMANEX TWISTHALER 60 METERED DOSES AEPB	P	

Drug Name	Drug Tier	Requirements/Limits
budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML	NC	QL(120 ml per fill retail); AL(Up to 8 yrs old)
budesonide (inhalation) SUSP 1 MG/2ML	NC	QL(60 ml per 31 day(s) retail); AL(Up to 8 yrs old)
budesonide (inhalation) SUSP 1 MG/2ML	P	QL(60 ml per 31 day(s) retail); AL(Up to 8 yrs old)
budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML	P	QL(120 ml per fill retail); AL(Up to 8 yrs old)
FLOVENT DISKUS AEPB (Use fluticasone propionate (inhalation))	NP	
FLUNISOLIDE ANHYDROUS POWD	NC	
fluticasone propionate (inhalation) AEPB	NP	
fluticasone propionate hfa 44 MCG/ACT	P	QL(11 gm per 25 day(s) retail)
fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT	P	QL(12 gm per 25 day(s) retail)
PULMICORT FLEXHALER AEPB	NP	1 package(s) per fill retail
PULMICORT FLEXHALER AEPB	NP	1 package(s) per fill retail
PULMICORT SUSP 1 MG/2ML (Use budesonide (inhalation))	NP	QL(60 ml per 31 day(s) retail); AL(Up to 8 yrs old)
PULMICORT SUSP 0.25 MG/2ML, 0.5 MG/2ML (Use budesonide (inhalation))	NP	QL(120 ml per fill retail); AL(Up to 8 yrs old)
QVAR REDIHALER 40 MCG/ACT	P	QL(0.36 gm daily)
QVAR REDIHALER 80 MCG/ACT	P	QL(0.72 gm daily)
Sympathomimetics		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADVAIR DISKUS AEPB (Use fluticasone-salmeterol)	P	QL(60 ea per 30 day(s) retail); AL(At least 4 yrs old)	<i>albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML</i>	P	QL(375 ml per 31 day(s) retail)
ADVAIR HFA AERO (Use fluticasone-salmeterol)	P		<i>albuterol sulfate NEBU 2.5 MG/0.5ML</i>	P	
AIRDUO DIGIHALER 113/14	NP		ALBUTEROL SULFATE NEBU	NC	
AIRDUO DIGIHALER 232/14	NP		ALBUTEROL SULFATE POWD	NC	
AIRDUO DIGIHALER 55/14	NP		<i>albuterol sulfate SYRP</i>	P	
AIRDUO RESPICLICK 113/14 AEPB (Use fluticasone-salmeterol)	NP		<i>albuterol sulfate SYRP</i>	NC	
AIRDUO RESPICLICK 232/14 AEPB (Use fluticasone-salmeterol)	NP		<i>albuterol sulfate TABS</i>	P	
AIRDUO RESPICLICK 55/14 AEPB	NC		ANORO ELLIPTA	NC	
AIRDUO RESPICLICK 55/14 AEPB (Use fluticasone-salmeterol)	NP		ANORO ELLIPTA	P	
AIRSUPRA	NP		<i>arformoterol tartrate</i>	NC	
<i>albuterol sulfate AERS</i>	NP	QL(18 gm per fill retail; 36 gm per 30 day(s) retail)	<i>arformoterol tartrate</i>	P	
<i>albuterol sulfate AERS</i>	NP	QL(8.5 gm per fill retail; 17 gm per 30 day(s) retail)	BEVESPI AEROSPHERE	NP	
<i>albuterol sulfate AERS</i>	P	QL(6.7 gm per fill retail; 13.4 gm per 30 day(s) retail)	BREO ELLIPTA (Use fluticasone furoate-vilanterol)	NP	
<i>albuterol sulfate AERS</i>	NC	QL(18 gm per fill retail; 36 gm per 30 day(s) retail)	BREO ELLIPTA 100 MCG/ACT-25 MCG/ACT	NC	
<i>albuterol sulfate AERS</i>	NC		BREO ELLIPTA	NP	
<i>albuterol sulfate NEBU 0.083 %</i>	P	QL(12.5 ml daily)	BREZTRI AEROSPHERE	NP	
<i>albuterol sulfate NEBU 0.5 %</i>	NC		BROVANA (Use arformoterol tartrate)	NP	
			<i>budesonide-formoterol fumarate dihydrate</i>	NP	QL(11 gm per fill retail)
			COMBIVENT RESPIMAT AERS	P	QL(4 gm per 31 day(s) retail)
			DUAKLIR PRESSAIR	NP	
			DULERA	P	
			EPHEDRINE HCL POWD	NC	
			EPHEDRINE SULFATE POWD	NC	
			<i>fluticasone furoate-vilanterol</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT</i>	NP	QL(60 ea per 30 day(s) retail); AL(At least 4 yrs old)
<i>formoterol fumarate NEBU</i>	NC	
<i>formoterol fumarate NEBU</i>	NP	
<i>ipratropium-albuterol SOLN</i>	NP	QL(12 ml daily)
<i>isoproterenol hcl</i>	NC	
<i>levalbuterol hcl</i>	NP	
<i>levalbuterol hcl</i>	NC	
<i>levalbuterol tartrate</i>	NP	QL(0.5 gm daily; 30 gm per 30 day(s) retail)
METAPROTERENOL SULFATE POWD	NC	
PERFOROMIST NEBU (Use <i>formoterol fumarate</i> )	NP	
PROAIR DIGIHALER	NP	
PROAIR RESPICLICK AEPB	P	
SEREVENT DISKUS	P	1 package(s) per fill retail
STIOLTO RESPIMAT	P	
STRIVERDI RESPIMAT	NP	
TERBUTALINE SULFATE POWD	NC	
<i>terbutaline sulfate SOLN</i>	NC	
<i>terbutaline sulfate TABS</i>	NC	
<i>terbutaline sulfate TABS</i>	NP	
TRELEGY ELLIPTA	NP	
XOPENEX (Use <i>levalbuterol hcl</i> )	NC	
XOPENEX CONCENTRATE (Use <i>levalbuterol hcl</i> )	NC	

Drug Name	Drug Tier	Requirements/Limits
XOPENEX HFA (Use <i>levalbuterol tartrate</i> )	NP	QL(0.5 gm daily; 30 gm per 30 day(s) retail)
<b>Xanthines</b>		
AMINOPHYLLINE ANHYDROUS POWD	NC	
<i>aminophylline SOLN</i>	NC	
THEO-24 CP24	C	
THEOPHYLLINE ETHYLENEDIAMINE EP POWD	NC	
<i>theophylline ELIX</i>	C	
<i>theophylline SOLN</i>	C	QL(475 ml per fill retail)
<i>theophylline TB12</i>	C	
<i>theophylline TB24</i>	C	
<b>ANTICOAGULANTS - Blood Thinners</b>		
<b>Coumarin Anticoagulants</b>		
WARFARIN SODIUM CLATHRATEFORM POWD	NC	
<i>warfarin sodium TABS</i>	P	
<i>warfarin sodium TABS</i>	NC	
<b>Direct Factor Xa Inhibitors</b>		
ELIQUIS STARTER PACK TBPK	P	QL(2.47 ea daily)
ELIQUIS TABS	P	QL(2 ea daily)
SAVAYSA	NP	
XARELTO STARTER PACK TBPK	P	
XARELTO SUSR	P	
XARELTO TABS	P	
<b>Heparins And Heparinoid-Like Agents</b>		
<i>enoxaparin sodium SOLN IJ 300 MG/3ML</i>	P	QL(126 ml per 180 day(s) retail)
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	NC	QL(12.6 ml per 180 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>enoxaparin sodium SOSY 30 MG/0.3ML</i>	P	QL(12.6 ml per 180 day(s) retail)	HEPARIN SODIUM/NAACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML, 0.45 %-25000 UNIT/250ML	NC	
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	NC	QL(25.2 ml per 180 day(s) retail)	HEPARIN SODIUM/SODIUM CHLORIDE SOLN IV 0.45 %-25000 UNIT/250ML, 0.45 %-25000 UNIT/500ML	NC	
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	NC	QL(33.6 ml per 180 day(s) retail)	HEPARIN SODIUM SOLN IJ 5000 UNIT/ML	NC	
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	P	QL(16.8 ml per 180 day(s) retail)	HEPARIN SODIUM SOSY IJ 5000 UNIT/0.5ML	C	
<i>enoxaparin sodium SOSY 40 MG/0.4ML</i>	NC	QL(16.8 ml per 180 day(s) retail)	LOVENOX SOLN IJ 300 MG/3ML ( <i>Use enoxaparin sodium</i> )	NP	QL(126 ml per 180 day(s) retail)
<i>enoxaparin sodium SOSY 80 MG/0.8ML, 120 MG/0.8ML</i>	P	QL(33.6 ml per 180 day(s) retail)	LOVENOX SOLN IJ 300 MG/3ML ( <i>Use enoxaparin sodium</i> )	NP	Max 42 syringes in 180 days; QL(126 ml per 180 day(s) retail); SP
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	NC	QL(42 ml per 180 day(s) retail)	LOVENOX SOSY 40 MG/0.4ML ( <i>Use enoxaparin sodium</i> )	NP	Max 42 syringes in 180 days; QL(16.8 ml per 180 day(s) retail); SP
<i>enoxaparin sodium SOSY 60 MG/0.6ML</i>	P	QL(25.2 ml per 180 day(s) retail)	LOVENOX SOSY 100 MG/ML, 150 MG/ML ( <i>Use enoxaparin sodium</i> )	NP	Max 42 syringes in 180 days; QL(42 ml per 180 day(s) retail); SP
<i>enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML</i>	P	QL(42 ml per 180 day(s) retail)	LOVENOX SOSY 80 MG/0.8ML ( <i>Use enoxaparin sodium</i> )	NC	QL(33.6 ml per 180 day(s) retail)
FRAGMIN SOLN 10000 UNIT/4ML	NP		LOVENOX SOSY 30 MG/0.3ML ( <i>Use enoxaparin sodium</i> )	NP	QL(12.6 ml per 180 day(s) retail)
FRAGMIN SOSY	NP		LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML ( <i>Use enoxaparin sodium</i> )	NP	Max 42 syringes in 180 days; QL(33.6 ml per 180 day(s) retail); SP
<i>heparin (porcine) in sodium chloride SOLN IV 0.9 %-1000 UNIT/500ML, 0.9 %-2000 UNIT/L</i>	NC				
<i>heparin sodium (porcine) lock flush 10 UNIT/ML, 100 UNIT/ML</i>	NC				
<i>heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML</i>	C				
HEPARIN SODIUM/D5W	NC				
HEPARIN SODIUM/DEXTROSE 25000 UNIT/500ML-5 %, 5 %-25000 UNIT/250ML	NC				



Drug Name	Drug Tier	Requirements/Limits
LOVENOX SOSY 60 MG/0.6ML (Use enoxaparin sodium)	NP	Max 42 syringes in 180 days; QL(25.2 ml per 180 day(s) retail); SP
LOVENOX SOSY 60 MG/0.6ML (Use enoxaparin sodium)	NP	QL(25.2 ml per 180 day(s) retail)
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (Use enoxaparin sodium)	NP	QL(33.6 ml per 180 day(s) retail)
LOVENOX SOSY 100 MG/ML, 150 MG/ML (Use enoxaparin sodium)	NP	QL(42 ml per 180 day(s) retail)
LOVENOX SOSY 30 MG/0.3ML (Use enoxaparin sodium)	NP	Max 42 syringes in 180 days; QL(12.6 ml per 180 day(s) retail); SP
LOVENOX SOSY 40 MG/0.4ML (Use enoxaparin sodium)	NP	QL(16.8 ml per 180 day(s) retail)
<b>In Vitro/Lock Anticoagulants</b>		
ANTICOAGULANT SODIUM CITRATE SOLN	NC	
DEFENCATH	NC	
<b>Thrombin Inhibitors</b>		
<i>argatroban</i>	NC	
ARGATROBAN	NC	
ARGATROBAN/SODIUM CHLORIDE	NC	
BIVALIRUDIN RTU SOLN (Use bivalirudin trifluoroacetate)	NC	
<i>bivalirudin trifluoroacetate SOLN</i>	NC	
<i>bivalirudin trifluoroacetate SOLR</i>	NC	
<i>dabigatran etexilate mesylate CAPS</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>dabigatran etexilate mesylate CAPS</i>	NC	
PRADAXA CAPS 75 MG	NC	
PRADAXA CAPS (Use <i>dabigatran etexilate mesylate</i> )	P	
PRADAXA CAPS	P	
<b>ANTICONVULSANTS - Drugs to Treat Seizures</b>		
<b>AMPA Glutamate Receptor Antagonists</b>		
FYCOMPA SUSP	PA	PA
FYCOMPA TABS	PA	PA
<b>Anticonvulsants - Benzodiazepines</b>		
<i>clobazam SUSP</i>	PA	PA
<i>clobazam TABS</i>	NC	
<i>clobazam TABS</i>	PA	PA
<i>clonazepam TABS</i>	C	QL(4 ea daily)
<i>clonazepam TBDP</i>	NC	
DIASTAT ACUDIAL GEL (Use <i>diazepam (anticonvulsant)</i> )	NC	QL(1 ea per fill retail); AL(At least 2 yrs old)
DIASTAT PEDIATRIC GEL (Use <i>diazepam (anticonvulsant)</i> )	NC	QL(1 ea per fill retail); AL(At least 2 yrs old)
<i>diazepam (anticonvulsant) GEL</i>	C	QL(1 ea per fill retail); AL(At least 2 yrs old)
KLONOPIN TABS (Use <i>clonazepam</i> )	NC	QL(4 ea daily)
LIBERVANT FILM	NP	
NAYZILAM	P	QL(10 ea per 30 day(s) retail)
ONFI SUSP (Use <i>clobazam</i> )	NP	
ONFI TABS (Use <i>clobazam</i> )	NP	
SYMPAZAN FILM	NP	
VALTOCO 10 MG DOSE LIQD	P	QL(10 ea per 30 day(s) retail)
VALTOCO 15 MG DOSE LQPK	P	QL(10 ea per 30 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VALTOCO 20 MG DOSE LQPK	P	QL(10 ea per 30 day(s) retail)	<i>gabapentin SOLN 250 MG/5ML</i>	NC	
VALTOCO 5 MG DOSE LIQD	P	QL(10 ea per 30 day(s) retail)	<i>gabapentin SOLN</i>	P	
Anticonvulsants - Misc.			<i>gabapentin TABS 800 MG</i>	P	QL(4 ea daily)
APTIOM	NP		<i>gabapentin TABS 600 MG</i>	P	QL(6 ea daily)
BANZEL SUSP ( <i>Use rufinamide</i> )	PA	PA	<i>gabapentin TABS 600 MG</i>	NC	QL(6 ea daily)
BANZEL TABS ( <i>Use rufinamide</i> )	PA	PA	<i>gabapentin TABS 800 MG</i>	NC	QL(4 ea daily)
BRIVIACT SOLN OR 10 MG/ML	NP		KEPPRA XR TB24 ( <i>Use levetiracetam</i> )	NP	
BRIVIACT TABS	NP		KEPPRA SOLN OR 100 MG/ML ( <i>Use levetiracetam</i> )	NP	QL(16 ml daily)
<i>carbamazepine CHEW</i>	P		KEPPRA TABS 1000 MG ( <i>Use levetiracetam</i> )	NP	
<i>carbamazepine CP12</i>	NP		KEPPRA TABS 250 MG, 750 MG ( <i>Use levetiracetam</i> )	NP	QL(4 ea daily)
<i>carbamazepine CP12 200 MG, 300 MG</i>	NC		KEPPRA TABS 500 MG ( <i>Use levetiracetam</i> )	NP	QL(6 ea daily)
CARBAMAZEPINE POWD	NC		<i>lacosamide SOLN OR 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	NC	
<i>carbamazepine SUSP</i>	NP		<i>lacosamide SOLN OR 10 MG/ML, 50 MG/5ML, 100 MG/10ML</i>	NP	
<i>carbamazepine SUSP</i>	NC		<i>lacosamide TABS</i>	NP	
<i>carbamazepine TABS</i>	P		<i>lacosamide TABS</i>	NC	
<i>carbamazepine TB12 200 MG</i>	NC		LAMICTAL CHEWABLE DISPERSIBLE CHEW ( <i>Use lamotrigine</i> )	NP	
<i>carbamazepine TB12</i>	NP		LAMICTAL ODT KIT ( <i>Use lamotrigine</i> )	NP	
CARBATROL CP12 ( <i>Use carbamazepine</i> )	P		LAMICTAL ODT TBDP ( <i>Use lamotrigine</i> )	NP	
DIACOMIT CAPS 500 MG	NP	QL(6 ea daily); SP	LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE KIT ( <i>Use lamotrigine</i> )	NP	
DIACOMIT CAPS 250 MG	NP	QL(12 ea daily); SP	LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE KIT ( <i>Use lamotrigine</i> )	NP	
DIACOMIT PACK 500 MG	NP	QL(6 ea daily); SP			
DIACOMIT PACK 250 MG	NP	QL(12 ea daily); SP			
ELEPSIA XR TB24	NP				
EPIDIOLEX	NP				
EPRONTIA SOLN	NP				
FINTEPLA	NP				
<i>gabapentin CAPS</i>	NC	QL(9 ea daily)			
<i>gabapentin CAPS</i>	P	QL(9 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LAMICTAL STARTER/TAKING VALPROATE KIT (Use lamotrigine)	NP		LYRICA CAPS (Use pregabalin)	NP	
LAMICTAL XR KIT	NP		LYRICA SOLN (Use pregabalin)	NP	
LAMICTAL XR TB24 (Use lamotrigine)	NP	QL(1 ea daily)	MOTPOLY XR CP24	NP	
LAMICTAL TABS (Use lamotrigine)	NP		MYSOLINE (Use primidone)	NP	
lamotrigine CHEW	P		NEURONTIN CAPS (Use gabapentin)	NP	QL(9 ea daily)
lamotrigine CHEW	NC		NEURONTIN SOLN (Use gabapentin)	NP	
lamotrigine KIT 25 MG	NP		NEURONTIN SOLN (Use gabapentin)	NC	
lamotrigine TABS	P		NEURONTIN TABS 600 MG (Use gabapentin)	NP	QL(6 ea daily)
lamotrigine TABS	NC		NEURONTIN TABS 800 MG (Use gabapentin)	NP	QL(4 ea daily)
lamotrigine TABS	NP		oxcarbazepine SUSP 300 MG/5ML	NC	
lamotrigine TB24	P	QL(1 ea daily)	oxcarbazepine SUSP	NP	
lamotrigine TBDP	P		oxcarbazepine TABS	P	
levetiracetam in sodium chloride	NC		OXTELLAR XR TB24	NP	
LEVETIRACETAM/SODIUM CHLORIDE	NC		pregabalin CAPS	P	
levetiracetam SOLN OR 100 MG/ML, 500 MG/5ML	P	QL(16 ml daily)	pregabalin SOLN	NP	
levetiracetam SOLN OR 100 MG/ML, 500 MG/5ML	NC	QL(16 ml daily)	primidone 50 MG, 250 MG	NC	
levetiracetam SOLN OR 100 MG/ML	NC		primidone	P	
levetiracetam TABS 250 MG, 750 MG	P	QL(4 ea daily)	QUDEXY XR CS24 (Use topiramate)	NP	
levetiracetam TABS 500 MG	NC	QL(6 ea daily)	rufinamide SUSP	NP	
levetiracetam TABS 500 MG	P	QL(6 ea daily)	rufinamide SUSP	NC	
levetiracetam TABS 1000 MG	P		rufinamide TABS	NP	
levetiracetam TABS 750 MG	NC	QL(4 ea daily)	SPRITAM TB3D	NP	
levetiracetam TABS 1000 MG	NC		TEGRETOL SUSP (Use carbamazepine)	NP	
levetiracetam TB24	NC		TEGRETOL TABS (Use carbamazepine)	NP	
levetiracetam TB24	P		TEGRETOL-XR TB12 (Use carbamazepine)	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TOPAMAX SPRINKLE CPSP 25 MG (Use topiramate)	NP	QL(8 ea daily)	ZTALMY	NC	
TOPAMAX SPRINKLE CPSP 15 MG (Use topiramate)	NP	QL(6 ea daily)	Carbamates		
TOPAMAX TABS 200 MG (Use topiramate)	NP	QL(2 ea daily)	felbamate SUSP	NC	
TOPAMAX TABS 25 MG, 50 MG (Use topiramate)	NP	QL(6 ea daily)	felbamate SUSP	P	
TOPAMAX TABS 100 MG (Use topiramate)	NP	QL(4 ea daily)	felbamate TABS	NC	
topiramate CP24	NP		felbamate TABS	P	
topiramate CPSP 15 MG	P	QL(6 ea daily)	FELBATOL SUSP (Use felbamate)	NP	
topiramate CPSP	NC		FELBATOL TABS (Use felbamate)	NP	
topiramate CPSP 25 MG	P	QL(8 ea daily)	XCOPRI TABS	NP	
topiramate CS24	NP		XCOPRI TBPK	NP	
topiramate TABS 25 MG, 50 MG	P	QL(6 ea daily)	GABA Modulators		
topiramate TABS 25 MG, 50 MG	NC	QL(6 ea daily)	GABITRIL (Use tiagabine hcl)	NC	PA
topiramate TABS 100 MG	P	QL(4 ea daily)	SABRIL PACK (Use vigabatrin)	PA	PA
topiramate TABS 200 MG	P	QL(2 ea daily)	SABRIL TABS (Use vigabatrin)	PA	PA
TRILEPTAL SUSP (Use oxcarbazepine)	P		tiagabine hcl	PA	PA
TRILEPTAL TABS (Use oxcarbazepine)	NC		vigabatrin PACK	PA	PA
TRILEPTAL TABS (Use oxcarbazepine)	NP		vigabatrin PACK	NP	
TROKENDI XR CP24 (Use topiramate)	NP		vigabatrin PACK	NC	
VIMPAT SOLN OR 10 MG/ML (Use lacosamide)	PA	PA	vigabatrin TABS	NP	
VIMPAT TABS (Use lacosamide)	PA	PA	vigabatrin TABS	NC	
ZONEGRAN CAPS 25 MG, 100 MG (Use zonisamide)	NC		VIGAFYDE SOLN	NC	
ZONISADE SUSP	NP		Hydantoins		
zonisamide CAPS	P		DILANTIN (Use phenytoin sodium extended)	NP	
ZTALMY	NP		DILANTIN	NP	
			DILANTIN INFATABS CHEW (Use phenytoin)	NP	
			DILANTIN-125 SUSP (Use phenytoin)	NP	
			fosphenytoin sodium	NC	
			phenytoin sodium extended 100 MG	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>phenytoin sodium extended 200 MG, 300 MG</i>	NP		DEPAKOTE TBEC 125 MG (Use <i>divalproex sodium</i> )	NP	QL(2 ea daily)
<i>phenytoin sodium extended 100 MG, 200 MG, 300 MG</i>	P		DEPAKOTE TBEC 500 MG (Use <i>divalproex sodium</i> )	NP	QL(7 ea daily)
PHENYTOIN SODIUM POWD	NC		<i>divalproex sodium CSDR</i>	P	QL(8 ea daily)
<i>phenytoin sodium SOLN</i>	NC		<i>divalproex sodium TB24 500 MG</i>	NC	QL(7 ea daily)
<i>phenytoin CHEW</i>	P		<i>divalproex sodium TB24 250 MG</i>	P	QL(3 ea daily)
<i>phenytoin CHEW</i>	NC		<i>divalproex sodium TB24 500 MG</i>	P	QL(7 ea daily)
<i>phenytoin SUSP 100 MG/4ML</i>	NC		<i>divalproex sodium TBEC 500 MG</i>	P	QL(7 ea daily)
<i>phenytoin SUSP</i>	P		<i>divalproex sodium TBEC 125 MG</i>	NC	QL(2 ea daily)
Succinimides			<i>divalproex sodium TBEC 250 MG</i>	P	QL(3 ea daily)
CELONTIN (Use <i>methsuximide</i> )	P		<i>divalproex sodium TBEC 125 MG</i>	P	QL(2 ea daily)
<i>ethosuximide CAPS</i>	P		<i>divalproex sodium TBEC 250 MG</i>	NC	QL(3 ea daily)
<i>ethosuximide CAPS</i>	NC		<i>divalproex sodium TBEC 125 MG</i>	P	QL(2 ea daily)
<i>ethosuximide SOLN</i>	P		<i>divalproex sodium TBEC 250 MG</i>	NC	QL(3 ea daily)
<i>methsuximide</i>	NP		<i>divalproex sodium TBEC 250 MG</i>	NC	QL(7 ea daily)
ZARONTIN CAPS (Use <i>ethosuximide</i> )	NP		<i>divalproex sodium TBEC 500 MG</i>	NC	QL(7 ea daily)
ZARONTIN SOLN (Use <i>ethosuximide</i> )	NP		<i>valproate sodium SOLN OR 250 MG/5ML</i>	NC	
Valproic Acid			<i>valproate sodium SOLN OR 250 MG/5ML</i>	P	
DEPAKOTE ER TB24 250 MG (Use <i>divalproex sodium</i> )	NC	QL(3 ea daily)	<i>valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML</i>	C	PA
DEPAKOTE ER TB24 500 MG (Use <i>divalproex sodium</i> )	NP	QL(7 ea daily)	<i>valproic acid CAPS</i>	P	
DEPAKOTE ER TB24 250 MG (Use <i>divalproex sodium</i> )	NP	QL(3 ea daily)	<b>ANTIDEPRESSANTS - Drugs to Treat Depression</b>		
DEPAKOTE SPRINKLES CSDR (Use <i>divalproex sodium</i> )	NP	QL(8 ea daily)	Alpha-2 Receptor Antagonists (Tetracyclics)		
DEPAKOTE TBEC 250 MG (Use <i>divalproex sodium</i> )	NP	QL(3 ea daily)	<i>mirtazapine TABS 7.5 MG, 45 MG</i>	P	QL(1 ea daily)
			<i>mirtazapine TABS 7.5 MG, 45 MG</i>	NC	QL(1 ea daily)
			<i>mirtazapine TABS 30 MG</i>	NC	QL(1.5 ea daily)
			<i>mirtazapine TABS 15 MG</i>	NC	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>mirtazapine TABS 15 MG</i>	P	QL(3 ea daily)
<i>mirtazapine TABS 30 MG</i>	P	QL(1.5 ea daily)
<i>mirtazapine TBDP 45 MG</i>	P	QL(1 ea daily)
<i>mirtazapine TBDP 15 MG</i>	P	QL(3 ea daily)
<i>mirtazapine TBDP 30 MG</i>	P	QL(1.5 ea daily)
REMERON SOLTAB TBDP 45 MG (Use <i>mirtazapine</i> )	NP	QL(1 ea daily)
REMERON SOLTAB TBDP 15 MG (Use <i>mirtazapine</i> )	NP	QL(3 ea daily)
REMERON SOLTAB TBDP 30 MG (Use <i>mirtazapine</i> )	NP	QL(1.5 ea daily)
REMERON TABS 15 MG (Use <i>mirtazapine</i> )	NP	QL(3 ea daily)
REMERON TABS 30 MG (Use <i>mirtazapine</i> )	NP	QL(1.5 ea daily)
Antidepressant Combinations		
AUVELITY	NP	
Antidepressants - Misc.		
APLENZIN	NP	
<i>bupropion hcl TABS</i>	NC	QL(3 ea daily)
<i>bupropion hcl TABS</i>	P	QL(3 ea daily)
<i>bupropion hcl TB12 150 MG</i>	NC	QL(3 ea daily)
<i>bupropion hcl TB12 200 MG</i>	NC	QL(2 ea daily)
<i>bupropion hcl TB12 100 MG</i>	NC	QL(4 ea daily)
<i>bupropion hcl TB12 200 MG</i>	P	QL(2 ea daily)
<i>bupropion hcl TB12 100 MG</i>	P	QL(4 ea daily)
<i>bupropion hcl TB12 150 MG</i>	P	QL(3 ea daily)
<i>bupropion hcl TB24 150 MG</i>	P	QL(3 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>bupropion hcl TB24 150 MG</i>	NC	QL(3 ea daily)
<i>bupropion hcl TB24 300 MG</i>	P	QL(1 ea daily)
<i>bupropion hcl TB24 300 MG</i>	NC	QL(1 ea daily)
<i>bupropion hcl TB24 450 MG</i>	NP	
FORFIVO XL TB24 (Use <i>bupropion hcl</i> )	NP	
FORFIVO XL TB24 (Use <i>bupropion hcl</i> )	NC	
WELLBUTRIN SR TB12 100 MG (Use <i>bupropion hcl</i> )	NP	QL(4 ea daily)
WELLBUTRIN SR TB12 150 MG (Use <i>bupropion hcl</i> )	NP	QL(3 ea daily)
WELLBUTRIN SR TB12 200 MG (Use <i>bupropion hcl</i> )	NP	QL(2 ea daily)
WELLBUTRIN XL TB24 300 MG (Use <i>bupropion hcl</i> )	NP	QL(1 ea daily)
WELLBUTRIN XL TB24 150 MG (Use <i>bupropion hcl</i> )	NP	QL(3 ea daily)
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM	NP	
MARPLAN	NP	
MARPLAN	NC	
NARDIL (Use <i>phenelzine sulfate</i> )	NP	
PARNATE (Use <i>tranylcypromine sulfate</i> )	NC	
<i>phenelzine sulfate</i>	P	
<i>tranylcypromine sulfate</i>	NC	
<i>tranylcypromine sulfate</i>	NP	
Selective Serotonin Reuptake Inhibitors (SSRIs)		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CELEXA TABS 10 MG (Use citalopram hydrobromide)	NP	QL(4 ea daily)	escitalopram oxalate TABS 20 MG	P	QL(1 ea daily); AL(At least 7 yrs old)
CELEXA TABS 40 MG (Use citalopram hydrobromide)	NP	QL(1 ea daily); AL(At least 7 yrs old)	fluoxetine hcl CAPS 10 MG, 20 MG	P	QL(4 ea daily)
CELEXA TABS 20 MG (Use citalopram hydrobromide)	NP	QL(2 ea daily); AL(At least 7 yrs old)	fluoxetine hcl CAPS	NC	
CITALOPRAM HYDROBROMIDE CAPS	NP		fluoxetine hcl CAPS 10 MG, 20 MG	NC	QL(4 ea daily)
citalopram hydrobromide SOLN	P		fluoxetine hcl CAPS 40 MG	P	QL(2 ea daily); AL(At least 7 yrs old)
citalopram hydrobromide SOLN	NC		fluoxetine hcl CAPS 40 MG	NC	QL(2 ea daily); AL(At least 7 yrs old)
citalopram hydrobromide TABS 20 MG	NC	QL(2 ea daily); AL(At least 7 yrs old)	fluoxetine hcl CPDR	NP	
citalopram hydrobromide TABS 10 MG	P	QL(4 ea daily)	fluoxetine hcl SOLN	P	QL(120 ml per fill retail)
citalopram hydrobromide TABS 10 MG	NC	QL(4 ea daily)	fluoxetine hcl SOLN	NC	
citalopram hydrobromide TABS 40 MG	P	QL(1 ea daily); AL(At least 7 yrs old)	fluoxetine hcl TABS 10 MG	P	QL(1 ea daily); AL(At least 7 yrs old)
citalopram hydrobromide TABS 40 MG	NC	QL(1 ea daily); AL(At least 7 yrs old)	fluoxetine hcl TABS 60 MG	NP	
citalopram hydrobromide TABS 20 MG	P	QL(2 ea daily); AL(At least 7 yrs old)	fluoxetine hcl TABS 20 MG	P	QL(4 ea daily)
escitalopram oxalate SOLN	NP		FLUOXETINE HYDROCHLORIDE TABS (Use fluoxetine hcl)	NP	
escitalopram oxalate TABS 5 MG	P	QL(4 ea daily)	fluvoxamine maleate CP24	NP	
escitalopram oxalate TABS 5 MG	NC	QL(4 ea daily)	fluvoxamine maleate TABS 100 MG	P	QL(3 ea daily)
escitalopram oxalate TABS 10 MG	P	QL(2 ea daily); AL(At least 7 yrs old)	fluvoxamine maleate TABS 25 MG, 50 MG	P	QL(2 ea daily); AL(At least 7 yrs old)
escitalopram oxalate TABS 10 MG	NC	QL(2 ea daily); AL(At least 7 yrs old)	LEXAPRO TABS 10 MG (Use escitalopram oxalate)	NP	QL(2 ea daily); AL(At least 7 yrs old)
escitalopram oxalate TABS 20 MG	NC	QL(1 ea daily); AL(At least 7 yrs old)	LEXAPRO TABS 20 MG (Use escitalopram oxalate)	NP	QL(1 ea daily); AL(At least 7 yrs old)
			LEXAPRO TABS 5 MG (Use escitalopram oxalate)	NP	QL(4 ea daily)
			paroxetine hcl SUSP	NP	QL(40 ml daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>paroxetine hcl TABS 10 MG</i>	NC	QL(6 ea daily)	<i>sertraline hcl TABS 25 MG, 50 MG</i>	P	QL(4 ea daily)
<i>paroxetine hcl TABS 30 MG, 40 MG</i>	P	QL(2 ea daily); AL(At least 7 yrs old)	<i>sertraline hcl TABS 100 MG</i>	P	QL(2 ea daily); AL(At least 7 yrs old)
<i>paroxetine hcl TABS 10 MG</i>	P	QL(6 ea daily)	SERTRALINE HYDROCHLORIDE CAPS	NP	
<i>paroxetine hcl TABS 30 MG</i>	NC	QL(2 ea daily); AL(At least 7 yrs old)	ZOLOFT CONC ( <i>Use sertraline hcl</i> )	NP	QL(186 ml per 31 day(s) retail)
<i>paroxetine hcl TABS 20 MG</i>	P	QL(3 ea daily)	ZOLOFT TABS 100 MG ( <i>Use sertraline hcl</i> )	NP	QL(2 ea daily); AL(At least 7 yrs old)
<i>paroxetine hcl TABS 20 MG</i>	NC	QL(3 ea daily)	ZOLOFT TABS 25 MG, 50 MG ( <i>Use sertraline hcl</i> )	NP	QL(4 ea daily)
<i>paroxetine hcl TB24</i>	NC	QL(1 ea daily); AL(At least 7 yrs old)	Serotonin Modulators		
<i>paroxetine hcl TB24</i>	NP	QL(1 ea daily); AL(At least 7 yrs old)	<i>nefazodone hcl</i>	P	
PAXIL CR TB24 ( <i>Use paroxetine hcl</i> )	NP	QL(1 ea daily); AL(At least 7 yrs old)	TRAZODONE HCL POWD	NC	
PAXIL SUSP ( <i>Use paroxetine hcl</i> )	NP	QL(40 ml daily)	<i>trazodone hcl TABS 300 MG</i>	P	QL(2 ea daily)
PAXIL TABS 30 MG, 40 MG ( <i>Use paroxetine hcl</i> )	NP	QL(2 ea daily); AL(At least 7 yrs old)	<i>trazodone hcl TABS 50 MG, 100 MG, 150 MG</i>	P	
PAXIL TABS 20 MG ( <i>Use paroxetine hcl</i> )	NP	QL(3 ea daily)	TRINTELLIX	NP	QL(1 ea daily); AL(At least 18 yrs old)
PAXIL TABS 10 MG ( <i>Use paroxetine hcl</i> )	NP	QL(6 ea daily)	VIIBRYD TABS ( <i>Use vilazodone hcl</i> )	NP	QL(1 ea daily)
PROZAC CAPS 10 MG, 20 MG ( <i>Use fluoxetine hcl</i> )	NP	QL(4 ea daily)	<i>vilazodone hcl TABS</i>	P	QL(1 ea daily)
PROZAC CAPS 40 MG ( <i>Use fluoxetine hcl</i> )	NP	QL(2 ea daily); AL(At least 7 yrs old)	Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
<i>sertraline hcl CONC</i>	NC	QL(186 ml per 31 day(s) retail)	CYMBALTA CPEP ( <i>Use duloxetine hcl</i> )	NC	QL(1 ea daily); AL(At least 7 yrs old)
<i>sertraline hcl CONC</i>	NP	QL(186 ml per 31 day(s) retail)	DESVENLAFAXINE ER	NP	
<i>sertraline hcl TABS 100 MG</i>	NC	QL(2 ea daily); AL(At least 7 yrs old)	DESVENLAFAXINE ER 100 MG	NC	
<i>sertraline hcl TABS 25 MG, 50 MG</i>	NC	QL(4 ea daily)	<i>desvenlafaxine succinate 100 MG</i>	P	QL(4 ea daily)
			<i>desvenlafaxine succinate 25 MG, 50 MG</i>	P	QL(1 ea daily)
			DRIZALMA SPRINKLE CSDR	NP	



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>duloxetine hcl CPEP 40 MG</i>	NP		<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	NP	QL(1 ea daily); AL(At least 7 yrs old)
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	NC	QL(1 ea daily); AL(At least 7 yrs old)	<i>venlafaxine hcl TB24 37.5 MG, 75 MG, 225 MG</i>	NC	QL(1 ea daily); AL(At least 7 yrs old)
<i>duloxetine hcl CPEP 20 MG, 30 MG, 60 MG</i>	P	QL(1 ea daily); AL(At least 7 yrs old)	<i>venlafaxine hcl TB24 150 MG</i>	NP	QL(1 ea daily)
EFFEXOR XR CP24 150 MG (Use <i>venlafaxine hcl</i> )	NP	QL(2 ea daily)	<i>venlafaxine hcl TB24 150 MG</i>	NC	QL(1 ea daily)
EFFEXOR XR CP24 75 MG (Use <i>venlafaxine hcl</i> )	NP	QL(5 ea daily)	Tricyclic Agents		
EFFEXOR XR CP24 37.5 MG (Use <i>venlafaxine hcl</i> )	NP	QL(4 ea daily)	<i>amitriptyline hcl TABS</i>	C	
EFFEXOR XR CP24 150 MG (Use <i>venlafaxine hcl</i> )	NC		<i>amoxapine</i>	C	
FETZIMA TITRATION PACK C4PK	NP		ANAFRANIL (Use <i>clomipramine hcl</i> )	NC	
FETZIMA CP24	NP		<i>clomipramine hcl 75 MG</i>	C	
PRISTIQ 100 MG (Use <i>desvenlafaxine succinate</i> )	NP	QL(4 ea daily)	<i>clomipramine hcl 25 MG, 50 MG</i>	NC	
PRISTIQ 25 MG, 50 MG (Use <i>desvenlafaxine succinate</i> )	NP	QL(1 ea daily)	DESIPRAMINE HCL POWD	NC	
PRISTIQ 50 MG (Use <i>desvenlafaxine succinate</i> )	NC	QL(1 ea daily)	<i>desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG</i>	C	
VENLAFAXINE BESYLATE ER	NP		<i>desipramine hcl TABS 25 MG</i>	C	QL(2 ea daily)
<i>venlafaxine hcl CP24 150 MG</i>	NC	QL(2 ea daily)	<i>doxepin hcl CAPS</i>	C	
<i>venlafaxine hcl CP24 37.5 MG</i>	NC	QL(4 ea daily)	<i>doxepin hcl CONC</i>	C	
<i>venlafaxine hcl CP24 75 MG</i>	P	QL(5 ea daily)	IMIPRAMINE HCL POWD	NC	
<i>venlafaxine hcl CP24 150 MG</i>	P	QL(2 ea daily)	<i>imipramine hcl TABS</i>	C	
<i>venlafaxine hcl CP24 75 MG</i>	NC	QL(5 ea daily)	<i>imipramine pamoate</i>	NC	
<i>venlafaxine hcl CP24 37.5 MG</i>	P	QL(4 ea daily)	NORPRAMIN TABS 10 MG (Use <i>desipramine hcl</i> )	NC	
<i>venlafaxine hcl TABS</i>	P		NORPRAMIN TABS 25 MG (Use <i>desipramine hcl</i> )	NC	QL(2 ea daily)
<i>venlafaxine hcl TABS</i>	NC		<i>nortriptyline hcl CAPS</i>	C	
			NORTRIPTYLINE HCL POWD	NC	
			<i>nortriptyline hcl SOLN</i>	C	QL(20 ml daily)
			PAMELOR CAPS (Use <i>nortriptyline hcl</i> )	NC	
			<i>protriptyline hcl</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>trimipramine maleate CAPS</i>	NC	
TRIMIPRAMINE MALEATE POWD	NC	
<b>ANTIDIABETICS - Drugs to Regulate Blood Sugar</b>		
Alpha-Glucosidase Inhibitors		
<i>acarbose</i>	P	
<i>miglitol</i>	NP	
PRECOSE ( <i>Use acarbose</i> )	NP	
Antidiabetic - Amylin Analogs		
SYMLINPEN 120 SOPN	P	QL(11 ml per 31 day(s) retail)
SYMLINPEN 60 SOPN	P	QL(6 ml per 31 day(s) retail)
Antidiabetic Combinations		
ACTOPLUS MET TABS 850 MG-15 MG ( <i>Use pioglitazone hcl-metformin hcl</i> )	NP	QL(2 ea daily)
<i>alogliptin-metformin hcl</i>	NP	QL(2 ea daily)
<i>alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG</i>	NP	QL(1 ea daily)
<i>dapagliflozin propanediol-metformin hcl</i>	NP	
DUETACT ( <i>Use pioglitazone hcl-glimepiride</i> )	NP	
<i>glipizide-metformin hcl</i>	NP	
<i>glyburide-metformin</i>	NC	
<i>glyburide-metformin</i>	P	
GLYXAMBI	NP	
INVOKAMET XR TB24	NP	
INVOKAMET TABS	P	
JANUMET XR TB24	NP	
JENTADUETO XR TB24	NP	
KOMBIGLYZE XR ( <i>Use saxagliptin-metformin hcl</i> )	NP	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>pioglitazone hcl-glimepiride</i>	NP	
<i>pioglitazone hcl-metformin hcl TABS</i>	NP	QL(2 ea daily)
QTERN	NP	
<i>saxagliptin-metformin hcl</i>	NP	QL(1 ea daily)
SEGLUROMET	NP	QL(2 ea daily)
SEGLUROMET	NC	QL(2 ea daily)
SITAGLIPTIN/METFORMIN HYDROCHLORIDE	NP	
SOLIQUA 100/33	NP	QL(18 ml per 31 day(s) retail)
STEGLUJAN	NP	
SYNJARDY XR TB24	NP	
SYNJARDY TABS	NP	
TRIJARDY XR	NP	
XIGDUO XR	P	
XIGDUO XR ( <i>Use dapagliflozin propanediol-metformin hcl</i> )	P	
XULTOPHY 100/3.6	NP	
Biguanides		
GLUMETZA TB24 ( <i>Use metformin hcl</i> )	NP	
<i>metformin hcl SOLN</i>	NP	
<i>metformin hcl TABS 1000 MG</i>	P	QL(2 ea daily)
<i>metformin hcl TABS 625 MG</i>	NP	
<i>metformin hcl TABS 500 MG</i>	NC	QL(5 ea daily)
<i>metformin hcl TABS 850 MG</i>	NC	QL(3 ea daily)
<i>metformin hcl TABS 500 MG</i>	P	QL(5 ea daily)
<i>metformin hcl TABS 1000 MG</i>	NC	
<i>metformin hcl TABS 1000 MG</i>	NC	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>metformin hcl TABS 850 MG</i>	P	QL(3 ea daily)
<i>metformin hcl TB24 500 MG, 1000 MG</i>	NC	
<i>metformin hcl TB24 500 MG, 1000 MG</i>	NP	
<i>metformin hcl TB24 500 MG</i>	P	QL(4 ea daily)
<i>metformin hcl TB24 750 MG</i>	P	QL(3 ea daily)
<i>metformin hcl TB24 750 MG</i>	NC	QL(3 ea daily)
RIOMET SOLN ( <i>Use metformin hcl</i> )	NP	
Diabetic Other		
BAQSIMI ONE PACK POWD	NC	
BAQSIMI TWO PACK POWD	NC	
<i>diazoxide</i>	NC	
GLUCAGEN HYPOKIT	NC	
<i>glucagon (rdna)</i>	C	QL(4 ea per 365 day(s) retail)
GLUCAGON EMERGENCY KIT ( <i>Use glucagon (rdna)</i> )	NC	QL(4 ea per 365 day(s) retail)
GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR	NC	
GVOKE HYPOPEN 1-PACK SOAJ	NC	
GVOKE HYPOPEN 2-PACK SOAJ	NC	
GVOKE KIT SOLN	NC	
GVOKE PFS SOSY 1 MG/0.2ML	NC	
ZEGALOGUE SOAJ	NC	
ZEGALOGUE SOSY	NC	
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
<i>alogliptin benzoate</i>	NP	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
JANUVIA	P	
ONGLYZA ( <i>Use saxagliptin hcl</i> )	NP	QL(1 ea daily)
<i>saxagliptin hcl</i>	NP	QL(1 ea daily)
SITAGLIPTIN	NP	
TRADJENTA	P	
ZITUVIO	NP	
Dopamine Receptor Agonists - Antidiabetic		
CYCLOSET	NC	
Incretin Mimetic Agents		
BYDUREON BCISE AUIJ	NP	QL(3.4 ml per 28 day(s) retail)
BYETTA SOPN 5 MCG/0.02ML	NP	QL(1.2 ml per 31 day(s) retail); AL(At least 18 yrs old)
BYETTA SOPN 10 MCG/0.04ML	NP	QL(2.4 ml per 31 day(s) retail); AL(At least 18 yrs old)
<i>liraglutide</i>	NP	QL(12 ml per 28 day(s) retail); AL(At least 10 yrs old)
MOUNJARO	NP	
OZEMPIC SOPN	P	
RYBELSUS TABS	NP	
TRULICITY	P	QL(2 ml per 28 day(s) retail)
VICTOZA	P	QL(12 ml per 28 day(s) retail); AL(At least 10 yrs old)
Insulin		
AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT	NP	
APIDRA SOLOSTAR SOPN	P	
APIDRA SOLN	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
APIDRA SOLN	NP		INSULIN ASPART PROTAMINE/INSULIN ASPART FLEXPEN SUPN	P	QL(30 ml per 31 day(s) retail)
BASAGLAR KWIKPEN SOPN	NP		INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP	P	QL(40 ml per 31 day(s) retail)
BASAGLAR TEMPO PEN SOPN	NP		INSULIN ASPART SOLN IJ	P	QL(30 ml per 31 day(s) retail)
FIASP FLEXTOUCH SOPN	NP		INSULIN DEGLUDEC FLEXTOUCH SOPN 100 UNIT/ML	NP	QL(1.5 ml daily)
FIASP PENFILL SOCT	NP		INSULIN DEGLUDEC FLEXTOUCH SOPN 200 UNIT/ML	NP	QL(0.9 ml daily)
FIASP PUMPCART SOCT	NC		INSULIN DEGLUDEC SOLN	NP	QL(1.5 ml daily)
FIASP SOLN	NP		INSULIN GLARGINE MAX SOLOSTAR SOPN	NP	
HUMALOG JUNIOR KWIKPEN SOPN	P	QL(30 ml per 31 day(s) retail)	INSULIN GLARGINE SOLOSTAR SOPN	NP	
HUMALOG MIX 50/50 KWIKPEN SUPN	P		INSULIN GLARGINE SOLN	NP	
HUMALOG MIX 50/50 SUSP	P		INSULIN GLARGINE-YFGN SOLN	NP	QL(30 ml per 31 day(s) retail)
HUMALOG MIX 75/25 KWIKPEN SUPN	P	QL(30 ml per 31 day(s) retail)	INSULIN GLARGINE-YFGN SOPN	NP	QL(30 ml per 31 day(s) retail)
HUMALOG MIX 75/25 SUSP	P		INSULIN LISPRO JUNIOR KWIKPEN SOPN	P	QL(30 ml per 31 day(s) retail)
HUMALOG TEMPO PEN SOPN	P		INSULIN LISPRO KWIKPEN SOPN	P	QL(30 ml per 31 day(s) retail)
HUMALOG SOLN IJ	P	QL(30 ml per 31 day(s) retail)	INSULIN LISPRO KWIKPEN SOPN	NC	QL(30 ml per 31 day(s) retail)
HUMULIN 70/30 KWIKPEN SUPN	P	QL(1 ml daily)	INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN SUPN	P	QL(30 ml per 31 day(s) retail)
HUMULIN 70/30 SUSP	P	Limit 40mls per month	INSULIN LISPRO SOLN IJ	P	QL(30 ml per 31 day(s) retail)
HUMULIN N KWIKPEN SUPN	P	QL(1 ml daily)	INSULIN LISPRO SOLN IJ	NC	QL(30 ml per 31 day(s) retail)
HUMULIN N SUSP	P	Limit 40mls per month	LANTUS SOLOSTAR SOPN	P	
HUMULIN R U-500 (CONCENTRATED) SOLN SC	P		LANTUS SOLOSTAR SOPN	NC	
HUMULIN R U-500 KWIKPEN SOPN SC	P				
HUMULIN R SOLN IJ	P	Limit 40mls per month			
INSULIN ASPART FLEXPEN SOPN	P	QL(30 ml per 31 day(s) retail)			
INSULIN ASPART PENFILL SOCT	P	QL(30 ml per 31 day(s) retail)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LYUMJEV KWIKPEN SOPN	NP		NOVOLOG MIX 70/30 SUSP	P	QL(40 ml per 31 day(s) retail)
LYUMJEV TEMPO PEN SOPN	NP		NOVOLOG PENFILL SOCT	P	QL(30 ml per 31 day(s) retail)
LYUMJEV SOLN	NP		NOVOLOG RELION SOLN IJ	P	QL(30 ml per 31 day(s) retail)
MYXREDLIN	NC		NOVOLOG SOLN IJ	P	QL(30 ml per 31 day(s) retail)
NOVOLIN 70/30 FLEXPEN RELION SUPN	NP	QL(1 ml daily)	REZVOGLAR KWIKPEN	NP	
NOVOLIN 70/30 FLEXPEN SUPN	NP	QL(1 ml daily)	SEMGLEE SOLN	NP	QL(30 ml per 31 day(s) retail)
NOVOLIN 70/30 RELION SUSP	NP		SEMGLEE SOPN	NP	QL(30 ml per 31 day(s) retail)
NOVOLIN 70/30 SUSP	NP	Limit 40mls per month	TOUJEO MAX SOLOSTAR SOPN	NP	
NOVOLIN N FLEXPEN RELION SUPN	NP	QL(1 ml daily)	TOUJEO SOLOSTAR SOPN	NP	
NOVOLIN N FLEXPEN SUPN	NP	QL(1 ml daily)	TRESIBA FLEXTOUCH SOPN 200 UNIT/ML	NP	QL(0.9 ml daily)
NOVOLIN N RELION SUSP	NP		TRESIBA FLEXTOUCH SOPN 100 UNIT/ML	NP	QL(1.5 ml daily)
NOVOLIN N SUSP	NP	Limit 40mls per month	TRESIBA SOLN	NP	QL(1.5 ml daily)
NOVOLIN R FLEXPEN RELION SOPN IJ	NP		<b>Insulin Sensitizing Agents</b>		
NOVOLIN R FLEXPEN SOPN IJ	NP		ACTOS ( <i>Use pioglitazone hcl</i> )	NP	QL(1 ea daily)
NOVOLIN R RELION SOLN IJ	NP		<i>pioglitazone hcl</i>	NC	QL(1 ea daily)
NOVOLIN R SOLN IJ	NP	Limit 40mls per month	<i>pioglitazone hcl</i>	P	QL(1 ea daily)
NOVOLOG FLEXPEN RELION SOPN	P	QL(30 ml per 31 day(s) retail)	<b>Meglitinide Analogues</b>		
NOVOLOG FLEXPEN SOPN	P	QL(30 ml per 31 day(s) retail)	<i>nateglinide 60 MG</i>	NC	QL(3 ea daily)
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION SUPN	P	QL(30 ml per 31 day(s) retail)	<i>nateglinide</i>	P	QL(3 ea daily)
NOVOLOG MIX 70/30 PREFILLED FLEXPEN SUPN	P	QL(30 ml per 31 day(s) retail)	<i>repaglinide</i>	NP	
NOVOLOG MIX 70/30 RELION SUSP	P	QL(40 ml per 31 day(s) retail)	<b>Sodium-Glucose Co-Transporter 2 (SGLT2) Inhibitors</b>		
			<i>dapagliflozin propanediol</i>	NP	
			FARXIGA	P	
			FARXIGA ( <i>Use dapagliflozin propanediol</i> )	P	
			JARDIANCE	P	
			STEGLATRO	NC	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
STEGLATRO	NP	QL(1 ea daily)
<b>Sulfonylureas</b>		
<i>glimepiride 4 MG</i>	P	QL(2 ea daily)
<i>glimepiride 1 MG, 2 MG</i>	P	QL(4 ea daily)
<i>glimepiride 4 MG</i>	NC	QL(2 ea daily)
GLIPIZIDE POWD	NC	
<i>glipizide TABS 5 MG, 10 MG</i>	NC	
<i>glipizide TABS</i>	P	
<i>glipizide TB24</i>	NC	
<i>glipizide TB24</i>	P	
GLUCOTROL XL TB24 (Use <i>glipizide</i> )	NP	
<i>glyburide micronized 1.5 MG, 3 MG, 6 MG</i>	P	
GLYBURIDE POWD	NC	
<i>glyburide TABS</i>	NC	
<i>glyburide TABS</i>	P	
GLYNASE (Use <i>glyburide micronized</i> )	NP	
<b>ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to Treat Diarrhea</b>		
<b>Antidiarrheal - Chloride Channel Antagonists</b>		
MYTESI	NC	
<b>Antidiarrheal/Probiotic Agents - Misc.</b>		
BISMUTH SUBGALLATE POWD	NC	RX/OTC
<i>bismuth subsalicylate CHEW 262 MG</i>	C	
<i>bismuth subsalicylate SUSP 525 MG/15ML, 1050 MG/30ML</i>	C	
PEPTO-BISMOL MAX STRENGTH SUSP (Use <i>bismuth subsalicylate</i> )	NC	
PEPTO-BISMOL TO-GO CHEW (Use <i>bismuth subsalicylate</i> )	NC	

Drug Name	Drug Tier	Requirements/Limits
PEPTO-BISMOL CHEW (Use <i>bismuth subsalicylate</i> )	NC	
<b>Antiperistaltic Agents</b>		
<i>diphenoxylate w/ atropine LIQD</i>	C	
<i>diphenoxylate w/ atropine TABS</i>	C	
IMODIUM A-D CAPS (Use <i>loperamide hcl</i> )	NC	QL(8 ea daily); RX/OTC
IMODIUM A-D TABS (Use <i>loperamide hcl</i> )	NC	QL(8 ea daily)
LOMOTIL TABS (Use <i>diphenoxylate w/ atropine</i> )	NC	
<i>loperamide hcl CAPS</i>	C	QL(8 ea daily); RX/OTC
LOPERAMIDE HCL POWD	NC	
<i>loperamide hcl TABS</i>	C	QL(8 ea daily)
LOPERAMIDE HYDROCHLORIDE POWD	NC	
MOTOFEN	NC	
<i>opium tincture</i>	NC	
<b>Gastrointestinal Adsorbents</b>		
KAOLIN	NC	RX/OTC
KAOLIN COLLOIDAL	NC	RX/OTC
PECTIN	NC	RX/OTC
<b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>		
<b>Antidote Combinations</b>		
PREVDUO	NC	
<b>Antidotes - Chelating Agents</b>		
CHEMET	C	
<i>deferasirox PACK</i>	C	SP; PA
<i>deferasirox TABS</i>	C	SP; PA
<i>deferasirox TBSO</i>	C	SP; PA
<i>deferiprone TABS</i>	NC	SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EXJADE TBSO ( <i>Use deferasirox</i> )	NC	SP; PA	<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	NC	QL(2 ml per 90 day(s) retail)
JADENU SPRINKLE PACK ( <i>Use deferasirox</i> )	NC	SP; PA	<i>naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML</i>	P	QL(2 ml per 90 day(s) retail)
JADENU TABS ( <i>Use deferasirox</i> )	NC	SP; PA	<i>naloxone hcl SOSY 2 MG/2ML</i>	P	QL(4 ml per 90 day(s) retail)
<b>Antidotes and Specific Antagonists</b>			<i>naloxone hcl SOSY 0.4 MG/ML</i>	P	
<i>acetylcysteine (antidote) SOLN</i>	NC		<i>naltrexone hcl</i>	C	
CALCIUM DISODIUM VERSENATE SOLN 1 GM/5ML	NC		NARCAN LIQD ( <i>Use naloxone hcl</i> )	P	QL(4 ea per 90 day(s) retail); RX/OTC
CHARCOAL ACTIVATED POWD	NC	RX/OTC	OPVEE NA	NP	
CHARCOAL POWD	NC	RX/OTC	REXTOVY LIQD	NP	
EDETATE CALCIUM DISODIUM POWD	NC		VIVITROL	P	QL(1 ea per 30 day(s) retail); SP
EDETATE CALCIUM DISODIUM SOLN	NC		ZIMHI SOSY	NP	
<i>fomepizole 1.5 GM/1.5ML</i>	NC		<b>ANTIEMETICS - Drugs to Treat Nausea and Vomiting</b>		
<i>methylene blue (antidote) SOLN IV</i>	NC		<b>5-HT3 Receptor Antagonists</b>		
PRAXBIND	NC		ANZEMET TABS 50 MG	NP	
PROTOPAM CHLORIDE SOLR	NC		<i>granisetron hcl SOLN IV 1 MG/ML, 4 MG/4ML</i>	NC	
<b>Benzodiazepine Antagonists</b>			<i>granisetron hcl TABS</i>	NC	
<i>flumazenil</i>	NC		<i>granisetron hcl TABS</i>	NP	
<b>Opioid Antagonists</b>			<i>ondansetron hcl SOLN IJ</i>	C	
KLOXXADO LIQD	NP		<i>ondansetron hcl SOLN OR 4 MG/5ML</i>	P	QL(50 ml per 31 day(s) retail)
NALMEFENE HYDROCHLORIDE IJ	NC		<i>ondansetron hcl SOSY</i>	C	
<i>naloxone hcl LIQD</i>	NP	QL(4 ea per 90 day(s) retail); RX/OTC	<i>ondansetron hcl TABS 4 MG, 8 MG</i>	P	QL(20 ea per 31 day(s) retail)
<i>naloxone hcl LIQD</i>	NC	QL(4 ea per 90 day(s) retail); RX/OTC	<i>ondansetron hcl TABS 4 MG, 8 MG</i>	NC	QL(20 ea per 31 day(s) retail)
<i>naloxone hcl LIQD</i>	P	QL(4 ea per 90 day(s) retail); RX/OTC	<i>ondansetron TBDP 16 MG</i>	P	
<i>naloxone hcl SOCT</i>	P	QL(2 ml per 90 day(s) retail)	<i>ondansetron TBDP 4 MG, 8 MG</i>	P	QL(20 ea per 31 day(s) retail)
			<i>palonosetron hcl SOLN</i>	NC	
			<i>palonosetron hcl SOSY</i>	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PALONOSETRON HYDROCHLORIDE SOLN	NC		<i>doxylamine-pyridoxine TBEC</i>	NP	
POSFREA SOLN	NC		<i>dronabinol CAPS</i>	NP	
SANCUSO PTCH	NP		<i>dronabinol CAPS</i>	NC	
SUSTOL PRSY	NC		MARINOL CAPS 2.5 MG (Use <i>dronabinol</i> )	NP	
Antiemetics - Anticholinergic			MARINOL CAPS 5 MG, 10 MG (Use <i>dronabinol</i> )	NC	
ANTIVERT CHEW (Use <i>meclizine hcl</i> )	NP	RX/OTC	Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
ANTIVERT TABS 50 MG (Use <i>meclizine hcl</i> )	NP		APONVIE EMUL	NC	
DIMENHYDRINATE SOLN	NC		<i>aprepitant CAPS</i>	NP	
MECLIZINE HCL MONOHYDRATE POWD	NC		<i>aprepitant MISC</i>	NP	
<i>meclizine hcl CHEW</i>	NC	RX/OTC	EMEND TRIPACK CAPS (Use <i>aprepitant</i> )	P	
MECLIZINE HCL POWD	NC		EMEND CAPS 80 MG (Use <i>aprepitant</i> )	P	
<i>meclizine hcl TABS 12.5 MG, 25 MG</i>	NC	RX/OTC	EMEND SUSR	NP	
<i>meclizine hcl TABS 12.5 MG, 25 MG, 50 MG</i>	NP	RX/OTC	FOCINVEZ SOLN	NC	
MECLIZINE HYDROCHLORIDE MONOHYDRATE POWD	NC		<i>fosaprepitant dimeglumine SOLR</i>	NC	
<i>scopolamine</i>	NP		<b>ANTIFUNGALS - Drugs to Treat Fungal Infections</b>		
TIGAN SOLN	NC		Antifungal - Glucan Synthesis Inhibitors		
TRANSDERM-SCOP (Use <i>scopolamine</i> )	P		BREXAFEMME	NP	
<i>trimethobenzamide hcl CAPS</i>	NP		<i>caspofungin acetate</i>	NC	
Antiemetics - Antidopaminergic			CASPOFUNGIN ACETATE	NC	
BARHEMSYS	NC		ERAXIS	NC	
Antiemetics - Miscellaneous			MICAFUNGIN	NC	
AKYNZEO	NP		<i>micafungin sodium</i>	NC	
AKYNZEO SOLN	NC		MICAFUNGIN/SODIUM CHLORIDE	NC	
AKYNZEO SOLR	NC		REZZAYO	NC	
BONJESTA TBCR	NP		Antifungals		
DICLEGIS TBEC (Use <i>doxylamine-pyridoxine</i> )	NP		ABELCET	NC	
			<i>amphotericin b IV</i>	NC	
			<i>amphotericin b liposome</i>	NC	



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>flucytosine</i>	NC		<i>itraconazole SOLN</i>	NP	
<i>griseofulvin microsize SUSP</i>	P		<i>ketoconazole</i>	NP	
<i>griseofulvin microsize TABS</i>	NC		MICONAZOLE	NC	
<i>griseofulvin microsize TABS</i>	NP		NOXAFIL PACK	NC	
<i>griseofulvin ultramicrosize</i>	NC		<i>posaconazole SOLN</i>	NC	
<i>griseofulvin ultramicrosize</i>	P		<i>posaconazole SUSP</i>	NC	
<i>nystatin TABS</i>	P	QL(6 ea daily)	<i>posaconazole TBEC</i>	NC	
<i>terbinafine hcl TABS</i>	NC	QL(1 ea daily; 90 ea per 120 day(s) retail)	SPORANOX CAPS ( <i>Use itraconazole</i> )	NP	QL(1 ea daily)
<i>terbinafine hcl TABS</i>	P	QL(1 ea daily; 90 ea per 120 day(s) retail)	SPORANOX SOLN ( <i>Use itraconazole</i> )	NP	
Imidazole-Related Antifungals			TOLSURA CAPS	NC	
CRESEMBA CAPS	NP		VFEND SUSR ( <i>Use voriconazole</i> )	NP	
CRESEMBA SOLR	NC		VFEND TABS ( <i>Use voriconazole</i> )	NP	
DIFLUCAN SUSR 40 MG/ML ( <i>Use fluconazole</i> )	NP	QL(70 ml per fill retail)	VIVJOA	NC	
DIFLUCAN SUSR 10 MG/ML ( <i>Use fluconazole</i> )	NC	QL(70 ml per fill retail)	<i>voriconazole SOLR</i>	NC	
DIFLUCAN TABS 100 MG, 200 MG ( <i>Use fluconazole</i> )	NP		<i>voriconazole SUSR</i>	NP	
<i>fluconazole in nacl 0.9 %-200 MG/100ML, 0.9 %-400 MG/200ML</i>	NC		<i>voriconazole TABS</i>	NP	
FLUCONAZOLE/SODIUM CHLORIDE	NC		<i>voriconazole TABS</i>	NC	
<i>fluconazole SUSR</i>	P	QL(70 ml per fill retail)	<b>ANTIHISTAMINES - Drugs to Treat Allergies</b>		
<i>fluconazole TABS 150 MG</i>	P	QL(2 ea per fill retail)	Antihistamines - Alkylamines		
<i>fluconazole TABS 100 MG, 200 MG</i>	P		BROMPHENIRAMINE MALEATE POWD	NC	
<i>fluconazole TABS 50 MG</i>	P	QL(3 ea per 14 day(s) retail)	CHLORPHENIRAMINE MALEATE POWD	NC	
<i>fluconazole TABS 100 MG, 200 MG</i>	NC		<i>chlorpheniramine maleate SYRP</i>	C	
<i>itraconazole CAPS</i>	NP	QL(1 ea daily)	<i>dexchlorpheniramine maleate SOLN</i>	C	
			Antihistamines - Ethanolamines		
			BENADRYL ALLERGY ULTRATABS TABS ( <i>Use diphenhydramine hcl</i> )	NC	QL(4 ea daily)
			BENADRYL ALLERGY CAPS ( <i>Use diphenhydramine hcl</i> )	NC	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BENADRYL ALLERGY TABS (Use <i>diphenhydramine hcl</i> )	NC	QL(4 ea daily)	Antihistamines - Non-Sedating		
<i>carbinoxamine maleate SOLN</i>	NC		ALLEGRA ALLERGY TABS 60 MG (Use <i>fexofenadine hcl</i> )	NC	QL(2 ea daily)
<i>carbinoxamine maleate SUER</i>	NC		ALLEGRA ALLERGY TABS 180 MG (Use <i>fexofenadine hcl</i> )	NC	QL(1 ea daily)
<i>carbinoxamine maleate TABS 4 MG</i>	NC		<i>cetirizine hcl CHEW</i>	C	QL(1 ea daily)
CARBINOXAMINE MALEATE TABS	NC		<i>cetirizine hcl SOLN OR 5 MG/5ML</i>	NC	RX/OTC
CLEMASTINE FUMARATE POWD	NC		<i>cetirizine hcl SOLN OR</i>	P	QL(300 ml per fill retail); RX/OTC
<i>clemastine fumarate SYRP</i>	NC		<i>cetirizine hcl TABS 5 MG</i>	NC	QL(1 ea daily)
<i>clemastine fumarate TABS 2.68 MG</i>	NC		<i>cetirizine hcl TABS</i>	P	QL(1 ea daily)
<i>diphenhydramine hcl CAPS</i>	C	QL(4 ea daily)	CLARINEX TABS (Use <i>desloratadine</i> )	NP	
<i>diphenhydramine hcl CHEW</i>	NC		<i>desloratadine TABS</i>	NC	
<i>diphenhydramine hcl ELIX 12.5 MG/5ML</i>	C	QL(240 ml per fill retail)	<i>desloratadine TABS</i>	NP	
DIPHENHYDRAMINE HCL POWD	NC		<i>desloratadine TBDP</i>	NP	
<i>diphenhydramine hcl SOLN 50 MG/ML</i>	NC		<i>fexofenadine hcl TABS 180 MG</i>	C	QL(1 ea daily)
<i>diphenhydramine hcl TABS 25 MG</i>	C	QL(4 ea daily)	<i>fexofenadine hcl TABS 60 MG</i>	C	QL(2 ea daily)
DOXYLAMINE SUCCINATE POWD	NC	RX/OTC	<i>levocetirizine dihydrochloride TABS</i>	NC	QL(1 ea daily); RX/OTC
KARBINAL ER SUER	NC		<i>levocetirizine dihydrochloride TABS</i>	NC	RX/OTC
RYVENT TABS	NC		<i>levocetirizine dihydrochloride TABS</i>	P	QL(1 ea daily); RX/OTC
Antihistamines - Ethylenediamines			<i>loratadine TABS</i>	NC	
PEDIACLEAR 8 CHILDRENS LIQD	NC		<i>loratadine TABS</i>	P	QL(1 ea daily)
PYRILAMINE MALEATE CRYST	NC		<i>loratadine TABS</i>	NC	QL(1 ea daily)
PYRILAMINE MALEATE POWD	NC		<i>loratadine TBDP 10 MG</i>	P	QL(1 ea daily)
TRIPLENNAMINE HCL	NC		<i>loratadine TBDP 10 MG</i>	NC	
			XYZAL ALLERGY 24HR TABS (Use <i>levocetirizine dihydrochloride</i> )	NC	QL(1 ea daily); RX/OTC
			ZYRTEC CHILDRENS ALLERGY CHEW 10 MG (Use <i>cetirizine hcl</i> )	NC	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits
ZYRTEC CHEW 10 MG (Use cetirizine hcl)	NC	QL(1 ea daily)
Antihistamines - Phenothiazines		
<i>promethazine hcl SOLN IJ</i> 25 MG/ML, 50 MG/ML	NC	
<i>promethazine hcl SOLN</i> OR 6.25 MG/5ML	P	QL(240 ml per fill retail); AL(At least 2 yrs old)
<i>promethazine hcl SOLN</i> OR 6.25 MG/5ML	NC	QL(240 ml per fill retail); AL(At least 2 yrs old)
<i>promethazine hcl SUPP</i> 12.5 MG, 25 MG	NC	QL(12 ea per fill retail); AL(At least 2 yrs old)
<i>promethazine hcl SUPP</i>	P	QL(12 ea per fill retail); AL(At least 2 yrs old)
<i>promethazine hcl TABS</i>	P	AL(At least 2 yrs old)
<i>promethazine hcl TABS</i> 25 MG, 50 MG	NC	AL(At least 2 yrs old)
Antihistamines - Piperidines		
<i>cyproheptadine hcl SYRP</i>	C	
<i>cyproheptadine hcl TABS</i>	C	
<b>ANTIHYPERLIPIDEMICS - Drugs to Treat High Cholesterol</b>		
Adenosine Triphosphate-Citrate Lyase (ACL) Inhibitors		
NEXLETOL	NC	
Angiopoietin-like Protein Inhibitors		
EVKEEZA	NC	SP
Antihyperlipidemics - Combinations		
<i>ezetimibe-simvastatin</i>	NP	QL(1 ea daily)
<i>ezetimibe-simvastatin</i>	NC	QL(1 ea daily)
NEXLIZET	NC	
VYTORIN (Use <i>ezetimibe-simvastatin</i> )	NP	QL(1 ea daily)
Antihyperlipidemics - Misc.		
<i>icosapent ethyl</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>icosapent ethyl</i>	NC	
LOVAZA (Use <i>omega-3-acid ethyl esters</i> )	NP	
<i>omega-3-acid ethyl esters</i>	P	
<i>omega-3-acid ethyl esters</i>	NC	
VASCEPA (Use <i>icosapent ethyl</i> )	P	
Bile Acid Sequestrants		
<i>cholestyramine light PACK</i>	P	
<i>cholestyramine light PACK</i>	NC	
<i>cholestyramine light PACK</i>	NP	
<i>cholestyramine light POWD</i>	NC	
<i>cholestyramine light POWD</i>	P	
<i>cholestyramine light POWD</i>	NP	
<i>cholestyramine PACK</i>	P	
<i>cholestyramine PACK</i>	NC	
<i>cholestyramine POWD</i>	P	
<i>colesevelam hcl PACK</i>	NP	
<i>colesevelam hcl TABS</i>	NP	
COLESTID FLAVORED GRAN (Use <i>colestipol hcl</i> )	NC	
COLESTID FLAVORED PACK (Use <i>colestipol hcl</i> )	NP	
COLESTID GRAN (Use <i>colestipol hcl</i> )	NP	
COLESTID PACK (Use <i>colestipol hcl</i> )	NP	
COLESTID TABS (Use <i>colestipol hcl</i> )	NP	
<i>colestipol hcl GRAN</i>	P	
<i>colestipol hcl PACK</i>	P	
<i>colestipol hcl TABS</i>	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
QUESTRAN LIGHT POWD (Use cholestyramine light)	NP		<i>fenofibric acid</i>	NP	
QUESTRAN PACK (Use cholestyramine)	NP		FENOGLIDE TABS (Use fenofibrate)	NP	
QUESTRAN POWD (Use cholestyramine)	NP		FIBRICOR (Use fenofibric acid)	NP	
WELCHOL PACK (Use colesevelam hcl)	NP		GEMFIBROZIL POWD	NC	
WELCHOL PACK (Use colesevelam hcl)	NC		<i>gemfibrozil TABS</i>	P	QL(2 ea daily)
WELCHOL TABS (Use colesevelam hcl)	NP		<i>gemfibrozil TABS</i>	NC	QL(2 ea daily)
WELCHOL TABS (Use colesevelam hcl)	NC		LIPOFEN CAPS 50 MG (Use fenofibrate)	NC	
Fibric Acid Derivatives			LIPOFEN CAPS (Use fenofibrate)	NP	
<i>choline fenofibrate</i>	NP		LOPID TABS (Use gemfibrozil)	NP	QL(2 ea daily)
<i>fenofibrate micronized 134 MG, 200 MG</i>	NC	QL(1 ea daily)	TRICOR TABS (Use fenofibrate)	NP	
<i>fenofibrate micronized 67 MG</i>	NP	QL(2 ea daily)	TRILIPIX (Use choline fenofibrate)	NP	
<i>fenofibrate micronized 134 MG, 200 MG</i>	NP	QL(1 ea daily)	HMG CoA Reductase Inhibitors		
<i>fenofibrate micronized 43 MG, 90 MG, 130 MG</i>	NP		ALTOPREV TB24 20 MG, 40 MG, 60 MG	NP	
<i>fenofibrate micronized 67 MG</i>	NC	QL(2 ea daily)	ATORVALIQ SUSP	NP	
<i>fenofibrate micronized 30 MG</i>	NC		<i>atorvastatin calcium TABS</i>	NC	QL(1 ea daily)
<i>fenofibrate CAPS</i>	NP		<i>atorvastatin calcium TABS</i>	P	QL(1 ea daily)
<i>fenofibrate TABS 40 MG, 120 MG</i>	NP		CRESTOR TABS (Use rosuvastatin calcium)	NP	QL(1 ea daily)
<i>fenofibrate TABS 54 MG</i>	NC	QL(3 ea daily)	<i>fluvastatin sodium CAPS</i>	P	
<i>fenofibrate TABS 54 MG</i>	NP	QL(3 ea daily)	<i>fluvastatin sodium TB24</i>	NP	
<i>fenofibrate TABS 160 MG</i>	NP	QL(1 ea daily)	LESCOL XL TB24 (Use fluvastatin sodium)	NC	
<i>fenofibrate TABS 48 MG, 145 MG</i>	P		LESCOL XL TB24 (Use fluvastatin sodium)	NP	
<i>fenofibrate TABS 40 MG, 120 MG</i>	NC		LIPITOR TABS (Use atorvastatin calcium)	NC	QL(1 ea daily)
<i>fenofibrate TABS 160 MG</i>	NC	QL(1 ea daily)	LIPITOR TABS (Use atorvastatin calcium)	NP	QL(1 ea daily)
FENOFIBRATE TABS	NC	QL(1 ea daily)	LIVALO (Use pitavastatin calcium)	NP	
			<i>lovastatin TABS 40 MG</i>	NC	QL(2 ea daily)
			<i>lovastatin TABS 40 MG</i>	P	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>lovastatin TABS 10 MG, 20 MG</i>	NC	QL(1 ea daily)	<i>benazepril hcl 5 MG, 10 MG, 20 MG</i>	P	QL(1 ea daily)
<i>lovastatin TABS 10 MG, 20 MG</i>	P	QL(1 ea daily)	<i>benazepril hcl 40 MG</i>	P	QL(2 ea daily)
<i>pitavastatin calcium</i>	NP		<i>benazepril hcl 40 MG</i>	NC	QL(2 ea daily)
<i>pravastatin sodium</i>	NC	QL(1 ea daily)	<i>benazepril hcl 5 MG, 10 MG, 20 MG</i>	NC	QL(1 ea daily)
<i>pravastatin sodium</i>	P	QL(1 ea daily)	<i>captopril</i>	NC	
<i>rosuvastatin calcium TABS</i>	P	QL(1 ea daily)	<i>captopril</i>	P	QL(3 ea daily)
<i>rosuvastatin calcium TABS</i>	NC	QL(1 ea daily)	<i>enalapril maleate SOLN</i>	NP	
<i>simvastatin TABS 80 MG</i>	P		<i>enalapril maleate SOLN</i>	NC	
<i>simvastatin TABS 80 MG</i>	NC		<i>enalapril maleate TABS</i>	NC	QL(2 ea daily)
<i>simvastatin TABS 10 MG, 20 MG, 40 MG</i>	NC	QL(1 ea daily)	<i>enalapril maleate TABS</i>	P	QL(2 ea daily)
<i>simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG</i>	P	QL(1 ea daily)	<i>enalaprilat</i>	NC	
ZOCOR TABS 10 MG, 20 MG, 40 MG (Use <i>simvastatin</i> )	NP	QL(1 ea daily)	EPANED SOLN (Use <i>enalapril maleate</i> )	NP	
ZYPITAMAG 2 MG, 4 MG	NP		<i>fosinopril sodium</i>	NP	QL(1 ea daily)
<b>Intestinal Cholesterol Absorption Inhibitors</b>			<i>fosinopril sodium 20 MG, 40 MG</i>	NC	QL(1 ea daily)
<i>ezetimibe</i>	P		<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	P	
<i>ezetimibe</i>	NC		<i>lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG</i>	NC	
ZETIA (Use <i>ezetimibe</i> )	NP		LOTENSIN 40 MG (Use <i>benazepril hcl</i> )	NP	QL(2 ea daily)
<b>Nicotinic Acid Derivatives</b>			LOTENSIN 10 MG, 20 MG (Use <i>benazepril hcl</i> )	NP	QL(1 ea daily)
<i>niacin (antihyperlipidemic) TBCR</i>	NP		<i>moexipril hcl</i>	NP	
<i>niacin (antihyperlipidemic) TBCR</i>	NC		<i>perindopril erbumine</i>	NP	
<b>ANTIHYPERTENSIVES - Drugs to Treat High Blood Pressure</b>			QBRELIS SOLN	NP	
<b>ACE Inhibitors</b>			<i>quinapril hcl</i>	NP	
ACCUPRIL (Use <i>quinapril hcl</i> )	NP		<i>quinapril hcl</i>	NC	
ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (Use <i>ramipril</i> )	NP	QL(2 ea daily)	<i>ramipril CAPS</i>	NP	QL(2 ea daily)
			<i>ramipril CAPS</i>	NC	QL(2 ea daily)
			<i>trandolapril 1 MG, 2 MG</i>	NP	QL(1 ea daily)
			<i>trandolapril 4 MG</i>	NP	QL(2 ea daily)
			VASOTEC TABS (Use <i>enalapril maleate</i> )	NP	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ZESTRIL TABS (Use lisinopril)	NP		CARDURA 8 MG (Use doxazosin mesylate)	NC	
Agents for Pheochromocytoma			CATAPRES-TTS-1 (Use clonidine)	NC	
<i>phenoxybenzamine hcl</i>	NC		CATAPRES-TTS-2 (Use clonidine)	NC	
<i>phentolamine mesylate SOLR</i>	NC		CATAPRES-TTS-3 (Use clonidine)	NC	
Angiotensin II Receptor Antagonists			<i>clonidine</i>	P	
ATACAND (Use candesartan cilexetil)	NP		CLONIDINE HCL POWD	NC	
AVAPRO (Use irbesartan)	NP	QL(1 ea daily)	<i>clonidine hcl TABS</i>	P	
BENICAR (Use olmesartan medoxomil)	NC	QL(1 ea daily)	<i>clonidine hcl TABS</i>	NC	
BENICAR (Use olmesartan medoxomil)	NP	QL(1 ea daily)	<i>clonidine hcl TB24</i>	NP	
<i>candesartan cilexetil</i>	NP		CLONIDINE HYDROCHLORIDE POWD	NC	
COZAAR (Use losartan potassium)	NP	QL(1 ea daily)	<i>doxazosin mesylate</i>	P	
DIOVAN TABS (Use valsartan)	NP	QL(1 ea daily)	<i>doxazosin mesylate</i>	NC	
EDARBI	NP		<i>guanfacine hcl</i>	NC	
<i>irbesartan</i>	P	QL(1 ea daily)	<i>guanfacine hcl</i>	P	
<i>irbesartan</i>	NC	QL(1 ea daily)	<i>methyldopa TABS</i>	C	
<i>losartan potassium</i>	NC	QL(1 ea daily)	MINIPRESS CAPS (Use prazosin hcl)	NC	
<i>losartan potassium</i>	P	QL(1 ea daily)	NEXICLON XR TB24 (Use clonidine hcl)	NP	
MICARDIS (Use telmisartan)	NP		<i>prazosin hcl CAPS</i>	C	
<i>olmesartan medoxomil</i>	P	QL(1 ea daily)	PRAZOSIN HYDROCHLORIDE POWD	NC	
<i>olmesartan medoxomil</i>	NC	QL(1 ea daily)	RESERPINE POWD	NC	
<i>telmisartan</i>	NC		<i>terazosin hcl</i>	P	
<i>telmisartan</i>	P		<i>terazosin hcl</i>	NC	
<i>valsartan SOLN</i>	NP		Antihypertensive Combinations		
<i>valsartan TABS</i>	NC	QL(1 ea daily)	ACCURETIC 25 MG-20 MG (Use quinapril-hydrochlorothiazide)	NP	QL(2 ea daily)
<i>valsartan TABS</i>	P	QL(1 ea daily)	ACCURETIC 12.5 MG-20 MG (Use quinapril-hydrochlorothiazide)	NP	QL(4 ea daily)
Antiadrenergic Antihypertensives					
CARDURA (Use doxazosin mesylate)	NP				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ACCURETIC 12.5 MG-10 MG (Use quinapril-hydrochlorothiazide)	NP	QL(3 ea daily)	bisoprolol & hydrochlorothiazide 6.25 MG-10 MG, 6.25 MG-5 MG	P	QL(1 ea daily)
amlodipine besylate-benazepril hcl	P	QL(1 ea daily)	bisoprolol & hydrochlorothiazide 6.25 MG-2.5 MG	P	
amlodipine besylate-olmesartan medoxomil	NP		bisoprolol & hydrochlorothiazide 6.25 MG-2.5 MG	NC	
amlodipine besylate-valsartan	P		candesartan cilexetil-hydrochlorothiazide	NP	
amlodipine besylate-valsartan 10 MG-160 MG, 10 MG-320 MG, 5 MG-160 MG	NC		captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG-25 MG	NP	QL(2 ea daily)
amlodipine-valsartan-hydrochlorothiazide	P		captopril & hydrochlorothiazide 25 MG-50 MG	NP	QL(3 ea daily)
ATACAND HCT (Use candesartan cilexetil-hydrochlorothiazide)	NP		DIOVAN HCT (Use valsartan-hydrochlorothiazide)	NP	QL(1 ea daily)
atenolol & chlorthalidone	NC	QL(2 ea daily)	EDARBYCLOR	NP	
atenolol & chlorthalidone	P	QL(2 ea daily)	enalapril maleate & hydrochlorothiazide	P	QL(2 ea daily)
AVALIDE (Use irbesartan-hydrochlorothiazide)	NP	QL(1 ea daily)	enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG	NC	QL(2 ea daily)
AZOR (Use amlodipine besylate-olmesartan medoxomil)	NC		EXFORGE (Use amlodipine besylate-valsartan)	NP	
AZOR (Use amlodipine besylate-olmesartan medoxomil)	NP		EXFORGE HCT (Use amlodipine-valsartan-hydrochlorothiazide)	NP	
benazepril & hydrochlorothiazide	P	QL(1 ea daily)	fosinopril sodium & hydrochlorothiazide	NP	QL(1 ea daily)
benazepril & hydrochlorothiazide 12.5 MG-20 MG	NC	QL(1 ea daily)	fosinopril sodium & hydrochlorothiazide	NC	QL(1 ea daily)
BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide)	NC	QL(1 ea daily)	HYZAAR (Use losartan potassium & hydrochlorothiazide)	NP	QL(1 ea daily)
BENICAR HCT (Use olmesartan medoxomil-hydrochlorothiazide)	P	QL(1 ea daily)	irbesartan-hydrochlorothiazide	P	QL(1 ea daily)
bisoprolol & hydrochlorothiazide 6.25 MG-10 MG, 6.25 MG-5 MG	NC	QL(1 ea daily)			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>lisinopril &amp; hydrochlorothiazide</i>	P		<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	NC	QL(2 ea daily)
<i>losartan potassium &amp; hydrochlorothiazide</i>	NC	QL(1 ea daily)	TEKTURNA HCT	P	
<i>losartan potassium &amp; hydrochlorothiazide</i>	P	QL(1 ea daily)	<i>telmisartan-amlodipine</i>	NP	
LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (Use <i>benazepril &amp; hydrochlorothiazide</i> )	NP	QL(1 ea daily)	<i>telmisartan-hydrochlorothiazide</i>	P	QL(1 ea daily)
LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use <i>amlodipine besylate-benazepril hcl</i> )	NP	QL(1 ea daily)	<i>telmisartan-hydrochlorothiazide</i>	NC	QL(1 ea daily)
<i>metoprolol &amp; hydrochlorothiazide TABS 25 MG-100 MG, 25 MG-50 MG</i>	NP	QL(2 ea daily)	TENORETIC 100 (Use <i>atenolol &amp; chlorthalidone</i> )	NP	QL(2 ea daily)
<i>metoprolol &amp; hydrochlorothiazide TABS 50 MG-100 MG</i>	NP	QL(1 ea daily)	TENORETIC 100 (Use <i>atenolol &amp; chlorthalidone</i> )	NC	
MICARDIS HCT (Use <i>telmisartan-hydrochlorothiazide</i> )	NP	QL(1 ea daily)	TENORETIC 50 (Use <i>atenolol &amp; chlorthalidone</i> )	NC	
<i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i>	NP		TENORETIC 50 (Use <i>atenolol &amp; chlorthalidone</i> )	NP	QL(2 ea daily)
<i>olmesartan medoxomil-hydrochlorothiazide</i>	NC	QL(1 ea daily)	<i>trandolapril-verapamil hcl</i>	P	
<i>olmesartan medoxomil-hydrochlorothiazide</i>	NP	QL(1 ea daily)	TRIBENZOR (Use <i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i> )	NC	
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	NC	QL(4 ea daily)	TRIBENZOR (Use <i>olmesartan medoxomil-amlodipine-hydrochlorothiazide</i> )	NP	
<i>quinapril-hydrochlorothiazide 12.5 MG-20 MG</i>	NP	QL(4 ea daily)	<i>valsartan-hydrochlorothiazide</i>	P	QL(1 ea daily)
<i>quinapril-hydrochlorothiazide 25 MG-20 MG</i>	NP	QL(2 ea daily)	<i>valsartan-hydrochlorothiazide 12.5 MG-160 MG, 12.5 MG-320 MG, 25 MG-160 MG, 25 MG-320 MG</i>	NC	QL(1 ea daily)
<i>quinapril-hydrochlorothiazide 12.5 MG-10 MG</i>	NP	QL(3 ea daily)	VASERETIC 25 MG-10 MG (Use <i>enalapril maleate &amp; hydrochlorothiazide</i> )	NP	QL(2 ea daily)
			ZESTORETIC (Use <i>lisinopril &amp; hydrochlorothiazide</i> )	NP	
			ZIAC 6.25 MG-10 MG, 6.25 MG-5 MG (Use <i>bisoprolol &amp; hydrochlorothiazide</i> )	NP	QL(1 ea daily)



Drug Name	Drug Tier	Requirements/Limits
ZIAC 6.25 MG-2.5 MG (Use <i>bisoprolol</i> & <i>hydrochlorothiazide</i> )	NP	
Direct Renin Inhibitors		
<i>aliskiren fumarate</i>	NP	
TEKTURNA (Use <i>aliskiren fumarate</i> )	P	
Selective Aldosterone Receptor Antagonists (SARAs)		
<i>eplerenone</i>	NC	
Vasodilators		
<i>hydralazine hcl SOLN</i>	NC	
<i>hydralazine hcl TABS</i>	C	
<i>minoxidil 10 MG</i>	C	QL(10 ea daily)
<i>minoxidil 2.5 MG</i>	C	QL(3 ea daily)
<i>nitroprusside sodium</i>	NC	
<i>nitroprusside sodium-sodium chloride</i>	NC	
<b>ANTI-INFECTIVE AGENTS - MISC. - Drugs to Treat Bacterial Infections</b>		
Anti-infective Agents - Misc.		
AEMCOLO	NP	
FLAGYL CAPS (Use <i>metronidazole</i> )	NP	
LIKMEZ SUSP	NP	
<i>metronidazole CAPS</i>	P	
<i>metronidazole SOLN</i>	NC	
<i>metronidazole TABS 500 MG</i>	NC	
<i>metronidazole TABS</i>	P	
<i>pentamidine isethionate IJ</i>	NC	
<i>tinidazole</i>	NC	
<i>tinidazole</i>	NP	
TRIMETHOPRIM POWD	NC	
<i>trimethoprim TABS</i>	C	
XIFAXAN	NP	

Drug Name	Drug Tier	Requirements/Limits
Anti-infective Misc. - Combinations		
BACTRIM DS TABS (Use <i>sulfamethoxazole-trimethoprim</i> )	NC	
BACTRIM TABS (Use <i>sulfamethoxazole-trimethoprim</i> )	NC	
<i>methenamine-hyoscamine-methylene blue-sodium phosphate TABS</i>	NC	
<i>methenamine-hyosc-methylene blue-benzoic acid-phenyl sal</i>	NC	
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal CAPS</i>	NC	
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS 10.8 MG-81.6 MG-0.12 MG-36.2 MG-40.8 MG, 10.8 MG-81.6 MG-36.2 MG-0.12 MG-40.8 MG</i>	C	
<i>methenamine-hyosc-methylene blue-sod phos-phenyl sal TABS 10.8 MG-81 MG-32.4 MG-0.12 MG-40.8 MG</i>	NC	
<i>sulfamethoxazole-trimethoprim SOLN</i>	NC	
<i>sulfamethoxazole-trimethoprim SUSP</i>	C	
<i>sulfamethoxazole-trimethoprim TABS</i>	C	
URIBEL	NC	
Antiprotozoal Agents		
ALINIA TABS (Use <i>nitazoxanide</i> )	NC	
<i>atovaquone</i>	NC	
LAMPIT	NC	
<i>nitazoxanide TABS</i>	NC	
<i>nitazoxanide TABS</i>	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>Carbapenems</b>			<i>vancomycin hcl SOLR IV 500 MG</i>	C	QL(14 ea per 31 day(s) retail)
<i>imipenem-cilastatin IV</i>	NC		<i>vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML</i>	NP	QL(300 ml per fill retail)
<i>meropenem</i>	NC		VANCOMYCIN HYDROCHLORIDE/DEXTROSE 1 GM/200ML-5 %, 1.25 GM/250ML-5 %, 1.5 GM/300ML-5 %, 500 MG/100ML-5 %, 750 MG/150ML-5 %	NC	
MEROPENEM	NC		VANCOMYCIN HYDROCHLORIDE/SODIUM CHLORIDE SOLN 750 MG/150ML-0.9 %	NC	
MEROPENEM/SODIUM CHLORIDE	NC		VANCOMYCIN HYDROCHLORIDE SOLN IV 500 MG/100ML, 750 MG/150ML, 1000 MG/200ML, 1250 MG/250ML, 1500 MG/300ML, 1750 MG/350ML	NC	
RECARBRIO	NC		VANCOMYCIN HYDROCHLORIDE SOLR IV 1 GM	C	QL(14 ea per fill retail)
<b>Chloramphenicols</b>			VANCOMYCIN HYDROCHLORIDE SOLR IV 500 MG	C	QL(14 ea per 31 day(s) retail)
<i>chloramphenicol sodium succinate</i>	NC		VANCOMYCIN HYDROCHLORIDE SOLR IV 1.25 GM, 1.5 GM, 1.75 GM, 2 GM, 5 GM, 10 GM, 750 MG	NC	
<b>Cyclic Lipopeptides</b>			VANCOMYCIN SOLN IV	NC	
CUBICIN RF ( <i>Use daptomycin</i> )	NC		VIBATIV 750 MG	NC	
<i>daptomycin</i>	NC		<b>Leprostatics</b>		
DAPTOMYCIN	NC		<i>dapsone</i>	C	
DAPTOMYCIN/SODIUM CHLORIDE	NC		<b>Lincosamides</b>		
<b>Glycopeptides</b>			CLEOCIN ( <i>Use clindamycin hcl</i> )	NC	
DALVANCE	NC				
FIRVANQ SOLR OR ( <i>Use vancomycin hcl</i> )	P	QL(300 ml per fill retail)			
KIMYRSA	NC				
ORBACTIV	NC				
VANCOCCIN CAPS 250 MG ( <i>Use vancomycin hcl</i> )	NP	QL(8 ea daily)			
VANCOCCIN CAPS 125 MG ( <i>Use vancomycin hcl</i> )	NP	QL(4 ea daily)			
<i>vancomycin hcl CAPS 125 MG</i>	P	QL(4 ea daily)			
<i>vancomycin hcl CAPS 250 MG</i>	P	QL(8 ea daily)			
VANCOMYCIN HCL SOLN	NC				
<i>vancomycin hcl SOLR IV 1.25 GM, 1.5 GM, 5 GM, 10 GM, 750 MG</i>	NC				
<i>vancomycin hcl SOLR IV 1 GM, 1000 MG</i>	C	QL(14 ea per fill retail)			

Drug Name	Drug Tier	Requirements/Limits
CLEOCIN PEDIATRIC GRANULES (Use clindamycin palmitate hydrochloride)	NC	QL(300 ml per fill retail)
CLEOCIN PHOSPHATE SOLN IJ	NC	
clindamycin hcl 150 MG, 300 MG	C	
clindamycin hcl 75 MG	NC	
clindamycin palmitate hydrochloride	C	QL(300 ml per fill retail)
clindamycin phosphate in d5w	NC	
clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML	NC	
lincomycin hcl	NC	
Monobactams		
aztreonam	NC	
Oxazolidinones		
LINEZOLID	NC	
linezolid SOLN	NC	
linezolid SUSR	NC	
linezolid TABS	NC	
SIVEXTRO SOLR	NC	
SIVEXTRO TABS	C	QL(6 ea per fill retail); PA
ZYVOX SOLN	NC	
Polymyxins		
colistimethate sodium	NC	
COLY-MYCIN M (Use colistimethate sodium)	NC	
POLYMYXIN B SULFATE POWD	NC	
polymyxin b sulfate SOLR	NC	
Urinary Anti-infectives		
fosfomycin tromethamine	NC	

Drug Name	Drug Tier	Requirements/Limits
MACROBID (Use nitrofurantoin monohyd macro)	NC	
MACRODANTIN (Use nitrofurantoin macrocrystal)	NC	
methenamine hippurate	NC	
methenamine mandelate 0.5 GM, 1 GM	C	
MONUROL (Use fosfomycin tromethamine)	NC	
NALIDIXIC ACID	NC	
nitrofurantoin	C	QL(40 ml daily)
NITROFURANTOIN	NC	QL(40 ml daily)
nitrofurantoin macrocrystal 25 MG	NC	
nitrofurantoin macrocrystal 50 MG, 100 MG	C	
nitrofurantoin monohyd macro	C	
<b>ANTIMALARIALS - Drugs to Treat Malaria (Parasitic Infections)</b>		
Antimalarial Combinations		
atovaquone-proguanil hcl	NC	
COARTEM	C	QL(24 ea per fill retail)
Antimalarials		
ARTESUNATE	NC	
CHLOROQUINE PHOSPHATE POWD	NC	
chloroquine phosphate TABS 500 MG	C	QL(1 ea daily)
chloroquine phosphate TABS 250 MG	C	
hydroxychloroquine sulfate 100 MG, 200 MG	C	
hydroxychloroquine sulfate 300 MG, 400 MG	NC	
KRINTAFEL	C	QL(0.67 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>mefloquine hcl</i>	C		<i>neostigmine methylsulfate SOSY</i>	NC	
MEPACRINE DIHYDROCHLORIDE DIHYDRATE	NC		NEOSTIGMINE METHYLSULFATE SOSY 3 MG/3ML	NC	
PLAQUENIL ( <i>Use hydroxychloroquine sulfate</i> )	NC		<i>pyridostigmine bromide SOLN OR</i>	NC	
<i>primaquine phosphate TABS</i>	C		<i>pyridostigmine bromide TABS 60 MG</i>	C	
PRIMAQUINE PHOSPHATE TABS ( <i>Use primaquine phosphate</i> )	NC		<i>pyridostigmine bromide TABS 30 MG</i>	NC	
QUINACRINE DIHYDROCHLORIDE	NC		<i>pyridostigmine bromide TBCR</i>	C	
QUINACRINE DIHYDROCHLORIDE DIHYDRATE	NC		REGONOL SOLN IV	NC	
QUINACRINE HYDROCHLORIDE	NC		<b>ANTIMYCOBACTERIAL AGENTS - Drugs to Treat Tuberculosis (Bacterial Infections)</b>		
QUININE SULFATE DIHYDRATE POWD	NC		Antimycobacterial Agents		
<i>quinine sulfate CAPS 324 MG</i>	NC		AMINOSALICYLIC ACID POWD	NC	
QUININE SULFATE POWD	NC		<i>cycloserine</i>	NC	
SOVUNA 300 MG	NC		ETHAMBUTOL HCL POWD	NC	
SOVUNA 200 MG	C		<i>ethambutol hcl TABS</i>	C	
<b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>			ISONIAZID POWD	NC	
Antimyasthenic/Cholinergic Agents			<i>isoniazid SOLN</i>	NC	
MESTINON TIMESPAN TBCR ( <i>Use pyridostigmine bromide</i> )	NC		<i>isoniazid SYRP</i>	C	
MESTINON TABS ( <i>Use pyridostigmine bromide</i> )	NC		<i>isoniazid TABS</i>	C	
<i>neostigmine methylsulfate SOLN IV 5 MG/10ML, 10 MG/10ML</i>	NC		MYAMBUTOL TABS 400 MG ( <i>Use ethambutol hcl</i> )	NC	
NEOSTIGMINE METHYLSULFATE SOLN IV 5 MG/10ML, 10 MG/10ML	NC		MYCOBUTIN ( <i>Use rifabutin</i> )	NC	
			PRETOMANID	NC	
			PRIFTIN	NC	
			<i>pyrazinamide</i>	C	
			<i>rifabutin</i>	C	
			<i>rifampin CAPS</i>	C	
			<i>rifampin SOLR</i>	NC	
			SIRTURO	NC	
			TRECTOR	C	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to Treat Cancer</b>					
<b>Alkylating Agents</b>					
BICNU (Use carmustine)	NC		<i>gemcitabine hcl SOLR</i>	NC	
<i>busulfan SOLN</i>	NC		INFUGEM	NC	
<i>carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML</i>	NC	SP	<i>mercaptopurine TABS</i>	C	
<i>carmustine</i>	NC		<i>methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML</i>	P	
CARMUSTINE	NC		<i>methotrexate sodium SOLR</i>	P	
<i>cyclophosphamide CAPS</i>	NC		<i>methotrexate sodium TABS 2.5 MG</i>	P	
CYCLOPHOSPHAMIDE SOLN	NC		<i>methotrexate sodium TABS 2.5 MG</i>	NC	
<i>cyclophosphamide SOLR IJ</i>	NC	SP	METHOTREXATE POWD	NC	
CYCLOPHOSPHAMIDE TABS	NC		<i>nelarabine</i>	NC	
GLEOSTINE 10 MG, 40 MG, 100 MG	NC		PEMRYDI RTU SOLN	NC	
GLIADEL WAFER	NC		PURIXAN SUSP	C	
IFEX SOLR	NC		TREXALL TABS 5 MG, 7.5 MG, 10 MG, 15 MG	NP	
<i>ifosfamide SOLN</i>	NC		XATMEP SOLN	NP	
<i>ifosfamide SOLR</i>	NC		<b>Antineoplastic - Angiogenesis Inhibitors</b>		
IFOSFAMIDE SOLR	NC		MVASI	C	SP; PA
LEUKERAN	C		ZIRABEV	C	SP; PA
MYLERAN TABS	C		<b>Antineoplastic - Antibodies</b>		
<i>oxaliplatin SOLN</i>	NC		DANYELZA	NC	
<i>oxaliplatin SOLR</i>	NC		ENHERTU	C	SP; PA
ZANOSAR	NC		KIMMTRAK	NC	SP
ZEPZELCA	NC	SP	MONJUVI	NC	SP
<b>Antimetabolites</b>			OPDIVO	NC	SP
<i>clofarabine</i>	NC		PADCEV	C	SP; PA
CLOLAR (Use <i>clofarabine</i> )	NC		POLIVY	NC	SP
<i>fluorouracil</i>	NC		RITUXAN	NC	SP
<i>gemcitabine hcl SOLN</i>	NC		RUXIENCE	C	SP; PA
			RYBREVANT	NC	SP
			SARCLISA	NC	SP
			TRUXIMA	C	SP; PA
			UNITUXIN	NC	SP
			<b>Antineoplastic - Anti-HER2 Agents</b>		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HERCEPTIN 150 MG	NC	SP	LEUPROLIDE ACETATE INJ	NC	
HERZUMA	NC	SP	MEGESTROL ACETATE POWD	NC	
KANJINTI	C	SP; PA	<i>megestrol acetate SUSP</i>	P	
MARGENZA	NC	SP	<i>megestrol acetate SUSP 40 MG/ML</i>	NC	
OGIVRI	C	SP; PA	<i>megestrol acetate TABS</i>	C	
ONTRUZANT	NC	SP	<i>nilutamide</i>	NC	
TRAZIMERA 150 MG	NC	SP	NUBEQA	NC	SP
TRAZIMERA 420 MG	C	SP; PA	SOLTAMOX SOLN	NC	
Antineoplastic - Cellular Immunotherapy			<i>tamoxifen citrate TABS</i>	C	
ABECMA	NC		<i>toremifene citrate</i>	C	PA
BREYANZI	NC		ZYTIGA (Use abiraterone acetate)	NC	SP; PA
CARVYKTI	NC		Antineoplastic - Hypoxia-Inducible Factor Inhibitors		
KYMRIAH	NC		WELIREG	NC	SP
OMISIRGE	NC		Antineoplastic - Immunomodulators		
PROVENGE	NC	SP	LEVAMISOLE HCL	NC	
TECARTUS	NC		Antineoplastic - PDGFR-alpha Inhibitors		
TECELRA	NC		AYVAKIT	NC	SP
YESCARTA	NC		Antineoplastic - XPO1 Inhibitors		
Antineoplastic - Hormonal and Related Agents			XPOVIO 60 MG TWICE WEEKLY	NC	SP
<i>abiraterone acetate</i>	C	SP; PA	XPOVIO 80 MG TWICE WEEKLY	NC	SP
<i>anastrozole</i>	C		Antineoplastic Antibiotics		
ARIMIDEX (Use <i>anastrozole</i> )	NC		<i>bleomycin sulfate</i>	NC	
AROMASIN (Use <i>exemestane</i> )	NC		COSMEGEN (Use <i>dactinomycin</i> )	NC	
<i>bicalutamide</i>	C	QL(1 ea daily)	<i>dactinomycin</i>	NC	
CASODEX (Use <i>bicalutamide</i> )	NC	QL(1 ea daily)	<i>doxorubicin hcl liposomal</i>	NC	
ERLEADA	NC	SP	<i>doxorubicin hcl SOLN</i>	NC	
EULEXIN	C		<i>doxorubicin hcl SOLR 10 MG, 50 MG</i>	NC	
<i>exemestane</i>	C		<i>idarubicin hcl</i>	NC	
FARESTON (Use <i>toremifene citrate</i> )	NC	PA			
FEMARA (Use <i>letrozole</i> )	NC				
<i>flutamide</i>	C				
<i>fulvestrant SOSY</i>	NC				
<i>letrozole</i>	C				

Drug Name	Drug Tier	Requirements/Limits
JELMYTO SOLR UL	NC	
<i>mitomycin SOLR IV</i>	NC	
Antineoplastic Combinations		
HERCEPTIN HYLECTA	NC	SP
INQOVI	NC	SP
PHESGO	C	SP; PA
RITUXAN HYCELA	NC	SP
Antineoplastic Enzyme Inhibitors		
BRAFTOVI 75 MG	C	SP; PA
BRUKINSA	NC	SP
GAVRETO	NC	SP
IBRANCE CAPS	C	SP; PA
IBRANCE TABS	C	SP; PA
ICLUSIG	C	QL(1 ea daily); SP; PA
INREBIC	C	SP; PA
LUMAKRAS	NC	SP
MEKTOVI	C	SP; PA
OGSIVEO 100 MG, 150 MG	NC	
OJEMDA SUSR	NC	
OJEMDA TABS	NC	
RETEVMO TABS	NC	
ROZLYTREK CAPS	C	SP; PA
RYTELO	NC	
TALZENNA	NC	SP
TAZVERIK	NC	SP
TEPMETKO	NC	SP
VORANIGO	NC	
Antineoplastic Enzymes		
ASPARLAS	C	SP; PA
RYLAZE	NC	SP
Antineoplastic Radiopharmaceuticals		
STRONTIUM CHLORIDE SR-89	NC	
XOFIGO	NC	

Drug Name	Drug Tier	Requirements/Limits
Antineoplastics Misc.		
<i>dacarbazine SOLR</i>	NC	
ELZONRIS	NC	
HYDREA ( <i>Use hydroxyurea</i> )	NC	
<i>hydroxyurea</i>	C	
NIPENT	NC	
TICE BCG	NC	
Chemotherapy Adjuncts		
ELITEK	NC	
Chemotherapy Rescue/Antidote/Protective Agents		
COSELA	NC	
<i>leucovorin calcium SOLN IJ 100 MG/10ML, 500 MG/50ML</i>	NC	
<i>leucovorin calcium SOLR</i>	NC	
<i>leucovorin calcium TABS</i>	C	
PEDMARK	NC	
Mitotic Inhibitors		
ETOPOPHOS	NC	
<i>paclitaxel</i>	NC	
<i>vinblastine sulfate SOLN</i>	NC	
<i>vinorelbine tartrate</i>	NC	
<b>ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to Treat Parkinson's Disease</b>		
Antiparkinson Adjunctive Therapy		
<i>carbidopa</i>	C	
LODOSYN ( <i>Use carbidopa</i> )	NC	
NOURIANZ	NC	
Antiparkinson Anticholinergics		
<i>benztropine mesylate SOLN</i>	NC	
<i>benztropine mesylate TABS</i>	C	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>trihexyphenidyl hcl SOLN</i>	C	QL(16.67 ml daily)	PARLODEL CAPS ( <i>Use bromocriptine mesylate</i> )	NC	
<i>trihexyphenidyl hcl TABS</i>	C		PARLODEL TABS ( <i>Use bromocriptine mesylate</i> )	NC	
Antiparkinson COMT Inhibitors					
COMTAN ( <i>Use entacapone</i> )	NC		<i>pramipexole dihydrochloride TABS 0.75 MG, 1 MG, 1.5 MG</i>	NC	QL(3 ea daily); AL(At least 18 yrs old)
<i>entacapone</i>	NC		<i>pramipexole dihydrochloride TABS</i>	P	QL(3 ea daily); AL(At least 18 yrs old)
ONGENTYS	NC		<i>pramipexole dihydrochloride TB24</i>	NP	
<i>tolcapone</i>	NC		<i>pramipexole dihydrochloride TB24 0.375 MG, 2.25 MG, 3 MG, 3.75 MG</i>	NC	
Antiparkinson Dopaminergics			<i>ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG</i>	P	QL(3 ea daily)
<i>amantadine hcl CAPS</i>	C		<i>ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG</i>	P	QL(6 ea daily)
<i>amantadine hcl SOLN</i>	C		<i>ropinirole hydrochloride TB24</i>	NC	
<i>amantadine hcl TABS</i>	NC		<i>ropinirole hydrochloride TB24</i>	NP	
<i>bromocriptine mesylate CAPS</i>	C		RYTARY CPCR	NC	
BROMOCRIPTINE MESYLATE POWD	NC		SINEMET TABS 100 MG-10 MG, 100 MG-25 MG ( <i>Use carbidopa-levodopa</i> )	NC	
<i>bromocriptine mesylate TABS 2.5 MG</i>	C		STALEVO 100 ( <i>Use carbidopa-levodopa-entacapone</i> )	NC	
<i>carbidopa-levodopa-entacapone</i>	NC		STALEVO 125 ( <i>Use carbidopa-levodopa-entacapone</i> )	NC	
<i>carbidopa-levodopa TABS</i>	C		STALEVO 150 ( <i>Use carbidopa-levodopa-entacapone</i> )	NC	
<i>carbidopa-levodopa TBCR</i>	C		STALEVO 200 ( <i>Use carbidopa-levodopa-entacapone</i> )	NC	
<i>carbidopa-levodopa TBDP</i>	NC				
CREXONT CPCR	NC				
DHIVY TABS	C				
DUOPA SUSP	NC				
INBRIJA CAPS	NC				
LEVODOPA POWD	NC				
MIRAPEX ER TB24 ( <i>Use pramipexole dihydrochloride</i> )	NP				
NEUPRO	NP				
OSMOLEX ER TB24 129 MG, 193 MG	NP				
OSMOLEX ER TB24 193 MG	NC				



Drug Name	Drug Tier	Requirements/Limits
STALEVO 50 (Use carbidopa-levodopa-entacapone)	NC	
STALEVO 75 (Use carbidopa-levodopa-entacapone)	NC	
<b>Antiparkinson Monoamine Oxidase Inhibitors</b>		
<i>rasagiline mesylate</i>	NC	
<i>selegiline hcl CAPS</i>	C	
SELEGILINE HCL POWD	NC	
<i>selegiline hcl TABS</i>	C	
ZELAPAR TBDP	NC	
<b>ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to Treat Mood Disorders</b>		
<b>Antimanic Agents</b>		
<i>lithium</i>	C	QL(10 ml daily)
<i>lithium carbonate CAPS</i>	C	
LITHIUM CARBONATE POWD	C	
<i>lithium carbonate TABS</i>	C	
<i>lithium carbonate TBCR</i>	C	
LITHOBID TBCR (Use <i>lithium carbonate</i> )	NC	
<b>Antipsychotics - Misc.</b>		
CAPLYTA	NP	
EQUETRO	NP	
GEODON (Use <i>ziprasidone mesylate</i> )	NC	
GEODON (Use <i>ziprasidone hcl</i> )	NP	QL(2 ea daily); AL(At least 18 yrs old)
LATUDA (Use <i>lurasidone hcl</i> )	NP	
<i>lurasidone hcl</i>	P	
NUPLAZID CAPS	NP	QL(1 ea daily)
NUPLAZID TABS 10 MG	NP	QL(1 ea daily)
VRAYLAR CAPS	P	
VRAYLAR CPPK	P	

Drug Name	Drug Tier	Requirements/Limits
<i>ziprasidone hcl</i>	NC	QL(2 ea daily); AL(At least 18 yrs old)
<i>ziprasidone hcl</i>	P	QL(2 ea daily); AL(At least 18 yrs old)
<i>ziprasidone mesylate</i>	NP	
<b>Benzisoxazoles</b>		
FANAPT	NP	
FANAPT TITRATION PACK	NP	
INVEGA (Use <i>paliperidone</i> )	NP	
INVEGA HAFYERA	P	SP
INVEGA SUSTENNA 156 MG/ML	P	QL(2 ml per 28 day(s) retail); SP
INVEGA SUSTENNA 78 MG/0.5ML	P	QL(0.5 ml per 28 day(s) retail); SP
INVEGA SUSTENNA 39 MG/0.25ML	P	QL(0.25 ml per 28 day(s) retail); SP
INVEGA SUSTENNA 117 MG/0.75ML	P	QL(1.5 ml per 28 day(s) retail); SP
INVEGA SUSTENNA 234 MG/1.5ML	P	QL(3 ml per 28 day(s) retail); SP
INVEGA TRINZA 273 MG/0.88ML	P	QL(0.88 ml per fill retail); 1 max fill(s) per 84 day(s) retail; SP
INVEGA TRINZA 410 MG/1.32ML	P	QL(1.4 ml per fill retail); 1 max fill(s) per 84 day(s) retail; SP
INVEGA TRINZA 819 MG/2.63ML	P	QL(2.7 ml per fill retail); 1 max fill(s) per 84 day(s) retail; SP

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INVEGA TRINZA 546 MG/1.75ML	P	QL(1.8 ml per fill retail); 1 max fill(s) per 84 day(s) retail; SP	<i>haloperidol lactate CONC</i>	C	
<i>paliperidone</i>	NC		<i>haloperidol lactate SOLN</i>	NC	
<i>paliperidone</i>	NP		<i>haloperidol TABS 0.5 MG, 1 MG, 2 MG, 5 MG, 10 MG</i>	C	QL(3 ea daily)
PERSERIS PRSY	P	QL(1 ea per 28 day(s) retail); SP	<i>haloperidol TABS 20 MG</i>	C	
RISPERDAL CONSTA (Use <i>risperidone microspheres</i> )	P	2 max fill(s) per 28 day(s) retail; SP	<b>Dibenzapines</b>		
RISPERDAL SOLN (Use <i>risperidone</i> )	NP	QL(4 ml daily); AL(At least 5 yrs old)	ADASUVE	NC	
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use <i>risperidone</i> )	NP	QL(4 ea daily); AL(At least 5 yrs old)	ADASUVE	NP	
<i>risperidone microspheres</i>	NC	2 max fill(s) per 28 day(s) retail; SP	<i>asenapine maleate</i>	NP	
<i>risperidone SOLN</i>	P	QL(4 ml daily); AL(At least 5 yrs old)	<i>asenapine maleate 2.5 MG</i>	NC	
<i>risperidone TABS</i>	P	QL(4 ea daily); AL(At least 5 yrs old)	<i>clozapine TABS 25 MG, 50 MG, 200 MG</i>	P	QL(3 ea daily); AL(At least 18 yrs old)
<i>risperidone TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG</i>	NC	QL(4 ea daily); AL(At least 5 yrs old)	<i>clozapine TABS 100 MG</i>	P	QL(9 ea daily); AL(At least 18 yrs old)
<i>risperidone TBDP</i>	P	QL(2 ea daily); AL(At least 5 yrs old)	<i>clozapine TABS 100 MG</i>	NC	QL(9 ea daily); AL(At least 18 yrs old)
<i>risperidone TBDP 0.5 MG, 1 MG, 3 MG, 4 MG</i>	NC	QL(2 ea daily); AL(At least 5 yrs old)	<i>clozapine TABS 25 MG, 50 MG, 200 MG</i>	NC	QL(3 ea daily); AL(At least 18 yrs old)
RYKINDO SRER	NP		<i>clozapine TBDP</i>	NP	
<b>Butyrophenones</b>			CLOZARIL TABS 25 MG, 50 MG, 200 MG (Use <i>clozapine</i> )	NP	QL(3 ea daily); AL(At least 18 yrs old)
HALDOL DECANOATE 100 (Use <i>haloperidol decanoate</i> )	NC		CLOZARIL TABS 100 MG (Use <i>clozapine</i> )	NP	QL(9 ea daily); AL(At least 18 yrs old)
HALDOL DECANOATE 50 (Use <i>haloperidol decanoate</i> )	NC		<i>loxapine succinate</i>	C	QL(4 ea daily)
<i>haloperidol decanoate</i>	C		<i>olanzapine SOLR</i>	NC	
			<i>olanzapine TABS 7.5 MG</i>	NC	QL(2 ea daily); AL(At least 10 yrs old)
			<i>olanzapine TABS 20 MG</i>	NC	QL(1 ea daily); AL(At least 10 yrs old)
			<i>olanzapine TABS 7.5 MG, 10 MG</i>	P	QL(2 ea daily); AL(At least 10 yrs old)
			<i>olanzapine TABS 15 MG, 20 MG</i>	P	QL(1 ea daily); AL(At least 10 yrs old)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>olanzapine TABS 2.5 MG, 5 MG</i>	NC	QL(4 ea daily); AL(At least 10 yrs old)	ZYPREXA ZYDIS TBDP (Use <i>olanzapine</i> )	NP	
<i>olanzapine TABS 2.5 MG, 5 MG</i>	P	QL(4 ea daily); AL(At least 10 yrs old)	ZYPREXA SOLR (Use <i>olanzapine</i> )	NP	
<i>olanzapine TBDP</i>	NP		ZYPREXA TABS 2.5 MG, 5 MG (Use <i>olanzapine</i> )	NP	QL(4 ea daily); AL(At least 10 yrs old)
<i>olanzapine TBDP</i>	NC		ZYPREXA TABS 7.5 MG, 10 MG (Use <i>olanzapine</i> )	NP	QL(2 ea daily); AL(At least 10 yrs old)
<i>quetiapine fumarate TABS 150 MG</i>	P		ZYPREXA TABS 15 MG, 20 MG (Use <i>olanzapine</i> )	NP	QL(1 ea daily); AL(At least 10 yrs old)
<i>quetiapine fumarate TABS 200 MG, 400 MG</i>	NC		<b>Dihydroindolones</b>		
<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	NC	QL(2 ea daily); AL(At least 10 yrs old)	<i>molindone hcl</i>	NC	
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	NC	QL(4 ea daily); AL(At least 10 yrs old)	<b>Phenothiazines</b>		
<i>quetiapine fumarate TABS 300 MG, 400 MG</i>	P	QL(2 ea daily); AL(At least 10 yrs old)	<i>chlorpromazine hcl CONC</i>	NC	
<i>quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	P	QL(4 ea daily); AL(At least 10 yrs old)	<i>chlorpromazine hcl SOLN</i>	NC	
<i>quetiapine fumarate TABS 150 MG, 200 MG, 300 MG, 400 MG</i>	NC		<i>chlorpromazine hcl TABS 10 MG</i>	C	QL(10 ea daily)
<i>quetiapine fumarate TB24 150 MG, 200 MG, 300 MG, 400 MG</i>	P	QL(2 ea daily); AL(At least 10 yrs old)	<i>chlorpromazine hcl TABS 25 MG, 50 MG, 100 MG, 200 MG</i>	C	QL(3 ea daily)
<i>quetiapine fumarate TB24</i>	P		<i>fluphenazine decanoate</i>	C	
SAPHRIS 5 MG (Use <i>asenapine maleate</i> )	NC		<i>fluphenazine hcl CONC</i>	NC	
SAPHRIS	P		<i>fluphenazine hcl ELIX</i>	NC	
SAPHRIS (Use <i>asenapine maleate</i> )	P		<i>fluphenazine hcl SOLN</i>	NC	
SECUADO	NP		<i>fluphenazine hcl TABS</i>	C	
SEROQUEL XR TB24 (Use <i>quetiapine fumarate</i> )	NP		<i>perphenazine TABS</i>	C	QL(4 ea daily)
SEROQUEL TABS 300 MG, 400 MG (Use <i>quetiapine fumarate</i> )	NP	QL(2 ea daily); AL(At least 10 yrs old)	<i>prochlorperazine</i>	NP	
SEROQUEL TABS 25 MG, 50 MG, 100 MG, 200 MG (Use <i>quetiapine fumarate</i> )	NP	QL(4 ea daily); AL(At least 10 yrs old)	<i>prochlorperazine</i>	P	
VERSACLOZ SUSP	NP		<i>prochlorperazine edisylate 10 MG/2ML</i>	NC	
			PROCHLORPERAZINE MALEATE POWD	NC	
			<i>prochlorperazine maleate TABS</i>	P	
			<i>thioridazine hcl</i>	C	QL(3 ea daily)
			<i>trifluoperazine hcl TABS</i>	C	QL(2 ea daily)
			<b>Quinolinone Derivatives</b>		

Drug Name	Drug Tier	Requirements/Limits
ABILIFY MAINTENA PRSY	P	QL(1 ea per 28 day(s) retail); SP
ABILIFY MAINTENA SRER	P	QL(1 ea per 28 day(s) retail); SP
ABILIFY TABS (Use aripiprazole)	NP	QL(1 ea daily); AL(At least 6 yrs old)
<i>aripiprazole SOLN OR</i>	NP	QL(750 ml per 31 day(s) retail); AL(At least 6 yrs old)
<i>aripiprazole TABS</i>	NC	QL(1 ea daily); AL(At least 6 yrs old)
<i>aripiprazole TABS</i>	P	QL(1 ea daily); AL(At least 6 yrs old)
<i>aripiprazole TBDP</i>	NP	QL(1 ea daily); AL(At least 6 yrs old)
ARISTADA 441 MG/1.6ML	P	QL(1.6 ml per 28 day(s) retail); SP
ARISTADA 1064 MG/3.9ML	P	QL(4 ml per fill retail); 1 max fill(s) per 56 day(s) retail; SP
ARISTADA 662 MG/2.4ML	P	QL(2.4 ml per 28 day(s) retail); SP
ARISTADA 882 MG/3.2ML	P	QL(3.2 ml per 28 day(s) retail); SP
ARISTADA INITIO	P	QL(2.5 ml per fill retail); 1 max fill(s) per 180 day(s) retail; SP
REXULTI	NP	
Thioxanthenes		
<i>thiothixene</i>	C	QL(3 ea daily)
<b>ANTISEPTICS &amp; DISINFECTANTS</b>		
Antiseptics & Disinfectants		
CETYLCIDE-G CONC	NC	

Drug Name	Drug Tier	Requirements/Limits
PHENOL CRYST	NC	
PHENOL LIQD XX 89 %	NC	
Chlorine Antiseptics		
<i>chlorhexidine gluconate SOLN EX</i>	NC	
CLORPACTIN WCS-90	NC	
<i>sodium hypochlorite SOLN EX 0.25 %, 0.5 %</i>	NC	
Iodine Antiseptics		
LUGOLS STRONG IODINE SOLN	NC	
Mercury Antiseptics		
THIMEROSAL POWD	NC	
Silver Antiseptics		
SILVER PROTEIN MILD	NC	
<b>ANTIVIRALS - Drugs to Treat Viral Infections</b>		
Antiretrovirals		
<i>abacavir sulfate-lamivudine</i>	C	QL(1 ea daily)
<i>abacavir sulfate SOLN</i>	C	QL(30 ml daily)
<i>abacavir sulfate TABS</i>	C	QL(2 ea daily)
APRETUDE	NC	
APTIVUS CAPS	C	QL(4 ea daily)
<i>atazanavir sulfate CAPS 150 MG, 200 MG</i>	C	QL(2 ea daily)
<i>atazanavir sulfate CAPS 300 MG</i>	C	
BIKTARVY	C	QL(1 ea daily)
CABENUVA	NC	
CIMDUO	C	QL(1 ea daily)
COMBIVIR (Use lamivudine-zidovudine)	NC	
COMPLERA	C	QL(1 ea daily)
<i>darunavir TABS 800 MG</i>	C	QL(1 ea daily)
<i>darunavir TABS 600 MG</i>	C	QL(2 ea daily)
DELSTRIGO	C	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DESCOVY	C	QL(1 ea daily); PA	INTELENCE 100 MG (Use <i>etravirine</i> )	NC	QL(4 ea daily)
DOVATO	C	QL(1 ea daily)	ISENTRESS CHEW 25 MG	C	QL(12 ea daily)
EDURANT	C	QL(1 ea daily)	ISENTRESS CHEW 100 MG	C	QL(6 ea daily)
<i>efavirenz CAPS 50 MG</i>	C	QL(2 ea daily)	ISENTRESS PACK	C	QL(2 ea daily)
<i>efavirenz CAPS 200 MG</i>	C	QL(1 ea daily)	ISENTRESS TABS	C	QL(2 ea daily)
<i>efavirenz-emtricitabine-tenofovir disoproxil fumarate</i>	C	QL(1 ea daily)	JULUCA	C	QL(1 ea daily)
<i>efavirenz-lamivudine-tenofovir disoproxil fumarate</i>	C	QL(1 ea daily)	KALETRA SOLN (Use <i>lopinavir-ritonavir</i> )	NC	QL(16 ml daily)
<i>efavirenz TABS</i>	C	QL(1 ea daily)	KALETRA TABS 25 MG-100 MG (Use <i>lopinavir-ritonavir</i> )	NC	QL(4 ea daily)
<i>emtricitabine CAPS</i>	C	QL(1 ea daily)	KALETRA TABS 50 MG-200 MG (Use <i>lopinavir-ritonavir</i> )	NC	QL(6 ea daily)
<i>emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG</i>	C	QL(1 ea daily)	<i>lamivudine SOLN</i>	C	QL(30 ml daily)
<i>emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG-200 MG, 167 MG-250 MG</i>	NC		<i>lamivudine TABS 150 MG</i>	C	QL(2 ea daily)
EMTRIVA CAPS (Use <i>emtricitabine</i> )	NC	QL(1 ea daily)	<i>lamivudine TABS 300 MG</i>	C	QL(1 ea daily)
EMTRIVA SOLN	C	QL(24 ml daily)	<i>lamivudine-zidovudine</i>	NC	
EPIVIR SOLN (Use <i>lamivudine</i> )	NC	QL(30 ml daily)	LEXIVA SUSP	C	QL(56 ml daily)
EPIVIR TABS 150 MG (Use <i>lamivudine</i> )	NC	QL(2 ea daily)	LEXIVA TABS (Use <i>fosamprenavir calcium</i> )	NC	QL(4 ea daily)
EPIVIR TABS 300 MG (Use <i>lamivudine</i> )	NC	QL(1 ea daily)	<i>lopinavir-ritonavir SOLN</i>	C	QL(16 ml daily)
EPZICOM (Use <i>abacavir sulfate-lamivudine</i> )	NC	QL(1 ea daily)	<i>lopinavir-ritonavir TABS 25 MG-100 MG</i>	C	QL(4 ea daily)
<i>etravirine 100 MG</i>	C	QL(4 ea daily)	<i>lopinavir-ritonavir TABS 50 MG-200 MG</i>	C	QL(6 ea daily)
<i>etravirine 200 MG</i>	C	QL(2 ea daily)	<i>maraviroc TABS 300 MG</i>	C	QL(4 ea daily)
EVOTAZ	C	QL(1 ea daily)	<i>maraviroc TABS 150 MG</i>	C	QL(2 ea daily)
<i>fosamprenavir calcium TABS</i>	C	QL(4 ea daily)	<i>nevirapine SUSP</i>	C	QL(40 ml daily)
GENVOYA	C	QL(1 ea daily)	<i>nevirapine TABS</i>	C	QL(2 ea daily)
INTELENCE 25 MG	C	QL(4 ea daily)	<i>nevirapine TB24 400 MG</i>	C	QL(1 ea daily)
INTELENCE 200 MG (Use <i>etravirine</i> )	NC	QL(2 ea daily)	<i>nevirapine TB24 100 MG</i>	C	QL(3 ea daily)
			NORVIR PACK	NC	
			NORVIR TABS (Use <i>ritonavir</i> )	NC	QL(12 ea daily)
			ODEFSEY	C	
			PIFELTRO	C	QL(1 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PREZCOBIX	C	QL(1 ea daily)	SYMFI LO ( <i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i> )	NC	QL(1 ea daily)
PREZISTA SUSP	C	QL(12 ml daily)	SYMTUZA	NC	
PREZISTA TABS 150 MG	C	QL(3 ea daily)	<i>tenofovir disoproxil fumarate</i> TABS	C	QL(1 ea daily)
PREZISTA TABS 600 MG ( <i>Use darunavir</i> )	NC	QL(2 ea daily)	TIVICAY PD TBSO	NC	
PREZISTA TABS 800 MG ( <i>Use darunavir</i> )	NC	QL(1 ea daily)	TIVICAY TABS 10 MG, 25 MG	NC	
PREZISTA TABS 75 MG	C	QL(2 ea daily)	TIVICAY TABS 50 MG	C	
RETROVIR IV INFUSION SOLN	NC		TRIUMEQ PD TBSO	NC	
RETROVIR CAPS ( <i>Use zidovudine</i> )	NC	QL(6 ea daily)	TRIUMEQ TABS	C	QL(1 ea daily); AL(At least 18 yrs old)
RETROVIR SYRP ( <i>Use zidovudine</i> )	NC	QL(60 ml daily)	TRIZIVIR	C	QL(2 ea daily)
REYATAZ CAPS 200 MG ( <i>Use atazanavir sulfate</i> )	NC	QL(2 ea daily)	TRUVADA 200 MG-300 MG ( <i>Use emtricitabine-tenofovir disoproxil fumarate</i> )	NC	QL(1 ea daily)
REYATAZ CAPS 300 MG ( <i>Use atazanavir sulfate</i> )	NC		TYBOST	C	QL(1 ea daily); AL(At least 18 yrs old)
REYATAZ PACK	C	QL(6 ea daily)	VIRACEPT TABS 250 MG	C	QL(9 ea daily)
<i>ritonavir</i> TABS	C	QL(12 ea daily)	VIRACEPT TABS 625 MG	C	QL(4 ea daily)
RUKOBIA	C	PA	VIREAD POWD	C	QL(8 gm daily)
SELZENTRY SOLN	C	QL(35 ml daily)	VIREAD TABS 150 MG, 200 MG, 250 MG	C	QL(1 ea daily)
SELZENTRY TABS 300 MG ( <i>Use maraviroc</i> )	NC	QL(4 ea daily)	VIREAD TABS ( <i>Use tenofovir disoproxil fumarate</i> )	NC	QL(1 ea daily)
SELZENTRY TABS 150 MG ( <i>Use maraviroc</i> )	NC	QL(2 ea daily)	ZIAGEN SOLN ( <i>Use abacavir sulfate</i> )	NC	QL(30 ml daily)
SELZENTRY TABS 25 MG, 75 MG	NC		ZIAGEN TABS ( <i>Use abacavir sulfate</i> )	NC	QL(2 ea daily)
STRIBILD	C	QL(1 ea daily)	<i>zidovudine</i> CAPS	C	QL(6 ea daily)
SUSTIVA CAPS 200 MG ( <i>Use efavirenz</i> )	NC	QL(1 ea daily)	<i>zidovudine</i> SYRP	C	QL(60 ml daily)
SUSTIVA CAPS 50 MG ( <i>Use efavirenz</i> )	NC	QL(2 ea daily)	<i>zidovudine</i> TABS	C	QL(2 ea daily)
SUSTIVA TABS ( <i>Use efavirenz</i> )	NC	QL(1 ea daily)	Antiviral Combinations		
SYMFI ( <i>Use efavirenz-lamivudine-tenofovir disoproxil fumarate</i> )	NC	QL(1 ea daily)	PAXLOVID 100 MG-150 MG	C	

Drug Name	Drug Tier	Requirements/Limits
<b>CMV Agents</b>		
<i>cidofovir</i>	NC	
<i>foscarnet sodium 6000 MG/250ML</i>	NC	
<i>ganciclovir sodium SOLR</i>	NC	
GANCICLOVIR SOLN	NC	
VALCYTE TABS ( <i>Use valganciclovir hcl</i> )	NC	QL(2 ea daily)
<i>valganciclovir hcl SOLR</i>	NC	
<i>valganciclovir hcl TABS</i>	C	QL(2 ea daily)
<b>Hepatitis Agents</b>		
<i>adefovir dipivoxil</i>	NP	
BARACLUDE SOLN	P	
BARACLUDE TABS ( <i>Use entecavir</i> )	NP	
<i>entecavir TABS</i>	P	
<i>entecavir TABS</i>	NC	
EPCLUSA TABS 50 MG-200 MG	PA	SP; PA
EPIVIR HBV TABS ( <i>Use lamivudine (hbv)</i> )	NC	
HARVONI PACK	NP	SP
HARVONI TABS	NP	SP
HEPSERA ( <i>Use adefovir dipivoxil</i> )	NP	
<i>lamivudine (hbv) TABS</i>	P	
LEDIPASVIR/SOFOSBUVIR TABS	NP	
MAVYRET PACK	PA	QL(6 ea daily); SP; PA
MAVYRET TABS	PA	QL(3 ea daily); SP; PA
PEGASYS SOSY	NP	SP
<i>ribavirin (hepatitis c) CAPS</i>	NP	
SOFOBUVIR/VELPATA SVIR TABS	PA	QL(1 ea daily); SP; PA
SOVALDI PACK	NP	SP
SOVALDI TABS	NP	SP

Drug Name	Drug Tier	Requirements/Limits
VEMLIDY	NP	SP
ZEPATIER	NP	
<b>Herpes Agents</b>		
<i>acyclovir sodium SOLN</i>	NC	
<i>acyclovir CAPS</i>	NC	QL(50 ea per 31 day(s) retail)
<i>acyclovir CAPS</i>	P	QL(50 ea per 31 day(s) retail)
<i>acyclovir SUSP</i>	P	QL(400 ml per 31 day(s) retail)
<i>acyclovir TABS OR 800 MG</i>	NC	QL(50 ea per 31 day(s) retail)
<i>acyclovir TABS OR 800 MG</i>	P	QL(50 ea per 31 day(s) retail)
<i>acyclovir TABS OR 400 MG</i>	P	QL(3 ea daily)
<i>acyclovir TABS OR 400 MG</i>	NC	QL(3 ea daily)
<i>famciclovir</i>	NP	
SITAVIG TABS BU	NC	
<i>valacyclovir hcl 1 GM, 1000 MG</i>	P	QL(42 ea per 21 day(s) retail)
<i>valacyclovir hcl 500 MG</i>	NC	QL(2 ea daily)
<i>valacyclovir hcl 1 GM</i>	NC	QL(42 ea per 21 day(s) retail)
<i>valacyclovir hcl 500 MG</i>	P	QL(2 ea daily)
VALTREX 500 MG ( <i>Use valacyclovir hcl</i> )	NP	QL(2 ea daily)
VALTREX 1 GM ( <i>Use valacyclovir hcl</i> )	NP	QL(42 ea per 21 day(s) retail)
<b>Influenza Agents</b>		
<i>oseltamivir phosphate CAPS 45 MG, 75 MG</i>	C	QL(10 ea per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail
<i>oseltamivir phosphate CAPS 30 MG</i>	C	QL(20 ea per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>oseltamivir phosphate</i> SUSR	C	QL(120 ml per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail	<i>carvedilol 3.125 MG, 6.25 MG, 12.5 MG</i>	P	QL(2 ea daily)
RAPIVAB	NC		<i>carvedilol phosphate</i>	NP	QL(1 ea daily)
RELENZA DISKHALER	C	1 package(s) per 31 day(s) retail; AL(At least 5 yrs old)	<i>carvedilol phosphate</i>	NC	QL(1 ea daily)
<i>rimantadine hydrochloride</i> TABS	NC		COREG 3.125 MG, 6.25 MG, 12.5 MG (Use <i>carvedilol</i> )	NP	QL(2 ea daily)
TAMIFLU CAPS 45 MG, 75 MG (Use <i>oseltamivir phosphate</i> )	NC	QL(10 ea per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail	COREG 25 MG (Use <i>carvedilol</i> )	NC	QL(4 ea daily)
TAMIFLU CAPS 30 MG (Use <i>oseltamivir phosphate</i> )	NC	QL(20 ea per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail	COREG 25 MG (Use <i>carvedilol</i> )	NP	QL(4 ea daily)
TAMIFLU SUSR (Use <i>oseltamivir phosphate</i> )	NC	QL(120 ml per 31 day(s) retail); 1 max fill(s) per 180 day(s) retail	COREG 3.125 MG, 12.5 MG (Use <i>carvedilol</i> )	NC	QL(2 ea daily)
XOFLUZA 40 MG, 80 MG	NC		COREG CR (Use <i>carvedilol phosphate</i> )	NP	QL(1 ea daily)
Misc. Antivirals			COREG CR (Use <i>carvedilol phosphate</i> )	NC	QL(1 ea daily)
LAGEVRIO	NC		<i>labetalol hcl SOLN</i>	NC	
REMDESIVIR SOLR 100 MG	NC		<i>labetalol hcl TABS 100 MG</i>	P	QL(3 ea daily)
VEKLURY SOLR	NC		<i>labetalol hcl TABS 300 MG</i>	P	QL(8 ea daily)
Respiratory Syncytial Virus (RSV) Agents			<i>labetalol hcl TABS 200 MG</i>	P	QL(6 ea daily)
<i>ribavirin</i>	NC		LABELTALOL HYDROCHLORIDE/DEXT ROSE 5 %-200 MG/200ML	NC	
<b>BETA BLOCKERS - Drugs to Treat High Blood Pressure</b>			LABELTALOL HYDROCHLORIDE/SODIUM CHLORIDE 0.72 %-100 MG/100ML, 0.72 %-200 MG/200ML, 0.72 %-300 MG/300ML	NC	
Alpha-Beta Blockers			LABELTALOL HYDROCHLORIDE SOLN	NC	
<i>carvedilol 25 MG</i>	P	QL(4 ea daily)	LABELTALOL HYDROCHLORIDE SOSY 10 MG/2ML	NC	
<i>carvedilol 25 MG</i>	NC	QL(4 ea daily)	Beta Blockers Cardio-Selective		
<i>carvedilol 3.125 MG, 12.5 MG</i>	NC	QL(2 ea daily)	<i>acebutolol hcl CAPS</i>	NC	
			<i>acebutolol hcl CAPS</i>	P	



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ACEBUTOLOL HCL POWD	NC		<i>metoprolol tartrate SOLN IV 5 MG/5ML</i>	NC	
ATENOLOL POWD	NC		<i>metoprolol tartrate TABS 25 MG, 50 MG</i>	NC	QL(4 ea daily)
<i>atenolol TABS</i>	P	QL(2 ea daily)	<i>metoprolol tartrate TABS 25 MG, 50 MG</i>	P	QL(4 ea daily)
<i>atenolol TABS 50 MG</i>	NC	QL(2 ea daily)	<i>metoprolol tartrate TABS 37.5 MG, 75 MG</i>	P	
<i>betaxolol hcl</i>	NP		<i>metoprolol tartrate TABS 100 MG</i>	NC	QL(4.5 ea daily)
<i>bisoprolol fumarate</i>	P	QL(1 ea daily)	<i>metoprolol tartrate TABS 100 MG</i>	P	QL(4.5 ea daily)
<i>bisoprolol fumarate</i>	NC	QL(1 ea daily)	<i>nebivolol hcl</i>	NC	
BYSTOLIC (Use <i>nebivolol hcl</i> )	NP		<i>nebivolol hcl</i>	NP	
BYSTOLIC 2.5 MG, 5 MG (Use <i>nebivolol hcl</i> )	NC		TENORMIN TABS (Use <i>atenolol</i> )	NP	QL(2 ea daily)
<i>esmolol hcl-sodium chloride</i>	NC		TOPROL XL TB24 25 MG, 50 MG, 100 MG (Use <i>metoprolol succinate</i> )	NP	QL(4 ea daily)
<i>esmolol hcl SOLN 100 MG/10ML</i>	NC		TOPROL XL TB24 200 MG (Use <i>metoprolol succinate</i> )	NP	QL(2 ea daily)
ESMOLOL HYDROCHLORIDE INWATER DOUBLE STRENGTH SOLN	NC		<b>Beta Blockers Non-Selective</b>		
ESMOLOL HYDROCHLORIDE INWATER SOLN	NC		BETAPACE AF (Use <i>sotalol hcl (afib/afll)</i> )	NP	QL(2 ea daily)
KAPSPARGO SPRINKLE CS24	NP		BETAPACE TABS 80 MG, 120 MG, 160 MG (Use <i>sotalol hcl</i> )	NP	
LOPRESSOR TABS 50 MG (Use <i>metoprolol tartrate</i> )	NP	QL(4 ea daily)	CORGARD TABS 80 MG (Use <i>nadolol</i> )	NC	QL(2 ea daily)
LOPRESSOR TABS 100 MG (Use <i>metoprolol tartrate</i> )	NP	QL(4.5 ea daily)	CORGARD TABS 20 MG, 40 MG (Use <i>nadolol</i> )	NP	QL(2 ea daily)
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	P	QL(4 ea daily)	HEMANGEOL SOLN OR	NP	SP
<i>metoprolol succinate TB24 25 MG, 50 MG, 100 MG</i>	NC	QL(4 ea daily)	INDERAL LA CP24 (Use <i>propranolol hcl</i> )	NP	QL(2 ea daily)
<i>metoprolol succinate TB24 200 MG</i>	NC	QL(2 ea daily)	INDERAL XL	NP	
<i>metoprolol succinate TB24 200 MG</i>	P	QL(2 ea daily)	INNOPRAN XL	NP	
METOPROLOL TARTRATE POWD	NC		INNOPRAN XL 80 MG	NC	
			NADOLOL POWD	NC	
			<i>nadolol TABS 20 MG, 40 MG, 80 MG</i>	P	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>nadolol TABS 20 MG, 40 MG, 80 MG</i>	NC	QL(2 ea daily)	CARDIZEM CD CP24 120 MG, 180 MG, 300 MG (Use <i>diltiazem hcl coated beads</i> )	NP	QL(1 ea daily)
<i>pindolol TABS</i>	NP		CARDIZEM LA TB24 (Use <i>diltiazem hcl</i> )	NP	
<i>pindolol TABS</i>	NC		CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use <i>diltiazem hcl</i> )	NP	QL(3 ea daily)
<i>propranolol hcl CP24</i>	P	QL(2 ea daily)	CLEVIPREX 25 MG/50ML, 50 MG/100ML	NC	
PROPRANOLOL HCL POWD	NC		CONJUPRI (Use <i>levamlodipine maleate</i> )	NC	
<i>propranolol hcl SOLN IV 1 MG/ML</i>	NC		<i>diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG</i>	P	QL(1 ea daily)
<i>propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML</i>	P		<i>diltiazem hcl coated beads CP24 360 MG</i>	P	
<i>propranolol hcl TABS</i>	P		<i>diltiazem hcl coated beads CP24 240 MG</i>	NC	QL(2 ea daily)
<i>sotalol hcl (afib/af)</i>	P	QL(2 ea daily)	<i>diltiazem hcl coated beads CP24 240 MG</i>	P	QL(2 ea daily)
<i>sotalol hcl (afib/af)</i>	NC	QL(2 ea daily)	<i>diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG</i>	NC	QL(1 ea daily)
<i>sotalol hcl TABS</i>	P		<i>diltiazem hcl extended release beads 240 MG</i>	P	QL(2 ea daily)
<i>sotalol hcl TABS 80 MG, 120 MG, 160 MG</i>	NC		<i>diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG</i>	P	QL(1 ea daily)
SOTYLIZE SOLN OR	NP		<i>diltiazem hcl extended release beads 240 MG</i>	NC	QL(2 ea daily)
TIMOLOL MALEATE POWD	NC		<i>diltiazem hcl CP12</i>	P	QL(2 ea daily)
<i>timolol maleate TABS</i>	NC		<i>diltiazem hcl CP24 120 MG, 180 MG</i>	P	QL(1 ea daily)
<i>timolol maleate TABS</i>	NP		<i>diltiazem hcl CP24 240 MG</i>	P	QL(2 ea daily)
<b>CALCIUM CHANNEL BLOCKERS - Drugs to Treat High Blood Pressure</b>			<i>diltiazem hcl SOLN</i>	NC	
Calcium Channel Blockers					
<i>amlodipine besylate TABS</i>	NC	QL(1 ea daily)			
<i>amlodipine besylate TABS</i>	P	QL(1 ea daily)			
<i>amlodipine besylate TABS 2.5 MG</i>	NC				
CALAN SR TBCR (Use <i>verapamil hcl</i> )	NC	QL(2 ea daily)			
CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML	NC				
CARDIZEM CD CP24 240 MG (Use <i>diltiazem hcl coated beads</i> )	NP	QL(2 ea daily)			
CARDIZEM CD CP24 360 MG (Use <i>diltiazem hcl coated beads</i> )	NP				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DILTIAZEM HCL SOLR	NC		SULAR 8.5 MG, 17 MG, 34 MG (Use nisoldipine)	NP	
<i>diltiazem hcl TABS</i>	P	QL(3 ea daily)	TIAZAC 120 MG, 180 MG, 300 MG, 360 MG, 420 MG (Use diltiazem hcl extended release beads)	NP	QL(1 ea daily)
<i>diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG</i>	NP		TIAZAC 240 MG (Use diltiazem hcl extended release beads)	NP	QL(2 ea daily)
<i>diltiazem hcl TB24</i>	P		<i>verapamil hcl CP24 120 MG, 180 MG, 240 MG, 360 MG</i>	P	QL(1 ea daily)
<i>felodipine</i>	NC	QL(1 ea daily)	<i>verapamil hcl CP24 100 MG, 200 MG, 300 MG</i>	NP	
<i>felodipine</i>	P	QL(1 ea daily)	VERAPAMIL HCL POWD	NC	
<i>isradipine CAPS</i>	P		<i>verapamil hcl SOLN 2.5 MG/ML</i>	NC	
KATERZIA	NP		<i>verapamil hcl TABS</i>	P	QL(3 ea daily)
<i>levamlodipine maleate</i>	NP		<i>verapamil hcl TBCR</i>	P	QL(2 ea daily)
<i>nicardipine hcl CAPS</i>	P		VERAPAMIL HYDROCHLORIDE ER CP24 (Use verapamil hcl)	NP	
<i>nicardipine hcl SOLN</i>	NC		VERELAN PM CP24 (Use verapamil hcl)	NP	
NICARDIPINE HYDROCHLORIDE/SODIUM CHLORIDE SOLN 0.9%-40 MG/200ML	NC		VERELAN CP24 (Use verapamil hcl)	NC	QL(1 ea daily)
NICARDIPINE HYDROCHLORIDE SOLN	NC		<b>CARDIOTONICS - Drugs to Treat Heart Failure and Abnormal Heart Rhythm</b>		
<i>nifedipine CAPS</i>	NP	QL(4 ea daily)	<b>Cardiac Glycosides</b>		
<i>nifedipine TB24 30 MG, 90 MG</i>	P	QL(1 ea daily)	<i>digoxin SOLN IJ 0.25 MG/ML</i>	NC	
<i>nifedipine TB24 30 MG, 90 MG</i>	NC	QL(1 ea daily)	<i>digoxin SOLN OR 0.05 MG/ML</i>	C	
<i>nifedipine TB24 60 MG</i>	NC	QL(2 ea daily)	<i>digoxin TABS 0.0625 MG, 62.5 MCG</i>	NC	
<i>nifedipine TB24 60 MG</i>	P	QL(2 ea daily)	<i>digoxin TABS 0.125 MG, 0.25 MG, 125 MCG, 250 MCG</i>	C	
<i>nimodipine CAPS</i>	NP		LANOXIN PEDIATRIC SOLN IJ	NC	
<i>nisoldipine</i>	NP				
NORLIQVA SOLN	NP				
NORVASC TABS 10 MG (Use amlodipine besylate)	NC	QL(1 ea daily)			
NORVASC TABS (Use amlodipine besylate)	NP	QL(1 ea daily)			
NYMALIZE SOLN 6 MG/ML	NP				
PROCARDIA XL TB24 30 MG, 90 MG (Use nifedipine)	NP	QL(1 ea daily)			
PROCARDIA XL TB24 60 MG (Use nifedipine)	NP	QL(2 ea daily)			

Drug Name	Drug Tier	Requirements/Limits
LANOXIN TABS 62.5 MCG, 125 MCG, 250 MCG ( <i>Use digoxin</i> )	NC	
<b>Inotropes</b>		
<i>dobutamine hcl 12.5 MG/ML, 250 MG/20ML</i>	NC	
DOBUTAMINE HCL/D5W	NC	
DOBUTAMINE HYDROCHLORIDE/DEXTROSE 5%	NC	
<i>dopamine hcl 40 MG/ML</i>	NC	
DOPAMINE HYDROCHLORIDE/DEXTROSE	NC	
DOPAMINE/D5W	NC	
<i>milrinone lactate</i>	NC	
<i>milrinone lactate in dextrose</i>	NC	
<b>CARDIOVASCULAR AGENTS - MISC. - Drugs to Treat Heart and Circulation Conditions</b>		
<b>Cardioplegic Solutions</b>		
CARDIOPLEGIA INDUCTION HIGH POTASSIUM	NC	
CARDIOPLEGIA INDUCTION HIGH POTASSIUM/LOW DEXTROSE	NC	
CARDIOPLEGIA INDUCTION HIGH POTASSIUM/NON-ENRICHED	NC	
CARDIOPLEGIA INDUCTION PLASMALYTE/TROMETHAMINE HIGH POTASSIUM	NC	
CARDIOPLEGIA MAINTENANCE LOW DEXTROSE/LOW POTASSIUM	NC	

Drug Name	Drug Tier	Requirements/Limits
CARDIOPLEGIA MAINTENANCE LOW POTASSIUM	NC	
CARDIOPLEGIA MAINTENANCE LOW TROMETHAMINE/LOW POTASSIUM	NC	
CARDIOPLEGIA MAINTENANCE PLASMALYTE/TROMETHAMINE LOW POTASSIUM	NC	
CARDIOPLEGIA REPERFUSATE/LOW POTASSIUM	NC	
<i>cardioplegic soln</i>	NC	
MICROPLEGIA MSA/MSG	NC	
<b>Cardiovascular Agents Misc. - Combinations</b>		
<i>amlodipine besylate-atorvastatin calcium</i>	NP	
<i>amlodipine besylate-atorvastatin calcium 2.5 MG-20 MG, 2.5 MG-40 MG, 5 MG-40 MG</i>	NC	
CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG ( <i>Use amlodipine besylate-atorvastatin calcium</i> )	NP	
ENTRESTO CPSP	P	
ENTRESTO TABS	P	
<i>isosorbide dinitrate-hydralazine hcl</i>	NC	
OPSYNVI	NP	
<b>Cardiovascular Sodium-Glucose Co-Transporter 2 Inhibitors</b>		
INPEFA	NP	
<b>Impotence Agents</b>		
CAVERJECT IMPULSE KIT	NC	

Drug Name	Drug Tier	Requirements/Limits
CAVERJECT SOLR	NC	
CIALIS ( <i>Use tadalafil</i> )	NC	
EDEX KIT	NC	
MUSE PLLT 250 MCG, 500 MCG, 1000 MCG	NC	
<i>tadalafil</i>	NC	
<i>vardenafil hcl TABS</i>	NC	
<i>vardenafil hcl TBDP</i>	NC	
Peripheral Vasodilators		
NYLIDRIN HYDROCHLORIDE	NC	
PAPAVERINE HCL POWD	NC	
<i>papaverine hcl SOLN</i>	NC	
PAPAVERINE HYDROCHLORIDE POWD	NC	
Prostaglandin Vasodilators		
ORENITRAM TBCR	NP	
Pulmonary Hypertension - Activin Signaling Inhibitor		
WINREVAIR	NC	
Pulmonary Hypertension - Endothelin Receptor Antagonists		
<i>ambrisentan</i>	P	
OPSUMIT	NP	
TRACLEER TBSO	NP	
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	NC	
<i>sildenafil citrate (pulmonary hypertension) SUSR</i>	NP	
Pulmonary Hypertension - Prostacyclin Receptor Agonist		

Drug Name	Drug Tier	Requirements/Limits
UPTRAVI TITRATION PACK TBPK	NP	SP
UPTRAVI SOLR	C	SP; PA
UPTRAVI TABS	NP	SP
UPTRAVI TABS 200 MCG	NP	
Pulmonary Hypertension - Sol Guanylate Cyclase Stimulator		
ADEMPAS	NP	
Sinus Node Inhibitors		
CORLANOR SOLN	NC	
<i>ivabradine hcl TABS</i>	NC	
Transthyretin Stabilizers		
VYNDAMAX	C	SP; PA
Vasoactive Soluble Guanylate Cyclase Stimulator (sGC)		
VERQUVO	NC	
CEPHALOSPORINS - Drugs to Treat Bacterial Infections		
Cephalosporin Combinations		
AVYCAZ	NC	
ZERBAXA	NC	
Cephalosporins - 1st Generation		
<i>cefadroxil CAPS</i>	NP	
<i>cefadroxil SUSR</i>	NP	
<i>cefadroxil TABS</i>	NP	
CEFAZOLIN SODIUM/DEXTROSE SOLR	NC	
CEFAZOLIN SODIUM SOLN 4 %-1 GM/50ML	NC	
<i>cefazolin sodium SOLR IJ 1 GM, 2 GM, 3 GM, 10 GM, 500 MG</i>	NC	
CEFAZOLIN SODIUM SOLR IV 2 GM, 3 GM	NC	
CEFAZOLIN SOLN	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CEFAZOLIN SOLR IV	NC		<i>cefdinir CAPS</i>	NC	QL(20 ea per fill retail)
<i>cephalexin CAPS 750 MG</i>	NC		<i>cefdinir SUSR</i>	P	1 package(s) per fill retail
<i>cephalexin CAPS 250 MG, 500 MG</i>	C		<i>cefdinir SUSR</i>	NC	1 package(s) per fill retail
<i>cephalexin SUSR</i>	C		<i>cefixime CAPS</i>	NP	
<i>cephalexin TABS</i>	NC		<i>cefixime SUSR</i>	NP	
Cephalosporins - 2nd Generation			<i>cefpodoxime proxetil SUSR</i>	NC	
CEFACTOR ER TB12	NP		<i>cefpodoxime proxetil SUSR</i>	NP	
<i>cefaclor CAPS</i>	NP		<i>cefpodoxime proxetil TABS</i>	NC	
<i>cefaclor SUSR 125 MG/5ML, 375 MG/5ML</i>	NP		<i>cefpodoxime proxetil TABS</i>	NP	
<i>cefotetan disodium IJ 1 GM, 2 GM</i>	NC		<i>ceftazidime IV 1 GM, 2 GM, 6 GM</i>	NC	
<i>cefoxitin sodium IV</i>	NC		CEFTAZIDIME/DEXTROS E	NC	
CEFOXITIN SODIUM	NC		<i>ceftriaxone sodium IJ 2 GM</i>	NC	
<i>cefprozil SUSR 250 MG/5ML</i>	NC	1 package(s) per fill retail; AL(Up to 12 yrs old)	<i>ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG</i>	C	QL(3 ea per fill retail); 1 max fill(s) per 31 day(s) retail
<i>cefprozil SUSR 125 MG/5ML</i>	P	2 package(s) per fill retail; AL(Up to 12 yrs old)	<i>ceftriaxone sodium in dextrose</i>	NC	
<i>cefprozil SUSR 125 MG/5ML</i>	NC	2 package(s) per fill retail; AL(Up to 12 yrs old)	CEFTRIAZONE/DEXTRO SE	NC	
<i>cefprozil SUSR 250 MG/5ML</i>	P	1 package(s) per fill retail; AL(Up to 12 yrs old)	Cephalosporins - 4th Generation		
<i>cefprozil TABS</i>	P	QL(20 ea per fill retail)	<i>cefepime hcl SOLR IJ 1 GM</i>	NC	
<i>cefprozil TABS</i>	NC	QL(20 ea per fill retail)	CEFEPIME/DEXTROSE	NC	
<i>cefuroxime axetil TABS</i>	NC	QL(20 ea per fill retail)	CEFEPIME SOLN	NC	
<i>cefuroxime axetil TABS</i>	P	QL(20 ea per fill retail)	Cephalosporins - 5th Generation		
<i>cefuroxime sodium IJ 750 MG</i>	NC		TEFLARO	NC	
Cephalosporins - 3rd Generation			Cephalosporins - Siderophores		
<i>cefdinir CAPS</i>	P	QL(20 ea per fill retail)	FETROJA	NC	
<b>CHEMICALS</b>					
Acids, Bases, & Buffers					

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ACETIC ACID 3 %, 5 %	NC		VICTORIAS SECRET VANILLALACE	NC	
ACETIC ACID GLACIAL	NC	RX/OTC	Bulk Chemicals - A's		
AMMONIUM HYDROXIDE	NC	RX/OTC	6-AMINOCAPROIC ACID	NC	
FUMARIC ACID	NC		9-AMINOACRIDINE HCL	NC	
GLYCOLIC ACID CRYSTALS	NC	RX/OTC	ACARBOSE	NC	
GLYCOLIC ACID GRAN	NC		ACEPROMAZINE MALEATE	NC	
HYDROCHLORIC ACID	NC		ACESULFAME POTASSIUM	NC	RX/OTC
LACTIC ACID 85 %, 88 %	NC	RX/OTC	ACETAMINOPHEN CRYSTAL 60MESH CRYSTALS	NC	
LACTIC ACID RACEMIC	NC	RX/OTC	ACETAMINOPHEN GRAN	NC	
NITRIC ACID	NC		ACETAMINOPHEN POWD	NC	RX/OTC
OXALIC ACID	NC		ACETARSONE	NC	
OXALIC ACID DIHYDRATE	NC		ACETAZOLAMIDE CRYSTALS	NC	
PHOSPHORIC ACID	NC		ACETAZOLAMIDE POWD	NC	
POTASSIUM HYDROXIDE PLLT	NC	RX/OTC	ACETYL DIPEPTIDE-1 CETYLESTER	NC	
POTASSIUM HYDROXIDE SOLN XX 10 %, 20 %, 45 %	NC		ACETYL HEXAPEPTIDE-8 POWD	NC	
SODIUM BORATE DECAHYDRATE POWD	NC	RX/OTC	ACETYL HEXAPEPTIDE-8 SOLN	NC	
SODIUM BORATE POWD	NC	RX/OTC	ACETYLCHOLINE CHLORIDE	NC	
SODIUM CARBONATE ANHYDROUS	NC		ACETYL-D-GLUCOSAMINE	NC	
SODIUM CARBONATE MONOHYDRATE	NC		ACETYL-L-CARNITINE HYDROCHLORIDE	NC	RX/OTC
SODIUM HYDROXIDE PLLT	NC	RX/OTC	ACTIPHYTE OF ALGAE GL	NC	
SULFURIC ACID	NC		ACYCLOVIR	NC	
TARTARIC ACID GRAN	NC	RX/OTC	ADEMETHIONINE DISULFATE TOSYLATE	NC	
TARTARIC ACID POWD	NC		ADENOSINE	NC	
Bulk Chemicals			AGAR POWD	NC	
BIORE HYDRATING MOISTURIZER	NC		ALASKAN RED ALGAE	NC	
CUCUMBER MELON	NC		ALBENDAZOLE	NC	
DRAKKAR NOIR	NC		ALDOSTERONE	NC	
FRESH LINEN FRAGRANCE	NC				
NATAPRES LIQD	NC				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ALGINIC ACID	NC		AMMONIUM MOLYBDATE TETRAHYDRATE	NC	
A-LIPOIC ACID (DL-THIOCTIC ACID)	NC	RX/OTC	AMMONIUM TETRATHIOMOLYBDATE	NC	
ALKYL BENZOATE C12-15	NC		ANASTROZOLE	NC	
ALLOPURINOL	NC		ANDROSTENEDIONE	NC	
ALOE VERA FREEZE DRIED POWD	NC	RX/OTC	ANISINDIONE	NC	
ALOE VERA LEAF POWD	NC	RX/OTC	ANTIMONY POTASSIUM TARTRATE	NC	
ALOE VERA OIL	NC		ANTIMONY TRICHLORIDE CRYSTALS	NC	
ALOE VERA POWD	NC	RX/OTC	ANTIMONY TRISULFIDE	NC	
ALPHA LIPOIC ACID	NC	RX/OTC	ANTIPYRINE CRYSTALS	NC	
ALPHA-KETOGLUTARIC ACID CRYSTALS	NC		ANTIPYRINE POWD	NC	
ALPHA-KETOGLUTARIC ACID POWD	NC		APOMORPHINE HCL	NC	
ALPRAZOLAM	NC		APOMORPHINE HCL HEMIHYDRATE	NC	
ALTRENOGEST	NC		ARBUTIN ALPHA	NC	
ALUMINUM ACETATE BASIC	NC		ARGININE HCL	NC	RX/OTC
ALUMINUM CHLOROHYDRATE	NC	RX/OTC	ARNICA LG	NC	
AMANTADINE HCL	NC		ARSENIC TRIOXIDE	NC	
AMINOCAPROIC ACID	NC		ASCORBIC ACID CASSAVA POWD	NC	RX/OTC
AMINOLEVULINIC ACID HYDROCHLORIDE POWD	NC		ASCORBIC ACID GRAN	NC	RX/OTC
AMINOLEVULINIC ACID HYDROCHLORIDE POWD	NC		ASCORBIC ACID POWD	NC	RX/OTC
AMINOPROPYL MENTHYL PHOSPHATE	NC		ASCORBYL PALMITATE	NC	RX/OTC
AMITRIPTYLINE HCL POWD	NC		ASPARAGINE MONOHYDRATE	NC	
AMITRIPTYLINE HYDROCHLORIDE POWD	NC		ATORVASTATIN CALCIUM	NC	
AMLEXANOX	NC		ATTAPULGITE ACTIVATED COLLOIDAL	NC	
AMLODIPINE BESYLATE	NC		AVIPTADIL ACETATE	NC	
AMMONIUM LAURYL SULFATE	NC		AVOCADO OIL	NC	
			AZELAIC ACID FLAKE	NC	RX/OTC
			AZELAIC ACID POWD	NC	RX/OTC
			AZELASTINE HCL	NC	
			AZELASTINE HYDROCHLORIDE	NC	



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AZITHROMYCIN	NC		BENZOCAINE	NC	RX/OTC
AZITHROMYCIN DIHYDRATE	NC		BENZOIN GUM	NC	
BLUE AGAVE ORGANIC	NC		BENZOQUINONE (PARA)	NC	
DL-ALPHA LIPOIC ACID	NC	RX/OTC	BETA CAROTENE BEAD	NC	
GINSENG (AMERICAN)	NC		BETA CYCLODEXTRIN	NC	
L-ARGININE HCL	NC	RX/OTC	BETA GLUCAN	NC	
LIPOIC ACID	NC	RX/OTC	BETAHISTINE DIHYDROCHLORIDE	NC	
LIPOIC ACID/DL-ALPHA (DL-THIOCTIC ACID)	NC	RX/OTC	BETAHISTINE HCL	NC	
MAGNASWEET 110 LIQD	NC		BETAINE ANHYDROUS	NC	RX/OTC
MAGNASWEET 135 POWD	NC		BETAINE HCL	NC	
S-ADENOSYL-L-METHIONINE DISULFATE TOSYLATE	NC		BETAMETHASONE ACETATE	NC	
SODIUM 4-AMINOSALICYLATEDIHYDRATE	NC		BETAMETHASONE ACETATE MICRONIZED	NC	
Bulk Chemicals - B's			BETANAPHTHOL	NC	
BACITRACIN MICRONIZED	NC		BETHANECHOL CHLORIDE	NC	
BASIC FUCHSIN HCL	NC	RX/OTC	BIMATOPROST	NC	
BECLOMETHASONE DIPROPIONATE	NC		BIOTIN	NC	RX/OTC
BECLOMETHASONE DIPROPIONATE ANYDROUS	NC		BIOTIN-D	NC	RX/OTC
<i>belladonna (bulk) TINC</i>	NC		BISABOLOL ALPHA-L	NC	
BELLADONNA EXTRACT POWD	NC		BISMUTH CITRATE	NC	RX/OTC
BELLADONNA TINC	NC		BISOPROLOL FUMARATE	NC	
BENACTYZINE HYDROCHLORIDE	NC		BITTER ORANGE	NC	
BENZAEPRIIL HCL	NC		BORON AMORPHOUS FINE	NC	
BENZAEPRIIL HYDROCHLORIDE	NC		BORON CITRATE	NC	
BENFOTIAMINE	NC		BOSWELLIA SERRATA EXTRACT	NC	
BENZETHONIUM CHLORIDE	NC		BOSWELLIA SERRATA EXTRACT65%	NC	
			BOSWELLIA SERRATA EXTRACT70%	NC	
			BRILLIANT GREEN POWD	NC	RX/OTC
			BRIMONIDINE TARTRATE	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BROMFENAC SODIUM SESQUIHYDRATE POWD	NC		CALCIPOTRIENE MONOHYDRATE	NC	
BROMFENAC SODIUM MISC	NC		CALCIPOTRIOL	NC	
BROMFENAC SODIUM POWD	NC		CALCITRIOL	NC	
BUDESONIDE	NC		CALCITRIOL IN ALMOND OIL	NC	
BUDESONIDE MICRONIZED	NC		CALCIUM ACETATE CRYSTALS	NC	
BUFLUMEDIL HCL	NC		CALCIUM ACETATE POWD	NC	
BUPRENORPHINE HCL	NC		CALCIUM ALGINATE	NC	
BUPROPION HCL	NC		CALCIUM AMINO ACID CHELATE 30% GRAN	NC	
BUPROPION HYDROCHLORIDE	NC		CALCIUM CHLORIDE ANHYDROUS POWD	NC	
BUSPIRONE HCL	NC		CALCIUM CITRATE TETRAHYDRATE POWD	NC	RX/OTC
BUSPIRONE HYDROCHLORIDE	NC		CALCIUM CITRATE POWD	NC	RX/OTC
BUTALBITAL	NC		CALCIUM FRUCTOBORATE	NC	
BUTORPHANOL TARTRATE	NC		CALCIUM GLUBIONATE	NC	
BUTYL ALCOHOL	NC		CALCIUM GLUBIONATE MONOHYDRATE	NC	
BUTYLATED HYDROXYANISOLE POWD	NC		CALCIUM GLYCEROPHOSPHATE	NC	
BUTYLENE GLYCOL	NC		CALCIUM LEVULINATE DIHYDRATE	NC	
TINOGARD TL	NC		CALCIUM OXIDE	NC	
Bulk Chemicals - C's			CALCIUM PROPIONATE	NC	
ACTIPHYTE OF CUCUMBER	NC		CALCIUM PYRUVATE	NC	
ADRENOCHROME SEMICARBAZONE	NC		CALCIUM SACCHARATE	NC	
ADRENOCORTICOTROPIC HORMONE	NC		CALCIUM SILICATE	NC	
AVICEL PH 101 MICROCRYSTALLINE CELLULOSE POWD	NC	RX/OTC	CALCIUM STEARATE	NC	
AVICEL PH 105 MICROCRYSTALLINE CELLULOSE POWD	NC	RX/OTC	CALCIUM THIOGLYCOLATE TRIHYDRATE	NC	
BIOFLAVONOID CITRUS	NC		CANADIAN BALSAM	NC	RX/OTC
CALCIPOTRIENE	NC		CANNABIDIOL	NC	
			CAPRYLIC ACID	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CAPRYLIC/CAPRIC TRIGLYCERIDE	NC		CELLULOSE/CMC NA MICROCRYSTALLINE	NC	
CAPRYLIC/CAPRIC TRIGLYCERIDES	NC		CERESIN WAX	NC	
CAPSAICIN PALMITATE	NC		CESIUM CHLORIDE	NC	
CAPTOPRIL	NC		CETEARYL ALCOHOL/CETEARETH-20	NC	
CARBACHOL	NC		CETOSTEARYL ALCOHOL	NC	
CARBAMIDE PEROXIDE	NC	RX/OTC	CETYL MYRISTOLEATE OIL	NC	
CARBAZOCHROME	NC		CETYL MYRISTOLEATE POWD	NC	
CARBIMAZOLE	NC		CETYL MYRISTOLEATE WAX	NC	
CARBOMER 934P	NC	RX/OTC	CETYLPYRIDINIUM CHLORIDE	NC	
CARBOMER 934P RESIN	NC	RX/OTC	CETYLPYRIDINIUM CHLORIDEMONOHYDRATE	NC	
CARBOMER 940	NC	RX/OTC	CHICKEN PROTEIN	NC	
CARBOMER 940 NF	NC	RX/OTC	CHLORAMBUCIL	NC	
CARBOMER 941	NC	RX/OTC	CHLORAMPHENICOL PALMITATE	NC	
CARBOMER 980	NC	RX/OTC	CHLORAMPHENICOL POWD	NC	
CARBOMER HOMOPOLYMER TYPE C	NC	RX/OTC	CHLORHEXIDINE DIACETATE HYDRATE	NC	
CARBOPOL 940	NC	RX/OTC	CHLOROPHYLLIN SODIUM COPPER	NC	
CARBOPOL 940 NF	NC	RX/OTC	CHLOROTHIAZIDE	NC	
CARDAMOM OIL	NC		CHLOROXINE	NC	
CARMINE	NC		CHLOROXYLENOL	NC	
CARNAUBA WAX	NC		CHLORPROMAZINE HCL	NC	
CARNOSINE L	NC		CHOLECALCIFEROL CRYSTALS	NC	
CASTOR OIL SULFATED	NC		CHOLECALCIFEROL POWD	NC	RX/OTC
CEFTAZIDIME	NC		CHOLESTEROL ACETATE POWD	NC	RX/OTC
CEFTAZIDIME/SODIUM CARBONATE	NC		CHOLESTEROL FLAK	NC	
CEFTRIAXONE SODIUM	NC				
CELECOXIB	NC				
CELLULASE	NC	RX/OTC			
CELLULOSE MICROCRYSTALLINE CRYSTALS	NC	RX/OTC			
CELLULOSE MICROCRYSTALLINE POWD	NC	RX/OTC			
CELLULOSE PARTIALLY DEPOLYMERIZED POWD	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CHOLESTEROL POWD	NC	RX/OTC	CITICOLINE	NC	
CHOLESTYRAMINE	NC		CITRULLINE(L)	NC	RX/OTC
CHOLESTYRAMINE RESIN	NC		CITRUS BIOFLAVONOIDS 13 %	NC	
CHOLINE CHLORIDE	NC		CLARITHROMYCIN	NC	
CHOLINE MAGNESIUM TRISALICYLATE	NC		CLEMIZOLE HCL	NC	
CHONDROITIN SULFATE SODIUM	NC	RX/OTC	CLIDINIUM BROMIDE	NC	
CHORIONIC GONADOTROPIN	NC		CLINDAMYCIN HCL	NC	
CHORIONIC GONADOTROPIN(HUMAN)	NC		CLINDAMYCIN HCL MONOHYDRATE	NC	
CHROMIC CHLORIDE CRYSTALS	NC	RX/OTC	CLINDAMYCIN HYDROCHLORIDE	NC	
CHROMIUM CHLORIDE HEXAHYDRATE REAGENT CRYSTALS	NC	RX/OTC	CLINDAMYCIN PHOSPHATE POWD	NC	
CHROMIUM CHLORIDE POWD	NC		CLOFAZIMINE	NC	
CHROMIUM PICOLINATE	NC	RX/OTC	CLOMIPRAMINE HCL	NC	
CHROMIUM POLYNICOTINATE	NC		CLONAZEPAM	NC	
CHROMIUM POTASSIUM SULFATE DODECAHYDRATE	NC		CLOPIDOGREL BISULFATE	NC	
CHRYSIN	NC	RX/OTC	CLORSULON	NC	
CICLOPIROX	NC		COBALT GLUCONATE	NC	
CIDOFOVIR ANHYDROUS	NC		COBAMAMIDE	NC	RX/OTC
CIDOFOVIR DIHYDRATE	NC		COCAMIDE DEA	NC	
CINNAMON BARK CASSIA	NC		COLHIBIN	NC	
CIPROFLOXACIN	NC		COLISTIMETHATE SODIUM	NC	
CIPROFLOXACIN HCL	NC		COLLAGEN HYDROLYSATE	NC	
CIPROFLOXACIN HYDROCHLORIDE	NC		COPPER GLUCONATE	NC	
CISAPRIDE MONOHYDRATE	NC		COPPER GLYCINATE	NC	
CISPLATIN	NC		CORAL CALCIUM	NC	
			CORN OIL	NC	RX/OTC
			COUMARIN	NC	
			CRANBERRY	NC	
			CREATINE	NC	
			CREATINE ANHYDROUS	NC	
			CREATINE MONOHYDRATE	NC	RX/OTC
			CREATININE	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
CRESOL	NC	
CROTAMITON	NC	
CROTON OIL	NC	RX/OTC
CUPUACU BUTTER	NC	
CYANOCOBALAMIN CRYSTALS	NC	RX/OTC
CYANOCOBALAMIN POWDER	NC	
CYCLANDELATE	NC	
CYCLOBENZAPRINE HCL	NC	
CYCLOBENZAPRINE HYDROCHLORIDE	NC	
CYCLOMETHICONE	NC	
CYCLOPENTASILOXANE /PEG/PPG-18/18 DIMETHICONE	NC	
CYCLOPENTOLATE HCL	NC	
CYCLOPENTOLATE HYDROCHLORIDE	NC	
CYCLOPHOSPHAMIDE	NC	
CYCLOPHOSPHAMIDE MONOHYDRATE	NC	
CYCLOSERINE	NC	
CYCLOSPORINE	NC	
CYCLOSPORINE A	NC	
CYPROHEPTADINE HCL	NC	
CYSTEAMINE HCL	NC	
CYSTEAMINE HYDROCHLORIDE	NC	
DERMACINRX ETHOXY DIGLYCOL	NC	RX/OTC
DIETHYLENE GLYCOL MONOETHYL ETHER	NC	RX/OTC
DIETHYLENE GLYCOL MONOETHYL ETHER NF	NC	RX/OTC
ETHOXY DIGLYCOL	NC	RX/OTC
ETHOXY DIGLYCOL NF/EP HIGH PURITY	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
ETHOXY ETHOXY ETHANOL REAGENT	NC	RX/OTC
FREEDOM ESTERDERM	NC	
HUMAN CHORIONIC GONADOTROPIN	NC	
L-CARNOSINE	NC	
L-CITRULLINE	NC	RX/OTC
L-CYSTEINE HCL MONOHYDRATE	NC	RX/OTC
L-CYSTEINE HYDROCHLORIDEMONO HYDRATE	NC	RX/OTC
L-CYSTEINE CRYSTALS	NC	
L-CYSTEINE POWDER	NC	
LOCUST BEAN GUM	NC	
MICROCRYSTALLINE CELLULOSE NF 101 POWDER	NC	RX/OTC
MICROCRYSTALLINE CELLULOSE NF 102 POWDER	NC	RX/OTC
MICROCRYSTALLINE CELLULOSE NF 105 POWDER	NC	RX/OTC
SPECPED SOLN	NC	
UREA PEROXIDE	NC	RX/OTC
VITAMIN D3 LIQD 2400 UNIT/ML, 1000000 UNIT/GM	NC	
VITAMIN D3 POWDER	NC	RX/OTC
YLANG-YLANG OIL FRAGRANCE	NC	
Bulk Chemicals - D's		
2-DEOXY-D-GLUCOSE	NC	RX/OTC
2-DEOXY-D-GLUCOSE REAGENTGRADE	NC	RX/OTC
CALCIUM HYDROXYAPATITE	NC	
DANTROLENE SODIUM	NC	
DAPIPRAZOLE HCL	NC	
DAPSONE	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DEHYDROCHOLIC ACID	NC		DICLOFENAC SODIUM MICRONIZED POWD	NC	
DEMECARIUM BROMIDE	NC		DICLOFENAC SODIUM POWD	NC	
DENATONIUM BENZOATE	NC		DICYCLOMINE HYDROCHLORIDE	NC	
DEOXYCHOLIC ACID	NC		DIETHANOLAMINE	NC	
DESICCATED BEEF LIVER	NC		DIETHYL PHTHALATE	NC	
DESMOPRESSIN ACETATE	NC		DIETHYLCARBAMAZINE CITRATE	NC	
DESOXIMETASONE	NC		DIETHYL-M-TOLUAMIDE	NC	
DESOXYCORTICOSTERONE ACETATE	NC		DIETHYLPROPION HYDROCHLORIDE/TARTARIC ACID	NC	
DEVILS CLAW	NC		DIETHYLSTILBESTROL	NC	
DEXAMETHASONE	NC		DIGOXIN MICRONIZED POWD	NC	
DEXAMETHASONE ACETATE	NC		DIGOXIN POWD	NC	
DEXAMETHASONE ACETATE ANHYDROUS	NC		DIHYDROCODEINE BITARTRATE	NC	
DEXAMETHASONE BASE	NC		DIHYDROXYACETONE (1,3) DIMER	NC	
DEXAMETHASONE ISONICOTINATE	NC		DIINDOLYLMETHANE	NC	
DEXAMETHASONE SODIUM PHOSPHATE	NC		DIIDO-L-THYRONINE 3,5	NC	
DEXCHLORPHENIRAMINE MALEATE	NC		DILTIAZEM HCL	NC	
DEXPANTHENOL LIQD	NC	RX/OTC	DILTIAZEM HYDROCHLORIDE	NC	
DEXPANTHENOL POWD	NC		DIMETHYL FUMARATE	NC	
DEXTRAN 40000	NC		DIMETHYL SILOXANE HYDROXYALKYL-TERMINATED	NC	
DEXTRAN 75000	NC		DIMETHYLACETAMIDE	NC	
DEXTROMETHORPHAN	NC		DIMETHYLAMINOETHANOL (DEANOL)	NC	
DIAMINOPYRIDINE	NC		DIMETHYLGLYCINE HCL	NC	RX/OTC
DIAZEPAM	NC		DIOSGENIN	NC	
DIAZOXIDE	NC		DIOSMIN	NC	
DIBUCAINE	NC		DIOXYBENZONE	NC	
DIBUCAINE HCL	NC		DIPHENIDOL HYDROCHLORIDE	NC	
DICHLORALPHENAZONE	NC				
DICHLOROACETIC ACID	NC				
DICLAZURIL	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DIPHENYLCYCLOPROPE NONE	NC		EFLORNITHINE HYDROCHLORIDE MONOHYDRATE	NC	
DIPYRIDAMOLE	NC		EMU OIL	NC	
DISOPHENOL	NC		ENALAPRIL MALEATE	NC	
DISULFIRAM	NC		ENROFLOXACIN	NC	
DIVALPROEX SODIUM	NC		EPINEPHRINE BITARTRATE	NC	
DMAE BITARTRATE	NC		ERGOLOID MESYLATES	NC	
D-MANNOSE	NC		ERLOTINIB HYDROCHLORIDE	NC	
DOCOSANOL	NC		ERYTHROMYCIN ESTOLATE	NC	
DOPAMINE HYDROCHLORIDE	NC		ESCITALOPRAM OXALATE	NC	
DORZOLAMIDE HYDROCHLORIDE	NC		ESTRADIOL BENZOATE	NC	
DOW CORNING 1501 FLUID	NC		ESTRADIOL CYPIONATE	NC	
DOXEPIN HCL	NC		ESTRADIOL HEMIHYDRATE	NC	
DOXYCYCLINE MONOHYDRATE	NC		ESTRADIOL MICRONIZED	NC	
D-RIBOSE	NC		ESTRADIOL VALERATE CRYS	NC	
D-RIBOSE REAGENT	NC		ESTRADIOL VALERATE POWD	NC	
DULOXETINE HCL	NC		ESTRADIOL POWD	NC	
DULOXETINE HYDROCHLORIDE	NC		ESTRIOL	NC	
DUTASTERIDE	NC		ESTRIOL MICRONIZED	NC	
DYCLONINE HCL POWD	NC		ESTRONE CRYSTALS	NC	
DYCLONINE HYDROCHLORIDE CRYSTALS	NC		ESTRONE POWD	NC	
DYPHYLLINE	NC		ETHOSUXIMIDE	NC	
GERMALL PLUS LIQD	NC		ETHYL OLEATE	NC	RX/OTC
PCCA DMAE COMPLEX	NC		ETHYL VANILLIN	NC	
PROSTAGLANDIN E2	NC		ETHYLCELLULOSE	NC	
RIBOSE (D)	NC		ETHYLENEDIAMINE	NC	
SYN-AKE	NC		ETOMIDATE	NC	
Bulk Chemicals - E's			EUCALYPTOL	NC	RX/OTC
ECONAZOLE NITRATE	NC		GREEN TEA	NC	
EDROPHONIUM CHLORIDE	NC		Bulk Chemicals - F's		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
4-AMINOPYRIDINE	NC		FLUOXETINE HCL	NC	
4-METHYLPYRAZOLE	NC		FLUOXETINE HYDROCHLORIDE	NC	
5-FLUOROURACIL	NC		FLUPHENAZINE DECANOATE LIQD	NC	
DALFAMPRIDINE	NC		FLUPHENAZINE DECANOATE POWD	NC	
FAMCICLOVIR	NC		FLUTICASONE PROPIONATE	NC	
FAMOTIDINE	NC		FORMOTEROL FUMARATE	NC	
FENBENDAZOLE	NC		FORSKOLIN	NC	
FENOFIBRATE	NC		FURAZOLIDONE	NC	
FERRIC AMMONIUM CITRATE	NC		SIBERIAN PINE OIL	NC	
FERRIC CHLORIDE HEXAHYDRATE MISC	NC		Bulk Chemicals - G's		
FERRIC SUBSULFATE POWD	NC		4-AMINOBUTYRIC ACID	NC	
FERRIC SUBSULFATE SOLN	NC	RX/OTC	ARLACEL 165	NC	
FERRIC SULFATE HYDRATE	NC		EGCG POWD	NC	
FERROUS BISGLYCINATE CHELATE	NC		GABAPENTIN	NC	
FERROUS FUMARATE	NC		GALACTOSE	NC	
FERROUS GLUCONATE DIHYDRATE GRAN	NC		GAMMA-AMINOBUTYRIC ACID	NC	
FERROUS GLUCONATE DIHYDRATE POWD	NC		GARDENIA FRAGRANCE	NC	
FERROUS GLUCONATE POWD	NC		GATIFLOXACIN SESQUIHYDRATE	NC	
FERULIC ACID	NC		GENISTEIN	NC	
FEVERFEW	NC		GINSENG ROOT	NC	
FEXOFENADINE HCL	NC		GLUCONOLACTONE	NC	
FINASTERIDE CRYST	NC		GLUCOSAMINE HYDROCHLORIDE	NC	RX/OTC
FINASTERIDE POWD	NC		GLUCOSAMINE SULFATE	NC	RX/OTC
FLIBANSERIN	NC		GLUCOSAMINE SULFATE POTASSIUM CHLORIDE	NC	
FLUCONAZOLE	NC		GLUCOSAMINE SULFATE SODIUM CHLORIDE	NC	
FLUCYTOSINE	NC		GLUTARALDEHYDE IN WATER LIQD	NC	
FLUMAZENIL	NC				
FLUNIXIN MEGGLUMINE	NC				
FLUOROURACIL	NC				



Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
GLUTARALDEHYDE SOLN 24 %	NC		HEMATOXYLIN	NC	
GLYCEROL MONOOLEATE	NC		HEPARIN SODIUM	NC	
GLYCERYL MONOSTEARATE FLAK	NC	RX/OTC	HEPES	NC	
GLYCOFUROL	NC		HEPTAMINOL	NC	
GLYCOPYRROLATE	NC		HISTAMINE PHOSPHATE CRYSTALS	NC	
GLYCOSAMINOGLYCANS	NC		HONEY ALMOND FRAGRANCE	NC	
GLYCYRRHIZIC ACID	NC		HUPERZINE SERRATE A	NC	
GOLD SODIUM THIOMALATE	NC		HYALURONATE SODIUM	NC	
GRAMICIDIN D	NC		HYALURONIC ACID HYDROLYZED	NC	
GRAPE SEED OIL	NC	RX/OTC	HYALURONIC ACID SODIUM	NC	
GRAPSEED OIL	NC	RX/OTC	HYALURONIC ACID SODIUM SALT	NC	
GREEN SOAP	NC		HYDRALAZINE HCL	NC	
GREEN TEA EXTRACT LIQD	NC		HYDRAZINE SULFATE	NC	
GREEN TEA OIL FRAGRANCE	NC		HYDROCODONE BITARTRATE CRYSTALS	NC	
GRISEOFULVIN	NC		HYDROCODONE BITARTRATE POWD	NC	
GRISEOFULVIN MICRONIZED	NC		HYDROCORTISONE HEMISUCCINATE MONOHYDRATE	NC	
GUANABENZ ACETATE	NC		HYDROFLUORIC ACID	NC	
GUANETHIDINE HEMISULFATE	NC		HYDROXOCOBALAMIN	NC	RX/OTC
GUANIDINEACETIC ACID	NC		HYDROXOCOBALAMIN HYDROCHLORIDE	NC	
GUAR GUM	NC		HYDROXYAMPHETAMINE HYDROBROMIDE	NC	
GUARANA SEED EXTRACT	NC		HYDROXYCHLOROQUINE SULFATE	NC	
GYMNEMA SYLVESTRIS LEAF	NC		HYDROXYETHYL CELLULOSE 100 CPS POWD	NC	
Bulk Chemicals - H's			HYDROXYETHYL CELLULOSE 4500-6500 CPS POWD	NC	
ACTIPHYTE OF IVY	NC				
HALOPERIDOL	NC				
HALOPERIDOL DECANOATE	NC				
HAWTHORN BERRY	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HYDROXYETHYL CELLULOSE 5000 CPS POWD	NC		METHOCEL E4M PREMIUM	NC	RX/OTC
HYDROXYETHYL CELLULOSE POWD	NC		METHOCEL E4M PREMIUM CR	NC	RX/OTC
HYDROXYETHYL METHACRYLATE	NC		METHOCEL K100 PREMIUM	NC	RX/OTC
HYDROXYPROGESTER ONE CAPROATE	NC		METHOCEL K100M PREMIUM	NC	RX/OTC
HYDROXYPROPYL CELLULOSE	NC	RX/OTC	SODIUM HYALURONATE	NC	
HYDROXYPROPYL CELLULOSE 1500 CPS	NC	RX/OTC	SODIUM HYALURONATE (INJECTION GRADE)	NC	
HYDROXYPROPYL CELLULOSE 1500-3000 CPS	NC	RX/OTC	SODIUM HYALURONATE EP	NC	
HYDROXYPROPYL CELLULOSE 150-400 CPS	NC	RX/OTC	WITCH HAZEL	NC	
HYDROXYPROPYL CELLULOSE 4000-6500 CPS	NC	RX/OTC	Bulk Chemicals - I's		
HYDROXYPROPYL CELLULOSE 75-100 CPS	NC	RX/OTC	CERAPHYL SLK	NC	
HYDROXYPROPYL METHYLCELLULOSE	NC	RX/OTC	IDEBENONE	NC	
HYDROXYPROPYL- BETA-CYCLODEXTRIN	NC		IDOXURIDINE	NC	
HYDROXYUREA	C		IMIDUREA	NC	
HYDROXYZINE HCL	NC		IMIQUIMOD	NC	
HYPROMELLOSE 100000 MPA-S	NC	RX/OTC	INDOCYANINE GREEN	NC	
HYPROMELLOSE 100000CPS	NC	RX/OTC	INDOLE-3-CARBINOL	NC	RX/OTC
HYPROMELLOSE 4000 MPA-S	NC	RX/OTC	INOSITOL	NC	
HYPROMELLOSE 4000CPS	NC	RX/OTC	INOSITOL HEXANICOTINATE	NC	RX/OTC
HYPROMELLOSE METHOCEL K100M	NC	RX/OTC	IODINE RESUBLIMED CRYS	NC	
HYPROMELLOSE TYPE 2910	NC	RX/OTC	IODINE RESUBLIMED GRAN	NC	
METHOCEL E4M	NC	RX/OTC	IODINE STRONG	NC	RX/OTC
			IODINE FLAK	NC	
			IOPANOIC ACID	NC	
			ISOMETHEPTENE MUCATE	NC	
			ISOPROPYL MYRISTATE	NC	
			ISOPROTERENOL HCL	NC	
			ISOSORBIDE	NC	
			ISOTRETINOIN	NC	
			ISOXSUPRINE HCL	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ITRACONAZOLE	NC		CALCIUM FOLINATE	NC	
IVERMECTIN	NC		CARNITINE (L)	NC	RX/OTC
LIPACTIVE INCA INCHI WO	NC		L-5-METHYLTETRAHYDROFOLIC ACID CALCIUM	NC	
LUGOLS 5 %-10 %	NC	RX/OTC	LABETALOL HCL	NC	
Bulk Chemicals - J's			LABETALOL HYDROCHLORIDE	NC	
JASMINE FRAGRANCE	NC		LACTASE 5000	NC	
JOJOBA OIL	NC		LAMOTRIGINE	NC	
Bulk Chemicals - K's			LANSOPRAZOLE	NC	RX/OTC
7-KETO DHEA	NC	RX/OTC	LATANOPROST OIL	NC	
ACTIPHYTE OF SEA KELP	NC		LATANOPROST POWD	NC	
ACTIPHYTE OF SUGAR KELP	NC		LAURETH-9 POLIDOCANOL	NC	
KANAMYCIN SULFATE	NC		LAURIC ACID	NC	
KETAMINE HCL	NC		L-CARNITINE	NC	RX/OTC
KETAMINE HYDROCHLORIDE	NC		L-CARNITINE HCL	NC	
KETOPROFEN MICRONIZED POWD	NC		LEAD TETROXIDE	NC	
KETOPROFEN ULTRA MICRONIZED POWD	NC		LEFLUNOMIDE	NC	
KETOPROFEN POWD	NC		LEMON BIOFLAVANOID	NC	
KETOROLAC TROMETHAMINE	NC		LETROZOLE	NC	
KETOTIFEN FUMARATE	NC		LEUCOVORIN CALCIUM	NC	
KETOTIFEN HYDROGEN FUMARATE	NC		LEUPROLIDE ACETATE	NC	
KINETIN	NC		LEVALBUTEROL HCL	NC	
KIWI FRAGRANCE	NC		LEVETIRACETAM	NC	
KUDZU ROOT	NC		LEVOCARNITINE	NC	RX/OTC
Bulk Chemicals - L's			LEVOCETIRIZINE DIHYDROCHLORIDE	NC	
5-METHYLTETRAHYDROFOLIC ACID/GLUCOSAMINE SALT	NC		LEVOFLOXACIN HEMIHYDRATE	NC	
ACIDOPHILUS LACTOBACILLUS	NC		LEVORPHANOL TARTRATE	NC	
			LEVOTHYROXINE SODIUM	NC	
			LEVOTHYROXINE SODIUM (T4)	NC	
			LICORICE DEGLYCYRRHIZINATED	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
LIDOCAINE BASE POWD	NC		PINENE (L-ALPHA)	NC	
LIDOCAINE HCL	NC		Bulk Chemicals - M's		
LIDOCAINE HCL MONOHYDRATE	NC		2-METHOXYESTRADIOL	NC	
LIDOCAINE HYDROCHLORIDE	NC		5-METHYLTETRAHYDROFOLATE	NC	RX/OTC
LIDOCAINE HYDROCHLORIDE MONOHYDRATE	NC		5-METHYLTETRAHYDROFOLATECALCIUM	NC	RX/OTC
LIDOCAINE CRYSTALS	NC		CALCIUM L-5 METHYLTETRAHYDROFOLATE	NC	RX/OTC
LIDOCAINE POWD	NC		DIMETHYL SULFONE POWD	NC	
LIMONENE	NC		DL-MALIC ACID	NC	RX/OTC
LINCOMYCIN HCL	NC		L-GLUTAMIC ACID MONOSODIUM	NC	
LINOLEIC ACID	NC		MACA ROOT	NC	
LIOthyRONINE	NC		MAFENIDE ACETATE	NC	
LIOthyRONINE SODIUM	NC		MAFENIDE HCL	NC	
LIOthyRONINE SODIUM (T3)	NC		MAGNESIUM ALUMINUM SILICATE	NC	
LISINOPRIL	NC		MAGNESIUM AMINO ACID CHELLATE 20%	NC	
LITHIUM CITRATE TETRAHYDRATE	NC		MAGNESIUM ASCORBATE	NC	
L-LYSINE HCL POWD	NC	RX/OTC	MAGNESIUM BISGLYCINATE CHELATE	NC	
L-LYSINE MONOHYDROCHLORIDE POWD	NC	RX/OTC	MAGNESIUM BISGLYCINATE DIHYDRATE	NC	
L-METHYLFOLATE CALCIUM	NC		MAGNESIUM CITRATE	NC	RX/OTC
LORATADINE	NC	RX/OTC	MAGNESIUM CITRATE TRIBASIC	NC	RX/OTC
LORAZEPAM	NC		MAGNESIUM GLUCONATE	NC	
LOSARTAN POTASSIUM	NC		MAGNESIUM GLYCINATE	NC	
LOVASTATIN	NC		MAGNESIUM HYDROXIDE	NC	
L-SELENOMETHIONINE	NC				
L-SELENOMETHIONINE BLEND	NC				
LUTEIN BEAD	NC				
LUTEIN POWD	NC				
PCCA T3 SODIUM DILUTION	NC				
PCCA T4 SODIUM DILUTION	NC				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MAGNESIUM MALATE	NC		METHACHOLINE CHLORIDE CRYSTALS	NC	
MAGNESIUM PHOSPHATE DIBASIC TRIHYDRATE	NC		METHACHOLINE CHLORIDE POWDER	NC	
MALEIC ACID	NC		METHACRYLIC ACID COPOLYMER TYPE A	NC	
MALIC ACID	NC	RX/OTC	METHANESULFONIC ACID	NC	
MALTODEXTRIN	NC		METHOCARBAMOL	NC	
MANDELIC ACID	NC		METHOXYAMINE HYDROCHLORIDE	NC	
MANGANESE CHLORIDE TETRAHYDRATE	NC		METHOXYETHANOL	NC	
MANGANESE GLUCONATE	NC		METHSCOPOLAMINE BROMIDE	NC	
MANGANESE SULFATE	NC		METHSCOPOLAMINE NITRATE	NC	
MECAMYLAMINE HCL	NC		METHYL METHACRYLATE CROSSPOLYMER	NC	
MECHLORETHAMINE HCL	NC		METHYL SULFONE CRYSTALS	NC	RX/OTC
MECLOFENOXATE HYDROCHLORIDE	NC		METHYLCOBALAMIN	NC	RX/OTC
MEDIUM CHAIN TRIGLYCERIDES	NC		METHYLENE CHLORIDE	NC	
MEDROXYPROGESTERONE ACETATE	NC		METHYLMETHACRYLATE CROSSPOLYMER (310)	NC	
MEDROXYPROGESTERONE ACETATE MICRONIZED	NC		METHYLPHENIDATE HCL	NC	
MEDROXYPROGESTERONE ACETATE YAM	NC		METHYLPYRROLIDONE	NC	
MEDROXYPROGESTERONE MICRONIZED	NC		METHYLSULFONYLMETHANE CRYSTALS	NC	RX/OTC
MEGLUMINE	NC		METHYLSULFONYLMETHANE POWDER	NC	
MELOXICAM	NC		METHYLTETRAHYDROFOLATE CALCIUM	NC	RX/OTC
MENADIONE	NC		METHYSERGIDE MALEATE	NC	
MEQUINOL	NC		METRONIDAZOLE	NC	
MERCAPTOPYRIMIDINE	NC		METRONIDAZOLE BENZOATE	NC	
MERCAPTOPYRIMIDINE MONOHYDRATE	NC		MEXILETINE HYDROCHLORIDE	NC	
METACRESOL ACETATE	NC				
METFORMIN HCL	NC				
METFORMIN HYDROCHLORIDE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MIDAZOLAM	NC		NALTREXONE HYDROCHLORIDE	NC	
MILK THISTLE	NC		NALTREXONE HYDROCHLORIDE MICRONIZED ANHYDROUS	NC	
MIRTAZAPINE	NC		NALTREXONE HYDROCHLORIDEANHY DROUS	NC	
MISOPROSTOL	NC		NALTREXONE HYDROCHLORIDEDIHYD RATE	NC	
MISOPROSTOL-HPMC	NC		NANDROLONE DECANOATE	NC	
MITOMYCIN	NC		NAPHAZOLINE HCL POWD	NC	
MITOTANE	NC		NEOSTIGMINE METHYLSULFATE	NC	
MODAFINIL	NC		NETTLE LEAF	NC	
MOLYBDENUM	NC		NICLOSAMIDE	NC	
MOMETASONE FUROATE	NC		NICOTINAMIDE ADENINE DINUCLEOTIDE	NC	RX/OTC
MONOBENZONE	NC		NICOTINAMIDE ADENINE DINUCLEOTIDE (NAD)	NC	RX/OTC
MONOETHANOLAMINE	NC		NICOTINAMIDE RIBOSIDE CHLORIDE	NC	
MONTELUKAST SODIUM	NC		NICOTINE POLACRILEX	NC	RX/OTC
MORANTEL TARTRATE	NC		NICOTINE TARTRATE	NC	
MOXIFLOXACIN HCL	NC		NIFEDIPINE	NC	
MOXIFLOXACIN HYDROCHLORIDE	NC		NIFEDIPINE MICRONIZED	NC	
MOXISYLYTE HCL	NC		NIMODIPINE	NC	
MUPIROCIN	NC		NITAZOXANIDE	NC	
MYCOPHENOLATE MOFETIL	NC		NITROFURANTOIN	NC	
VITAMIN K2	NC		NITROFURANTOIN ANHYDROUS	NC	
Bulk Chemicals - N's			NITROFURANTOIN MONOHYDRATE	NC	
NABUMETONE	NC		NONOXYNOL-9	NC	
N-ACETYL-L- CARNOSINE	NC				
NADH	NC				
NALBUPHINE HCL	NC				
NALOXONE HCL	NC				
NALOXONE HCL DIHYDRATE	NC				
NALOXONE HYDROCHLORIDE DIHYDRATE	NC				
NALTREXONE	NC				
NALTREXONE HCL	NC				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NOREPINEPHRINE BITARTRATE	NC		BRIJ 700 WAX	NC	
NORETHINDRONE	NC		BRIJ 93	NC	
NYSTATIN	NC		BRIJ C20 WAX	NC	
NYSTATIN FOREIGN	NC		BRIJ S20 WAX	NC	
Bulk Chemicals - O's			COSMOCIL CQ LIQD	NC	
HYDROXYQUINOLINE SULFATE	NC		DL-PANTHENOL	NC	
L-ORNITHINE HYDROCHLORIDE	NC	RX/OTC	DL-PANTHENOL ALCOHOL	NC	
OCTINOXATE	NC		PALMAROSA OIL	NC	
OCTISALATE	NC		PALMITOYL PENTAPEPTIDE-3	NC	
OCTYL STEARATE	NC		PALMITOYL TRIPEPTIDE-3	NC	
OLMESARTAN MEDOXOMIL	NC		PANCREATIN	NC	
ONDANSETRON HCL	NC		PANTHENOL	NC	
ONDANSETRON HCL DIHYDRATE	NC		PANTOPRAZOLE SODIUM	NC	
ORIGANUM	NC		PANTOPRAZOLE SODIUM SESQUIHYDRATE	NC	
ORLISTAT	NC		PAPAIN	NC	
ORNITHINE HYDROCHLORIDE	NC	RX/OTC	PARACHLOROPHENOL	NC	
OSELTAMIVIR PHOSPHATE	NC		PARAFORMALDEHYDE	NC	
OXANDROLONE	NC		PAROMOMYCIN SULFATE	NC	
OXYBUTININ CHLORIDE	NC		PATCHOULI OIL	NC	
OXYBUTYNIN CHLORIDE	NC		PEARBERRY FRAGRANCE	NC	
OXYMETAZOLINE HCL	NC		PEG 400 MONOSTEARATE	NC	
OXYMETAZOLINE HYDROCHLORIDE	NC		PEG-40 CASTOR OIL	NC	
OXYTETRACYCLINE DIHYDRATE	NC		PENCICLOVIR	NC	
OXYTOCIN	NC		PENICILLAMINE	NC	
OXYTOCIN ACETATE	NC		PENNYROYAL OIL	NC	
TRITON X-100	NC		PENTOSAN POLYSULFATE SODIUM	NC	
Bulk Chemicals - P's			PENTOXIFYLLINE	NC	
BRIJ 30	NC		PENTYLENE GLYCOL	NC	
BRIJ 35 WAX	NC		PENTYLENETETRAZOLE	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PERFLUORODECALIN	NC		PODOFILOX	NC	
PERGOLIDE MESYLATE	NC		POLYACRYLATE CROSSPOLYMER-6	NC	
PERMETHRIN TECHNICAL LIQD	NC		POLYHEXAMETHYLENE BIGUANIDE SOLN	NC	
PERPHENAZINE	NC		POLYOXYL 40 HYDROGENATEDCASTOR OIL	NC	
PEUCEDANUM OSTRUTHIUM EXTRACT	NC		POLYVINYL ALCOHOL	NC	
PHENELZINE SULFATE	NC		POLYVINYLPIRROLIDONE K-30	NC	
PHENINDIONE	NC		POLYVINYLPIRROLIDONE K-90	NC	
PHENIRAMINE MALEATE POWD	NC		POMEGRANATE SEED	NC	
PHENOLSULFONIC ACID	NC		PONAZURIL	NC	
PHENOXYBENZAMINE HCL	NC		POTASSIUM ACETATE CRYSTALS	NC	RX/OTC
PHENOXYETHANOL	NC		POTASSIUM ACETATE POWD	NC	
PHENTERMINE HYDROCHLORIDE	NC		POTASSIUM ASPARTATE	NC	
PHEHTOLAMINE MESYLATE	NC		POTASSIUM AZELAOLYL DIGLYCINATE	NC	
PHENYL SALICYLATE	NC		POTASSIUM BENZOATE	NC	
PHENYLETHYL ALCOHOL	NC		POTASSIUM IODIDE CRYSTALS	NC	RX/OTC
PHENYLETHYLAMINE HCL	NC		POTASSIUM IODIDE GRAN	NC	
PHENYLTOLOXAMINE DIHYDROGEN CITRATE	NC		POTASSIUM IODIDE POWD	NC	
PHENYTOIN	NC		POTASSIUM METABISULFITE POWD	NC	
PHOSPHATIDYLCHOLINE	NC	RX/OTC	POTASSIUM PERMANGANATE GRAN	NC	RX/OTC
PHOSPHATIDYLSERINE	NC		POTASSIUM PHOSPHATE DIBASIC ANHYDROUS GRAN	NC	
PHYTIC ACID IN WATER	NC		POTASSIUM PHOSPHATE DIBASIC GRAN	NC	
PHYTONADIONE CRYSTALS	NC				
PHYTONADIONE LIQD	NC	RX/OTC			
PIMOBENDAN	NC				
PINE BARK EXTRACT	NC				
PINE NEEDLE OIL	NC				
PINEAPPLE EXTRACT	NC				
PIPERINE	NC				
PIRACETAM	NC				



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
POTASSIUM PHOSPHATE MONOBASIC CRYSTALS	NC		PROGESTERONE MILLED POWDER	NC	
POTASSIUM PHOSPHATE MONOBASIC POWDER	NC		PROGESTERONE ULTRA MICRONIZED	NC	
POTASSIUM SODIUM TARTRATE GRANULES	NC		PROGESTERONE WETTABLE (SOY) POWDER	NC	
POTASSIUM SODIUM TARTRATE POWDER	NC		PROGESTERONE WETTABLE (YAM) POWDER	NC	
POTASSIUM SULFATE	NC		PROGESTERONE WETTABLE POWDER	NC	
POVIDONE	NC		PROGESTERONE POWDER	NC	
POVIDONE K-30	NC		PROMAZINE HCL	NC	
POVIDONE-IODINE FLAKES	NC		PROMETHAZINE HCL POWDER	NC	
POVIDONE-IODINE POWDER	NC		PROPANEDIOL	NC	
POWDER SCENT FRAGRANCE	NC		PROPARACAINE HCL	NC	
PRALIDOXIME CHLORIDE	NC		PROPYL GALLATE	NC	
PRAZIQUANTEL POWDER	NC		PROPYLENE GLYCOL	NC	RX/OTC
PREGABALIN	NC		PROPYLENE GLYCOL MONOSTEARATE	NC	
PRILOCAINE	NC		PROPYLTHIOURACIL	NC	
PRILOCAINE HCL	NC		PROTAMINE SULFATE	NC	
PRILOCAINE HCL USP	NC		PROTEASE	NC	
PRILOCAINE HYDROCHLORIDE	NC		PSYLLIUM HUSK	NC	
PRIMIDONE	NC		PULLULAN	NC	
PROCARBAZINE HCL	NC		PYRANTEL PAMOATE	NC	
PROCHLORPERAZINE EDISYLATE	NC		PYRAZINAMIDE	NC	
PROFLAVINE HEMISULFATE	NC		PYRIDOSTIGMINE BROMIDE	NC	
PROGESTERONE MICRONIZED	NC		PYRIDOXAL-5-PHOSPHATE MONOHYDRATE	NC	RX/OTC
PROGESTERONE MICRONIZED (SOY)	NC		PYRIMETHAMINE	NC	
PROGESTERONE MICRONIZED (YAM)	NC		VITAMIN K-1 POWDER	NC	
PROGESTERONE MICRONIZED PREMIUM	NC		ZINC PYRITHIONE	NC	
			Bulk Chemicals - Q's		
			QUATERNIUM-15	NC	
			QUERCETIN DIHYDRATE	NC	
			QUININE HCL	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Bulk Chemicals - R's			DIBUTYL SQUARATE LIQD	NC	RX/OTC
RACEPINEPHRINE HCL	NC		DIMERCAPTOSUCCINIC ACID CRYSTALS	NC	
RAPESEED OIL	NC		DIMERCAPTOSUCCINIC ACID POWD	NC	
RASAGILINE MESYLATE	NC		DL-3-HYDROXYBUTYRIC ACIDSODIUM	NC	
RAUWOLFIA SERPENTINA	NC		DOW CORNING 200 LIQD	NC	RX/OTC
RED YEAST RICE	NC	RX/OTC	L-ASPARTIC ACID SODIUM MONOHYDRATE	NC	RX/OTC
RED YEAST RICE EXTRACT	NC	RX/OTC	L-ASPARTIC ACID SODIUM SALT	NC	
RESVERATROL	NC		LECITHIN SOYA GRAN	NC	
RESVERATROL 98%	NC		LECITHIN SOYA POWD	NC	
RESVERATROL 98+%	NC		L-SERINE	NC	RX/OTC
RETINALDEHYDE	NC		NICE PURE BAKING SODA	NC	RX/OTC
RIBAVIRIN	NC		NOURISIL GEL	NC	
RIBOFLAVIN	NC	RX/OTC	PMX-1184 SILICONE LIQD	NC	RX/OTC
RIBOFLAVIN-5-PHOSPHATE SODIUM	NC	RX/OTC	SACCHARIN CALCIUM	NC	
RIBOFLAVIN-5-PHOSPHATE SODIUM ANHYDROUS	NC	RX/OTC	SAGE LEAF	NC	
RIFAMPIN	NC		SALICYLIC ACID CRYSTALS	NC	
RIFAXIMIN	NC		SALICYLIC ACID POWD	NC	RX/OTC
ROCURONIUM BROMIDE	NC		SALICYLIC ACID SOLN	NC	
RONIDAZOLE	NC		SALSALATE	NC	
ROPIVACAINE HYDROCHLORIDE	NC		SAW PALMETTO BERRY POWD	NC	
ROSE BENGAL B	NC		SCARLET RED	NC	
ROSUVASTATIN CALCIUM	NC		SECRETIN-MANNITOL	NC	
RUBIDIUM CHLORIDE	NC		SELENIUM SULFIDE	NC	
RUTIN	NC		SELENIUM YEAST	NC	
Bulk Chemicals - S's			SENNA EXTR	NC	
AC DERMAPEPTIDE	NC		SERMORELIN ACETATE	NC	
CALCIUM SACCHARIN	NC		SEROTONIN HCL	NC	
CETYL ESTERS WAX	NC		SERTRALINE HCL	NC	
COPASIL GEL	NC		SHARK CARTILAGE	NC	
DEOXYCHOLIC ACID SODIUM	NC				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SHOWER FRESH FRAGRANCE	NC		SODIUM DICHLOROACETATE	NC	
SIBERIAN GINSENG	NC		SODIUM FLUORIDE	NC	
SILDENAFIL CITRATE	NC		SODIUM FLUOROPHOSPHATE	NC	
SILICONE BLEND CUSTOM PSTE	NC		SODIUM GLUCONATE	NC	
SILICONE ELASTOMER BLEND GEL	NC		SODIUM IODIDE CRYSTALS	NC	
SILICONE ELASTOMER BLEND LIQD	NC	RX/OTC	SODIUM IODIDE GRAN	NC	
SILICONE FLUID 556 LIQD	NC	RX/OTC	SODIUM LACTATE 60 %	NC	
SILVER SULFADIAZINE	NC		SODIUM L-ASPARTATE	NC	RX/OTC
SIMVASTATIN	NC		SODIUM LAURETH SULFATE	NC	
SINCALIDE IN MANNITOL	NC		SODIUM METABISULFITE ANHYDROUS GRAN	NC	RX/OTC
SIROLIMUS	NC		SODIUM METABISULFITE GRAN	NC	RX/OTC
SODIUM ACETATE TRIHYDRATE	NC		SODIUM METABISULFITE POWD	NC	
SODIUM ALGINATE	NC		SODIUM MOLYBDATE	NC	
SODIUM BICARBONATE	NC	RX/OTC	SODIUM MONOFLUOROPHOSPHATE	NC	
SODIUM BISULFITE	NC	RX/OTC	SODIUM NITRATE ACS POWD	NC	
SODIUM BITARTRATE MONOHYDRATE	NC		SODIUM NITRATE GRAN	NC	
SODIUM CAPRATE	NC		SODIUM OLEATE	NC	
SODIUM CAPRYLATE FOOD GRADE	NC		SODIUM PHENYLBUTYRATE	NC	
SODIUM CHLORITE FLAK	NC		SODIUM PHOSPHATE DIBASICANHYDROUS POWD	NC	
SODIUM CITRATE DIHYDRATE GRAN	NC		SODIUM PHOSPHATE DIBASIC CRYSTALS	NC	
SODIUM CITRATE DIHYDRATE POWD	NC		SODIUM PHOSPHATE DIBASICDIHYDRATE POWD	NC	
SODIUM COCOYL GLUTAMATE	NC		SODIUM PHOSPHATE DIBASICDRIED GRAN	NC	RX/OTC
SODIUM DEHYDROACETATE	NC		SODIUM PHOSPHATE DIBASICHEPTAHYDRATE CRYSTALS	NC	
SODIUM DEOXYCHOLATE	NC				
SODIUM DIACETATE	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SODIUM PHOSPHATE DIBASICHEPTAHYDRATE POWD	NC		SORBITAN MONOPALMITATE BASE I	NC	
SODIUM PHOSPHATE DIBASIC POWD	NC		SOYABEAN CASEIN DIGEST MEDIUM	NC	
SODIUM PHOSPHATE MONOBASIC ANHYDROUS POWD	NC	RX/OTC	SPAN 80	NC	
SODIUM PHOSPHATE MONOBASIC GRAN	NC		SPIRULINA	NC	
SODIUM PHOSPHATE TRIBASIC CRYSTALS	NC		SQUALANE LIQD	NC	
SODIUM PHOSPHATE TRIBASIC POWD	NC		SQUALANE OIL	NC	
SODIUM PROPIONATE	NC	RX/OTC	SQUALENE	NC	
SODIUM PYRROLIDONE CARBOXYLATE	NC		SQUARIC ACID	NC	
SODIUM SELENITE	NC		SQUARIC ACID DI-N-BUTYL ESTER POWD	NC	
SODIUM STARCH GLYCOLATE	NC		SQUARIC ACID IN BUTANOL LIQD	NC	RX/OTC
SODIUM STEARATE	NC		ST JOHNS WORT	NC	
SODIUM STEARYL FUMARATE	NC		STANNOUS CHLORIDE DIHYDRATE	NC	
SODIUM SUCCINATE	NC		STANOSIZOL	NC	
SODIUM TARTRATE DIHYDRATE	NC		STEVIA EXTRACT	NC	RX/OTC
SODIUM TETRADECYL SULFATE POWD	NC		STEVIA POWDER EXTRACT	NC	RX/OTC
SODIUM TETRADECYL SULFATE SOLN 27 %	NC		STEVIOL GLYCOSIDES	NC	
SODIUM-L-ASCORBATE-2-PHOSPHATE DIHYDRATE	NC		STEVIOSIDE EXTR	NC	
SORAFENIB TOSYLATE	NC		STRONTIUM CHLORIDE CRYSTALS	NC	
SORBITAN MONOLAUATE	NC		SUCCIMER DMSA POWD	NC	
SORBITAN MONOOLEATE	NC		SUCCINIC ACID	NC	
SORBITAN MONOPALMITATE	NC		SUCCINYLCHOLINE CHLORIDE	NC	
			SUCCINYLCHOLINE CHLORIDE DIHYDRATE	NC	
			SUCROSE OCTAACETATE	NC	
			SUFENTANIL CITRATE	NC	
			SULFACETAMIDE	NC	
			SULFADIMETHOXINE	NC	
			SULFAMERAZINE	NC	
			SULFOSALICYLIC ACID DIHYDRATE	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SULFUR PRECIPITATED POWD	NC	RX/OTC	TESTOSTERONE ENANTHATE	NC	
SULFUR SUBLIMED POWD	NC	RX/OTC	TESTOSTERONE MICRONIZED (SOY) POWD	NC	
SULFUR POWD	NC	RX/OTC	TESTOSTERONE MICRONIZED (YAM) POWD	NC	
SULPIRIDE	NC		TESTOSTERONE MICRONIZED SOY POWD	NC	
SUMATRIPTAN	NC		TESTOSTERONE MICRONIZED YAM CRYSTALS	NC	
SUMATRIPTAN SUCCINATE	NC		TESTOSTERONE MICRONIZED POWD	NC	
SUPEROXIDE DISMUTASE POWD	NC		TESTOSTERONE NON-MICRONIZED SOY POWD	NC	
SUPEROXIDE DISMUTASE SOLN	NC		TESTOSTERONE NON-MICRONIZED POWD	NC	
THIOSALICYLIC ACID SODIUMSALT	NC		TESTOSTERONE PROPIONATE	NC	
TRUCLEAR STEVIA PLUS	NC	RX/OTC	TESTOSTERONE POWD	NC	
Bulk Chemicals - T's			TETRACAINE	NC	
CURCUMIN	NC		TETRACAINE HCL	NC	
CURCUMIN EXTRACT	NC		TETRACAINE HYDROCHLORIDE	NC	
NATURAL MIXED TOCOPHEROLS30%	NC		TETRAHYDROBIOPTERIN DIHYDROCHLORIDE	NC	
RENOVAGE	NC		TETRAHYDROBIOPTERIN HYDROCHLORIDE	NC	
TACROLIMUS	NC		TETRAHYDROZOLINE HCL	NC	
TACROLIMUS MONOHYDRATE	NC		THEANINE	NC	
TADALAFIL	NC		THEOBROMINE	NC	
TAMOXIFEN CITRATE	NC		THIOGUANINE	NC	
TAMOXIFEN CITRATE MICRONIZED	NC		THIORIDAZINE HCL	NC	
TAZAROTENE	NC		THYMUS	NC	
TEA COCOYL GLUTAMINE	NC		THYROID 0.23 %	NC	
TEA TREE OIL	NC	RX/OTC	THYROID FULL STRENGTH	NC	
TERBINAFINE HCL	NC				
TERBINAFINE HYDROCHLORIDE	NC				
TESTOSTERONE CYPIONATE	NC				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TICARCILLIN DISODIUM/CLAVULANATE POTASSIUM	NC		TRIETHANOLAMINE SALICYLATE	NC	
TITANIUM DIOXIDE LIQD	NC		TRILOSTANE	NC	
TITANIUM DIOXIDE POWD	NC		TRIMEPRAZINE TARTRATE	NC	
TIZANIDINE HCL	NC		TRIMETHOBENZAMIDE HCL	NC	
TOBRAMYCIN	NC		TRIOXSALEN	NC	
TOCOTRIENOLS	NC		TRIPROLIDINE HCL	NC	
TOFACITINIB CITRATE	NC		TROMETHAMINE	NC	
TOLAZOLINE HYDROCHLORIDE	NC		TROPOLONE	NC	
TOLTRAZURIL	NC		TRYPSIN POWD	NC	
TOLU BALSAM MISC	NC		TURMERIC	NC	
TOLUIDINE BLUE O POWD	NC		TURMERIC ROOT	NC	
TOPIRAMATE	NC		TYLOSIN TARTRATE	NC	
TRAMADOL HCL	NC		TYLOXAPOL	NC	
TRAMADOL HYDROCHLORIDE	NC		XILOGEL	NC	
TRANEXAMIC ACID	NC	RX/OTC	Bulk Chemicals - U's		
TRANILAST CRYSTALS	NC		UBIQUINOL	NC	
TRANILAST POWD	NC		UREA PRILLED BEAD	NC	RX/OTC
TRIACETIN	NC		UREA BEAD	NC	RX/OTC
TRIAMCINOLONE	NC		UREA POWD	NC	RX/OTC
TRIAMCINOLONE HEXACETONIDE	NC		UREAPRO POWD	NC	RX/OTC
TRIAMCINOLONE USP, MICRONIZED	NC		URIDINE	NC	
TRICHLORMETHIAZIDE	NC		URSODIOL	NC	
TRICHLOROACETIC ACID CRYSTALS	NC	RX/OTC	Bulk Chemicals - V's		
TRICHLOROACETIC ACID POWD	NC		ALPHA-TOCOPHEROL	NC	
TRICHLOROACETIC ACID SOLN	NC		D-VITAMIN E SUCCINATE	NC	RX/OTC
TRICLOSAN	NC		RETINOL MOLECULAR FILM OIL	NC	
TRIETHANOLAMINE LAURYL SULFATE	NC		SODIUM VALPROATE	NC	
			TOCOPHERYL ACID SUCCINATED-ALPHA	NC	RX/OTC
			VALACYCLOVIR HCL	NC	
			VALACYCLOVIR HYDROCHLORIDE	NC	
			VALERIAN ROOT POWD	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VALPROATE SODIUM	NC		XYLOMETAZOLINE HYDROCHLORIDE	NC	
VALPROIC ACID POWD	NC		Bulk Chemicals - Y's		
VANADIUM	NC		YEAST EXTRACT	NC	
VANADYL SULFATE HYDRATE	NC	RX/OTC	YOHIMBINE HCL	NC	
VANCOMYCIN HCL	NC		Bulk Chemicals - Z's		
VANCOMYCIN HYDROCHLORIDE	NC		ZEAXANTHIN	NC	
VANILLIN CRYSTALS	NC		ZINC ACETATE	NC	RX/OTC
VANILLIN POWD	NC		ZINC CHLORIDE GRAN	NC	RX/OTC
VARDENAFIL HYDROCHLORIDE	NC		ZINC CITRATE DIHYDRATE	NC	
VEEGUM	NC		ZINC GLUCONATE POWD	NC	
VIDARABINE	NC		ZINC MONOMETHIONINE	NC	
VINPOCETINE	NC		ZINC OXIDE	NC	RX/OTC
VITAMIN A ACETATE BEAD	NC		ZINC PICOLINATE	NC	
VITAMIN A ACETATE CRYSTALS	NC		ZINC UNDECYLENATE	NC	
VITAMIN A PALMITATE	NC	RX/OTC	ZIRCONIUM OXIDE	NC	
VITAMIN A POWD	NC		ZONISAMIDE	NC	
VITAMIN E	NC		Liquids		
VITAMIN E ACETATE	NC	RX/OTC	ACETONE	NC	RX/OTC
VITAMIN E SUCCINATE	NC	RX/OTC	ACTIPHYTE OF LEMONGRASS	NC	
VORICONAZOLE	NC		ALCOHOL	NC	RX/OTC
Bulk Chemicals - W's			ALCOHOL ANHYDROUS	NC	
SEPICALM VG	NC		<i>alcohol, rubbing XX</i>	NC	
WHEY PROTEIN ISOLATE INSTANIZED	NC		ALMOND OIL	NC	RX/OTC
WHITE KIDNEY BEAN EXTRACT	NC		ALMOND OIL SWEET	NC	RX/OTC
WHITE WILLOW BARK	NC		AMMONIUM LACTATE	NC	
Bulk Chemicals - X			ANISE OIL	NC	
XYLAZINE HYDROCHLORIDE	NC		BASE G ALMOND OIL SWEET	NC	RX/OTC
XYLITOL	NC	RX/OTC	BAY OIL	NC	
XYLITOL NF	NC	RX/OTC	BENZYL BENZOATE	NC	RX/OTC
XYLOMETAZOLINE HCL	NC		BERGAMOT OIL	NC	
			CAMPHOR SPIRIT	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CAMPHOR SPIRITS	NC		GNP SODIUM SILICATE	NC	
CASTOR OIL	NC	RX/OTC	GOODSENSE ISOPROPYL ALCOHOL XX	NC	RX/OTC
CEDAR LEAF OIL	NC		GRAPEFRUIT OIL	NC	
CEDARWOOD OIL	NC		GUAIACOL	NC	
CELERY SEED	NC		HM ISOPRPYL RUBBING ALCOHOL XX	NC	RX/OTC
CHLORHEXIDINE GLUCONATE	NC		ISOPROPANOL XX	NC	RX/OTC
CHLOROFORM	NC	RX/OTC	<i>isopropyl alcohol XX 91 %, 99 %</i>	NC	
CINNAMON OIL	NC		ISOPROPYL ALCOHOL XX 70 %, 100 %	NC	RX/OTC
CINNAMON OIL ARTIFICIAL	NC		<i>isopropyl alcohol, rubbing XX</i>	NC	
CITRONELLA OIL	NC	RX/OTC	ISOPROPYL PALMITATE	NC	RX/OTC
CLOVE OIL	NC	RX/OTC	ISOPROPYL RUBBING ALCOHOL XX	NC	
COCONUT OIL	NC	RX/OTC	JUNIPER TAR	NC	
COTTONSEED OIL	NC	RX/OTC	LAVENDER OIL	NC	RX/OTC
CRYOSERV	NC	RX/OTC	LAVENDER OIL FRAGRANCE	NC	RX/OTC
DIMETHYL SULFOXIDE	NC	RX/OTC	LAVENDER OIL NATURAL	NC	RX/OTC
ETHANOL 190 PROOF	NC	RX/OTC	LEMON OIL	NC	
ETHER	NC		LEMONGRASS OIL	NC	
ETHYL ALCOHOL 190 PROOF	NC	RX/OTC	LIME OIL	NC	RX/OTC
ETHYL ALCOHOL SDA- 40B 190 PROOF	NC	RX/OTC	LINSEED OIL RAW	NC	
EUCALYPTUS OIL	NC	RX/OTC	MACADAMIA NUT OIL	NC	
EUGENOL	NC	RX/OTC	METHANOL	NC	RX/OTC
GERANIUM NATURAL	NC	RX/OTC	METHYL ALCOHOL	NC	RX/OTC
GERANIUM OIL	NC	RX/OTC	MUSTARD OIL	NC	
GLYCERINE LIQD	NC	RX/OTC	NIAOULI	NC	
GLYCERIN LIQD	NC	RX/OTC	OIL-COCONUT	NC	RX/OTC
GLYCERIN SOLN	NC		OLIVE OIL	NC	RX/OTC
GLYCEROL FORMAL LIQD	NC	RX/OTC	ORANGE OIL	NC	
GLYCINE SOYA PROTEIN	NC		PEANUT OIL	NC	RX/OTC
GNP CINNAMON OIL	NC		PEPPERMINT OIL	NC	RX/OTC
GNP EUCALYPTUS OIL	NC	RX/OTC	PEPPERMINT SPIRIT	NC	
GNP PEPPERMINT SPIRIT	NC				



Drug Name	Drug Tier	Requirements/Limits
PINE OIL	NC	
PINE TAR LIQD	NC	
POLYSORBATE 20	NC	RX/OTC
POLYSORBATE 40	NC	
POLYSORBATE 60	NC	
POLYSORBATE 80	NC	RX/OTC
PRETZ SOLN	NC	
QC CAMPHOR SPIRIT	NC	
QC CASTOR OIL	NC	RX/OTC
QC SWEET OIL	NC	RX/OTC
QUASSIA VINEGAR MS	NC	
ROSE OIL	NC	RX/OTC
ROSEMARY OIL	NC	RX/OTC
SAFFLOWER OIL	NC	RX/OTC
SASSAFRAS OIL	NC	
SESAME OIL	NC	RX/OTC
SM CAMPHOR SPIRIT	NC	
SM ISOPROPYL ALCOHOL XX	NC	RX/OTC
SM ISOPROPYL ALCOHOL RUBBING XX	NC	RX/OTC
SM SWEET OIL	NC	RX/OTC
SODIUM SILICATE	NC	
SOYBEAN OIL OIL	NC	RX/OTC
SPEARMINT	NC	RX/OTC
SPEARMINT OIL	NC	RX/OTC
SWEET OIL	NC	RX/OTC
TANGERINE	NC	
TANGERINE OIL	NC	
TURPENTINE PURIFIED	NC	
TURPENTINE SPIRITS	NC	
UNDECYLENIC ACID	NC	RX/OTC
WA-001 EXPERIMENTAL SOILSURFACTANT	NC	
Semi-Solids		
COAL TAR LIQD	NC	
COAL TAR SOLN	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
COAL TAR TAR	NC	
PERUVIAN BALSAM LIQD	NC	
PERUVIAN BALSAM MISC	NC	
PERUVIAN BALSAM POWD	NC	
Solids		
5-HYDROXY-L-TRYPTOPHAN	NC	
ALLANTOIN	NC	RX/OTC
ALPROSTADIL	NC	
ALUM AMMONIUM	NC	
ALUMINUM AMMONIUM SULFATE	NC	
ALUMINUM HYDROXIDE DRIEDGEL	NC	RX/OTC
ALUMINUM POTASSIUM SULFATE POWD	NC	RX/OTC
ALUMINUM SULFATE HYDRATE GRAN	NC	
ALUMINUM SULFATE CRYSTALS	NC	
AMMONIUM BROMIDE ACS POWD	NC	
AMMONIUM BROMIDE GRAN	NC	
AMMONIUM CARBONATE POWD	NC	
AMMONIUM CHLORIDE	NC	RX/OTC
AMMONIUM PHOSPHATE DIBASIC GRAN	NC	
AMMONIUM SULFATE	NC	
ASPARTIC ACID	NC	RX/OTC
BHT GRAN	NC	
BISMUTH SUBCARBONATE	NC	RX/OTC
BISMUTH SUBNITRATE	NC	RX/OTC
BISMUTH SUBSALICYLATE	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BORIC ACID NF POWD	NC	RX/OTC	CITRIC ACID ANHYDROUS POWD	NC	RX/OTC
BORIC ACID CRYSTALS	NC		CITRIC ACID MONOHYDRATE GRAN	NC	RX/OTC
BORIC ACID POWD	NC	RX/OTC	CITRIC ACID MONOHYDRATE POWD	NC	
BUTYLATED HYDROXYTOLUENE CRYSTALS	NC		CITRIC ACID POWD	NC	RX/OTC
BUTYLATED HYDROXYTOLUENE GRAN	NC		CO-ENZYME Q 10	NC	RX/OTC
BUTYLATED HYDROXYTOLUENE POWD	NC		COENZYME Q10	NC	RX/OTC
CALCIUM HYDROXIDE	NC	RX/OTC	CORN STARCH	NC	RX/OTC
CALCIUM SULFATE	NC	RX/OTC	CROSCARMELLOSE SODIUM POWD	NC	RX/OTC
CALCIUM SULFATE ANHYDROUS	NC	RX/OTC	DEHYDROEPIANDROSTERONE MICRONIZED	NC	
CALCIUM SULFATE HEMIHYDRATE	NC	RX/OTC	DEHYDROEPIANDROSTERONE POWD	NC	RX/OTC
CAPSICUM OLEORESIN LIQD	NC		DHEA MICRONIZED	NC	
CARBIDOPA	NC		DHEA POWD	NC	RX/OTC
CARBIDOPA ANHYDROUS	NC		DIMENHYDRINATE	NC	
CARBOXYMETHYLCELLULOSE SODIUM HIGH VISCOSITY POWD	NC	RX/OTC	DIMERCAPTO-1-PROPANESULFONIC ACID (DMPS)	NC	
CARBOXYMETHYLCELLULOSE SODIUM LOW VISCOSITY POWD	NC	RX/OTC	DIMERCAPTO-1-PROPANESULFONIC ACID SODIUM SALT	NC	
CARBOXYMETHYLCELLULOSE SODIUM MEDIUM VISCOSITY GRAN	NC		DIMERCAPTOPROPANESULFONATE (2,3) SODIUM	NC	
CARBOXYMETHYLCELLULOSE SODIUM MEDIUM VISCOSITY POWD	NC	RX/OTC	DINITROCHLOROBENZENE	NC	
CARBOXYMETHYLCELLULOSE SODIUM POWD	NC	RX/OTC	DOCUSATE SODIUM/SODIUM BENZOATE	NC	
CATNIP	NC		EDETATE ACID	NC	
CITRIC ACID ANHYDROUS GRAN	NC	RX/OTC	EDETATE DISODIUM	NC	RX/OTC
			EDETATE DISODIUM DIHYDRATE	NC	RX/OTC
			EDETATE TETRASODIUM TETRAHYDRATE	NC	
			EPINEPHRINE	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EPINEPHRINE BASE	NC		PILOCARPINE HCL POWD	NC	
FLUORESCEIN	NC		PILOCARPINE NITRATE CRY5	NC	
FLUORESCEIN SODIUM	NC		PILOCARPINE NITRATE POWD	NC	
FULLERS EARTH	NC	RX/OTC	POTASH SULFURATED LUMP MISC	NC	
GERMANIUM SESQUIOXIDE	NC		POTASSIUM ALUM POWD	NC	RX/OTC
GINGER ROOT	NC		POTASSIUM BITARTRATE	NC	RX/OTC
GNP BORIC ACID POWD	NC	RX/OTC	POTASSIUM BROMIDE CRY5	NC	RX/OTC
HM BORIC ACID POWD	NC	RX/OTC	POTASSIUM BROMIDE GRAN	NC	
HOMATROPINE METHYLBROMIDE POWD	NC		POTASSIUM BROMIDE POWD	NC	
HYDROXYTRYPTOPHAN	NC		POTASSIUM GLUCONATE ANHYDROUS	NC	RX/OTC
HYDROXYTRYPTOPHAN L-5	NC		POTASSIUM NITRATE GRAN	NC	
IODOFORM	NC	RX/OTC	POTASSIUM NITRATE POWD	NC	
KETOCONAZOLE	NC		POTASSIUM PERCHLORATE	NC	
KOJIC ACID	NC	RX/OTC	PREGNENOLONE	NC	
L-ASPARTIC ACID	NC	RX/OTC	PREGNENOLONE MICRONIZED	NC	
LEAD ACETATE TRIHYDRATE POWD	NC		PROSTAGLANDIN E1	NC	
LICORICE ROOT POWD	NC		PUMICE (FLOUR)	NC	
L-MENTHOL	NC	RX/OTC	PYROGALLOL	NC	
MANNITOL	NC	RX/OTC	PYRUVIC ACID LIQD	NC	RX/OTC
MELATONIN	NC	RX/OTC	PYRUVIC ACID POWD	NC	
MENADIONE SODIUM BISULFITE CRY5	NC		QC BORIC ACID POWD	NC	RX/OTC
MENTHOL	NC	RX/OTC	QUINIDINE SULFATE DIHYDRATE CRY5	NC	
MENTHOL-L	NC	RX/OTC	RESORCINOL CRY5	NC	RX/OTC
METHENAMINE MANDELATE	NC		RESORCINOL POWD	NC	RX/OTC
METHENAMINE POWD	NC		ROSIN LUMP MISC	NC	
METHYLENE BLUE	NC				
MINOXIDIL	NC				
OXYBENZONE	NC				
PHENYLMERCURIC ACETATE	NC				
PHENYLMERCURIC NITRATE	NC				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ROSIN POWD	NC		SUCROSE POWD	NC	
SILICA GEL ULTRAMICRONIZED GEL	NC	RX/OTC	SULFANILAMIDE	NC	
SILICA GEL GEL	NC	RX/OTC	TALC	NC	RX/OTC
SILICON DIOXIDE (SYLOID 244 FP) POWD	NC		THEOPHYLLINE	NC	RX/OTC
SILICON DIOXIDE POWD	NC		THEOPHYLLINE ANHYDROUS	NC	RX/OTC
SM BORIC ACID POWD	NC	RX/OTC	THYMOL	NC	RX/OTC
SODIUM BROMIDE	NC	RX/OTC	THYMOL IODIDE	NC	
SODIUM BUTYRATE	NC	RX/OTC	THYMOL IODIDE PURIFIED	NC	
SODIUM CACODYLATE	NC		TINIDAZOLE	NC	
SODIUM CARBOXYMETHYLCELL ULOSE MEDIUM VISCOSITY POWD	NC	RX/OTC	UBIDECARENONE	NC	RX/OTC
SODIUM CHLORIDE/SODIUM BICARBONATE	NC		WAXY MAIZE STARCH N-200	NC	RX/OTC
SODIUM NITRITE	NC	RX/OTC	<b>CONTRACEPTIVES - Drugs to Prevent Pregnancy</b>		
SODIUM PERBORATE MONOHYDRATE POWD	NC	RX/OTC	Combination Contraceptives - Oral		
SODIUM PERBORATE TETRAHYDRATE POWD	NC	RX/OTC	<i>desogestrel &amp; ethinyl estradiol</i>	C	
SODIUM PERBORATE CRYS	NC		<i>desogestrel-ethinyl estradiol (biphasic)</i>	C	
SODIUM PERBORATE GRAN	NC		<i>desogestrel-ethinyl estradiol (triphasic)</i>	C	
SODIUM SULFATE POWD	NC		<i>drospirenone-ethinyl estradiol 0.02 MG-3 MG</i>	C	QL(1 ea daily)
SODIUM SULFITE	NC	RX/OTC	<i>drospirenone-ethinyl estradiol 0.03 MG-3 MG</i>	C	
SODIUM SULFITE ANHYDROUS	NC	RX/OTC	<i>drospirenone-ethinyl estradiol-levomefolate calcium</i>	NC	
SORBITOL	NC		<i>ethynodiol diacet &amp; eth estrad 50 MCG-1 MG</i>	C	QL(1 ea daily)
STANNOUS FLUORIDE POWD	NC		<i>ethynodiol diacet &amp; eth estrad 35 MCG-1 MG</i>	C	
STARCH	NC	RX/OTC	GENERESS FE (Use norethindrone & ethinyl estradiol-fe)	NC	
STRONTIUM NITRATE	NC		<i>levonorgestrel &amp; eth estradiol TABS</i>	C	
SUCROSE POWDERED CONFECTIONERS POWD	NC		<i>levonorgestrel-eth estradiol (triphasic)</i>	C	
SUCROSE CRYS	NC				

Drug Name	Drug Tier	Requirements/Limits
<i>levonorgestrel-ethinyl estradiol (91-day) 0.03 MG-0.15 MG</i>	C	
<i>levonorgestrel-ethinyl estradiol (91-day)</i>	NC	
<i>levonorgestrel-ethinyl estradiol (continuous)</i>	NC	
<i>levonorgestrel-ethinyl estradiol-iron</i>	NC	
LO LOESTRIN FE TABS	NC	
LOSEASONIQUE ( <i>Use levonorgestrel-ethinyl estradiol (91-day)</i> )	NC	
MINASTRIN 24 FE CHEW ( <i>Use norethin acet &amp; estrad-fe</i> )	NC	
MIRCETTE ( <i>Use desogestrel-ethinyl estradiol (biphasic)</i> )	NC	
NATAZIA	NC	
NEXTSTELLIS	NC	
<i>norethin acet &amp; estrad-fe CAPS</i>	NC	
<i>norethin acet &amp; estrad-fe CHEW</i>	NC	
<i>norethin acet &amp; estrad-fe TABS 1 MG-20 MCG-75 MG, 1.5 MG-30 MCG-75 MG</i>	C	
<i>norethindrone &amp; eth estradiol</i>	C	
<i>norethindrone &amp; ethinyl estradiol-fe</i>	C	
<i>norethindrone acet &amp; eth estra</i>	C	
<i>norethindrone acetate-ethinyl estradiol-fe</i>	C	
<i>norethindrone-eth estradiol (triphasic)</i>	C	
<i>norgestimate-ethinyl estradiol</i>	C	
<i>norgestimate-ethinyl estradiol (triphasic)</i>	C	

Drug Name	Drug Tier	Requirements/Limits
<i>norgestrel &amp; ethinyl estradiol 30 MCG-0.3 MG</i>	C	QL(2 ea daily)
QUARTETTE ( <i>Use levonorgestrel-ethinyl estradiol (91-day)</i> )	NC	
SEASONIQUE ( <i>Use levonorgestrel-ethinyl estradiol (91-day)</i> )	NC	
TYBLUME CHEW	C	
YASMIN 28 ( <i>Use drospirenone-ethinyl estradiol</i> )	NC	
YAZ ( <i>Use drospirenone-ethinyl estradiol</i> )	NC	QL(1 ea daily)
Combination Contraceptives - Transdermal		
<i>norelgestromin-ethinyl estradiol</i>	C	
TWIRLA	NC	
Combination Contraceptives - Vaginal		
ANNOVERA	NC	
<i>etonogestrel-ethinyl estradiol</i>	C	QL(6 ea per fill retail)
NUVARING ( <i>Use etonogestrel-ethinyl estradiol</i> )	NC	QL(6 ea per fill retail)
Emergency Contraceptives		
ELLA	C	QL(4 ea per 365 day(s) retail)
<i>levonorgestrel (emergency oc) 1.5 MG</i>	C	QL(1 ea per 21 day(s) retail); 4 max fill(s) per 365 day(s) retail
PLAN B ONE-STEP ( <i>Use levonorgestrel (emergency oc)</i> )	NC	QL(1 ea per 21 day(s) retail); 4 max fill(s) per 365 day(s) retail
Progestin Contraceptives - Injectable		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DEPO-PROVERA CONTRACEPTIVE SUSP IM (Use medroxyprogesterone acetate (contraceptive))	NC	QL(1 ml per fill retail)	<i>budesonide CPEP</i>	P	
			<i>budesonide TB24</i>	NP	
			CORTEF TABS (Use hydrocortisone)	NP	
DEPO-PROVERA CONTRACEPTIVE SUSY IM (Use medroxyprogesterone acetate (contraceptive))	NC	QL(1 ml per fill retail)	CORTISONE ACETATE POWD	NC	
			CORTISONE ACETATE TABS	P	
DEPO-SUBQ PROVERA 104 SUSY SC	C	QL(1 ml per fill retail)	<i>deflazacort TABS 36 MG</i>	NC	
<i>medroxyprogesterone acetate (contraceptive) SUSP IM</i>	C	QL(1 ml per fill retail)	<i>deflazacort TABS 6 MG, 18 MG, 30 MG</i>	NP	
<i>medroxyprogesterone acetate (contraceptive) SUSY IM</i>	C	QL(1 ml per fill retail)	DEPO-MEDROL SUSP	NC	
Progestin Contraceptives - Oral			DEXAMETHASONE INTENSOL CONC	NP	
<i>norethindrone (contraceptive)</i>	C		<i>dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML</i>	C	QL(150 ml per 31 day(s) retail)
OPILL	NC		<i>dexamethasone sodium phosphate SOLN IJ 10 MG/ML, 100 MG/10ML</i>	NC	
SLYND	NC		DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML	C	QL(150 ml per 31 day(s) retail)
<b>CORTICOSTEROIDS - Steroid Hormone Drugs to Treat Systemic Swelling Conditions</b>			DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 10 MG/ML	NC	
Glucocorticosteroids			<i>dexamethasone sodium phosphate SOSY IJ 10 MG/ML</i>	NC	
ALKINDI SPRINKLE CPSP	NP		<i>dexamethasone sodium phosphate SOSY IJ 4 MG/ML</i>	C	QL(150 ml per 31 day(s) retail)
BETAMETHASONE COMBO SUSP 3 MG/ML-3 MG/ML	NC		<i>dexamethasone ELIX</i>	P	
<i>betamethasone sod phosphate &amp; acetate SUSP</i>	NC		<i>dexamethasone SOLN</i>	P	
BETAMETHASONE SODIUM PHOSPHATE/BETAMETHASONE ACETATE SUSP 3 MG/ML-3 MG/ML	NC		<i>dexamethasone TABS</i>	P	
BETAMETHASONE SODIUM PHOSPHATE POWD	NC		<i>dexamethasone TABS 1.5 MG</i>	NC	
			<i>dexamethasone TBPk</i>	P	
			<i>dexamethasone TBPk</i>	NP	
			EMFLAZA SUSP	NP	
			EOHILIA SUSP	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HEMADY TABS	NP		PREDNISOLONE SODIUM PHOSPHATE POWD	NC	
<i>hydrocortisone TABS</i>	P		<i>prednisolone sodium phosphate SOLN 20 MG/5ML</i>	P	QL(150 ml per fill retail)
KENALOG-10 SUSP	NC		<i>prednisolone sodium phosphate SOLN 6.7 MG/5ML</i>	NC	
KENALOG-80 SUSP	NC		<i>prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML</i>	P	
MEDROL DOSEPAK TBPK (Use <i>methylprednisolone</i> )	NP		<i>prednisolone sodium phosphate TBDP</i>	P	
MEDROL TABS (Use <i>methylprednisolone</i> )	NP		PREDNISOLONE POWD	NC	
MEDROL TABS	NP		<i>prednisolone SOLN</i>	NC	
METHYLPREDNISOLONE ACETATE POWD	NC		<i>prednisolone SOLN</i>	P	
<i>methylprednisolone acetate SUSP</i>	NC		<i>prednisolone TABS</i>	NP	
METHYLPREDNISOLONE ACETATE SUSP 40 MG/ML, 80 MG/ML	NC		PREDNISOLONE USP, MICRONIZED ANHYDROUS POWD	NC	
<i>methylprednisolone succ 40 MG, 125 MG, 500 MG, 1000 MG</i>	NC		PREDNISONE INTENSOL CONC	NP	
METHYLPREDNISOLONE POWD	NC		PREDNISONE POWD	NC	
<i>methylprednisolone TABS</i>	P		<i>prednisone SOLN</i>	P	
<i>methylprednisolone TABS 4 MG</i>	NC		<i>prednisone TABS</i>	NC	
<i>methylprednisolone TBPK</i>	P		<i>prednisone TABS</i>	P	
<i>methylprednisolone TBPK</i>	NC		<i>prednisone TBPK</i>	P	
ORAPRED ODT TBDP (Use <i>prednisolone sodium phosphate</i> )	NC		RAYOS TBEC	NP	
ORTIKOS CP24	NP		SOLU-CORTEF	NC	
PEDIAPRED SOLN (Use <i>prednisolone sodium phosphate</i> )	NC		SOLU-MEDROL	NC	
PREDNISOLONE ACETATE POWD	NC		<i>triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML</i>	NC	
PREDNISOLONE ANHYDROUS POWD	NC		TRIAMCINOLONE ACETONIDE SUSP 40 MG/ML, 80 MG/ML	NC	
PREDNISOLONE SODIUM PHOSPHATE, USP POWD	NC		TRIAMCINOLONE DIACETATE	NC	

Drug Name	Drug Tier	Requirements/Limits
TRIAMCINOLONE DIACETATE MICRONIZED	NC	
UCERIS TB24 (Use budesonide)	NP	
UCERIS TB24 (Use budesonide)	NC	
Mineralocorticoids		
FLUDROCORTISONE ACETATE POWD	NC	
<i>fludrocortisone acetate TABS</i>	C	
<b>COUGH/COLD/ALLERGY - Drugs to Treat Cough, Cold and Allergy Symptoms</b>		
Antitussives		
<i>benzonatate 100 MG</i>	C	QL(6 ea daily); AL(At least 10 yrs old)
<i>benzonatate 150 MG</i>	NC	
<i>benzonatate 200 MG</i>	C	QL(3 ea daily); 1 max fill(s) per 31 day(s) retail; AL(At least 10 yrs old)
DELSYM COUGH CHILDRENS SUER (Use <i>dextromethorphan polistirex</i> )	NC	QL(240 ml per 6 day(s) retail)
DELSYM SUER (Use <i>dextromethorphan polistirex</i> )	NC	QL(240 ml per 6 day(s) retail)
DEXTROMETHORPHAN HBR MONOHYDRATE CRY	NC	
DEXTROMETHORPHAN HBR MONOHYDRATE POWD	NC	
DEXTROMETHORPHAN HBR POWD	NC	
<i>dextromethorphan polistirex LQCR</i>	C	QL(240 ml per 6 day(s) retail)
<i>dextromethorphan polistirex SUER</i>	C	QL(240 ml per 6 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
HYCODAN SOLN (Use <i>hydrocodone bitartrate-homatropine methylbromide</i> )	NC	AL(At least 18 yrs old)
<i>hydrocodone bitartrate-homatropine methylbromide SOLN</i>	C	AL(At least 18 yrs old)
<i>hydrocodone bitartrate-homatropine methylbromide TABS</i>	NC	
Cough/Cold/Allergy Combinations		
ALAHIST D	NC	
ALAHIST DM LIQD	NC	
ALAHIST PE TABS	NC	
<i>brompheniramine &amp; phenyleph ELIX</i>	C	QL(120 ml per fill retail); 1 max fill(s) per 31 day(s) retail
<i>cetirizine-pseudoephedrine</i>	C	QL(2 ea daily)
CLARINEX-D 12 HOUR TB12	NP	
CLARITIN-D 12 HOUR TB12 (Use <i>loratadine &amp; pseudoephedrine</i> )	NC	QL(2 ea daily)
COUGH AND CHEST CONGESTION DM COUGH SYRUP SYRP	NC	
DECONEX DMX TABS 10 MG-400 MG-17.5 MG	NC	
<i>dextromethorphan-acetaminophen-chlorpheniramine TABS 325 MG-2 MG-10 MG</i>	NC	
<i>dextromethorphan-guaifenesin LIQD 200 MG/20ML-20 MG/20ML</i>	NC	
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML</i>	C	QL(240 ml per fill retail)



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 400 MG/20ML-20 MG/20ML</i>	C		<i>phenylephrine-chlorphen-dm LIQD 10 MG/5ML-4 MG/5ML-15 MG/5ML</i>	C	QL(240 ml per fill retail)
<i>dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 100 MG/5ML-100 MG/5ML-10 MG/5ML, 200 MG/10ML-20 MG/10ML</i>	C	QL(240 ml per fill retail)	POLY HIST FORTE 10 MG-10.5 MG	NC	
<i>dextromethorphan-guaifenesin TB12 600 MG-30 MG</i>	C	QL(2 ea daily)	POLYTUSSIN DM LIQD	NC	
<i>dextromethorphan-phenylephrine-acetaminophen CAPS</i>	C		<i>promethazine &amp; phenylephrine SYRP</i>	C	QL(240 ml per 6 day(s) retail); AL(At least 2 yrs old)
ED BRON GP LIQD	C	QL(240 ml per 6 day(s) retail)	<i>promethazine w/codeine SOLN</i>	C	QL(240 ml per fill retail); AL(At least 18 yrs old)
ENDAL	NC		<i>promethazine w/codeine SYRP</i>	C	QL(240 ml per fill retail); AL(At least 18 yrs old)
<i>guaifenesin-codeine SOLN</i>	C		<i>promethazine-dm SYRP</i>	C	QL(240 ml per fill retail); AL(At least 2 yrs old)
<i>guaifenesin-codeine SYRP</i>	C		<i>promethazine-phenylephrine-codeine</i>	C	QL(240 ml per fill retail); AL(At least 18 yrs old)
<i>hydrocodone polistirex-chlorpheniramine polistirex SUER</i>	NC		<i>pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML</i>	C	QL(240 ml per fill retail)
LOHIST-D LIQD	C		<i>pseudoephedrine-guaifenesin TB12 600 MG-60 MG</i>	C	QL(210 ea per fill retail)
<i>loratadine &amp; pseudoephedrine TB12</i>	C	QL(2 ea daily)	<i>pseudoephedrine-guaifenesin TB12 1200 MG-120 MG</i>	C	
MAXI-TUSS PE MAX LIQD	C	QL(240 ml per 6 day(s) retail)	TRIPONEL LIQD	NC	
MUCINEX D MAXIMUM STRENGTH TB12 ( <i>Use pseudoephedrine-guaifenesin</i> )	NC		TUSNEL PEDIATRIC LIQD 1.25 MG/ML-25 MG/ML, 50 MG/5ML-5 MG/5ML-15 MG/5ML	NC	
MUCINEX DM TB12 ( <i>Use dextromethorphan-guaifenesin</i> )	NC	QL(2 ea daily)	TUSNEL-DM PEDIATRIC LIQD 1.25 MG/ML-25 MG/ML-2.5 MG/ML	NC	
MUCINEX D TB12 ( <i>Use pseudoephedrine-guaifenesin</i> )	NC	QL(210 ea per fill retail)	TUXARIN ER TB12	NC	
NINJACOF-D	NC		VANACOF 2	NC	
			VANACOF CP LIQD	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VANACOF DMX LIQD	NC		N-ACETYL-L-CYSTEINE POWD	NC	
VANACOF XP LIQD	NC		<b>DERMATOLOGICALS - Drugs to Treat Skin Conditions</b>		
ZYRTEC-D ALLERGY/CONGESTION (Use cetirizine-pseudoephedrine)	NC	QL(2 ea daily)	<b>Acne Products</b>		
ZYRTEC-D ALLERGY/SINUS (Use cetirizine-pseudoephedrine)	NC	QL(2 ea daily)	ABSORICA 10 MG, 20 MG, 30 MG, 40 MG (Use isotretinoin)	NC	QL(2 ea daily); AL(At least 12 yrs old); PA
<b>Expectorants</b>			ABSORICA LD	NC	
BROMHEXINE HCL	NC		ACANYA GEL (Use clindamycin phosphate-benzoyl peroxide)	NP	
GUAIFENESIN POWD	NC		ACNE MEDICATION 10 LOTN	C	
guaifenesin TB12 600 MG	C	QL(40 ea per fill retail); 1 max fill(s) per 31 day(s) retail	ACNE MEDICATION 5 LOTN	C	
guaifenesin TB12 1200 MG	C		ACZONE 5 % (Use dapsone (topical))	NC	
MUCINEX MAXIMUM STRENGTH TB12 (Use guaifenesin)	NC		adapalene-benzoyl peroxide GEL	NP	
MUCINEX TB12 (Use guaifenesin)	NC	QL(40 ea per fill retail); 1 max fill(s) per 31 day(s) retail	adapalene CREA	NP	
potassium iodide (expectorant) SOLN	C		adapalene GEL 0.3 %	P	
SSKI SOLN (Use potassium iodide (expectorant))	NC		adapalene GEL 0.3 %	NP	
TERPIN HYDRATE	NC		ALTRENO LOTN	NP	
TERPIN HYDRATE MONOHYDRATE	NC		ARAZLO LOTN	NP	
<b>Misc. Respiratory Inhalants</b>			ATRALIN GEL (Use tretinoin)	NP	
sodium chloride (inhalant) NEBU 0.9 %, 10 %	C		AVAR LS CLEANSER LIQD (Use sulfacetamide sodium w/ sulfur)	NP	
<b>Mucolytics</b>			AVAR-E LS CREA (Use sulfacetamide sodium w/ sulfur)	NP	
ACETYLCYSTEINE POWD	NC		BENZAC AC WASH LIQD 5 % (Use benzoyl peroxide)	NC	RX/OTC
acetylcysteine SOLN	C		BENZAMYCIN GEL (Use benzoyl peroxide-erythromycin)	NP	
			BENZOYL PEROXIDE HYDROUS POWD	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>benzoyl peroxide-erythromycin GEL</i>	NP		<i>clindamycin phosphate-benzoyl peroxide GEL 5 %-1 %</i>	NC	
<i>benzoyl peroxide FOAM 10 %</i>	P		<i>clindamycin phosphate-tretinoin</i>	NP	
<i>benzoyl peroxide GEL 2.5 %, 5 %, 10 %</i>	C		<i>dapsone (topical)</i>	NP	
<i>benzoyl peroxide LIQD 5 %</i>	NC	RX/OTC	<i>dapsone (topical) 7.5 %</i>	NC	
<i>benzoyl peroxide LIQD 5 %, 10 %</i>	P		DIFFERIN DAILY DEEP CLEANSER LIQD (Use <i>benzoyl peroxide</i> )	NC	RX/OTC
BENZOYL PEROXIDE POWD	NC		DIFFERIN CREA (Use <i>adapalene</i> )	NC	
CABTREO	NP		ERYGEL GEL (Use <i>erythromycin (acne aid)</i> )	NP	1 package(s) per fill retail
CLENIA PLUS SUSP	NC		<i>erythromycin (acne aid) GEL</i>	NC	1 package(s) per fill retail
CLEOCIN-T LOTN (Use <i>clindamycin phosphate (topical)</i> )	NP		<i>erythromycin (acne aid) GEL</i>	NP	1 package(s) per fill retail
CLINDACIN ETZ	NC		<i>erythromycin (acne aid) PADS</i>	P	
CLINDACIN PAC	NC		<i>erythromycin (acne aid) SOLN</i>	P	
CLINDAGEL GEL (Use <i>clindamycin phosphate (topical)</i> )	NP	QL(60 ml per fill retail)	<i>erythromycin (acne aid) SOLN</i>	NC	
<i>clindamycin phosphate (topical) FOAM</i>	NP		EVOCLIN FOAM (Use <i>clindamycin phosphate (topical)</i> )	NP	
<i>clindamycin phosphate (topical) GEL</i>	NP	QL(60 gm per fill retail)	FABIOR FOAM	NP	
<i>clindamycin phosphate (topical) LOTN</i>	NP		<i>isotretinoin 25 MG, 35 MG</i>	NC	
<i>clindamycin phosphate (topical) SOLN</i>	NC		<i>isotretinoin 10 MG, 20 MG, 30 MG, 40 MG</i>	C	QL(2 ea daily); AL(At least 12 yrs old); PA
<i>clindamycin phosphate (topical) SOLN</i>	P		KLARON (Use <i>sulfacetamide sodium (acne)</i> )	NP	QL(118 ml per fill retail)
<i>clindamycin phosphate (topical) SWAB</i>	NP		NEUAC KIT	NC	
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	NP		ONEXTON GEL	NP	
<i>clindamycin phosphate-benzoyl peroxide (refrigerate)</i>	P		ONEXTON GEL (Use <i>clindamycin phosphate-benzoyl peroxide</i> )	NP	
<i>clindamycin phosphate-benzoyl peroxide GEL</i>	NP		PLEXION CLEANSER LIQD (Use <i>sulfacetamide sodium w/ sulfur</i> )	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RETIN-A MICRO	NP		<i>sulfacetamide sodium w/ sulfur PADS 10 %-4 %</i>	NC	
RETIN-A MICRO (Use tretinoin microsphere)	NP		<i>sulfacetamide sodium w/ sulfur PADS 10 %-4 %</i>	NP	
RETIN-A MICRO PUMP (Use tretinoin microsphere)	NP		<i>sulfacetamide sodium w/ sulfur SUSP 10 %-5 %</i>	NP	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail
RETIN-A CREA (Use tretinoin)	P	QL(20 gm per fill retail); AL(Up to 35 yrs old)	<i>sulfacetamide sodium w/ sulfur SUSP 8 %-4 %</i>	NP	
RETIN-A GEL 0.025 % (Use tretinoin)	P	AL(Up to 35 yrs old)	<i>sulfacetamide sodium w/ sulfur SUSP 8 %-4 %</i>	NC	
RETIN-A GEL 0.01 % (Use tretinoin)	P	QL(30 gm per fill retail); AL(Up to 35 yrs old)	<i>sulfacetamide sodium-sulfur in urea vehicle EMUL 10 %-10 %-4 %</i>	NP	
RETIN-A GEL 0.01 % (Use tretinoin)	P	QL(45 gm per fill retail); AL(Up to 35 yrs old)	SUMADAN KIT	NP	
RETINOIC ACID-ALL TRANS POWD	NC		SUMADAN WASH LIQD (Use sulfacetamide sodium w/ sulfur)	NP	
RETINOIC ACID POWD	NC		SUMADAN XLT KIT	NP	
SODIUM SULFACETAMIDE/SULFUR SUSP 9 %-4.25 %	NC		SUMAXIN CP KIT	NP	
<i>sulfacetamide sodium (acne)</i>	NP	QL(118 ml per fill retail)	SUMAXIN PADS	NP	
<i>sulfacetamide sodium w/ sulfur CREA 10 %-2 %, 10 %-5 %</i>	NP		TAZAROTENE FOAM	NP	
<i>sulfacetamide sodium w/ sulfur EMUL 10 %-1 %</i>	NC		TRETINOIN (ALL-TRANS RETINOIC ACID) POWD	NC	
<i>sulfacetamide sodium w/ sulfur EMUL 10 %-1 %</i>	NP		<i>tretinoin microsphere</i>	NP	
<i>sulfacetamide sodium w/ sulfur FOAM</i>	NP		<i>tretinoin CREA 0.025 %, 0.05 %, 0.1 %</i>	NP	QL(20 gm per fill retail); AL(Up to 35 yrs old)
<i>sulfacetamide sodium w/ sulfur LIQD</i>	NP		<i>tretinoin GEL 0.01 %</i>	NP	QL(30 gm per fill retail); AL(Up to 35 yrs old)
<i>sulfacetamide sodium w/ sulfur LIQD</i>	NC		<i>tretinoin GEL 0.05 %</i>	NP	
<i>sulfacetamide sodium w/ sulfur LOTN 10 %-5 %</i>	NP	1 package(s) per 31 day(s) retail	<i>tretinoin GEL 0.025 %</i>	NP	AL(Up to 35 yrs old)
			<i>tretinoin GEL 0.025 %</i>	NC	AL(Up to 35 yrs old)
			<i>tretinoin GEL 0.01 %</i>	NP	QL(45 gm per fill retail); AL(Up to 35 yrs old)
			TRETINOIN POWD	NC	

Drug Name	Drug Tier	Requirements/Limits
VELTIN (Use clindamycin phosphate-tretinoin)	NC	
WINLEVI	NP	
ZIANA (Use clindamycin phosphate-tretinoin)	NP	
ZMA CLEAR SUSP	NP	
Agents for External Genital and Perianal Warts		
VEREGEN	NP	
Antibiotics - Topical		
<i>bacitracin (topical) OINT</i>	C	1 package(s) per fill retail
<i>bacitracin zinc OINT</i>	C	1 package(s) per fill retail
BACITRACIN ZINC POWD	NC	
BACITRACIN POWD	NC	
CENTANY AT KIT	NP	
CENTANY OINT	NP	QL(30 gm per 31 day(s) retail)
<i>gentamicin sulfate (topical) CREA</i>	C	QL(1 gm daily; 30 gm per fill retail)
<i>gentamicin sulfate (topical) OINT</i>	C	QL(1 gm daily; 30 gm per fill retail)
GENTAMICIN SULFATE POWD	NC	
<i>mupirocin calcium (topical)</i>	NP	1 package(s) per 31 day(s) retail
<i>mupirocin OINT</i>	NC	QL(30 gm per 31 day(s) retail)
<i>mupirocin OINT</i>	P	QL(30 gm per 31 day(s) retail)
NEOMYCIN SULFATE	NC	
<i>neomycin-bacitracin-polymyxin OINT</i>	C	QL(60 gm per 31 day(s) retail)
<i>neomycin-polymyxin w/ pramoxine</i>	C	1 package(s) per fill retail
NEOSPORIN ORIGINAL OINT (Use neomycin-bacitracin-polymyxin)	NC	QL(60 ea per 31 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
NEOSPORIN PLUS PAIN RELIEF MAXIMUM STRENGTH (Use neomycin-polymyxin w/ pramoxine)	NC	1 package(s) per fill retail
NEO-SYNALAR	NC	
NEO-SYNALAR KIT	NC	
TETRACYCLINE HCL	NC	
XEPI	NP	
Antifungals - Topical		
BENZOIC ACID CRYSTALS	NC	RX/OTC
BENZOIC ACID POWD	NC	
<i>ciclopirox olamine CREA</i>	P	
CICLOPIROX OLAMINE POWD	NC	
<i>ciclopirox olamine SUSP</i>	P	
<i>ciclopirox GEL</i>	NP	
<i>ciclopirox KIT</i>	NP	
<i>ciclopirox SHAM</i>	NP	
<i>ciclopirox SOLN</i>	P	
<i>ciclopirox SOLN</i>	NC	
<i>ciclopirox SOLN</i>	NP	
CLIOQUINOL POWD	NC	RX/OTC
<i>clotrimazole (topical) CREA</i>	NC	QL(60 gm per 31 day(s) retail); RX/OTC
<i>clotrimazole (topical) CREA</i>	P	QL(60 gm per 31 day(s) retail); RX/OTC
<i>clotrimazole (topical) SOLN</i>	P	1 package(s) per fill retail; RX/OTC
<i>clotrimazole (topical) SOLN</i>	NC	1 package(s) per fill retail; RX/OTC
<i>clotrimazole w/ betamethasone CREA</i>	P	QL(45 gm per 31 day(s) retail)
<i>clotrimazole w/ betamethasone LOTN</i>	P	QL(31 ml per 31 day(s) retail)
<i>clotrimazole w/ betamethasone LOTN</i>	NC	QL(31 ml per 31 day(s) retail)
CLOTRIMAZOLE CRYSTALS	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLOTRIMAZOLE POWD	NC		MICONAZOLE NITRATE POWD XX	NC	
<i>econazole nitrate CREA</i>	NC	QL(30 gm per fill retail)	<i>miconazole-zinc oxide-white petrolatum</i>	NP	
<i>econazole nitrate CREA</i>	P	QL(30 gm per fill retail)	<i>naftifine hcl CREA</i>	NP	
ERTACZO	NP		<i>naftifine hcl GEL 2 %</i>	NP	
EXTINA FOAM ( <i>Use ketoconazole (topical)</i> )	NP		NAFTIN GEL ( <i>Use naftifine hcl</i> )	NP	
GENTIAN VIOLET POWD	NC		NAFTIN GEL	NP	
JUBLIA	NP		<i>nystatin (topical) CREA</i>	P	1 package(s) per 31 day(s) retail
KERYDIN ( <i>Use tavaborole</i> )	NC		<i>nystatin (topical) OINT</i>	P	1 package(s) per fill retail
<i>ketoconazole (topical) CREA</i>	P	1 package(s) per 31 day(s) retail	<i>nystatin (topical) POWD EX</i>	P	1 package(s) per 31 day(s) retail
<i>ketoconazole (topical) CREA</i>	NC	1 package(s) per 31 day(s) retail	<i>nystatin (topical) POWD EX</i>	NC	1 package(s) per 31 day(s) retail
<i>ketoconazole (topical) FOAM</i>	NP		<i>nystatin-triamcinolone CREA</i>	P	1 package(s) per fill retail
<i>ketoconazole (topical) SHAM 2 %</i>	P	QL(120 ml per fill retail)	<i>nystatin-triamcinolone CREA</i>	P	1 package(s) per fill retail
KETODAN KIT	NP		<i>nystatin-triamcinolone OINT</i>	P	1 package(s) per fill retail
LAMISIL AT JOCK ITCH CREA ( <i>Use terbinafine hcl (topical)</i> )	NC		<i>oxiconazole nitrate CREA</i>	NP	
LAMISIL AT CREA ( <i>Use terbinafine hcl (topical)</i> )	NC		OXISTAT CREA ( <i>Use oxiconazole nitrate</i> )	NC	
LOPROX	NP		OXISTAT LOTN	NP	
LOPROX KIT	NP		<i>tavaborole</i>	NC	
LOPROX SHAMPOO SHAM ( <i>Use ciclopirox</i> )	NP		<i>tavaborole</i>	NP	
LOPROX CREA ( <i>Use ciclopirox olamine</i> )	NP		<i>terbinafine hcl (topical) CREA</i>	C	
LOPROX SUSP ( <i>Use ciclopirox olamine</i> )	NP		TINACTIN CREA ( <i>Use tolnaftate</i> )	NC	QL(30 gm per fill retail)
<i>luliconazole</i>	NP		<i>tolnaftate CREA</i>	C	QL(30 ml per fill retail)
LUZU ( <i>Use luliconazole</i> )	NP		TOLNAFTATE POWD XX	NC	
MICATIN CREA ( <i>Use miconazole nitrate (topical)</i> )	NC	QL(200 gm per 31 day(s) retail)	TRIPENICOL C CREA	NC	
<i>miconazole nitrate (topical) CREA</i>	C	QL(200 gm per 31 day(s) retail)	VOTRIZA-AL LOTN	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VUSION (Use miconazole-zinc oxide-white petrolatum)	NP		CAMPHOR GRAN	NC	RX/OTC
Anti-inflammatory Agents - Topical			<i>doxepin hcl (antipruritic)</i>	NC	
<i>diclofenac epolamine PTCH EX</i>	NP		SARNA LOTN (Use camphor & menthol)	NC	1 package(s) per fill retail
<i>diclofenac sodium (topical) GEL EX</i>	NC	RX/OTC	Antipsoriatics		
<i>diclofenac sodium (topical) GEL EX</i>	P	QL(6.68 gm daily); RX/OTC	<i>acitretin</i>	NC	
<i>diclofenac sodium (topical) SOLN EX</i>	NP		ANTHRALIN POWD	NC	
<i>diclofenac sodium (topical) SOLN EX 1.5 %</i>	NC		<i>calcipotriene CREA</i>	P	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail
FLECTOR PTCH EX (Use diclofenac epolamine)	NP		<i>calcipotriene FOAM</i>	NC	
LICART PT24	NP		CALCIPOTRIENE FOAM	NP	
PENNSAID SOLN EX	NP		<i>calcipotriene OINT</i>	P	
PENNSAID SOLN EX 2 % (Use diclofenac sodium (topical))	NP		<i>calcipotriene OINT</i>	NC	
Antineoplastic or Premalignant Lesion Agents - Topical			<i>calcipotriene SOLN</i>	P	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail
AMELUZ GEL	NC		<i>calcipotriene SOLN</i>	NC	1 package(s) per fill retail; 1 max fill(s) per 31 day(s) retail
CARAC CREA (Use fluorouracil (topical))	NC		<i>calcitriol (topical)</i>	NP	
<i>diclofenac sodium (actinic keratoses) EX</i>	NC		COSENTYX SENSOREADY PEN SOAJ	NP	SP
EFUDEX CREA (Use fluorouracil (topical))	NC	QL(40 gm per 31 day(s) retail)	COSENTYX SOSY	NP	SP
<i>fluorouracil (topical) CREA 0.5 %</i>	C		ILUMYA	NC	SP
<i>fluorouracil (topical) CREA 5 %</i>	C	QL(40 gm per 31 day(s) retail)	<i>methoxsalen rapid</i>	NC	
<i>fluorouracil (topical) SOLN</i>	C	QL(10 ml per 31 day(s) retail)	SILIQ	NP	SP
Antipruritics - Topical			SILIQ	NP	
<i>camphor &amp; menthol LOTN</i>	C	1 package(s) per fill retail	SORILUX FOAM	NP	
CAMPHOR CRYST	NC	RX/OTC	SPEVIGO SOSY	NP	
			STELARA SOSY	NP	SP
			TALTZ SOAJ	NP	
			TALTZ SOAJ	NP	SP
			TALTZ SOSY 80 MG/ML	NP	SP
			TALTZ SOSY 20 MG/0.25ML, 40 MG/0.5ML	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TALTZ SOSY 80 MG/ML	NP		<i>selenium sulfide SHAM 2.25 %</i>	NC	
<i>tazarotene CREA</i>	NC	1 package(s) per fill retail; AL(Up to 18 yrs old)	<i>selenium sulfide SHAM 1 %</i>	C	1 package(s) per fill retail
<i>tazarotene CREA</i>	NP	1 package(s) per fill retail; AL(Up to 18 yrs old)	SELSUN BLUE CARE MENS MAXIMUM STRENGTH LOTN ( <i>Use selenium sulfide</i> )	NC	1 package(s) per fill retail
<i>tazarotene GEL</i>	NP	1 package(s) per fill retail; AL(Up to 18 yrs old)	SELSUN BLUE DAILY LOTN ( <i>Use selenium sulfide</i> )	NC	1 package(s) per fill retail
TAZORAC CREA ( <i>Use tazarotene</i> )	NC	1 package(s) per fill retail; AL(Up to 18 yrs old)	SELSUN BLUE MEDICATED LOTN ( <i>Use selenium sulfide</i> )	NC	1 package(s) per fill retail
TAZORAC GEL ( <i>Use tazarotene</i> )	NC	1 package(s) per fill retail; AL(Up to 18 yrs old)	SELSUN BLUE MOISTURIZING LOTN ( <i>Use selenium sulfide</i> )	NC	1 package(s) per fill retail
TREMFYA SOPN	NP	SP	SELSUN BLUE LOTN ( <i>Use selenium sulfide</i> )	NC	1 package(s) per fill retail
TREMFYA SOSY	NP	SP	<i>sulfacetamide sodium GEL</i>	NC	
VTAMA	NP		<i>sulfacetamide sodium GEL</i>	NP	
Antiseborrheic Products			<i>sulfacetamide sodium LIQD</i>	NC	
OVACE PLUS WASH GEL ( <i>Use sulfacetamide sodium</i> )	NP		<i>sulfacetamide sodium LIQD</i>	NP	
OVACE PLUS WASH LIQD ( <i>Use sulfacetamide sodium</i> )	NP		SULFACETAMIDE SODIUM POWD	NC	
OVACE PLUS CREA	NP		<i>sulfacetamide sodium SHAM 10 %</i>	NC	
OVACE PLUS LOTN	NP		<i>sulfacetamide sodium SHAM 10 %</i>	NP	
OVACE PLUS SHAM ( <i>Use sulfacetamide sodium</i> )	NP		ZORYVE	NP	
OVACE WASH LIQD ( <i>Use sulfacetamide sodium</i> )	NP		Antivirals - Topical		
<i>selenium sulfide LOTN 2.5 %</i>	C	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail	<i>acyclovir topical CREA</i>	P	1 package(s) per 31 day(s) retail
<i>selenium sulfide LOTN 1 %</i>	C	1 package(s) per fill retail	<i>acyclovir topical OINT</i>	NC	1 package(s) per fill retail
			<i>acyclovir topical OINT</i>	NP	1 package(s) per fill retail



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DENAVIR (Use penciclovir)	NP		betamethasone dipropionate (topical) LOTN	NC	
penciclovir	NP		betamethasone dipropionate (topical) OINT	NP	
XERESE	NP		betamethasone dipropionate augmented CREA	P	1 package(s) per fill retail
ZOVIRAX CREA (Use acyclovir topical)	NP	1 package(s) per 31 day(s) retail	betamethasone dipropionate augmented GEL 0.05 %	NP	
ZOVIRAX OINT (Use acyclovir topical)	NP	1 package(s) per fill retail	betamethasone dipropionate augmented LOTN	NP	
Burn Products			betamethasone dipropionate augmented OINT	NC	
mafenide acetate PACK	NC		BETAMETHASONE DIPROPIONATE POWD	NC	
NITROFURAZONE	NC		betamethasone valerate CREA	P	
SILVADENE (Use silver sulfadiazine)	NC		betamethasone valerate FOAM	NP	
silver sulfadiazine	C		betamethasone valerate LOTN	P	
SULFAMYLON CREA	NC		betamethasone valerate OINT	NP	
Cauterizing Agents			BETAMETHASONE VALERATE POWD	NC	
CHLOROACETIC ACID POWD	NC		BRYHALI LOTN	NP	
SILVER NITRATE CRYSTALS	NC	RX/OTC	calcipotriene-betamethasone dipropionate OINT	NP	
SILVER NITRATE SOLN 0.5 %	NC		calcipotriene-betamethasone dipropionate SUSP	NC	
Corticosteroids - Topical			calcipotriene-betamethasone dipropionate SUSP	NP	
alclometasone dipropionate CREA	P				
alclometasone dipropionate OINT	P				
alclometasone dipropionate OINT	NC				
amcinonide CREA	NP				
APEXICON E CREA	NP				
betamethasone dipropionate (topical) CREA	P	1 package(s) per 30 day(s) retail			
betamethasone dipropionate (topical) CREA	NC	1 package(s) per 30 day(s) retail			
betamethasone dipropionate (topical) LOTN	P				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLOBETASOL 17 PROPIONATE POWD	NC		CLODAN KIT	NC	
<i>clobetasol propionate emollient base 0.05 %</i>	P	1 package(s) per fill retail	CLODERM (Use <i>clocortolone pivalate</i> )	NP	
<i>clobetasol propionate emulsion</i>	NP		CLODERM (Use <i>clocortolone pivalate</i> )	NC	
CLOBETASOL PROPIONATE MICRONIZED USP POWD	NC		DERMA-SMOOTH/FS BODY OIL (Use <i>fluocinolone acetonide</i> )	NP	
CLOBETASOL PROPIONATE MICRONIZED POWD	NC		DERMA-SMOOTH/FS SCALP OIL (Use <i>fluocinolone acetonide</i> )	NP	
<i>clobetasol propionate CREA 0.05 %</i>	NC	1 package(s) per fill retail	DERMA-SMOOTH/FS SCALP OIL (Use <i>fluocinolone acetonide</i> )	NC	
<i>clobetasol propionate CREA 0.05 %</i>	P	1 package(s) per fill retail	<i>desonide CREA</i>	P	QL(2 gm daily)
<i>clobetasol propionate FOAM</i>	NC		<i>desonide LOTN</i>	P	
<i>clobetasol propionate FOAM</i>	NP		<i>desonide OINT</i>	P	QL(2 gm daily)
<i>clobetasol propionate GEL 0.05 %</i>	NC	1 package(s) per fill retail	DESONIDE POWD	NC	
<i>clobetasol propionate GEL 0.05 %</i>	P	1 package(s) per fill retail	<i>desoximetasone CREA</i>	NP	1 package(s) per fill retail
<i>clobetasol propionate LIQD</i>	NP		<i>desoximetasone CREA 0.25 %</i>	NC	1 package(s) per fill retail
<i>clobetasol propionate LOTN</i>	NP		<i>desoximetasone GEL</i>	NP	
<i>clobetasol propionate OINT 0.05 %</i>	NC		<i>desoximetasone LIQD</i>	NP	
<i>clobetasol propionate OINT 0.05 %</i>	P	1 package(s) per fill retail	<i>desoximetasone OINT 0.05 %</i>	NC	
CLOBETASOL PROPIONATE POWD	NC		<i>desoximetasone OINT</i>	NP	
<i>clobetasol propionate SHAM</i>	NP		<i>diflorasone diacetate CREA</i>	NP	
<i>clobetasol propionate SOLN 0.05 %</i>	NC	1 package(s) per fill retail	<i>diflorasone diacetate OINT</i>	NP	
<i>clobetasol propionate SOLN 0.05 %</i>	P	1 package(s) per fill retail	<i>diflorasone diacetate OINT</i>	NC	
<i>clocortolone pivalate</i>	NP		DIPROLENE OINT (Use <i>betamethasone dipropionate augmented</i> )	NP	
<i>clocortolone pivalate</i>	NC		ENSTILAR FOAM	NP	
			EPIFOAM FOAM	C	
			<i>fluocinolone acetonide CREA</i>	NP	
			<i>fluocinolone acetonide OIL</i>	P	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fluocinolone acetonide OINT</i>	NP		<i>halobetasol propionate CREA</i>	NC	
FLUOCINOLONE ACETONIDE POWD	NC		<i>halobetasol propionate OINT</i>	P	
<i>fluocinolone acetonide SOLN</i>	NP		<i>halobetasol propionate OINT</i>	NC	
<i>fluocinolone acetonide SOLN</i>	NC		HALOG CREA (Use <i>halcinonide</i> )	NP	
<i>fluocinonide emulsified base</i>	P	1 package(s) per fill retail	HALOG OINT	NP	
<i>fluocinonide CREA 0.05 %</i>	P	1 package(s) per fill retail	HALOG SOLN	NP	
<i>fluocinonide CREA 0.1 %</i>	P		HYDROCAINE	NC	
<i>fluocinonide CREA 0.1 %</i>	NC		HYDROCORT LOTION COMPLETEKIT THPK	NC	
<i>fluocinonide CREA 0.05 %</i>	NC	1 package(s) per fill retail	<i>hydrocortisone (topical) CREA 2.5 %</i>	P	QL(120 gm per 31 day(s) retail)
<i>fluocinonide GEL</i>	P	1 package(s) per fill retail	<i>hydrocortisone (topical) CREA 1 %</i>	NC	RX/OTC
<i>fluocinonide OINT</i>	NC	1 package(s) per fill retail	<i>hydrocortisone (topical) CREA 2.5 %</i>	NC	QL(120 gm per 31 day(s) retail)
<i>fluocinonide OINT</i>	NP	1 package(s) per fill retail	<i>hydrocortisone (topical) CREA 1 %</i>	P	1 package(s) per fill retail; RX/OTC
FLUOCINONIDE POWD	NC		<i>hydrocortisone (topical) CREA 1 %</i>	NC	1 package(s) per fill retail; RX/OTC
<i>fluocinonide SOLN</i>	NC	1 package(s) per fill retail	<i>hydrocortisone (topical) CREA 0.5 %</i>	C	1 package(s) per fill retail
<i>fluocinonide SOLN</i>	P	1 package(s) per fill retail	<i>hydrocortisone (topical) LOTN 2.5 %</i>	P	1 package(s) per fill retail
<i>flurandrenolide CREA</i>	NP		<i>hydrocortisone (topical) OINT 1 %</i>	NC	QL(2 gm daily); 1 package(s) per 31 day(s) retail; RX/OTC
<i>flurandrenolide LOTN</i>	NP		<i>hydrocortisone (topical) OINT 1 %</i>	P	QL(2 gm daily); 1 package(s) per 31 day(s) retail; RX/OTC
<i>fluticasone propionate CREA 0.05 %</i>	NP	1 package(s) per 31 day(s) retail	<i>hydrocortisone (topical) OINT 2.5 %</i>	P	
<i>fluticasone propionate CREA 0.05 %</i>	NC	1 package(s) per 31 day(s) retail	<i>hydrocortisone acetate (topical) OINT</i>	NC	
<i>fluticasone propionate LOTN</i>	NP		HYDROCORTISONE ACETATE MICRONIZED POWD	NC	
<i>fluticasone propionate OINT</i>	NP	1 package(s) per fill retail			
<i>halcinonide CREA</i>	NC				
<i>halcinonide CREA</i>	NP				
<i>halobetasol propionate CREA</i>	P				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
HYDROCORTISONE ACETATE POWD	NC		<i>mometasone furoate SOLN</i>	P	1 package(s) per fill retail
<i>hydrocortisone butyrate hydrophilic lipo base</i>	NP		<i>OLUX-E (Use clobetasol propionate emulsion)</i>	NP	
<i>hydrocortisone butyrate CREA</i>	NP		<i>OLUX FOAM (Use clobetasol propionate)</i>	NP	
<i>hydrocortisone butyrate LOTN</i>	NP		PANDEL	NP	
<i>hydrocortisone butyrate LOTN</i>	NC		PRAMOSONE CREA 2.5 %-1 % (Use pramoxine-hc)	NC	
<i>hydrocortisone butyrate OINT</i>	P		<i>pramoxine-hc CREA 2.5 %-1 %</i>	NC	
<i>hydrocortisone butyrate SOLN</i>	P		<i>prednicarbate OINT</i>	NP	
HYDROCORTISONE COMPLETE KIT THPK	NC		SYNALAR CREAM KIT	NC	
HYDROCORTISONE MICRONIZED	NC		SYNALAR OINTMENT KIT	NC	
<i>hydrocortisone valerate CREA</i>	P		SYNALAR TS	NC	
<i>hydrocortisone valerate OINT</i>	NP		<i>SYNALAR CREA (Use fluocinolone acetonide)</i>	NP	
HYDROCORTISONE POWD	NC		<i>SYNALAR OINT (Use fluocinolone acetonide)</i>	NP	
HYDROXATE GEL	NC		<i>SYNALAR SOLN (Use fluocinolone acetonide)</i>	NP	
HYDROXYM GEL	NP		TACLONEX OINT (Use calcipotriene-betamethasone dipropionate)	NP	
IMPEKLO LOTN	NP		TACLONEX SUSP (Use calcipotriene-betamethasone dipropionate)	NP	
LIDOTRAL + HYDROCORTISONE LOTN 1 %-5 %	NC		TEXACORT SOLN 2.5 %	NP	
LOCOID LIPOCREAM	NP		TOPICORT CREA (Use desoximetasone)	NP	1 package(s) per fill retail
LOCOID LOTN (Use hydrocortisone butyrate)	NP		TOPICORT GEL (Use desoximetasone)	NP	
LUXIQ FOAM (Use betamethasone valerate)	NP		TOPICORT LIQD (Use desoximetasone)	NP	
<i>mometasone furoate CREA</i>	P	1 package(s) per fill retail	TOPICORT OINT (Use desoximetasone)	NP	
<i>mometasone furoate CREA</i>	NC	1 package(s) per fill retail	TOPICORT OINT 0.05 % (Use desoximetasone)	NC	
<i>mometasone furoate OINT</i>	P	1 package(s) per fill retail			

Drug Name	Drug Tier	Requirements/Limits
TOVET KIT	NC	
<i>triamcinolone acetonide (topical) AERS</i>	NC	
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	NC	1 package(s) per fill retail
<i>triamcinolone acetonide (topical) CREA 0.025 %</i>	P	QL(30 gm per fill retail)
<i>triamcinolone acetonide (topical) CREA 0.5 %</i>	P	1 package(s) per fill retail
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	P	
<i>triamcinolone acetonide (topical) CREA 0.1 %</i>	NC	
<i>triamcinolone acetonide (topical) LOTN</i>	P	1 package(s) per fill retail
<i>triamcinolone acetonide (topical) OINT 0.025 %, 0.5 %</i>	P	1 package(s) per fill retail
<i>triamcinolone acetonide (topical) OINT 0.05 %, 0.1 %</i>	P	
<i>triamcinolone acetonide (topical) OINT 0.05 %</i>	NC	
TRIAMCINOLONE ACETONIDE POWD	NC	
TRIAMCINOLONE ACETONIDEUSP, MICRONIZED POWD	NC	
ULTRAVATE LOTN	NP	
VANOS CREA ( <i>Use fluocinonide</i> )	NP	
Eczema Agents		
CIBINQO	NP	SP
OPZELURA	NP	
Emollient/Keratolytic Agents		
<i>urea in lactic acid vehicle</i>	NC	
<i>urea CREA 20 %, 39 %, 41 %</i>	NC	
<i>urea CREA 40 %</i>	C	RX/OTC
UREA CREA	NC	

Drug Name	Drug Tier	Requirements/Limits
Emollients		
<i>lactic acid (ammonium lactate) CREA</i>	C	QL(385 gm per 31 day(s) retail); RX/OTC
<i>lactic acid (ammonium lactate) LOTN 12 %</i>	C	QL(567 gm per 31 day(s) retail); RX/OTC
Enzymes - Topical		
COLLAGENASE POWD	NC	
Immunomodulating Agents - Systemic		
NEMLUVIO	NC	
Immunomodulating Agents - Topical		
<i>imiquimod 5 %</i>	P	QL(48 ea per 180 day(s) retail)
<i>imiquimod 3.75 %</i>	NP	
ZYCLARA ( <i>Use imiquimod</i> )	NP	
ZYCLARA PUMP	NP	
ZYCLARA PUMP ( <i>Use imiquimod</i> )	NP	
Immunosuppressive Agents - Topical		
ELIDEL ( <i>Use pimecrolimus</i> )	P	QL(100 gm per 31 day(s) retail); AL(At least 2 yrs old)
HYFTOR	NP	
<i>pimecrolimus</i>	NP	QL(100 gm per 31 day(s) retail); AL(At least 2 yrs old)
<i>tacrolimus (topical) OINT 0.1 %</i>	NP	QL(100 gm per 31 day(s) retail); AL(At least 16 yrs old)
<i>tacrolimus (topical) OINT 0.03 %</i>	NP	QL(100 gm per 31 day(s) retail); AL(At least 2 yrs old)
Keratolytic/Antimitotic/Vesicant Agents		
CANTHARIDIN POWD	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CANTHARIDIN SOLN	NC		<i>capsaicin PTCH</i>	NC	
CONDYLOX GEL ( <i>Use podofilox</i> )	NP		CAPZASIN-HP CREA ( <i>Use capsaicin</i> )	NC	1 package(s) per fill retail
KERALYT GEL ( <i>Use salicylic acid</i> )	NC		CIRCATA CREA	NC	
PODOCON-25 SOLN	NC		COCAINE HCL POWD	NC	
<i>podofilox GEL</i>	NP		DERMACINRX CIRCATRIX CREA	NC	
<i>podofilox SOLN</i>	NP		<i>dibucaine</i>	C	1 package(s) per fill retail
<i>podofilox SOLN</i>	NC		GNP CALAMINE PLUS SPRAY AERO	NC	
PODOPHYLLUM RESIN POWD	NC	RX/OTC	LIDAFLEX PTCH	NC	
SALICATE LIQD	NC		<i>lidocaine hcl CREA 3 %, 4 %</i>	C	1 package(s) per fill retail
<i>salicylic acid FOAM</i>	NC		<i>lidocaine hcl GEL 2.8 %</i>	NC	RX/OTC
<i>salicylic acid GEL 6 %</i>	C		<i>lidocaine hcl PRSY</i>	NC	
<i>salicylic acid LIQD 2 %, 17 %, 27.5 %</i>	NC		<i>lidocaine hcl SOLN</i>	NC	
SALIMEZ CREA	NC		LIDOCAINE/TETRACAIN E CREA 7 %-7 %	NC	
SALYCIM CREA	NC		<i>lidocaine CREA 4 %</i>	C	1 package(s) per fill retail
YCANTH SOLN	NC		<i>lidocaine OINT</i>	NC	
Liniments			<i>lidocaine-prilocaine CREA</i>	C	1 package(s) per fill retail
<i>camphor-menthol-methyl salicylate GEL</i>	NC		<i>lidocaine-prilocaine KIT</i>	NC	
<i>camphor-menthol-methyl salicylate PTCH EX 3.1 %-10 %-6 %</i>	NC		<i>lidocaine PTCH 4 %, 5 %</i>	NC	
<i>menthol-methyl salicylate (liniments) PTCH</i>	NC		LIDOPURE PATCH	NC	
MENTICAM CREA	NC		LIDOTRAL CREA	NC	
WINTERGREEN OIL OIL XX	NC		LIDOTRAL GEL 5 %	NC	
Local Anesthetics - Topical			LIDOTRAN CREA	NC	
<i>benzocaine (topical) AERO</i>	NC		LMX 4 CREA ( <i>Use lidocaine</i> )	NC	1 package(s) per fill retail
BRUSELIX CREA	NC		PLIAGLIS CREA	NC	
BURN RELIEF GEL	NC		PRAMOXINE HCL POWD	NC	
<i>capsaicin CREA 0.025 %, 0.075 %, 0.1 %</i>	C	1 package(s) per fill retail	QUTENZA	NC	
CAPSAICIN POWD 95 %, 98.3 %	NC	RX/OTC	RA ARTHRITIS PAIN RELIEF CREA	C	1 package(s) per fill retail
			TETRI-AG OINT	NC	
			XYLIDERM	NC	
			ZTLIDO PTCH	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
Misc. Dermatological Products			FINACEA GEL ( <i>Use azelaic acid</i> )	P	
GENADUR KIT KIT CO	NC		<i>ivermectin (rosacea)</i>	NP	
Misc. Topical			METROCREAM CREA ( <i>Use metronidazole (topical)</i> )	NC	QL(45 gm per 31 day(s) retail)
ALUMINUM CHLORIDE ANHYDROUS POWD	NC	RX/OTC	METROGEL GEL 1 % ( <i>Use metronidazole (topical)</i> )	NC	
ALUMINUM CHLORIDE HEXAHYDRATE CRYSTALS	NC	RX/OTC	METROLOTION LOTN ( <i>Use metronidazole (topical)</i> )	NC	
ALUMINUM CHLORIDE HEXAHYDRATE POWD	NC	RX/OTC	<i>metronidazole (topical) CREA</i>	NC	QL(45 gm per 31 day(s) retail)
ALUMINUM CHLORIDE CRYSTALS	NC	RX/OTC	<i>metronidazole (topical) CREA</i>	NP	QL(45 gm per 31 day(s) retail)
CALAMINE POWD XX	NC	RX/OTC	<i>metronidazole (topical) CREA</i>	P	QL(45 gm per 31 day(s) retail)
COZIMA CREA	NC		<i>metronidazole (topical) GEL 1 %</i>	P	
ICHTHAMMOL POWD	NC		<i>metronidazole (topical) GEL 0.75 %</i>	P	QL(45 gm per 31 day(s) retail)
SCARTRATE	NC		<i>metronidazole (topical) GEL 1 %</i>	NP	
TANNIC ACID	NC	RX/OTC	<i>metronidazole (topical) GEL 0.75 %</i>	NP	QL(45 gm per 31 day(s) retail)
XERAC AC	NC		<i>metronidazole (topical) LOTN</i>	P	
<i>zinc oxide (topical) OINT 20 %</i>	C	1 package(s) per fill retail	MIRVASO ( <i>Use brimonidine tartrate (topical)</i> )	NC	
ZINCTRAL PSTE	NC		NORITATE CREA	NP	
Phosphodiesterase 4 (PDE4) Inhibitors - Topical			RHOFADE	NP	
EUCRISA	NP		ROSADAN KIT	NC	
EUCRISA	NC		SOOLANTRA ( <i>Use ivermectin (rosacea)</i> )	NC	
ZORYVE	NP		Scabicides & Pediculicides		
Pigmenting-Depigmenting Agents			<i>crotamiton LOTN</i>	NP	1 package(s) per fill retail
HYDROQUINONE POWD	NC				
METHOXSALEN POWD	NC				
Protectives Against UV Radiation					
SCENESSE	NC				
Rosacea Agents					
<i>azelaic acid GEL</i>	NP				
<i>brimonidine tartrate (topical)</i>	NP				
<i>doxycycline (rosacea)</i>	NP				
FINACEA FOAM	NP				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>malathion</i>	NP	QL(59 ml per fill retail); 2 max fill(s) per 31 day(s) retail	FILSUVEZ	NC	
NATROBA ( <i>Use spinosad</i> )	P		SONAFINE EMUL	NC	
NIX CREME RINSE LIQD EX ( <i>Use permethrin</i> )	NC		VENELEX OINT	NC	
OVIDE ( <i>Use malathion</i> )	NP	QL(59 ml per fill retail); 2 max fill(s) per 31 day(s) retail	<b>DIAGNOSTIC PRODUCTS</b>		
<i>permethrin CREA</i>	P	QL(60 gm per fill retail)	Diagnostic Biologicals		
<i>permethrin LIQD EX</i>	NC		APLISOL	NC	
<i>permethrin LIQD EX</i>	P		TUBERSOL	NC	
<i>pyrethrins-piperonyl butoxide SHAM 4 %-0.3 %-0.33 %, 4 %-0.33 %</i>	C		Diagnostic Drugs		
<i>spinosad</i>	NP	Limited to Age 6 months and older	<i>adenosine (diagnostic)</i>	NC	
VANALICE GEL	NC		BLUDIGO IV	NC	
Tar Products			<i>dipyridamole (diagnostic)</i>	NC	
<i>coal tar extract SHAM 0.5 %</i>	C		GLEOLAN	NC	
DHS TAR GEL SHAM ( <i>Use coal tar extract</i> )	NC		GLUCAGON	NC	
DHS TAR SHAM ( <i>Use coal tar extract</i> )	NC		GLUCAGON HCL DIAGNOSTIC	NC	
NEUTROGENA T/GEL SHAM 0.5 % ( <i>Use coal tar extract</i> )	NC		<i>isosulfan blue</i>	NC	
Wound Care Products			KINEVAC	NC	
ABRAVO EMUL	NC		MACRILEN	NC	
ATOPA VO EMUL	NC		METOPIRONE	NC	
AVO CREAM EMUL	NC		<i>regadenoson</i>	NC	
B & C OINT	NC		R-GENE 10	NC	
BALSAM PERU & CASTOR OIL OINT	NC		SINCALIDE	NC	
BIAFINE EMUL	NC		THYROGEN 0.9 MG	NC	SP
BPCO OINT	NC		Diagnostic Radiopharmaceuticals		
			AMYVID	NC	
			AXUMIN	NC	
			CARDIOLITE	NC	
			ILLUCCIX CONFIGURATION A KIT	NC	
			ILLUCCIX CONFIGURATION B KIT	NC	
			KIT FOR THE PREPARATION OF TECHNETIUM 99M SESTAMIBI	NC	
			LEU TECHNELITE	NC	
			LOCAMETZ KIT	NC	



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NETSPOT	NC		EMBRACE WAVE BLOOD GLUCOSE TEST STRIPS STRP	NC	RX/OTC
POSLUMA	NC		FENTANYL FE	NC	
PYLARIFY	NC		FREESTYLE INSULINX BLOODGLUCOSE TEST STRIPS STRP	P	RX/OTC
TAUVID	NC		FREESTYLE LITE TEST STRIPS STRP	P	RX/OTC
TECHNELITE	NC		FREESTYLE PRECISION NEO BLOOD GLUCOSE TEST STRIPS STRP	P	RX/OTC
XENON XE 133	NC		FREESTYLE TEST STRIPS STRP	P	RX/OTC
Diagnostic Tests			HOME PAP KIT	NC	
ACCU-CHEK AVIVA PLUS STRP	P	RX/OTC	INFLAMMATION TEST	NC	
ACCU-CHEK GUIDE TEST STRIPS STRP	P	RX/OTC	KETONE TEST STRIPS STRP	C	
ACCU-CHEK GUIDE STRP	P	RX/OTC	KETONE STRP	C	
ACCU-CHEK SMARTVIEW STRIPS STRP	P	RX/OTC	KETOSTIX STRP	C	
ALBUSTIX STRP	NC		MEDICATED BUCCAL DNA COLLECTION KIT	NC	
CARESENS N BLOOD GLUCOSE TEST STRIPS STRP	NC	RX/OTC	MEDICATED BUCCAL DNA COLLECTION KIT 2	NC	
CHEMSTRIP MICRAL STRP	NC		MEDICATED DNA COLLECTIONKIT	NC	
CHEMSTRIP-K STRP	C		MILKSCREEN FOR BREASTFEEDING	NC	
CHOLESTEROL & LIPID TEST	NC		MM BLULINK GLUCOSE TEST STRIPS STRP	NC	RX/OTC
CLINISTIX KIDNEY HEALTH	NC		ONETOUCH ULTRA STRP	NC	Limit 150 per 30 days insulin users;100 per 90 days non-insulin user; RX/OTC
CONTOUR PLUS BLOOD GLUCOSE TEST STRIPS STRP	NC	RX/OTC	ONETOUCH ULTRA STRP	P	RX/OTC
CVS TRUE METRIX BLOOD GLUCOSE TEST STRIPS STRP	NC	RX/OTC	ONETOUCH VERIO TEST STRIPS STRP	P	RX/OTC
DX1 ORAGENOMIC MEDICATEDDNA COLLECTION SCREEN	NC				
DX2 ORAGENOMIC MEDICATEDDNA COLLECTION SCREEN	NC				
EASY MAX BLOOD GLUCOSE TEST STRIP STRP	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ONETOUCH VERIO TEST STRIPS STRP	NC	Limit 150 per 30 days insulin users; 100 per 90 days non-insulin user; RX/OTC	<i>iodixanol</i>	NC	
PRECISION XTRA BLOOD GLUCOSE TEST STRIPS STRP	P		<i>iopamidol IV</i>	NC	
PRO DNA COLLECTION KIT	NC		ISOVUE-250 MULTIPACK IV	NC	
PTS PANELS CHOL+GLU	NC		OMNIPAQUE SOLN IJ 180 MG/ML, 240 MG/ML, 300 MG/ML	NC	
PTS PANELS LIPID PANEL+EGLU TEST STRIPS	NC		ULTRAVIST 62 %, 77 %	NC	
RELION KETONE TEST STRIPS STRP	C		VISIPAQUE ( <i>Use iodixanol</i> )	NC	
UDSX MEDICATED SYSTEM	NC		<b>DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS</b>		
UDSXMP MEDICATED SYSTEM	NC		Dietary Management Products		
URINX MEDICATED SPECIMEN COLLECTION PACKAGE	NC		CEREFOLIN	NC	
VIVAGUARD INO BLOOD GLUCOSE TEST STRIPS STRP	NC	RX/OTC	CEREFOLIN NAC 600 MG-2 MG-6 MG-90.314 MG	NC	
Miscellaneous Contrast Media			ELFOLATE PLUS TABS	NC	
DEFINITY	NC		FOLBIC RF TABS	NC	
DEFINITY RT	NC		FOLTANX RF	NC	
EOVIST	NC		FOLTANX TABS	NC	
GADAVIST SOSY	NC		FOLTANX TABS	NC	
<i>gadobutrol SOLN</i>	NC		FOLTX TABS	NC	
<i>gadoterate meglumine SOLN</i>	NC		LEVOMEFOLATE CALCIUM/N-ACETYLCYSTEINE/MEC OBALAMIN/ALGAL POWD	NC	
<i>gadoterate meglumine SOSY</i>	NC		L-METHYL-B6-B12 TABS	NC	
OMNISCAN INJ IJ	NC		L-METHYLFOLATE CA ME-CBLNAC	NC	
OMNISCAN SOLN IV	NC		L-METHYLFOLATE CA/P-5-P/ME-CBL	NC	
OPTISON	NC		L-METHYL-MC	NC	
Radiographic Contrast Media			METAFOLBIC	NC	
			METAFOLBIC PLUS	NC	
			METAFOLBIC PLUS RF	NC	
			METANX	NC	
			Nutritional Substitutes		
			ASPARTAME	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ASPARTAME (NUTRASWEET)	NC	RX/OTC	<b>Diuretic Combinations</b>		
SACCHARIN POWD	NC	RX/OTC	ALDACTAZIDE	NC	
<b>DIGESTIVE AIDS - Drugs to Treat Low Digestive Enzymes</b>			ALDACTAZIDE (Use spironolactone & hydrochlorothiazide)	NC	
Digestive Enzymes			amiloride & hydrochlorothiazide	C	QL(1 ea daily)
CREON CPEP	P	Smart PA	MAXZIDE-25 TABS (Use triamterene & hydrochlorothiazide)	NC	QL(2 ea daily)
CREON CPEP 30000 UNIT-19000 UNIT-6000 UNIT, 60000 UNIT-38000 UNIT-12000 UNIT	NC	Smart PA	MAXZIDE TABS (Use triamterene & hydrochlorothiazide)	NC	
PEPSIN	NC		spironolactone & hydrochlorothiazide	C	
PERTZYE CPEP	NP		triamterene & hydrochlorothiazide CAPS 25 MG-37.5 MG	C	
VIOKACE TABS	NP		triamterene & hydrochlorothiazide TABS 50 MG-75 MG	C	
ZENPEP CPEP 105000 UNIT-79000 UNIT-25000 UNIT, 14000 UNIT-10000 UNIT-3000 UNIT, 168000 UNIT-126000 UNIT-40000 UNIT, 24000 UNIT-17000 UNIT-5000 UNIT, 252600 UNIT-189600 UNIT-60000 UNIT, 42000 UNIT-32000 UNIT-10000 UNIT, 63000 UNIT-47000 UNIT-15000 UNIT, 84000 UNIT-63000 UNIT-20000 UNIT	P		triamterene & hydrochlorothiazide TABS 25 MG-37.5 MG	C	QL(2 ea daily)
<b>Gastric Acidifiers</b>			<b>Loop Diuretics</b>		
L-GLUTAMIC ACID HCL POWD	NC		bumetanide SOLN 0.25 MG/ML	NC	
<b>DIURETICS - Drugs to Treat Heart, Circulation Conditions and Blood Pressure</b>			bumetanide TABS	C	
Carbonic Anhydrase Inhibitors			BUMEX TABS 0.5 MG (Use bumetanide)	NC	
acetazolamide sodium	NC		ethacrynate sodium	NC	
acetazolamide CP12	C		ethacrynic acid	NC	
acetazolamide TABS	C		FUROSEMIDE POWD	NC	
dichlorphenamide	NC	SP	furosemide SOLN IJ 10 MG/ML	NC	
METHAZOLAMIDE POWD	NC		furosemide SOLN OR 10 MG/ML, 40 MG/5ML	C	
methazolamide TABS	C		furosemide TABS	C	
			LASIX TABS (Use furosemide)	NC	
			SOAANZ TABS 20 MG	C	

Drug Name	Drug Tier	Requirements/Limits
SODIUM EDECIN ( <i>Use ethacrynate sodium</i> )	NC	
<i>toremide TABS 5 MG, 10 MG, 100 MG</i>	C	QL(1 ea daily)
<i>toremide TABS 20 MG</i>	C	
Osmotic Diuretics		
<i>mannitol 10 %, 20 %, 25 %</i>	NC	
Potassium Sparing Diuretics		
ALDACTONE TABS ( <i>Use spironolactone</i> )	NC	
AMILORIDE HCL POWD	NC	
<i>amiloride hcl TABS</i>	C	QL(4 ea daily)
SPIRONOLACTONE POWD	NC	
<i>spironolactone SUSP</i>	NC	
<i>spironolactone TABS</i>	C	
<i>triamterene CAPS</i>	NC	
TRIAMTERENE POWD	NC	
Thiazides and Thiazide-Like Diuretics		
<i>chlorothiazide sodium</i>	NC	
<i>chlorthalidone 25 MG, 50 MG</i>	C	
DIURIL SUSP	NC	
<i>hydrochlorothiazide CAPS</i>	C	
HYDROCHLOROTHIAZIDE POWD	NC	
<i>hydrochlorothiazide TABS 12.5 MG</i>	NC	
<i>hydrochlorothiazide TABS 25 MG, 50 MG</i>	C	
<i>indapamide TABS 1.25 MG, 2.5 MG</i>	C	
<i>metolazone</i>	C	
SODIUM DIURIL ( <i>Use chlorothiazide sodium</i> )	NC	
THALITONE	NC	
<b>ENDOCRINE AND METABOLIC AGENTS - MISC.</b>		

Drug Name	Drug Tier	Requirements/Limits
<b>- Drugs to Treat Bone Disease and Regulate Hormones</b>		
Bone Density Regulators		
ACTONEL TABS 150 MG ( <i>Use risedronate sodium</i> )	NP	
ACTONEL TABS 35 MG ( <i>Use risedronate sodium</i> )	NP	QL(4 ea per 28 day(s) retail)
<i>alendronate sodium SOLN</i>	NP	QL(10.8 ml daily)
<i>alendronate sodium TABS 10 MG</i>	P	QL(1 ea daily)
<i>alendronate sodium TABS 35 MG, 70 MG</i>	P	QL(0.15 ea daily)
<i>alendronate sodium TABS 70 MG</i>	NC	QL(0.15 ea daily)
<i>alendronate sodium TABS 10 MG</i>	NC	QL(1 ea daily)
ATELVIA TBEC ( <i>Use risedronate sodium</i> )	NP	QL(4 ea per 28 day(s) retail)
BINOSTO TBEF	NP	
<i>calcitonin (salmon) NA</i>	P	1 package(s) per fill retail
<i>calcitonin (salmon) IJ</i>	C	QL(2 ml per fill retail)
FORTEO SOPN ( <i>Use teriparatide (recombinant)</i> )	NP	SP
FOSAMAX PLUS D	NP	
FOSAMAX TABS 70 MG ( <i>Use alendronate sodium</i> )	NP	QL(0.15 ea daily)
<i>ibandronate sodium TABS</i>	P	
MIACALCIN IJ ( <i>Use calcitonin (salmon)</i> )	NC	QL(2 ml per fill retail)
<i>risedronate sodium TABS 35 MG</i>	NC	QL(4 ea per 28 day(s) retail)
<i>risedronate sodium TABS 5 MG, 30 MG</i>	NC	QL(1 ea daily)
<i>risedronate sodium TABS 5 MG, 30 MG</i>	NP	QL(1 ea daily)
<i>risedronate sodium TABS 150 MG</i>	NP	

Drug Name	Drug Tier	Requirements/Limits
<i>risedronate sodium TABS 35 MG</i>	NP	QL(4 ea per 28 day(s) retail)
<i>risedronate sodium TBEC</i>	NP	QL(4 ea per 28 day(s) retail)
<i>risedronate sodium TBEC</i>	NC	QL(4 ea per 28 day(s) retail)
<i>teriparatide (recombinant) SOPN</i>	P	
TYMLOS	NP	SP
TYMLOS	NP	
Corticotropin		
ACTHAR GEL AUIJ	NC	
Fertility Regulators		
CLOMIPHENE CITRATE POWD	NC	
GnRH/LHRH Antagonists		
ORLISSA	NC	SP
Growth Hormone Releasing Hormones (GHRH)		
EGRIFTA 2 MG	NC	SP
EGRIFTA SV	NC	SP
Growth Hormones		
NGENLA	NP	
NORDITROPIN FLEXPPO SOPN	PA	SP; PA
OMNITROPE SOCT	NC	
OMNITROPE SOLR SC	NC	
SKYTROFA	NP	
ZOMACTON SOLR SC	NP	SP
Hormone Receptor Modulators		
EVISTA ( <i>Use raloxifene hcl</i> )	NP	QL(1 ea daily)
OSPHEA	NC	
<i>raloxifene hcl</i>	NP	QL(1 ea daily)
LHRH/GnRH Agonist Analog Pituitary Suppressants		
FENSOLVI SC	C	SP; PA

Drug Name	Drug Tier	Requirements/Limits
Menopausal Symptoms Suppressants		
VEOZAH	NC	
Metabolic Modifiers		
BRINEURA	NC	SP
<i>calcitriol CAPS</i>	C	
<i>calcitriol SOLN IV</i>	NC	
<i>carglumic acid</i>	NC	SP
CARNITOR SF SOLN OR ( <i>Use levocarnitine (metabolic modifiers)</i> )	NC	QL(30 ml daily)
CARNITOR SOLN OR 1 GM/10ML ( <i>Use levocarnitine (metabolic modifiers)</i> )	NC	QL(30 ml daily)
CARNITOR TABS ( <i>Use levocarnitine (metabolic modifiers)</i> )	NC	QL(3 ea daily)
<i>doxercalciferol CAPS</i>	NC	
<i>doxercalciferol SOLN</i>	NC	
ELFABRIO	NC	SP
GALAFOLD	C	QL(0.5 ea daily); SP; PA
<i>levocarnitine (metabolic modifiers) SOLN IV 200 MG/ML</i>	NC	
<i>levocarnitine (metabolic modifiers) SOLN OR 1 GM/10ML</i>	C	QL(30 ml daily)
<i>levocarnitine (metabolic modifiers) TABS</i>	C	QL(3 ea daily)
NEXVIAZYME	NC	SP
NULIBRY	NC	SP
<i>paricalcitol CAPS</i>	NC	
PHEBURANE PLLT	NC	
RAYALDEE	NC	
ROCALTROL CAPS ( <i>Use calcitriol</i> )	NC	
<i>sod benzoate &amp; sod phenylacetate</i>	NC	
Mineralocorticoid Receptor Antagonists		

Drug Name	Drug Tier	Requirements/Limits
KERENDIA	NC	
Posterior Pituitary Hormones		
DDAVP TABS ( <i>Use desmopressin acetate</i> )	NC	QL(6 ea daily)
<i>desmopressin acetate spray</i>	C	QL(5 ml per fill retail); PA
<i>desmopressin acetate spray refrigerated</i>	C	QL(5 ml per fill retail); PA
<i>desmopressin acetate TABS</i>	C	QL(6 ea daily)
NOCDURNA SUBL	NC	
VASOPRESSIN/SODIUM CHLORIDE SOLN 0.9 %-20 UNIT/100ML, 0.9 %-40 UNIT/100ML	NC	
<i>vasopressin SOLN IV</i>	NC	
VASOSTRICT SOLN	NC	
Progesterone Receptor Antagonists		
<i>mifepristone</i>	NC	
Prolactin Inhibitors		
<i>cabergoline</i>	NC	
Somatostatic Agents		
<i>octreotide acetate SOSY</i>	NC	SP
SANDOSTATIN LAR DEPOT KIT	C	SP; PA
Vasopressin Receptor Antagonists		
VAPRISOL	NC	
<b>ESTROGENS - Hormone Replacement/Modifying Drugs</b>		
Estrogen Combinations		
ACTIVELLA TABS 1 MG-0.5 MG ( <i>Use estradiol &amp; norethindrone acetate</i> )	NC	QL(1 ea daily)
ANGELIQ	NC	
BIJUVA	NC	
CLIMARA PRO	NC	

Drug Name	Drug Tier	Requirements/Limits
COMBIPATCH PTTW	C	Limit 8 patches per month; QL(0.286 ea daily)
DUAVEE	NC	
<i>estradiol &amp; norethindrone acetate TABS</i>	C	QL(1 ea daily)
MYFEMBREE	NC	
<i>norethindrone acetate-ethinyl estradiol</i>	C	
ORIAHNN	NC	
PREFEST	NC	
PREMPHASE	NC	
PREMPRO	C	
Estrogens		
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	C	Limit 8 patches per month; QL(0.286 ea daily)
CLIMARA PTWK ( <i>Use estradiol</i> )	NC	Limit 4 patches per month; QL(0.143 ea daily)
DEPO-ESTRADIOL	NC	
ELESTRIN GEL	NC	
ESTRACE TABS ( <i>Use estradiol</i> )	NC	
<i>estradiol valerate</i>	NC	
<i>estradiol GEL</i>	NC	
<i>estradiol PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR</i>	C	Limit 8 patches per month; QL(0.286 ea daily)
<i>estradiol PTTW 0.0375 MG/24HR</i>	C	QL(0.286 ea daily)
<i>estradiol PTWK</i>	C	Limit 4 patches per month; QL(0.143 ea daily)
<i>estradiol TABS</i>	C	
ETHINYL ESTRADIOL	NC	
EVAMIST SOLN	NC	

Drug Name	Drug Tier	Requirements/Limits
MENEST	NC	
MENOSTAR PTWK	NC	
MINIVELLE PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol)	NC	Limit 8 patches per month; QL(0.286 ea daily)
MINIVELLE PTTW 0.0375 MG/24HR (Use estradiol)	NC	QL(0.286 ea daily)
PREMARIN SOLR	NC	
PREMARIN TABS	C	QL(1 ea daily)
VIVELLE-DOT PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol)	NC	Limit 8 patches per month; QL(0.286 ea daily)
VIVELLE-DOT PTTW 0.0375 MG/24HR (Use estradiol)	NC	QL(0.286 ea daily)
<b>FLUOROQUINOLONES - Drugs to Treat Bacterial Infections</b>		
Fluoroquinolones		
BAXDELA TABS	NP	
<i>ciprofloxacin hcl TABS 100 MG</i>	P	QL(6 ea per fill retail)
<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	NC	
<i>ciprofloxacin hcl TABS 250 MG, 500 MG, 750 MG</i>	P	
<i>ciprofloxacin in d5w</i>	NC	
<i>ciprofloxacin SUSR 5 GM/100ML, 500 MG/5ML</i>	NP	
CIPRO SUSR	NP	
CIPRO TABS 250 MG, 500 MG (Use <i>ciprofloxacin hcl</i> )	NP	
<i>levofloxacin in d5w</i>	NC	
<i>levofloxacin SOLN OR</i>	NP	
<i>levofloxacin SOLN OR</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>levofloxacin TABS</i>	P	QL(14 ea per fill retail)
<i>moxifloxacin hcl in sodium chloride</i>	NC	
<i>moxifloxacin hcl TABS</i>	NP	
<i>moxifloxacin hcl TABS</i>	NC	
MOXIFLOXACIN HYDROCHLORIDE SOLN 400 MG/250ML	NC	
<i>ofloxacin 400 MG</i>	NP	QL(56 ea per fill retail)
<i>ofloxacin 300 MG</i>	NP	
<b>GASTROINTESTINAL AGENTS - MISC. - Miscellaneous Gastrointestinal Drugs</b>		
5-HT4 Receptor Agonists		
MOTEGRITY 2 MG	NC	
MOTEGRITY	NP	
Agents for Chronic Idiopathic Constipation (CIC)		
TRULANCE	NP	
TRULANCE	NC	
Antiflatulents		
MYLICON INFANTS GAS RELIEF DYE FREE SUSP (Use <i>simethicone</i> )	NC	
MYLICON INFANTS GAS RELIEF SUSP (Use <i>simethicone</i> )	NC	
PHAZYME ULTIMATE CAPS	NC	
<i>simethicone CHEW 80 MG</i>	C	
SIMETHICONE LIQD XX	NC	RX/OTC
<i>simethicone SUSP</i>	C	
Gallstone Solubilizing Agents		
RELTONE CAPS	NC	
URSO 250 TABS (Use <i>ursodiol</i> )	NC	QL(7 ea daily)
<i>ursodiol CAPS</i>	C	
URSODIOL CAPS	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ursodiol TABS 500 MG	NC		APRISO CP24 (Use mesalamine)	P	
ursodiol TABS 250 MG	C	QL(7 ea daily)	ASACOL HD TBEC (Use mesalamine)	NC	QL(3 ea daily)
Gastrointestinal Antiallergy Agents			AVSOLA	C	SP; PA
cromolyn sodium (mastocytosis)	NC		AZULFIDINE EN-TABS TBEC (Use sulfasalazine)	NP	
Gastrointestinal Chloride Channel Activators			AZULFIDINE TABS (Use sulfasalazine)	NC	
AMITIZA (Use lubiprostone)	P		AZULFIDINE TABS (Use sulfasalazine)	NP	
lubiprostone	NP		balsalazide disodium CAPS	P	QL(9 ea daily)
lubiprostone	NC		CANASA SUPP (Use mesalamine)	NP	
Gastrointestinal Stimulants			CIMZIA STARTER KIT PSKT	NP	SP
GIMOTI SOLN NA	NP	SP	CIMZIA KIT	NP	SP
METOCLOPRAMIDE HCL MONOHYDRATE	NC		CIMZIA PSKT	NP	SP
METOCLOPRAMIDE HCL POWD	NC		COLAZAL CAPS (Use balsalazide disodium)	NP	QL(9 ea daily)
metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML	P		DELZICOL CPDR (Use mesalamine)	NP	
metoclopramide hcl SOLN IJ 5 MG/ML	NC		DIPENTUM	NP	
metoclopramide hcl TABS	P		ENTYVIO SOPN	NP	
metoclopramide hcl TABS	NC		INFLECTRA SOLR	C	SP; PA
METOCLOPRAMIDE HYDROCHLORIDE POWD	NC		LIALDA TBEC (Use mesalamine)	NP	
REGLAN TABS (Use metoclopramide hcl)	NP		mesalamine w/ cleanser	NP	
Hepatotropics			mesalamine CP24	NC	
REZDIFFRA	NC		mesalamine CP24	NP	
Ileal Bile Acid Transporter (IBAT) Inhibitors			mesalamine CPDR	NP	
BYLVAY (PELLETS) CPSP	NC	SP	mesalamine ENEM	P	QL(60 ml daily)
BYLVAY CAPS	NC	SP	MESALAMINE POWD	NC	RX/OTC
LIVMARLI	NC	SP	mesalamine SUPP	P	
Inflammatory Bowel Agents			mesalamine TBEC 1.2 GM	NP	
5-AMINOSALICYLIC ACID POWD	NC	RX/OTC	mesalamine TBEC 800 MG	NP	QL(3 ea daily)
			OMVOH SOAJ	NP	



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PENTASA CPCR ( <i>Use mesalamine</i> )	P		Receptor(PPAR) Agonists		
RENFLEXIS	C	SP; PA	LIVDELZI	NC	
ROWASA ( <i>Use mesalamine w/ cleanser</i> )	NP		Phosphate Binder Agents		
SFROWASA ENEM	NP		AURYXIA	NP	
SKYRIZI SOCT	NP		<i>calcium acetate (phosphate binder) CAPS</i>	NC	
STELARA 130 MG/26ML	NC	SP	<i>calcium acetate (phosphate binder) CAPS</i>	P	
SULFASALAZINE POWD	NC		FOSRENOL CHEW ( <i>Use lanthanum carbonate</i> )	NP	
<i>sulfasalazine TABS</i>	NC		FOSRENOL PACK	NP	
<i>sulfasalazine TABS</i>	P		<i>lanthanum carbonate CHEW</i>	NP	
<i>sulfasalazine TBEC</i>	P		PHOSLYRA SOLN	NP	
ZYMFENTRA 2-PEN AJKT	NP		RENAGEL ( <i>Use sevelamer hcl</i> )	NC	
Intestinal Acidifiers			RENVELA PACK ( <i>Use sevelamer carbonate</i> )	NP	
<i>lactulose (encephalopathy)</i>	P		RENVELA TABS ( <i>Use sevelamer carbonate</i> )	NP	
<i>lactulose (encephalopathy)</i>	NC		<i>sevelamer carbonate PACK</i>	NP	
Irritable Bowel Syndrome (IBS) Agents			<i>sevelamer carbonate TABS</i>	P	
<i>alose tron hcl</i>	NC		<i>sevelamer carbonate TABS</i>	NC	
<i>alose tron hcl</i>	NP		<i>sevelamer hcl</i>	NP	
IBSRELA	NP		VELPHORO	NP	
LINZESS	P		<b>GENERAL ANESTHETICS</b>		
LOTRONEX ( <i>Use alosetron hcl</i> )	NP		Anesthetics - Misc.		
VIBERZI	NP		DIPRIVAN EMUL	NC	
Live Fecal Microbiota			<i>etomidate</i>	NC	
REBYOTA	NC		FRESENIUS PROPOVEN 2% EMUL	NC	
Peripheral Opioid Receptor Antagonists			<i>ketamine hcl SOLN IJ</i>	NC	
<i>alvimopan</i>	NC		KETAMINE HYDROCHLORIDE SOLN IJ 10 MG/ML	NC	
ENTEREG ( <i>Use alvimopan</i> )	NC		<i>propofol EMUL</i>	NC	
MOVANTIK	P				
RELISTOR SOLN	NP				
RELISTOR TABS	NP				
Peroxisome Proliferator-Activated					

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Barbiturate Anesthetics			UROCIT-K 5 TBCR ( <i>Use potassium citrate (alkalinizer)</i> )	NC	
BREVITAL SODIUM SOLR 500 MG	NC		Genitourinary Irrigants		
Volatile Anesthetics			<i>acetic acid 0.25 %</i>	NC	
<i>desflurane</i>	NC		<i>glycine (gu irrigant) SOLN 1.5 %</i>	NC	
<i>isoflurane</i>	NC		GLYCINE (L) POWD	NC	RX/OTC
<i>sevoflurane</i>	NC		GLYCINE POWD	NC	RX/OTC
<b>GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous Drugs to Treat Reproductive Organs and Urinary System</b>			<i>neomycin/polymyxin b gu</i>	NC	
Acidifiers			<i>sodium chloride (gu irrigant) 0.9 %</i>	C	
K-PHOS NO 2	NC		SORBITOL 3 %	NC	
Alkalinizers			SORBITOL/MANNITOL IRRIGATION	NC	
ORACIT	NC		Hyperoxaluria Agents		
ORAL CITRATE	NC		OXLUMO	NC	SP
<i>pot &amp; sod citrates w/citric ac SOLN</i>	NC		Interstitial Cystitis Agents		
<i>potassium citrate (alkalinizer) TBCR 10 MEQ, 540 MG, 1080 MG</i>	C		ELMIRON CAPS	NC	
<i>potassium citrate (alkalinizer) TBCR 15 MEQ, 1620 MG</i>	NC		RIMSO-50	NC	
POTASSIUM CITRATE MONOHYDRATE GRAN	NC	RX/OTC	Prostatic Hypertrophy Agents		
POTASSIUM CITRATE GRAN	NC	RX/OTC	<i>alfuzosin hcl</i>	NC	
POTASSIUM CITRATE POWD	NC		<i>alfuzosin hcl</i>	P	
<i>sodium citrate &amp; citric acid</i>	C	QL(16.67 ml daily); RX/OTC	AVODART ( <i>Use dutasteride</i> )	NP	
SODIUM CITRATE ANHYDROUS GRAN XX	NC	RX/OTC	AVODART ( <i>Use dutasteride</i> )	NC	
SODIUM CITRATE ANHYDROUS POWD	NC		CARDURA XL	NC	
SODIUM CITRATE CRYST	NC		CARDURA XL	NP	
UROCIT-K 10 TBCR ( <i>Use potassium citrate (alkalinizer)</i> )	NC		<i>dutasteride</i>	NC	
			<i>dutasteride</i>	P	
			<i>dutasteride-tamsulosin hcl</i>	NP	
			ENTADFI	NC	
			<i>finasteride</i>	NC	QL(1 ea daily)
			<i>finasteride</i>	P	QL(1 ea daily)
			FLOMAX ( <i>Use tamsulosin hcl</i> )	NP	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
JALYN (Use dutasteride-tamsulosin hcl)	NP	
PROSCAR (Use finasteride)	NP	QL(1 ea daily)
RAPAFLO 8 MG (Use silodosin)	NC	
RAPAFLO (Use silodosin)	NP	
silodosin	NP	
silodosin	NC	
tamsulosin hcl	P	QL(2 ea daily)
tamsulosin hcl	NC	QL(2 ea daily)
UROXATRAL (Use alfuzosin hcl)	NC	
Urinary Analgesics		
PHENAZOPYRIDINE HCL POWD	NC	
phenazopyridine hcl TABS 100 MG, 100 MG, 200 MG	C	
PHENAZOPYRIDINE HYDROCHLORIDE POWD	NC	
PYRIDIDIUM TABS (Use phenazopyridine hcl)	NC	
Urinary Stone Agents		
LITHOSTAT	NC	
<b>GOUT AGENTS - Drugs to Treat Gout</b>		
Gout Agent Combinations		
colchicine w/ probenecid	P	
Gout Agents		
allopurinol	NC	
allopurinol	P	
ALLOPURINOL	NP	
allopurinol sodium	NC	
colchicine CAPS	NP	
COLCHICINE POWD	NC	

Drug Name	Drug Tier	Requirements/Limits
colchicine TABS	P	QL(6 ea per fill retail); 1 max fill(s) per 31 day(s) retail
colchicine TABS	NC	QL(6 ea per fill retail); 1 max fill(s) per 31 day(s) retail
COLCRYST TABS (Use colchicine)	NP	QL(6 ea per fill retail); 1 max fill(s) per 31 day(s) retail
febuxostat	NP	
febuxostat 80 MG	NC	
GLOPERBA SOLN OR	NP	
MITIGARE CAPS (Use colchicine)	NP	
ULORIC (Use febuxostat)	NP	
ZYLOPRIM 100 MG (Use allopurinol)	NP	
ZYLOPRIM 300 MG (Use allopurinol)	NC	
Uricosurics		
probenecid	P	
probenecid	NC	
<b>HEMATOLOGICAL AGENTS - MISC. - Drugs to Treat Blood Disorders</b>		
Aminolevulinic Synthase 1-Directed siRNA		
GIVLAARI	C	SP; PA
Antihemophilic Products		
HEMLIBRA 12 MG/0.4ML	NC	
NUWIQ KIT	NC	SP
NUWIQ SOLR	NC	SP
SEVENFACT	NC	SP
Bradykinin B2 Receptor Antagonists		
FIRAZYR SOSY (Use icatibant acetate)	NC	SP; PA
icatibant acetate SOSY	C	SP; PA
Complement Inhibitors		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BERINERT KIT	NC	SP	OCTAPLAS BLOOD GROUP B	NC	
CINRYZE SOLR IV	NC	SP	OCTAPLAS BLOOD GROUP O	NC	
HAEGARDA SOLR SC	C	SP; PA	Platelet Aggregation Inhibitors		
PIASKY	NC		AGGRASTAT 3.75 MG/15ML	NC	
RUCONEST	NC	SP	<i>anagrelide hcl</i>	NC	
TAVNEOS	NP		ASPIRIN/OMEPRazole 81 MG-40 MG	NC	
VOYDEYA TABS	NC		ASPIRIN/OMEPRazole ER	NC	
VOYDEYA TBPk	NC		<i>aspirin-dipyridamole</i>	NP	
Hematorheologic Agents			<i>aspirin-dipyridamole</i>	NC	
<i>pentoxifylline</i>	C		BRILINTA	P	QL(2 ea daily)
Plasma Expanders			<i>cilostazol</i>	C	QL(2 ea daily)
<i>dextran 40 in d5w</i>	NC		<i>clopidogrel bisulfate 75 MG</i>	NC	QL(1 ea daily)
<i>dextran 40 in saline</i>	NC		<i>clopidogrel bisulfate 75 MG</i>	P	QL(1 ea daily)
<i>hetastarch (hes /0.7 or /0.75) in sodium chloride</i>	NC		<i>clopidogrel bisulfate 300 MG</i>	NC	
HEXTEND	NC		<i>clopidogrel bisulfate 300 MG</i>	P	
Plasma Kallikrein Inhibitors			<i>dipyridamole</i>	NC	
KALBITOR	NC	SP	<i>dipyridamole</i>	NP	
TAKHZYRO SOLN	NC	SP	EFFIENT ( <i>Use prasugrel hcl</i> )	NC	QL(1 ea daily)
TAKHZYRO SOSY	NC	SP	EFFIENT ( <i>Use prasugrel hcl</i> )	NP	QL(1 ea daily)
Plasma Proteins			<i>eptifibatide</i>	NC	
ALBUKED 25	NC		KENGREAL	NC	
ALBUKED 5	NC		PLAVIX 75 MG ( <i>Use clopidogrel bisulfate</i> )	NP	QL(1 ea daily)
ALBUMIN HUMAN	NC		<i>prasugrel hcl</i>	P	QL(1 ea daily)
ALBUMINEX	NC		<i>prasugrel hcl 10 MG</i>	NC	QL(1 ea daily)
ALBUMIN-ZLB	NC		<i>tirofiban hcl in sodium chloride</i>	NC	
ALBURX	NC		YOSPRALA 81 MG-40 MG	NC	
ALBUTEIN	NC				
FLEXBUMIN	NC				
HUMAN ALBUMIN GRIFOLS	NC				
KEDBUMIN	NC				
OCTAPLAS BLOOD GROUP A	NC				
OCTAPLAS BLOOD GROUP AB	NC				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
Protamine			ARANESP ALBUMIN FREE SOSY 10 MCG/0.4ML, 25 MCG/0.42ML, 40 MCG/0.4ML, 60 MCG/0.3ML, 100 MCG/0.5ML, 150 MCG/0.3ML	NP	
<i>protamine sulfate</i>	NC				
Thrombolytic Enzymes					
ACTIVASE IV	NC				
CATHFLO ACTIVASE IJ	NC				
RETAVASE 10 UNIT	NC				
RETAVASE HALF-KIT 10 UNIT	NC				
TNKASE	NC		EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	P	
<b>HEMATOPOIETIC AGENTS - Drugs to Treat Blood Disorders</b>			JESDUVROQ	NP	
Agents for Gaucher Disease			PROCRIT	NP	
CERDELGA	C	SP; PA	PROCRIT	NP	
CEREZYME 400 UNIT	C	SP; PA	PROMACTA PACK	NC	SP
Agents for Sickle Cell Disease			REBLOZYL	C	SP
ADAKVEO	C	SP; PA	RETACRIT	P	SP
DROXIA CAPS	C		VAFSEO	NP	
Cobalamins			ZARXIO	C	SP; PA
<i>cyanocobalamin SOLN NA 500 MCG/0.1ML</i>	NC		ZIEXTENZO	NC	SP
<i>cyanocobalamin SOLN IJ 1000 MCG/ML</i>	C	QL(10 ml per 270 day(s) retail)	<b>Hematopoietic Mixtures</b>		
<i>hydroxocobalamin acetate SOLN</i>	NC		ACTIVE FE	NC	
Folic Acid/Folates			BENTIVITE TABS	NC	
FOLIC ACID POWD	NC	RX/OTC	BP VIT 3	NC	
<i>folic acid SOLN</i>	NC		CENTRATEX CAPS	NC	
<i>folic acid TABS 400 MCG</i>	C	QL(1 ea daily)	CORVITE 150 TABS	NC	
<i>folic acid TABS 1 MG</i>	C	RX/OTC	CORVITE FE TABS	NC	
Hematopoietic Growth Factors			DERMACINRX DOTREMIN TABS	NC	
ARANESP ALBUMIN FREE SOLN 25 MCG/ML, 40 MCG/ML, 60 MCG/ML, 100 MCG/ML	NP		DERMACINRX FOLTAMIN TABS	NC	
			<i>fe fum-iron polysacch complex-fa-b complex-c-zn-mn-cu</i>	NC	
			FERIVA 21/7	NC	
			FERIVAF A	NC	
			FOLDITAM TABS	NC	
			FOLGARD RX TABS	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>folic acid-vitamin b6-vitamin b12 TABS 10 MG-800 MCG-115 MCG, 25 MG-2.2 MG-1 MG, 25 MG-2.5 MG-1 MG</i>	NC		FERROUS SULFATE HEPTAHYDRATE GRAN	NC	RX/OTC
FOLITE	NC		FERROUS SULFATE GRAN	NC	RX/OTC
FOLIVANE-F	NC		FERROUS SULFATE POWD	NC	RX/OTC
FOLIVANE-PLUS	NC		<i>ferrous sulfate SOLN 300 MG/5ML</i>	NC	
FOLIXAPURE TABS	NC		<i>ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML</i>	C	
FOLIXATE TABS	NC		<i>ferrous sulfate SOLN 15 MG/ML</i>	C	QL(3.4 ml daily)
FOLTREXYL TABS	NC		<i>ferrous sulfate TABS 65 MG, 325 MG</i>	C	
HEMOCYTE PLUS CAPS	NC		<i>ferrous sulfate TBEC</i>	C	
INTEGRA F	NC		FERROUS SULFATE TBEC (Use ferrous sulfate)	NC	
INTEGRA PLUS	NC		<i>ferumoxytol</i>	NC	
IRON FOLATE PLUS	NC		HEMATEX POLYSACCHARIDE IRON COMPLEX TABS	NC	
IRON FOLATE-F	NC		HEMATEX LIQD	NC	
<i>iron-folic acid-vitamin c-vitamin b6-vitamin b12-zinc</i>	NC		INFED	NC	
IROSPAN 24/6	NC		INJECTAFER	NC	
NEPHRON FA	NC		IRON CHEWS PEDIATRIC CHEW	C	
NIFEREX TABS	NC		MONOFERRIC	NC	
NUFERA TABS	NC		<i>polysaccharide iron complex CAPS 150 MG</i>	C	QL(1 ea daily)
TALIVA	NC		<i>sodium ferric gluconate complex in sucrose</i>	NC	
TARON FORTE	NC		TRIFERIC PACK	NC	
TULIVITE TABS	NC		TRIFERIC SOLN HM	NC	
VITAMEZ	NC		VENOFER	NC	
<b>Iron</b>			<b>HEMOSTATICS - Drugs to Stop Bleeding/Treat Blood Disorders</b>		
ACCRUFER	NC		<b>Hemostatics - Systemic</b>		
FER-IN-SOL SOLN (Use ferrous sulfate)	NC	QL(3.4 ml daily)			
FERRIMIN 150 TABS	NC				
<i>ferrous fumarate TABS 324 MG</i>	C	QL(2 ea daily)			
FERROUS GLUCONATE TABS 324 MG	C	QL(3.34 ea daily)			
FERROUS SULFATE ANHYDROUS POWD	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LYSTEDA TABS ( <i>Use tranexamic acid</i> )	NC	QL(30 ea per 5 day(s) retail); 1 max fill(s) per 31 day(s) retail; AL(At least 12 yrs old)	THROMBIN-JMI EPISTAXIS KIT	NC	
TRANEXAMIC ACID/SODIUM CHLORIDE	NC		THROMBIN-JMI SYRINGE SPRAY KIT KIT	NC	
<i>tranexamic acid-sodium chloride</i>	NC		THROMBIN-JMI W/DIL SPRAYPUMP ACTUATOR KIT	NC	
<i>tranexamic acid SOLN 1000 MG/10ML</i>	NC		THROMBI-PAD	NC	
<i>tranexamic acid TABS</i>	C	QL(30 ea per 5 day(s) retail); 1 max fill(s) per 31 day(s) retail; AL(At least 12 yrs old)	TISSEEL KIT	NC	
Hemostatics - Topical			TISSEEL SOLN	NC	
ARTISS KIT	NC		<b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b>		
ARTISS SOLN	NC		Antihistamine Hypnotics		
ASTRINGYN	NC		<i>diphenhydramine hcl (sleep) TABS 25 MG</i>	C	QL(1 ea daily)
GEL-FLOW	NC		<i>doxylamine succinate (sleep)</i>	C	
GELFOAM DENTAL PACK MISC EX	NC		GNP PAIN RELIEF NIGHTTIME	NC	
GELFOAM SPONGE COMPRESSED MISC EX	NC		UNISOM SLEEPTABS ( <i>Use doxylamine succinate (sleep)</i> )	NC	
GELFOAM SPONGE MISC EX	NC		Barbiturate Hypnotics		
GELFOAM-JMI POWDER KIT	NC		AMYTAL SODIUM	NC	
GELFOAM POWD MT	NC		NEMBUTAL SODIUM SOLN ( <i>Use pentobarbital sodium</i> )	NC	
RECOTHROM	NC		PENTOBARBITAL SODIUM POWD	NC	
RECOTHROM/SPRAY APPLICATOR KIT	NC		<i>pentobarbital sodium SOLN</i>	NC	
TACHOSIL	NC		PHENOBARBITAL SODIUM POWD	NC	
THROMBI-GEL 10	NC		<i>phenobarbital sodium SOLN</i>	NC	
THROMBI-GEL 100	NC		<i>phenobarbital ELIX</i>	C	
THROMBI-GEL 40	NC		PHENOBARBITAL POWD	NC	
THROMBIN-JMI DILUENT SOLR	NC		<i>phenobarbital TABS</i>	C	
			Hypnotics - Tricyclic Agents		

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>doxepin hcl (sleep)</i>	NC		MIDAZOLAM HYDROCHLORIDE/SODIUM CHLORIDE SOLN IV 0.8 %-100 MG/100ML	NC	
<i>doxepin hcl (sleep)</i>	NP		MIDAZOLAM/SODIUM CHLORIDE	NC	
SILENOR ( <i>Use doxepin hcl (sleep)</i> )	NC		<i>midazolam-sodium chloride</i>	NC	
Non-Barbiturate Hypnotics			PRECEDEX SOLN	NC	
AMBIEN CR TBCR ( <i>Use zolpidem tartrate</i> )	NP		<i>quazepam</i>	NP	
AMBIEN TABS ( <i>Use zolpidem tartrate</i> )	NP	QL(1 ea daily)	<i>quazepam</i>	NC	
BYFAVO	NC		RESTORIL 7.5 MG, 22.5 MG ( <i>Use temazepam</i> )	NP	
CHLORAL HYDRATE CRYSTALS	NC		RESTORIL 15 MG, 30 MG ( <i>Use temazepam</i> )	NP	QL(1 ea daily); AL(At least 18 yrs old)
<i>dexmedetomidine hcl in sodium chloride SOLN</i>	NC		<i>temazepam 7.5 MG, 22.5 MG</i>	P	
<i>dexmedetomidine hcl SOLN</i>	NC		<i>temazepam 15 MG, 30 MG</i>	P	QL(1 ea daily); AL(At least 18 yrs old)
DEXMEDETOMIDINE HCL SOLN	NC		<i>triazolam</i>	NP	
DEXMEDETOMIDINE HYDROCHLORIDE/DEXTROROSE MONOHYDRATE	NC		<i>zaleplon 5 MG</i>	NP	QL(1 ea daily); AL(At least 18 yrs old)
DORAL ( <i>Use quazepam</i> )	NC		<i>zaleplon 10 MG</i>	NC	QL(2 ea daily); AL(At least 18 yrs old)
DORAL ( <i>Use quazepam</i> )	NP		<i>zaleplon 10 MG</i>	NP	QL(2 ea daily); AL(At least 18 yrs old)
EDLUAR SUBL	NP		<i>zaleplon 5 MG</i>	NC	QL(1 ea daily); AL(At least 18 yrs old)
<i>estazolam</i>	NP		ZOLPIDEM TARTRATE CAPS	NP	
<i>eszopiclone</i>	NP		<i>zolpidem tartrate SUBL</i>	NP	
<i>eszopiclone</i>	NC		<i>zolpidem tartrate TABS</i>	P	QL(1 ea daily)
<i>flurazepam hcl</i>	NP	QL(1 ea daily)	<i>zolpidem tartrate TABS</i>	NC	QL(1 ea daily)
HALCION 0.25 MG ( <i>Use triazolam</i> )	NP		<i>zolpidem tartrate TBCR</i>	NP	
IGALMI FILM	NC		<i>zolpidem tartrate TBCR</i>	NC	
IGALMI FILM	NP		Orexin Receptor Antagonists		
LUNESTA ( <i>Use eszopiclone</i> )	NP		BELSOMRA	NP	
LUNESTA ( <i>Use eszopiclone</i> )	NC				
<i>midazolam hcl SOLN IJ</i>	C				
<i>midazolam hcl SYRP</i>	NC				



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DAYVIGO	NP		SENOKOT LAXATIVE TEA	NC	
QUVIVIQ	NP		SENOKOT S TABS ( <i>Use sennosides-docusate sodium</i> )	NC	QL(4 ea daily)
Selective Melatonin Receptor Agonists			<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	NP	
HETLIOZ LQ SUSP	NP		<i>sodium sulfate-potassium sulfate-magnesium sulfate</i>	NC	
HETLIOZ CAPS ( <i>Use tasimelteon</i> )	NP		SUFLAVE	NP	
<i>ramelteon</i>	NP		SUPREP BOWEL PREP KIT ( <i>Use sodium sulfate-potassium sulfate-magnesium sulfate</i> )	NP	
<i>ramelteon</i>	NC		SUTAB	NP	
ROZEREM ( <i>Use ramelteon</i> )	NP		Laxatives - Miscellaneous		
<i>tasimelteon CAPS</i>	NP		<i>glycerin (laxative) SUPP 2 GM</i>	C	
<b>LAXATIVES - Bowel Treatment Drugs</b>			GLYCERIN ADULT SUPP ( <i>Use glycerin (laxative)</i> )	NC	
Bulk Laxatives			KRISTALOSE PACK	NP	
<i>calcium polycarbophil TABS</i>	C	QL(10 ea daily)	KRISTALOSE PACK	NP	
Laxative Combinations			LACTULOSE PACK	NC	
CLENPIQ SOLN 12 GM/175ML-3.5 GM/175ML-10 MG/175ML	NC		<i>lactulose SOLN</i>	NC	
GOLYTELY SOLR ( <i>Use peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i> )	NP	1 package(s) per fill retail	<i>lactulose SOLN</i>	P	
MOVIPREP ( <i>Use peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i> )	NP		MIRALAX POWD ( <i>Use polyethylene glycol 3350</i> )	NC	QL(34 gm daily)
<i>peg 3350-kcl-nacl-na sulfate-na ascorbate-ascorbic acid</i>	NP		<i>polyethylene glycol 3350 PACK</i>	P	
<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate SOLR</i>	P	1 package(s) per fill retail	<i>polyethylene glycol 3350 PACK</i>	NC	
<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>	NP	1 package(s) per fill retail	<i>polyethylene glycol 3350 POWD</i>	P	QL(34 gm daily)
PLENVU	NC		<i>polyethylene glycol 3350 POWD</i>	NC	QL(34 gm daily)
PLENVU	NP		Lubricant Laxatives		
<i>sennosides-docusate sodium TABS</i>	C	QL(4 ea daily)	MINERAL OIL HEAVY OIL XX	NC	RX/OTC
			MINERAL OIL LIGHT XX	NC	RX/OTC
			MINERAL OIL OIL XX	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
MURI-LUBE XX	NC	RX/OTC
Saline Laxatives		
CVS EPSOM SALT GRAN XX	NC	
EPSOM SALT GRAN XX	NC	
EPSOM SALT POWD	NC	RX/OTC
EQL EPSOM SALT GRAN XX	NC	
FLEET ENEMA ENEM (Use sodium phosphates)	NC	
FLEET PEDIATRIC ENEM (Use sodium phosphates)	NC	
FLEET SALINE ENEMA EXTRAVOLUME ENEM (Use sodium phosphates)	NC	
magnesium citrate 1.745 GM/30ML	P	
magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML	C	QL(32 ml daily)
MAGNESIUM SULFATE HEPTAHYDRATE POWD	NC	RX/OTC
MAGNESIUM SULFATE POWD	NC	RX/OTC
OSMOPREP	NC	
RA EPSOM SALT GRAN XX	NC	
sodium phosphates ENEM	C	
Stimulant Laxatives		
BISACODYL POWD	NC	
bisacodyl SUPP	C	QL(12 ea per fill retail)
bisacodyl TBEC	C	QL(1 ea daily)
DULCOLAX PINK LAXATIVE TBEC (Use bisacodyl)	NC	QL(1 ea daily)
DULCOLAX SUPP (Use bisacodyl)	NC	QL(12 ea per fill retail)

Drug Name	Drug Tier	Requirements/Limits
DULCOLAX TBEC (Use bisacodyl)	NC	QL(1 ea daily)
sennosides TABS 8.6 MG	C	
SEKOKOT KIDS LAXATIVE GUMMIES CHEW	NC	
SEKOKOT LAXATIVE GUMMIES CHEW	NC	
SEKOKOT TABS (Use sennosides)	NC	
Surfactant Laxatives		
COLACE CLEAR CAPS (Use docusate sodium)	NC	
COLACE CAPS 100 MG (Use docusate sodium)	NC	QL(3 ea daily)
docusate sodium CAPS 100 MG, 250 MG	C	QL(3 ea daily)
docusate sodium CAPS 50 MG	C	
docusate sodium LIQD	C	
DOCUSATE SODIUM POWD	NC	
DOCUSATE SODIUM SYRP	C	
docusate sodium TABS	C	
<b>LOCAL ANESTHETICS-Parenteral - Drugs for Numbing</b>		
Local Anesthetic Combinations		
bupivacaine w/ epinephrine SOLN 1 :200000-0.25 %, 1 :200000-0.5 %	NC	
lidocaine w/ epinephrine SOLN 1 :100000-1 %, 1 :100000-2 %, 1 :200000-0.5 %, 1 :200000-1.5 %, 1 :200000-2 %	NC	
LIDOCAINE/EPINEPHRINE SOLN	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SENSORCAINE-MPF/EPINEPHRINE SOLN	NC		CLOROTEKAL IT	NC	
XYLOCAINE-MPF/EPINEPHRINE SOLN	NC		NESACAINE IJ	NC	
Local Anesthetics - Amides			PROCAINE HCL CRYSTALS	NC	
BUPIVACAINE FISIOPHARMA SOLN IJ	NC		PROCAINE HYDROCHLORIDE POWD	NC	
BUPIVACAINE HCL MONOHYDRATE POWD	NC		<i>tetracaine hcl SOLN</i>	NC	
BUPIVACAINE HCL POWD	NC		<b>MACROLIDES - Drugs to Treat Bacterial Infections</b>		
<i>bupivacaine hcl SOLN IJ</i>	NC		Azithromycin		
BUPIVACAINE HCL SOLN XX	NC		<i>azithromycin PACK</i>	P	QL(2 ea per fill retail)
BUPIVACAINE HYDROCHLORIDEMONO HYDRATE POWD	NC		<i>azithromycin SOLR</i>	NC	
BUPIVACAINE HYDROCHLORIDE SOLN IJ 0.25 %, 0.5 %	NC		<i>azithromycin SUSR 200 MG/5ML</i>	NC	QL(60 ml per fill retail)
<i>bupivacaine in dextrose SOLN</i>	NC		<i>azithromycin SUSR 200 MG/5ML</i>	P	QL(60 ml per fill retail)
EXPAREL	NC		<i>azithromycin SUSR 100 MG/5ML</i>	NC	1 package(s) per fill retail
<i>lidocaine hcl (local anesth.) SOLN</i>	NC		<i>azithromycin SUSR 100 MG/5ML</i>	P	1 package(s) per fill retail
LIDOCAINE HYDROCHLORIDE SOLN	NC		<i>azithromycin TABS 500 MG</i>	P	QL(4 ea daily)
LIDOCAINE HYDROCHLORIDE SOSY IV 1 %, 100 MG/5ML	NC		<i>azithromycin TABS 500 MG</i>	NC	QL(4 ea daily)
MEPIVACAINE HCL POWD	NC		<i>azithromycin TABS 600 MG</i>	P	QL(8 ea per 28 day(s) retail)
<i>mepivacaine hcl SOLN 1 %, 1.5 %, 2 %</i>	NC		<i>azithromycin TABS 250 MG</i>	P	QL(6 ea per fill retail)
<i>ropivacaine hcl SOLN IJ</i>	NC		<i>azithromycin TABS 250 MG</i>	NC	QL(6 ea per fill retail)
ROPIVACAINE HYDROCHLORIDE SOLN IJ 2 MG/ML	NC		ZITHROMAX TRI-PAK TABS (Use azithromycin)	NP	QL(4 ea daily)
Local Anesthetics - Esters			ZITHROMAX Z-PAK TABS (Use azithromycin)	NP	QL(6 ea per fill retail)
<i>chloroprocaine hcl IJ</i>	NC		ZITHROMAX PACK (Use azithromycin)	NP	QL(2 ea per fill retail)
			ZITHROMAX SUSR 100 MG/5ML (Use azithromycin)	NP	1 package(s) per fill retail

Drug Name	Drug Tier	Requirements/Limits
ZITHROMAX SUSR 200 MG/5ML (Use azithromycin)	NP	QL(60 ml per fill retail)
ZITHROMAX TABS 500 MG (Use azithromycin)	NC	QL(4 ea daily)
ZITHROMAX TABS 500 MG (Use azithromycin)	NP	QL(4 ea daily)
ZITHROMAX TABS 250 MG (Use azithromycin)	NP	QL(6 ea per fill retail)
Clarithromycin		
clarithromycin SUSR 125 MG/5ML	P	1 package(s) per fill retail
clarithromycin SUSR 250 MG/5ML	P	2 package(s) per fill retail
clarithromycin TABS	P	QL(28 ea per fill retail)
clarithromycin TB24	NP	QL(14 ea per fill retail)
Erythromycins		
E.E.S. GRANULES SUSR (Use erythromycin ethylsuccinate)	NP	
ERYPED 200 SUSR (Use erythromycin ethylsuccinate)	NP	
ERYPED 400 SUSR (Use erythromycin ethylsuccinate)	NP	
erythromycin base CPEP	NP	
ERYTHROMYCIN BASE POWD	NC	
erythromycin base TABS	NP	
erythromycin base TBEC 500 MG	NC	
erythromycin base TBEC	NP	
ERYTHROMYCIN ETHYLSUCCINATE POWD	NC	
erythromycin ethylsuccinate SUSR	P	
erythromycin ethylsuccinate TABS	NP	

Drug Name	Drug Tier	Requirements/Limits
erythromycin lactobionate 500 MG	NC	
erythromycin stearate TABS 250 MG	P	
ERYTHROMYCIN POWD	NC	
Fidaxomicin		
DIFICID SUSR	NP	
DIFICID TABS	NP	
<b>MEDICAL DEVICES AND SUPPLIES</b>		
Diabetic Supplies		
ACCU-CHEK AVIVA PLUS KIT	NC	RX/OTC
ACCU-CHEK GUIDE ME KIT	P	RX/OTC
ACCU-CHEK GUIDE KIT	P	RX/OTC
ACCU-CHEK NANO SMARTVIEW KIT	NC	RX/OTC
ACCU-CHEK SOFTCLIX LANCETS	P	QL(6.67 ea daily); RX/OTC
ADVANCE INTUITION BLOOD GLUCOSE METER DEVI	NC	
ADVANCE INTUITION BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
ADVANCE MICRO-DRAW METER DEVI	NC	
ADVOCATE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
ADVOCATE BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
ADVOCATE REDI-CODE/TALKING KIT	NC	RX/OTC
ADVOCATE REDI-CODE+ BLOOD GLUCOSE SYSTEM/SPEAKING DEVI	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ADVOCATE REDI-CODE+ BLOODGLUCOSE MONITORING SYSTEM DEVI	NC		BLOOD GLUCOSE MONITORINGSYSTEM 333 DEVI	NC	
ADVOCATE REDI-CODE DEVI	NC		BLOOD GLUCOSE MONITORINGSYSTEM PREMIUM KIT	NC	RX/OTC
AGAMATRIX AMP NO CODE ADVANCED BLOOD GLUCOSE MONITORING SYST DEVI	NC		BLOOD GLUCOSE MONITORINGSYSTEM KIT	NC	RX/OTC
AGAMATRIX JAZZ WIRELESS 2 KIT	NC	RX/OTC	BLOOD GLUCOSE SYSTEM PAK KIT	NC	RX/OTC
AGAMATRIX PRESTO PRO METER DEVI	NC		BLULINK BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
AGAMATRIX PRESTO KIT	NC	RX/OTC	BREEZE 2 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
ASSURE 4 BLOOD GLUCOSE METER DEVI	NC		CAREONE BLOOD GLUCOSE MONITORING SYSTEM/PREMIUM KIT	NC	RX/OTC
ASSURE PLATINUM BLOOD GLUCOSE METER DEVI	NC		CAREONE BLOOD GLUCOSE MONITORING SYSTEM/VALUE KIT	NC	RX/OTC
ASSURE PRISM MULTI BLOODGLUCOSE MONITORING SYSTEM DEVI	NC		CARESENS CONTROL SOLUTION A/B SOLN	NC	
ASSURE PRO BLOOD GLUCOSE METER DEVI	NC		CARESENS N BLOOD GLUCOSEMONITORING SYSTEM DEVI	NC	
BD LATITUDE DIABETES MANAGEMENT SYSTEM KIT	NC	RX/OTC	CARESENS N FELIZ BT DEVI	NC	
BD LOGIC BLOOD GLUCOSE MONITOR KIT	NC	RX/OTC	CARESENS N FELIZ DEVI	NC	
BIGFOOT UNITY PROGRAM KIT KIT	NC	RX/OTC	CARESENS N GLUCOSE MONITORING SYSTEM DEVI	NC	
BIOTEL CARE BLOOD GLUCOSEMONITORING SYSTEM KIT	NC	RX/OTC	CARESENS N VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
BIOTEL CARE CONNECTED BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	CARETOUCH BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
			CHEMSTRIP BG LOG BOOK MISC	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CLEVER CHEK AUTO CODE VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		CONTOUR NEXT GEN BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
CLEVER CHEK AUTO-CODE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		CONTOUR NEXT GEN BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
CLEVER CHEK AUTO-CODE VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		CONTOUR NEXT LINK 2.4 WIRELESS BLOOD GLUCOSE MONITORING SYST KIT	NC	RX/OTC
CLEVER CHEK BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	CONTOUR NEXT LINK BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
CLEVER CHOICE AUTO-CODE PRO BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		CONTOUR NEXT LINK WIRELESS BLOOD GLUCOSE MONITORING SY KIT	NC	RX/OTC
CLEVER CHOICE MICRO BLOODGLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	CONTOUR NEXT ONE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
CLEVER CHOICE MINI BLOODGLUCOSE MONITORING SYSTEM DEVI	NC		CONTOUR PLUS BLUE BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
CLEVER CHOICE TALK BLOODGLUCOSE MONITORING SYSTEM DEVI	NC		COOL BLOOD GLUCOSE MONITORING KIT KIT	NC	RX/OTC
CONTOUR BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		COOL BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
CONTOUR BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	CVS ADVANCED GLUCOSE METER KIT	NC	RX/OTC
CONTOUR NEXT BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	D-CARE GLUCOMETER KIT/GLUCOSE TEST STRIPS KIT	NC	RX/OTC
CONTOUR NEXT EZ BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	DEXCOM G6 RECEIVER	PA	QL(1 ea per 365 day(s) retail); PA
			DEXCOM G6 SENSOR	PA	QL(3 ea per 30 day(s) retail); PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DEXCOM G6 TRANSMITTER	PA	QL(1 ea per 90 day(s) retail); PA	EASY TRAK II BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
DEXCOM G7 RECEIVER	PA	QL(1 ea per 365 day(s) retail); PA	EASYMAX NG SELF-MONITORING BLOOD GLUCOSE SYSTEM DEVI	NC	
DEXCOM G7 SENSOR	PA	QL(3 ea per 30 day(s) retail); PA	EASYMAX NG SELF-MONITORING BLOOD GLUCOSE SYSTEM KIT	NC	RX/OTC
DIABETES MONITORING DIGITAL SOLUTION ADD-ON KIT	NC	RX/OTC	EASYMAX V BLOOD GLUCOSE SYSTEM DEVI	NC	
DIABETES MONITORING DIGITAL SOLUTION KIT	NC	RX/OTC	EASYPRO BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
DIATHRIVE BLOOD GLUCOSE METER DEVI	NC		EASYPRO PLUS KIT	NC	RX/OTC
DIATHRIVE+ BLOOD GLUCOSE MONITORING SYSTEM/BLUETOOTH DEVI	NC		ELEMENT AUTOCODE SYSTEM KIT	NC	RX/OTC
DIATRUE PLUS BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		ELEMENT COMPACT BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
EASY MAX T1 SELF-MONITORING BLOOD GLUCOSE SYSTEM KIT	NC	RX/OTC	ELEMENT COMPACT V BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
EASY PLUS II BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		ELEMENT PLUS BLOOD GLUCOSE METER DEVI	NC	
EASY STEP BLOOD GLUCOSE MONITOR DEVI	NC		EMBRACE BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	NC	
EASY TALK BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	NC		EMBRACE EVO BLOOD GLUCOSE MONITORING KIT KIT	NC	RX/OTC
EASY TOUCH GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	EMBRACE EVO COMPACT BLOOD GLUCOSE MONITOR DEVI	NC	
EASY TOUCH HEALTHPRO GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	EMBRACE PRO BLOOD GLUCOSE METER DEVI	NC	
EASY TRAK BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		EMBRACE TALK BLOOD GLUCOSE MONITOR DEVI	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EMBRACE TALK BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	FORA TEST N' GO VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
EMBRACE WAVE BLOOD GLUCOSE METER DEVI	NC		FORA TN'G ADVANCE PRO MULTI-FUNCTIONAL MONITORING SYSTEM DEVI	NC	
EVERSENSE E3 SMART TRANSMITTER	NC	PA	FORA TN'G VOICE BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
EVERSENSE SMART TRANSMITTER	NC	PA	FORA V10 BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	NC	
EVOLUTION AUTOCODE DEVI	NC		FORA V12 BLOOD GLUCOSE MONITORING SYSTEM/NO-CODING DEVI	NC	
FIFTY50 GLUCOSE METER 2.0 KIT	NC	RX/OTC	FORA V12 BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	NC	
FORA 6 CONNECT DEVI	NC		FORA V20 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
FORA G20 BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	FORA V30A BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
FORA G30A BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		FORA V30A BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
FORA GD20 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		FORACARE GD40 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
FORA GD50 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		FORACARE PREMIUM V10 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
FORA GTEL BLOOD GLUCOSE MONITORING SYSTEM/MULTI-FUNCTIONAL DEVI	NC		FORACARE TEST N GO BLOODGLUCOSE MONITORING SYSTEM DEVI	NC	
FORA PREMIUM V10 BLE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC				
FORA TEST N GO ADV MOBILE MULTI-FUNCTIONAL MONITORING SYSTEM DEVI	NC				
FORA TEST N' GO ADVANCE MULTI-FUNCTIONING MONITORING SYSTEM DEVI	NC				



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FORTISCARE T1 SELF-MONITORING BLOOD GLUCOSE SYSTEM DEVI	NC		GE100 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
FREESTYLE FREEDOM LITE KIT	NC	RX/OTC	GE100 BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
FREESTYLE FREEDOM LITE KIT	P	RX/OTC	GHT BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM	PA	QL(1 ea per 365 day(s) retail); PA	GLUCO PERFECT 3 BLOOD GLUCOSE METER DEVI	NC	
FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM	PA	QL(3 ea per 28 day(s) retail); PA	GLUCO PERFECT 3 BLOOD GLUCOSE MONITORING SYSTEM/VOICE DEVI	NC	
FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM	PA	QL(1 ea per 365 day(s) retail); PA	GLUCOCARD 01 BLOOD GLUCOSE METER DEVI	NC	
FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM	PA	QL(3 ea per 28 day(s) retail); PA	GLUCOCARD 01 BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
FREESTYLE LIBRE 3 PLUS/SENSOR/GLUCOSE MONITORING SYSTEM	NC	QL(3 ea per 30 day(s) retail); PA	GLUCOCARD 01-MINI BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM	PA	QL(1 ea per 365 day(s) retail); PA	GLUCOCARD EXPRESSION AUDIO-ENABLED BLOOD GLUCOSE MONITORING KIT	NC	RX/OTC
FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM	PA	QL(3 ea per 28 day(s) retail); PA	GLUCOCARD SHINE CONNEX BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM	NC	QL(1 ea per 365 day(s) retail)	GLUCOCARD SHINE EXPRESS BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		GLUCOCARD SHINE XL DEVI	NC	
FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM KIT	P	RX/OTC	GLUCOCARD SHINE DEVI	NC	
FREESTYLE PRECISION NEO BLOOD GLUCOSE MONITORING SYSTEM KIT	P	RX/OTC	GLUCOCARD SHINE KIT	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM BLACK KIT	NC	RX/OTC	GNP TRUE METRIX SELF MONITORING BLOOD GLUCOSE METER KIT	NC	RX/OTC
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM BLUE KIT	NC	RX/OTC	GOJJI MULTI-FUNCTIONAL MONITORING SYSTEM WELCOME KIT KIT	NC	
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM PINK KIT	NC	RX/OTC	GOJJI MULTI-FUNCTIONAL MONITORING SYSTEM DEVI	NC	
GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	GOODSENSE PREMIUM BLOODGLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
GLUCOCARD X-METER KIT	NC	RX/OTC	GUARDIAN 4 GLUCOSE SENSOR	NC	QL(3 ea per 30 day(s) retail); PA
GLUCOCOM AUTOLINK TELEMONITORING SYSTEM MISC	NC	RX/OTC	GUARDIAN 4 TRANSMITTER KIT	NC	PA
GLUCOCOM BLOOD GLUCOSE MONITOR DEVI	NC		GUARDIAN CONNECT TRANSMITTER	NC	PA
GLUCOCOM BLOOD GLUCOSE MONITORING SYSTEM VALUE KIT KIT	NC	RX/OTC	GUARDIAN CONNECT TRANSMITTER KIT	NC	PA
GLUCOCOM BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	GUARDIAN LINK 3 TRANSMITTER KIT	NC	PA
GLUCONAVII BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	HEALTHPRO BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
GNP EASY TOUCH GLUCOSE MONITORING SYSTEM/NO CODING DEVI	NC		HW EMBRACE PRO BLOOD GLUCOSE METER DEVI	NC	
GNP EASY TOUCH GLUCOSE MONITORING SYSTEM DEVI	NC		HW EMBRACE TALK BLOOD GLUCOSE MONITOR DEVI	NC	
GNP TRUE METRIX AIR SELF MONITORING BLOOD GLUCOSE METER KIT	NC	RX/OTC	HW EMBRACE TALK BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
			IGLUCOSE BLOOD GLUCOSE MOITORING SYSTEM KIT	NC	RX/OTC
			IN TOUCH DEVI	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
INFINITY BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	MINILINK REAL-TIME TRANSMITTER	NC	PA
INFINITY CONTROL SOLUTION HIGH SOLN	NC		MINIMED 630G GUARDIAN PRESS STARTER TRANSMITTER KIT	NC	PA
INFINITY VOICE KIT	NC	RX/OTC	MM BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
KROGER BLOOD GLUCOSE MONITORING KIT KIT	NC	RX/OTC	MM BLULINK GLUCOSE MONITORING SYSTEM DEVI	NC	
KROGER PREMIUM BLOOD GLUCOSE MONITORING KIT KIT	NC	RX/OTC	MM EASY TOUCH BLOOD GLUCOSE METER KIT	NC	RX/OTC
LANCETS SUPER THIN 28G	NC	RX/OTC	MYGLUCOHEALTH BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
LIBERTY BLOOD GLUCOSE METER DEVI	NC		NOVA MAX BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
LIBERTY NEXT GENERATION BLOOD GLUCOSE MONITOR DEVI	NC		NOVA MAX BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
MEIJER BLOOD GLUCOSE MONITORING KIT KIT	NC	RX/OTC	OMNIPOD 5 G6 INTRO KIT (GEN 5) KIT	NC	
MEIJER ESSENTIAL BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	OMNIPOD 5 G6 INTRO KIT (GEN 5) KIT	PA	PA
MEIJER PREMIUM BLOOD GLUCOSE MONITORING KIT KIT	NC	RX/OTC	OMNIPOD 5 G6 PODS (GEN 5) MISC	NC	
MEIJER TRUE2GO BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	OMNIPOD 5 G6 PODS (GEN 5) MISC	PA	PA
MEIJER TRUERESULT BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	OMNIPOD 5 G7 INTRO KIT (GEN 5) KIT	PA	PA
MEIJER TRUETRACK BLOOD GLUCOSE MONITORING KIT KIT	NC	RX/OTC	OMNIPOD 5 G7 PODS (GEN 5) MISC	PA	PA
MICRODOT BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	OMNIPOD CLASSIC PDM STARTER KIT (GEN 3) KIT	NC	
			OMNIPOD CLASSIC PODS (GEN 3) MISC	NC	
			OMNIPOD DASH INTRO KIT (GEN 4) KIT	PA	PA

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
OMNIPOD DASH PDM KIT (GEN 4) KIT	NC		ONETOUCH ULTRASOFT LANCETS	P	QL(6.67 ea daily); RX/OTC
OMNIPOD DASH PODS (GEN 4) MISC	PA	PA	ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
OMNIPOD GO 10 UNITS/DAY KIT	NC		ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
OMNIPOD GO 15 UNITS/DAY KIT	NC		ONETOUCH VERIO FLEX BLOOD GLUCOSE MONITORING SYSTEM KIT	P	RX/OTC
OMNIPOD GO 20 UNITS/DAY KIT	NC		ONETOUCH VERIO LEVEL 3 CONTROL SOLUTION LIQD	C	
OMNIPOD GO 25 UNITS/DAY KIT	NC		ONETOUCH VERIO LEVEL 4 CONTROL SOLUTION LIQD	C	
OMNIPOD GO 30 UNITS/DAY KIT	NC		ONETOUCH VERIO REFLECT KIT	NC	RX/OTC
OMNIPOD GO 35 UNITS/DAY KIT	NC		PARADIGM REAL-TIME TRANSMITTER	NC	PA
OMNIPOD GO 40 UNITS/DAY KIT	NC		PERFECT POINT SAFETY LANCETS/28G	NC	RX/OTC
OMNIPOD POD PALS	NC		PERFECT POINT SAFETY LANCETS/30G	NC	RX/OTC
ON CALL EXPRESS BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	PHARMACIST CHOICE AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
ONE DROP BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	PHARMACIST CHOICE MINI BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
ONETOUCH DELICA PLUS LANCETS EXTRA FINE 33G	P	QL(6.67 ea daily); RX/OTC	PIP BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
ONETOUCH DELICA PLUS LANCETS FINE 30G	P	QL(6.67 ea daily); RX/OTC	POCKETCHEM EZ BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
ONETOUCH SOLUTIONS COMPLETE KIT	NC	RX/OTC			
ONETOUCH SOLUTIONS REFILL KIT	NC				
ONETOUCH ULTRA 2 KIT	P	RX/OTC			
ONETOUCH ULTRA 2 KIT	NC	RX/OTC			
ONETOUCH ULTRA CONTROL SOLUTION LIQD	C				
ONETOUCH ULTRA CONTROL LIQD	C				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
POGO AUTOMATIC BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		RELION MICRO BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
PRECISION XTRA KIT	NC	RX/OTC	RELION PREMIER BLU BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
PRO VOICE V8 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		RELION PREMIER CLASSIC BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
PRO VOICE V9 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		RELION PREMIER COMPACT BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		RELION PREMIER VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	RELION PRIME BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING/TALKING KIT	NC	RX/OTC	RELION TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH KIT	NC	RX/OTC
PRODIGY NO CODING BLOOD GLUCOSE KIT	NC	RX/OTC	RELION ULTIMA BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
PRODIGY POCKET BLOOD GLUCOSE METER KIT KIT	NC	RX/OTC	REXALL BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
PRODIGY VOICE BLOOD GLUCOSE METER KIT KIT	NC	RX/OTC	RIGHTEST GM100 BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
QUICKTEK KIT	NC	RX/OTC	RIGHTEST GM300 BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
QUINTET AC BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		RIGHTEST GM550 BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
QUINTET BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC				
REFUAH PLUS BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC			
RELION CONFIRM BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
RIGHTEST GT333 BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		TEMPO WELCOME KIT	NC	RX/OTC
SMART SENSE PREMIUM BLOODGLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	TGT BLOOD GLUCOSE MONITORING SYSTEM PREMIUM KIT	NC	RX/OTC
SMART SENSE VALUE BLOODGLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	TGT BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
SMARTEST EJECT BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		TRACER II 3 VOLT BATTERY MISC	NC	RX/OTC
SMARTEST EJECT STARTER KIT KIT	NC	RX/OTC	TRUE FOCUS BLOOD GLUCOSESELF MONITORING METER DEVI	NC	
SMARTEST PERSONA STARTERKIT KIT	NC	RX/OTC	TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH SMART KIT	NC	RX/OTC
SMARTEST PRONTO STARTERKIT KIT	NC	RX/OTC	TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH DEVI	NC	
SMARTEST PROTEGE BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC		TRUE METRIX AIR W/BLUETOOTH SMART KIT	NC	RX/OTC
SMARTEST PROTEGE STARTERKIT KIT	NC	RX/OTC	TRUE METRIX BLOOD GLUCOSEMETER KIT	NC	RX/OTC
SOF-SENSOR	NC	QL(3 ea per 30 day(s) retail); PA	TRUE METRIX GO BLOOD GLUCOSE METER KIT	NC	RX/OTC
SOLUS V2 AUDIBLE BLOOD GLUCOSE MANAGEMENT SYSTEM DEVI	NC		TRUE METRIX DEVI	NC	
SOLUS V2 AUDIBLE BLOOD GLUCOSE MANAGEMENT SYSTEM KIT	NC	RX/OTC	TRUERESULT BLOOD GLUCOSEMONITORING SYSTEM/NO CODING KIT	NC	RX/OTC
SUPREME II CONFIDENCE PADDLES MISC	NC	RX/OTC	TRUETRACK BLOOD GLUCOSE MONITORING SYSTEM DEVI	NC	
TEMPO SMART BUTTON MISC	NC	RX/OTC	TRUETRACK BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC
			TRUETRACK SMART SYSTEM KIT	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VERASENS BLOOD GLUCOSE MONITORING SYSTEM METER KIT DEVI	NC		1ML TB SYRINGE/26G X 3/8"/LUER SLIP TIP MISC	NC	RX/OTC
VERASENS BLOOD GLUCOSE MONITORING SYSTEM KIT	NC	RX/OTC	1ML TB SYRINGE/27G X 1/2"/LUER SLIP TIP MISC	NC	RX/OTC
V-GO 20 KIT	NC		1ML TB SYRINGE/LUER SLIPTIP	NC	RX/OTC
V-GO 30 KIT	NC		1ML VANISHPOINT TUBERCULIN SYRINGE 25GX1" MISC	NC	
V-GO 40 KIT	NC		1ML VANISHPOINT TUBERCULIN SYRINGE 25GX5/8" MISC	NC	RX/OTC
VIVAGUARD INO BLOOD GLUCOSE METER DEVI	NC		1ML VANISHPOINT TUBERCULIN SYRINGE 27GX1/2" MISC	NC	RX/OTC
VIVAGUARD INO CONTROL SOLUTION LIQD	NC		20-25ML SYRINGE/LUER LOCKTIP	NC	
VIVAGUARD INO SMART BLOOD GLUCOSE METER DEVI	NC		20-25ML SYRINGE/LUER SLIPTIP/ECCENTRIC TIP	NC	
WAVESENSE AMP KIT	NC	RX/OTC	2-3ML SYRINGE/LUER LOCK TIP	NC	RX/OTC
Parenteral Therapy Supplies			2-3ML SYRINGE/LUER SLIP TIP	NC	RX/OTC
10-12ML SYRINGE/LUER LOCKTIP	NC	RX/OTC	30-35ML SYRINGE/CATHETERTIP	NC	RX/OTC
10-12ML SYRINGE/LUER SLIPTIP	NC	RX/OTC	30-35ML SYRINGE/LUER LOCKTIP	NC	RX/OTC
10ML SYRINGE ECCENTRIC TIP	NC	RX/OTC	30-35ML SYRINGE/LUER SLIPTIP/ECCENTRIC TIP	NC	RX/OTC
10ML SYRINGE LUER-LOK TIP	NC	RX/OTC	30ML SYRINGES LUER LOCK	NC	RX/OTC
12ML SYRINGE 20GX1"/LUERLOCK TIP	NC		3ML LUER LOCK SAFETY SYRINGES	NC	RX/OTC
12ML SYRINGE 22GX1"/LUERLOCK TIP	NC		3ML LUER LOCK SAFETY SYRINGES 3ML/22G X 1 1/2"	NC	RX/OTC
12ML SYRINGE/20G X 1-1/2"/LUER LOCK TIP	NC	RX/OTC	3ML LUER LOCK SAFETY SYRINGES/3ML/21G X 1 1/2"	NC	RX/OTC
12ML SYRINGE/21G X 1"/LUER LOCK TIP	NC	RX/OTC	3ML LUER LOCK SAFETY SYRINGES/3ML/22G X 1"	NC	RX/OTC
12ML SYRINGE/21G X 1-1/2"/LUER LOCK TIP	NC	RX/OTC	3ML LUER LOCK SAFETY SYRINGES/3ML/22G X 1"	NC	RX/OTC
12ML SYRINGE/22G X 1-1/2"/LUER LOCK TIP	NC	RX/OTC			
1ML TB SYRINGE/25G X 5/8"/LUER SLIP TIP MISC	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
3ML LUER LOCK SAFETY SYRINGES/3ML/23G X 1"	NC	RX/OTC	3ML SYRINGE/LUER LOCK TIP23GX1"	NC	RX/OTC
3ML LUER LOCK SAFETY SYRINGES/3ML/25G X 1"	NC	RX/OTC	3ML SYRINGE/LUER LOCK TIP25G X 1-1/2"	NC	
3ML LUER LOCK SAFETY SYRINGES/3ML/25G X 5/8"	NC	RX/OTC	3ML SYRINGE/LUER SLIP TIP23GX1"	NC	RX/OTC
3ML LUER-LOK SYRINGE25G X 5/8"	NC	RX/OTC	50-60ML SYRINGE/CATHETERTIP /ECCENTRIC TIP	NC	RX/OTC
3ML SYRINGE/18G X 1-1/2"/LUER LOCK TIP	NC	RX/OTC	50-60ML SYRINGE/LUER LOCKTIP	NC	RX/OTC
3ML SYRINGE/20G X 1"/LUER LOCK TIP	NC	RX/OTC	50-60ML SYRINGE/LUER SLIPTIP/ECCENTRIC TIP	NC	RX/OTC
3ML SYRINGE/20G X 1"/LUER SLIP TIP	NC	RX/OTC	5-6ML SYRINGE/LUER LOCK TIP	NC	RX/OTC
3ML SYRINGE/20G X 1-1/2"/LUER LOCK TIP	NC	RX/OTC	5-6ML SYRINGE/LUER SLIP TIP	NC	RX/OTC
3ML SYRINGE/21G X 1"/LUER LOCK TIP	NC	RX/OTC	6ML SYRINGE 20GX1"/LUER LOCK TIP	NC	
3ML SYRINGE/21G X 1"/LUER SLIP TIP	NC	RX/OTC	6ML SYRINGE 21GX1-1/4"/LUER LOCK TIP	NC	
3ML SYRINGE/21G X 1-1/2"/LUER LOCK TIP	NC	RX/OTC	6ML SYRINGE 22GX1"/LUER LOCK TIP	NC	
3ML SYRINGE/21G X 1-1/4"/LUER LOCK TIP	NC		6ML SYRINGE 22GX1-1/4"/LUER LOCK TIP	NC	
3ML SYRINGE/22G 1-1/2"/LUER LOCK TIP	NC	RX/OTC	6ML SYRINGE/21G X 1"/LUER LOCK TIP	NC	RX/OTC
3ML SYRINGE/22G X 1"/LUER LOCK TIP	NC	RX/OTC	6ML SYRINGE/21G X 1-1/2"/LUER LOCK TIP	NC	RX/OTC
3ML SYRINGE/22G X 1-1/4"/LUER LOCK TIP	NC		6ML SYRINGE/22G X 1-1/2"/LUER LOCK TIP	NC	RX/OTC
3ML SYRINGE/22G X 3/4"/LUER LOCK TIP	NC		ADVOCATE INSULIN PEN NEEDLE/32GX4MM	NC	QL(5 ea daily); RX/OTC
3ML SYRINGE/22G X 3/4"/LUER SLIP TIP	NC		ALLERGY SYRINGE/1ML/27G X 1/2" MISC	NC	RX/OTC
3ML SYRINGE/25G X 1"/LUER LOCK TIP	NC	RX/OTC	ALLERGY SYRINGES INTRADERMAL/1ML/27G X 3/8" MISC	NC	
3ML SYRINGE/27G X 1-1/4"/LUER LOCK TIP	NC	RX/OTC	AQINJECT PEN NEEDLE/31G X 3/16"	NC	QL(5 ea daily); RX/OTC
			AQINJECT PEN NEEDLE/32G X 5/32"	NC	QL(5 ea daily); RX/OTC



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ASSURE ID DUO PRO SAFETY PEN NEEDLES 31G X 5MM	NC	QL(5 ea daily); RX/OTC	BD 1ML TUBERCULIN SYRINGE DETACHABLE NEEDLE SLIP TIP 27GX1/2" MISC	NC	RX/OTC
ASSURE ID PRO SAFETY PEN NEEDLES 30G X 5MM	NC	QL(5 ea daily); RX/OTC	BD 20ML SYRINGE LUER-LOK TIP	NC	RX/OTC
AUTOPEN DEVI	NC	RX/OTC	BD 30ML SYRINGE LUER-LOK TIP	NC	RX/OTC
BARDIA BULB IRRIGATION SYRINGE/60ML	NC	RX/OTC	BD 3ML LUER-LOK SYRINGE 18G X 1 1/2"	NC	RX/OTC
BARDIA PISTON IRRIGATION SYRINGE/60 ML	NC	RX/OTC	BD 3ML LUER-LOK SYRINGE/20G X 1"	NC	RX/OTC
BD 10ML CONTROL SYRINGE LUER-LOK TIP	NC	RX/OTC	BD 3ML LUER-LOK SYRINGE/21G X 1"	NC	RX/OTC
BD 10ML LUER-LOK SYRINGE 20G X 1-1/2"	NC		BD 3ML LUER-LOK SYRINGE/21G X 1-1/2"	NC	RX/OTC
BD 10ML LUER-LOK SYRINGE 21G X 1"	NC		BD 3ML LUER-LOK SYRINGE/23G X 1"	NC	RX/OTC
BD 10ML LUER-LOK SYRINGE 21G X 1-1/2"	NC		BD 3ML LUER-LOK SYRINGE/23G X 1-1/2"	NC	RX/OTC
BD 10ML LUER-LOK SYRINGE 22GX1"	NC		BD 3ML LUER-LOK SYRINGE/25G X 1"	NC	RX/OTC
BD 10ML SYRINGE/DUAL CANNULA	NC	RX/OTC	BD 3ML LUER-LOK SYRINGE/26G X 5/8"	NC	
BD 1ML ALLERGY SYRINGE SAFETY GLIDE NEEDLE 27GX1/2" MISC	NC	RX/OTC	BD 3ML SYRINGE LUER-LOK 21GX1-1/2"	NC	RX/OTC
BD 1ML SLIP TIP SYRINGE 25GX5/8" MISC	NC	RX/OTC	BD 3ML SYRINGE LUER-LOK 22GX1"	NC	RX/OTC
BD 1ML SLIP TIP SYRINGE 26GX3/8" MISC	NC	RX/OTC	BD 3ML SYRINGE LUER-LOK 22GX1-1/2"	NC	RX/OTC
BD 1ML SYRINGE/SAFETY GLIDE SHIELDING NEEDLE 25G X 5/8"	NC	RX/OTC	BD 3ML SYRINGE LUER-LOK 23GX1"	NC	RX/OTC
BD 1ML TUBERCULIN SYRINGE/SAFETY GLIDE TB NEEDLE 26GX3/8" MISC	NC	RX/OTC	BD 3ML SYRINGE LUER-LOK 25GX1-1/2"	NC	
BD 1ML TUBERCULIN SYRINGE/SAFETY GLIDE TB NEEDLE 27GX1/2" MISC	NC	RX/OTC	BD 3ML SYRINGE LUER-LOK 25GX5/8"	NC	RX/OTC
			BD 3ML SYRINGE/SAFETY GLIDE SHIELDING IM NEEDLE 22GX1-1/2"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BD 3ML SYRINGE/SAFETYGLIDE SHIELDING IM NEEDLE 23GX1"	NC	RX/OTC	BD ECLIPSE NEEDLE 21G X 1"	NC	RX/OTC
BD 3ML SYRINGE/SAFETYGLIDE SHIELDING NEEDLE 25GX5/8"	NC	RX/OTC	BD ECLIPSE NEEDLE 21G X 1-1/2"	NC	RX/OTC
BD 5ML LUER-LOK SYRINGE/20G X 1"	NC		BD ECLIPSE NEEDLE 25G X 1.5"	NC	RX/OTC
BD 5ML LUER-LOK SYRINGE/20G X 1-1/2"	NC		BD ECLIPSE NEEDLE 25GX1"	NC	RX/OTC
BD 5ML LUER-LOK SYRINGE/21G X 1"	NC		BD ECLIPSE NEEDLE 27G X 1/2"	NC	RX/OTC
BD 5ML LUER-LOK SYRINGE/21G X 1-1/2"	NC		BD ECLIPSE NEEDLE/23G X 1"	NC	RX/OTC
BD 5ML LUER-LOK SYRINGE/22G X 1"	NC		BD ECLIPSE NEEDLE/25G X5/8"	NC	RX/OTC
BD 5ML LUER-LOK SYRINGE/22G X 1-1/2"	NC		BD ECLIPSE NEEDLE/LUER-LOK SYRINGE 3ML/23G X 1-1/2"	NC	RX/OTC
BD ALLERGIST TRAY SYRINGE/1ML/27G X 1/2" KIT	NC	RX/OTC	BD ECLIPSE NEEDLE/LUER-LOK/30G X 1/2"	NC	RX/OTC
BD ALLERGY SYRINGE 0.5ML/27G X 3/8" MISC	NC		BD ECLIPSE SYRINGE 3ML/21G X 1"	NC	RX/OTC
BD ALLERGY SYRINGE 1ML/27G X 3/8" MISC	NC		BD ECLIPSE SYRINGE LUER-LOK/3ML/25G X 1"	NC	RX/OTC
BD ALLERGY SYRINGE/NEEDLE/1ML/27G X 3/8" MISC	NC		BD ECLIPSE SYRINGE/1ML/27GX1/2"	NC	
BD ALLERGY/SYRINGE/NEEDLE/1ML/28G X 1/2" MISC	NC	RX/OTC	BD ECLIPSE SYRINGE/1ML/30GX1/2"	NC	
BD AUTOSHIELD DUO 30G X 5MM	C	QL(5 ea daily); RX/OTC	BD ECLIPSE SYRINGE/NEEDLE/LUER-LOK/3ML/22G X 1"	NC	RX/OTC
BD DISPOSABLE NEEDLE 23GX1" PRECISION GLIDE	NC	RX/OTC	BD ECLIPSE SYRINGE/NEEDLE/LUER-LOK/3ML/23G X 1"	NC	RX/OTC
BD DISPOSABLE NEEDLE REGULAR BEVEL 25GX1"	NC	RX/OTC	BD ECLIPSE SYRINGE/NEEDLE/LUER-LOK/3ML/25G X 5/8"	NC	RX/OTC
BD ECLIPSE 23G X 1" NEEDLE	NC	RX/OTC	BD FILTER NEEDLE/5 MICRON/THIN WALL/19G X 1-1/2"	NC	RX/OTC
			BD HYPODERMIC NEEDLES 16GX1"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BD HYPODERMIC NEEDLES 18GX1"	NC	RX/OTC	BD LUER-LOK SYRINGE 10ML	NC	RX/OTC
BD HYPODERMIC NEEDLES 19GX1"	NC	RX/OTC	BD LUER-LOK SYRINGE W/ECLIPSE NEEDLE	NC	RX/OTC
BD HYPODERMIC NEEDLES 19GX1.5"	NC	RX/OTC	BD LUER-LOK SYRINGE/3ML	NC	RX/OTC
BD HYPODERMIC NEEDLES 21GX1"	NC	RX/OTC	BD LUER-LOK SYRINGE/5ML	NC	RX/OTC
BD HYPODERMIC NEEDLES 21GX2"	NC	RX/OTC	BD NEEDLE 30G X 1"	NC	
BD HYPODERMIC NEEDLES 22GX1"	NC	RX/OTC	BD NEEDLE SAFETYGLIDE/27G X 5/8"	NC	
BD HYPODERMIC NEEDLES 22GX1.5"	NC	RX/OTC	BD NEEDLE/16G X 1-1/2"	NC	RX/OTC
BD HYPODERMIC NEEDLES 23GX1"	NC	RX/OTC	BD NEEDLE/19G X 1"	NC	RX/OTC
BD HYPODERMIC NEEDLES 23GX3/4"	NC	RX/OTC	BD NEEDLE/20G X 1"	NC	RX/OTC
BD HYPODERMIC NEEDLES 25GX1.5"	NC	RX/OTC	BD NEEDLE/20G X 1-1/2"	NC	RX/OTC
BD HYPODERMIC NEEDLES 26GX1/2"	NC	RX/OTC	BD NEEDLE/21G 1-1/2"	NC	RX/OTC
BD INSULIN SYRINGE/U-500/0.5ML/31G X 6MM	NC		BD NEEDLE/22G X 1-1/2"	NC	RX/OTC
BD INTEGRA RETRACTABLE NEEDLE 23G X 1"	NC	RX/OTC	BD NEEDLE/25G X 5/8"	NC	RX/OTC
BD INTEGRA SYRINGE RETRACTING SAFETY/3ML/21G X 1"	NC	RX/OTC	BD NEEDLE/25G X 7/8"	NC	
BD INTEGRA SYRINGE/3ML 25GX1"	NC	RX/OTC	BD NEEDLE/27G X 1/2"	NC	RX/OTC
BD INTEGRA SYRINGE/3ML/21G X 1-1/2"	NC	RX/OTC	BD NEEDLE/30G X 1/2"	NC	RX/OTC
BD INTEGRA SYRINGE/3ML/22G X 1.5"	NC	RX/OTC	BD NOKOR NEEDLE 5 MICRONFILTER/18G X 1-1/2"	NC	RX/OTC
BD INTEGRA SYRINGE/3ML/23G X 1"	NC	RX/OTC	BD NOKOR VENTED NEEDLE 18G X 1" THIN WALL	NC	RX/OTC
BD INTEGRA SYRINGE/3ML/25G X 5/8	NC	RX/OTC	BD PEN MINI MISC	NC	RX/OTC
BD LUER LOCK SYRINGE/1ML/20G X 1"	NC		BD PEN MISC	NC	RX/OTC
			BD PLASTIPAK 3ML SYRINGE/LUER-LOK	NC	RX/OTC
			BD PLASTIPAK SYRINGE/3ML/21G X 1"/LUER-LOK	NC	RX/OTC
			BD PLASTIPAK SYRINGES ALLERGY 28GX1/2 MISC	NC	RX/OTC
			BD PRECISIONGLIDE 23GX1-1/2"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
BD PRECISIONGLIDE NEEDLE27G X 1-1/2"	NC	RX/OTC	BD SYRINGE LUER-LOK 3ML/NEEDLE BLUNT FILL 18G X 1-1/2"	NC	RX/OTC
BD PRECISIONGLIDE NEEDLE27GX3/8"	NC		BD SYRINGE LUER-LOK/10ML	NC	RX/OTC
BD SAFETYGLIDE 1ML 27GX5/8"	NC		BD SYRINGE LUER-LOK/1ML	NC	RX/OTC
BD SAFETYGLIDE 21G X 1"	NC	RX/OTC	BD SYRINGE LUER-LOK/20 ML	NC	RX/OTC
BD SAFETYGLIDE 21G X 1-1/2"	NC	RX/OTC	BD SYRINGE LUER-LOK/5 ML	NC	RX/OTC
BD SAFETYGLIDE HYPODERMICNEEDLE 25GX5/8"	NC	RX/OTC	BD SYRINGE SLIP TIP 1ML	NC	RX/OTC
BD SAFETYGLIDE NEEDLE 25GX1"	NC	RX/OTC	BD SYRINGE SLIP TIP/10ML	NC	RX/OTC
BD SAFETYGLIDE NEEDLE/SHIELDED/22G X 1-1/2"	NC	RX/OTC	BD TB SYRINGE/NEEDLE/1ML/2 7G X 3/8" MISC	NC	
BD SAFETYGLIDE SHIELDED NEEDLE 23G X 1"	NC	RX/OTC	BD TUBERCULIN SYRINGE/NEEDLE/SLIP TIP/1ML/21GX1" MISC	NC	
BD SAFETYGLIDE SYRINGE 3ML/25GX1"	NC	RX/OTC	CAREPOINT PRECISION POLYHUB NEEDLE/18GX1"	NC	RX/OTC
BD SAFETYGLIDE SYRINGE 5ML/22GX1.5"	NC		CAREPOINT PRECISION POLYHUB NEEDLE/20GX1"	NC	RX/OTC
BD SLIP TIP SYRINGE/1ML	NC	RX/OTC	CAREPOINT PRECISION POLYHUB NEEDLE/21GX1"	NC	RX/OTC
BD SLIP TIP SYRINGE/3ML	NC	RX/OTC	CAREPOINT PRECISION POLYHUB NEEDLE/21GX1-1/2"	NC	RX/OTC
BD SLIP TIP SYRINGE/NEEDLE/1ML/2 6G X 5/8"	NC		CAREPOINT PRECISION POLYHUB NEEDLE/22GX1"	NC	RX/OTC
BD SYRINGE 10ML/20G X 1"	NC		CAREPOINT PRECISION POLYHUB NEEDLE/22GX1-1/2"	NC	RX/OTC
BD SYRINGE 5ML LUER SLIP	NC	RX/OTC	CAREPOINT PRECISION POLYHUB NEEDLE/23GX1"	NC	RX/OTC
BD SYRINGE BLUNT PLASTICCANNULA 17GX10ML	NC	RX/OTC			
BD SYRINGE LEUR-LOK TIP 10ML	NC	RX/OTC			
BD SYRINGE LUER SLIP/20ML	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CAREPOINT PRECISION POLYHUB NEEDLE/23GX1-1/2"	NC	RX/OTC	CAREPOINT PRECISION SYRINGE/LUER SLIP/1ML 25GX5/8" MISC	NC	RX/OTC
CAREPOINT PRECISION POLYHUB NEEDLE/25GX1"	NC	RX/OTC	CAREPOINT PRECISION SYRINGE/LUER SLIP/60ML	NC	RX/OTC
CAREPOINT PRECISION POLYHUB NEEDLE/25GX1-1/2"	NC	RX/OTC	CAREPOINT SAFETY 1ST NEEDLE 23GX1"	NC	RX/OTC
CAREPOINT PRECISION POLYHUB NEEDLE/25GX5/8"	NC	RX/OTC	CAREPOINT SAFETY 1ST NEEDLE 23GX1-1/2"	NC	RX/OTC
CAREPOINT PRECISION POLYHUB NEEDLE/27GX1/2"	NC	RX/OTC	CAREPOINT SAFETY 1ST NEEDLE 25GX1"	NC	RX/OTC
CAREPOINT PRECISION POLYHUB NEEDLE/30GX1/2"	NC	RX/OTC	CAREPOINT SAFETY 1ST NEEDLE 25GX1-1/2"	NC	RX/OTC
CAREPOINT PRECISION SYRINGE/CATHETER TIP/60ML	NC	RX/OTC	CAREPOINT SAFETY 1ST NEEDLE 25GX5/8"	NC	RX/OTC
CAREPOINT PRECISION SYRINGE/LUER LOCK/10ML	NC	RX/OTC	CAREPOINT SAFETY 1ST SYRINGE/NEEDLE 1ML/23G X 1"	NC	
CAREPOINT PRECISION SYRINGE/LUER LOCK/1ML	NC	RX/OTC	CAREPOINT SAFETY 1ST SYRINGE/NEEDLE 1ML/25G X 1"	NC	RX/OTC
CAREPOINT PRECISION SYRINGE/LUER LOCK/20ML	NC	RX/OTC	CAREPOINT SAFETY 1ST SYRINGE/NEEDLE 3ML/23G X 1"	NC	RX/OTC
CAREPOINT PRECISION SYRINGE/LUER LOCK/30ML	NC	RX/OTC	CAREPOINT SAFETY 1ST SYRINGE/NEEDLE 3ML/25G X 1"	NC	RX/OTC
CAREPOINT PRECISION SYRINGE/LUER LOCK/3ML	NC	RX/OTC	CAREPOINT SAFETY 1ST SYRINGE/NEEDLE 3ML/25G X 5/8"	NC	RX/OTC
CAREPOINT PRECISION SYRINGE/LUER LOCK/5ML	NC	RX/OTC	CAREPOINT SYRINGE/LUER LOCK/3ML/20GX1"	NC	RX/OTC
CAREPOINT PRECISION SYRINGE/LUER LOCK/60ML	NC	RX/OTC	CAREPOINT SYRINGE/LUER LOCK/3ML/20GX1-1/2"	NC	RX/OTC
CAREPOINT PRECISION SYRINGE/LUER SLIP/1ML	NC	RX/OTC	CAREPOINT SYRINGE/LUER LOCK/3ML/22GX1"	NC	RX/OTC
			CAREPOINT SYRINGE/LUER LOCK/3ML/22GX1-1/2"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CAREPOINT SYRINGE/LUER LOCK/3ML/23GX1"	NC	RX/OTC	CARETOUCH LUER LOCK 3ML/23GX1"	NC	RX/OTC
CAREPOINT SYRINGE/LUER LOCK/3ML/23GX1-1/2"	NC	RX/OTC	CARETOUCH LUER LOCK 3ML/23GX1-1/2"	NC	RX/OTC
CAREPOINT SYRINGE/LUER LOCK/3ML/25GX1"	NC	RX/OTC	CARETOUCH LUER LOCK 3ML/25GX1"	NC	RX/OTC
CARETOUCH CATHETER TIP 60ML/COVER	NC	RX/OTC	CARETOUCH LUER LOCK 3ML/25GX1-1/2"	NC	
CARETOUCH HYPODERMIC NEEDLE/20GX1"	NC	RX/OTC	CARETOUCH LUER LOCK 3ML/25GX5/8"	NC	RX/OTC
CARETOUCH HYPODERMIC NEEDLE/22GX1"	NC	RX/OTC	CARETOUCH LUER LOCK SYRINGE/10ML	NC	RX/OTC
CARETOUCH HYPODERMIC NEEDLE/23GX1"	NC	RX/OTC	CARETOUCH LUER LOCK SYRINGE/1ML	NC	RX/OTC
CARETOUCH HYPODERMIC NEEDLE/23GX1-1/2"	NC	RX/OTC	CARETOUCH LUER LOCK SYRINGE/3ML	NC	RX/OTC
CARETOUCH HYPODERMIC NEEDLE/25GX1"	NC	RX/OTC	CARETOUCH LUER LOCK SYRINGE/5ML	NC	RX/OTC
CARETOUCH HYPODERMIC NEEDLE/25GX1-1/2"	NC	RX/OTC	CARETOUCH LUER SLIP SYRINGE/10ML	NC	RX/OTC
CARETOUCH HYPODERMIC NEEDLE/26GX1"	NC		CARETOUCH LUER SLIP SYRINGE/1ML	NC	RX/OTC
CARETOUCH HYPODERMIC NEEDLES/27G X 1 1/2"	NC	RX/OTC	CARETOUCH LUER SLIP SYRINGE/5ML	NC	RX/OTC
CARETOUCH LUER LOCK 3ML/22GX1"	NC	RX/OTC	CEQUR SIMPLICITY 2U DEVI	NC	RX/OTC
CARETOUCH LUER LOCK 3ML/22GX1-1/2"	NC	RX/OTC	CEQUR SIMPLICITY INSERTER MISC	NC	
			CEQUR SIMPLICITY STARTERKIT KIT	NC	
			CRONO SYRINGE	NC	
			DEFLUX METAL NEEDLE/23G X350MM	NC	
			DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 15/64"	NC	
			DROPLET INSULIN SYRINGE U-100/0.5ML/30G X 15/64"	NC	
			DROPLET INSULIN SYRINGE U-100/1ML/30G X 15/64"	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
DROPLET MICRON 34G X 9/64"	NC		EASY GLIDE SYRINGE/LUER LOCK/5ML	NC	RX/OTC
DROPLET PEN NEEDLE/MICRON/34G X 9/64"	NC		EASY GLIDE SYRINGE/SLIP LLOCK/1ML	NC	RX/OTC
DROPSAFE SICURA	NC	RX/OTC	EASY TOUCH ALLERGY TRAY SAFETY SYRINGE/1ML/26G X 3/8" MISC	NC	RX/OTC
EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 1/2"	NC		EASY TOUCH ALLERGY TRAY SAFETY SYRINGE/1ML/27G X 1/2" MISC	NC	RX/OTC
EASY COMFORT INSULIN SYRINGE/1ML/32GX5/16"	NC		EASY TOUCH FLIPLOCK NEEDLES 18GX1"	NC	RX/OTC
EASY COMFORT INSULIN SYRINGES/0.5ML/32GX5/16"	NC		EASY TOUCH FLIPLOCK NEEDLES 19GX1"	NC	RX/OTC
EASY COMFORT SAFETY PEN NEEDLES 31GX5MM	NC	QL(5 ea daily); RX/OTC	EASY TOUCH FLIPLOCK NEEDLES 20GX1"	NC	RX/OTC
EASY COMFORT SAFETY PEN NEEDLES 32GX4MM	NC	QL(5 ea daily); RX/OTC	EASY TOUCH FLIPLOCK NEEDLES 20GX1-1/2"	NC	RX/OTC
EASY GLIDE SYRINGE/CATHETTER TIP/60ML	NC	RX/OTC	EASY TOUCH FLIPLOCK NEEDLES 21GX1"	NC	RX/OTC
EASY GLIDE SYRINGE/LUER LLOC/1ML	NC	RX/OTC	EASY TOUCH FLIPLOCK NEEDLES 21GX1-1/2"	NC	RX/OTC
EASY GLIDE SYRINGE/LUER LLOCK/10ML	NC	RX/OTC	EASY TOUCH FLIPLOCK NEEDLES 22GX1"	NC	RX/OTC
EASY GLIDE SYRINGE/LUER LLOCK/20ML	NC	RX/OTC	EASY TOUCH FLIPLOCK NEEDLES 22GX1-1/2"	NC	RX/OTC
EASY GLIDE SYRINGE/LUER LLOCK/30ML	NC	RX/OTC	EASY TOUCH FLIPLOCK NEEDLES 22GX3/4"	NC	
EASY GLIDE SYRINGE/LUER LLOCK/3ML	NC	RX/OTC	EASY TOUCH FLIPLOCK NEEDLES 23GX1"	NC	RX/OTC
EASY GLIDE SYRINGE/LUER LLOCK/60ML	NC	RX/OTC	EASY TOUCH FLIPLOCK NEEDLES 23GX1-1/2"	NC	RX/OTC
			EASY TOUCH FLIPLOCK NEEDLES 23GX5/8"	NC	RX/OTC
			EASY TOUCH FLIPLOCK NEEDLES 25GX1"	NC	RX/OTC
			EASY TOUCH FLIPLOCK NEEDLES 25GX1-1/2"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY TOUCH FLIPLOCK NEEDLES 25GX5/8"	NC	RX/OTC	EASY TOUCH FLIPLOCK SAFETY SYRINGE 1ML/26GX3/8"	NC	
EASY TOUCH FLIPLOCK NEEDLES 26GX1/2"	NC	RX/OTC	EASY TOUCH FLIPLOCK SAFETY SYRINGE 1ML/27GX1/2"	NC	
EASY TOUCH FLIPLOCK NEEDLES 27GX1"	NC		EASY TOUCH FLIPLOCK SAFETY SYRINGE 21G/10ML1-1/2"	NC	
EASY TOUCH FLIPLOCK NEEDLES 27GX1/2"	NC	RX/OTC	EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/19GX1"	NC	
EASY TOUCH FLIPLOCK NEEDLES 28GX1/2"	NC		EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/19GX1.5"	NC	
EASY TOUCH FLIPLOCK NEEDLES 29GX1/2"	NC		EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/21GX1"	NC	RX/OTC
EASY TOUCH FLIPLOCK NEEDLES 30GX1/2"	NC	RX/OTC	EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/22GX1"	NC	RX/OTC
EASY TOUCH FLIPLOCK NEEDLES 30GX5/16"	NC		EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/22GX1-1/2"	NC	RX/OTC
EASY TOUCH FLIPLOCK NEEDLES 31GX5/16"	NC		EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/23GX1"	NC	RX/OTC
EASY TOUCH FLIPLOCK NEEDLES 19GX1-1/2"	NC	RX/OTC	EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/23GX1-1/2"	NC	RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYRINGES 3ML/18GX1-1/2"	NC	RX/OTC	EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/25GX1"	NC	RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/22GX1-1/2"	NC		EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/25GX5/8"	NC	
EASY TOUCH FLIPLOCK SAFETY SYRINGE 10ML/18GX1"	NC		EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/18GX1"	NC	
EASY TOUCH FLIPLOCK SAFETY SYRINGE 10ML/18GX1-1/2"	NC		EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/20GX1-1/2"	NC	
EASY TOUCH FLIPLOCK SAFETY SYRINGE 10ML/21GX1"	NC		EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/21GX1"	NC	
EASY TOUCH FLIPLOCK SAFETY SYRINGE 10ML/22GX1-1/2"	NC				
EASY TOUCH FLIPLOCK SAFETY SYRINGE 10ML/25GX1"	NC				
EASY TOUCH FLIPLOCK SAFETY SYRINGE 1ML/25GX1"	NC	RX/OTC			



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/21GX1-1/2"	NC		EASY TOUCH FLURINGE SYRINGE/1ML/25G X 1"	NC	RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/25GX1"	NC		EASY TOUCH FLURINGE SYRINGE/1ML/25G X 5/8"	NC	RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/25GX5/8"	NC		EASY TOUCH HYPODERMIC NEEDLES 16GX1"	NC	RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYRINGES 10ML/20GX1"	NC		EASY TOUCH HYPODERMIC NEEDLES 16GX1-1/2"	NC	RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYRINGES 10ML/20GX1-1/2"	NC		EASY TOUCH HYPODERMIC NEEDLES 18GX1"	NC	RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYRINGES 3ML/18GX1"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 18GX1.25"	NC	
EASY TOUCH FLIPLOCK SAFETY SYRINGES 3ML/20GX1"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 19GX1"	NC	RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYRINGES 3ML/20GX1-1/2"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 19GX1-1/2"	NC	RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYRINGES 3ML/21GX1-1/2"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 20GX1"	NC	RX/OTC
EASY TOUCH FLIPLOCK SAFETY SYRINGES 5ML/20GX1"	NC		EASY TOUCH HYPODERMIC NEEDLES 20GX1-1/2"	NC	RX/OTC
EASY TOUCH FLURINGE FLIPLOCK SAFETY SYRINGE 1ML/25GX1"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 21GX1"	NC	RX/OTC
EASY TOUCH FLURINGE FLIPLOCK SAFETY SYRINGE 1ML/25GX5/8"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 21GX1-1/2"	NC	RX/OTC
EASY TOUCH FLURINGE FLU TRAY SYRINGE/1ML/25G X 1"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 22GX1"	NC	RX/OTC
EASY TOUCH FLURINGE SHEATHLOCK SAFETY SYRINGE 1ML/25GX1"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 22GX1-1/2"	NC	RX/OTC
EASY TOUCH FLURINGE SHEATHLOCK SAFETY SYRINGE 1ML/25GX5/8"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 23GX1"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY TOUCH HYPODERMIC NEEDLES 23GX1-1/2"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 30GX1/2"	NC	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 23GX1-1/4"	NC		EASY TOUCH HYPODERMIC NEEDLES 31GX5/16"	NC	
EASY TOUCH HYPODERMIC NEEDLES 23GX3/4"	NC	RX/OTC	EASY TOUCH HYPODERMIC NEEDLES 32GX5/16"	NC	
EASY TOUCH HYPODERMIC NEEDLES 24GX1"	NC		EASY TOUCH SAFETY PEN NEEDLES/30G X 1/4"	NC	
EASY TOUCH HYPODERMIC NEEDLES 24GX1.25"	NC		EASY TOUCH SAFETY SYRINGE/1ML/25G X 1"	NC	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 25GX1"	NC	RX/OTC	EASY TOUCH SAFETY SYRINGE/1ML/25G X 5/8"	NC	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 25GX1-1/2"	NC	RX/OTC	EASY TOUCH SAFETY SYRINGE/3ML/20G X 1"	NC	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 25GX5/8"	NC	RX/OTC	EASY TOUCH SAFETY SYRINGE/3ML/21G X 1"	NC	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 26GX1/2"	NC	RX/OTC	EASY TOUCH SAFETY SYRINGE/3ML/22G X 1"	NC	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 26GX3/8"	NC		EASY TOUCH SAFETY SYRINGE/3ML/22G X 1-1/2"	NC	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 26GX5/8"	NC		EASY TOUCH SAFETY SYRINGE/3ML/23G X 1"	NC	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 27GX1/2"	NC	RX/OTC	EASY TOUCH SAFETY SYRINGE/3ML/25G X 1"	NC	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 27GX1-1/2"	NC	RX/OTC	EASY TOUCH SAFETY SYRINGE/3ML/25G X 5/8"	NC	RX/OTC
EASY TOUCH HYPODERMIC NEEDLES 27GX1-1/4"	NC	RX/OTC	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 10ML/21GX1-1/2"	NC	
EASY TOUCH HYPODERMIC NEEDLES 30GX1"	NC		EASY TOUCH SHEATHLOCK SAFETY SYRINGE 10ML/22GX1-1/2"	NC	
			EASY TOUCH SHEATHLOCK SAFETY SYRINGE 10ML/25GX1"	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/21GX1"	NC	RX/OTC	EASY TOUCH SYRINGE BARRELS LUER LOCK 1ML	NC	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/21GX1-1/2"	NC	RX/OTC	EASY TOUCH SYRINGE BARRELS LUER LOCK 3ML	NC	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/22GX1"	NC	RX/OTC	EASY TOUCH SYRINGE BARRELS LUER LOCK 5ML	NC	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/22GX1-1/2"	NC	RX/OTC	EASY TOUCH SYRINGE BARRELS LUER LOCK/20ML	NC	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/23GX1"	NC	RX/OTC	EASY TOUCH SYRINGE BARRELS LUER LOCK/60ML	NC	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/25GX1"	NC	RX/OTC	EASY TOUCH SYRINGE BARRELS UNI-SLIP 10ML	NC	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/25GX5/8"	NC	RX/OTC	EASY TOUCH SYRINGE BARRELS UNI-SLIP 3ML	NC	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 5ML/21GX1-1/2"	NC		EASY TOUCH SYRINGE BARRELS UNI-SLIP 5ML	NC	RX/OTC
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 5ML/22GX1-1/2"	NC		EASY TOUCH TUBERCULIN FLIPLOCK SAFETY SYRINGE 1ML/26GX5/8" MISC	NC	
EASY TOUCH SHEATHLOCK SAFETY SYRINGE 5ML/25GX1"	NC		EASY TOUCH TUBERCULIN FLIPLOCK SAFETY SYRINGE 1ML/27GX1/2" MISC	NC	RX/OTC
EASY TOUCH SHEATHLOCK SYRINGE BARRELS LUER LOCK 10ML	NC	RX/OTC	EASY TOUCH TUBERCULIN FLIPLOCK SAFETY SYRINGE 1ML/28GX1/2" MISC	NC	RX/OTC
EASY TOUCH SHEATHLOCK SYRINGE BARRELS LUER LOCK 3ML	NC	RX/OTC	EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/25GX5/8" MISC	NC	RX/OTC
EASY TOUCH SYRINGE BARRELS LUER LOCK 10ML	NC	RX/OTC	EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/26GX5/8"	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/27GX1/2" MISC	NC	RX/OTC	EASYPPOINT NEEDLE/SYRINGE 3ML/25G X 5/8"	NC	RX/OTC
EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/28GX1/2" MISC	NC	RX/OTC	FLOW-EZE VENTED NEEDLE	NC	
EASYPPOINT NEEDLE 23G X 1"	NC	RX/OTC	HUBER NEEDLE 20GX3/4"/RIGHT ANGLE	NC	
EASYPPOINT NEEDLE 25G X 1"	NC	RX/OTC	HUBER NEEDLE/19GX3/4"/RIGHT ANGLE	NC	
EASYPPOINT NEEDLE 25G X 5/8"	NC	RX/OTC	HUBER NEEDLE/20G X 1-1/4"/STRAIGHT	NC	
EASYPPOINT NEEDLE 25GX1-1/2"	NC	RX/OTC	HUBER NEEDLE/22GX1-1/4"/4IGHT ANGLE	NC	
EASYPPOINT NEEDLE/18G X 1"	NC	RX/OTC	HUBER NEEDLE/RIGHT ANGLE19G X 1"	NC	RX/OTC
EASYPPOINT NEEDLE/20G X 1"	NC	RX/OTC	HUBER NEEDLE/RIGHT ANGLE20G X 1"	NC	RX/OTC
EASYPPOINT NEEDLE/20G X 1-1/2"	NC	RX/OTC	HUBER NEEDLE/RIGHT ANGLE20G X 1-1/2"	NC	RX/OTC
EASYPPOINT NEEDLE/21G X 1"	NC	RX/OTC	HUBER NEEDLE/RIGHT ANGLE22G X 1"	NC	RX/OTC
EASYPPOINT NEEDLE/21G X 1-1/2"	NC	RX/OTC	HUBER NEEDLE/RIGHT ANGLE22G X 1-1/2"	NC	RX/OTC
EASYPPOINT NEEDLE/22G X 1"	NC	RX/OTC	HUBER NEEDLE/RIGHT ANGLE22G X 3/4"	NC	
EASYPPOINT NEEDLE/22G X 1-1/2"	NC	RX/OTC	HUBER NEEDLE/STRAIGHT 19GX 1-1/4"	NC	
EASYPPOINT NEEDLE/SYRINGE 3ML/18G X 1"	NC	RX/OTC	HUBER NEEDLE/STRAIGHT 20GX 1"	NC	RX/OTC
EASYPPOINT NEEDLE/SYRINGE 3ML/18G X 1-1/2"	NC	RX/OTC	HUBER NEEDLE/STRAIGHT 20GX 1-1/2"	NC	RX/OTC
EASYPPOINT NEEDLE/SYRINGE 3ML/23 G X 1"	NC	RX/OTC	HUBER NEEDLE/STRAIGHT 22GX1"	NC	RX/OTC
EASYPPOINT NEEDLE/SYRINGE 3ML/25G X 1"	NC	RX/OTC	HUBER NEEDLE/STRAIGHT 22GX1-1/2"	NC	RX/OTC
			HYPODERMIC NEEDLE 18G X 1"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
HYPODERMIC NEEDLE 19G X 1"	NC	RX/OTC	HYPODERMIC NEEDLE 27GX1-1/2"	NC	RX/OTC
HYPODERMIC NEEDLE 19G X 1-1/2"	NC	RX/OTC	HYPODERMIC NEEDLE 27GX1-1/4"	NC	RX/OTC
HYPODERMIC NEEDLE 20G X 1-1/2"	NC	RX/OTC	HYPODERMIC NEEDLE 30GX1/2"	NC	RX/OTC
HYPODERMIC NEEDLE 20GX3/4"	NC		HYPODERMIC NEEDLES 18GX1"	NC	RX/OTC
HYPODERMIC NEEDLE 21GX1"	NC	RX/OTC	HYPODERMIC NEEDLES 20GX1"	NC	RX/OTC
HYPODERMIC NEEDLE 21GX1-1/2"	NC	RX/OTC	HYPODERMIC NEEDLES 20GX1-1/2"	NC	RX/OTC
HYPODERMIC NEEDLE 21GX1-1/4"	NC		HYPODERMIC NEEDLES 21GX1"	NC	RX/OTC
HYPODERMIC NEEDLE 22GX1"	NC	RX/OTC	HYPODERMIC NEEDLES 21GX1-1/2"	NC	RX/OTC
HYPODERMIC NEEDLE 22GX1-1/2"	NC	RX/OTC	HYPODERMIC NEEDLES 22GX1"	NC	RX/OTC
HYPODERMIC NEEDLE 22GX1-1/4"	NC		HYPODERMIC NEEDLES 22GX1-1/2"	NC	RX/OTC
HYPODERMIC NEEDLE 22GX3/4"	NC		HYPODERMIC NEEDLES 23GX1"	NC	RX/OTC
HYPODERMIC NEEDLE 23GX1"	NC	RX/OTC	HYPODERMIC NEEDLES 23GX1-1/2"	NC	RX/OTC
HYPODERMIC NEEDLE 23GX3/4"	NC	RX/OTC	HYPODERMIC NEEDLES 25GX1-1/2"	NC	RX/OTC
HYPODERMIC NEEDLE 25GX1"	NC	RX/OTC	HYPODERMIC NEEDLES 25GX5/8"	NC	RX/OTC
HYPODERMIC NEEDLE 25GX1-1/2"	NC	RX/OTC	HYPODERMIC NEEDLES 26GX1/2"	NC	RX/OTC
HYPODERMIC NEEDLE 25GX3/4"	NC		HYPODERMIC NEEDLES 27GX1/2"	NC	RX/OTC
HYPODERMIC NEEDLE 25GX5/8"	NC	RX/OTC	HYPODERMIC NEEDLES 27GX1-1/2"	NC	RX/OTC
HYPODERMIC NEEDLE 26GX1/2"	NC	RX/OTC	INPEN 100/BLUE/HUMALOG DEVI	NC	RX/OTC
HYPODERMIC NEEDLE 26GX3/8"	NC		INPEN 100/BLUE/LILLY/HUMAL OG DEVI	NC	RX/OTC
HYPODERMIC NEEDLE 26GX5/8"	NC		INPEN 100/BLUE/NOVOLOG/FIA SP DEVI	NC	RX/OTC
HYPODERMIC NEEDLE 27GX1/2"	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INPEN 100/GREY/HUMALOG DEVI	NC	RX/OTC	MONOJECT ALLERGIST TRAY/PERM NEEDLE/0.5ML/28G X 1/2" KIT	NC	
INPEN 100/GREY/LILLY/HUMALOG DEVI	NC	RX/OTC	MONOJECT ALLERGIST TRAY/PERM NEEDLE/1ML/28G X 1/2" KIT	NC	
INPEN 100/GREY/NOVOLOG/FIASP DEVI	NC	RX/OTC	MONOJECT BLUNT CANNULA/20GX1-1/2"	NC	RX/OTC
INPEN 100/PINK/HUMALOG DEVI	NC	RX/OTC	MONOJECT BLUNT CANNULA/21GX1"	NC	RX/OTC
INPEN 100/PINK/LILLY/HUMALOG DEVI	NC	RX/OTC	MONOJECT BLUNTIP SYRINGE/3ML/CANNULA /IV ACCESS	NC	RX/OTC
INPEN 100/PINK/NOVOLOG/FIASP DEVI	NC	RX/OTC	MONOJECT BLUNTIP SYRINGE/6ML/CANNULA /IV ACCESS	NC	RX/OTC
J-TIP KIT W/VIAL ADAPTERS KIT	NC		MONOJECT CONTROL SYRINGE/LUER LOCK/12ML	NC	RX/OTC
MAGELLAN SYRINGE/HYPODERMIC SAFETY NEEDLE/1ML/23G X 1"	NC		MONOJECT CONTROL SYRINGE/LUER LOCK/20ML	NC	RX/OTC
MAGELLAN TUBERCULIN SAFETY SYRINGE/1ML/27G X 1/2" MISC	NC	RX/OTC	MONOJECT FILTER ASPIRATOR/5UM/18G X 3"	NC	RX/OTC
MAGELLAN TUBERCULIN SAFETY SYRINGE/1ML/28G X 1/2" MISC	NC	RX/OTC	MONOJECT FILTER NEEDLE 18GX1.5"	NC	RX/OTC
MONOJECT 1ML LUER LOCK TUBERCULIN SYRINGE/TIP CAP	NC	RX/OTC	MONOJECT FILTER NEEDLE/20G X 1-1/2"	NC	
MONOJECT 20ML SYRINGE REGULAR TIP	NC	RX/OTC	MONOJECT FILTER NEEDLE/5UM/18G X 1-1/2"	NC	RX/OTC
MONOJECT 3ML SYRINGE/STANDARD HYPODERMIC NEEDLE/21GX1-1/2"	NC	RX/OTC	MONOJECT HYPO/ALUM HUB/16G X 1"	NC	RX/OTC
MONOJECT ALLERGIST TRAY/DETACH NEEDLE/1ML/27G X 1/2" KIT	NC	RX/OTC	MONOJECT HYPO/ALUM HUB/LUER LOCK/INTM BEVEL/27G X 1/2"	NC	RX/OTC
			MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/18G X 1"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/19G TW X 1-1/2"	NC	RX/OTC	MONOJECT HYPO/ALUM HUB/LUER LOCK/SPEC BEVEL/16G X 1-1/2"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/20G X 1"	NC	RX/OTC	MONOJECT HYPO/ALUM HUB/LUER LOCK/SPEC BEVEL/16G X 3/4"	NC	
MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/20G X 1-1/2"	NC	RX/OTC	MONOJECT HYPO/ALUM HUB/LUER LOCK/SPEC BEVEL/16G X 5/8"	NC	
MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/22G X 1"	NC	RX/OTC	MONOJECT HYPO/ALUM HUB/LUER LOCK/SPEC BEVEL/19G TW X 1"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/22G X 1-1/2"	NC	RX/OTC	MONOJECT HYPO/ALUM HUB/LUER LOCK/SPEC BEVEL/25G X 2"	NC	
MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/23G X 1"	NC	RX/OTC	MONOJECT HYPO/POLYPROPYLENE HUB/18G X 1"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/25G X 1-1/4"	NC		MONOJECT HYPO/POLYPROPYLENE HUB/LL/BEVEL/25G X 1-1/2"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/25G X 5/8"	NC	RX/OTC	MONOJECT HYPO/POLYPROPYLENE HUB/LL/INTM BEVEL/25G X 5/8"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/27G X 1-1/4"	NC	RX/OTC	MONOJECT HYPO/POLYPROPYLENE HUB/LL/INTM BEVEL/26G X 1/2"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/SHORT BEVEL/18G X 1"	NC	RX/OTC	MONOJECT HYPO/POLYPROPYLENE HUB/LL/INTM BEVEL/26G X 1/2"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/SHORT BEVEL/19G TW X 1-1/2"	NC	RX/OTC	MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/19G TW X 1"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/SHORT BEVEL/20G X 1-1/2"	NC	RX/OTC	MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/19G TW X 1-1/2"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/SPEC BEVEL/14G X 1"	NC		MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/20G X 1"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/SPEC BEVEL/14G X 2"	NC		MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/20G X 1-1/2"	NC	RX/OTC
MONOJECT HYPO/ALUM HUB/LUER LOCK/SPEC BEVEL/16G X 1-1/2"	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/21G X 1"	NC	RX/OTC	MONOJECT HYPO/POLYPROPYLENE HUB/LL/SHORT BEVEL/22G X 1"	NC	RX/OTC
MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/21G X 1-1/2"	NC	RX/OTC	MONOJECT HYPO/POLYPROPYLENE HUB/LL/SHORT BEVEL/22G X 1-1/2"	NC	RX/OTC
MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/22G X 1"	NC	RX/OTC	MONOJECT HYPO/POLYPROPYLENE HUB/REG BEVEL/27G X 1/2"	NC	RX/OTC
MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/23G X 1"	NC	RX/OTC	MONOJECT HYPODERMIC NEEDL3 18G X 1"	NC	RX/OTC
MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/23G X 3/4"	NC	RX/OTC	MONOJECT HYPODERMIC NEEDLE 27G X 1-1/2"	NC	RX/OTC
MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/25G X 1"	NC	RX/OTC	MONOJECT HYPODERMIC NEEDLE 30GX3/4"	NC	
MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/30G X 3/4"	NC		MONOJECT INTRODUCER NEEDLE/18GX1-1/4"	NC	
MONOJECT HYPO/POLYPROPYLENE HUB/LL/SHORT BEVEL/18G X 1"	NC	RX/OTC	MONOJECT LIFESHIELD BLUNTCANNULA/LUER LOCK SYR/3ML/18G X 1"	NC	RX/OTC
MONOJECT HYPO/POLYPROPYLENE HUB/LL/SHORT BEVEL/19G TW X 1"	NC	RX/OTC	MONOJECT LIFESHIELD SYRINGE/12ML/18GX1"	NC	RX/OTC
MONOJECT HYPO/POLYPROPYLENE HUB/LL/SHORT BEVEL/19G TW X 1.5"	NC	RX/OTC	MONOJECT MAGELLAN SAFETYNEEDLE 18GX1"	NC	RX/OTC
MONOJECT HYPO/POLYPROPYLENE HUB/LL/SHORT BEVEL/20G X 1-1/2"	NC	RX/OTC	MONOJECT MAGELLAN SAFETYNEEDLE 19GX1"	NC	RX/OTC
			MONOJECT MAGELLAN SAFETYNEEDLE 19GX1- 1/2"	NC	RX/OTC
			MONOJECT MAGELLAN SAFETYNEEDLE 20GX1"	NC	RX/OTC
			MONOJECT MAGELLAN SAFETYNEEDLE 20GX1- 1/2"	NC	RX/OTC
			MONOJECT MAGELLAN SAFETYNEEDLE 21GX1"	NC	RX/OTC



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MONOJECT MAGELLAN SAFETYNEEDLE 21GX1-1/2"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/1ML/25G X 5/8"	NC	RX/OTC
MONOJECT MAGELLAN SAFETYNEEDLE 21GX5/8"	NC		MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/3ML/20G X 1"	NC	RX/OTC
MONOJECT MAGELLAN SAFETYNEEDLE 22GX1"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/3ML/20G X 1-1/2"	NC	RX/OTC
MONOJECT MAGELLAN SAFETYNEEDLE 22GX1-1/2"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/3ML/21G X 1"	NC	RX/OTC
MONOJECT MAGELLAN SAFETYNEEDLE 23GX1"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/3ML/21G X 1-1/2"	NC	RX/OTC
MONOJECT MAGELLAN SAFETYNEEDLE 23GX5/8"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/3ML/22G X 1"	NC	RX/OTC
MONOJECT MAGELLAN SAFETYNEEDLE 25GX1"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/3ML/22G X 1-1/2"	NC	RX/OTC
MONOJECT MAGELLAN SAFETYNEEDLE 25GX5/8"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/3ML/23G X 1"	NC	RX/OTC
MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/12ML/18G X 1"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/3ML/25G X 1"	NC	RX/OTC
MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/12ML/20G X 1-1/2"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/3ML/25G X 5/8"	NC	
MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/12ML/21G X 1"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/6ML/18GX1"	NC	
MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/12ML/21G X 1-1/2"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/6ML/20G X 1-1/2"	NC	
MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/12ML/22G X 1-1/2"	NC	RX/OTC	MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/6ML/21G X 1"	NC	RX/OTC
MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/1ML/23G X 1"	NC				
MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/1ML/25G X 1"	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/6ML/21G X 1-1/2"	NC	RX/OTC	MONOJECT SOFTPACK 60ML/LLOCK	NC	RX/OTC
MONOJECT MAGELLAN SYRINGE/SAFETY NEEDLE/6ML/22G X 1-1/2"	NC	RX/OTC	MONOJECT SOFTPACK 60ML/REGULAR LUER	NC	RX/OTC
MONOJECT MEDICATION TRANSFER NEEDLE/20GX1"	NC		MONOJECT STANDARD HYPODERMIC NEEDLE/ALUMINUM HUB/14GX1-1/2"	NC	
MONOJECT PHARMACY TRAY/LUER LOCK/12ML	NC	RX/OTC	MONOJECT STANDARD HYPODERMIC NEEDLE/ALUMINUM HUB/21G X 2"	NC	RX/OTC
MONOJECT PHARMACY TRAY/LUER LOCK/20ML	NC	RX/OTC	MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE N/22G X1-1/2"	NC	RX/OTC
MONOJECT PHARMACY TRAY/LUER LOCK/35ML	NC	RX/OTC	MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE HUB/18GX1"	NC	RX/OTC
MONOJECT PHARMACY TRAY/LUER LOCK/3ML	NC	RX/OTC	MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE HUB/19GX1"	NC	RX/OTC
MONOJECT PHARMACY TRAY/LUER LOCK/60ML	NC	RX/OTC	MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE HUB/20GX1"	NC	RX/OTC
MONOJECT PHARMACY TRAY/LUER LOCK/6ML	NC	RX/OTC	MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE HUB/21GX1"	NC	RX/OTC
MONOJECT PHARMACY TRAY/REG LUER/1ML	NC	RX/OTC	MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/19GX1-1/2"	NC	RX/OTC
MONOJECT PISTON SYRINGE/CATHETER TIP/140ML	NC		MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/20GX1-1/2"	NC	RX/OTC
MONOJECT PISTON SYRINGE/LUER-LOCK TIP/140ML	NC		MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/21GX1-1/2"	NC	RX/OTC
MONOJECT PISTON SYRINGE/REGULAR TIP/140ML	NC				
MONOJECT SOFTPACK 20ML/LLOCK	NC	RX/OTC			
MONOJECT SOFTPACK 20ML/LTIP	NC	RX/OTC			
MONOJECT SOFTPACK 35ML/CATHTIP	NC	RX/OTC			
MONOJECT SOFTPACK 35ML/LLOCK	NC	RX/OTC			
MONOJECT SOFTPACK 35ML/REGULAR LOCK	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/22GX1"	NC	RX/OTC	MONOJECT SYRINGE/CATHETERTIP /60ML	NC	RX/OTC
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/22GX1-1/2"	NC	RX/OTC	MONOJECT SYRINGE/ECCENTRIC LUER/20ML	NC	RX/OTC
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/23GX1"	NC	RX/OTC	MONOJECT SYRINGE/ECCENTRIC LUER/35ML	NC	RX/OTC
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/25GX1"	NC	RX/OTC	MONOJECT SYRINGE/ECCENTRIC TIP/60ML	NC	RX/OTC
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/25GX1-1/2"	NC	RX/OTC	MONOJECT SYRINGE/LUER LOCK/20ML	NC	RX/OTC
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/25GX1-1/2"	NC	RX/OTC	MONOJECT SYRINGE/LUER LOCK/35ML	NC	RX/OTC
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/25GX5/8"	NC	RX/OTC	MONOJECT SYRINGE/LUER LOCK/3ML	NC	RX/OTC
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/26GX1-1/2"	NC		MONOJECT SYRINGE/LUER LOCK/3ML/20G X 1"	NC	RX/OTC
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLE NE/27GX1/2"	NC	RX/OTC	MONOJECT SYRINGE/LUER LOCK/3ML/20G X 1-1/2"	NC	RX/OTC
MONOJECT SYRINGE 6ML	NC	RX/OTC	MONOJECT SYRINGE/LUER LOCK/3ML/20G X 3/4"	NC	
MONOJECT SYRINGE PHARMACY TRAY/1ML LUER LOCK	NC	RX/OTC	MONOJECT SYRINGE/LUER LOCK/3ML/22G X 1"	NC	RX/OTC
MONOJECT SYRINGE/12ML/18GX1"	NC	RX/OTC	MONOJECT SYRINGE/LUER LOCK/3ML/22G X 1-1/2"	NC	RX/OTC
MONOJECT SYRINGE/12ML/20GX1-1/2"	NC	RX/OTC	MONOJECT SYRINGE/LUER LOCK/3ML/23G X 1"	NC	RX/OTC
MONOJECT SYRINGE/CATHETERTIP /35ML	NC	RX/OTC	MONOJECT SYRINGE/LUER LOCK/3ML/25G X 1"	NC	RX/OTC
			MONOJECT SYRINGE/LUER LOCK/3ML/25G X 5/8"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MONOJECT SYRINGE/LUER LOCK/3ML/27G X 1-1/4"	NC	RX/OTC	MONOJECT SYRINGE/REG LUER/35ML	NC	RX/OTC
MONOJECT SYRINGE/LUER LOCK/60ML	NC	RX/OTC	MONOJECT SYRINGE/REG LUER/3ML	NC	RX/OTC
MONOJECT SYRINGE/LUER LOCK/6ML	NC	RX/OTC	MONOJECT SYRINGE/REG LUER/6ML	NC	RX/OTC
MONOJECT SYRINGE/LUER LOCK/6ML/20G X 1-1/2"	NC		MONOJECT SYRINGE/REGULARTIP/3ML	NC	RX/OTC
MONOJECT SYRINGE/LUER LOCK/6ML/21G X 1"	NC	RX/OTC	MONOJECT SYRINGE/REGULARTIP/60ML	NC	RX/OTC
MONOJECT SYRINGE/LUER LOCK/6ML/21G X 1-1/2"	NC	RX/OTC	MONOJECT SYRINGE/REGULARTIP/6ML	NC	RX/OTC
MONOJECT SYRINGE/LUER-LOCK TIP/12ML	NC	RX/OTC	MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/3ML/20GX1"	NC	RX/OTC
MONOJECT SYRINGE/LUER-LOCK TIP/140ML	NC		MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/3ML/20GX1-1/2"	NC	RX/OTC
MONOJECT SYRINGE/LUER-LOCK TIP/3ML	NC	RX/OTC	MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/3ML/21GX1"	NC	RX/OTC
MONOJECT SYRINGE/LUER-LOCK TIP/60ML	NC	RX/OTC	MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/3ML/22GX1"	NC	RX/OTC
MONOJECT SYRINGE/LUER-LOCK/3ML/21G X 1"	NC	RX/OTC	MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/3ML/22GX1-1/2"	NC	RX/OTC
MONOJECT SYRINGE/LUER-LOCK/3ML/21G X 1-1/2"	NC	RX/OTC	MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/3ML/23GX1"	NC	RX/OTC
MONOJECT SYRINGE/LUER-LOCK/6ML	NC	RX/OTC	MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/3ML/25GX1"	NC	RX/OTC
MONOJECT SYRINGE/REG LUER/12ML	NC	RX/OTC			
MONOJECT SYRINGE/REG LUER/20ML	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/3ML/25GX1-1/4"	NC		MONOJECT TUBERCULIN SYRINGE SOFTPACK 1ML REGULAR LUER TIP	NC	RX/OTC
MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/3ML/25GX5/8"	NC	RX/OTC	MONOJECT TUBERCULIN SYRINGE/1ML/25GX5/8" MISC	NC	RX/OTC
MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/3ML/27GX1-1/4"	NC	RX/OTC	MONOJECT TUBERCULIN SYRINGE/1ML/28G X 1/2" MISC	NC	RX/OTC
MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/6ML/20GX1-1/2"	NC		MONOJECT TUBERCULIN SYRINGE/DETACH NEEDLE/1ML/25G X 5/8" MISC	NC	RX/OTC
MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/6ML/21G X1"	NC	RX/OTC	MONOJECT TUBERCULIN SYRINGE/DETACH NEEDLE/1ML/26G X 3/8" MISC	NC	RX/OTC
MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/6ML/21GX1-1/2"	NC	RX/OTC	MONOJECT TUBERCULIN SYRINGE/DETACH NEEDLE/1ML/27G X 1/2" MISC	NC	RX/OTC
MONOJECT SYRINGE/STANDARDHY PODERMIC NEEDLE/6ML/22GX1-1/2"	NC	RX/OTC	MONOJECT TUBERCULIN SYRINGE/PERM NEEDLE/0.5ML/28G X 1/2" MISC	NC	
MONOJECT SYRINGE/TOOMEY TYPE/60ML	NC	RX/OTC	MONOJECT TUBERCULIN SYRINGE/PERM NEEDLE/1ML/28G X 1/2" MISC	NC	RX/OTC
MONOJECT TB SYRINGE-NDL 1ML 26GX3/8" MISC	NC	RX/OTC	MONOJECT TUBERCULIN SYRINGE/WITHOUT NEEDLE/REG LUER/1ML	NC	RX/OTC
MONOJECT TB SYRINGE-NDL 1ML 27GX1/2" MISC	NC	RX/OTC	MULTI-DRAW NEEDLE 20GX1-1/2"	NC	RX/OTC
MONOJECT TUBERCULIN SAFETY SYRINGE/1ML/25G X 5/8" MISC	NC	RX/OTC	MULTI-DRAW NEEDLE 21GX1"	NC	
MONOJECT TUBERCULIN SAFETY SYRINGE/1ML/28G X 1/2" MISC	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MULTI-DRAW NEEDLE 21GX1-1/2"	NC	RX/OTC	POLY HUB NEEDLE/25G X 1"	NC	RX/OTC
MULTI-DRAW NEEDLE 22GX1"	NC		POLY HUB NEEDLE/25G X 1-1/2"	NC	RX/OTC
MULTI-DRAW NEEDLE 22GX1-1/2"	NC	RX/OTC	POLY HUB NEEDLE/25G X 5/8"	NC	RX/OTC
MULTI-DRAW NEEDLE/20G X 1"	NC		POLY HUB NEEDLE/27G X 1/2"	NC	RX/OTC
NORM-JECT LUER LOCK SYRINGE	NC	RX/OTC	POLY HUB NEEDLE/27G X 1-1/4"	NC	RX/OTC
NORM-JECT TUBERKULIN 1MLLUER SLIP	NC	RX/OTC	POLY HUB NEEDLE/30G X 1/2"	NC	RX/OTC
NOVOPEN ECHO DEVI	NC	RX/OTC	SECURESAFE SAFETY HYPODERMIC NEEDLE/19G X 1"	NC	RX/OTC
PEN NEEDLES 30GX5MM	NC	QL(5 ea daily); RX/OTC	SECURESAFE SAFETY HYPODERMIC NEEDLE/19G X 1-1/2"	NC	RX/OTC
PEN NEEDLES 31G X 8MM	NC	QL(5 ea daily); RX/OTC	SECURESAFE SAFETY HYPODERMIC NEEDLE/21G X 1-1/2"	NC	RX/OTC
PEN NEEDLES 31GX5MM	NC	QL(5 ea daily); RX/OTC	SECURESAFE SAFETY HYPODERMIC NEEDLE/22G X 1"	NC	RX/OTC
PEN NEEDLES 31GX8MM	NC	QL(5 ea daily); RX/OTC	SECURESAFE SAFETY HYPODERMIC NEEDLE/25G X 1-1/2"	NC	RX/OTC
PEN NEEDLES 32G X 4MM	NC	QL(5 ea daily); RX/OTC	SECURESAFE SAFETY HYPODERMIC NEEDLE/26G X 1/2"	NC	RX/OTC
PEN NEEDLES 32GX4MM	NC	QL(5 ea daily); RX/OTC	SECURESAFE SAFETY HYPODERMIC NEEDLE/27G X 1/2"	NC	RX/OTC
PERFECT POINT SAFTEY NEEDLES/25GX1"	NC	RX/OTC	SECURESAFE SYRINGE/NEEDLE/1ML/2 5G X 1-1/2"	NC	
POLY HUB NEEDLE/18G X 1"	NC	RX/OTC	SECURESAFE SYRINGE/NEEDLE/1ML/2 7G X 1/2"	NC	
POLY HUB NEEDLE/21G X 1"	NC	RX/OTC	SECURESAFE SYRINGE/NEEDLE/3ML/2 0G X 1"	NC	RX/OTC
POLY HUB NEEDLE/21G X 1-1/2"	NC	RX/OTC			
POLY HUB NEEDLE/22G X 1"	NC	RX/OTC			
POLY HUB NEEDLE/22G X 1-1/2"	NC	RX/OTC			
POLY HUB NEEDLE/23G X 1"	NC	RX/OTC			
POLY HUB NEEDLE/23G X 1-1/2"	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
SECURES SAFE SYRINGE/NEEDLE/3ML/20G X 1-1/2"	NC	RX/OTC	SYRINGE/LUER LOCK/3ML/21G X 1-1/2"	NC	RX/OTC
SECURES SAFE SYRINGE/NEEDLE/3ML/21G X 1-1/2"	NC	RX/OTC	SYRINGE/LUER LOCK/3ML/21GX1"	NC	RX/OTC
SECURES SAFE SYRINGE/NEEDLE/3ML/22G X 1-1/2"	NC	RX/OTC	SYRINGE/LUER LOCK/3ML/21GX1-1/2"	NC	RX/OTC
SECURES SAFE SYRINGE/NEEDLE/3ML/25G X 5/8"	NC	RX/OTC	SYRINGE/LUER LOCK/3ML/22G X 1"	NC	RX/OTC
SPINAL NEEDLE 18GX3-1/2"	NC		SYRINGE/LUER LOCK/3ML/22G X 1-1/2"	NC	RX/OTC
SPINAL NEEDLE 20GX3-1/2"	NC		SYRINGE/LUER LOCK/3ML/22GX1"	NC	RX/OTC
SPINAL NEEDLE 22GX3-1/2"	NC		SYRINGE/LUER LOCK/3ML/22GX1-1/2"	NC	RX/OTC
SPINAL NEEDLE 25G X 3-1/2"	NC		SYRINGE/LUER LOCK/3ML/23G X 1"	NC	RX/OTC
SURE COMFORT AUTOKEEPER SAFETY PEN NEEDLES 32GX5/32"	NC	QL(5 ea daily); RX/OTC	SYRINGE/LUER LOCK/3ML/23G X 1-1/2"	NC	RX/OTC
SYRINGE/HYPODERMIC SAFETY12ML 18GX1"	NC	RX/OTC	SYRINGE/LUER LOCK/3ML/23GX1"	NC	RX/OTC
SYRINGE/LUER LOCK/10ML	NC	RX/OTC	SYRINGE/LUER LOCK/3ML/25G X 1"	NC	RX/OTC
SYRINGE/LUER LOCK/10ML/21G X 1"	NC		SYRINGE/LUER LOCK/3ML/25G X 1-1/2"	NC	RX/OTC
SYRINGE/LUER LOCK/20ML	NC	RX/OTC	SYRINGE/LUER LOCK/3ML/25G X 5/8"	NC	RX/OTC
SYRINGE/LUER LOCK/3ML	NC	RX/OTC	SYRINGE/LUER LOCK/3ML/25GX1"	NC	RX/OTC
SYRINGE/LUER LOCK/3ML/20G X 1"	NC	RX/OTC	SYRINGE/LUER LOCK/3ML/25GX5/8"	NC	RX/OTC
SYRINGE/LUER LOCK/3ML/20G X 1-1/2"	NC	RX/OTC	SYRINGE/LUER LOCK/5ML	NC	RX/OTC
SYRINGE/LUER LOCK/3ML/20GX1-1/2"	NC	RX/OTC	SYRINGE/LUER LOCK/5ML/20G X 1-1/2"	NC	RX/OTC
SYRINGE/LUER LOCK/3ML/21G X 1"	NC	RX/OTC	SYRINGE/LUER LOCK/60ML	NC	RX/OTC
			SYRINGE/LUER SLIP/10ML	NC	RX/OTC
			SYRINGE/LUER SLIP/1ML	NC	RX/OTC
			SYRINGE/LUER SLIP/1ML/25G X 5/8"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SYRINGE/LUER SLIP/1ML/26G X 3/8"	NC		SYRINGES/LUER LOCK/WITHOUT NEEDLE/3ML	NC	RX/OTC
SYRINGE/LUER SLIP/1ML/27G X 1/2"	NC		SYRINGES/LUER LOCK/WITHOUT NEEDLE/5ML	NC	RX/OTC
SYRINGE/LUER SLIP/35ML	NC	RX/OTC	SYRINGES/LUER LOCK/WITHOUT NEEDLE/60ML	NC	RX/OTC
SYRINGE/LUER SLIP/3ML	NC	RX/OTC	SYRINGES/LUER SLIP/WITHOUT NEEDLE/1ML	NC	RX/OTC
SYRINGE/LUER SLIP/5ML	NC	RX/OTC	TOOMEY SYRINGE	NC	
SYRINGE/LUER SLIP/60ML	NC	RX/OTC	TRUE COMFORT PRO INSULIN SYRINGE/1ML/32GX5/16"	NC	
SYRINGES/LUER LOCK/10ML/20GX1"	NC		TRUE COMFORT PRO INSULINSYRINGE/0.5ML/32G X 5/16"	NC	
SYRINGES/LUER LOCK/10ML/20GX1-1/2"	NC		TRUE COMFORT PRO PEN NEEDLES 32G X 4MM	NC	QL(5 ea daily); RX/OTC
SYRINGES/LUER LOCK/10ML/21G X 1"	NC		TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16"	NC	
SYRINGES/LUER LOCK/10ML/22GX1"	NC		TRUE COMFORT SAFETY PEN NEEDLES 31G X 5MM	NC	QL(5 ea daily); RX/OTC
SYRINGES/LUER LOCK/10ML/22GX1-1/2"	NC		TRUE COMFORT SAFETY PEN NEEDLES 32G X 4MM	NC	QL(5 ea daily); RX/OTC
SYRINGES/LUER LOCK/1ML/20GX1"	NC	RX/OTC	ULTICARE SYRINGE/LOW DEADSPACE/1ML/22G X1-1/2"	NC	
SYRINGES/LUER LOCK/5ML/20GX1"	NC		ULTICARE SYRINGE/LOW DEADSPACE/3ML/22G X1-1/2"	NC	RX/OTC
SYRINGES/LUER LOCK/5ML/20GX1-1/2"	NC		ULTICARE TUBERCULIN SAFETSYRINGES/1ML/27G X 5/8"	NC	
SYRINGES/LUER LOCK/5ML/21GX1"	NC				
SYRINGES/LUER LOCK/5ML/21GX1-1/2"	NC				
SYRINGES/LUER LOCK/5ML/22GX1-1/2"	NC				
SYRINGES/LUER LOCK/WITHOUT NEEDLE/10ML	NC	RX/OTC			
SYRINGES/LUER LOCK/WITHOUT NEEDLE/20ML	NC	RX/OTC			
SYRINGES/LUER LOCK/WITHOUT NEEDLE/30ML	NC	RX/OTC			



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ULTICARE TUBERCULIN SAFETY SYRINGES/1ML/28G X 1/2"	NC		VANISHPOINT SAFETY SYRINGE/3ML/20GX1-1/2"	NC	RX/OTC
ULTICARE TUBERCULIN SAFETY SYRINGE/1ML/25G X 1" MISC	NC		VANISHPOINT SAFETY SYRINGE/3ML/21GX1"	NC	RX/OTC
ULTICARE TUBERCULIN SAFETY SYRINGE/1ML/25G X 5/8" MISC	NC	RX/OTC	VANISHPOINT SAFETY SYRINGE/3ML/21GX1-1/2"	NC	RX/OTC
ULTICARE TUBERCULIN SAFETY SYRINGES/1ML/27G X 1/2"	NC		VANISHPOINT SAFETY SYRINGE/3ML/22GX1"	NC	RX/OTC
ULTIGUARD SAFE PACK/TINY PEN NEEDLE/32G X 4MM/SHARPS CONTAINER	NC	RX/OTC	VANISHPOINT SAFETY SYRINGE/3ML/22GX1-1/2"	NC	RX/OTC
ULTIGUARD SAFE PACK/TINY PEN NEEDLE/32G X 6MM/SHARPS CONTAINER	NC		VANISHPOINT SAFETY SYRINGE/3ML/23GX1"	NC	RX/OTC
UNIFINE PROTECT SAFETY PEN NEEDLE 30G X 5MM	NC	QL(5 ea daily); RX/OTC	VANISHPOINT SAFETY SYRINGE/3ML/23GX1-1/2"	NC	RX/OTC
UNIFINE PROTECT SAFETY PEN NEEDLE 32G X 4MM	NC	QL(5 ea daily); RX/OTC	VANISHPOINT SAFETY SYRINGE/3ML/25GX1"	NC	RX/OTC
UNIFINE SAFECONTROL PEN NEEDLE 31GX5MM	NC	QL(5 ea daily); RX/OTC	VANISHPOINT SAFETY SYRINGE/3ML/25GX1-1/2"	NC	
UNIFINE SAFECONTROL PEN NEEDLE 31GX8MM	NC	QL(5 ea daily); RX/OTC	VANISHPOINT SAFETY SYRINGE/3ML/25GX5/8"	NC	RX/OTC
VANISHPOINT ALLERGY SYRINGE TRAY/1ML/27G X 1/2" KIT	NC	RX/OTC	VANISHPOINT SAFETY SYRINGE/5ML/21GX1"	NC	
VANISHPOINT SAFETY SYRINGE/10ML/21GX1-1/2"	NC		VANISHPOINT SAFETY SYRINGE/5ML/21GX1-1/2"	NC	
VANISHPOINT SAFETY SYRINGE/3ML/20GX1"	NC	RX/OTC	VANISHPOINT SAFETY SYRINGE/5ML/21GX1-1/2"	NC	
			VANISHPOINT SAFETY SYRINGE/5ML/22GX1-1/2"	NC	
			VANISHPOINT SAFETY SYRINGE/10ML/21G X 1-1/2"	NC	
			VANISHPOINT SAFETY SYRINGE/1ML/25G X 1"	NC	RX/OTC
			VANISHPOINT SAFETY SYRINGE/3ML/20G X 1"	NC	RX/OTC
			VANISHPOINT SAFETY SYRINGE/3ML/20G X 1-1/2"	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
VANISHPOINT SYRINGE/3ML/21G X 1"	NC	RX/OTC
VANISHPOINT SYRINGE/3ML/21G X 1-1/2"	NC	RX/OTC
VANISHPOINT SYRINGE/3ML/22G X 1"	NC	RX/OTC
VANISHPOINT SYRINGE/3ML/22G X 1-1/2"	NC	RX/OTC
VANISHPOINT SYRINGE/3ML/23G X 1"	NC	RX/OTC
VANISHPOINT SYRINGE/3ML/23G X 1-1/2"	NC	RX/OTC
VANISHPOINT SYRINGE/3ML/25G X 1"	NC	RX/OTC
VANISHPOINT SYRINGE/3ML/25G X 1-1/2"	NC	
VANISHPOINT SYRINGE/3ML/25G X 5/8"	NC	RX/OTC
VANISHPOINT SYRINGE/5ML/21G X 1-1/2"	NC	
VANISHPOINT TUBERCULIN SYRINGE 1ML/25G X 5/8" MISC	NC	RX/OTC
VANISHPOINT TUBERCULIN SYRINGE 1ML/27GX1/2" MISC	NC	RX/OTC
VERIFINE PLUS PEN NEEDLE/32G X 4MM	NC	QL(5 ea daily); RX/OTC
YALE NEEDLES 21G X 1-1/4"	NC	
<b>MIGRAINE PRODUCTS - Drugs to Treat Migraine Headaches</b>		
Calcitonin Gene-Related Peptide (CGRP) Receptor Antag		
AJOVY SOAJ	NP	SP
AJOVY SOAJ	NP	

Drug Name	Drug Tier	Requirements/Limits
EMGALITY SOSY 100 MG/ML	NP	
ZAVZPRET	NP	
ZAVZPRET	NC	
<b>Migraine Combinations</b>		
<i>ergotamine w/ caffeine SUPP</i>	NC	
<i>sumatriptan-naproxen sodium</i>	NC	
<i>sumatriptan-naproxen sodium</i>	NP	
TREXIMET (Use <i>sumatriptan-naproxen sodium</i> )	NC	
<b>Migraine Products</b>		
DIHYDROERGOTAMINE MESYLATE CRYST	NC	
DIHYDROERGOTAMINE MESYLATE POWD	NC	
ERGOTAMINE TARTRATE POWD	NC	
<b>Migraine Products - NSAIDs</b>		
<i>diclofenac potassium (migraine)</i>	NC	
ELYXYB	NC	
<b>Serotonin Agonists</b>		
<i>almotriptan malate</i>	NP	
<i>eletriptan hydrobromide</i>	NP	QL(6 ea per 31 day(s) retail)
FROVA (Use <i>frovatriptan succinate</i> )	NP	
<i>frovatriptan succinate</i>	NP	
IMITREX 20 MG/ACT (Use <i>sumatriptan</i> )	P	20 MG/ACT; QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
IMITREX 5 MG/ACT (Use sumatriptan)	P	5 MG/ACT; QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)	<i>rizatriptan benzoate TABS</i>	P	QL(12 ea per 31 day(s) retail); AL(At least 6 yrs old)
IMITREX STATDOSE REFILL SOCT 4 MG/0.5ML (Use sumatriptan succinate)	NP		<i>rizatriptan benzoate TBDP</i>	P	QL(12 ea per 31 day(s) retail); AL(At least 6 yrs old)
IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML (Use sumatriptan succinate)	NP	QL(2 ml per 31 day(s) retail); AL(At least 12 yrs old)	<i>rizatriptan benzoate TBDP 10 MG</i>	NC	QL(12 ea per 31 day(s) retail); AL(At least 6 yrs old)
IMITREX STATDOSE SYSTEM SOAJ 4 MG/0.5ML (Use sumatriptan succinate)	NP		<i>sumatriptan 20 MG/ACT</i>	NP	20 MG/ACT; QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)
IMITREX STATDOSE SYSTEM SOAJ 6 MG/0.5ML (Use sumatriptan succinate)	NP	QL(2 ml per 31 day(s) retail); AL(At least 12 yrs old)	<i>sumatriptan 5 MG/ACT</i>	NP	5 MG/ACT; QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)
IMITREX TABS (Use sumatriptan succinate)	NP	QL(9 ea per 31 day(s) retail); AL(At least 12 yrs old)	<i>sumatriptan succinate SOAJ 4 MG/0.5ML</i>	P	
MAXALT-MLT TBDP 10 MG (Use rizatriptan benzoate)	NP	QL(12 ea per 31 day(s) retail); AL(At least 6 yrs old)	<i>sumatriptan succinate SOAJ 6 MG/0.5ML</i>	P	QL(2 ml per 31 day(s) retail); AL(At least 12 yrs old)
MAXALT TABS 10 MG (Use rizatriptan benzoate)	NP	QL(12 ea per 31 day(s) retail); AL(At least 6 yrs old)	<i>sumatriptan succinate SOCT 4 MG/0.5ML</i>	P	
<i>naratriptan hcl</i>	NP	QL(9 ea per 31 day(s) retail); AL(At least 18 yrs old)	<i>sumatriptan succinate SOCT 6 MG/0.5ML</i>	P	QL(2 ml per 31 day(s) retail); AL(At least 12 yrs old)
RELPAZ 40 MG (Use eletriptan hydrobromide)	NC		<i>sumatriptan succinate SOLN 6 MG/0.5ML</i>	P	QL(2.5 ml per 30 day(s) retail); AL(At least 12 yrs old)
RELPAZ (Use eletriptan hydrobromide)	P	QL(6 ea per 31 day(s) retail)	<i>sumatriptan succinate TABS 25 MG, 100 MG</i>	NC	QL(9 ea per 31 day(s) retail); AL(At least 12 yrs old)
REYVOW	NC		<i>sumatriptan succinate TABS</i>	P	QL(9 ea per 31 day(s) retail); AL(At least 12 yrs old)
<i>rizatriptan benzoate TABS</i>	NC	QL(12 ea per 31 day(s) retail); AL(At least 6 yrs old)	TOSYMRA	NC	
			TOSYMRA	NP	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ZEMBRACE SYMTOUCH SOAJ	NP		CALCIUM CARBONATE LIGHT POWD XX	NC	RX/OTC
ZEMBRACE SYMTOUCH SOAJ	NC		<i>calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 400 UNIT-600 MG</i>	C	QL(2 ea daily)
<i>zolmitriptan SOLN 2.5 MG</i>	NC		<i>calcium carbonate-cholecalciferol TABS 200 UNIT-200 UNIT-500 MG-500 MG, 200 UNIT-500 MG, 5 MCG-500 MG, 500 MG-5 MCG</i>	C	
<i>zolmitriptan SOLN 5 MG</i>	NP	QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)	CALCIUM CARBONATE POWD XX	NC	RX/OTC
<i>zolmitriptan TABS</i>	NP	QL(6 ea per 31 day(s) retail)	<i>calcium carbonate TABS 500 MG, 600 MG, 1250 MG, 1500 MG</i>	NC	
<i>zolmitriptan TABS</i>	NC	QL(6 ea per 31 day(s) retail)	<i>calcium chloride (dihydrate) SOLN</i>	NC	
<i>zolmitriptan TBDP</i>	NP	QL(6 ea per 31 day(s) retail)	CALCIUM CHLORIDE ANHYDROUS GRAN	NC	
ZOMIG SOLN ( <i>Use zolmitriptan</i> )	NP	QL(6 ea per 31 day(s) retail); AL(At least 12 yrs old)	CALCIUM CHLORIDE DIHYDRATE GRAN	NC	
ZOMIG SOLN 2.5 MG	NP		CALCIUM CHLORIDE DIHYDRATE POWD	NC	
ZOMIG TABS 2.5 MG, 5 MG ( <i>Use zolmitriptan</i> )	NC	QL(6 ea per 31 day(s) retail)	CALCIUM CHLORIDE SOLN	NC	
<b>MINERALS &amp; ELECTROLYTES</b>			CALCIUM GLUCONATE ANHYDROUS POWD	NC	RX/OTC
<b>Bicarbonates</b>			CALCIUM GLUCONATE MONOHYDRATE POWD	NC	RX/OTC
SODIUM ACETATE ANHYDROUS CRYSTALS	NC		CALCIUM GLUCONATE/SODIUMCHLORIDE SOLN 1 GM/100ML-0.8 %, 1 GM/50ML-0.675 %, 2 GM/100ML-0.675 %	NC	
SODIUM ACETATE ANHYDROUS POWD	NC	RX/OTC	CALCIUM GLUCONATE POWD	NC	RX/OTC
SODIUM ACETATE TRIHYDRATE GRAN	NC		<i>calcium gluconate-sodium chloride SOLN</i>	NC	
<i>sodium acetate SOLN</i>	NC		<i>calcium gluconate SOLN</i>	NC	
<i>sodium bicarbonate IV 4.2 %, 7.5 %, 8.4 %</i>	NC		CALCIUM LACTATE PENTAHYDRATE	NC	
SODIUM BICARBONATE IV	NC				
THAM	NC				
TROMETHAMINE	NC				
<b>Calcium</b>					
CALCIUM CARBONATE EXTRA LIGHT POWD XX	NC	RX/OTC			
CALCIUM CARBONATE HEAVY POWD XX	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CALCIUM PHOSPHATE DIBASIC	NC		<i>dextrose w/ sodium chloride 0.45 %-2.5 %, 0.9 %-5 %, 10 %-0.45 %, 5 %-0.2 %, 5 %-0.225 %, 5 %-0.3 %, 5 %-0.33 %, 5 %-0.45 %, 5 %-0.9 %</i>	NC	
CALCIUM PHOSPHATE DIBASICDIHYDRATE	NC				
CALCIUM PHOSPHATE TRIBASIC	NC	RX/OTC			
<i>oyster shell</i>	C				
Electrolyte Mixtures			DRIPDROP HYDRATION POWDER PACK	NC	
BIOLYTE PACK	NC		DRIPDROP ORS PACK	NC	
BIOLYTE SOLN	C		<i>electrolyte-148</i>	NC	
CERALYTE 50 POTASSIUM FREE PACK	NC		<i>electrolyte-a</i>	NC	
CERALYTE 50 PACK	NC		EMERGEN-C ELECTRO MIX PACK	NC	
CERALYTE 70 POTASSIUM FREE PACK	NC		ENFAMIL ENFALYTE SOLN	C	
CERALYTE 70 PACK	NC		ENSURE RAPID HYDRATION PACK	NC	
CERALYTE 70 SOLN	C		EQUALYTE SOLN ( <i>Use oral electrolytes</i> )	NC	
CERALYTE 90 PACK	NC		GNP ELECTROLYTE POWDER PACK	NC	
CERAORS 75 NATURAL PACK	NC		GOODSENSE ELECTROLYTE ADVANTAGE CARE SOLN	C	
CERASPORT ENDURANCE PACK	NC		GOODSENSE ELECTROLYTE POWDER PACK	NC	
CERASPORT EX1 PACK	NC		HYDRALYTE FREEZER POPS SOLN	C	
CERASPORT EX1 SOLN	C		HYDRALYTE PACK	NC	
CERASPORT PLUS PACK	NC		HYDRALYTE SOLN	C	
CERASPORT PACK	NC		HYDRATING ELECTROLYTE PACK	NC	
CERASPORT SOLN	C		IONOSOL-MB/DEXTROSE 5%	NC	
DEXTROSE 5%/ELECTROLYTE #48 VIAFLEX	NC		ISOLYTE-P/DEXTROSE 5%	NC	
DEXTROSE 10%/SODIUM CHLORIDE 0.2%	NC		ISOLYTE-S	NC	
<i>dextrose in lactated ringers</i>	NC		ISOLYTE-S PH 7.4	NC	
			KINDERLYTE IMMUNITY PACK	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
KINDERLYTE PREMAX PACK	NC		<i>potassium chloride in dextrose 5 %-10 MEQ/L, 5 %-20 MEQ/L</i>	NC	
KINDERLYTE PREMAX SOLN	C		<i>potassium chloride in dextrose &amp; sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.225 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.225 %, 5 %-20 MEQ/L-0.45 %, 5 %-30 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.45 %, 5 %-40 MEQ/L-0.9 %</i>	NC	
KINDERLYTE PACK	NC				
KINDERLYTE SOLN	C				
<i>lactated ringer's</i>	NC				
LIQUID I.V. PACK	NC				
NORMALYTE PACK	NC				
NORMOSOL -R	NC				
NORMOSOL-M/D5W	NC				
NORMOSOL-R	NC				
NORMOSOL-R/5% DEXTROSE	NC				
<i>oral electrolytes SOLN</i>	C		<i>potassium chloride in nacl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 %</i>	NC	
<i>parenteral electrolytes CONC</i>	NC		POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS	NC	
PEDIALYTE ADVANCED CARE SOLN ( <i>Use oral electrolytes</i> )	NC		<i>ringer's</i>	NC	
PEDIALYTE FREEZER POPS SOLN ( <i>Use oral electrolytes</i> )	NC		TPN ELECTROLYTES CONC	NC	
PEDIALYTE IMMUNE SUPPORT SOLN	C		TRUELYTE SOLN	C	
PEDIALYTE SINGLES SOLN ( <i>Use oral electrolytes</i> )	NC		Fluoride		
PEDIALYTE SPARKLING RUSH PACK	NC		FLORIVA	NC	
PEDIALYTE PACK	NC		<i>sodium fluoride CHEW 0.25 MG, 0.5 MG, 1 MG, 2.2 MG</i>	C	
PEDIALYTE SOLN ( <i>Use oral electrolytes</i> )	NC		<i>sodium fluoride SOLN 0.5 MG/ML</i>	C	RX/OTC
PEDIA-POP ORAL ELECTROLYTE QUICK MIX PACK	NC		SOLUVITA SOLN	C	RX/OTC
PEDIATRIC ELECTROLYTE PACK	NC		Magnesium		
PLASMA-LYTE-148 ( <i>Use electrolyte-148</i> )	NC		MAGNESIUM CARBONATE HEAVY POWD XX	NC	RX/OTC
			MAGNESIUM CARBONATE LIGHT POWD XX	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
MAGNESIUM CHLORIDE HEXAHYDRATE CRYSTALS	NC		K-TAB TBCR 10 MEQ, 20 MEQ (Use potassium chloride)	NC	
MAGNESIUM CHLORIDE POWDER	NC	RX/OTC	POKONZA PACK OR	NC	
<i>magnesium chloride SOLN</i>	NC		<i>potassium acetate SOLN 2 MEQ/ML</i>	NC	
<i>magnesium oxide (mg supplement) TABS 241.5 MG, 400 MG</i>	C		POTASSIUM ACETATE SOLN 2 MEQ/ML	NC	
<i>magnesium sulfate IJ 50 %</i>	NC		POTASSIUM BICARBONATE GRAN	NC	
MAGNESIUM SULFATE IJ 50 %	NC		POTASSIUM BICARBONATE POWDER	NC	
<i>magnesium sulfate in dextrose</i>	NC		<i>potassium bicarbonate TBEF</i>	C	
MAGOX 400 TABS (Use magnesium oxide (mg supplement))	NC		<i>potassium chloride microencapsulated crystals er</i>	C	
Manganese			<i>potassium chloride CPCR 10 MEQ</i>	C	
<i>manganese chloride</i>	NC		<i>potassium chloride CPCR 8 MEQ</i>	C	QL(1 ea daily)
Phosphate			POTASSIUM CHLORIDE CRYSTALS	NC	
K-PHOS NEUTRAL (Use potassium phosphate monobasic w/ sodium phosphate dibasic & monobasic)	NC	QL(8 ea daily)	POTASSIUM CHLORIDE GRAN	NC	RX/OTC
<i>potassium phosphate monobasic w/ sodium phosphate dibasic &amp; monobasic</i>	C	QL(8 ea daily)	<i>potassium chloride PACK OR 20 MEQ</i>	C	
<i>potassium phosphate monobasic TABS</i>	NC		POTASSIUM CHLORIDE POWDER	NC	
<i>potassium phosphates 236 MG/ML-224 MG/ML</i>	NC		<i>potassium chloride SOLN OR 10 %, 20 %</i>	C	
POTASSIUM PHOSPHATES	NC		<i>potassium chloride SOLN IV</i>	NC	
<i>sodium phosphates (sodium phosphate dibasic &amp; monobasic) 142 MG/ML-276 MG/ML, 710 MG/5ML-1380 MG/5ML</i>	NC		<i>potassium chloride TBCR 20 MEQ</i>	NC	
Potassium			<i>potassium chloride TBCR 8 MEQ, 10 MEQ</i>	C	
EFFER-K	NC		Sodium		
			SODIUM CHLORIDE GRAN	NC	RX/OTC
			SODIUM CHLORIDE POWDER	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>sodium chloride SOLN IV 0.45 %, 0.9 %, 3 %, 4 MEQ/ML, 5 %</i>	NC		AMPHADASE	NC	
SODIUM CHLORIDE SOLN IV 4 MEQ/ML	NC		BROMELAIN 1200 GDU POWD	NC	RX/OTC
Trace Minerals			BROMELAIN POWD	NC	RX/OTC
<i>chromic chloride</i>	NC		CHYMOTRYPSIN ALPHA	NC	
COPPER SULFATE CRYSTALS	NC		HYLENEX	NC	
<i>cupric chloride</i>	NC		VITRASE SOLN	NC	
CUPRIC SULFATE PENTAHYDRATE GRAN	NC		Immunomodulators		
CUPRIC SULFATE POWD	NC	RX/OTC	JOENJA	NC	
MULTRYS	NC		REZUROCK	NP	SP
<i>selenious acid</i>	NC		RYSTIGGO 560 MG/4ML, 840 MG/6ML	NC	
SELENIOS ACID	NC		RYSTIGGO 280 MG/2ML, 420 MG/3ML	NC	SP
TRALEMENT	NC		Immunosuppressive Agents		
Zinc			ASTAGRAF XL CP24	NP	
GALZIN	NC		AZATHIOPRINE	NC	
WILZIN	NC		AZATHIOPRINE POWD	NC	
<i>zinc chloride SOLN</i>	NC		<i>azathioprine TABS</i>	P	
ZINC SULFATE GRANULAR	NC	RX/OTC	<i>azathioprine TABS 50 MG</i>	NC	
ZINC SULFATE HEPTAHYDRATE	NC	RX/OTC	<i>azathioprine TABS 75 MG, 100 MG</i>	NP	
ZINC SULFATE HEPTAHYDRATE GRAN	NC		CELLCEPT CAPS (Use mycophenolate mofetil)	NP	
ZINC SULFATE MONOHYDRATE	NC	RX/OTC	CELLCEPT SUSR (Use mycophenolate mofetil)	NP	
<i>zinc sulfate SOLN</i>	NC		CELLCEPT TABS (Use mycophenolate mofetil)	NP	
<b>MISCELLANEOUS THERAPEUTIC CLASSES</b>			<i>cyclosporine modified (for microemulsion) CAPS</i>	P	
Chelating Agents			<i>cyclosporine modified (for microemulsion) CAPS 25 MG, 100 MG</i>	NC	
DEPEN TITRATABS TABS (Use penicillamine)	NC		<i>cyclosporine modified (for microemulsion) SOLN</i>	P	
<i>penicillamine CAPS</i>	NC		<i>cyclosporine CAPS</i>	P	
<i>penicillamine TABS</i>	C		<i>cyclosporine SOLN IV 50 MG/ML</i>	NC	
Enzymes			ENSPRYNG	NP	SP



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ENVARUSUS XR TB24	NP		<i>sirolimus SOLN</i>	P	
<i>everolimus (immunosuppressant)</i>	NP		<i>sirolimus TABS</i>	P	
IMURAN TABS ( <i>Use azathioprine</i> )	NP		<i>tacrolimus CAPS</i>	NC	
LUPKYNIS	NC	SP	<i>tacrolimus CAPS</i>	P	
<i>mycophenolate mofetil hcl</i>	NC		UPLIZNA	NC	SP
<i>mycophenolate mofetil CAPS</i>	P		ZORTRESS ( <i>Use everolimus (immunosuppressant)</i> )	NP	
<i>mycophenolate mofetil SUSR</i>	P		Irrigation Solutions		
<i>mycophenolate mofetil TABS</i>	NC		<i>irrigation solutions, physiological</i>	NC	
<i>mycophenolate mofetil TABS</i>	P		<i>lactated ringer's (irrigation)</i>	NC	
<i>mycophenolate sodium</i>	NC		<i>ringer's irrigation</i>	NC	
<i>mycophenolate sodium</i>	P		<i>water for irrigation, sterile</i>	NC	
MYFORTIC ( <i>Use mycophenolate sodium</i> )	NP		Misc Natural Products		
MYHIBBIN SUSP	NP		AIRBORNE CHEW	NC	
NEORAL CAPS ( <i>Use cyclosporine modified (for microemulsion)</i> )	NP		CVS SLEEP SUPPORT CHEW	NC	
NEORAL SOLN ( <i>Use cyclosporine modified (for microemulsion)</i> )	NP		ELDERBERRY IMMUNE COMPLEX/VITAMIN C/VITAMIN D/ZINC CHEW	NC	
PROGRAF CAPS ( <i>Use tacrolimus</i> )	NP		ELDERBERRY ZINC LOZENGE/VITAMIN C & IMMUNE BLEND LOZG	NC	
PROGRAF PACK	NP		ELDERBERRY/VITAMIN C/ZINC CHEW	NC	
PROGRAF SOLN	NC		ESBERITOX CHEW	NC	
RAPAMUNE SOLN ( <i>Use sirolimus</i> )	P		MIDNITE FOR MENOPAUSE CHEW	NC	
RAPAMUNE TABS ( <i>Use sirolimus</i> )	P		MIDNITE PM CHEW	NC	
SANDIMMUNE CAPS ( <i>Use cyclosporine</i> )	P		MIDNITE CHEW	NC	
SANDIMMUNE SOLN IV 50 MG/ML	NC		MORNINGSICKLESS LOZG	NC	
SANDIMMUNE SOLN OR 100 MG/ML	P	QL(8 ml daily)	NEURIVA CHEW	NC	
SIMULECT	NC		SAMBUCUS COUGH RELIEF + IMMUNE GUMMY CHEW	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SAMBUCUS ELDERBERRY IMMUNE SUPPORT KIDS CHEW	NC		DIANEAL LOW CALCIUM/1.5%DEXTROSE	NC	
SAMBUCUS ELDERBERRY IMMUNE SUPPORT CHEW	NC		DIANEAL LOW CALCIUM/2.5%DEXTROSE	NC	
SAMBUCUS ELDERBERRY VITAMIN C LOZG	NC		DIANEAL LOW CALCIUM/4.25%DEXTROSE	NC	
SAMBUCUS ELDERBERRY ZINC LOZG	NC		DIANEAL PD-2/1.5% DEXTROSE	NC	
SAMBUCUS ELDERBERRY LOZG	NC		DIANEAL PD-2/2.5% DEXTROSE	NC	
SAMBUCUS KIDS COUGH RELIEF + IMMUNE GUMMY CHEW	NC		DIANEAL PD-2/4.25% DEXTROSE	NC	
STOMACH SETTLE LOZG	NC		EXTRANEAL	NC	
UPSPRING STOMACH SETTLE LOZG	NC		ULTRABAG/DIANEAL LOW CALCIUM/2.5% DEXTROSE	NC	
YUMVS BEET ROOT/TART CHERRY EXTRACT CHEW	NC		ULTRABAG/DIANEAL LOW CALCIUM/4.25% DEXTROSE 4.25 %-448 MG/100ML-538 MG/100ML-5.08 MG/100ML-18.3 MG/100ML	NC	
Miscellaneous Therapeutic Classes			ULTRABAG/DIANEAL PD-2/1.5% DEXTROSE	NC	
ADENOSINE-5-MONOPHOSPHATE	NC		ULTRABAG/DIANEAL PD-2/2.5% DEXTROSE	NC	
ADENOSINE-5-TRIPHOSPHATE	NC		ULTRABAG/DIANEAL PD-2/4.25% DEXTROSE	NC	
Peritoneal Dialysis Solutions			Potassium Removing Agents		
DELFLEX-LC/1.5% DEXTROSE	NC		LOKELMA	NC	
DELFLEX-LC/2.5% DEXTROSE	NC		<i>sodium polystyrene sulfonate POWD</i>	C	
DELFLEX-LC/4.25% DEXTROSE	NC		<i>sodium polystyrene sulfonate SUSP OR 15 GM/60ML</i>	C	
DELFLEX-SM/1.5% DEXTROSE	NC		VELTASSA	NC	
DELFLEX-SM/2.5% DEXTROSE	NC		Prostaglandins		
			<i>alprostadil</i>	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PROSTIN VR PEDIATRIC	NC		FLUORIMAX 5000 SENSITIVE PSTE	NC	
Sclerosing Agents			FRAICHE 5000 PREVI	NC	
<i>sodium tetradecyl sulfate</i>	NC		FRAICHE 5000 SENSITIVE GEL	NC	
Systemic Lupus Erythematosus Agents			PREVIDENT 5000 BOOSTER PLUS PSTE DT ( <i>Use sodium fluoride (dental)</i> )	NC	QL(113 ml per 60 day(s) retail)
SAPHNELO	NC	SP	PREVIDENT 5000 DRY MOUTH GEL ( <i>Use sodium fluoride (dental)</i> )	NC	QL(113 ml per 60 day(s) retail)
Uremic Pruritus Agents			PREVIDENT 5000 KIDS PSTE DT ( <i>Use sodium fluoride (dental)</i> )	NC	QL(113 ml per 60 day(s) retail)
KORSUVA	NC		PREVIDENT 5000 ORTHO DEFENSE PSTE DT ( <i>Use sodium fluoride (dental)</i> )	NC	QL(113 ml per 60 day(s) retail)
<b>MOUTH/THROAT/DENTAL AGENTS</b>			PREVIDENT 5000 PLUS CREA ( <i>Use sodium fluoride (dental)</i> )	NC	QL(113 gm per 60 day(s) retail)
Anesthetics Topical Oral			PREVIDENT FLUORIDE GEL ( <i>Use sodium fluoride (dental)</i> )	NC	QL(113 gm per 60 day(s) retail)
<i>lidocaine hcl (mouth-throat) 4 %</i>	NC		PREVIDENT RINSE SOLN	NC	
<i>lidocaine hcl (mouth-throat) 2 %</i>	C	QL(100 ml per fill retail)	<i>sodium fluoride (dental) CREA</i>	C	QL(113 gm per 60 day(s) retail)
Anti-infectives - Throat			<i>sodium fluoride (dental) GEL</i>	C	QL(113 gm per 60 day(s) retail)
AMPHOTERICIN B	NC		<i>sodium fluoride (dental) PSTE DT</i>	C	QL(113 gm per 60 day(s) retail)
<i>clotrimazole</i>	NC		<i>sodium fluoride (dental) SOLN 0.2 %</i>	NC	
NYSTATIN ( <i>Use nystatin (mouth-throat)</i> )	P	2 package(s) per fill retail	<i>sodium fluoride-potassium nitrate GEL</i>	NC	
<i>nystatin (mouth-throat)</i>	P	2 package(s) per fill retail	ZINC ACETATE	NC	
<i>nystatin (mouth-throat)</i>	NC	2 package(s) per fill retail	Steroids - Mouth/Throat/Dental		
ORAVIG	NC		<i>triamcinolone acetonide (mouth)</i>	C	1 package(s) per fill retail
Antiseptics - Mouth/Throat			Throat Products - Misc.		
<i>chlorhexidine gluconate (mouth-throat)</i>	C				
PERIDEX ( <i>Use chlorhexidine gluconate (mouth-throat)</i> )	NC				
Dental Products					
DENTA 5000 PLUS SENSITIVE PSTE	NC				
FLUORIDEX SENSITIVITY RELIEF/SLS FREE PSTE	NC				
FLUORIDEX SENSITIVITY RELIEF PSTE	NC				

Drug Name	Drug Tier	Requirements/Limits
<i>cevimeline hcl</i>	NC	
<i>pilocarpine hcl (oral) 7.5 MG</i>	NC	
<i>pilocarpine hcl (oral) 5 MG</i>	C	QL(6 ea daily)
SALAGEN 5 MG ( <i>Use pilocarpine hcl (oral)</i> )	NC	QL(6 ea daily)
<b>MULTIVITAMINS</b>		
B-Complex Vitamins		
<i>b-complex vitamins CAPS</i>	C	QL(1 ea daily)
<i>b-complex vitamins TABS</i>	C	QL(1 ea daily)
B-Complex w/ Folic Acid		
<i>b-complex w/ c &amp; folic acid CAPS</i>	C	QL(1 ea daily); RX/OTC
DIALYVITE 3000	NC	
DIALYVITE 5000	NC	
DIALYVITE 800 PLUS D WAFR	NC	
DIALYVITE/ZINC	NC	
NEPHPLEX RX	NC	
VITAL-D RX	NC	
Multiple Vitamins w/ Calcium		
<i>multiple vitamins w/ calcium TABS</i>	C	QL(1 ea daily)
ONE-A-DAY WOMENS FORMULA TABS ( <i>Use multiple vitamins w/ calcium</i> )	NC	QL(1 ea daily)
SM ONE DAILY ESSENTIAL TABS	C	QL(1 ea daily)
Multiple Vitamins w/ Iron		
DAVIMET/IRON CHEW	NC	
Multiple Vitamins w/ Minerals		
ACTIVNUTRIENTS PERFORMANCE CAPS	C	QL(1 ea daily); RX/OTC
ACTIVNUTRIENTS W/O IRON CAPS	C	QL(1 ea daily); RX/OTC
ACTIVNUTRIENTS CAPS	C	QL(1 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits
ALIVE EVERYDAY IMMUNE HEALTH CAPS	C	QL(1 ea daily); RX/OTC
ALIVE HAIR, SKIN & NAILS CAPS	C	QL(1 ea daily); RX/OTC
APETIBEX CAPS	C	QL(1 ea daily); RX/OTC
APPE-CURB CAPS	C	QL(1 ea daily); RX/OTC
BARIATRIC MULTIVITAMINS/IRON CAPS	C	QL(1 ea daily); RX/OTC
BIO-35 GLUTEN-FREE CAPS	C	QL(1 ea daily); RX/OTC
BIO-35 IRON FREE CAPS	C	QL(1 ea daily); RX/OTC
BIOCAL CAPS	C	QL(1 ea daily); RX/OTC
BONEUP 3 PER DAY CAPS	C	QL(1 ea daily); RX/OTC
BONEUP CAPS	C	QL(1 ea daily); RX/OTC
BOOSTNOW IMMUNE SUPPORT CAPS	C	QL(1 ea daily); RX/OTC
CELEBRATE MULTI-COMplete18 CAPS	C	QL(1 ea daily); RX/OTC
CELEBRATE MULTI-COMplete36 CAPS	C	QL(1 ea daily); RX/OTC
CELEBRATE MULTI-COMplete45 CAPS	C	QL(1 ea daily); RX/OTC
CELEBRATE MULTI-COMplete60 CAPS	C	QL(1 ea daily); RX/OTC
CHOICEFUL MULTIVITAMIN CAPS	C	QL(1 ea daily); RX/OTC
CVS ADULT 50+ EYE HEALTH CAPS	C	QL(1 ea daily); RX/OTC
CVS EYE HEALTH ADULT 50+ CAPS	C	QL(1 ea daily); RX/OTC
CVS IMMUNE SUPPORT CAPS	C	QL(1 ea daily); RX/OTC
CVS VISION HEALTH CAPS	C	QL(1 ea daily); RX/OTC
DECUBI-VITE CAPS	C	QL(1 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
DEKAS PLUS OCEAN CAPS	C	QL(1 ea daily); RX/OTC	MVW COMPLETE FORMULATIOND500 CAPS	C	QL(1 ea daily); RX/OTC
DEKAS PLUS CAPS	C	QL(1 ea daily); RX/OTC	MVW COMPLETE FORMULATIONMINIS CAPS	C	QL(1 ea daily); RX/OTC
DEXATRAN CAPS	C	QL(1 ea daily); RX/OTC	MVW MODULATOR FORMULATION MINIS CAPS	C	QL(1 ea daily); RX/OTC
EYE HEALTH CAPS	C	QL(1 ea daily); RX/OTC	MVW MODULATOR FORMULATION CAPS	C	QL(1 ea daily); RX/OTC
EYE MULTIVITAMIN/LUTEIN CAPS	C	QL(1 ea daily); RX/OTC	OCUVEL CAPS 250 MG-0.5 MG-5 MG-1 MG-40 MG-1 MG-200 UNIT	C	QL(1 ea daily); RX/OTC
EYE MULTIVITAMIN CAPS	C	QL(1 ea daily); RX/OTC	OCUVITE ADULT 50+ CAPS	C	QL(1 ea daily); RX/OTC
FOLAGENT DHA CAPS	C	QL(1 ea daily); RX/OTC	OCUVITE ADULT FORMULA CAPS	C	QL(1 ea daily); RX/OTC
FOLAMED DHA CAPS	C	QL(1 ea daily); RX/OTC	OCUVITE LUTEIN CAPS	C	QL(1 ea daily); RX/OTC
GENADEK STEP 1 CAPS	C	QL(1 ea daily); RX/OTC	ONE-DAILY MULTI CAPS CAPS	C	QL(1 ea daily); RX/OTC
GENADEK STEP 2 CAPS	C	QL(1 ea daily); RX/OTC	PRESCRIPTION SUPPORT CAPS	C	QL(1 ea daily); RX/OTC
HAIR/SKIN/NAILS CAPS	C	QL(1 ea daily); RX/OTC	PRESERVISION AREDS 2 + MULTI VITAMIN CAPS	C	QL(1 ea daily); RX/OTC
HEALTHY EYES SUPERVISION2 CAPS	C	QL(1 ea daily); RX/OTC	PRESERVISION AREDS 2 CAPS	C	QL(1 ea daily); RX/OTC
IMMUNE ESSENTIALS DAILY CAPS	C	QL(1 ea daily); RX/OTC	PRESERVISION AREDS CAPS	C	QL(1 ea daily); RX/OTC
MENATROL CAPS	C	QL(1 ea daily); RX/OTC	PRESERVISION/LUTEIN CAPS	C	QL(1 ea daily); RX/OTC
MENS 50+ ADVANCED CAPS	C	QL(1 ea daily); RX/OTC	PRORENAL+D/OMEGA-3 CAPS	C	QL(1 ea daily); RX/OTC
MOOD FOOD ES CAPS	C	QL(1 ea daily); RX/OTC	PROTECT CARDIO AF CAPS	C	QL(1 ea daily); RX/OTC
MOOD FOOD CAPS	C	QL(1 ea daily); RX/OTC	PROTECT PLUS SO CAPS	C	QL(1 ea daily); RX/OTC
MULTIA CAPS	C	QL(1 ea daily); RX/OTC	PROTEGRA CAPS	C	QL(1 ea daily); RX/OTC
<i>multiple vitamins w/ minerals CAPS</i>	C	QL(1 ea daily); RX/OTC	QC OCUHEALTH VISION SUPPORT 2 CAPS	C	QL(1 ea daily); RX/OTC
MVW COMPLETE FORMULATION CAPS	C	QL(1 ea daily); RX/OTC			
MVW COMPLETE FORMULATIOND3000 CAPS	C	QL(1 ea daily); RX/OTC			

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
REMEDIENT CAPS	C	QL(1 ea daily); RX/OTC	ALTRIXA TABS	C	QL(1 ea daily); RX/OTC
SKIN HAIR & NAILS ADVANCED BEAUTY CAPS	C	QL(1 ea daily); RX/OTC	AMLADEX TABS	C	QL(1 ea daily); RX/OTC
SUPER ANTIOXIDANT CAPS	C	QL(1 ea daily); RX/OTC	DAILY MULTIPLE VITAMINS TABS	C	QL(1 ea daily); RX/OTC
SUPPORT-500 CAPS	C	QL(1 ea daily); RX/OTC	DAVIMET-M CHEW	C	QL(1 ea daily); RX/OTC
THERAMILL FORTE CAPS	C	QL(1 ea daily); RX/OTC	DERMACINRX DAVIMET CHEW	C	QL(1 ea daily); RX/OTC
THERANATAL LACTATION ONE CAPS	C	QL(1 ea daily); RX/OTC	ESTROFACTORS TABS	C	QL(1 ea daily); RX/OTC
VISION HEALTH CAPS	C	QL(1 ea daily); RX/OTC	FOLCYTEINE TABS	C	QL(1 ea daily); RX/OTC
VISION OPTIMIZER CAPS	C	QL(1 ea daily); RX/OTC	GENICIN VITA-Q TABS	C	QL(1 ea daily); RX/OTC
VISTA ADVANCED AREDS2 FORMULA CAPS	C	QL(1 ea daily); RX/OTC	HIGH POTENCY MULTIVITAMIN TABS	C	QL(1 ea daily); RX/OTC
VISTA ADVANCED DRY EYE FORMULA CAPS	C	QL(1 ea daily); RX/OTC	MULTI VITAMIN/D-3 TABS	C	QL(1 ea daily); RX/OTC
VITABEX PLUS CAPS	C	QL(1 ea daily); RX/OTC	MULTI VITAMIN TABS	C	QL(1 ea daily); RX/OTC
VITABEX CAPS	C	QL(1 ea daily); RX/OTC	<i>multiple vitamin TABS</i>	C	QL(1 ea daily); RX/OTC
VITEYES CLASSIC ADVANCED CAPS	C	QL(1 ea daily); RX/OTC	MULTIVITAMIN ADULT TABS	C	QL(1 ea daily); RX/OTC
VITEYES CLASSIC MACULAR SUPPORT CAPS	C	QL(1 ea daily); RX/OTC	MULTIVITAMIN TABS	C	QL(1 ea daily); RX/OTC
VITEYES CLASSIC/OMEGA-3 CAPS	C	QL(1 ea daily); RX/OTC	NEOMULTIVITE TABS	C	QL(1 ea daily); RX/OTC
VITEYES CLASSIC+OMEGA-3 CAPS	C	QL(1 ea daily); RX/OTC	OMNICAP TABS	C	QL(1 ea daily); RX/OTC
VITEYES CLASSIC CAPS	C	QL(1 ea daily); RX/OTC	ONE DAILY ESSENTIALS TABS	C	QL(1 ea daily); RX/OTC
Multiple Vitamins w/ Minerals & Fluoride-Iron-Folic Acid			ONE DAILY ESSENTIAL TABS	C	QL(1 ea daily); RX/OTC
QUFLORA FE	NC		ONE VITE DAILY MULTIVITAMIN TABS	C	QL(1 ea daily); RX/OTC
Multivitamins			ONE-A-DAY ADULT VITACRAVES MULTI+OMEGA-3 DHA GUMMIES CHEW	C	QL(1 ea daily); RX/OTC
			ONE-A-DAY ESSENTIAL TABS ( <i>Use multiple vitamin</i> )	NC	QL(1 ea daily); RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
ONE-A-DAY MENS TABS (Use multiple vitamin)	NC	QL(1 ea daily); RX/OTC	POLY-VITE/IRON SOLN	C	QL(60 ml per fill retail)
QUINTABS TABS	C	QL(1 ea daily); RX/OTC	Pediatric Multiple Vitamins		
STRESS FORMULA W/ZINC FOREENERGY TABs	C	QL(1 ea daily); RX/OTC	BPROTECTED PEDIA POLY-VITE SOLN OR	C	QL(50 ml per fill retail)
THERA TABS	C	QL(1 ea daily); RX/OTC	INFUVITE PEDIATRIC SOLN IV	NC	
THEREMS MULTIVITAMIN TABS	C	QL(1 ea daily); RX/OTC	MULTIVITAMIN INFANT & TODDLER SOLN OR	C	QL(50 ml per fill retail)
TM-DAILY VITE TABS	C	QL(1 ea daily); RX/OTC	MULTIVITAMIN INFANT/TODDLER SOLN OR	C	QL(50 ml per fill retail)
TRUE MULTIVITAMIN TABs	C	QL(1 ea daily); RX/OTC	PC PEDIATRIC POLY- VITAMIN DROPS SOLN OR	C	QL(50 ml per fill retail)
VITAZYME TABS	C	QL(1 ea daily); RX/OTC	POLY-VI-SOL SOLN OR	C	QL(50 ml per fill retail)
Ped Multi Vitamins w/Fl & FE			POLY-VITA SOLN OR	C	QL(50 ml per fill retail)
<i>ped multivitamins w/fl &amp; iron SOLN</i>	C	QL(50 ml per fill retail); AL(Up to 21 yrs old); RX/OTC	POLY-VITE PEDIATRIC SOLN OR	C	QL(50 ml per fill retail)
POLY-VI-FLOR/IRON CHEW	NC		Pediatric Multiple Vitamins & Minerals w/ Fluoride		
POLY-VI-FLOR/IRON SUSP	NC	RX/OTC	FLORIVA	NC	
QUFLORA FE PEDIATRIC LIQD	NC		Prenatal Vitamins		
Ped MV w/ Fluoride			CITRANATAL B-CALM 120 MG-25 MG-1 MG-400 UNIT-120 MG-20 MG	NC	
DAVIMET/FLUORIDE CHEW	NC		CITRANATAL MEDLEY	NC	
POLY-VI-FLOR SUSP	NC		C-NATE DHA CAPS	NC	
QUFLORA GUMMIES CHEW	NC		COMPLETE NATAL DHA	NC	
TRI-VI-FLOR	NC		CONCEPT DHA	NC	
TRI-VI-FLORO	NC		DERMACINRX PRETRATE TABS	NC	
Ped MV w/ Iron			ENBRACE HR	NC	
MULTIVITAMIN W/IRON/INFANT/TODDLE R SOLN	C	QL(60 ml per fill retail)	FOLIVANE-OB	NC	
POLY-VI-SOL/IRON SOLN	C	QL(60 ml per fill retail)	MULTI-MAC	NC	
			NATAL PNV TABS	NC	
			NESTABS	NC	
			NESTABS DHA	NC	
			NESTABS ONE	NC	

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
OB COMPLETE ONE	NC		PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT-13 MCG-155 MG-50 MG-300 MG-150 MCG-10 UNIT-40 MG-600 MCG-18 MG	NC	
OB COMPLETE PETITE	NC				
OB COMPLETE PREMIER	NC				
OB COMPLETE/DHA	NC				
OB COMPLETE TABS	NC				
PNV-OMEGA	NC				
PREMESISRX	NC				
PRENA1 PEARL	NC				
<i>prenatal vit w/ ferrous fumarate-l methylfolate-folic acid</i>	NC		PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG-80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG	NC	
<i>prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-10 MG-1.25 MG-315 UNIT-15 MCG-3.4 MG-10 MG-1 MG-2 MG-15 MG-10 MG-20 UNIT-2100 UNIT-50 MG, 120 MG-3 MG-30 MCG-1 MG-400 UNIT-8 MCG-3 MG-20 MG-7 MG-3 MG-100 MG-15 MG-3 MG-4000 UNIT-200 MG-150 MCG-30 UNIT-29 MG</i>	NC		PRENATE PIXIE	NC	
			PRENATE RESTORE	NC	
			PRENATVITE COMPLETE TABS	NC	
			PRENATVITE PLUS TABS	NC	
			PRIMACARE	NC	
			RELNATE DHA CAPS	NC	
			SELECT-OB+DHA MISC	C	QL(1 ea daily)
			SELECT-OB CHEW	NC	
			TARON-C DHA	NC	
			TRISTART DHA	NC	
<i>prenatal without a w/ fe fumarate-l methylfolate-fa-dha</i>	NC		VIRT-NATE DHA CAPS	NC	
PRENATE	NC		VIRT-PN DHA	NC	
PRENATE AM	NC		VITAFOL FE+	NC	
PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG	NC		VITAFOL GUMMIES	NC	
PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG-3.5 MG-21 MG-3 MG-155 MG-25 MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG	NC		VITAFOL ULTRA	NC	
PRENATE ENHANCE	NC		VITAFOL-OB+DHA MISC	NC	
			VITAFOL-ONE CAPS	C	QL(1 ea daily)
			VITAMEDMD ONE RX/QUATREFOLIC	NC	
			VITAPEARL	NC	
			VIVA DHA CAPS	NC	
			WESCAP-C DHA	NC	
			WESCAP-PN DHA	NC	
			WESNATAL DHA COMPLETE	NC	
			WESNATE DHA CAPS	NC	



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
WESTGEL DHA	NC		<i>cyclobenzaprine hcl TABS 7.5 MG</i>	P	QL(4 ea daily)
ZATEAN-PN DHA	NC		FLEQSUVY SUSP ( <i>Use baclofen</i> )	NP	
Vitamin Mixtures			LYVISPAH PACK	NP	
<i>niacinamide w/ zinc-copper-methylfolate-se-cr</i>	NC		<i>metaxalone 400 MG</i>	NC	
VITAMIN D2/K1 DROPS SOLN	NC		<i>metaxalone</i>	NP	
<b>MUSCULOSKELETAL THERAPY AGENTS - Drugs to Treat Spasms</b>			<i>methocarbamol SOLN</i>	NC	
Central Muscle Relaxants			<i>methocarbamol TABS 500 MG, 750 MG</i>	P	
AMRIX CP24 ( <i>Use cyclobenzaprine hcl</i> )	NP		<i>methocarbamol TABS</i>	NC	
BACLOFEN POWD	NC		METHOCARBAMOL TABS	NC	
<i>baclofen SOLN OR 5 MG/5ML, 10 MG/5ML</i>	NP		ORPHENADRINE CITRATE POWD	NC	
<i>baclofen SOLN OR 10 MG/5ML</i>	NC		<i>orphenadrine citrate SOLN</i>	NC	
BACLOFEN SOLN XX	NC		<i>orphenadrine citrate TB12</i>	NC	QL(2 ea daily)
<i>baclofen SUSP</i>	NP		<i>orphenadrine citrate TB12</i>	P	QL(2 ea daily)
<i>baclofen TABS 5 MG, 10 MG, 20 MG</i>	NC		OZOBAX DS SOLN OR ( <i>Use baclofen</i> )	NC	
<i>baclofen TABS</i>	P		SOMA TABS ( <i>Use carisoprodol</i> )	NP	
CARISOPRODOL POWD	NC		<i>tizanidine hcl CAPS</i>	NC	
<i>carisoprodol TABS</i>	NP		<i>tizanidine hcl CAPS</i>	NP	
<i>carisoprodol TABS</i>	NC		<i>tizanidine hcl TABS</i>	P	
<i>chlorzoxazone TABS</i>	P		<i>tizanidine hcl TABS 4 MG</i>	NC	
<i>chlorzoxazone TABS 375 MG, 500 MG, 750 MG</i>	NC		ZANAFLEX CAPS ( <i>Use tizanidine hcl</i> )	NP	
<i>chlorzoxazone TABS 375 MG, 750 MG</i>	NP		ZANAFLEX TABS 4 MG ( <i>Use tizanidine hcl</i> )	NP	
<i>cyclobenzaprine hcl CP24</i>	NP		Direct Muscle Relaxants		
<i>cyclobenzaprine hcl TABS 7.5 MG</i>	NC	QL(4 ea daily)	DANTRIUM CAPS 25 MG ( <i>Use dantrolene sodium</i> )	NP	
<i>cyclobenzaprine hcl TABS 7.5 MG</i>	NP	QL(4 ea daily)	<i>dantrolene sodium CAPS</i>	P	
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	P	QL(3 ea daily)	<i>dantrolene sodium SOLR</i>	NC	
<i>cyclobenzaprine hcl TABS 5 MG, 10 MG</i>	NC	QL(3 ea daily)	RYANODEX SUSR	NC	
			Muscle Relaxant Combinations		

Drug Name	Drug Tier	Requirements/Limits
NORGESIC FORTE (Use orphenadrine w/ aspirin & caff)	NP	
orphenadrine w/ aspirin & caff	NP	
<b>NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the Nose or Sinus</b>		
Nasal Agent Combinations		
azelastine hcl-fluticasone propionate SUSP	NP	
DYMISTA SUSP (Use azelastine hcl-fluticasone propionate)	NP	
RYALTRIS	NP	
Nasal Agents - Misc.		
OCEAN NASAL SPRAY SOLN (Use saline)	NC	1 package(s) per fill retail
saline SOLN	C	1 package(s) per fill retail
Nasal Anesthetics		
COCAINE HYDROCHLORIDE	NC	
GOPRELTO	NC	
NUMBRINO	NC	
Nasal Antiallergy		
azelastine hcl 0.1 %, 137 MCG/SPRAY	P	1 package(s) per 31 day(s) retail
azelastine hcl 0.15 %	NP	1 package(s) per 31 day(s) retail; RX/OTC
cromolyn sodium (nasal) 5.2 MG/ACT	C	QL(26 ml per 31 day(s) retail)
NASALCROM (Use cromolyn sodium (nasal))	NC	QL(26 ml per 31 day(s) retail)
olopatadine hcl (nasal)	NP	
olopatadine hcl (nasal)	NC	
PATANASE (Use olopatadine hcl (nasal))	NP	
Nasal Anticholinergics		

Drug Name	Drug Tier	Requirements/Limits
ipratropium bromide (nasal) 0.06 %	P	QL(15 ml per 31 day(s) retail)
ipratropium bromide (nasal) 0.03 %	P	QL(31 ml per 31 day(s) retail)
Nasal Steroids		
BECONASE AQ	NP	
budesonide (nasal)	C	QL(9 ml per 31 day(s) retail)
FLONASE ALLERGY RELIEF CHILDRENS SUSP (Use fluticasone propionate (nasal))	NC	1 package(s) per fill retail; RX/OTC
FLONASE ALLERGY RELIEF SUSP (Use fluticasone propionate (nasal))	NC	1 package(s) per fill retail; RX/OTC
flunisolide (nasal) 0.025 %	NP	QL(25 ml per 31 day(s) retail)
fluticasone propionate (nasal) SUSP	NC	1 package(s) per fill retail; RX/OTC
fluticasone propionate (nasal) SUSP	P	1 package(s) per fill retail; RX/OTC
NASACORT ALLERGY 24HR AERO (Use triamcinolone acetonide (nasal))	NC	QL(17 ml per 31 day(s) retail); AL(At least 2 yrs old)
OMNARIS SUSP	NP	
QNASL	NP	
QNASL CHILDRENS	NP	
SINUVA IMPL	NC	
triamcinolone acetonide (nasal) AERO	C	QL(17 ml per 31 day(s) retail); AL(At least 2 yrs old)
XHANCE EXHU	NP	
ZETONNA AERS	NP	
Sympathomimetic Decongestants		
PHENYLEPHRINE HCL CRY	NC	
PHENYLEPHRINE HCL POWD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PHENYLEPHRINE HYDROCHLORIDE POWD	NC	RX/OTC	<i>atracurium besylate 50 MG/5ML, 100 MG/10ML</i>	NC	
PHENYLPROPANOLAMINE HYDROCHLORIDE USP	NC		<i>cisatracurium besylate SOLN</i>	NC	
PSEUDOEPHEDRINE HCL CRYST	NC		NIMBEX SOLN ( <i>Use cisatracurium besylate</i> )	NC	
PSEUDOEPHEDRINE HCL POWD	NC		<i>rocuronium bromide SOLN</i>	NC	
<i>pseudoephedrine hcl TABS</i>	C		<i>vecuronium bromide SOLR</i>	NC	
<i>pseudoephedrine hcl TB12</i>	C	QL(2 ea daily)	<b>Spinal Muscular Atrophy Agents (SMA)</b>		
<b>NEUROMUSCULAR AGENTS - Drugs to Relax/Paralyze Muscles</b>			EVRYSDI	NC	SP
<b>ALS Agents</b>			SPINRAZA	NC	
RILUTEK TABS ( <i>Use riluzole</i> )	NC	PA	ZOLGENSMA 10.1-10.5 KG	NC	
<i>riluzole TABS</i>	C	PA	ZOLGENSMA 10.6-11.0 KG	NC	
<b>Depolarizing Muscle Relaxants</b>			ZOLGENSMA 11.1-11.5 KG	NC	
ANECTINE SOLN	NC		ZOLGENSMA 11.6-12.0 KG	NC	
<i>succinylcholine chloride SOLN</i>	NC		ZOLGENSMA 12.1-12.5 KG	NC	
SUCCINYLCHOLINE CHLORIDE SOLN	NC		ZOLGENSMA 12.6-13.0 KG	NC	
SUCCINYLCHOLINE CHLORIDE SOSY IJ 100 MG/5ML	NC		ZOLGENSMA 13.1-13.5 KG	NC	
<b>Muscular Dystrophy Agents</b>			ZOLGENSMA 2.6-3.0 KG	NC	
AMONDYS 45	NC		ZOLGENSMA 3.1-3.5 KG	NC	
VILTEPSO	NC	SP	ZOLGENSMA 3.6-4.0 KG	NC	
VYONDYS 53	C	SP; PA	ZOLGENSMA 4.1-4.5 KG	NC	
<b>Neuromuscular Blocking Agent - Neurotoxins</b>			ZOLGENSMA 4.6-5.0 KG	NC	
BOTOX IJ	NC	SP	ZOLGENSMA 5.1-5.5 KG	NC	
DYSPOREX	NC	SP	ZOLGENSMA 5.6-6.0 KG	NC	
XEOMIN	NC	SP	ZOLGENSMA 6.1-6.5 KG	NC	
<b>Nondepolarizing Muscle Relaxants</b>			ZOLGENSMA 6.6-7.0 KG	NC	
			ZOLGENSMA 7.1-7.5 KG	NC	
			ZOLGENSMA 7.6-8.0 KG	NC	
			ZOLGENSMA 8.1-8.5 KG	NC	

Drug Name	Drug Tier	Requirements/Limits
ZOLGENSMA 8.6-9.0 KG	NC	
ZOLGENSMA 9.1-9.5 KG	NC	
ZOLGENSMA 9.6-10.0 KG	NC	
<b>NUTRIENTS</b>		
Carbohydrates		
DEXTROSE 30% SOLN	NC	
DEXTROSE ANHYDROUS GRAN	NC	
DEXTROSE ANHYDROUS POWD	NC	RX/OTC
DEXTROSE MONOHYDRATE POWD	NC	RX/OTC
DEXTROSE POWD	NC	RX/OTC
<i>dextrose SOLN 5 %, 10 %, 50 %, 70 %, 250 MG/ML</i>	NC	
DEXTROSE SOLN	NC	
FRUCTOSE GRAN	NC	RX/OTC
FRUCTOSE POWD	NC	
Lipids		
CLINOLIPID	NC	
INTRALIPID	NC	
NUTRILIPID	NC	
OMEGAVEN	NC	
SMOFLIPID	NC	
Lipotropics		
CHOLINE BITARTRATE CRYST	NC	
CHOLINE BITARTRATE POWD	NC	
LECITHIN GRAN XX	NC	RX/OTC
PREGNITUDE	NC	
Misc. Nutritional Substances		
<i>omega-3 fatty acids CAPS</i>	C	QL(6 ea daily)
Protein-Carbohydrate-Lipid Combinations		
KABIVEN	NC	

Drug Name	Drug Tier	Requirements/Limits
PERIKABIVEN	NC	
Proteins		
ALANINE POWD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>amino acid infusion SOLN</i> 1.04 GM/100ML-2.17 GM/100ML-592 MG/100ML-434 MG/100ML-39 MG/100ML-1.04 GM/100ML-749 MG/100ML-1.04 GM/100ML-894 MG/100ML-147.4 MEQ/L- 960 MG/100ML-749 MG/100ML-250 MG/100ML-749 MG/100ML-1.47 GM/100ML-894 MG/100ML-749 MG/100ML-1.18 GM/100ML, 1040 MG/100ML-2170 MG/100ML-592 MG/100ML-434 MG/100ML-1180 MG/100ML-39 MG/100ML-1040 MG/100ML-749 MG/100ML-1040 MG/100ML-894 MG/100ML-151 MEQ/L- 960 MG/100ML-749 MG/100ML-250 MG/100ML-749 MG/100ML-1470 MG/100ML-894 MG/100ML-749 MG/100ML, 750 MG/100ML-1490 MG/100ML-795 MG/100ML-1050 MG/100ML-1500 MG/100ML-258 MG/100ML-447 MG/100ML-450 MG/100ML-107.6 MEQ/L- 750 MG/100ML-600 MG/100ML-300 MG/100ML-990 MG/100ML-1527 MG/100ML-1083 MG/100ML-405 MG/100ML-1107	NC		MG/100ML-50 MEQ/L- 1575 MG/100ML		
			AMINOSYN-PF 7% SOLN	NC	
			CLINIMIX 4.25%/DEXTROSE 10%	NC	
			CLINIMIX 4.25%/DEXTROSE 5%	NC	
			CLINIMIX 5%/DEXTROSE 15%	NC	
			CLINIMIX 5%/DEXTROSE 20%	NC	
			CLINIMIX 6/5	NC	
			CLINIMIX 8/10	NC	
			CLINIMIX 8/14	NC	
			CLINIMIX E 2.75%/DEXTROSE 5%	NC	
			CLINIMIX E 4.25%/DEXTROSE 10%	NC	
			CLINIMIX E 4.25%/DEXTROSE 5%	NC	
			CLINIMIX E 5%/DEXTROSE 15%	NC	
			CLINIMIX E 5%/DEXTROSE 20%	NC	
			CLINIMIX E 8/10	NC	
			CLINIMIX E 8/14	NC	
			DL-ALANINE POWD	NC	RX/OTC
			DL-LEUCINE POWD XX	NC	RX/OTC
			DL-METHIONINE POWD XX	NC	RX/OTC
			DL-PHENYLALANINE POWD	NC	RX/OTC
			ELCYS	NC	
			GLUTATHIONE-L REDUCED POWD	NC	RX/OTC
			GLUTATHIONE-L POWD	NC	RX/OTC
			GLUTATHIONE POWD	NC	RX/OTC
			L-ALANINE POWD	NC	RX/OTC
			L-ARGININE BASE POWD XX	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits
L-ARGININE POWD XX	NC	RX/OTC
L-CYSTINE POWD	NC	RX/OTC
LEUCINE POWD XX	NC	RX/OTC
L-GLUTAMIC ACID	NC	RX/OTC
L-GLUTAMINE CRYSTALS	NC	
L-GLUTAMINE POWD XX	NC	RX/OTC
L-GLUTATHIONE CRYSTALS	NC	
L-HISTIDINE	NC	RX/OTC
L-HISTIDINE MONOHYDROCHLORIDE MONOHYDRATE POWD	NC	
L-HISTIDINE MONOHYDROCHLORIDE CRYSTALS	NC	
L-ISOLEUCINE POWD XX	NC	RX/OTC
L-LEUCINE POWD XX	NC	RX/OTC
L-METHIONINE POWD XX	NC	RX/OTC
L-ORNITHINE POWD	NC	
L-PHENYLALANINE POWD	NC	RX/OTC
L-PROLINE POWD	NC	RX/OTC
L-THREONINE CRYSTALS	NC	
L-TRYPTOPHAN POWD	NC	RX/OTC
L-TYROSINE POWD XX	NC	RX/OTC
L-VALINE CRYSTALS	NC	
L-VALINE POWD XX	NC	RX/OTC
METHIONINE POWD XX	NC	RX/OTC
PROSOL SOLN	NC	
TAURINE LIQD	NC	
TAURINE POWD	NC	
THREONINE POWD XX	NC	RX/OTC
TRYPTOPHAN POWD	NC	RX/OTC
VALINE POWD XX	NC	RX/OTC
<b>OPHTHALMIC AGENTS - Drugs to Treat the Eye</b>		
Artificial Tears and Lubricants		
BION TEARS	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>dextran 70-hypromellose 0.3 %-0.1 %</i>	NC	
FRESHKOTE PF	NC	
LACRISERT	NC	
<i>polyvinyl alcohol 1.4 %</i>	C	
REFRESH	NC	
REFRESH DIGITAL PF	NC	
REFRESH OPTIVE ADVANCED SENSITIVE	NC	
REFRESH OPTIVE MEGA-3	NC	
REFRESH RELIEVA PF SOLN	NC	
SYSTANE COMPLETE PF	NC	
VENTIVA	NC	
VENTIVA TEARS PLUS SOLN	NC	
<i>white petrolatum-mineral oil</i>	C	1 package(s) per fill retail
<b>Beta-blockers - Ophthalmic</b>		
<i>betaxolol hcl (ophth) SOLN</i>	P	1 package(s) per 31 day(s) retail
BETIMOL	NP	
BETOPTIC-S SUSP	NC	
BETOPTIC-S SUSP	NP	
<i>brimonidine tartrate-timolol maleate</i>	NP	
<i>carteolol hcl (ophth)</i>	P	1 max fill(s) per 31 day(s) retail
COMBIGAN ( <i>Use brimonidine tartrate-timolol maleate</i> )	P	
COSOPT ( <i>Use dorzolamide hcl-timolol maleate</i> )	NP	QL(10 ml per 31 day(s) retail)
COSOPT PF ( <i>Use dorzolamide hcl-timolol maleate</i> )	NP	
<i>dorzolamide hcl-timolol maleate</i>	P	QL(10 ml per 31 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits
<i>dorzolamide hcl-timolol maleate</i>	NP	
ISTALOL SOLN ( <i>Use timolol maleate (ophth)</i> )	NP	
<i>levobunolol hcl 0.5 %</i>	P	QL(15 ml per 31 day(s) retail)
<i>timolol maleate (ophth) SOLG</i>	P	
<i>timolol maleate (ophth) SOLN 0.5 %</i>	NP	
<i>timolol maleate (ophth) SOLN</i>	P	QL(15 ml per 31 day(s) retail)
<i>timolol maleate (ophth) SOLN</i>	NC	QL(15 ml per 31 day(s) retail)
TIMOPTIC OCUDOSE SOLN ( <i>Use timolol maleate (ophth)</i> )	NP	QL(15 ea per 31 day(s) retail)
TIMOPTIC OCUDOSE SOLN 0.5 % ( <i>Use timolol maleate (ophth)</i> )	NC	QL(15 ea per 31 day(s) retail)
TIMOPTIC SOLN ( <i>Use timolol maleate (ophth)</i> )	NC	QL(15 ml per 31 day(s) retail)
TIMOPTIC-XE SOLG ( <i>Use timolol maleate (ophth)</i> )	NC	
<b>Cholinergic Agonists</b>		
TYRVAYA	NP	
<b>Cycloplegic Mydriatics</b>		
<i>atropine sulfate (ophthalmic) OINT</i>	C	QL(4 gm per fill retail)
<i>atropine sulfate (ophthalmic) SOLN</i>	C	
ATROPINE SULFATE SOLN 1 % ( <i>Use atropine sulfate (ophthalmic)</i> )	NC	
ATROPINE SULFATE SOLN 1 %	C	
CYCLOGYL 2 %	C	1 package(s) per 31 day(s) retail
CYCLOGYL 0.5 %	C	

Drug Name	Drug Tier	Requirements/Limits
CYCLOGYL ( <i>Use cyclopentolate hcl</i> )	NC	
CYCLOMYDRIL	NC	
<i>cyclopentolate hcl 0.5 %, 1 %</i>	C	
<i>cyclopentolate hcl 2 %</i>	C	1 package(s) per 31 day(s) retail
ISOPTO ATROPINE SOLN	C	
MYDCOMBI SOCT	NC	
MYDRIACYL SOLN ( <i>Use tropicamide</i> )	NC	
<i>phenylephrine hcl (mydriatic) SOLN</i>	NC	
TROPICAMIDE POWD	NC	
<i>tropicamide SOLN</i>	C	
<b>Miotics</b>		
MIOCHOL-E SOLR	NC	
MIOSTAT IO	NC	
PHOSPHOLINE IODIDE	NC	
<i>pilocarpine hcl SOLN 1 %, 2 %, 4 %</i>	C	
VUITY SOLN	NC	
<b>Ophthalmic - Angiogenesis Inhibitors</b>		
EYLEA SOSY	C	SP; PA
VABYSMO	NC	SP
<b>Ophthalmic Adrenergic Agents</b>		
ALPHAGAN P ( <i>Use brimonidine tartrate</i> )	P	
<i>apraclonidine hcl</i>	NP	
<i>brimonidine tartrate 0.1 %</i>	NC	
<i>brimonidine tartrate 0.1 %, 0.15 %</i>	NP	
<i>brimonidine tartrate 0.2 %</i>	P	1 package(s) per 31 day(s) retail
IOPIDINE	NP	
LUMIFY	NC	

Drug Name	Drug Tier	Requirements/Limits
SIMBRINZA	NP	
SIMBRINZA	NC	
Ophthalmic Anti-infectives		
AZASITE	NP	
BACIGUENT	C	QL(4 gm per 31 day(s) retail)
<i>bacitracin (ophthalmic)</i>	C	QL(4 gm per 31 day(s) retail)
<i>bacitracin-polymyxin b (ophth)</i>	C	QL(4 gm per 31 day(s) retail)
BESIVANCE	NP	
BETADINE OPHTHALMIC PREP	NC	
CILOXAN OINT	NP	1 package(s) per fill retail
<i>ciprofloxacin hcl (ophth) SOLN</i>	P	1 package(s) per fill retail
<i>ciprofloxacin hcl (ophth) SOLN</i>	NC	1 package(s) per fill retail
ERYTHROMYCIN	C	
<i>erythromycin (ophth)</i>	C	
<i>gatifloxacin (ophth)</i>	NP	
<i>gentamicin sulfate (ophth) SOLN</i>	C	2 package(s) per fill retail
<i>moxifloxacin hcl (ophth) SOLN OP</i>	NC	QL(3 ml per fill retail)
<i>moxifloxacin hcl (ophth) SOLN OP</i>	NP	QL(3 ml per fill retail)
NATACYN	NC	
<i>neomycin-bacitracin zn-polymyxin</i>	C	QL(4 gm per 31 day(s) retail)
<i>neomycin-polymyxin-gramicidin</i>	C	1 package(s) per fill retail
OCUFLOX (Use <i>ofloxacin (ophth)</i> )	NP	QL(10 ml per 31 day(s) retail)
<i>ofloxacin (ophth)</i>	NP	QL(10 ml per 31 day(s) retail)
<i>ofloxacin (ophth)</i>	NC	QL(10 ml per 31 day(s) retail)
<i>ofloxacin (ophth)</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
<i>polymyxin b-trimethoprim</i>	C	1 package(s) per fill retail; 1 max fill(s) per 30 day(s) retail
POVIDONE IODINE	NC	
<i>sulfacetamide sodium (ophth) OINT</i>	C	QL(4 gm per 31 day(s) retail)
<i>sulfacetamide sodium (ophth) SOLN</i>	C	QL(15 ml per 31 day(s) retail)
<i>tobramycin (ophth) SOLN</i>	NC	QL(5 ml per 31 day(s) retail)
<i>tobramycin (ophth) SOLN</i>	NP	QL(5 ml per 31 day(s) retail)
TOBREX OINT	NP	
<i>trifluridine</i>	C	QL(8 ml per 31 day(s) retail)
VIGAMOX SOLN OP (Use <i>moxifloxacin hcl (ophth)</i> )	P	QL(3 ml per fill retail)
XDEMVY	NC	
ZIRGAN GEL	NC	
Ophthalmic Decongestants		
<i>naphazoline w/ pheniramine 0.3 %-0.025 %</i>	C	QL(15 ml per 31 day(s) retail)
NAPHCN-A (Use <i>naphazoline w/ pheniramine</i> )	NC	QL(15 ml per 31 day(s) retail)
<i>tetrahydrozoline hcl (ophth) 0.05 %</i>	C	1 package(s) per 31 day(s) retail
<i>tetrahydrozoline-polyethylene glycol-zinc sulfate</i>	NC	
VISINE RED EYE COMFORT (Use <i>tetrahydrozoline hcl (ophth)</i> )	NC	1 package(s) per 31 day(s) retail
Ophthalmic Gene Therapy		
LUXTURNA	NC	
Ophthalmic Immunomodulators		
CEQUA SOLN	NP	



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>cyclosporine (ophth) EMUL</i>	NC		INVELTYS SUSP	NC	
<i>cyclosporine (ophth) EMUL</i>	NP		LOTEMAX SM GEL	NC	
KLARITY-C DROPS EMUL	NC		LOTEMAX OINT	NC	
RESTASIS MULTIDOSE EMUL	P		<i>loteprednol etabonate GEL</i>	NC	
RESTASIS EMUL ( <i>Use cyclosporine (ophth)</i> )	P		<i>loteprednol etabonate SUSP 0.5 %</i>	NC	
VERKAZIA EMUL	NP		<i>loteprednol etabonate SUSP 0.2 %</i>	NP	
VEVYE SOLN	NP		MAXIDEX SUSP OP	NC	
Ophthalmic Integrin Antagonists			MAXITROL OINT ( <i>Use neomycin-polymy-dexameth</i> )	NC	QL(4 gm per 31 day(s) retail)
XIIDRA	P		MAXITROL SUSP ( <i>Use neomycin-polymy-dexameth</i> )	NC	QL(10 ml per 31 day(s) retail)
Ophthalmic Kinase Inhibitors			<i>neomycin-polymy-dexameth OINT</i>	C	QL(4 gm per 31 day(s) retail)
RHOPRESSA	NC		<i>neomycin-polymy-dexameth SUSP</i>	C	QL(10 ml per 31 day(s) retail)
ROCKLATAN	NC		<i>neomycin-polymyxin-hc (ophth)</i>	C	QL(15 ml per 31 day(s) retail)
Ophthalmic Local Anesthetics			PRED FORTE ( <i>Use prednisolone acetate (ophth)</i> )	NC	QL(15 ml per 31 day(s) retail)
AKTEN	NC		PRED MILD	C	1 package(s) per 31 day(s) retail
<i>proparacaine hcl</i>	NC		<i>prednisolone acetate (ophth)</i>	C	QL(15 ml per 31 day(s) retail)
<i>tetracaine hcl (ophth)</i>	C		PREDNISOLONE ACETATE P-F	C	QL(15 ml per 31 day(s) retail)
Ophthalmic Steroids			PREDNISOLONE SODIUM PHOSPHATE	C	1 package(s) per 31 day(s) retail
ALREX SUSP ( <i>Use loteprednol etabonate</i> )	NP		<i>sulfacetamide sod-prednisolone SOLN</i>	C	QL(10 ml per 31 day(s) retail)
<i>bacitracin-poly-neomycin-hc</i>	NC		TOBRADEX ST SUSP	NC	
<i>dexamethasone sodium phosphate (ophth)</i>	C		TOBRADEX OINT	C	QL(4 gm per 31 day(s) retail)
DEXYCU SUSP IO	NC	SP	TOBRADEX SUSP ( <i>Use tobramycin-dexamethasone</i> )	NC	1 package(s) per 31 day(s) retail
<i>difluprednate</i>	NC				
EYSUVIS SUSP	NP				
FLAREX	NC				
<i>fluorometholone (ophth) SUSP</i>	C	1 package(s) per 31 day(s) retail			
FML FORTE SUSP	NC				
FML LIQUIFILM SUSP ( <i>Use fluorometholone (ophth)</i> )	NC	1 package(s) per 31 day(s) retail			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>tobramycin-dexamethasone SUSP</i>	C	1 package(s) per 31 day(s) retail	<i>dorzolamide hcl</i>	P	QL(10 ml per 31 day(s) retail)
ZYLET	NC		<i>epinastine hcl (ophth)</i>	NP	
Ophthalmic Surgical Aids			<i>fluorescein sodium injection IV 10 %</i>	NC	
GELFILM OP	NC		<i>fluorescein sodium topical STRP 1 MG</i>	NC	
HEALON5 PRO SOSY	NC		FLUORESCHEIN SODIUM/BENOXINATE HYDROCHLORIDE	NC	
OMIDRIA	NC		FLUOR-I-STRIPS A.T. STRP	NC	
Ophthalmics - Misc.			<i>flurbiprofen sodium</i>	P	QL(5 ml per 31 day(s) retail)
ACULAR ( <i>Use ketorolac tromethamine (ophth)</i> )	NP	1 package(s) per 31 day(s) retail	GLOSTRIPS STRP 1 MG	NC	
ACULAR LS ( <i>Use ketorolac tromethamine (ophth)</i> )	NP	1 max fill(s) per 31 day(s) retail	ILEVRO	NP	
ACUVAIL	NP		<i>ketorolac tromethamine (ophth) 0.4 %</i>	NC	1 max fill(s) per 31 day(s) retail
ALOCRIAL	P	QL(5 ml per 31 day(s) retail)	<i>ketorolac tromethamine (ophth) 0.5 %</i>	NC	1 package(s) per 31 day(s) retail
ALOMIDE	P	QL(10 ml per 31 day(s) retail)	<i>ketorolac tromethamine (ophth) 0.5 %</i>	P	1 package(s) per 31 day(s) retail
<i>azelastine hcl (ophth)</i>	NP	QL(6 ml per 31 day(s) retail)	<i>ketotifen fumarate (ophth) 0.035 %</i>	NC	QL(10 ml per 31 day(s) retail)
AZOPT ( <i>Use brinzolamide</i> )	P	1 package(s) per 31 day(s) retail	<i>ketotifen fumarate (ophth) 0.035 %</i>	P	QL(10 ml per 31 day(s) retail)
<i>bepotastine besilate</i>	NP		MIEBO	NP	
BEPREVE ( <i>Use bepotastine besilate</i> )	NP		NEVANAC	P	
BIO GLO STRP	NC		<i>olopatadine hcl</i>	NC	RX/OTC
<i>brinzolamide</i>	NP	1 package(s) per 31 day(s) retail	PROLENSA ( <i>Use bromfenac sodium (ophth)</i> )	NP	
<i>bromfenac sodium (ophth)</i>	NP		ZADITOR 0.035 % ( <i>Use ketotifen fumarate (ophth)</i> )	P	QL(10 ml per 31 day(s) retail)
BROMSITE ( <i>Use bromfenac sodium (ophth)</i> )	NP		ZERVIAE	NP	
BSS PLUS SOLN	NC		Prostaglandins - Ophthalmic		
BSS SOLN	NC		<i>bimatoprost SOLN</i>	NP	
<i>cromolyn sodium (ophth)</i>	P	QL(10 ml per 31 day(s) retail)	DURYSTA IMPL	NC	
CYSTADROPS	NC	SP	IDOSE TR IMPL	NC	
<i>diclofenac sodium (ophth)</i>	P	QL(3 ml per 31 day(s) retail)			

Drug Name	Drug Tier	Requirements/Limits
IYUZEH SOLN	NP	
<i>latanoprost SOLN</i>	P	QL(5 ml per 31 day(s) retail)
<i>latanoprost SOLN</i>	NC	QL(5 ml per 31 day(s) retail)
LATANOPROST SOLN	NC	QL(5 ml per 31 day(s) retail)
LUMIGAN SOLN 0.01 %	P	
<i>tafluprost</i>	NP	
TRAVATAN Z SOLN ( <i>Use travoprost</i> )	P	
<i>travoprost SOLN</i>	NP	
VYZULTA	NP	
XALATAN SOLN ( <i>Use latanoprost</i> )	NP	QL(5 ml per 31 day(s) retail)
XELPROS EMUL	NP	
ZIOPTAN ( <i>Use tafluprost</i> )	NC	
ZIOPTAN ( <i>Use tafluprost</i> )	NP	
<b>OTIC AGENTS - Drugs to Treat the Ear</b>		
Otic Agents - Miscellaneous		
<i>acetic acid (otic)</i>	C	QL(15 ml per 31 day(s) retail)
<i>carbamide peroxide (otic) 6.5 %</i>	C	QL(15 ml per 31 day(s) retail)
DEBROX 6.5 % ( <i>Use carbamide peroxide (otic)</i> )	NC	QL(15 ml per 31 day(s) retail)
Otic Anti-infectives		
CETRAXAL ( <i>Use ciprofloxacin hcl (otic)</i> )	NC	
<i>ciprofloxacin hcl (otic)</i>	NP	
<i>ofloxacin (otic)</i>	NC	1 package(s) per fill retail
<i>ofloxacin (otic)</i>	P	1 package(s) per fill retail
Otic Combinations		
CIPRO HC	NP	
CIPRODEX ( <i>Use ciprofloxacin-dexamethasone</i> )	P	QL(7.5 ml per fill retail); 1 max fill(s) per 30 day(s) retail

Drug Name	Drug Tier	Requirements/Limits
<i>ciprofloxacin-dexamethasone</i>	P	QL(7.5 ml per fill retail); 1 max fill(s) per 30 day(s) retail
<i>ciprofloxacin-fluocinolone acetamide</i>	NP	
CORTISPORIN-TC	NP	
<i>neomycin-polymyxin-hc (otic) SOLN</i>	P	QL(10 ml per fill retail)
<i>neomycin-polymyxin-hc (otic) SUSP</i>	P	1 package(s) per fill retail
OTOVEL ( <i>Use ciprofloxacin-fluocinolone acetamide</i> )	NC	
Otic Steroids		
DERMOTIC ( <i>Use fluocinolone acetamide (otic)</i> )	NC	1 package(s) per 31 day(s) retail
<i>fluocinolone acetamide (otic)</i>	C	1 package(s) per 31 day(s) retail
<i>hydrocortisone w/acetic acid</i>	C	QL(20 ml per 31 day(s) retail)
HYDROCORTISONE/ACE TIC ACID ( <i>Use hydrocortisone w/acetic acid</i> )	NC	QL(20 ml per 31 day(s) retail)
<b>OXYTOCICS - Drugs to Prevent/Control Uterine Bleeding</b>		
Abortifacients/Agents for Cervical Ripening		
<i>carboprost tromethamine SOLN</i>	NC	
CARBOPROST TROMETHAMINE SOSY	NC	
CERVIDIL INST	NC	
PREPIDIL GEL	NC	
Oxytocics		
<i>methylergonovine maleate SOLN</i>	NC	
<i>methylergonovine maleate TABS</i>	C	

Drug Name	Drug Tier	Requirements/Limits
<i>oxytocin</i>	NC	
<b>PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody Drugs to Treat Low Immune System</b>		
<b>Antitoxins-Antivenins</b>		
ANTIVENIN LATRODECTUS MACTANS	NC	
ANTIVENIN NORTH AMERICANCORAL SNAKE	NC	
<b>Immune Serums</b>		
ALYGLO	NC	
ASCENIV	NC	
GAMMAGARD LIQUID	C	SP; PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR	C	SP; PA
GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	C	SP; PA
GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML	C	SP; PA
HYPERHEP B SOLN IM	NC	SP
HYPERHEP B SOSY 110 UNIT/0.5ML	NC	SP
HYPERRAB SOLN	NC	
HYPERRHO S/D MINI-DOSE SOSY IM	NC	SP
HYPERRHO S/D SOSY IM 1500 UNIT	C	SP
HYPERTET SOSY	NC	PA
IMOGAM RABIES-HT SOLN 300 UNIT/2ML	NC	
KEDRAB SOLN	NC	
MICRHOGAM ULTRA-FILTEREDPLUS SOSY IM	NC	SP
NABI-HB SOLN IM	NC	SP

Drug Name	Drug Tier	Requirements/Limits
OCTAGAM SOLN 30 GM/300ML	C	SP; PA
RHOGAM ULTRA-FILTERED PLUS SOSY IM	C	SP
RHOPHYLAC SOSY IJ	NC	SP
VARIZIG SOLN	NC	
WINRHO SDF SOLN 1500 UNIT/1.3ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML, 15000 UNIT/13ML	NC	SP
XEMBIFY	C	SP; PA
<b>Monoclonal Antibodies</b>		
EVUSHELD	NC	
SYNAGIS SOLN	C	SP; PA
<b>PENICILLINS - Drugs to Treat Bacterial Infections</b>		
<b>Aminopenicillins</b>		
AMOXICILLIN TRIHYDRATE POWD	NC	
<i>amoxicillin CAPS</i>	C	
<i>amoxicillin CHEW 125 MG, 250 MG</i>	C	
<i>amoxicillin SUSR</i>	C	
AMOXICILLIN SUSR (Use <i>amoxicillin</i> )	NC	
<i>amoxicillin TABS 500 MG</i>	NC	
<i>amoxicillin TABS 875 MG</i>	C	
<i>ampicillin sodium IJ 1 GM, 2 GM, 125 MG, 250 MG, 500 MG</i>	NC	
<i>ampicillin CAPS 500 MG</i>	C	
<b>Natural Penicillins</b>		
BICILLIN L-A SUSY	NC	
EXTENCILLINE SUSR	NC	QL(1 ea per 28 day(s) retail)
LENTOCILIN SUSR	NC	QL(1 ea per 28 day(s) retail)
<i>penicillin g potassium</i>	NC	

Drug Name	Drug Tier	Requirements/Limits
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE	NC	
<i>penicillin g sodium</i>	NC	
<i>penicillin v potassium SOLR</i>	C	
<i>penicillin v potassium TABS</i>	C	
Penicillin Combinations		
<i>amoxicillin &amp; pot clavulanate CHEW</i>	C	QL(20 ea per fill retail)
<i>amoxicillin &amp; pot clavulanate SUSR 42.9 MG/5ML-600 MG/5ML, 57 MG/5ML-400 MG/5ML</i>	C	2 package(s) per fill retail
<i>amoxicillin &amp; pot clavulanate SUSR 28.5 MG/5ML-200 MG/5ML, 62.5 MG/5ML-250 MG/5ML</i>	C	1 package(s) per fill retail
<i>amoxicillin &amp; pot clavulanate TABS 125 MG-875 MG</i>	C	QL(20 ea per fill retail)
<i>amoxicillin &amp; pot clavulanate TABS 125 MG-250 MG, 125 MG-500 MG</i>	C	QL(30 ea per fill retail)
<i>amoxicillin &amp; pot clavulanate TB12</i>	C	QL(40 ea per 31 day(s) retail)
<i>ampicillin &amp; sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM</i>	NC	
AUGMENTIN ES-600 SUSR (Use <i>amoxicillin &amp; pot clavulanate</i> )	NC	2 package(s) per fill retail
AUGMENTIN SUSR 31.25 MG/5ML-125 MG/5ML	C	1 package(s) per fill retail
AUGMENTIN TABS 125 MG-500 MG (Use <i>amoxicillin &amp; pot clavulanate</i> )	NC	QL(30 ea per fill retail)

Drug Name	Drug Tier	Requirements/Limits
BICILLIN C-R 300000 UNIT/2ML-900000 UNIT/2ML, 300000 UNIT/ML-300000 UNIT/ML	NC	
<i>piperacillin sodium-tazobactam sodium</i>	NC	
ZOSYN	NC	
Penicillinase-Resistant Penicillins		
<i>dicloxacillin sodium</i>	C	
NAFCILLIN	NC	
<i>nafcillin sodium IJ 1 GM, 2 GM</i>	NC	
<i>oxacillin sodium IV 10 GM</i>	NC	
OXACILLIN SODIUM 2 GM/50ML-300 MG/50ML	NC	
<b>PHARMACEUTICAL ADJUVANTS</b>		
Alkalizing Agents		
TROLAMINE	NC	RX/OTC
Antimicrobial Agents		
BENZYL ALCOHOL	NC	RX/OTC
BUTYLPARABEN	NC	
CHLOROBUTANOL ANHYDROUS POWD	NC	
CHLOROBUTANOL CRYST	NC	
CHLOROBUTANOL POWD	NC	
METHYLPARABEN	NC	RX/OTC
POTASSIUM SORBATE CRYST	NC	
POTASSIUM SORBATE POWD	NC	
PROPYLPARABEN	NC	RX/OTC
SORBIC ACID	NC	RX/OTC
Coloring Agents		
AMARANTH	NC	
BRILLIANT BLUE G	NC	
EVANS BLUE	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FD&C BLUE #2	NC	RX/OTC	SULPHAN BLUE	NC	
FD&C RED #40	NC	RX/OTC	TRYPAN BLUE	NC	
FD&C RED #40 ALUMINUM LAKE	NC		Flavoring Agents		
FD&C YELLOW #5	NC	RX/OTC	ALFALFA FLAVOR POWD	NC	RX/OTC
FD&C YELLOW #6 ALUMINUM LAKE	NC	RX/OTC	ALMOND OIL BITTER FLAVOR LIQD	NC	RX/OTC
FDC BLUE 1 ALUMINUM LAKE	NC	RX/OTC	ANISE EXTRACT LIQD	NC	RX/OTC
FDC BLUE 1 POWD	NC	RX/OTC	ANISE FLAVOR OIL	NC	RX/OTC
FDC BLUE 2	NC	RX/OTC	APPLE FLAVOR WATER MISCIBLE POWD	NC	RX/OTC
FDC GREEN #3	NC	RX/OTC	APPLE FLAVOR LIQD	NC	RX/OTC
FDC RED #3	NC	RX/OTC	APPLE FLAVOR POWD	NC	RX/OTC
FDC RED 40	NC	RX/OTC	APRICOT FLAVOR LIQD	NC	RX/OTC
FDC YELLOW 5 ALUMINUM LAKE	NC	RX/OTC	APRICOT FLAVOR POWD	NC	RX/OTC
FDC YELLOW 6	NC	RX/OTC	BACON FLAVOR NATURAL LIQD	NC	RX/OTC
FOOD COLOR BLACK	NC	RX/OTC	BACON FLAVOR LIQD	NC	RX/OTC
FOOD COLOR BLUE	NC	RX/OTC	BANANA CONCENTRATE LIQD	NC	RX/OTC
FOOD COLOR BLUE ROYAL	NC		BANANA CREAM FLAVOR LIQD	NC	RX/OTC
FOOD COLOR BROWN	NC	RX/OTC	BANANA CREME FLAVOR LIQD	NC	RX/OTC
FOOD COLOR FLESH	NC		BANANA FLAVOR LIQD	NC	RX/OTC
FOOD COLOR GREEN LIQD	NC		BEEF BRAISED NATURAL FLAVOR LIQD	NC	RX/OTC
FOOD COLOR GREEN POWD	NC	RX/OTC	BEEF FLAVOR LIQD	NC	RX/OTC
FOOD COLOR LIME GREEN	NC	RX/OTC	BEEF FLAVOR POWD	NC	RX/OTC
FOOD COLOR ORANGE	NC	RX/OTC	BEEF TYPE FLAVOR NATURALCHLORIDE FREE LIQD	NC	RX/OTC
FOOD COLOR PINK	NC		BEEF TYPE FLAVOR NATURAL LIQD	NC	RX/OTC
FOOD COLOR RED	NC	RX/OTC	BEEF TYPE FLAVOR OS LIQD	NC	RX/OTC
FOOD COLOR RED	NC		BEEF-ADE POWD	NC	RX/OTC
FOOD COLOR VIOLET	NC		BENZALDEHYDE	NC	
FOOD COLOR WHITE	NC				
FOOD COLOR YELLOW	NC	RX/OTC			
FOOD COLOR YELLOW	NC				
LISSAMINE GREEN B	NC				
QUINIZARIN GREEN SS	NC				

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
BITTER STOP FLAVOR LIQD	NC	RX/OTC	CHEESECAKE FLAVOR LIQD	NC	RX/OTC
BITTER-BLOC PURE POWD	NC	RX/OTC	CHERRY FLAVOR LIQD	NC	RX/OTC
BITTER-BLOC WS POWDER POWD	NC	RX/OTC	CHERRY-ADE FLAVOR POWD	NC	RX/OTC
BITTER-BLOC WS/OS LIQUID CONC	NC	RX/OTC	CHICKEN (GRILLED) FLAVOR LIQD	NC	RX/OTC
BITTERNESS MASK FLAVOR LIQD	NC	RX/OTC	CHICKEN BROTH FLAVOR SPRAY DRIED POWD	NC	RX/OTC
BITTERNESS REDUCING AGENT POWD	NC	RX/OTC	CHICKEN CONC FLAVOR LIQD	NC	RX/OTC
BITTERNESS SUPPRESSOR FLAVOR LIQD	NC	RX/OTC	CHICKEN FLAVOR OIL SOLUBLE LIQD	NC	RX/OTC
BITTERNESS SUPPRESSOR FLAVOR LIQD	NC	RX/OTC	CHICKEN FLAVOR WATER MISCIBLE LIQD	NC	RX/OTC
BLACKBERRY FLAVOR LIQD	NC	RX/OTC	CHICKEN FLAVOR LIQD	NC	RX/OTC
BLOOD ORANGE OS LIQD	NC	RX/OTC	CHICKEN FLAVOR POWD	NC	RX/OTC
BLUEBERRY FLAVOR LIQD	NC	RX/OTC	CHICKEN ROASTED CONCENTRATE LIQD	NC	RX/OTC
BUBBLE GUM CONCENTRATE LIQD	NC	RX/OTC	CHOCOLATE CONCENTRATE CONC	NC	RX/OTC
BUBBLE GUM FLAVOR LIQD	NC	RX/OTC	CHOCOLATE FLAVOR LIQD	NC	RX/OTC
BUBBLE GUM OS LIQD	NC	RX/OTC	CHOCOLATE FLAVOR POWD	NC	RX/OTC
BUBBLE GUM WS LIQD	NC	RX/OTC	CHOCOLATE HAZELNUT FLAVOR LIQD	NC	RX/OTC
BUBBLEGUM FLAVOR LIQD	NC	RX/OTC	CHOCOLATE NATURAL & ARTIFICIAL FLAVOR CONC	NC	RX/OTC
BUTTER FLAVOR LIQD	NC	RX/OTC	CINNAMON FLAVOR OIL	NC	RX/OTC
BUTTER RUM FLAVOR LIQD	NC	RX/OTC	COCONUT FLAVOR LIQD	NC	RX/OTC
BUTTERSCOTCH FLAVOR LIQD	NC	RX/OTC	COFFEE FLAVOR LIQD	NC	RX/OTC
CAMEL FLAVOR LIQD	NC	RX/OTC	COLA FLAVOR LIQD	NC	RX/OTC
CAMEL OS LIQD	NC	RX/OTC	COTTON CANDY FLAVOR LIQD	NC	RX/OTC
CHEESE-ADE FLAVOR POWD	NC	RX/OTC	CRAN-RASPBERRY FLAVOR LIQD	NC	RX/OTC
			CREME DE MENTHE FLAVOR LIQD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CREME DE MENTHE FLAVOR OIL	NC	RX/OTC	LIVER FLAVOR LIQD	NC	RX/OTC
CREME DEMENTHE FLAVOR LIQD	NC	RX/OTC	LIVER FLAVOR POWD	NC	RX/OTC
CREME OS LIQD	NC	RX/OTC	MANGO FLAVOR SWEETENED POWD	NC	RX/OTC
ENGLISH TOFFEE FLAVOR LIQD	NC	RX/OTC	MANGO FLAVOR LIQD	NC	RX/OTC
EUCALYPTUS FLAVOR OIL	NC	RX/OTC	MANGO FLAVOR POWD	NC	RX/OTC
EUGENOL FLAVOR LIQD	NC	RX/OTC	MANGO PASSION FRUIT OS LIQD	NC	RX/OTC
FISH FLAVOR LIQD	NC	RX/OTC	MAPLE FLAVOR LIQD	NC	RX/OTC
FLAVOR CONCENTRATE/CHLOR HEXIDINE CONC	NC	RX/OTC	MARSHMALLOW ARTIFICIAL FLAVOR CONC	NC	RX/OTC
FLAVORX LIQD	NC	RX/OTC	MARSHMALLOW FLAVOR LIQD	NC	RX/OTC
GRAPE CONCORD OS LIQD	NC	RX/OTC	MARSHMALLOW OS LIQD	NC	RX/OTC
GRAPE FLAVOR LIQD	NC	RX/OTC	MARSHMALLOW WS LIQD	NC	RX/OTC
GRAPEFRUIT FLAVOR PINK OIL	NC	RX/OTC	MINT CHOCOLATE CHIP FLAVOR LIQD	NC	RX/OTC
GREEN APPLE OS LIQD	NC	RX/OTC	MOLASSES FLAVOR POWD	NC	RX/OTC
GRILLED BEEF FLAVOR NATURAL OIL SOLUBLE LIQD	NC	RX/OTC	NATURAL CARAMEL LIQD	NC	RX/OTC
GRILLED CHICKEN FLAVOR NATURAL OIL MISCIBLE LIQD	NC	RX/OTC	ORANGE CONCENTRATE LIQD	NC	RX/OTC
GUAVA FLAVOR LIQD	NC	RX/OTC	ORANGE CREAM FLAVOR LIQD	NC	RX/OTC
HAM FLAVOR LIQD	NC	RX/OTC	ORANGE FLAVOR LIQD	NC	RX/OTC
HONEY FLAVOR LIQD	NC	RX/OTC	ORANGE FLAVOR POWD	NC	RX/OTC
KAHLUA FLAVOR LIQD	NC	RX/OTC	ORANGE OIL FLAVOR LIQD	NC	RX/OTC
LEMON EXTRACT LIQD	NC	RX/OTC	PASSION FRUIT FLAVOR SWEETENED POWD	NC	RX/OTC
LEMON FLAVOR LIQD	NC	RX/OTC	PASSION FRUIT FLAVOR POWD	NC	RX/OTC
LEMON FLAVOR OIL	NC	RX/OTC	PCCA SWEETNESS ENHANCER LIQD	NC	RX/OTC
LEMONADE FLAVOR OIL	NC	RX/OTC	PEACH FLAVOR LIQD	NC	RX/OTC
LEMON-LIME SD POWD	NC	RX/OTC			
LICORICE FLAVOR LIQD	NC	RX/OTC			
LIME FLAVOR OIL	NC	RX/OTC			
LIVER CONCENTRATE LIQD	NC	RX/OTC			



Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PEANUT BUTTER FLAVOR LIQD	NC	RX/OTC	SWEET CORN FLAVOR CONCENTRATE CONC	NC	RX/OTC
PEANUT BUTTER FLAVOR OIL	NC	RX/OTC	SWEET DROPS LIQD	NC	RX/OTC
PEANUT BUTTER OS CONC	NC	RX/OTC	SWEETENING ENHANCER/FLAVORX LIQD	NC	RX/OTC
PEPPERMINT BURST OS LIQD	NC	RX/OTC	SWEETENING ENHANCER LIQD	NC	RX/OTC
PEPPERMINT FLAVOR OIL	NC	RX/OTC	TANGERINE FLAVOR SWEETENED POWD	NC	RX/OTC
PINA COLADA FLAVOR LIQD	NC	RX/OTC	TANGERINE FLAVOR OIL	NC	RX/OTC
PINEAPPLE FLAVOR LIQD	NC	RX/OTC	TANGERINE FLAVOR POWD	NC	RX/OTC
PRALINES AND CREAM FLAVOR LIQD	NC	RX/OTC	TEABERRY FLAVOR OIL	NC	RX/OTC
PUMPKIN FLAVOR LIQD	NC	RX/OTC	TRITTAB PEPPERMINT ICE CONC	NC	RX/OTC
RASPBERRY CONCENTRATE CONC	NC	RX/OTC	TROPICAL FUSION OS LIQD	NC	RX/OTC
RASPBERRY FLAVOR ARTIFICIAL CONC	NC	RX/OTC	TROPICAL FUSION WS LIQD	NC	RX/OTC
RASPBERRY FLAVOR LIQD	NC	RX/OTC	TROPICAL PUNCH FLAVOR LIQD	NC	RX/OTC
RASPBERRY FLAVOR POWD	NC	RX/OTC	TUNA FLAVOR LIQD	NC	RX/OTC
RASPBERRY OS LIQD	NC	RX/OTC	TUNA FLAVOR POWD	NC	RX/OTC
ROOT BEER FLAVOR LIQD	NC	RX/OTC	TUNA TYPE FLAVOR OS LIQD	NC	RX/OTC
SARDINE FLAVOR LIQD	NC	RX/OTC	TUTTI FRUTTI CONCENTRATE CONC	NC	RX/OTC
SHRIMP FLAVOR LIQD	NC	RX/OTC	TUTTI FRUTTI FLAVOR LIQD	NC	RX/OTC
SPEARMINT FLAVOR OIL	NC	RX/OTC	TUTTI-FRUTTI FLAVOR LIQD	NC	RX/OTC
SPEARMINT OS LIQD	NC	RX/OTC	VANILLA BUTTERNUT FLAVOR LIQD	NC	RX/OTC
STEVIA GLYCERITE LIQUID EXTRACT LIQD	NC	RX/OTC	VANILLA FLAVOR LIQD	NC	RX/OTC
STRAWBERRY FLAVOR LIQD	NC	RX/OTC	VANILLA OS LIQD	NC	RX/OTC
STRAWBERRY OS LIQD	NC	RX/OTC	VANILLIN FLAVOR POWD	NC	RX/OTC
SUPER SYNERSWEET FLAVOR POWD	NC	RX/OTC	VERY BERRY OS LIQD	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
VITAMIN/IRON MASKING AGENT FLAVOR LIQD	NC	RX/OTC	PCCA PRACAMAC BASE OIL	NC	
WATERMELON FLAVOR LIQD	NC	RX/OTC	REGENT ALCOHOL	NC	RX/OTC
WILD CHERRY FLAVOR LIQD	NC	RX/OTC	SORBITOL XX 70 %	C	RX/OTC
WILD CHERRY OS LIQD	NC	RX/OTC	<i>water for injection, sterile IJ</i>	NC	
WILD CHERRY SD N&A FLAVOR CONCENTRATE POWD	NC	RX/OTC	Pharmaceutical Adjuvants Miscellaneous		
Liquid Vehicles			METER BUFFER PH 10	NC	
ALCOHOL DEHYDRATED	NC	RX/OTC	METER BUFFER PH 4	NC	
<i>bacteriostatic sodium chloride</i>	NC		METER BUFFER PH 7	NC	
BACTERIOSTATIC WATER FORINJECTION/BENZYL ALCOHOL	NC		PH 10 BUFFER	NC	
BASE GELATIN GUMMY TROCHE	NC	RX/OTC	PH 4 BUFFER	NC	
COLLODION	NC	RX/OTC	PH 7 BUFFER	NC	
CUSTOM POLYGLYCOL TROCHEBASE WAX	NC	RX/OTC	Pharmaceutical Excipients		
DEHYDRATED ALCOHOL	NC	RX/OTC	ACACIA	NC	RX/OTC
ETHYL ALCOHOL 95 %, 100 %	NC	RX/OTC	ACACIA SPRAY-DRIED	NC	RX/OTC
ETHYL ALCOHOL 200 PROOF	NC	RX/OTC	ARLASILK PHOSPHOLIPID PLN	NC	
FIXED OIL SUSPENSION	NC	RX/OTC	ASTRAGALUS ROOT POWD	NC	RX/OTC
FOS-A	NC	RX/OTC	BACOCALMINE LIQD	NC	
GUM BASE GELATIN	NC	RX/OTC	BASE X FLAK	NC	
KLEAR GUMMY BASE	NC	RX/OTC	BASE-PCCA MBK (FATTY ACID)	NC	
PCCA CUSTOM NATATROCHE HMP BASE WAX	NC	RX/OTC	BEES WAX	NC	RX/OTC
PCCA CUSTOM TROCHE BASE WAX	NC	RX/OTC	BEESWAX	NC	RX/OTC
PCCA FIXED OIL BASE	NC	RX/OTC	BENTONITE POWD	NC	RX/OTC
PCCA NATATROCHE BASE WAX	NC	RX/OTC	BITTER DRUG POWDER	NC	RX/OTC
			C10-C30 ALKYL ACRYLATE CROSSPOLYMER POWD	NC	RX/OTC
			CAMPHOR GUM BLOCKS	NC	
			CAPSORALWITH DYNAMIC STATIC GUARD	NC	RX/OTC
			CAPSUBLEND-H	NC	RX/OTC
			CAPSUBLEND-P	NC	RX/OTC
			CAPSUBLEND-S	NC	RX/OTC

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
CARRAGEENAN	NC		LACTOSE MONOHYDRATE	NC	RX/OTC
CETYL ALCOHOL FLAK	NC	RX/OTC	LACTOSE MONOHYDRATE SPRAYDRIED	NC	RX/OTC
CETYL ALCOHOL POWD	NC		LECITHIN ISOPROPYL PALMITATE SOLN	NC	
COCOA BUTTER DEODORIZED MISC	NC	RX/OTC	LIPMAX SOLN	NC	
COCOA BUTTER CREA	NC		LIPOIL OIL	NC	
COCOA BUTTER MISC	NC	RX/OTC	LIQUIGEL COMPLEX	NC	
COLLASIL OSA POWD	NC	RX/OTC	LOLLIBASE	NC	RX/OTC
DISPERSERX UFP	NC		LOLLIPOP BASE	NC	RX/OTC
ECTOSEAL P2G	NC	RX/OTC	LOVO-ODF CUSTOM LIQD	NC	
EFFERVESCENT	NC		LOXORAL BASE	NC	RX/OTC
EMULGADE CM	NC		MAGNESIUM STEARATE	NC	RX/OTC
EMULSIFYING WAX	NC		MEDI-RDT BASE POWD	NC	RX/OTC
ETHYL ACETATE	NC		MEDI-RDT KIT	NC	
EXCELL-RDT SF BASE POWD	NC	RX/OTC	(MULTIDOSE) KIT	NC	
FAGRON CAPFILL PRO	NC	RX/OTC	MEDI-RDT KIT KIT	NC	
FAGRON DISPERSAPRO	NC	RX/OTC	METHYLCELLULOSE GEL	NC	
FATTYBLEND MISC	NC	RX/OTC	METHYLCELLULOSE POWD	NC	RX/OTC
FIZZMIX BASE	NC		MUCOLOX LIQD	NC	
F-MELT POWD	NC	RX/OTC	NAT BITTERNESS	NC	RX/OTC
FREEDOM LOLLIPOP BASE MISC	NC		NATURAL BITTERNESS	NC	RX/OTC
FREEDOM ODT BASE POWD	NC	RX/OTC	OLEIC ACID LIQD	NC	
FREEDOM SIMPLECAP POWDER	NC	RX/OTC	PARAFFIN	NC	RX/OTC
GALEN IQ 900	NC		PCCA CUSTOM RDT POWDER POWD	NC	RX/OTC
GELATIN	NC		PCCA EMULSIFIX-205 BASE	NC	
GELATIN TYPE A	NC		PCCA LECITHIN ISOPROPYL PALMITATE SOLN	NC	
GUM ARABIC MILLED	NC	RX/OTC	PCCA LOXASPERSE BASE	NC	
GUM ARABIC SPRAY-DRIED	NC	RX/OTC	PCCA RAPID DISSOLVE TABLET POWDER BASE POWD	NC	RX/OTC
KARAYA GUM	NC	RX/OTC			
KRYSTAL SF	NC				
LACTOSE	NC	RX/OTC			
LACTOSE ANHYDROUS	NC	RX/OTC			
LACTOSE HYDROUS	NC	RX/OTC			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PCCA SORBITOL LOLLIPOP BASE FLAK	NC		SUPPOSIBLEND PLLT	NC	RX/OTC
PCCA XYLIFOS BASE	NC		SUPPOSI-PLEX R36 PLLT	NC	RX/OTC
PLURONIC F127 POWD	NC	RX/OTC	SUPPOSI-PLEX V33 PLLT	NC	RX/OTC
PLURONIC L64 LIQD	NC		SYNAPSIN POWD	NC	RX/OTC
PLURONIC GEL	NC	RX/OTC	TRAGACANTH POWD	NC	RX/OTC
POLOXAMER 188 POWD	NC	RX/OTC	TRITTAB	NC	RX/OTC
POLOXAMER 407 POWD	NC	RX/OTC	UCARE POLYMER JR-400 POWD	NC	RX/OTC
POLOX GEL	NC	RX/OTC	WAX PARAFFIN BEADS	NC	RX/OTC
POLYBLEND RX MISC	NC	RX/OTC	WHITE BEES WAX	NC	RX/OTC
POLYMATRIX POWDER POWD	NC	RX/OTC	WHITE WAX	NC	RX/OTC
POLYPEG SUPPOSITORY BASE MISC	NC	RX/OTC	WHITE WAX PASTILLES	NC	RX/OTC
PROCAP 90 CAPSULE EXCIPIENT	NC	RX/OTC	WITEPSOL H15 BASE F PLLT	NC	RX/OTC
RDT BASE POWD	NC	RX/OTC	WITEPSOL H15 PLLT	NC	RX/OTC
RDT-PLUS POWD	NC	RX/OTC	WITEPSOL PLLT	NC	RX/OTC
SEPINEO P 600	NC		WITEPSOL WAX	NC	
SHEA BUTTER	NC	RX/OTC	XANTHAN GUM	NC	RX/OTC
SHEA BUTTER ORGANIC	NC	RX/OTC	YELLOW WAX	NC	RX/OTC
SODIUM BENZOATE	NC	RX/OTC	ZINC STEARATE	NC	
SODIUM LAURYL SULFATE	NC		<b>Semi Solid Vehicles</b>		
SODIUM THIOSULFATE POWD	NC		ANHYDROUS GEL BASE	NC	RX/OTC
SORBITOL CANDY BASE CRYSTALS	NC		BABY SKIN PROTECTANT	NC	RX/OTC
SPG SUPPOSI-BASE PLLT	NC	RX/OTC	BASE A POLYETHYLENE GLYCOL 1450 POWD	NC	
STEARIC ACID TRIPLE PRESSED POWD	NC	RX/OTC	BASE C POLYETHYLENE GLYCOL 300	NC	RX/OTC
STEARIC ACID FLAK	NC		BASE C POLYETHYLENE GLYCOL E 300	NC	RX/OTC
STEARIC ACID POWD	NC	RX/OTC	BASE D POLYETHYLENE GLYCOL 4500	NC	
STEARYL ALCOHOL FLAK	NC	RX/OTC	BASE D POLYETHYLENE GLYCOL 4600	NC	
STEARYL ALCOHOL POWD	NC		BHRT BASE	NC	RX/OTC
SUBMAGNA SL HMW	NC		CHEMSIL K-12	NC	
			CHEMSIL K-51	NC	RX/OTC

Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
CHEW-HESIVE	NC		LUBRAJEL NP	NC	RX/OTC
CLOVAGEL	NC	RX/OTC	MEDIBASE C	NC	RX/OTC
DAILY MOISTURIZER	NC	RX/OTC	NOVAFILM	NC	RX/OTC
DERMASHIELD HYDROGEL	NC	RX/OTC	OINTMENT BASE EMULSIFYING	NC	
FAGRON VERSIFIX LIQD	NC		OLEABASE PLASTICIZED	NC	RX/OTC
FREEDOM ADAPTADERM	NC	RX/OTC	ORA-HESIVE BASE	NC	
FREEDOM CEPAPRO	NC	RX/OTC	PCCA GELATIN BASE	NC	
FREEDOM SILOMAC ANHYDROUS	NC	RX/OTC	PCCA LIPODERM HMW	NC	RX/OTC
HORMONE CREAM BASE	NC	RX/OTC	PCCA OCCLUSADERM	NC	RX/OTC
HORMONE CREAM BASE BOTANICAL	NC	RX/OTC	PCCA PERME8 ANHYDROUS	NC	RX/OTC
HRT BASE	NC	RX/OTC	PCCA PLASTICIZED BASE	NC	RX/OTC
HRT BASE FOR MEN	NC		PCCA PLURONIC F127 BASE	NC	
HRT BOTANICAL	NC	RX/OTC	PCCA POLOXAMER 407	NC	
HRT BOTANICAL BASE	NC	RX/OTC	PCCA SPIRA-WASH BASE	NC	RX/OTC
HRT CREAM BASE	NC	RX/OTC	PCCA W06 ANHYDROUS TOPICAL	NC	RX/OTC
HRT CREAM BASE WOMEN	NC	RX/OTC	PEG 300	NC	RX/OTC
HRT ESSENTIAL CREAM	NC	RX/OTC	PETROLATUM	NC	RX/OTC
HRT HEAVY	NC	RX/OTC	PETROLEUM JELLY	NC	RX/OTC
HRT NATURAL LOTION	NC		PETROLEUM JELLYBABY	NC	RX/OTC
JELENE	NC	RX/OTC	PLASTIBASE	NC	RX/OTC
KRIS-ESTER 236	NC		PLASTICIZED BASE	NC	RX/OTC
<i>lanolin XX</i>	C		PLO TRANSDERMAL CREAM CREA	NC	
LANOLIN XX	C		PLURONIC F127	NC	
LANOLIN ALCOHOL WAX	NC		POLYETHYLENE GLYCOL 1000 LIQD	NC	
LANOLIN OIL	NC		POLYETHYLENE GLYCOL 1000 POWD	NC	
LIDOCAINE- PRILOCAINE-CREAM BASE 2.5 %-2.5 %	NC		POLYETHYLENE GLYCOL 1450 FLAK	NC	
LIP BALM BASE NATURAL	NC		POLYETHYLENE GLYCOL 1450 LIQD	NC	RX/OTC
LIOPEN ANHYDROUS	NC				
LIPOSOMAL HAIR	NC	RX/OTC			
LIPOVAN BASE CREA	NC				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
POLYETHYLENE GLYCOL 1450 POWD	NC		VERSABASE SHAM	NC	
POLYETHYLENE GLYCOL 200	NC		VERSAPENN (AL) ANHYDROUSLIPID BASE GEL	NC	
POLYETHYLENE GLYCOL 300	NC	RX/OTC	VERSAPRO	NC	RX/OTC
POLYETHYLENE GLYCOL 3350 GRAN	NC		VERSAPRO	NC	
POLYETHYLENE GLYCOL 3350 POWD	NC	RX/OTC	VERSAPRO ANHYDROUS BASE	NC	RX/OTC
POLYETHYLENE GLYCOL 400	NC	RX/OTC	WILEY BASIC ELEMENTS BHRTBASE	NC	RX/OTC
POLYETHYLENE GLYCOL 4500	NC		YELLOW PETROLATUM	NC	RX/OTC
POLYETHYLENE GLYCOL 600	NC		ZOSIL	NC	
POLYETHYLENE GLYCOL 8000 GRAN	NC		<b>Surfactants</b>		
POLYETHYLENE GLYCOL 8000 POWD	NC	RX/OTC	MYRJ 53 POWD	NC	RX/OTC
POLYETHYLENE GLYCOL NF POWD	NC		POLYOXYL 40 STEARATE PLLT	NC	
POLYMAC PROGEL	NC	RX/OTC	POLYOXYL 40 STEARATE POWD	NC	RX/OTC
RA PETROLEUM JELLY	NC	RX/OTC	<b>PROGESTINS - Hormone Replacement/Modifying Drugs</b>		
RENEWCREAM HRT	NC	RX/OTC	<b>Progestins</b>		
SCAR CARE BASE ENHANCED	NC	RX/OTC	AYGESTIN TABS ( <i>Use norethindrone acetate</i> )	NC	
SIMPLGEL 30	NC	RX/OTC	<i>medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG</i>	C	
SKIN PROTECTANT PETROLATUM	NC	RX/OTC	<i>megestrol acetate (appetite)</i>	NP	
SUSPENDIT	NC	RX/OTC	NORETHINDRONE ACETATE POWD	NC	
TDC MAX CREAM CREA	NC		<i>norethindrone acetate TABS</i>	C	
TOMMY GEL	NC	RX/OTC	<i>progesterone CAPS</i>	C	QL(1 ea daily)
TRANSDERMAL PAIN BASE CREA	NC		<i>progesterone OIL</i>	NC	
VERSABASE FOAM FOAM	NC		PROMETRIUM CAPS ( <i>Use progesterone</i> )	NC	QL(1 ea daily)
VERSABASE HRT GEL	NC	RX/OTC	PROVERA ( <i>Use medroxyprogesterone acetate</i> )	NC	
VERSABASE CREA	NC		<b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL</b>		
VERSABASE GEL	NC	RX/OTC			
VERSABASE LOTN	NC				

Drug Name	Drug Tier	Requirements/Limits
<b>AGENTS - MISC. - Drugs to Treat Mental and Emotional Conditions</b>		
Agents for Chemical Dependency		
<i>acamprosate calcium</i>	NC	
<i>disulfiram 500 MG</i>	NC	
<i>disulfiram 250 MG</i>	C	
LUCEMYRA	NC	
Anti-Cataleptic Agents		
XYWAV	NC	SP
Antidementia Agents		
ADLARITY PTWK	NP	
ADUHELM	NC	SP
ARICEPT TABS 5 MG, 10 MG (Use <i>donepezil hydrochloride</i> )	NP	QL(1 ea daily)
ARICEPT TABS 23 MG (Use <i>donepezil hydrochloride</i> )	NP	
<i>donepezil hydrochloride</i> TABS 5 MG, 10 MG	P	QL(1 ea daily)
<i>donepezil hydrochloride</i> TABS 23 MG	NP	
<i>donepezil hydrochloride</i> TABS 5 MG, 10 MG	NC	QL(1 ea daily)
<i>donepezil hydrochloride</i> TBDP	P	
EXELON 13.3 MG/24HR (Use <i>rivastigmine</i> )	P	
EXELON 4.6 MG/24HR, 9.5 MG/24HR (Use <i>rivastigmine</i> )	P	QL(1 ea daily)
<i>galantamine hydrobromide</i> CP24	NP	QL(1 ea daily)
<i>galantamine hydrobromide</i> CP24	NC	QL(1 ea daily)
<i>galantamine hydrobromide</i> SOLN	NP	QL(6 ml daily)
<i>galantamine hydrobromide</i> TABS	NC	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>galantamine hydrobromide</i> TABS	NP	QL(2 ea daily)
KISUNLA	NC	
<i>memantine hcl</i> CP24	NP	
<i>memantine hcl</i> CP24	NC	
<i>memantine hcl</i> SOLN 2 MG/ML	P	QL(10 ml daily)
<i>memantine hcl</i> TABS	P	QL(2 ea daily)
<i>memantine hcl</i> TABS	NP	
NAMENDA TITRATION PAK TABS (Use <i>memantine hcl</i> )	NP	Titration pack
NAMENDA XR CP24 (Use <i>memantine hcl</i> )	NP	
NAMENDA TABS 10 MG (Use <i>memantine hcl</i> )	NP	QL(2 ea daily)
NAMZARIC C4PK	NP	
NAMZARIC CP24	NP	
RAZADYNE ER CP24 (Use <i>galantamine hydrobromide</i> )	NC	QL(1 ea daily)
<i>rivastigmine</i> 13.3 MG/24HR	NP	
<i>rivastigmine</i> 4.6 MG/24HR, 9.5 MG/24HR	NP	QL(1 ea daily)
<i>rivastigmine</i> 4.6 MG/24HR, 9.5 MG/24HR	NC	QL(1 ea daily)
<i>rivastigmine</i> 13.3 MG/24HR	NC	
<i>rivastigmine tartrate</i> CAPS	P	QL(2 ea daily)
<i>rivastigmine tartrate</i> CAPS	NC	QL(2 ea daily)
Combination Psychotherapeutics		
<i>chlordiazepoxide-amitriptyline</i>	NC	
LYBALVI	NP	
<i>olanzapine-fluoxetine hcl</i>	NP	
<i>perphenazine-amitriptyline</i>	C	QL(4 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SYMBYAX 25 MG-3 MG, 25 MG-6 MG (Use <i>olanzapine-fluoxetine hcl</i> )	NP		<i>dimethyl fumarate CPDR 240 MG</i>	PA	PA
Fibromyalgia Agents			<i>dimethyl fumarate CPDR 240 MG</i>	NC	SP
SAVELLA TITRATION PACK MISC	NP	QL(55 ea per 365 day(s) retail)	EXTAVIA KIT	NP	SP
SAVELLA TABS	NP	QL(2 ea daily)	<i>ingolimod hcl</i>	NP	QL(1 ea daily)
Metachromatic Leukodystrophy (MLD) Agents			GILENYA (Use <i>ingolimod hcl</i> )	NP	QL(1 ea daily); SP
LENMELDY	NC		GILENYA 0.25 MG	NP	SP
Movement Disorder Drug Therapy			GILENYA 0.5 MG	NP	QL(1 ea daily)
AUSTEDO XR PATIENT TITRATION KIT TEPK	NP		<i>glatiramer acetate SOSY</i>	NP	
AUSTEDO XR TB24 6 MG, 12 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG	P	SP	KESIMPTA	NP	SP
AUSTEDO XR TB24 18 MG	P		MAYZENT TABS 2 MG	NP	
AUSTEDO TABS	P	SP	PLEGRIDY STARTER PACK SOPN	NP	SP
<i>tetrabenazine</i>	P	SP	PLEGRIDY STARTER PACK SOSY SC	NP	SP
XENAZINE (Use <i>tetrabenazine</i> )	NP	SP	PLEGRIDY SOPN	NP	
Multiple Sclerosis Agents			PLEGRIDY SOPN	NP	SP
AUBAGIO (Use <i>teriflunomide</i> )	NC	QL(1 ea daily)	PLEGRIDY SOSY IM	NP	
AUBAGIO (Use <i>teriflunomide</i> )	NP	QL(1 ea daily)	PLEGRIDY SOSY SC	NP	SP
AVONEX PEN AJKT	P	SP	REBIF REBIDOSE TITRATIONPACK SOAJ	NP	SP
AVONEX PSKT	P	SP	REBIF REBIDOSE SOAJ	NP	SP
BAFIERTAM	NP	SP	REBIF REBIDOSE SOAJ	NP	
BETASERON KIT	P	SP	REBIF TITRATION PACK SOSY	NP	SP
COPAXONE SOSY 20 MG/ML (Use <i>glatiramer acetate</i> )	P		REBIF SOSY	NP	
COPAXONE SOSY 40 MG/ML (Use <i>glatiramer acetate</i> )	NP		REBIF SOSY	NP	SP
<i>dimethyl fumarate CDPK</i>	PA	SP; PA	TECFIDERA STARTER PACK CDPK (Use <i>dimethyl fumarate</i> )	NP	SP
<i>dimethyl fumarate CPDR</i>	PA	SP; PA	TECFIDERA CPDR (Use <i>dimethyl fumarate</i> )	NP	SP
			<i>teriflunomide</i>	NP	QL(1 ea daily)
			VUMERITY	NP	SP
			Postherpetic Neuralgia (PHN)/Neuropathic Pain Agents		



Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
<i>gabapentin (once-daily) TABS</i>	NP		NICORETTE MINI LOZG (Use <i>nicotine polacrilex</i> )	NC	Limit: 2 Smoking Cessation Treatments per Year; QL(20 ea daily)
GRALISE MISC	NP				
GRALISE TABS (Use <i>gabapentin (once-daily)</i> )	NP		NICORETTE STARTER KIT GUM 4 MG (Use <i>nicotine polacrilex</i> )	NC	Limit: 2 Smoking Cessation Treatments per Year; QL(24 ea daily)
GRALISE TABS	NP				
LYRICA CR (Use <i>pregabalin (once-daily)</i> )	NP				
<i>pregabalin (once-daily)</i>	NP				
Premenstrual Dysphoric Disorder (PMDD) Agents					
<i>fluoxetine hcl (pmdd) TABS</i>	NC		NICORETTE GUM 4 MG (Use <i>nicotine polacrilex</i> )	NC	Limit: 2 Smoking Cessation Treatments per Year; QL(24 ea daily)
<i>fluoxetine hcl (pmdd) TABS</i>	P				
Pseudobulbar Affect (PBA) Agents					
NUEDEXTA	NC		NICORETTE LOZG (Use <i>nicotine polacrilex</i> )	NC	Limit: 2 Smoking Cessation Treatments per Year; QL(20 ea daily)
Psychotherapeutic and Neurological Agents - Misc.					
<i>ergoloid mesylates TABS</i>	NC		<i>nicotine polacrilex GUM</i>	NC	Limit: 2 Smoking Cessation Treatments per Year; QL(24 ea daily)
<i>pimozide</i>	NC				
Restless Leg Syndrome (RLS) Agents					
HORIZANT	NP		<i>nicotine polacrilex GUM</i>	NC	
Smoking Deterrents			<i>nicotine polacrilex GUM</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(24 ea daily)
APO-VARENICLINE TABS 1 MG	C	QL(2 ea daily; 56 ea per fill retail)	<i>nicotine polacrilex GUM 4 MG</i>	NC	QL(24 ea daily)
APO-VARENICLINE TABS 0.5 MG	C	Limit: 2 Smoking Cessation Treatments per Year; QL(2 ea daily)	<i>nicotine polacrilex GUM</i>	P	QL(24 ea daily)
<i>bupropion hcl (smoking deterrent)</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(2 ea daily)	<i>nicotine polacrilex LOZG</i>	NC	
			<i>nicotine polacrilex LOZG</i>	NC	Limit: 2 Smoking Cessation Treatments per Year; QL(20 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>nicotine polacrilex LOZG</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(20 ea daily)
<i>nicotine polacrilex LOZG 4 MG</i>	NC	QL(20 ea daily)
NICOTINE TRANSDERMAL SYSTEM KIT	P	Limit: 2 Smoking Cessation Treatments per Year; QL(56 ea per fill retail); 2 max fill(s) per 365 day(s) retail
<i>nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR</i>	P	Limit: 2 Smoking Cessation Treatments per Year; QL(1 ea daily)
NICOTROL INHALER INHA	P	Limit: 2 Smoking Cessation Treatments per Year; QL(16.8 ea daily); SL
NICOTROL NS SOLN	P	Limit: 2 Smoking Cessation Treatments per Year; QL(4 ml daily); SL
<i>varenicline tartrate TABS 1 MG</i>	C	QL(2 ea daily; 56 ea per fill retail)
<i>varenicline tartrate TABS 0.5 MG</i>	C	Limit: 2 Smoking Cessation Treatments per Year; QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits
<i>varenicline tartrate TBPK</i>	C	Limit: 2 Smoking Cessation Treatments per Year; QL(53 ea per fill retail); 2 max fill(s) per 365 day(s) retail
Transthyretin Amyloidosis Agents		
TEGSEDI	C	SP; PA
Vasomotor Symptom Agents		
<i>paroxetine mesylate (vasomotor)</i>	NP	
<b>RESPIRATORY AGENTS - MISC. - Drugs to Treat Lung Conditions</b>		
Alpha-Proteinase Inhibitor (Human)		
ZEMAIRA SOLR 4000 MG, 5000 MG	NC	
Cystic Fibrosis Agents		
BRONCHITOL	NC	SP
BRONCHITOL TOLERANCE TEST	NC	SP
ORKAMBI PACK	C	SP; PA
ORKAMBI TABS	C	SP; PA
SYMDEKO	C	SP; PA
TRIKAFTA TBPK	C	QL(3 ea daily); SP; PA
Pulmonary Fibrosis Agents		
ESBRIET CAPS ( <i>Use pirfenidone</i> )	NC	SP; PA
ESBRIET TABS ( <i>Use pirfenidone</i> )	NC	SP; PA
OFEV	C	SP; PA
<i>pirfenidone CAPS</i>	C	SP; PA
<i>pirfenidone TABS</i>	C	SP; PA
Respiratory Agents - Misc.		
CUROSURF TR 120 MG/1.5ML, 240 MG/3ML	NC	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
SURVANTA INTRATRACHEAL	NC		<i>doxycycline (monohydrate) CAPS 50 MG, 100 MG</i>	NC	
<b>SULFONAMIDES - Drugs to Treat Bacterial Infections</b>			<i>doxycycline (monohydrate) SUSR</i>	NP	
Sulfonamides			<i>doxycycline (monohydrate) TABS 75 MG, 100 MG, 150 MG</i>	NC	
SULFADIAZINE SODIUM	NC		<i>doxycycline (monohydrate) TABS</i>	NP	
SULFADIAZINE POWD	NC		<i>doxycycline hyclate CAPS</i>	P	
<i>sulfadiazine TABS</i>	NC		<i>doxycycline hyclate CAPS 100 MG</i>	NC	
SULFAMETHOXAZOLE	NC		DOXYCYCLINE HYCLATE POWD	NC	
SULFAMETHOXAZOLE MICRO	NC		<i>doxycycline hyclate SOLR</i>	NC	
SULFAPYRIDINE	NC		<i>doxycycline hyclate TABS 20 MG, 50 MG, 100 MG</i>	NC	
SULFATHIAZOLE	NC		<i>doxycycline hyclate TABS</i>	P	
SULFISOXIZOLE CRYSTALS	NC		<i>doxycycline hyclate TBEC</i>	NP	
<b>TETRACYCLINES - Drugs to Treat Bacterial Infections</b>			<i>doxycycline hyclate TBEC 150 MG</i>	NC	
Aminomethylcyclines			MINOCIN SOLR	NC	
NUZYRA SOLR	NC		<i>minocycline hcl CAPS</i>	NC	
NUZYRA TABS	NP		<i>minocycline hcl CAPS</i>	P	
Fluorocyclines			MINOCYCLINE HCL POWD	NC	
XERAVA	NC		<i>minocycline hcl TABS</i>	NC	
Glycylcyclines			<i>minocycline hcl TABS</i>	P	
<i>tigecycline</i>	NC		<i>minocycline hcl TB24 105 MG, 135 MG</i>	NC	
TIGECYCLINE	NC		<i>minocycline hcl TB24</i>	NP	
Tetracyclines			MINOLIRA TB24	NC	
ACTICLATE TABS ( <i>Use doxycycline hyclate</i> )	NC		OXYTETRACYCLINE HCL	NC	
<i>demeclocycline hcl TABS</i>	NP		SOLODYN TB24 55 MG, 65 MG, 80 MG, 105 MG, 115 MG ( <i>Use minocycline hcl</i> )	NP	
DORYX MPC TBEC	NP		<i>tetracycline hcl CAPS</i>	P	
DORYX TBEC 50 MG, 80 MG, 200 MG ( <i>Use doxycycline hyclate</i> )	NP				
<i>doxycycline (monohydrate) CAPS</i>	NP				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TETRACYCLINE HYDROCHLORIDE TABS	P		NP THYROID 120 TABS	C	
TETRACYCLINE HYDROCHLORID TABS	P		NP THYROID 15 TABS	C	
VIBRAMYCIN CAPS ( <i>Use doxycycline hyclate</i> )	NP		NP THYROID 30 TABS	C	
<b>THYROID AGENTS - Drugs to Regulate Thyroid Hormones</b>			NP THYROID 60 TABS	C	
<b>Antithyroid Agents</b>			NP THYROID 90 TABS	C	
METHIMAZOLE POWD	NC		SYNTHROID TABS ( <i>Use levothyroxine sodium</i> )	NC	
<i>methimazole TABS</i>	C		THYQUIDITY SOLN OR	NC	
<i>propylthiouracil</i>	C		THYROID PORCINE POWD	NC	
<b>Thyroid Hormones</b>			THYROID TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C	
ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG	NC		TIROSINT CAPS	NC	
ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG	C		TIROSINT CAPS	NC	
ARMOUR THYROID TABS	C		TIROSINT-SOL SOLN OR	NC	
CYTOMEL TABS ( <i>Use liothyronine sodium</i> )	NC		TRIOSTAT SOLN ( <i>Use liothyronine sodium</i> )	NC	
ERMEZA SOLN OR	NC		<b>TOXOIDS</b>		
<i>levothyroxine sodium CAPS</i>	NC		<b>Toxoid Combinations</b>		
LEVOTHYROXINE SODIUM SOLN IV	NC		ADACEL SUSP	C	
LEVOTHYROXINE SODIUM SOLN IV	NC		BOOSTRIX SUSP	C	
<i>levothyroxine sodium SOLR IV</i>	NC		BOOSTRIX SUSY	C	
LEVOTHYROXINE SODIUM SOLR IV ( <i>Use levothyroxine sodium</i> )	NC		DAPTACEL	C	
<i>levothyroxine sodium TABS</i>	C		DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP	C	
<i>liothyronine sodium SOLN</i>	NC		INFANRIX	C	
<i>liothyronine sodium TABS</i>	C		KINRIX SUSY	C	
NIVA THYROID TABS	C		PEDIARIX SUSY	C	
			PENTACEL	C	
			QUADRACEL SUSP	C	
			QUADRACEL SUSY	C	
			TDVAX SUSP	C	
			TENIVAC INJ	C	
			TETANUS/DIPHThERIA TOXOIDS-ADSORBED ADULT SUSP	C	
			VAXELIS SUSP	C	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
VAXELIS SUSY	C		<i>hyoscyamine sulfate</i> TABS 0.125 MG	C	
<b>ULCER DRUGS - Drugs to Treat Bowel, Intestine and Stomach Conditions</b>			<i>hyoscyamine sulfate</i> TB12 0.375 MG	C	QL(4 ea daily)
<b>Antispasmodics</b>			ISOPROPAMIDE IODIDE	NC	
ATROPINE SULFATE	NC		LEVBIID TB12 ( <i>Use hyoscyamine sulfate</i> )	NC	QL(4 ea daily)
ATROPINE SULFATE MONOHYDRATE	NC		LEVSIN/SL SUBL ( <i>Use hyoscyamine sulfate</i> )	NC	
<i>atropine sulfate</i> SOLN IV 0.4 MG/ML, 1 MG/ML	NC		LEVSIN TABS ( <i>Use hyoscyamine sulfate</i> )	NC	
<i>atropine sulfate</i> SOSY IJ	NC		<i>methscopolamine bromide</i>	NC	
ATROPINE SULFATE SOSY IV 0.4 MG/ML	NC		PROPANTHELINE BROMIDE POWD	NC	
BELLADONNA/OPIUM	NC		ROBINUL FORTE TABS ( <i>Use glycopyrrolate</i> )	NC	QL(4 ea daily)
<i>chlordiazepoxide hcl-clidinium bromide</i>	NC		ROBINUL TABS ( <i>Use glycopyrrolate</i> )	NC	QL(4 ea daily)
DARTISLA ODT TBDP	NC		SCOPOLAMINE HBR POWD	NC	
<i>dicyclomine hcl</i> CAPS	C		<b>H-2 Antagonists</b>		
<i>dicyclomine hcl</i> SOLN IM	NC		<i>cimetidine hcl</i> OR 300 MG/5ML	NC	
<i>dicyclomine hcl</i> SOLN OR	C	QL(496 ml per 31 day(s) retail)	<i>cimetidine hcl</i> OR 300 MG/5ML	NP	
<i>dicyclomine hcl</i> TABS	C		CIMETIDINE POWD	NC	
GLYCATE TABS	NC		<i>cimetidine</i> TABS 400 MG	NC	
<i>glycopyrrolate</i> SOLN IJ	NC		<i>cimetidine</i> TABS	NP	
<i>glycopyrrolate</i> SOSY IJ	NC		<i>famotidine in nacl</i> SOLN	NC	
GLYCOPYRROLATE SOSY IJ 0.6 MG/3ML	NC		<i>famotidine</i> SOLN 20 MG/2ML, 40 MG/4ML, 200 MG/20ML	NC	
<i>glycopyrrolate</i> TABS 1 MG, 2 MG	C	QL(4 ea daily)	<i>famotidine</i> SUSR	P	
GLYCOPYRROLATE TABS	NC		<i>famotidine</i> SUSR	NC	
GLYRX-PF SOLN IJ	NC		<i>famotidine</i> TABS 20 MG, 40 MG	NC	RX/OTC
GLYRX-PF SOSY IJ	NC		<i>famotidine</i> TABS 10 MG	C	
<i>hyoscyamine sulfate</i> ELIX	C		<i>famotidine</i> TABS 20 MG, 40 MG	P	
HYOSCYAMINE SULFATE POWD	NC		<i>nizatidine</i> CAPS	NP	
<i>hyoscyamine sulfate</i> SOLN OR 0.125 MG/ML	C				
<i>hyoscyamine sulfate</i> SUBL 0.125 MG	C				

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PEPCID AC MAXIMUM STRENGTH TABS (Use famotidine)	NC	RX/OTC	<i>lansoprazole CPDR 30 MG</i>	NC	QL(2 ea daily)
PEPCID AC TABS (Use famotidine)	NC	RX/OTC	<i>lansoprazole CPDR 15 MG</i>	NP	QL(4 ea daily); RX/OTC
PEPCID AC TABS (Use famotidine)	NC		<i>lansoprazole CPDR 15 MG</i>	NC	QL(4 ea daily); RX/OTC
PEPCID TABS (Use famotidine)	NP	RX/OTC	<i>lansoprazole TBDD</i>	NP	RX/OTC
Misc. Anti-Ulcer			<i>lansoprazole TBDD 15 MG</i>	NC	RX/OTC
CARAFATE SUSP (Use sucralfate)	NC	QL(420 ml per fill retail)	<i>lansoprazole TBDD 30 MG</i>	P	
CARAFATE TABS (Use sucralfate)	NC	QL(4 ea daily)	NEXIUM 24HR CLEAR MINIS CPDR (Use esomeprazole magnesium)	NC	QL(2 ea daily); RX/OTC
SUCRALFATE POWD	NC		NEXIUM 24HR CPDR (Use esomeprazole magnesium)	NC	QL(2 ea daily); RX/OTC
<i>sucralfate SUSP</i>	C	QL(420 ml per fill retail)	NEXIUM CPDR 40 MG (Use esomeprazole magnesium)	NP	
<i>sucralfate TABS</i>	C	QL(4 ea daily)	NEXIUM PACK	P	
Proton Pump Inhibitors			NEXIUM PACK (Use esomeprazole magnesium)	P	
ACIPHEX TBEC (Use rabeprazole sodium)	NC		<i>omeprazole magnesium TBEC</i>	C	QL(1 ea daily)
ACIPHEX TBEC (Use rabeprazole sodium)	NP		<i>omeprazole CPDR</i>	P	QL(2 ea daily)
DEXILANT (Use dexlansoprazole)	P		<i>omeprazole CPDR</i>	NC	QL(2 ea daily)
<i>dexlansoprazole</i>	NC		<i>omeprazole CPDR 20 MG</i>	NC	
<i>dexlansoprazole</i>	NP		<i>omeprazole TBDD</i>	NC	
<i>esomeprazole magnesium CPDR 40 MG</i>	NP		<i>omeprazole TBEC</i>	C	QL(1 ea daily)
<i>esomeprazole magnesium CPDR 20 MG</i>	NP	QL(2 ea daily); RX/OTC	PANTOPRAZOLE SODIUM/SODIUM CHLORIDE	NC	
<i>esomeprazole magnesium CPDR 20 MG</i>	NC	QL(2 ea daily); RX/OTC	<i>pantoprazole sodium PACK</i>	NP	
<i>esomeprazole magnesium CPDR 40 MG</i>	NC		<i>pantoprazole sodium SOLR</i>	NC	
<i>esomeprazole magnesium PACK</i>	NP		<i>pantoprazole sodium TBEC 40 MG</i>	P	QL(2 ea daily)
<i>esomeprazole sodium 40 MG</i>	NC				
<i>lansoprazole CPDR 30 MG</i>	NP	QL(2 ea daily)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>pantoprazole sodium TBEC 20 MG</i>	P	QL(1 ea daily)	<i>omeprazole-sodium bicarbonate CAPS</i>	NP	
<i>pantoprazole sodium TBEC 20 MG</i>	NC	QL(1 ea daily)	<i>omeprazole-sodium bicarbonate PACK</i>	NP	
<i>pantoprazole sodium TBEC 40 MG</i>	NC	QL(2 ea daily)	TALICIA	NC	
PREVACID SOLUTAB TBDD (Use lansoprazole)	NP	RX/OTC	VOQUEZNA DUAL PAK	NC	
PREVACID CPDR 30 MG (Use lansoprazole)	NP	QL(2 ea daily)	VOQUEZNA TRIPLE PAK	NC	
PRILOSEC OTC TBEC (Use omeprazole magnesium)	NC	QL(1 ea daily)	ZEGERID CAPS (Use omeprazole-sodium bicarbonate)	NP	
PRILOSEC PACK	NP		ZEGERID PACK (Use omeprazole-sodium bicarbonate)	NP	
PROTONIX PACK (Use pantoprazole sodium)	P		<b>URINARY ANTISPASMODICS - Drugs to Treat Miscellaneous Bladder Spasms</b>		
PROTONIX TBEC 20 MG (Use pantoprazole sodium)	NP	QL(1 ea daily)	Urinary Antispasmodic - Antimuscarinics (Anticholinergic)		
PROTONIX TBEC 40 MG (Use pantoprazole sodium)	NP	QL(2 ea daily)	<i>darifenacin hydrobromide</i>	NP	
<i>rabeprazole sodium TBEC</i>	NC		DETROL LA CP24 (Use tolterodine tartrate)	NP	QL(1 ea daily)
<i>rabeprazole sodium TBEC</i>	NP		DETROL TABS (Use tolterodine tartrate)	NP	QL(2 ea daily)
VOQUEZNA	NC		DETROL TABS 2 MG (Use tolterodine tartrate)	NC	
<b>Ulcer Drugs - Prostaglandins</b>			DITROPAN XL TB24 5 MG (Use oxybutynin chloride)	NP	QL(2 ea daily)
CYTOTEC (Use misoprostol)	NC		<i>fesoterodine fumarate</i>	NP	
<i>misoprostol</i>	C		GELNIQUE GEL 10 %	NP	
<b>Ulcer Therapy Combinations</b>			<i>oxybutynin chloride SOLN</i>	P	
<i>amoxicillin-clarithromycin w/ lansoprazole THPK</i>	C	14 day(s) max supply per 365 day(s) retail	<i>oxybutynin chloride TABS 2.5 MG</i>	P	
<i>bismuth subcitrate potassium-metronidazole-tetracycline</i>	NC		<i>oxybutynin chloride TABS 5 MG</i>	P	QL(3 ea daily)
KONVOMEK SUSR	NP		<i>oxybutynin chloride TABS 5 MG</i>	NC	QL(3 ea daily)
OMECLAMOX-PAK	NC		<i>oxybutynin chloride TB24</i>	P	QL(2 ea daily)
<i>omeprazole-sodium bicarbonate CAPS</i>	NC		<i>oxybutynin chloride TB24 5 MG</i>	NC	QL(2 ea daily)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
OXYTROL FOR WOMEN PTTW	NC	RX/OTC	BIOTHRAX	C	
OXYTROL PTTW	NP	RX/OTC	CAPVAXIVE	NC	
<i>solifenacin succinate</i> TABS	NC		HIBERIX SOLR IJ	C	
<i>solifenacin succinate</i> TABS	P		MENACTRA	C	
<i>tolterodine tartrate</i> CP24	NP	QL(1 ea daily)	MENQUADFI	C	
<i>tolterodine tartrate</i> TABS	NC	QL(2 ea daily)	MENVEO SOLN	C	
<i>tolterodine tartrate</i> TABS	NP	QL(2 ea daily)	MENVEO SOLR	C	
TOVIAZ ( <i>Use fesoterodine fumarate</i> )	P		PEDVAX HIB SUSP	C	
<i>trospium chloride</i> CP24	NP		PENBRAYA	C	
<i>trospium chloride</i> TABS	NC		PNEUMOVAX 23	C	
<i>trospium chloride</i> TABS	NP	QL(2 ea daily)	PNEUMOVAX 23/1 DOSE	C	
VESICARE LS SUSP	NP		PREVNAR 13	C	
VESICARE TABS ( <i>Use solifenacin succinate</i> )	NP		PREVNAR 20	C	
Urinary Antispasmodics - Beta-3 Adrenergic Agonists			TRUMENBA	C	
GEMTESA	NP		TYPHIM VI SOLN	C	
<i>mirabegron</i> TB24	NP		TYPHIM VI SOSY	C	
MYRBETRIQ SRER	NP		VAXCHORA	C	
MYRBETRIQ TB24	NP		VAXNEUVANCE	C	
MYRBETRIQ TB24 ( <i>Use mirabegron</i> )	NP		VIVOTIF	C	
Urinary Antispasmodics - Cholinergic Agonists			Viral Vaccines		
<i>bethanechol chloride</i>	C		ABRYSVO	C	AL(At least 60 yrs old)
Urinary Antispasmodics - Direct Muscle Relaxants			ACAM2000	C	
<i>flavoxate hcl</i>	NC		AFLURIA 2024-2025 SUSP	C	1 max fill(s) per 180 day(s) retail
<i>flavoxate hcl</i>	NP		AFLURIA 2024-2025 SUSY	C	1 max fill(s) per 180 day(s) retail
<b>VACCINES</b>			AREXVY	C	AL(At least 60 yrs old)
Bacterial Vaccines			COMIRNATY 2023-24 SUSP	C	
ACTHIB SOLR IM	C		COMIRNATY 2023-24 SUSY	C	
BCG VACCINE	C		COMIRNATY SUSP	C	
BEXSERO	C		DENGVAXIA	C	
			ENGERIX-B SUSP 20 MCG/ML	C	3 max fill(s) per 999 day(s) retail



Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ENGERIX-B SUSY	C	3 max fill(s) per 999 day(s) retail	IXCHIQ	NC	
ERVEBO	NC		IXIARO	C	
FLUAD 2024-2025	C	1 max fill(s) per 180 day(s) retail; AL(At least 12 yrs old)	JANSSEN COVID-19 VACCINE	C	
FLUARIX 2024-2025 SUSY	C	1 max fill(s) per 180 day(s) retail	JYNNEOS	C	
FLUBLOK 2024-2025 SOSY	NC		M-M-R II SOLR	C	
FLUCELVAX 2024-2025 SUSP	NC		MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP	C	
FLUCELVAX 2024-2025 SUSY	C	1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VACCINE/BIVALENT/6M O-5Y	C	
FLULAVAL 2024-2025 SUSY	C	1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VACCINE/BIVALENT/BA. 4/BA.5	C	
FLUZONE 2024-2025 SUSP	C	1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VACCINE6MO-5Y SUSP	C	
FLUZONE 2024-2025 SUSY	C	1 max fill(s) per 180 day(s) retail	MODERNA COVID-19 VACCINE SUSP	C	
FLUZONE HIGH-DOSE 2024-2025 SUSY	C	1 max fill(s) per 180 day(s) retail; AL(At least 65 yrs old)	MRESVIA	NC	
GARDASIL 9 SUSP	C	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)	NOVAVAX COVID-19 VACCINE	C	
GARDASIL 9 SUSY	C	3 max fill(s) per 999 day(s) retail; AL(Up to 45 yrs old)	NOVAVAX COVID-19 VACCINE/2023-24	C	
HAVRIX	C		PFIZER-BIONTECH COVID-19VACCINE/5-11Y/2023-24 SUSP	C	
HEPLISAV-B SOSY	C	3 max fill(s) per 999 day(s) retail	PFIZER-BIONTECH COVID-19VACCINE/5-11Y SUSP	C	
IMOVAX RABIES (H.D.C.V.) SUSR	C		PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y/2023-24 SUSP	C	
IPOL INACTIVATED IPV	C		PFIZER-BIONTECH COVID-19VACCINE/6MO-4Y SUSP	C	
			PFIZER-BIONTECH COVID-19VACCINE/ADULT RTU SUSP	C	

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/5-11Y	C		TICOVAC	C	
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/6 M-4Y	C		TWINRIX SUSY	C	
PFIZER-BIONTECH COVID-19VACCINE/BIVALENT/B A.4/BA.5	C		VAQTA	C	
PFIZER-BIONTECH COVID-19VACCINE SUSP	C		VARIVAX INJ	C	2 max fill(s) per 999 day(s) retail
PREHEVBRIO	C	3 max fill(s) per 999 day(s) retail	YF-VAX INJ	C	
PRIORIX SUSR	C		<b>VAGINAL AND RELATED PRODUCTS</b>		
PROQUAD SUSR	C		Miscellaneous Vaginal Products		
RABAVERT	C		TRIMO-SAN	NC	
RECOMBIVAX HB SUSP	C	3 max fill(s) per 999 day(s) retail	Vaginal Anti-infectives		
RECOMBIVAX HB SUSY	C	3 max fill(s) per 999 day(s) retail	CLEOCIN CREA ( <i>Use clindamycin phosphate vaginal</i> )	NC	
ROTARIX SUSP	C		CLEOCIN SUPP	NC	
ROTARIX SUSR	C		<i>clindamycin phosphate vaginal CREA</i>	C	
ROTATEQ SOLN	C		CLINDESSE	NC	
SANOFI COVID-19 VACCINE/ANTIGEN COMPONENT	NC		<i>clotrimazole vaginal CREA 1 %</i>	C	QL(45 gm per 31 day(s) retail)
SHINGRIX	C	2 max fill(s) per 999 day(s) retail; AL(At least 50 yrs old)	<i>clotrimazole vaginal CREA 2 %</i>	C	QL(21 gm per 31 day(s) retail)
SPIKEVAX COVID-19 VACCINE/2023-24 SUSP	C		GYNAZOLE-1	C	
SPIKEVAX COVID-19 VACCINE/2023-24 SUSY	C		<i>metronidazole vaginal</i>	C	
SPIKEVAX COVID-19 VACCINE SUSP	C		<i>miconazole nitrate vaginal CREA 2 %</i>	C	QL(45 gm per 31 day(s) retail)
STAMARIL SUSR	C		<i>miconazole nitrate vaginal KIT</i>	C	1 package(s) per fill retail
			<i>miconazole nitrate vaginal SUPP 100 MG</i>	C	QL(7 ea per 31 day(s) retail)
			<i>miconazole nitrate vaginal SUPP 200 MG</i>	C	QL(3 ea per fill retail; 3 ea per 31 day(s) retail)
			MONISTAT 3 COMBINATION PACK KIT ( <i>Use miconazole nitrate vaginal</i> )	NC	1 package(s) per fill retail
			MONISTAT 7 SIMPLY CURE CREA ( <i>Use miconazole nitrate vaginal</i> )	NC	QL(45 gm per 31 day(s) retail)

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NUVESSA	NC		<i>epinephrine (anaphylaxis) SOAJ</i>	NP	QL(0.067 ea daily; 4 ea per 365 day(s) retail)
<i>terconazole vaginal CREA</i>	C		<i>epinephrine (anaphylaxis) SOLN IJ</i>	NC	
<i>terconazole vaginal SUPP</i>	C		EPIPEN 2-PAK SOAJ (Use <i>epinephrine (anaphylaxis)</i> )	P	QL(0.067 ea daily; 4 ea per 365 day(s) retail)
<i>tioconazole vaginal 6.5 %</i>	C		NEFFY SOLN NA	NC	
VANDAZOLE	C		SYMJEPI SOSY	NP	
XACIATO GEL	NC		<b>Vasopressors</b>		
<b>Vaginal Contraceptive - pH Modulators</b>			AKOVAZ SOSY IV	NC	
PHEXXI	NC		BIORPHEN SOLN IV	NC	
<b>Vaginal Estrogens</b>			EMERPHED SOLN IV	NC	
ESTRACE CREA (Use <i>estradiol vaginal</i> )	NC	QL(43 gm per 31 day(s) retail)	EMERPHED SOSY IV	NC	
<i>estradiol vaginal CREA</i>	C	QL(43 gm per 31 day(s) retail)	<i>ephedrine sulfate (pressors) SOLN IV</i>	NC	
<i>estradiol vaginal TABS</i>	C		EPHEDRINE SULFATE/SODIUMCHLORIDE	NC	
ESTRING RING	NC		EPHEDRINE SULFATE SOLN IV	NC	
FEMRING	NC		EPHEDRINE SULFATE SOSY IV 25 MG/5ML	NC	
IMVEXXY MAINTENANCE PACK INST	NC		EPINEPHRINE SOSY IV 1 MG/10ML	NC	
IMVEXXY STARTER PACK INST	NC		IMMPHENTIV SOLN IV	NC	
PREMARIN	C		<i>midodrine hcl</i>	C	
VAGIFEM TABS (Use <i>estradiol vaginal</i> )	NC		NOREPHINEPHRINE BITARTRATE/SODIUM CHLORIDE SOLN	NC	
<b>Vaginal Progestins</b>			<i>norepinephrine bitartrate IV</i>	NC	
CRINONE GEL	NC		NOREPHINEPHRINE BITARTRATE IV	NC	
<b>VASOPRESSORS - Drugs to Treat Heart and Circulation Conditions</b>			NOREPHINEPHRINE BITARTRATE/DEXTROSE SOLN 5 %-16 MG/250ML, 5 %-4 MG/250ML, 5 %-8 MG/250ML	NC	
<b>Anaphylaxis Therapy Agents</b>					
AUVI-Q SOAJ	NC				
AUVI-Q SOAJ 0.1 MG/0.1ML, 0.15 MG/0.15ML	NP				
<i>epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML</i>	NP				
<i>epinephrine (anaphylaxis) SOAJ</i>	P	QL(0.067 ea daily; 4 ea per 365 day(s) retail)			

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
NOREPINEPHRINE BITARTRATE/SODIUM CHLORIDE SOLN 0.9 %-16 MG/250ML, 0.9 %-4 MG/250ML, 0.9 %-8 MG/250ML	NC		MEPHYTON TABS ( <i>Use phytonadione</i> )	NC	
NOREPINEPHRINE/DEXTROSE SOLN 5 %-16 MG/250ML, 5 %-4 MG/250ML, 5 %-8 MG/250ML	NC		<i>phytonadione SOLN 1 MG/0.5ML, 10 MG/ML</i>	NC	
NOREPINEPHRINE/SODIUM CHLORIDE SOLN 0.9 %-16 MG/250ML, 0.9 %-4 MG/250ML, 0.9 %-8 MG/250ML	NC		<i>phytonadione TABS 5 MG</i>	C	
<i>phenylephrine hcl (pressors) SOLN IV</i>	NC		VITAMIN E ACETATE POWD	NC	
PHENYLEPHRINE HYDROCHLORIDE SOLN IV 1 MG/10ML, 10 MG/ML	NC		<i>vitamin e CAPS 90 MG, 180 MG, 200 UNIT, 400 UNIT</i>	C	QL(2 ea daily)
REZIPRES 47 MG/10ML	NC		Water Soluble Vitamins		
<b>VITAMINS</b>			AMINO BENZOIC ACID POWD	NC	
Oil Soluble Vitamins			<i>ascorbic acid TABS</i>	C	QL(3.34 ea daily)
AQUASOL A PARENTERAL SOLN	NC		CALCIUM ASCORBATE DIHYDRATE POWD	NC	RX/OTC
<i>cholecalciferol CAPS 25 MCG, 50 MCG, 1000 UNIT, 2000 UNIT</i>	C	QL(100 ea per fill retail)	CALCIUM ASCORBATE POWD	NC	RX/OTC
<i>cholecalciferol CAPS 1.25 MG, 1.25 MG, 50000 UNIT</i>	C	QL(8 ea per 31 day(s) retail)	CALCIUM PANTOTHENATE POWD	NC	RX/OTC
<i>cholecalciferol CAPS 125 MCG, 5000 UNIT</i>	C	QL(2 ea daily)	NIACINAMIDE POWD	NC	RX/OTC
DECARA CAPS	NC		<i>niacin CPCR 250 MG</i>	C	
DRISDOL CAPS ( <i>Use ergocalciferol</i> )	NC		NIACIN POWD XX	NC	RX/OTC
<i>ergocalciferol CAPS</i>	C		<i>niacin TABS 500 MG</i>	C	
ERGOCALCIFEROL POWD	NC		<i>niacin TBCR</i>	C	
<i>ergocalciferol SOLN OR 8000 UNIT/ML</i>	C	QL(60 ml per 90 day(s) retail)	NICOTINAMIDE POWD	NC	RX/OTC
			PARA-AMINO BENZOIC ACID POWD	NC	
			PYRIDOXINE HCL POWD	NC	RX/OTC
			<i>pyridoxine hcl TABS 25 MG, 50 MG, 100 MG</i>	C	
			PYRIDOXINE HYDROCHLORIDE POWD	NC	RX/OTC
			<i>riboflavin TABS</i>	C	QL(3.34 ea daily)
			SLO-NIACIN TBCR ( <i>Use niacin</i> )	NC	
			SODIUM ASCORBATE GRAN	NC	

Drug Name	Drug Tier	Requirements/ Limits
SODIUM ASCORBATE POWD	NC	RX/OTC
THIAMINE HCL POWD	NC	RX/OTC
<i>thiamine hcl SOLN</i>	NC	
<i>thiamine hcl TABS 100 MG</i>	C	QL(3.34 ea daily)
THIAMINE MONONITRATE POWD XX	NC	
<i>thiamine mononitrate TABS 100 MG</i>	C	QL(3.34 ea daily)
TRUE VITAMIN B1 TABS	NC	
TRUE VITAMIN B6 TABS	NC	

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acetaminophen w/ codeine TABS 60 MG-300 MG .....	14	ACETYL-L-CARNITINE HYDROCHLORIDE .....	ACTONEL TABS 35 MG (Use risedronate sodium) .....	124
acetaminophen-caff-dihydrocod CAPS 30 MG-320.5 MG-16 MG ...	14	ACIDOPHILUS LACTOBACILLUS 83	ACTOPLUS MET TABS 850 MG-15 MG (Use pioglitazone hcl-metformin hcl) .....	34
ACETARSONE .....	71	ACIPHEX TBEC (Use rabeprazole sodium) .....	ACTOS (Use pioglitazone hcl) ....	37
acetazolamide CP12 .....	123	acitretin .....	ACULAR (Use ketorolac tromethamine (ophth)) .....	202
ACETAZOLAMIDE CRYST .....	71	ACNE MEDICATION 10 LOTN ...	ACULAR LS (Use ketorolac tromethamine (ophth)) .....	202
ACETAZOLAMIDE POWD .....	71	ACNE MEDICATION 5 LOTN ....	ACUVAIL .....	202
acetazolamide sodium .....	123	ACTEMRA ACTPEN SOAJ .....	ACYCLOVIR .....	71
acetazolamide TABS .....	123	ACTEMRA SOLN .....	acyclovir CAPS .....	63
acetic acid (otic) .....	203	ACTEMRA SOSY .....	acyclovir sodium SOLN .....	63
acetic acid 0.25 % .....	130	ACTHAR GEL AUIJ .....	acyclovir SUSP .....	63
ACETIC ACID 3 %, 5 % .....	71	ACTHIB SOLR IM .....	acyclovir TABS OR 400 MG .....	63
ACETIC ACID GLACIAL .....	71	ACTICLATE TABS (Use doxycycline hyclate) .....	acyclovir TABS OR 800 MG .....	63
ACETONE .....	95	ACTIPHYTE OF ALGAE GL .....	acyclovir topical CREA .....	112
ACETYL DIPEPTIDE-1 CETYLESTER .....	71	ACTIPHYTE OF CUCUMBER ....	acyclovir topical OINT .....	112
ACETYL HEXAPEPTIDE-8 POWD 71		ACTIPHYTE OF IVY .....	ACZONE 5 % (Use dapsone (topical)) .....	106
		ACTIPHYTE OF LEMONGRASS .95	ADACEL SUSP .....	220
		ACTIPHYTE OF SEA KELP .....		
		ACTIPHYTE OF SUGAR KELP ...83		
		ACTIQ LPOP (Use fentanyl citrate) 11		



ADAKVEO .....	133	TOSYLATE .....	71	MONITORING SYSTEM KIT .....	140
ADALIMUMAB-AACF (2 PEN) AJKT . 5		ADEMPAS .....	69	ADVOCATE INSULIN PEN NEEDLE/32GX4MM .....	152
ADALIMUMAB-AATY 1-PEN KIT AJKT .....	5	adenosine (diagnostic) .....	120	ADVOCATE REDI-CODE DEVI ..	141
ADALIMUMAB-AATY 2-PEN KIT AJKT .....	5	ADENOSINE .....	71	ADVOCATE REDI-CODE/TALKING KIT .....	140
ADALIMUMAB-AATY 2-SYRINGE KIT PSKT 20 MG/0.2ML .....	5	adenosine SOLN 6 MG/2ML, 12 MG/4ML .....	19	ADVOCATE REDI-CODE+ BLOOD GLUCOSE SYSTEM/SPEAKING DEVI .....	140
ADALIMUMAB-ADAZ SOAJ .....	5	ADENOSINE-5-MONOPHOSPHATE .....	186	ADVOCATE REDI-CODE+ BLOODGLUCOSE MONITORING SYSTEM DEVI .....	141
ADALIMUMAB-ADAZ SOSY .....	5	ADENOSINE-5-TRIPHOSPHATE 186		ADZENYS XR-ODT TBED .....	1
ADALIMUMAB-ADBM AJKT .....	6	ADLARITY PTWK .....	215	AEMCOLO .....	49
ADALIMUMAB-ADBM CROHNS/UC/HS STARTER AJKT .	6	ADRENOCHROME SEMICARBAZONE .....	74	AFLURIA 2024-2025 SUSP .....	224
ADALIMUMAB-ADBM PSKT .....	6	ADRENOCORTICOTROPHIC HORMONE .....	74	AFLURIA 2024-2025 SUSY .....	224
ADALIMUMAB-ADBM PSORIASIS/UVEITIS STARTER AJKT .....	6	ADTHYZA TABS 15 MG, 30 MG, 60 MG, 90 MG, 120 MG .....	220	AFREZZA POWD 4 UNIT, 8 UNIT, 12 UNIT .....	35
ADALIMUMAB-FKJP AJKT .....	6	ADTHYZA TABS 16.25 MG, 32.5 MG, 65 MG, 97.5 MG, 130 MG ..	220	AGAMATRIX AMP NO CODE ADVANCED BLOOD GLUCOSE MONITORING SYST DEVI .....	141
ADALIMUMAB-FKJP PSKT .....	6	ADUHELM .....	215	AGAMATRIX JAZZ WIRELESS 2 KIT .....	141
ADALIMUMAB-RYVK (2 PEN) AJKT . 6		ADVAIR DISKUS AEPB (Use fluticasone-salmeterol) .....	22	AGAMATRIX PRESTO KIT .....	141
ADALIMUMAB-RYVK PSKT .....	6	ADVAIR HFA AERO (Use fluticasone-salmeterol) .....	22	AGAMATRIX PRESTO PRO METER DEVI .....	141
adapalene CREA .....	106	ADVANCE INTUITION BLOOD GLUCOSE METER DEVI .....	140	AGAR POWD .....	71
adapalene GEL 0.3 % .....	106	ADVANCE INTUITION BLOOD GLUCOSE MONITORING SYSTEM KIT .....	140	AGGRASTAT 3.75 MG/15ML ....	132
adapalene-benzoyl peroxide GEL 106		ADVANCE MICRO-DRAW METER DEVI .....	140	AIRBORNE CHEW .....	185
ADASUVE .....	58	ADVIL TABS (Use ibuprofen) .....	7	AIRDUO DIGIHALER 113/14 .....	22
ADDERALL TABS (Use amphetamine-dextroamphetamine) .	1	ADVOCATE BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	140	AIRDUO DIGIHALER 232/14 .....	22
ADDERALL XR CP24 (Use amphetamine-dextroamphetamine) .	1	ADVOCATE BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	140	AIRDUO DIGIHALER 55/14 .....	22
adefovir dipivoxil .....	63	ADVOCATE BLOOD GLUCOSE		AIRDUO RESPICLICK 113/14 AEPB (Use fluticasone-salmeterol) .....	22
ADEMETIONINE DISULFATE					

AIRDUO RESPICLICK 232/14 AEPB (Use fluticasone-salmeterol) .....	22	albuterol sulfate NEBU 0.63 MG/3ML, 1.25 MG/3ML .....	22	alfuzosin hcl .....	130
AIRDUO RESPICLICK 55/14 AEPB (Use fluticasone-salmeterol) .....	22	albuterol sulfate NEBU 2.5 MG/0.5ML .....	22	ALGINIC ACID .....	72
AIRDUO RESPICLICK 55/14 AEPB 22		ALBUTEROL SULFATE NEBU ...	22	ALINIA TABS (Use nitazoxanide) .	49
AIRSUPRA .....	22	ALBUTEROL SULFATE POWD ...	22	A-LIPOIC ACID (DL-THIOCTIC ACID) .....	72
AJOVY SOAJ .....	178	albuterol sulfate SYRP .....	22	aliskiren fumarate .....	49
AKOVAZ SOSY IV .....	227	albuterol sulfate TABS .....	22	ALIVE EVERYDAY IMMUNE HEALTH CAPS .....	188
AKTEN .....	201	alclometasone dipropionate CREA 113		ALIVE HAIR, SKIN & NAILS CAPS 188	
AKYNZEO .....	40	alclometasone dipropionate OINT 113		ALKINDI SPRINKLE CPSP .....	102
AKYNZEO SOLN .....	40	ALCOHOL .....	95	ALKYL BENZOATE C12-15 .....	72
AKYNZEO SOLR .....	40	ALCOHOL ANHYDROUS .....	95	ALLANTOIN .....	97
ALAHIST D .....	104	ALCOHOL DEHYDRATED .....	210	ALLEGRA ALLERGY TABS 180 MG (Use fexofenadine hcl) .....	42
ALAHIST DM LIQD .....	104	alcohol, rubbing XX .....	95	ALLEGRA ALLERGY TABS 60 MG (Use fexofenadine hcl) .....	42
ALAHIST PE TABS .....	104	ALDACTAZIDE (Use spironolactone & hydrochlorothiazide) .....	123	ALLERGY SYRINGE/1ML/27G X 1/2" MISC .....	152
ALANINE POWD .....	196	ALDACTAZIDE .....	123	ALLERGY SYRINGES INTRADERMAL/1ML/27G X 3/8" MISC .....	152
ALASKAN RED ALGAE .....	71	ALDACTONE TABS (Use spironolactone) .....	124	allopurinol .....	131
albendazole .....	18	ALDOSTERONE .....	71	ALLOPURINOL .....	131
ALBENDAZOLE .....	71	alendronate sodium SOLN .....	124	ALLOPURINOL .....	72
ALBUKED 25 .....	132	alendronate sodium TABS 10 MG 124		allopurinol sodium .....	131
ALBUKED 5 .....	132	alendronate sodium TABS 35 MG, 70 MG .....	124	ALMOND OIL .....	95
ALBUMIN HUMAN .....	132	alendronate sodium TABS 70 MG 124		ALMOND OIL BITTER FLAVOR LIQD .....	206
ALBUMINEX .....	132	ALEVE ARTHRITIS TABS (Use naproxen sodium) .....	7	ALMOND OIL SWEET .....	95
ALBUMIN-ZLB .....	132	ALEVE TABS (Use naproxen sodium) .....	7	almotriptan malate .....	178
ALBURX .....	132	ALFALFA FLAVOR POWD .....	206	ALOCRIAL .....	202
ALBUSTIX STRP .....	121			ALOE VERA FREEZE DRIED POWD	
ALBUTEIN .....	132				
albuterol sulfate AERS .....	22				
albuterol sulfate NEBU 0.083 % ...	22				
albuterol sulfate NEBU 0.5 % .....	22				

.....	72	MG	.....	44	ALVESCO	.....	21	
ALOE VERA LEAF POWD	.....	72	ALTRENO LOTN	.....	106	alvimopan	.....	129
ALOE VERA OIL	.....	72	ALTRENOGEST	.....	72	ALYGLO	.....	204
ALOE VERA POWD	.....	72	ALTRIXA TABS	.....	190	AMANTADINE HCL	.....	72
alogliptin benzoate	.....	35	alum & mag hydrox-simethicone	.....	17	amantadine hcl CAPS	.....	56
alogliptin-metformin hcl	.....	34	LIQD	.....	17	amantadine hcl SOLN	.....	56
alogliptin-pioglitazone 15 MG-25 MG, 30 MG-12.5 MG, 30 MG-25 MG, 45 MG-25 MG	.....	34	alum & mag hydrox-simethicone SUSP 1200 MG/30ML-120 MG/30ML-1200 MG/30ML, 200 MG/5ML-20 MG/5ML-200 MG/5ML, 200 MG/5ML-200 MG/5ML-20 MG/5ML-20 MG/5ML-200 MG/5ML- 200 MG/5ML, 400 MG/10ML-40 MG/10ML-400 MG/10ML	.....	17	amantadine hcl TABS	.....	56
ALOMIDE	.....	202	ALUM AMMONIUM	.....	97	AMARANTH	.....	205
ALORA PTTW 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	.....	126	ALUMINUM ACETATE BASIC	.....	72	AMBIEN CR TBCR (Use zolpidem tartrate)	.....	136
alosetron hcl	.....	129	ALUMINUM AMMONIUM SULFATE	.....	97	AMBIEN TABS (Use zolpidem tartrate)	.....	136
ALPHA LIPOIC ACID	.....	72	ALUMINUM AMMONIUM SULFATE	.....	97	ambrisentan	.....	69
ALPHAGAN P (Use brimonidine tartrate)	.....	199	ALUMINUM CHLORIDE	.....	119	amcinonide CREA	.....	113
ALPHA-KETOGLUTARIC ACID CRYS	.....	72	ANHYDROUS POWD	.....	119	AMELUZ GEL	.....	111
ALPHA-KETOGLUTARIC ACID POWD	.....	72	ALUMINUM CHLORIDE CRYSTALS	.....	119	AMIKACIN SULFATE POWD	.....	4
ALPHA-TOCOPHEROL	.....	94	ALUMINUM CHLORIDE CRYSTALS	.....	119	amikacin sulfate SOLN 1 GM/4ML, 500 MG/2ML	.....	4
ALPRAZOLAM	.....	72	ALUMINUM CHLORIDE HEXAHYDRATE CRYSTALS	.....	119	amiloride & hydrochlorothiazide	.....	123
ALPRAZOLAM INTENSOL CONC	.....	19	ALUMINUM CHLORIDE HEXAHYDRATE POWD	.....	119	AMILORIDE HCL POWD	.....	124
alprazolam TABS	.....	19	ALUMINUM CHLORIDE HEXAHYDRATE POWD	.....	119	amiloride hcl TABS	.....	124
alprazolam TB24	.....	19	ALUMINUM CHLORIDE HEXAHYDRATE POWD	.....	119	amino acid infusion SOLN 1.04 GM/100ML-2.17 GM/100ML-592 MG/100ML-434 MG/100ML-39 MG/100ML-1.04 GM/100ML-749 MG/100ML-1.04 GM/100ML-894 MG/100ML-147.4 MEQ/L-960 MG/100ML-749 MG/100ML-250 MG/100ML-749 MG/100ML-1.47 GM/100ML-894 MG/100ML-749 MG/100ML-1.18 GM/100ML, 1040 MG/100ML-2170 MG/100ML-592 MG/100ML-434 MG/100ML-1180 MG/100ML-39 MG/100ML-1040 MG/100ML-749 MG/100ML-1040 MG/100ML-894 MG/100ML-151	.....	19
alprazolam TBDP	.....	19	ALUMINUM CHLORIDE HEXAHYDRATE POWD	.....	119			
alprostadil	.....	186	ALUMINUM CHLORIDE HEXAHYDRATE POWD	.....	119			
ALPROSTADIL	.....	97	ALUMINUM CHLORIDE HEXAHYDRATE POWD	.....	119			
ALREX SUSP (Use loteprednol etabonate)	.....	201	ALUMINUM CHLORIDE HEXAHYDRATE POWD	.....	119			
ALTACE CAPS 1.25 MG, 2.5 MG, 5 MG, 10 MG (Use ramipril)	.....	45	ALUMINUM CHLORIDE HEXAHYDRATE POWD	.....	119			
ALTOPREV TB24 20 MG, 40 MG, 60	.....		ALUMINUM CHLORIDE HEXAHYDRATE POWD	.....	119			

MEQ/L-960 MG/100ML-749	AMJEVITA SOAJ .....	6	AMMONIUM PHOSPHATE DIBASIC	
MG/100ML-250 MG/100ML-749	AMJEVITA SOSY 40 MG/0.4ML ...	6	GRAN .....	97
MG/100ML-1470 MG/100ML-894	AMJEVITA SOSY .....	6	AMMONIUM SULFATE .....	97
MG/100ML-749 MG/100ML, 750	AMLADEX TABS .....	190	AMMONIUM	
MG/100ML-1490 MG/100ML-795	AMLEXANOX .....	72	TETRATHIOMOLYBDATE .....	72
MG/100ML-1050 MG/100ML-1500	AMLODIPINE BESYLATE .....	72	AMONDYS 45 .....	195
MG/100ML-258 MG/100ML-447	amlodipine besylate TABS 2.5 MG	66	amoxapine .....	33
MG/100ML-450 MG/100ML-107.6	amlodipine besylate TABS .....	66	amoxicillin & pot clavulanate CHEW .	205
MEQ/L-750 MG/100ML-600	amlodipine besylate-atorvastatin		amoxicillin & pot clavulanate SUSR	
MG/100ML-300 MG/100ML-990	calcium .....	68	28.5 MG/5ML-200 MG/5ML, 62.5	
MG/100ML-1527 MG/100ML-1083	amlodipine besylate-atorvastatin		MG/5ML-250 MG/5ML .....	205
MG/100ML-405 MG/100ML-1107	calcium 2.5 MG-20 MG, 2.5 MG-40		amoxicillin & pot clavulanate SUSR	
MG/100ML-50 MEQ/L-1575	MG, 5 MG-40 MG .....	68	42.9 MG/5ML-600 MG/5ML, 57	
MG/100ML .....	amlodipine besylate-benazepril hcl		MG/5ML-400 MG/5ML .....	205
197	47		amoxicillin & pot clavulanate TABS	
AMINOBENZOIC ACID POWD ..	amlodipine besylate-olmesartan		125 MG-250 MG, 125 MG-500 MG	
228	medoxomil .....	47	205	
AMINOCAPROIC ACID .....	amlodipine besylate-valsartan ...	47	amoxicillin & pot clavulanate TABS	
72	amlodipine besylate-valsartan 10		125 MG-875 MG .....	205
AMINOLEVULINIC ACID	MG-160 MG, 10 MG-320 MG, 5 MG-		amoxicillin & pot clavulanate TB12	
HYDROCHLORIDE POWD .....	160 MG .....	47	205	
72	amlodipine-valsartan-		amoxicillin CAPS .....	204
AMINOLEVULINIC ACID	hydrochlorothiazide .....	47	amoxicillin CHEW 125 MG, 250 MG .	
HYDROCHOLRIDE POWD .....	AMMONIUM BROMIDE ACS POWD		204	
72	97		AMOXICILLIN SUSR (Use	
AMINOPHYLLINE ANHYDROUS	AMMONIUM BROMIDE GRAN ...	97	amoxicillin) .....	204
POWD .....	AMMONIUM CARBONATE POWD		amoxicillin SUSR .....	204
23	97		amoxicillin TABS 500 MG .....	204
aminophylline SOLN .....	AMMONIUM CHLORIDE .....	97	amoxicillin TABS 875 MG .....	204
23	AMMONIUM HYDROXIDE .....	71	AMOXICILLIN TRIHYDRATE POWD	
AMINOPROPYL MENTHYL	AMMONIUM LACTATE .....	95	204	
PHOSPHATE .....	AMMONIUM LAURYL SULFATE .	72	amoxicillin-clarithromycin w/	
72	AMMONIUM MOLYBDATE		lansoprazole THPK .....	223
AMINOSALICYLIC ACID POWD ..	TETRAHYDRATE .....	72	AMPHADASE .....	184
52				
AMINOSYN-PF 7% SOLN .....				
197				
amiodarone hcl SOLN 50 MG/ML,				
450 MG/9ML, 900 MG/18ML .....				
20				
amiodarone hcl TABS 100 MG, 400				
MG .....				
20				
amiodarone hcl TABS 200 MG ....				
20				
AMITIZA (Use lubiprostone) .....				
128				
AMITRIPTYLINE HCL POWD .....				
72				
amitriptyline hcl TABS .....				
33				
AMITRIPTYLINE HYDROCHLORIDE				
POWD .....				
72				

amphetamine sulfate TABS .....	1	anagrelide hcl .....	132	MACTANS .....	204
amphetamine-dextroamphetamine CP24 1.25 MG-1.25 MG-1.25 MG- 1.25 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG, 6.25 MG-6.25 MG-6.25 MG-6.25 MG, 7.5 MG-7.5 MG-7.5 MG-7.5 MG .....	1	ANAPROX DS TABS (Use naproxen sodium) .....	7	ANTIVENIN NORTH AMERICANCORAL SNAKE .....	204
amphetamine-dextroamphetamine CP24 12.5 MG-12.5 MG-12.5 MG- 12.5 MG, 3.125 MG-3.125 MG-3.125 MG-3.125 MG, 6.25 MG-6.25 MG- 6.25 MG-6.25 MG, 9.375 MG-9.375 MG-9.375 MG-9.375 MG .....	1	anastrozole .....	54	ANTIVERT CHEW (Use meclizine hcl) .....	40
amphetamine-dextroamphetamine TABS 1.25 MG-1.25 MG-1.25 MG- 1.25 MG, 1.875 MG-1.875 MG-1.875 MG-1.875 MG, 2.5 MG-2.5 MG-2.5 MG-2.5 MG, 3.125 MG-3.125 MG- 3.125 MG-3.125 MG, 3.75 MG-3.75 MG-3.75 MG-3.75 MG, 5 MG-5 MG-5 MG-5 MG .....	1	ANASTROZOLE .....	72	ANTIVERT TABS 50 MG (Use meclizine hcl) .....	40
amphetamine-dextroamphetamine TABS .....	1	ANDRODERM PT24 2 MG/24HR, 4 MG/24HR .....	16	ANUSOL-HC EX (Use hydrocortisone (rectal)) .....	17
AMPHOTERICIN B .....	187	ANDROGEL GEL TD 25 MG/2.5GM, 40.5 MG/2.5GM, 50 MG/5GM (Use testosterone) .....	16	ANZEMET TABS 50 MG .....	39
amphotericin b IV .....	40	ANDROGEL PUMP GEL TD 1.62 % (Use testosterone) .....	16	APETIBEX CAPS .....	188
amphotericin b liposome .....	40	ANDROSTENEDIONE .....	72	APEXICON E CREA .....	113
ampicillin & sulbactam sodium IJ 1 GM-0.5 GM, 2 GM-1 GM .....	205	ANECTINE SOLN .....	195	APIDRA SOLN .....	35
ampicillin CAPS 500 MG .....	204	ANGELIQ .....	126	APIDRA SOLN .....	36
ampicillin sodium IJ 1 GM, 2 GM, 125 MG, 250 MG, 500 MG .....	204	ANHYDROUS GEL BASE .....	212	APIDRA SOLOSTAR SOPN .....	35
AMRIX CP24 (Use cyclobenzaprine hcl) .....	193	ANISE EXTRACT LIQD .....	206	APLENZIN .....	30
AMYTAL SODIUM .....	135	ANISE FLAVOR OIL .....	206	APLISOL .....	120
AMYVID .....	120	ANISE OIL .....	95	APOMORPHINE HCL .....	72
ANAFRANIL (Use clomipramine hcl)		ANISINDIONE .....	72	APOMORPHINE HCL HEMIHYDRATE .....	72
33		ANNOVERA .....	101	APONVIE EMUL .....	40
		ANORO ELLIPTA .....	22	APO-VARENICLINE TABS 0.5 MG 217	
		ANTHRALIN POWD .....	111	APO-VARENICLINE TABS 1 MG 217	
		ANTICOAGULANT SODIUM CITRATE SOLN .....	25	APPE-CURB CAPS .....	188
		ANTIMONY POTASSIUM TARTRATE .....	72	APPLE FLAVOR LIQD .....	206
		ANTIMONY TRICHLORIDE CRYSTALS 72		APPLE FLAVOR POWD .....	206
		ANTIMONY TRISULFIDE .....	72	APPLE FLAVOR WATER MISCIBLE POWD .....	206
		ANTIPYRINE CRYSTALS .....	72	apraclonidine hcl .....	199
		ANTIPYRINE POWD .....	72	aprepitant CAPS .....	40
		ANTIVENIN LATRODECTUS		aprepitant MISC .....	40

APRETUDE .....	60	donepezil hydrochloride) .....	215	ASCENIV .....	204
APRICOT FLAVOR LIQD .....	206	ARICEPT TABS 5 MG, 10 MG (Use donepezil hydrochloride) .....	215	ASCORBIC ACID CASSAVE POWD	72
APRICOT FLAVOR POWD .....	206	ARIKAYCE .....	4	ASCORBIC ACID GRAN .....	72
APRISO CP24 (Use mesalamine) 128		ARIMIDEX (Use anastrozole) .....	54	ASCORBIC ACID POWD .....	72
APTENSIO XR CP24 (Use methylphenidate hcl) .....	2	aripiprazole SOLN OR .....	60	ascorbic acid TABS .....	228
APTIOM .....	26	aripiprazole TABS .....	60	ASCORBYL PALMITATE .....	72
APTIVUS CAPS .....	60	aripiprazole TBDP .....	60	asenapine maleate .....	58
AQINJECT PEN NEEDLE/31G X 3/16" .....	152	ARISTADA 1064 MG/3.9ML .....	60	asenapine maleate 2.5 MG .....	58
AQINJECT PEN NEEDLE/32G X 5/32" .....	152	ARISTADA 441 MG/1.6ML .....	60	ASMANEX HFA AERO .....	21
AQUASOL A PARENTERAL SOLN 228		ARISTADA 662 MG/2.4ML .....	60	ASMANEX TWISTHALER 120 METERED DOSES AEPB .....	21
ARANESP ALBUMIN FREE SOLN 25 MCG/ML, 40 MCG/ML, 60 MCG/ML, 100 MCG/ML .....	133	ARISTADA 882 MG/3.2ML .....	60	ASMANEX TWISTHALER 14 METERED DOSES AEPB .....	21
ARANESP ALBUMIN FREE SOSY 10 MCG/0.4ML, 25 MCG/0.42ML, 40 MCG/0.4ML, 60 MCG/0.3ML, 100 MCG/0.5ML, 150 MCG/0.3ML .....	133	ARISTADA INITIO .....	60	ASMANEX TWISTHALER 30 METERED DOSES AEPB .....	21
ARAVAL (Use leflunomide) .....	10	ARLACEL 165 .....	80	ASMANEX TWISTHALER 60 METERED DOSES AEPB .....	21
ARAZLO LOTN .....	106	ARLASILK PHOSPHOLIPID PLN 210		ASPARAGINE MONOHYDRATE	.72
ARBUTIN ALPHA .....	72	armodafinil .....	2	ASPARLAS .....	55
ARCALYST .....	7	ARMONAIR DIGIHALER .....	21	ASPARTAME (NUTRASWEET)	.123
AREXVY .....	224	ARMOUR THYROID TABS .....	220	ASPARTAME .....	122
arformoterol tartrate .....	22	ARNICA LG .....	72	ASPARTIC ACID .....	97
argatroban .....	25	ARNUITY ELLIPTA .....	21	aspirin buffered (cal carb-mag carb- mag oxide) .....	11
ARGATROBAN .....	25	AROMASIN (Use exemestane) ...	54	aspirin CHEW .....	11
ARGATROBAN/SODIUM CHLORIDE .....	25	ARSENIC TRIOXIDE .....	72	ASPIRIN POWD .....	11
ARGININE HCL .....	72	ARTESUNATE .....	51	ASPIRIN SUPP 300 MG .....	11
ARICEPT TABS 23 MG (Use		ARTHROTEC 50 TBEC (Use diclofenac w/ misoprostol) .....	7	aspirin TABS 325 MG .....	11
		ARTHROTEC 75 TBEC (Use diclofenac w/ misoprostol) .....	7	aspirin TBEC 81 MG, 325 MG .....	11
		ARTISS KIT .....	135	ASPIRIN/OMEPRAZOLE 81 MG-40 MG .....	132
		ARTISS SOLN .....	135		
		ASACOL HD TBEC (Use mesalamine) .....	128		

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BIAFINE EMUL .....120	BISACODYL POWD .....138	BIVALIRUDIN RTU SOLN (Use bivalirudin trifluoroacetate) .....25
bicalutamide .....54	bisacodyl SUPP ..... 138	bivalirudin trifluoroacetate SOLN ..25
BICILLIN C-R 300000 UNIT/2ML- 900000 UNIT/2ML, 300000 UNIT/ML- 300000 UNIT/ML ..... 205	bisacodyl TBEC .....138	bivalirudin trifluoroacetate SOLR ..25
BICILLIN L-A SUSY ..... 204	BISMUTH CITRATE .....73	
BICNU (Use carmustine) .....53	BISMUTH SUBCARBONATE .....97	
BIGFOOT UNITY PROGRAM KIT KIT ..... 141	bismuth subcitrate potassium-	

BLACKBERRY FLAVOR LIQD ...207	EXTRACT65% ..... 73	brimonidine tartrate 0.1 %, 0.15 % 199
bleomycin sulfate .....54	BOSWELLIA SERRATA EXTRACT70% ..... 73	brimonidine tartrate 0.1 % ..... 199
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BLOOD GLUCOSE MONITORINGSYSTEM KIT .....141	BP VIT 3 .....133	brimonidine tartrate-timolol maleate . 198
BLOOD GLUCOSE MONITORINGSYSTEM PREMIUM KIT ..... 141	BPCO OINT .....120	BRINEURA .....125
BLOOD GLUCOSE SYSTEM PAK KIT ..... 141	BPROTECTED PEDIA POLY-VITE SOLN OR ..... 191	brinzolamide ..... 202
BLOOD ORANGE OS LIQD ..... 207	BRAFTOVI 75 MG ..... 55	BRIVIACT SOLN OR 10 MG/ML .. 26
BLUDIGO IV .....120	BREEZE 2 BLOOD GLUCOSE MONITORING SYSTEM DEVI ... 141	BRIVIACT TABS .....26
BLUE AGAVE ORGANIC ..... 73	BREO ELLIPTA (Use fluticasone furoate-vilanterol) ..... 22	BRIXADI SOSY 32 MG/0.64ML, 64 MG/0.18ML, 96 MG/0.27ML ..... 15
BLUEBERRY FLAVOR LIQD .... 207	BREO ELLIPTA ..... 22	BROMELAIN 1200 GDU POWD . 184
BLULINK BLOOD GLUCOSE MONITORING SYSTEM DEVI ... 141	BREO ELLIPTA 100 MCG/ACT-25 MCG/ACT .....22	BROMELAIN POWD ..... 184
BONEUP 3 PER DAY CAPS .....188	BREVITAL SODIUM SOLR 500 MG . 130	bromfenac sodium (ophth) .....202
BONEUP CAPS ..... 188	BREXAFEMME .....40	BROMFENAC SODIUM MISC ....74
BONJESTA TBCR .....40	BREYANZI ..... 54	BROMFENAC SODIUM POWD ...74
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BOOSTRIX SUSY .....220	BRIJ 35 WAX ..... 87	bromocriptine mesylate CAPS .....56
BORIC ACID CRYST .....98	BRIJ 700 WAX .....87	BROMOCRIPTINE MESYLATE POWD .....56
BORIC ACID NF POWD .....98	BRIJ 93 .....87	bromocriptine mesylate TABS 2.5 MG ..... 56
BORIC ACID POWD .....98	BRIJ C20 WAX .....87	brompheniramine & phenyleph ELIX . 104
BORON AMORPHOUS FINE .....73	BRIJ S20 WAX .....87	BROMPHENIRAMINE MALEATE POWD ..... 41
BORON CITRATE .....73	BRILINTA ..... 132	BROMSITE (Use bromfenac sodium (ophth)) ..... 202
BOSWELLIA SERRATA EXTRACT . 73	BRILLIANT BLUE G ..... 205	BRONCHITOL .....218
BOSWELLIA SERRATA	BRILLIANT GREEN POWD ..... 73	BRONCHITOL TOLERANCE TEST .
	brimonidine tartrate (topical) .....119	
	BRIMONIDINE TARTRATE .....73	

218	bumetanide) .....	123	bupropion hcl (smoking deterrent) 217
BROVANA (Use arformoterol tartrate) .....	22	BUPIVACAINE FISIOPHARMA SOLN IJ .....	139
BRUKINSA .....	55	BUPIVACAINE HCL MONOHYDRATE POWD .....	139
BRUSELIX CREA .....	118	BUPIVACAINE HCL POWD .....	139
BRYHALI LOTN .....	113	bupivacaine hcl SOLN IJ .....	139
BSS PLUS SOLN .....	202	BUPIVACAINE HCL SOLN XX ...	139
BSS SOLN .....	202	BUPIVACAINE HYDROCHLORIDE SOLN IJ 0.25 %, 0.5 % .....	139
BUBBLE GUM CONCENTRATE LIQD .....	207	BUPIVACAINE HYDROCHLORIDEMONOHYDRATE POWD .....	139
BUBBLE GUM FLAVOR LIQD ...	207	bupivacaine in dextrose SOLN ...	139
BUBBLE GUM OS LIQD .....	207	bupivacaine w/ epinephrine SOLN 1 :200000-0.25 %, 1 :200000-0.5 % 138	
BUBBLE GUM WS LIQD .....	207	BUPRENEX SOLN (Use buprenorphine hcl) .....	15
BUBBLEGUM FLAVOR LIQD ...	207	BUPRENORPHINE HCL .....	74
budesonide (inhalation) SUSP 0.25 MG/2ML, 0.5 MG/2ML .....	21	buprenorphine hcl SOLN .....	16
budesonide (inhalation) SUSP 1 MG/2ML .....	21	buprenorphine hcl SUBL .....	16
budesonide (intrarectal) .....	17	buprenorphine hcl-naloxone hcl dihydrate FILM SL 0.5 MG-2 MG, 1 MG-4 MG .....	15
budesonide (nasal) .....	194	buprenorphine hcl-naloxone hcl dihydrate FILM SL 1 MG-4 MG ...	16
BUDESONIDE .....	74	buprenorphine hcl-naloxone hcl dihydrate FILM SL 2 MG-8 MG, 3 MG-12 MG .....	16
budesonide CPEP .....	102	buprenorphine hcl-naloxone hcl dihydrate SUBL 0.5 MG-2 MG .....	16
BUDESONIDE MICRONIZED ...	74	buprenorphine hcl-naloxone hcl dihydrate SUBL 2 MG-8 MG .....	16
budesonide TB24 .....	102	buprenorphine PTWK .....	16
budesonide-formoterol fumarate dihydrate .....	22		
BUFFERIN (Use aspirin buffered (cal carb-mag carb-mag oxide)) ...	11		
BUFLOMEDIL HCL .....	74		
bumetanide SOLN 0.25 MG/ML ...	123		
bumetanide TABS .....	123		
BUMEX TABS 0.5 MG (Use			
			BUPROPION HCL .....
			bupropion hcl TABS .....
			bupropion hcl TB12 100 MG .....
			bupropion hcl TB12 150 MG .....
			bupropion hcl TB12 200 MG .....
			bupropion hcl TB24 150 MG .....
			bupropion hcl TB24 300 MG .....
			bupropion hcl TB24 450 MG .....
			BUPROPION HYDROCHLORIDE 74
			BURN RELIEF GEL .....
			BUSPIRONE HCL .....
			bupirone hcl 15 MG .....
			bupirone hcl 5 MG, 10 MG .....
			bupirone hcl 7.5 MG, 30 MG .....
			BUSPIRONE HYDROCHLORIDE 74
			busulfan SOLN .....
			BUTALBITAL .....
			butalbital-acetaminophen CAPS 50 MG-300 MG .....
			butalbital-acetaminophen TABS 50 MG-300 MG .....
			butalbital-acetaminophen TABS 50 MG-325 MG .....
			butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-300 MG .....
			butalbital-acetaminophen-caffeine CAPS 40 MG-50 MG-325 MG .....
			butalbital-acetaminophen-caffeine TABS 40 MG-50 MG-325 MG .....
			butalbital-acetaminophen-caffeine w/

codeine 30 MG-40 MG-50 MG-300 MG .....	14	BYLVAY CAPS .....	128	calcipotriene-betamethasone dipropionate OINT .....	113
butalbital-acetaminophen-caffeine w/ codeine 30 MG-40 MG-50 MG-325 MG .....	14	BYSTOLIC (Use nebivolol hcl) ...	65	calcipotriene-betamethasone dipropionate SUSP .....	113
butalbital-aspirin-caffeine CAPS ...	10	BYSTOLIC 2.5 MG, 5 MG (Use nebivolol hcl) .....	65	CALCIPOTRIOL .....	74
butalbital-aspirin-caffeine w/cod ...	14	C10-C30 ALKYL ACRYLATE CROSSPOLYMER POWD .....	210	calcitonin (salmon) IJ .....	124
BUTORPHANOL TARTRATE .....	74	CABENUVA .....	60	calcitonin (salmon) NA .....	124
butorphanol tartrate IJ 1 MG/ML, 2 MG/ML .....	16	cabergoline .....	126	calcitriol (topical) .....	111
butorphanol tartrate NA 10 MG/ML 16		CABTREO .....	107	CALCITRIOL .....	74
BUTRANS PTWK (Use buprenorphine) .....	16	CADUET 10 MG-10 MG, 10 MG-20 MG, 10 MG-40 MG, 10 MG-80 MG, 5 MG-10 MG, 5 MG-20 MG, 5 MG-40 MG, 5 MG-80 MG (Use amlodipine besylate-atorvastatin calcium) .....	68	calcitriol CAPS .....	125
BUTTER FLAVOR LIQD .....	207	CAFCIT SOLN IV 60 MG/3ML (Use caffeine citrate) .....	2	CALCITRIOL IN ALMOND OIL ...	74
BUTTER RUM FLAVOR LIQD ...	207	caffeine & sodium benzoate .....	2	calcitriol SOLN IV .....	125
BUTTERSCOTCH FLAVOR LIQD 207		CAFFEINE ANHYDROUS POWD ...	2	calcium acetate (phosphate binder) CAPS .....	129
BUTYL ALCOHOL .....	74	caffeine citrate SOLN IV 60 MG/3ML 2		CALCIUM ACETATE CRYSTALS .....	74
BUTYLATED HYDROXYANISOLE POWD .....	74	caffeine citrate SOLN OR .....	2	CALCIUM ACETATE POWD .....	74
BUTYLATED HYDROXYTOLUENE CRYS .....	98	CAFFEINE CITRATED POWD .....	2	CALCIUM ALGINATE .....	74
BUTYLATED HYDROXYTOLUENE GRAN .....	98	CALAMINE POWD XX .....	119	CALCIUM AMINO ACID CHELATE 30% GRAN .....	74
BUTYLATED HYDROXYTOLUENE POWD .....	98	CALAN SR TBCR (Use verapamil hcl) .....	66	CALCIUM ASCORBATE DIHYDRATE POWD .....	228
BUTYLENE GLYCOL .....	74	CALCIPOTRIENE .....	74	CALCIUM ASCORBATE POWD ..	228
BUTYL PARABEN .....	205	calcipotriene CREA .....	111	calcium carbonate (antacid) CHEW 500 MG .....	18
BYDUREON BCISE AUIJ .....	35	calcipotriene FOAM .....	111	CALCIUM CARBONATE EXTRA LIGHT POWD XX .....	180
BYETTA SOPN 10 MCG/0.04ML ...	35	CALCIPOTRIENE FOAM .....	111	CALCIUM CARBONATE HEAVY POWD XX .....	180
BYETTA SOPN 5 MCG/0.02ML ...	35	CALCIPOTRIENE MONOHYDRATE .....	74	CALCIUM CARBONATE LIGHT POWD XX .....	180
BYFAVO .....	136	calcipotriene OINT .....	111	CALCIUM CARBONATE POWD XX .	180
BYLVAY (PELLETS) CPSP .....	128	calcipotriene SOLN .....	111	calcium carbonate TABS 500 MG, 600 MG, 1250 MG, 1500 MG .....	180



calcium carbonate-cholecalciferol TABS 10 MCG-600 MG, 400 UNIT- 600 MG ..... 180	GLUCONATE/SODIUMCHLORIDE SOLN 1 GM/100ML-0.8 %, 1 GM/50ML-0.675 %, 2 GM/100ML- 0.675 % ..... 180	98 CALCIUM SULFATE HEMIHYDRATE .....98
calcium carbonate-cholecalciferol TABS 200 UNIT-200 UNIT-500 MG- 500 MG, 200 UNIT-500 MG, 5 MCG- 500 MG, 500 MG-5 MCG .....180	calcium gluconate-sodium chloride SOLN ..... 180	CALCIUM THIOGLYCOLATE TRIHYDRATE .....74
calcium chloride (dihydrate) SOLN 180	CALCIUM GLYCEROPHOSPHATE . 74	CALDOLOR SOLN .....7
CALCIUM CHLORIDE ANHYDROUS GRAN .....180	CALCIUM HYDROXIDE .....98	camphor & menthol LOTN .....111
CALCIUM CHLORIDE ANHYDROUS POWD .....74	CALCIUM HYDROXYAPATITE ...77	CAMPHOR CRYST .....111
CALCIUM CHLORIDE DIHYDRATE GRAN .....180	CALCIUM L-5 METHYLTETRAHYDROFOLATE 84	CAMPHOR GRAN .....111
CALCIUM CHLORIDE DIHYDRATE POWD .....180	CALCIUM LACTATE PENTAHYDRATE .....180	CAMPHOR GUM BLOCKS .....210
CALCIUM CHLORIDE SOLN .... 180	CALCIUM LEVULINATE DIHYDRATE .....74	CAMPHOR SPIRIT .....95
CALCIUM CITRATE POWD .....74	CALCIUM OXIDE ..... 74	CAMPHOR SPIRITS .....96
CALCIUM CITRATE TETRAHYDRATE POWD ..... 74	CALCIUM PANTOTHENATE POWD 228	camphor-menthol-methyl salicylate GEL ..... 118
CALCIUM DISODIUM VERSEDATE SOLN 1 GM/5ML .....39	CALCIUM PHOSPHATE DIBASIC 181	camphor-menthol-methyl salicylate PTCH EX 3.1 %-10 %-6 % ..... 118
CALCIUM FOLINATE .....83	CALCIUM PHOSPHATE DIBASICDIHYDRATE ..... 181	CANADIAN BALSAM ..... 74
CALCIUM FRUCTOBORATE .....74	CALCIUM PHOSPHATE TRIBASIC . 181	CANASA SUPP (Use mesalamine) 128
CALCIUM GLUBIONATE ..... 74	calcium polycarbophil TABS .....137	candesartan cilexetil ..... 46
CALCIUM GLUBIONATE MONOHYDRATE ..... 74	CALCIUM PROPIONATE .....74	candesartan cilexetil- hydrochlorothiazide ..... 47
CALCIUM GLUCONATE ANHYDROUS POWD ..... 180	CALCIUM PYRUVATE .....74	CANNABIDIOL .....74
CALCIUM GLUCONATE MONOHYDRATE POWD ..... 180	CALCIUM SACCHARATE ..... 74	CANTHARIDIN POWD .....117
CALCIUM GLUCONATE POWD .180	CALCIUM SACCHARIN .....90	CANTHARIDIN SOLN .....118
calcium gluconate SOLN ..... 180	CALCIUM SILICATE .....74	CAPLYTA ..... 57
CALCIUM	CALCIUM STEARATE .....74	CAPRYLIC ACID .....74
	CALCIUM SULFATE .....98	CAPRYLIC/CAPRIC TRIGLYCERIDE .....75
	CALCIUM SULFATE ANHYDROUS .	CAPRYLIC/CAPRIC TRIGLYCERIDES .....75
		capsaicin CREA 0.025 %, 0.075 %, 0.1 % .....118

CAPSAICIN PALMITATE .....	75	CARBAMAZEPINE POWD .....	26	TYPE C .....	75
CAPSAICIN POWD 95 %, 98.3 % 118		carbamazepine SUSP .....	26	carboplatin SOLN 50 MG/5ML, 150 MG/15ML, 450 MG/45ML, 600 MG/60ML, 1000 MG/100ML .....	53
capsaicin PTCH .....	118	carbamazepine TABS .....	26	CARBOPOL 940 .....	75
CAPSICUM OLEORESIN LIQD ...	98	carbamazepine TB12 200 MG ....	26	CARBOPOL 940 NF .....	75
CAPSORALWITH DYNAMIC STATIC GUARD .....	210	carbamazepine TB12 .....	26	carboprost tromethamine SOLN .	203
CAPSUBLEND-H .....	210	carbamide peroxide (otic) 6.5 % .	203	CARBOPROST TROMETHAMINE SOSY .....	203
CAPSUBLEND-P .....	210	CARBAMIDE PEROXIDE .....	75	CARBOXYMETHYLCELLULOSE SODIUM HIGH VISCOSITY POWD	98
CAPSUBLEND-S .....	210	CARBATROL CP12 (Use carbamazepine) .....	26	CARBOXYMETHYLCELLULOSE SODIUM LOW VISCOSITY POWD	98
captopril & hydrochlorothiazide 15 MG-25 MG, 15 MG-50 MG, 25 MG- 25 MG .....	47	CARBAZOCHROME .....	75	CARBOXYMETHYLCELLULOSE SODIUM MEDIUM VISCOSITY GRAN .....	98
captopril & hydrochlorothiazide 25 MG-50 MG .....	47	carbidopa .....	55	CARBOXYMETHYLCELLULOSE SODIUM MEDIUM VISCOSITY POWD .....	98
captopril .....	45	CARBIDOPA .....	98	CARBOXYMETHYLCELLULOSE SODIUM POWD .....	98
CAPTOPRIL .....	75	CARBIDOPA ANHYDROUS .....	98	CARDAMOM OIL .....	75
CAPVAXIVE .....	224	carbidopa-levodopa TABS .....	56	CARDENE IV SOLN 0.83 %-40 MG/200ML, 0.86 %-20 MG/200ML	66
CAPZASIN-HP CREA (Use capsaicin) .....	118	carbidopa-levodopa TBCR .....	56	CARDIOLITE .....	120
CARAC CREA (Use fluorouracil (topical)) .....	111	carbidopa-levodopa TBDP .....	56	CARDIOPLEGIA INDUCTION HIGH POTASSIUM .....	68
CARAFATE SUSP (Use sucralfate) 222		carbidopa-levodopa-entacapone .	56	CARDIOPLEGIA INDUCTION HIGH POTASSIUM/LOW DEXTROSE ..	68
CARAFATE TABS (Use sucralfate) 222		CARBIMAZOLE .....	75	CARDIOPLEGIA INDUCTION HIGH POTASSIUM/NON-ENRICHED ...	68
CARAMEL FLAVOR LIQD .....	207	carbinoxamine maleate SOLN ....	42	CARDIOPLEGIA INDUCTION PLASMAYTE/TROMETHAMINE HIGH POTASSIU .....	68
CARAMEL OS LIQD .....	207	carbinoxamine maleate SUER ....	42		
CARBACHOL .....	75	carbinoxamine maleate TABS 4 MG .	42		
carbamazepine CHEW .....	26	CARBINOXAMINE MALEATE TABS .	42		
carbamazepine CP12 200 MG, 300 MG .....	26	CARBOMER 934P .....	75		
carbamazepine CP12 .....	26	CARBOMER 934P RESIN .....	75		
		CARBOMER 940 .....	75		
		CARBOMER 940 NF .....	75		
		CARBOMER 941 .....	75		
		CARBOMER 980 .....	75		
		CARBOMER HOMOPOLYMER			

CARDIOPLEGIA MAINTENANCELOW DEXTROSE/LOW POTASSIUM ..68	141 CAREPOINT PRECISION POLYHUB NEEDLE/18GX1" ..... 156	CAREPOINT PRECISION SYRINGE/LUER LOCK/30ML ...157
CARDIOPLEGIA MAINTENANCELOW POTASSIUM . 68	CAREPOINT PRECISION POLYHUB NEEDLE/20GX1" ..... 156	CAREPOINT PRECISION SYRINGE/LUER LOCK/3ML .... 157
CARDIOPLEGIA MAINTENANCELOW TROMETHAMINE/LOW POTASSIUM .....68	CAREPOINT PRECISION POLYHUB NEEDLE/21GX1" ..... 156	CAREPOINT PRECISION SYRINGE/LUER LOCK/5ML .... 157
CARDIOPLEGIA MAINTENANCEPLASMA/LYTE/TRO METHAMINE LOW POTASSI .....68	CAREPOINT PRECISION POLYHUB NEEDLE/22GX1" ..... 156	CAREPOINT PRECISION SYRINGE/LUER LOCK/60ML ...157
CARDIOPLEGIA REPERFUSATE/LOW POTASSIUM 68	CAREPOINT PRECISION POLYHUB NEEDLE/21GX1-1/2" ..... 156	CAREPOINT PRECISION SYRINGE/LUER SLIP/1ML .....157
cardioplegic soln ..... 68	CAREPOINT PRECISION POLYHUB NEEDLE/22GX1-1/2" ..... 156	CAREPOINT PRECISION SYRINGE/LUER SLIP/1ML 25GX5/8" MISC .....157
CARDIZEM CD CP24 120 MG, 180 MG, 300 MG (Use diltiazem hcl coated beads) .....66	CAREPOINT PRECISION POLYHUB NEEDLE/23GX1" ..... 156	CAREPOINT PRECISION SYRINGE/LUER SLIP/60ML .... 157
CARDIZEM CD CP24 240 MG (Use diltiazem hcl coated beads) .....66	CAREPOINT PRECISION POLYHUB NEEDLE/23GX1-1/2" ..... 157	CAREPOINT SAFETY 1ST NEEDLE 23GX1" .....157
CARDIZEM CD CP24 360 MG (Use diltiazem hcl coated beads) .....66	CAREPOINT PRECISION POLYHUB NEEDLE/25GX1" ..... 157	CAREPOINT SAFETY 1ST NEEDLE 23GX1-1/2" .....157
CARDIZEM LA TB24 (Use diltiazem hcl) .....66	CAREPOINT PRECISION POLYHUB NEEDLE/25GX1-1/2" ..... 157	CAREPOINT SAFETY 1ST NEEDLE 25GX1" .....157
CARDIZEM TABS 30 MG, 60 MG, 120 MG (Use diltiazem hcl) .....66	CAREPOINT PRECISION POLYHUB NEEDLE/25GX5/8" ..... 157	CAREPOINT SAFETY 1ST NEEDLE 25GX1-1/2" .....157
CARDURA (Use doxazosin mesylate) .....46	CAREPOINT PRECISION POLYHUB NEEDLE/27GX1/2" ..... 157	CAREPOINT SAFETY 1ST NEEDLE 25GX5/8" .....157
CARDURA 8 MG (Use doxazosin mesylate) .....46	CAREPOINT PRECISION POLYHUB NEEDLE/30GX1/2" ..... 157	CAREPOINT SAFETY 1ST SYRINGE/NEEDLE 1ML/23G X 1" 157
CARDURA XL .....130	CAREPOINT PRECISION SYRINGE/CATHETER TIP/60ML 157	CAREPOINT SAFETY 1ST SYRINGE/NEEDLE 1ML/25G X 1" 157
CAREONE BLOOD GLUCOSE MONITORING SYSTEM/PREMIUM KIT .....141	CAREPOINT PRECISION SYRINGE/LUER LOCK/10ML ...157	CAREPOINT SAFETY 1ST SYRINGE/NEEDLE 3ML/23G X 1" 157
CAREONE BLOOD GLUCOSE MONITORING SYSTEM/VALUE KIT	CAREPOINT PRECISION SYRINGE/LUER LOCK/1ML .... 157	CAREPOINT SAFETY 1ST SYRINGE/NEEDLE 3ML/25G X 1" 157
	CAREPOINT PRECISION SYRINGE/LUER LOCK/20ML ...157	

CAREPOINT SAFETY 1ST SYRINGE/NEEDLE 3ML/25G X 5/8" 157	CARETOUCH HYPODERMIC NEEDLE/22GX1" ..... 158	CARETOUCH LUER LOCK SYRINGE/5ML .....158
CAREPOINT SYRINGE/LUER LOCK/3ML/20GX1" ..... 157	CARETOUCH HYPODERMIC NEEDLE/23GX1" ..... 158	CARETOUCH LUER SLIP SYRINGE/10ML .....158
CAREPOINT SYRINGE/LUER LOCK/3ML/20GX1-1/2" ..... 157	CARETOUCH HYPODERMIC NEEDLE/23GX1-1/2" ..... 158	CARETOUCH LUER SLIP SYRINGE/1ML .....158
CAREPOINT SYRINGE/LUER LOCK/3ML/22GX1" ..... 157	CARETOUCH HYPODERMIC NEEDLE/25GX1" ..... 158	CARETOUCH LUER SLIP SYRINGE/5ML .....158
CAREPOINT SYRINGE/LUER LOCK/3ML/22GX1-1/2" ..... 157	CARETOUCH HYPODERMIC NEEDLE/25GX1-1/2" ..... 158	carglumic acid .....125
CAREPOINT SYRINGE/LUER LOCK/3ML/23GX1" ..... 158	CARETOUCH HYPODERMIC NEEDLE/25GX5/8" ..... 158	CARISOPRODOL POWD ..... 193
CAREPOINT SYRINGE/LUER LOCK/3ML/23GX1-1/2" ..... 158	CARETOUCH HYPODERMIC NEEDLE/26GX1" ..... 158	carisoprodol TABS .....193
CAREPOINT SYRINGE/LUER LOCK/3ML/25GX1" ..... 158	CARETOUCH HYPODERMIC NEEDLES/27G X 1 1/2 ..... 158	CARMINE ..... 75
CARESENS CONTROL SOLUTION A/B SOLN .....141	CARETOUCH LUER LOCK 3ML/22GX1" ..... 158	carmustine .....53
CARESENS N BLOOD GLUCOSE MONITORING SYSTEM DEVI ..... 141	CARETOUCH LUER LOCK 3ML/22GX1-1/2" ..... 158	CARMUSTINE ..... 53
CARESENS N BLOOD GLUCOSE TEST STRIPS STRP . 121	CARETOUCH LUER LOCK 3ML/23GX1" ..... 158	CARNAUBA WAX .....75
CARESENS N FELIZ BT DEVI ...141	CARETOUCH LUER LOCK 3ML/23GX1-1/2' .....158	CARNITINE (L) .....83
CARESENS N FELIZ DEVI ..... 141	CARETOUCH LUER LOCK 3ML/25GX1" ..... 158	CARNITOR SF SOLN OR (Use levocarnitine (metabolic modifiers)) 125
CARESENS N GLUCOSE MONITORING SYSTEM DEVI ... 141	CARETOUCH LUER LOCK 3ML/25GX1-1/2" ..... 158	CARNITOR SOLN OR 1 GM/10ML (Use levocarnitine (metabolic modifiers)) ..... 125
CARESENS N VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI ..... 141	CARETOUCH LUER LOCK 3ML/25GX5/8" ..... 158	CARNITOR TABS (Use levocarnitine (metabolic modifiers)) .....125
CARETOUCH BLOOD GLUCOSE MONITORING SYSTEM KIT ..... 141	CARETOUCH LUER LOCK SYRINGE/10ML .....158	CARNOSINE L ..... 75
CARETOUCH CATHETER TIP 60ML/COVER .....158	CARETOUCH LUER LOCK SYRINGE/1ML .....158	CARRAGEENAN ..... 211
CARETOUCH HYPODERMIC NEEDLE/20GX1" ..... 158	CARETOUCH LUER LOCK SYRINGE/3ML .....158	carteolol hcl (ophth) .....198

CASODEX (Use bicalutamide) ....	54	CEFAZOLIN SOLR IV .....	70	CELEBRATE MULTI-COMPLETE36 CAPS .....	188
casopfungin acetate .....	40	cefdinir CAPS .....	70	CELEBRATE MULTI-COMPLETE45 CAPS .....	188
CASPOFUNGIN ACETATE .....	40	cefdinir SUSR .....	70	CELEBRATE MULTI-COMPLETE60 CAPS .....	188
CASTOR OIL .....	96	cefepime hcl SOLR IJ 1 GM .....	70	CELEBREX (Use celecoxib) .....	8
CASTOR OIL SULFATED .....	75	CEFEPIME SOLN .....	70	CELECOXIB .....	75
CATAPRES-TTS-1 (Use clonidine) 46		CEFEPIME/DEXTROSE .....	70	celecoxib .....	8
CATAPRES-TTS-2 (Use clonidine) 46		cefixime CAPS .....	70	CELERY SEED .....	96
CATAPRES-TTS-3 (Use clonidine) 46		cefixime SUSR .....	70	CELEXA TABS 10 MG (Use citalopram hydrobromide) .....	31
CATHFLO ACTIVASE IJ .....	133	cefotetan disodium IJ 1 GM, 2 GM	70	CELEXA TABS 20 MG (Use citalopram hydrobromide) .....	31
CATNIP .....	98	CEFOXITIN SODIUM .....	70	CELEXA TABS 40 MG (Use citalopram hydrobromide) .....	31
CAVERJECT IMPULSE KIT .....	68	cefoxitin sodium IV .....	70	CELLCEPT CAPS (Use mycophenolate mofetil) .....	184
CAVERJECT SOLR .....	69	cefopodoxime proxetil SUSR .....	70	CELLCEPT SUSR (Use mycophenolate mofetil) .....	184
CEDAR LEAF OIL .....	96	cefopodoxime proxetil TABS .....	70	CELLCEPT TABS (Use mycophenolate mofetil) .....	184
CEDARWOOD OIL .....	96	cefprozil SUSR 125 MG/5ML .....	70	CELLULASE .....	75
cefaclor CAPS .....	70	cefprozil SUSR 250 MG/5ML .....	70	CELLULOSE MICROCRYSTALLINE CRYS .....	75
CEFACLOR ER TB12 .....	70	cefprozil TABS .....	70	CELLULOSE MICROCRYSTALLINE POWD .....	75
cefaclor SUSR 125 MG/5ML, 375 MG/5ML .....	70	CEFTAZIDIME .....	75	CELLULOSE PARTIALLY DEPOLYMERIZED POWD .....	75
cefadroxil CAPS .....	69	ceftazidime IV 1 GM, 2 GM, 6 GM	70	CELLULOSE/CMC NA MICROCRYSTALLINE .....	75
cefadroxil SUSR .....	69	CEFTAZIDIME/DEXTROSE .....	70	CELONTIN (Use methsuximide) ..	29
cefadroxil TABS .....	69	CEFTAZIDIME/SODIUM CARBONATE .....	75	CENTANY AT KIT .....	109
CEFAZOLIN SODIUM SOLN 4 %-1 GM/50ML .....	69	CEFTRIAOXONE SODIUM .....	75	CENTANY OINT .....	109
cefazolin sodium SOLR IJ 1 GM, 2 GM, 3 GM, 10 GM, 500 MG .....	69	ceftriaxone sodium IJ 1 GM, 250 MG, 500 MG .....	70		
CEFAZOLIN SODIUM SOLR IV 2 GM, 3 GM .....	69	ceftriaxone sodium IJ 2 GM .....	70		
CEFAZOLIN SODIUM/DEXTROSE SOLR .....	69	ceftriaxone sodium in dextrose ...	70		
CEFAZOLIN SOLN .....	69	CEFTRIAOXONE/DEXTROSE .....	70		
		cefuroxime axetil TABS .....	70		
		cefuroxime sodium IJ 750 MG .....	70		
		CELEBRATE MULTI-COMPLETE18 CAPS .....	188		

CENTRATEX CAPS .....	133	MG-90.314 MG .....	122	CHEMET .....	38
cephalexin CAPS 250 MG, 500 MG 70		CERESIN WAX .....	75	CHEMSIL K-12 .....	212
cephalexin CAPS 750 MG .....	70	CEREZYME 400 UNIT .....	133	CHEMSIL K-51 .....	212
cephalexin SUSR .....	70	CERVIDIL INST .....	203	CHEMSTRIP BG LOG BOOK MISC . 141	
cephalexin TABS .....	70	CESIUM CHLORIDE .....	75	CHEMSTRIP MICRAL STRP .....	121
CEQUA SOLN .....	200	CETEARYL ALCOHOL/CETEARETH-20 .....	75	CHEMSTRIP-K STRP .....	121
CEQUR SIMPLICITY 2U DEVI ...	158	cetirizine hcl CHEW .....	42	CHERRY FLAVOR LIQD .....	207
CEQUR SIMPLICITY INSERTER MISC .....	158	cetirizine hcl SOLN OR 5 MG/5ML	42	CHERRY-ADE FLAVOR POWD .	207
CEQUR SIMPLICITY STARTERKIT KIT .....	158	cetirizine hcl SOLN OR .....	42	CHEW-HESIVE .....	213
CERALYTE 50 PACK .....	181	cetirizine hcl TABS 5 MG .....	42	CHICKEN (GRILLED) FLAVOR LIQD .....	207
CERALYTE 50 POTASSIUM FREE PACK .....	181	cetirizine hcl TABS .....	42	CHICKEN BROTH FLAVOR SPRAY DRIED POWD .....	207
CERALYTE 70 PACK .....	181	cetirizine-pseudoephedrine .....	104	CHICKEN CONC FLAVOR LIQD	207
CERALYTE 70 POTASSIUM FREE PACK .....	181	CETOSTEARYL ALCOHOL .....	75	CHICKEN FLAVOR LIQD .....	207
CERALYTE 70 SOLN .....	181	CETRAXAL (Use ciprofloxacin hcl (otic)) .....	203	CHICKEN FLAVOR OIL SOLUBLE LIQD .....	207
CERALYTE 90 PACK .....	181	CETYL ALCOHOL FLAK .....	211	CHICKEN FLAVOR POWD .....	207
CERAORS 75 NATURAL PACK .	181	CETYL ALCOHOL POWD .....	211	CHICKEN FLAVOR WATER MISCIBLE LIQD .....	207
CERAPHYL SLK .....	82	CETYL ESTERS WAX .....	90	CHICKEN PROTEIN .....	75
CERASPORT ENDURANCE PACK 181		CETYL MYRISTOLEATE OIL .....	75	CHICKEN ROASTED CONCENTRATE LIQD .....	207
CERASPORT EX1 PACK .....	181	CETYL MYRISTOLEATE POWD ..	75	CHLORAL HYDRATE CRYSTALS .....	136
CERASPORT EX1 SOLN .....	181	CETYL MYRISTOLEATE WAX ...	75	CHLORAMBUCIL .....	75
CERASPORT PACK .....	181	CETYLCIDE-G CONC .....	60	CHLORAMPHENICOL PALMITATE . 75	
CERASPORT PLUS PACK .....	181	CETYLPYRIDINIUM CHLORIDE .	75	CHLORAMPHENICOL POWD ....	75
CERASPORT SOLN .....	181	CETYLPYRIDINIUM CHLORIDEMONOHYDRATE .....	75	chloramphenicol sodium succinate 50	
CERDELGA .....	133	cevimeline hcl .....	188	chlordiazepoxide hcl CAPS .....	19
CEREFOLIN .....	122	CHARCOAL ACTIVATED POWD .	39	chlordiazepoxide hcl-clidinium	
CEREFOLIN NAC 600 MG-2 MG-6		CHARCOAL POWD .....	39		
		CHEESE-ADE FLAVOR POWD .	207		
		CHEESECAKE FLAVOR LIQD ..	207		

bromide .....	221	chlorpromazine hcl TABS 10 MG ..59	cholestyramine light POWD .....	43
chlordiazepoxide-amitriptyline ...	215	chlorpromazine hcl TABS 25 MG, 50	cholestyramine PACK .....	43
CHLORHEXIDINE DIACETATE		MG, 100 MG, 200 MG .....	cholestyramine POWD .....	43
HYDRATE .....	75	chlorthalidone 25 MG, 50 MG ....	CHOLESTYRAMINE RESIN .....	76
chlorhexidine gluconate (mouth-		chlorzoxazone TABS 375 MG, 500	CHOLINE BITARTRATE CRYSTALS ..	196
throat) .....	187	MG, 750 MG .....	CHOLINE BITARTRATE POWD ..	196
CHLORHEXIDINE GLUCONATE ..	96	chlorzoxazone TABS 375 MG, 750	CHOLINE CHLORIDE .....	76
chlorhexidine gluconate SOLN EX	60	MG .....	choline fenofibrate .....	44
CHLOROACETIC ACID POWD ..	113	chlorzoxazone TABS .....	CHOLINE MAGNESIUM	
CHLOROBUTANOL ANHYDROUS		193	TRISALICYLATE .....	76
POWD .....	205	CHOCOLATE CONCENTRATE		
CHLOROBUTANOL CRYSTALS .....	205	CONC .....		
CHLOROBUTANOL POWD .....	205	CHOCOLATE FLAVOR LIQD ....		
CHLOROFORM .....	96	207	CHONDROITIN SULFATE SODIUM	
CHLOROPHYLLIN SODIUM		CHOCOLATE FLAVOR POWD ..	76	
COPPER .....	75	207	CHORIONIC GONADOTROPIN ..	76
chlorprocaine hcl IJ .....	139	CHOCOLATE HAZELNUT FLAVOR	CHORIONIC	
CHLOROQUINE PHOSPHATE		LIQD .....	GONADOTROPIN(HUMAN) .....	76
POWD .....	51	207	chromic chloride .....	184
chloroquine phosphate TABS 250		CHOCOLATE NATURAL &	CHROMIC CHLORIDE CRYSTALS ....	76
MG .....	51	ARTIFICIAL FLAVOR CONC .....	CHROMIUM CHLORIDE	
chloroquine phosphate TABS 500		207	HEXAHYDRATE REAGENT CRYSTALS	
MG .....	51	CHOICEFUL MULTIVITAMIN CAPS .	76	
CHLOROTHIAZIDE .....	75	188	CHROMIUM CHLORIDE POWD ..	76
chlorothiazide sodium .....	124	cholecalciferol CAPS 1.25 MG, 1.25	CHROMIUM PICOLINATE .....	76
CHLOROXINE .....	75	MG, 50000 UNIT .....	CHROMIUM POLYNICOTINATE ..	76
CHLOROXYLENOL .....	75	228	CHROMIUM POTASSIUM SULFATE	
CHLORPHENIRAMINE MALEATE		cholecalciferol CAPS 125 MCG, 5000	DODECAHYDRATE .....	76
POWD .....	41	UNIT .....	CHRYSIN .....	76
chlorpheniramine maleate SYRP ..	41	228	CHYMOTRYPSIN ALPHA .....	184
CHLORPROMAZINE HCL .....	75	cholecalciferol CAPS 25 MCG, 50	CIALIS (Use tadalafil) .....	69
chlorpromazine hcl CONC .....	59	MCG, 1000 UNIT, 2000 UNIT ....	CIBINQO .....	117
chlorpromazine hcl SOLN .....	59	228	CICLOPIROX .....	76
		CHOLECALCIFEROL CRYSTALS .....	ciclopirox GEL .....	109
		75	ciclopirox KIT .....	109
		CHOLECALCIFEROL POWD .....		
		75		
		CHOLESTEROL & LIPID TEST ..		
		121		
		CHOLESTEROL ACETATE POWD		
		75		
		CHOLESTEROL FLAK .....		
		75		
		CHOLESTEROL POWD .....		
		76		
		CHOLESTYRAMINE .....		
		76		
		cholestyramine light PACK .....		
		43		

ciclopirox olamine CREA .....	109	ciprofloxacin hcl (ophth) SOLN ...	200	CITRIC ACID ANHYDROUS POWD .	98
CICLOPIROX OLAMINE POWD .	109	ciprofloxacin hcl (otic) .....	203	CITRIC ACID MONOHYDRATE	
ciclopirox olamine SUSP .....	109	CIPROFLOXACIN HCL .....	76	GRAN .....	98
ciclopirox SHAM .....	109	ciprofloxacin hcl TABS 100 MG ..	127	CITRIC ACID MONOHYDRATE	
ciclopirox SOLN .....	109	ciprofloxacin hcl TABS 250 MG, 500		POWD .....	98
CIDATRINE-TM TABS .....	17	MG, 750 MG .....	127	CITRIC ACID POWD .....	98
cidofovir .....	63	CIPROFLOXACIN		CITRONELLA OIL .....	96
CIDOFOVIR ANHYDROUS .....	76	HYDROCHLORIDE .....	76	CITRULLINE(L) .....	76
CIDOFOVIR DIHYDRATE .....	76	ciprofloxacin in d5w .....	127	CITRUS BIOFLAVONOIDS 13 % .	76
cilostazol .....	132	ciprofloxacin SUSR 5 GM/100ML,		CLARINEX TABS (Use	
CILOXAN OINT .....	200	500 MG/5ML .....	127	desloratadine) .....	42
CIMDUO .....	60	ciprofloxacin-dexamethasone ...	203	CLARINEX-D 12 HOUR TB12 ...	104
cimetidine hcl OR 300 MG/5ML ..	221	ciprofloxacin-fluocinolone acetone .	203	CLARITHROMYCIN .....	76
CIMETIDINE POWD .....	221	CIRCATA CREA .....	118	clarithromycin SUSR 125 MG/5ML	140
cimetidine TABS 400 MG .....	221	CISAPRIDE MONOHYDRATE ...	76	clarithromycin SUSR 250 MG/5ML	140
cimetidine TABS .....	221	cisatracurium besylate SOLN ....	195	clarithromycin TABS .....	140
CIMZIA KIT .....	128	CISPLATIN .....	76	clarithromycin TB24 .....	140
CIMZIA PSKT .....	128	CITALOPRAM HYDROBROMIDE		CLARITIN-D 12 HOUR TB12 (Use	
CIMZIA STARTER KIT PSKT ....	128	CAPS .....	31	loratadine & pseudoephedrine) ...	104
CINNAMON BARK CASSIA .....	76	citalopram hydrobromide SOLN ...	31	CLEMASTINE FUMARATE POWD	42
CINNAMON FLAVOR OIL .....	207	citalopram hydrobromide TABS 10		42	
CINNAMON OIL .....	96	MG .....	31	clemastine fumarate SYRP .....	42
CINNAMON OIL ARTIFICIAL .....	96	citalopram hydrobromide TABS 20		clemastine fumarate TABS 2.68 MG .	42
CINRYZE SOLR IV .....	132	MG .....	31	CLEMIZOLE HCL .....	76
CIPRO HC .....	203	citalopram hydrobromide TABS 40		CLENIA PLUS SUSP .....	107
CIPRO SUSR .....	127	MG .....	31	CLENPIQ SOLN 12 GM/175ML-3.5	
CIPRO TABS 250 MG, 500 MG (Use		CITICOLINE .....	76	GM/175ML-10 MG/175ML .....	137
ciprofloxacin hcl) .....	127	CITRANATAL B-CALM 120 MG-25		CLEOCIN (Use clindamycin hcl) ..	50
CIPRODEX (Use ciprofloxacin-		MG-1 MG-400 UNIT-120 MG-20 MG	191	CLEOCIN CREA (Use clindamycin	
dexamethasone) .....	203	191		phosphate vaginal) .....	226
CIPROFLOXACIN .....	76	CITRANATAL MEDLEY .....	191		



CLEOCIN PEDIATRIC GRANULES (Use clindamycin palmitate hydrochloride) .....	51	CLINDAGEL GEL (Use clindamycin phosphate (topical)) .....	107	clindamycin phosphate-tretinoin .	107
CLEOCIN PHOSPHATE SOLN IJ	.51	CLINDAMYCIN HCL .....	76	CLINDESSE .....	226
CLEOCIN SUPP .....	226	clindamycin hcl 150 MG, 300 MG .	51	CLINIMIX 4.25%/DEXTROSE 10%	197
CLEOCIN-T LOTN (Use clindamycin phosphate (topical)) .....	107	clindamycin hcl 75 MG .....	51	CLINIMIX 4.25%/DEXTROSE 5%	197
CLEVER CHEK AUTO CODE VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	142	CLINDAMYCIN HCL MONOHYDRATE .....	76	CLINIMIX 5%/DEXTROSE 15% .	197
CLEVER CHEK AUTO-CODE BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	142	CLINDAMYCIN HYDROCHLORIDE .	76	CLINIMIX 5%/DEXTROSE 20% .	197
CLEVER CHEK AUTO-CODE BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	142	clindamycin palmitate hydrochloride .	51	CLINIMIX 6/5 .....	197
CLEVER CHEK AUTO-CODE VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	142	clindamycin phosphate (topical) FOAM .....	107	CLINIMIX 8/10 .....	197
CLEVER CHEK BLOOD GLUCOSE MONITORING SYSTEM KIT .....	142	clindamycin phosphate (topical) GEL	107	CLINIMIX 8/14 .....	197
CLEVER CHOICE AUTO-CODE PRO BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	142	clindamycin phosphate (topical) LOTN .....	107	CLINIMIX E 2.75%/DEXTROSE 5% .	197
CLEVER CHOICE MICRO BLOODGLUCOSE MONITORING SYSTEM KIT .....	142	clindamycin phosphate (topical) SOLN .....	107	CLINIMIX E 4.25%/DEXTROSE 10%	197
CLEVER CHOICE MINI BLOODGLUCOSE MONITORING SYSTEM DEVI .....	142	clindamycin phosphate (topical) SWAB .....	107	CLINIMIX E 4.25%/DEXTROSE 5% .	197
CLEVER CHOICE TALK BLOODGLUCOSE MONITORING SYSTEM DEVI .....	142	clindamycin phosphate in d5w ....	51	CLINIMIX E 5%/DEXTROSE 15%	197
CLEVIPREX 25 MG/50ML, 50 MG/100ML .....	66	CLINDAMYCIN PHOSPHATE POWD .....	76	CLINIMIX E 5%/DEXTROSE 20%	197
CLIDINIUM BROMIDE .....	76	clindamycin phosphate SOLN IJ 9 GM/60ML, 300 MG/2ML, 600 MG/4ML, 900 MG/6ML, 9000 MG/60ML .....	51	CLINIMIX E 8/10 .....	197
CLIMARA PRO .....	126	clindamycin phosphate vaginal CREA	226	CLINIMIX E 8/14 .....	197
CLIMARA PTWK (Use estradiol) .	126	clindamycin phosphate-benzoyl peroxide (refrigerate) .....	107	CLINISTIX KIDNEY HEALTH ...	121
CLINDACIN ETZ .....	107	clindamycin phosphate-benzoyl peroxide GEL 5 %-1 % .....	107	CLINOLIPID .....	196
CLINDACIN PAC .....	107	clindamycin phosphate-benzoyl peroxide GEL .....	107	CLIOQUINOL POWD .....	109
				clobazam SUSP .....	25
				clobazam TABS .....	25
				CLOBETASOL 17 PROPIONATE POWD .....	114
				clobetasol propionate CREA 0.05 % .	114
				clobetasol propionate emollient base	

0.05 %	114	clonidine	46	clozapine TABS 25 MG, 50 MG, 200 MG	58
clobetasol propionate emulsion	114	clonidine hcl (adhd) TB12	2	clozapine TBDP	58
clobetasol propionate FOAM	114	clonidine hcl (analgesia) EP	10	CLOZARIL TABS 100 MG (Use clozapine)	58
clobetasol propionate GEL 0.05 %	114	CLONIDINE HCL POWD	46	CLOZARIL TABS 25 MG, 50 MG, 200 MG (Use clozapine)	58
clobetasol propionate LIQD	114	clonidine hcl TABS	46	C-NATE DHA CAPS	191
clobetasol propionate LOTN	114	clonidine hcl TB24	46	coal tar extract SHAM 0.5 %	120
CLOBETASOL PROPIONATE MICRONIZED POWD	114	CLONIDINE HYDROCHLORIDE POWD	46	COAL TAR LIQD	97
CLOBETASOL PROPIONATE MICRONIZED USP POWD	114	CLONIDINE HYDROCHLORIDE XX . 10	46	COAL TAR SOLN	97
clobetasol propionate OINT 0.05 %	114	CLOPIDOGREL BISULFATE	76	COAL TAR TAR	97
CLOBETASOL PROPIONATE POWD	114	clopidogrel bisulfate 300 MG	132	COARTEM	51
clobetasol propionate SHAM	114	clopidogrel bisulfate 75 MG	132	COBALT GLUCONATE	76
clobetasol propionate SOLN 0.05 %	114	clorazepate dipotassium TABS	19	COBAMAMIDE	76
clocortolone pivalate	114	COLOROTEKAL IT	139	COCAINE HCL POWD	118
CLODAN KIT	114	CLORPACTIN WCS-90	60	COCAINE HYDROCHLORIDE	194
CLODERM (Use clocortolone pivalate)	114	CLORSULON	76	COCAMIDE DEA	76
clofarabine	53	clotrimazole (topical) CREA	109	COCOA BUTTER CREA	211
CLOFAZIMINE	76	clotrimazole (topical) SOLN	109	COCOA BUTTER DEODORIZED MISC	211
CLOLAR (Use clofarabine)	53	clotrimazole	187	COCOA BUTTER MISC	211
CLOMIPHENE CITRATE POWD	125	CLOTRIMAZOLE CRYSTALS	109	COCONUT FLAVOR LIQD	207
CLOMIPRAMINE HCL	76	CLOTRIMAZOLE POWD	110	COCONUT OIL	96
clomipramine hcl 25 MG, 50 MG	33	clotrimazole vaginal CREA 1 %	226	CODEINE PHOSPHATE POWD	11
clomipramine hcl 75 MG	33	clotrimazole vaginal CREA 2 %	226	codeine sulfate TABS 30 MG	11
CLONAZEPAM	76	clotrimazole w/ betamethasone CREA	109	CODEINE SULFATE TABS	11
clonazepam TABS	25	clotrimazole w/ betamethasone LOTN	109	CO-ENZYME Q 10	98
clonazepam TBDP	25	CLOVAGEL	213	COENZYME Q10	98
		CLOVE OIL	96	COFFEE FLAVOR LIQD	207
		clozapine TABS 100 MG	58	COLA FLAVOR LIQD	207

COLACE CAPS 100 MG (Use docusate sodium) .....	138	COLLODION .....	210	KIT .....	142
COLACE CLEAR CAPS (Use docusate sodium) .....	138	COLY-MYCIN M (Use colistimethate sodium) .....	51	CONTOUR NEXT GEN BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	142
COLAZAL CAPS (Use balsalazide disodium) .....	128	COMBIGAN (Use brimonidine tartrate-timolol maleate) .....	198	CONTOUR NEXT GEN BLOOD GLUCOSE MONITORING SYSTEM KIT .....	142
colchicine CAPS .....	131	COMBIPATCH PTTW .....	126	CONTOUR NEXT LINK 2.4 WIRELESS BLOOD GLUCOSE MONITORING SYST KIT .....	142
COLCHICINE POWD .....	131	COMBIVENT RESPIMAT AERS ..	22	CONTOUR NEXT LINK BLOOD GLUCOSE MONITORING SYSTEM KIT .....	142
colchicine TABS .....	131	COMBIVIR (Use lamivudine-zidovudine) .....	60	CONTOUR NEXT LINK WIRELESS BLOOD GLUCOSE MONITORING SY KIT .....	142
colchicine w/ probenecid .....	131	COMBOGESIC SOLN .....	8	CONTOUR NEXT ONE BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	142
COLCRYS TABS (Use colchicine) 131		COMIRNATY 2023-24 SUSP ....	224	CONTOUR PLUS BLOOD GLUCOSE TEST STRIPS STRP ..	121
colesevelam hcl PACK .....	43	COMIRNATY 2023-24 SUSY ....	224	CONTOUR PLUS BLUE BLOOD GLUCOSE MONITORING SYSTEM KIT .....	142
colesevelam hcl TABS .....	43	COMIRNATY SUSP .....	224	CONZIP CP24 (Use tramadol hcl) ..	11
COLESTID FLAVORED GRAN (Use colestipol hcl) .....	43	COMPLERA .....	60	COOL BLOOD GLUCOSE MONITORING KIT KIT .....	142
COLESTID FLAVORED PACK (Use colestipol hcl) .....	43	COMPLETE NATAL DHA .....	191	COOL BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	142
COLESTID GRAN (Use colestipol hcl) .....	43	COMTAN (Use entacapone) .....	56	COPASIL GEL .....	90
COLESTID PACK (Use colestipol hcl) .....	43	CONCEPT DHA .....	191	COPAXONE SOSY 20 MG/ML (Use glatiramer acetate) .....	216
COLESTID TABS (Use colestipol hcl) .....	43	CONCERTA TBCR 18 MG, 27 MG, 54 MG (Use methylphenidate hcl) ..	3	COPAXONE SOSY 40 MG/ML (Use glatiramer acetate) .....	216
colestipol hcl GRAN .....	43	CONCERTA TBCR 36 MG (Use methylphenidate hcl) .....	3	COPPER GLUCONATE .....	76
colestipol hcl PACK .....	43	CONDYLOX GEL (Use podofilox) 118		COPPER GLYCINATE .....	76
colestipol hcl TABS .....	43	CONJUPRI (Use levamlodipine maleate) .....	66	COPPER SULFATE CRYSTALS .....	184
COLHIBIN .....	76	CONTOUR BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	142		
colistimethate sodium .....	51	CONTOUR BLOOD GLUCOSE MONITORING SYSTEM KIT .....	142		
COLISTIMETHATE SODIUM .....	76	CONTOUR NEXT BLOOD GLUCOSE MONITORING SYSTEM KIT .....	142		
COLLAGEN HYDROLYSATE .....	76				
COLLAGENASE POWD .....	117				
COLLASIL OSA POWD .....	211				

CORAL CALCIUM .....	76	COSOPT PF (Use dorzolamide hcl- timolol maleate) .....	198	calcium) .....	44
COREG 25 MG (Use carvedilol) ...	64	COTTON CANDY FLAVOR LIQD 207		CREXONT CPRC .....	56
COREG 3.125 MG, 12.5 MG (Use carvedilol) .....	64	COTTONSEED OIL .....	96	CRINONE GEL .....	227
COREG 3.125 MG, 6.25 MG, 12.5 MG (Use carvedilol) .....	64	COUGH AND CHEST CONGESTION DM COUGH SYRUP SYRP .....	104	cromolyn sodium (mastocytosis)	128
COREG CR (Use carvedilol phosphate) .....	64	COUMARIN .....	76	cromolyn sodium (nasal) 5.2 MG/ACT .....	194
CORGARD TABS 20 MG, 40 MG (Use nadolol) .....	65	COZAAR (Use losartan potassium) 46		cromolyn sodium (ophth) .....	202
CORGARD TABS 80 MG (Use nadolol) .....	65	COZIMA CREA .....	119	cromolyn sodium NEBU .....	20
CORLANOR SOLN .....	69	CRANBERRY .....	76	CROMOLYN SODIUM POWD ....	20
CORN OIL .....	76	CRAN-RASPBERRY FLAVOR LIQD . 207		CRONO SYRINGE .....	158
CORN STARCH .....	98	CREATINE .....	76	CROSCARMELOSE SODIUM POWD .....	98
CORTEF TABS (Use hydrocortisone) .....	102	CREATINE ANHYDROUS .....	76	CROTAMITON .....	77
CORTENEMA (Use hydrocortisone (intrarectal)) .....	17	CREATINE MONOHYDRATE ....	76	crotamiton LOTN .....	119
CORTIFOAM EX 10 % .....	17	CREATININE .....	76	CROTON OIL .....	77
CORTISONE ACETATE POWD .	102	CREME DE MENTHE FLAVOR LIQD .....	207	CRYOSERV .....	96
CORTISONE ACETATE TABS ...	102	CREME DE MENTHE FLAVOR OIL . 208		CUBICIN RF (Use daptomycin) ...	50
CORTISPORIN-TC .....	203	CREME DEMENTHE FLAVOR LIQD 208		CUCUMBER MELON .....	71
CORVITE 150 TABS .....	133	CREME OS LIQD .....	208	cupric chloride .....	184
CORVITE FE TABS .....	133	CREON CPEP 30000 UNIT-19000 UNIT-6000 UNIT, 60000 UNIT-38000 UNIT-12000 UNIT .....	123	CUPRIC SULFATE PENTAHYDRATE GRAN .....	184
COSELA .....	55	CREON CPEP .....	123	CUPRIC SULFATE POWD .....	184
COSENTYX SENSOREADY PEN SOAJ .....	111	CRESEMBA CAPS .....	41	CUPUACU BUTTER .....	77
COSENTYX SOSY .....	111	CRESEMBA SOLR .....	41	CURCUMIN .....	93
COSMEGEN (Use dactinomycin) .	54	CRESOL .....	77	CURCUMIN EXTRACT .....	93
COSMOCIL CQ LIQD .....	87	CRESTOR TABS (Use rosuvastatin		CUROSURF TR 120 MG/1.5ML, 240 MG/3ML .....	218
COSOPT (Use dorzolamide hcl- timolol maleate) .....	198			CUSTOM POLYGLYCOL TROCHEBASE WAX .....	210

METER KIT .....	142	cyclopentolate hcl 0.5 %, 1 % .....	199	CYMBALTA CPEP (Use duloxetine hcl) .....	32
CVS EPSOM SALT GRAN XX ...	138	cyclopentolate hcl 2 % .....	199	CYPROHEPTADINE HCL .....	77
CVS EYE HEALTH ADULT 50+ CAPS .....	188	CYCLOPENTOLATE HYDROCHLORIDE .....	77	cyproheptadine hcl SYRP .....	43
CVS IMMUNE SUPPORT CAPS ..	188	CYCLOPHOSPHAMIDE .....	77	cyproheptadine hcl TABS .....	43
CVS SLEEP SUPPORT CHEW ..	185	cyclophosphamide CAPS .....	53	CYSTADROPS .....	202
CVS TRUE METRIX BLOOD GLUCOSE TEST STRIPS STRP ..	121	CYCLOPHOSPHAMIDE MONOHYDRATE .....	77	CYSTEAMINE HCL .....	77
CVS VISION HEALTH CAPS ....	188	CYCLOPHOSPHAMIDE SOLN ...	53	CYSTEAMINE HYDROCHLORIDE	77
CYANOCOBALAMIN CRYSTALS .....	77	cyclophosphamide SOLN IJ .....	53	CYTOMEL TABS (Use liothyronine sodium) .....	220
CYANOCOBALAMIN POWDER .....	77	CYCLOPHOSPHAMIDE TABS ...	53	CYTOTEC (Use misoprostol) ....	223
cyanocobalamin SOLN IJ 1000 MCG/ML .....	133	cycloserine .....	52	dabigatran etexilate mesylate CAPS .	25
cyanocobalamin SOLN NA 500 MCG/0.1ML .....	133	CYCLOSERINE .....	77	dacarbazine SOLR .....	55
CYCLANDELATE .....	77	CYCLOSET .....	35	dactinomycin .....	54
CYCLOBENZAPRINE HCL .....	77	cyclosporine (ophth) EMUL .....	201	DAILY MOISTURIZER .....	213
cyclobenzaprine hcl CP24 .....	193	CYCLOSPORINE .....	77	DAILY MULTIPLE VITAMINS TABS .	190
cyclobenzaprine hcl TABS 5 MG, 10 MG .....	193	CYCLOSPORINE A .....	77	DALFAMPRIDINE .....	80
cyclobenzaprine hcl TABS 7.5 MG 193		cyclosporine CAPS .....	184	DALIRESP (Use roflumilast) .....	21
CYCLOBENZAPRINE HYDROCHLORIDE .....	77	cyclosporine modified (for microemulsion) CAPS 25 MG, 100 MG .....	184	DALVANCE .....	50
CYCLOGYL (Use cyclopentolate hcl) .....	199	cyclosporine modified (for microemulsion) CAPS .....	184	danazol CAPS .....	16
CYCLOGYL 0.5 % .....	199	cyclosporine modified (for microemulsion) SOLN .....	184	DANAZOL POWD .....	16
CYCLOGYL 2 % .....	199	cyclosporine SOLN IV 50 MG/ML	184	DANTRIUM CAPS 25 MG (Use dantrolene sodium) .....	193
CYCLOMETHICONE .....	77	CYLTEZO AJKT .....	6	DANTROLENE SODIUM .....	77
CYCLOMYDRIL .....	199	CYLTEZO PSKT .....	6	dantrolene sodium CAPS .....	193
CYCLOPENTASILOXANE/PEG/PPG -18/18 DIMETHICONE .....	77	CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS AJKT .....	6	dantrolene sodium SOLR .....	193
CYCLOPENTOLATE HCL .....	77	CYLTEZO STARTER PACKAGE FOR PSORIASIS AJKT .....	6	DANYELZA .....	53
				dapagliflozin propanediol .....	37
				dapagliflozin propanediol-metformin	

hcl .....	34	DECUBI-VITE CAPS .....	188	DELSYM SUER (Use dextromethorphan polistirex) .....	104
DAPIPRAZOLE HCL .....	77	DEFENCATH .....	25	DELZICOL CPDR (Use mesalamine) 128	
dapsone (topical) .....	107	deferasirox PACK .....	38	DEMECARIUM BROMIDE .....	78
dapsone (topical) 7.5 % .....	107	deferasirox TABS .....	38	demeclocycline hcl TABS .....	219
dapsone .....	50	deferasirox TBSO .....	38	DEMEROL SOLN IJ .....	11
DAPSONE .....	77	deferiprone TABS .....	38	DENATONIUM BENZOATE .....	78
DAPTACEL .....	220	DEFINITY .....	122	DENAVIR (Use penciclovir) .....	113
daptomycin .....	50	DEFINITY RT .....	122	DENGVAXIA .....	224
DAPTOMYCIN .....	50	deflazacort TABS 36 MG .....	102	DENTA 5000 PLUS SENSITIVE PSTE .....	187
DAPTOMYCIN/SODIUM CHLORIDE .....	50	deflazacort TABS 6 MG, 18 MG, 30 MG .....	102	DEOXYCHOLIC ACID .....	78
darifenacin hydrobromide .....	223	DEFLUX METAL NEEDLE/23G X350MM .....	158	DEOXYCHOLIC ACID SODIUM ..	90
DARTISLA ODT TBDP .....	221	DEHYDRATED ALCOHOL .....	210	DEPAKOTE ER TB24 250 MG (Use divalproex sodium) .....	29
darunavir TABS 600 MG .....	60	DEHYDROCHOLIC ACID .....	78	DEPAKOTE ER TB24 500 MG (Use divalproex sodium) .....	29
darunavir TABS 800 MG .....	60	DEHYDROEPIANDROSTERONE MICRONIZED .....	98	DEPAKOTE SPRINKLES CSDR (Use divalproex sodium) .....	29
DAVIMET/FLUORIDE CHEW .....	191	DEHYDROEPIANDROSTERONE POWD .....	98	DEPAKOTE TBEC 125 MG (Use divalproex sodium) .....	29
DAVIMET/IRON CHEW .....	188	DEKAS PLUS CAPS .....	189	DEPAKOTE TBEC 250 MG (Use divalproex sodium) .....	29
DAVIMET-M CHEW .....	190	DEKAS PLUS OCEAN CAPS ....	189	DEPAKOTE TBEC 500 MG (Use divalproex sodium) .....	29
DAYPRO TABS (Use oxaprozin) ...	8	DELFLX-LC/1.5% DEXTROSE	186	DEPEN TITRATABS TABS (Use penicillamine) .....	184
DAYTRANA PTCH (Use methylphenidate) .....	3	DELFLX-LC/2.5% DEXTROSE	186	DEPO-ESTRADIOL .....	126
DAYVIGO .....	137	DELFLX-LC/4.25% DEXTROSE	186	DEPO-MEDROL SUSP .....	102
D-CARE GLUCOMETER KIT/GLUCOSE TEST STRIPS KIT 142		DELFLX-SM/1.5% DEXTROSE	186	DEPO-PROVERA CONTRACEPTIVE SUSP IM (Use medroxyprogesterone acetate (contraceptive)) .....	102
DDAVP TABS (Use desmopressin acetate) .....	126	DELFLX-SM/2.5% DEXTROSE	186		
DEBROX 6.5 % (Use carbamide peroxide (otic)) .....	203	DELSTRIGO .....	60		
DECARA CAPS .....	228	DELSYM COUGH CHILDRENS SUER (Use dextromethorphan polistirex) .....	104		
DECONEX DMX TABS 10 MG-400 MG-17.5 MG .....	104				

DEPO-PROVERA CONTRACEPTIVE SUSY IM (Use medroxyprogesterone acetate (contraceptive)) .....102	desmopressin acetate spray .....126	DEVILS CLAW .....78
DEPO-SUBQ PROVERA 104 SUSY SC .....102	desmopressin acetate spray refrigerated .....126	DEXAMETHASONE .....78
DERMACINRX CIRCATRIX CREA 118	desmopressin acetate TABS .....126	DEXAMETHASONE ACETATE ...78
DERMACINRX DAVIMET CHEW 190	desogestrel & ethinyl estradiol ...100	DEXAMETHASONE ACETATE ANHYDROUS .....78
DERMACINRX DOTREMIN TABS 133	desogestrel-ethinyl estradiol (biphasic) .....100	DEXAMETHASONE BASE .....78
DERMACINRX ETHOXY DIGLYCOL .....77	desogestrel-ethinyl estradiol (triphasic) .....100	dexamethasone ELIX .....102
DERMACINRX FOLTAMIN TABS 133	desonide CREA .....114	DEXAMETHASONE INTENSOL CONC .....102
DERMACINRX PRETRATE TABS 191	desonide LOTN .....114	DEXAMETHASONE ISONICOTINATE .....78
DERMASHIELD HYDROGEL ...213	desonide OINT .....114	dexamethasone sodium phosphate (ophth) .....201
DERMA-SMOOTH/FS BODY OIL (Use fluocinolone acetonide) .....114	DESONIDE POWD .....114	DEXAMETHASONE SODIUM PHOSPHATE .....78
DERMA-SMOOTH/FS SCALP OIL (Use fluocinolone acetonide) .....114	DESOXIMETASONE .....78	dexamethasone sodium phosphate SOLN IJ 10 MG/ML, 100 MG/10ML 102
DERMOTIC (Use fluocinolone acetonide (otic)) .....203	desoximetasone CREA 0.25 % ...114	DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 10 MG/ML 102
DESCOVY .....61	desoximetasone CREA .....114	dexamethasone sodium phosphate SOLN IJ 4 MG/ML, 20 MG/5ML, 120 MG/30ML .....102
desflurane .....130	desoximetasone GEL .....114	DEXAMETHASONE SODIUM PHOSPHATE SOLN IJ 4 MG/ML 102
DESICCATED BEEF LIVER .....78	desoximetasone LIQD .....114	dexamethasone sodium phosphate SOSY IJ 10 MG/ML .....102
DESIPRAMINE HCL POWD .....33	desoximetasone OINT 0.05 % ...114	dexamethasone sodium phosphate SOSY IJ 4 MG/ML .....102
desipramine hcl TABS 10 MG, 50 MG, 75 MG, 100 MG, 150 MG ....33	desoximetasone OINT .....114	dexamethasone SOLN .....102
desipramine hcl TABS 25 MG .....33	DESOXYCORTICOSTERONE ACETATE .....78	dexamethasone TABS 1.5 MG ...102
desloratadine TABS .....42	DESVENLAFAXINE ER .....32	dexamethasone TABS .....102
desloratadine TBDP .....42	DESVENLAFAXINE ER 100 MG ..32	dexamethasone TBPK .....102
DESMOPRESSIN ACETATE .....78	desvenlafaxine succinate 100 MG .32	DEXATRAN CAPS .....189
	desvenlafaxine succinate 25 MG, 50 MG .....32	
	DETROL LA CP24 (Use tolterodine tartrate) .....223	
	DETROL TABS (Use tolterodine tartrate) .....223	
	DETROL TABS 2 MG (Use tolterodine tartrate) .....223	

DEXCHLORPHENIRAMINE MALEATE .....	78	MG, 15 MG .....	1	10 MG/5ML, 200 MG/10ML-20 MG/10ML .....	105
dexchlorpheniramine maleate SOLN . 41		dextroamphetamine sulfate CP24 5 MG .....	1	dextromethorphan-guaifenesin TB12 600 MG-30 MG .....	105
DEXCOM G6 RECEIVER .....	142	dextroamphetamine sulfate SOLN . . 1		dextromethorphan-phenylephrine- acetaminophen CAPS .....	105
DEXCOM G6 SENSOR .....	142	dextroamphetamine sulfate TABS 15 MG, 20 MG, 30 MG .....	1	DEXTROSE 5%/ELECTROLYTE #48 VIAFLEX .....	181
DEXCOM G6 TRANSMITTER ...	143	dextroamphetamine sulfate TABS 2.5 MG, 7.5 MG, 15 MG, 20 MG, 30 MG . 1		DEXTROSE 10%/SODIUM CHLORIDE 0.2% .....	181
DEXCOM G7 RECEIVER .....	143	dextroamphetamine sulfate TABS 5 MG, 10 MG .....	1	DEXTROSE 30% SOLN .....	196
DEXCOM G7 SENSOR .....	143	DEXTROMETHORPHAN .....	78	DEXTROSE ANHYDROUS GRAN 196	
DEXEDRINE CP24 10 MG, 15 MG (Use dextroamphetamine sulfate) ...	1	DEXTROMETHORPHAN HBR MONOHYDRATE CRYST .....	104	DEXTROSE ANHYDROUS POWD 196	
DEXILANT (Use dexlansoprazole) 222		DEXTROMETHORPHAN HBR MONOHYDRATE POWD .....	104	dextrose in lactated ringers .....	181
dexlansoprazole .....	222	DEXTROMETHORPHAN HBR MONOHYDRATE POWD .....	104	DEXTROSE MONOHYDRATE POWD .....	196
dexmedetomidine hcl in sodium chloride SOLN .....	136	dextromethorphan polistirex LQCR 104		DEXTROSE POWD .....	196
dexmedetomidine hcl SOLN .....	136	dextromethorphan polistirex SUER 104		dextrose SOLN 5 %, 10 %, 50 %, 70 %, 250 MG/ML .....	196
DEXMEDETOMIDINE HCL SOLN 136		dextromethorphan-acetaminophen- chlorpheniramine TABS 325 MG-2 MG-10 MG .....	104	DEXTROSE SOLN .....	196
DEXMEDETOMIDINE HYDROCHLORIDE/DEXTROSE MONOHYDRATE .....	136	dextromethorphan-guaifenesin LIQD 100 MG/5ML-10 MG/5ML, 150 MG/7.5ML-15 MG/7.5ML, 200 MG/10ML-20 MG/10ML .....	104	dextrose w/ sodium chloride 0.45 %- 2.5 %, 0.9 %-5 %, 10 %-0.45 %, 5 %- 0.2 %, 5 %-0.225 %, 5 %-0.3 %, 5 %- 0.33 %, 5 %-0.45 %, 5 %-0.9 % ..	181
dexmethylphenidate hcl CP24 .....	3	dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 400 MG/20ML-20 MG/20ML .....	105	DEXYCU SUSP IO .....	201
dexmethylphenidate hcl TABS .....	3	dextromethorphan-guaifenesin LIQD 100 MG/5ML-5 MG/5ML, 400 MG/20ML-20 MG/20ML .....	105	DHEA MICRONIZED .....	98
DEXPANTHENOL LIQD .....	78	dextromethorphan-guaifenesin SYRP 100 MG/5ML-10 MG/5ML, 100 MG/5ML-100 MG/5ML-10 MG/5ML-		DHEA POWD .....	98
DEXPANTHENOL POWD .....	78			DHIVY TABS .....	56
dextran 40 in d5w .....	132			DHS TAR GEL SHAM (Use coal tar extract) .....	120
dextran 40 in saline .....	132			DHS TAR SHAM (Use coal tar extract) .....	120
DEXTRAN 40000 .....	78			DIABETES MONITORING DIGITAL	
dextran 70-hypromellose 0.3 %-0.1 % .....	198				
DEXTRAN 75000 .....	78				
dextroamphetamine sulfate CP24 10					



SOLUTION ADD-ON KIT .....	143	MONITORING SYSTEM DEVI ...	143	diclofenac sodium (topical) SOLN EX 1.5 % .....	111
DIABETES MONITORING DIGITAL SOLUTION KIT .....	143	diazepam (anticonvulsant) GEL ...	25	diclofenac sodium (topical) SOLN EX .....	111
DIACOMIT CAPS 250 MG .....	26	DIAZEPAM .....	78	DICLOFENAC SODIUM MICRONIZED POWD .....	78
DIACOMIT CAPS 500 MG .....	26	diazepam CONC .....	19	DICLOFENAC SODIUM POWD ...	78
DIACOMIT PACK 250 MG .....	26	DIAZEPAM SOAJ .....	19	diclofenac sodium TB24 .....	8
DIACOMIT PACK 500 MG .....	26	diazepam SOLN IJ 5 MG/ML, 10 MG/2ML, 50 MG/10ML .....	19	diclofenac sodium TBEC 50 MG, 75 MG .....	8
DIALYVITE 3000 .....	188	DIAZEPAM SOLN IJ 5 MG/ML ....	19	diclofenac sodium TBEC .....	8
DIALYVITE 5000 .....	188	diazepam SOLN OR 5 MG/5ML ...	19	diclofenac w/ misoprostol TBEC ....	8
DIALYVITE 800 PLUS D WAFR .	188	diazepam TABS .....	19	dicloxacillin sodium .....	205
DIALYVITE/ZINC .....	188	diazoxide .....	35	dicyclomine hcl CAPS .....	221
DIAMINOPYRIDINE .....	78	DIAZOXIDE .....	78	dicyclomine hcl SOLN IM .....	221
DIANEAL LOW CALCIUM/1.5%DEXTROSE .....	186	dibucaine .....	118	dicyclomine hcl SOLN OR .....	221
DIANEAL LOW CALCIUM/2.5%DEXTROSE .....	186	DIBUCAINE .....	78	dicyclomine hcl TABS .....	221
DIANEAL LOW CALCIUM/4.25%DEXTROSE ...	186	DIBUCAINE HCL .....	78	DICYCLOMINE HYDROCHLORIDE 78	
DIANEAL PD-2/1.5% DEXTROSE 186		DIBUTYL SQUARATE LIQD .....	90	DIETHANOLAMINE .....	78
DIANEAL PD-2/2.5% DEXTROSE 186		DICHLORALPHENAZONE .....	78	DIETHYL PHTHALATE .....	78
DIANEAL PD-2/4.25% DEXTROSE . 186		DICHLOROACETIC ACID .....	78	DIETHYLCARBAMAZINE CITRATE 78	
DIASTAT ACUDIAL GEL (Use diazepam (anticonvulsant)) .....	25	dichlorphenamide .....	123	DIETHYLENE GLYCOL MONOETHYL ETHER .....	77
DIASTAT PEDIATRIC GEL (Use diazepam (anticonvulsant)) .....	25	DICLAZURIL .....	78	DIETHYLENE GLYCOL MONOETHYL ETHER NF .....	77
DIATHRIVE BLOOD GLUCOSE METER DEVI .....	143	DICLEGIS TBEC (Use doxylamine- pyridoxine) .....	40	DIETHYL-M-TOLUAMIDE .....	78
DIATHRIVE+ BLOOD GLUCOSEMONITORING SYSTEM/BLUETOOTH DEVI ....	143	diclofenac epolamine PTCH EX ..	111	diethylpropion hcl TABS .....	2
DIATRUE PLUS BLOOD GLUCOSE		diclofenac potassium (migraine) .	178	diethylpropion hcl TB24 .....	2
		diclofenac potassium CAPS .....	8	DIETHYLPROPION HYDROCHLORIDE/TARTARIC ACID .....	78
		diclofenac potassium TABS .....	8		
		diclofenac sodium (actinic keratoses) EX .....	111		
		diclofenac sodium (ophth) .....	202		
		diclofenac sodium (topical) GEL EX 111			

DIETHYLSTILBESTROL .....	78	DIINDOLYLMETHANE .....	78	DILTIAZEM HCL SOLR .....	67
DIFFERIN CREA (Use adapalene) 107		DIiodo-L-THYRONINE 3,5 .....	78	diltiazem hcl TABS .....	67
DIFFERIN DAILY DEEP CLEANSER LIQD (Use benzoyl peroxide) .....	107	DILANTIN (Use phenytoin sodium extended) .....	28	diltiazem hcl TB24 180 MG, 240 MG, 300 MG, 360 MG, 420 MG .....	67
DIFICID SUSR .....	140	DILANTIN .....	28	diltiazem hcl TB24 .....	67
DIFICID TABS .....	140	DILANTIN INFATABS CHEW (Use phenytoin) .....	28	DILTIAZEM HYDROCHLORIDE ..	78
diflorasone diacetate CREA .....	114	DILANTIN-125 SUSP (Use phenytoin) .....	28	DIMENHYDRINATE .....	98
diflorasone diacetate OINT .....	114	DILAUDID LIQD (Use hydromorphone hcl) .....	11	DIMENHYDRINATE SOLN .....	40
DIFLUCAN SUSR 10 MG/ML (Use fluconazole) .....	41	DILAUDID SOLN IJ .....	11	DIMERCAPTO-1- PROPANESULFONIC ACID (DMPS) .....	98
DIFLUCAN SUSR 40 MG/ML (Use fluconazole) .....	41	DILAUDID TABS 2 MG (Use hydromorphone hcl) .....	11	DIMERCAPTO-1- PROPANESULFONIC ACID SODIUM SALT .....	98
DIFLUCAN TABS 100 MG, 200 MG (Use fluconazole) .....	41	DILAUDID TABS 4 MG (Use hydromorphone hcl) .....	11	DIMERCAPTOPROPANE- SULFONATE (2,3) SODIUM .....	98
DIFLUNISAL POWD .....	11	DILAUDID TABS 8 MG (Use hydromorphone hcl) .....	11	DIMERCAPTOSUCCINIC ACID CRYS .....	90
diflunisal TABS .....	11	DILTIAZEM HCL .....	78	DIMERCAPTOSUCCINIC ACID POWD .....	90
difluprednate .....	201	diltiazem hcl coated beads CP24 120 MG, 180 MG, 300 MG .....	66	DIMETHYL FUMARATE .....	78
DIGOXIN MICRONIZED POWD ..	78	diltiazem hcl coated beads CP24 240 MG .....	66	dimethyl fumarate CDPK .....	216
DIGOXIN POWD .....	78	diltiazem hcl coated beads CP24 360 MG .....	66	dimethyl fumarate CPDR 240 MG 216	
digoxin SOLN IJ 0.25 MG/ML .....	67	diltiazem hcl CP12 .....	66	dimethyl fumarate CPDR .....	216
digoxin SOLN OR 0.05 MG/ML ..	67	diltiazem hcl CP24 120 MG, 180 MG 66		DIMETHYL SILOXANE HYDROXYALKYL-TERMINATED	78
digoxin TABS 0.0625 MG, 62.5 MCG 67		diltiazem hcl CP24 240 MG .....	66	DIMETHYL SULFONE POWD ....	84
digoxin TABS 0.125 MG, 0.25 MG, 125 MCG, 250 MCG .....	67	diltiazem hcl extended release beads 120 MG, 180 MG, 300 MG, 360 MG, 420 MG .....	66	DIMETHYL SULFOXIDE .....	96
DIHYDROCODEINE BITARTRATE .	78	diltiazem hcl extended release beads 240 MG .....	66	DIMETHYLACETAMIDE .....	78
DIHYDROERGOTAMINE MESYLATE CRYSTALS .....	178	diltiazem hcl SOLN .....	66	DIMETHYLAMINOETHANOL (DEANOL) .....	78
DIHYDROERGOTAMINE MESYLATE POWD .....	178			DIMETHYLGLYCINE HCL .....	78
DIHYDROXYACETONE (1,3) DIMER .....	78			DINITROCHLORO BENZENE .....	98

DIOSGENIN .....	78	DISOPHENOL .....	79	DOBUTAMINE	
DIOSMIN .....	78	disopyramide phosphate CAPS ...	19	HYDROCHLORIDE/DEXTROSE 5%	68
DIOVAN HCT (Use valsartan- hydrochlorothiazide) .....	47	DISPERSERX UFP .....	211	DOCOSANOL .....	79
DIOVAN TABS (Use valsartan) ....	46	DISULFIRAM .....	79	docusate sodium CAPS 100 MG, 250 MG .....	138
DIOXYBENZONE .....	78	disulfiram 250 MG .....	215	docusate sodium CAPS 50 MG ..	138
DIPENTUM .....	128	disulfiram 500 MG .....	215	docusate sodium LIQD .....	138
diphenhydramine hcl (sleep) TABS 25 MG .....	135	DITROPAN XL TB24 5 MG (Use oxybutynin chloride) .....	223	DOCUSATE SODIUM POWD ....	138
diphenhydramine hcl CAPS .....	42	DIURIL SUSP .....	124	DOCUSATE SODIUM SYRP ....	138
diphenhydramine hcl CHEW .....	42	DIVALPROEX SODIUM .....	79	docusate sodium TABS .....	138
diphenhydramine hcl ELIX 12.5 MG/5ML .....	42	divalproex sodium CSDR .....	29	DOCUSATE SODIUM/SODIUM BENZOATE .....	98
DIPHENHYDRAMINE HCL POWD 42		divalproex sodium TB24 250 MG ..	29	dofetilide .....	20
diphenhydramine hcl SOLN 50 MG/ML .....	42	divalproex sodium TB24 500 MG ..	29	donepezil hydrochloride TABS 23 MG .....	215
diphenhydramine hcl TABS 25 MG 42		divalproex sodium TBEC 125 MG ..	29	donepezil hydrochloride TABS 5 MG, 10 MG .....	215
DIPHENIDOL HYDROCHLORIDE 78		divalproex sodium TBEC 250 MG ..	29	donepezil hydrochloride TBDP ...	215
diphenoxylate w/ atropine LIQD ...	38	divalproex sodium TBEC 500 MG ..	29	dopamine hcl 40 MG/ML .....	68
diphenoxylate w/ atropine TABS ...	38	DL-3-HYDROXYBUTYRIC ACIDSODIUM .....	90	DOPAMINE HYDROCHLORIDE ..	79
DIPHENYLCYCLOPROPENONE	79	DL-ALANINE POWD .....	197	DOPAMINE HYDROCHLORIDE/DEXTROSE .	68
DIPHThERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC SUSP .	220	DL-ALPHA LIPOIC ACID .....	73	DOPAMINE/D5W .....	68
DIPRIVAN EMUL .....	129	DL-LEUCINE POWD XX .....	197	DOPRAM .....	2
DIPROLENE OINT (Use betamethasone dipropionate augmented) .....	114	DL-MALIC ACID .....	84	DORAL (Use quazepam) .....	136
dipyridamole (diagnostic) .....	120	DL-METHIONINE POWD XX .....	197	DORYX MPC TBEC .....	219
dipyridamole .....	132	DL-PANTHENOL .....	87	DORYX TBEC 50 MG, 80 MG, 200 MG (Use doxycycline hyclate) ...	219
DIPYRIDAMOLE .....	79	DL-PANTHENOL ALCOHOL .....	87	dorzolamide hcl .....	202
		DL-PHENYLALANINE POWD ....	197	dorzolamide hcl-timolol maleate .	198
		DMAE BITARTRATE .....	79	dorzolamide hcl-timolol maleate .	199
		D-MANNOSE .....	79	DORZOLAMIDE HYDROCHLORIDE .	
		dobutamine hcl 12.5 MG/ML, 250 MG/20ML .....	68		
		DOBUTAMINE HCL/D5W .....	68		

79	doxycycline hyclate TABS 20 MG, 50 MG, 100 MG .....	219	DROPLET PEN NEEDLE/MICRON/34G X 9/64" .	159	
DOVATO .....	61	doxycycline hyclate TABS .....	219	DROPSAFE SICURA .....	159
DOW CORNING 1501 FLUID .....	79	doxycycline hyclate TBEC 150 MG 219		drosiprenone-ethinyl estradiol 0.02 MG-3 MG .....	100
DOW CORNING 200 LIQD .....	90	doxycycline hyclate TBEC .....	219	drosiprenone-ethinyl estradiol 0.03 MG-3 MG .....	100
doxazosin mesylate .....	46	DOXYCYCLINE MONOHYDRATE		drosiprenone-ethinyl estradiol-levomefolate calcium .....	100
doxepin hcl (antipruritic) .....	111	79		DROXIA CAPS .....	133
doxepin hcl (sleep) .....	136	doxylamine succinate (sleep) ....	135	DSUVIA SUBL .....	11
DOXEPIN HCL .....	79	DOXYLAMINE SUCCINATE POWD .	42	DUAKLIR PRESSAIR .....	22
doxepin hcl CAPS .....	33	doxylamine-pyridoxine TBEC .....	40	DUAVEE .....	126
doxepin hcl CONC .....	33	DRAKKAR NOIR .....	71	DUETACT (Use pioglitazone hcl-glimepiride) .....	34
doxercalciferol CAPS .....	125	D-RIBOSE .....	79	DUEXIS (Use ibuprofen-famotidine) .	8
doxercalciferol SOLN .....	125	D-RIBOSE REAGENT .....	79	DULCOLAX PINK LAXATIVE TBEC (Use bisacodyl) .....	138
doxorubicin hcl liposomal .....	54	DRIPDROP HYDRATION POWDER		DULCOLAX SUPP (Use bisacodyl)	138
doxorubicin hcl SOLN .....	54	PACK .....	181	DULCOLAX TBEC (Use bisacodyl)	138
doxorubicin hcl SOLR 10 MG, 50 MG .....	54	DRIPDROP ORS PACK .....	181	DULERA .....	22
doxycycline (monohydrate) CAPS 50 MG, 100 MG .....	219	DRISDOL CAPS (Use ergocalciferol) 228		DULOXETINE HCL .....	79
doxycycline (monohydrate) CAPS 219		DRIZALMA SPRINKLE CSDR ....	32	duloxetine hcl CPEP 20 MG, 30 MG, 60 MG .....	33
doxycycline (monohydrate) SUSR 219		dronabinol CAPS .....	40	duloxetine hcl CPEP 40 MG .....	33
doxycycline (monohydrate) TABS 75 MG, 100 MG, 150 MG .....	219	DROPERIDOL POWD .....	19	DULOXETINE HYDROCHLORIDE	79
doxycycline (monohydrate) TABS 219		droperidol SOLN 2.5 MG/ML .....	19	DUOPA SUSP .....	56
doxycycline (rosacea) .....	119	DROPERIDOL/SODIUM CHLORIDE SOSY .....	19	DURYSTA IMPL .....	202
doxycycline hyclate CAPS 100 MG 219		DROPLET INSULIN SYRINGE U-100/0.3ML/30G X 15/64" .....	158	dutasteride .....	130
doxycycline hyclate CAPS .....	219	DROPLET INSULIN SYRINGE U-100/0.5ML/30G X 15/64" .....	158	DUTASTERIDE .....	79
DOXYCYCLINE HYCLATE POWD 219		DROPLET INSULIN SYRINGE U-100/1ML/30G X 15/64" .....	158		
doxycycline hyclate SOLR .....	219	DROPLET MICRON 34G X 9/64" 159			

dutasteride-tamsulosin hcl	130	LLOCK/10ML	159	EASY TOUCH FLIPLOCK NEEDLES 20GX1-1/2"	159
D-VITAMIN E SUCCINATE	94	EASY GLIDE SYRINGE/LUER LLOCK/20ML	159	EASY TOUCH FLIPLOCK NEEDLES 21GX1"	159
DX1 ORAGENOMIC MEDICATEDDNA COLLECTION SCREEN	121	EASY GLIDE SYRINGE/LUER LLOCK/30ML	159	EASY TOUCH FLIPLOCK NEEDLES 21GX1-1/2"	159
DX2 ORAGENOMIC MEDICATEDDNA COLLECTION SCREEN	121	EASY GLIDE SYRINGE/LUER LLOCK/3ML	159	EASY TOUCH FLIPLOCK NEEDLES 22GX1"	159
DYANAVEL XR CHER	1	EASY GLIDE SYRINGE/LUER LLOCK/60ML	159	EASY TOUCH FLIPLOCK NEEDLES 22GX1-1/2"	159
DYANAVEL XR SUER	1	EASY GLIDE SYRINGE/LUER LLOCK/5ML	159	EASY TOUCH FLIPLOCK NEEDLES 22GX3/4"	159
DYCLONINE HCL POWD	79	EASY GLIDE SYRINGE/SLIP LLOCK/1ML	159	EASY TOUCH FLIPLOCK NEEDLES 23GX1"	159
DYCLONINE HYDROCHLORIDE CRYS	79	EASY MAX BLOOD GLUCOSE TEST STRIP STRP	121	EASY TOUCH FLIPLOCK NEEDLES 23GX1-1/2"	159
DYMISTA SUSP (Use azelastine hcl- fluticasone propionate)	194	EASY MAX T1 SELF-MONITORING BLOOD GLUCOSE SYSTEM KIT	143	EASY TOUCH FLIPLOCK NEEDLES 23GX5/8"	159
DYPHYLLINE	79				
DYSPORT	195				
E.E.S. GRANULES SUSR (Use erythromycin ethylsuccinate)	140	EASY PLUS II BLOOD GLUCOSE MONITORING SYSTEM DEVI	143	EASY TOUCH FLIPLOCK NEEDLES 25GX1"	159
EASY COMFORT INSULIN SYRINGE/0.3ML/31G X 1/2"	159	EASY STEP BLOOD GLUCOSE MONITOR DEVI	143	EASY TOUCH FLIPLOCK NEEDLES 25GX1-1/2"	159
EASY COMFORT INSULIN SYRINGE/1ML/32GX5/16"	159	EASY TALK BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	143	EASY TOUCH FLIPLOCK NEEDLES 25GX5/8"	160
EASY COMFORT INSULIN SYRINGES/0.5ML/32GX5/16"	159	EASY TOUCH ALLERGY TRAY SAFETY SYRINGE/1ML/26G X 3/8" MISC	159	EASY TOUCH FLIPLOCK NEEDLES 26GX1/2"	160
EASY COMFORT SAFETY PEN NEEDLES 31GX5MM	159	EASY TOUCH ALLERGY TRAY SAFETY SYRINGE/1ML/27G X 1/2" MISC	159	EASY TOUCH FLIPLOCK NEEDLES 27GX1"	160
EASY COMFORT SAFETY PEN NEEDLES 32GX4MM	159			EASY TOUCH FLIPLOCK NEEDLES 27GX1/2"	160
EASY GLIDE SYRINGE/CATHETTER TIP/60ML 159		EASY TOUCH FLIPLOCK NEEDLES 18GX1"	159	EASY TOUCH FLIPLOCK NEEDLES 28GX1/2"	160
EASY GLIDE SYRINGE/LUER LLOC/1ML	159	EASY TOUCH FLIPLOCK NEEDLES 19GX1"	159	EASY TOUCH FLIPLOCK NEEDLES 29GX1/2"	160
EASY GLIDE SYRINGE/LUER		EASY TOUCH FLIPLOCK NEEDLES 20GX1"	159	EASY TOUCH FLIPLOCK NEEDLES 30GX1/2"	160

EASY TOUCH FLIPLOCK NEEDLES 30GX5/16" ..... 160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/22GX1-1/2" .....160	EASY TOUCH FLURINGE FLIPLOCK SAFETY SYRINGE 1ML/25GX1" ..... 161
EASY TOUCH FLIPLOCK NEEDLES 31GX5/16" ..... 160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/23GX1" .....160	EASY TOUCH FLURINGE FLIPLOCK SAFETY SYRINGE 1ML/25GX5/8" ..... 161
EASY TOUCH FLIPLOCK NEEDLES 19GX1-1/2" ..... 160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/23GX1-1/2" .....160	EASY TOUCH FLURINGE FLU TRAY SYRINGE/1ML/25G X 1" . 161
EASY TOUCH FLIPLOCK SAFETY SYRINGES 3ML/18GX1-1/2" .... 160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/25GX1" .....160	EASY TOUCH FLURINGE SHEATHLOCK SAFETY SYRINGE 1ML/25GX1" ..... 161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/22GX1-1/2" .....160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/25GX5/8" .....160	EASY TOUCH FLURINGE SHEATHLOCK SAFETY SYRINGE 1ML/25GX1" ..... 161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 10ML/18GX1" ..... 160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/18GX1" .....160	EASY TOUCH FLURINGE SHEATHLOCK SAFETY SYRINGE 1ML/25GX5/8" ..... 161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 10ML/18GX1-1/2" .... 160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/20GX1-1/2" .....160	EASY TOUCH FLURINGE SYRINGE/1ML/25G X 1" ..... 161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 10ML/21GX1" ..... 160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/21GX1" .....160	EASY TOUCH FLURINGE SYRINGE/1ML/25G X 5/8" ..... 161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 10ML/22GX1-1/2" .... 160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/21GX1-1/2" .....161	EASY TOUCH GLUCOSE MONITORING SYSTEM KIT ..... 143
EASY TOUCH FLIPLOCK SAFETY SYRINGE 10ML/25GX1" ..... 160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/25GX1" .....161	EASY TOUCH HEALTHPRO GLUCOSE MONITORING SYSTEM KIT ..... 143
EASY TOUCH FLIPLOCK SAFETY SYRINGE 1ML/25GX1" .....160	EASY TOUCH FLIPLOCK SAFETY SYRINGE 5ML/25GX5/8" .....161	EASY TOUCH HYPODERMIC NEEDLES 16GX1" .....161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 1ML/26GX3/8" .....160	EASY TOUCH FLIPLOCK SAFETY SYRINGES 10ML/20GX1" .....161	EASY TOUCH HYPODERMIC NEEDLES 16GX1-1/2" .....161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 1ML/27GX1/2" .....160	EASY TOUCH FLIPLOCK SAFETY SYRINGES 10ML/20GX1-1/2" ...161	EASY TOUCH HYPODERMIC NEEDLES 18GX1" .....161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 21G/10ML1-1/2" ..... 160	EASY TOUCH FLIPLOCK SAFETY SYRINGES 3ML/18GX1" ..... 161	EASY TOUCH HYPODERMIC NEEDLES 18GX1.25" ..... 161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/19GX1" .....160	EASY TOUCH FLIPLOCK SAFETY SYRINGES 3ML/20GX1" ..... 161	EASY TOUCH HYPODERMIC NEEDLES 19GX1" .....161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/19GX1.5" .....160	EASY TOUCH FLIPLOCK SAFETY SYRINGES 3ML/20GX1-1/2" ....161	EASY TOUCH HYPODERMIC NEEDLES 19GX1-1/2" .....161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/21GX1" .....160	EASY TOUCH FLIPLOCK SAFETY SYRINGES 3ML/21GX1-1/2" ....161	EASY TOUCH HYPODERMIC NEEDLES 20GX1" .....161
EASY TOUCH FLIPLOCK SAFETY SYRINGE 3ML/22GX1" .....160	EASY TOUCH FLIPLOCK SAFETY SYRINGES 5ML/20GX1" ..... 161	

EASY TOUCH HYPODERMIC NEEDLES 20GX1-1/2" .....161	EASY TOUCH HYPODERMIC NEEDLES 27GX1-1/2" .....162	1/2" ..... 162
EASY TOUCH HYPODERMIC NEEDLES 21GX1" .....161	EASY TOUCH HYPODERMIC NEEDLES 27GX1-1/4" .....162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 10ML/25GX1" 162
EASY TOUCH HYPODERMIC NEEDLES 21GX1-1/2" .....161	EASY TOUCH HYPODERMIC NEEDLES 30GX1" .....162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/21GX1" 163
EASY TOUCH HYPODERMIC NEEDLES 22GX1" .....161	EASY TOUCH HYPODERMIC NEEDLES 30GX1/2" .....162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/21GX1-1/2" .....163
EASY TOUCH HYPODERMIC NEEDLES 22GX1-1/2" .....161	EASY TOUCH HYPODERMIC NEEDLES 31GX5/16" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/22GX1" 163
EASY TOUCH HYPODERMIC NEEDLES 23GX1" .....161	EASY TOUCH HYPODERMIC NEEDLES 32GX5/16" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/22GX1-1/2" .....163
EASY TOUCH HYPODERMIC NEEDLES 23GX1-1/2" .....162	EASY TOUCH SAFETY PEN NEEDLES/30G X 1/4" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/22GX1-1/2" .....163
EASY TOUCH HYPODERMIC NEEDLES 23GX1-1/4" .....162	EASY TOUCH SAFETY SYRINGE/1ML/25G X 1" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/23GX1" 163
EASY TOUCH HYPODERMIC NEEDLES 23GX3/4" .....162	EASY TOUCH SAFETY SYRINGE/1ML/25G X 5/8" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/25GX1" 163
EASY TOUCH HYPODERMIC NEEDLES 24GX1" .....162	EASY TOUCH SAFETY SYRINGE/3ML/20G X 1" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/25GX1" 163
EASY TOUCH HYPODERMIC NEEDLES 24GX1.25" ..... 162	EASY TOUCH SAFETY SYRINGE/3ML/21G X 1" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 3ML/25GX5/8" 163
EASY TOUCH HYPODERMIC NEEDLES 25GX1" .....162	EASY TOUCH SAFETY SYRINGE/3ML/22G X 1" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 5ML/21GX1-1/2" .....163
EASY TOUCH HYPODERMIC NEEDLES 25GX1-1/2" .....162	EASY TOUCH SAFETY SYRINGE/3ML/22G X 1-1/2" .... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 5ML/22GX1-1/2" .....163
EASY TOUCH HYPODERMIC NEEDLES 25GX5/8" .....162	EASY TOUCH SAFETY SYRINGE/3ML/23G X 1" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 5ML/22GX1-1/2" .....163
EASY TOUCH HYPODERMIC NEEDLES 26GX1/2" .....162	EASY TOUCH SAFETY SYRINGE/3ML/25G X 1" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 5ML/25GX1" 163
EASY TOUCH HYPODERMIC NEEDLES 26GX3/8" .....162	EASY TOUCH SAFETY SYRINGE/3ML/25G X 5/8" ..... 162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 5ML/21GX1- 1/2" .....162
EASY TOUCH HYPODERMIC NEEDLES 26GX5/8" .....162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 10ML/21GX1- 1/2" .....162	EASY TOUCH SHEATHLOCK SYRINGE BARRELS LUER LOCK 10ML ..... 163
EASY TOUCH HYPODERMIC NEEDLES 27GX1/2" .....162	EASY TOUCH SHEATHLOCK SAFETY SYRINGE 10ML/22GX1-	EASY TOUCH SHEATHLOCK SYRINGE BARRELS LUER LOCK

3ML .....	163	EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/28GX1/2" MISC .....	164	EASYPOINT NEEDLE/SYRINGE 3ML/23 G X 1" .....	164
EASY TOUCH SYRINGE BARRELS LUER LOCK 10ML .....	163	EASY TRAK BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	143	EASYPOINT NEEDLE/SYRINGE 3ML/25G X 1" .....	164
EASY TOUCH SYRINGE BARRELS LUER LOCK 1ML .....	163	EASY TRAK II BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	143	EASYPOINT NEEDLE/SYRINGE 3ML/25G X 5/8" .....	164
EASY TOUCH SYRINGE BARRELS LUER LOCK 3ML .....	163	EASYMAX NG SELF-MONITORING BLOOD GLUCOSE SYSTEM DEVI	143	EASYPRO BLOOD GLUCOSE MONITORING SYSTEM KIT .....	143
EASY TOUCH SYRINGE BARRELS LUER LOCK 5ML .....	163	EASYMAX NG SELF-MONITORING BLOOD GLUCOSE SYSTEM KIT	143	EASYPRO PLUS KIT .....	143
EASY TOUCH SYRINGE BARRELS LUER LOCK/20ML .....	163	EASYMAX V BLOOD GLUCOSE SYSTEM DEVI .....	143	EC-NAPROSYN TBEC (Use naproxen) .....	8
EASY TOUCH SYRINGE BARRELS LUER LOCK/60ML .....	163	EASYPOINT NEEDLE 23G X 1"	164	ECONAZOLE NITRATE .....	79
EASY TOUCH SYRINGE BARRELS UNI-SLIP 10ML .....	163	EASYPOINT NEEDLE 25G X 1"	164	econazole nitrate CREA .....	110
EASY TOUCH SYRINGE BARRELS UNI-SLIP 3ML .....	163	EASYPOINT NEEDLE 25G X 5/8"	164	ECOTRIN ARTHRITIS PAIN TBEC (Use aspirin) .....	11
EASY TOUCH SYRINGE BARRELS UNI-SLIP 5ML .....	163	EASYPOINT NEEDLE 25GX1-1/2"	164	ECOTRIN REGULAR STRENGTH TBEC (Use aspirin) .....	11
EASY TOUCH TUBERCULIN FLIPLOCK SAFETY SYRINGE 1ML/26GX5/8" MISC .....	163	EASYPOINT NEEDLE/18G X 1"	164	ECOTRIN TBEC (Use aspirin) .....	11
EASY TOUCH TUBERCULIN FLIPLOCK SAFETY SYRINGE 1ML/27GX1/2" MISC .....	163	EASYPOINT NEEDLE/20G X 1"	164	ECTOSEAL P2G .....	211
EASY TOUCH TUBERCULIN FLIPLOCK SAFETY SYRINGE 1ML/28GX1/2" MISC .....	163	EASYPOINT NEEDLE/20G X 1-1/2"	164	ED BRON GP LIQD .....	105
EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/25GX5/8" MISC .....	163	EASYPOINT NEEDLE/21G X 1"	164	EDARBI .....	46
EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/26GX5/8" .....	163	EASYPOINT NEEDLE/21G X 1-1/2"	164	EDARBYCLOR .....	47
EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/27GX1/2" MISC .....	164	EASYPOINT NEEDLE/22G X 1"	164	EDETATE ACID .....	98
EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/28GX1/2" MISC .....	164	EASYPOINT NEEDLE/22G X 1-1/2"	164	EDETATE CALCIUM DISODIUM POWD .....	39
EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/26GX5/8" .....	163	EASYPOINT NEEDLE/SYRINGE 3ML/18G X 1" .....	164	EDETATE CALCIUM DISODIUM SOLN .....	39
EASY TOUCH TUBERCULIN SHEATHLOCK SAFETY SYRINGE 1ML/27GX1/2" MISC .....	164	EASYPOINT NEEDLE/SYRINGE 3ML/18G X 1-1/2" .....	164	EDETATE DISODIUM .....	98
				EDETATE DISODIUM DIHYDRATE .	98
				EDETATE TETRASODIUM TETRAHYDRATE .....	98
				EDEX KIT .....	69
				EDLUAR SUBL .....	136



EDROPHONIUM CHLORIDE	79	electrolyte-148	181	METER DEVI	143
EDURANT	61	electrolyte-a	181	EMBRACE TALK BLOOD GLUCOSE MONITOR DEVI	143
efavirenz CAPS 200 MG	61	ELEMENT AUTOCODE SYSTEM KIT	143	EMBRACE TALK BLOOD GLUCOSE MONITORING SYSTEM KIT	144
efavirenz CAPS 50 MG	61	ELEMENT COMPACT BLOOD GLUCOSE MONITORING SYSTEM DEVI	143	EMBRACE WAVE BLOOD GLUCOSE METER DEVI	144
efavirenz TABS	61	ELEMENT COMPACT V BLOODGLUCOSE MONITORING SYSTEM DEVI	143	EMBRACE WAVE BLOOD GLUCOSE TEST STRIPS STRP	121
efavirenz-emtricitabine-tenofovir disoproxil fumarate	61	ELEMENT PLUS BLOOD GLUCOSE METER DEVI	143	EMEND CAPS 80 MG (Use aprepitant)	40
efavirenz-lamivudine-tenofovir disoproxil fumarate	61	ELEPSIA XR TB24	26	EMEND SUSR	40
EFFER-K	183	ELESTRIN GEL	126	EMEND TRIPACK CAPS (Use aprepitant)	40
EFFERVESCENT	211	eletriptan hydrobromide	178	EMERGEN-C ELECTRO MIX PACK	181
EFFEXOR XR CP24 150 MG (Use venlafaxine hcl)	33	ELFABRIO	125	EMERPHED SOLN IV	227
EFFEXOR XR CP24 37.5 MG (Use venlafaxine hcl)	33	ELFOLATE PLUS TABS	122	EMERPHED SOSY IV	227
EFFEXOR XR CP24 75 MG (Use venlafaxine hcl)	33	ELIDEL (Use pimecrolimus)	117	EMFLAZA SUSP	102
EFFIENT (Use prasugrel hcl)	132	ELIQUIS STARTER PACK TBPK	23	EMGALITY SOSY 100 MG/ML	178
EFLORNITHINE HYDROCHLORIDE MONOHYDRATE	79	ELIQUIS TABS	23	EMSAM	30
EFUDEX CREA (Use fluorouracil (topical))	111	ELITEK	55	emtricitabine CAPS	61
EGCG POWD	80	ELLA	101	emtricitabine-tenofovir disoproxil fumarate 100 MG-150 MG, 133 MG- 200 MG, 167 MG-250 MG	61
EGRIFTA 2 MG	125	ELMIRON CAPS	130	emtricitabine-tenofovir disoproxil fumarate 200 MG-300 MG	61
EGRIFTA SV	125	ELYXYB	178	EMTRIVA CAPS (Use emtricitabine)	61
ELCYS	197	ELZONRIS	55	EMTRIVA SOLN	61
ELDERBERRY IMMUNE COMPLEX/VITAMIN C/VITAMIN D/ZINC CHEW	185	EMBRACE BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI	143	EMU OIL	79
ELDERBERRY ZINC LOZENGE/VITAMIN C & IMMUNE BLEND LOZG	185	EMBRACE EVO BLOOD GLUCOSE MONITORING KIT KIT	143	EMULGADE CM	211
ELDERBERRY/VITAMIN C/ZINC CHEW	185	EMBRACE EVO COMPACT BLOODGLUCOSE MONITOR DEVI	143	EMULSIFYING WAX	211
		EMBRACE PRO BLOOD GLUCOSE		EMVERM CHEW	18

enalapril maleate & hydrochlorothiazide	MG/0.6ML	24	EPIFOAM FOAM	114
enalapril maleate & hydrochlorothiazide 12.5 MG-5 MG	MG/0.8ML, 120 MG/0.8ML	24	epinastine hcl (ophth)	202
ENALAPRIL MALEATE	ENROFLOXACIN	79	epinephrine (anaphylaxis) SOAJ 0.15 MG/0.15ML	227
enalapril maleate SOLN	ENSPRYNG	184	epinephrine (anaphylaxis) SOAJ	227
enalapril maleate TABS	ENSTILAR FOAM	114	epinephrine (anaphylaxis) SOLN IJ	227
enalaprilat	ENSURE RAPID HYDRATION PACK	181	EPINEPHRINE	98
ENBRACE HR	entacapone	56	EPINEPHRINE BASE	99
ENBREL MINI SOCT	ENTADFI	130	EPINEPHRINE BITARTRATE	79
ENBREL SOLN	entecavir TABS	63	EPINEPHRINE SOSY IV 1 MG/10ML	227
ENBREL SOSY 25 MG/0.5ML	ENTEREG (Use alvimopan)	129	EPIPEN 2-PAK SOAJ (Use epinephrine (anaphylaxis))	227
ENBREL SOSY 50 MG/ML	ENTRESTO CPSP	68	EPIVIR HBV TABS (Use lamivudine (hbv))	63
ENBREL SURECLICK SOAJ	ENTRESTO TABS	68	EPIVIR SOLN (Use lamivudine)	61
ENDAL	ENTYVIO SOPN	128	EPIVIR TABS 150 MG (Use lamivudine)	61
ENFAMIL ENFALYTE SOLN	ENVARCUS XR TB24	185	EPIVIR TABS 300 MG (Use lamivudine)	61
ENGERIX-B SUSP 20 MCG/ML	EOHILIA SUSP	102	eplerenone	49
ENGERIX-B SUSY	EOVIST	122	EPOGEN 2000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML	133
ENGLISH TOFFEE FLAVOR LIQD 208	EPANED SOLN (Use enalapril maleate)	45	EPRONTIA SOLN	26
ENHERTU	EPCLUSA TABS 50 MG-200 MG	63	EPSOM SALT GRAN XX	138
enoxaparin sodium SOLN IJ 300 MG/3ML	EPHEDRINE HCL POWD	22	EPSOM SALT POWD	138
enoxaparin sodium SOSY 100 MG/ML, 150 MG/ML	ephedrine sulfate (pressors) SOLN IV	227	eptifibatide	132
enoxaparin sodium SOSY 30 MG/0.3ML	EPHEDRINE SULFATE POWD	22	EPZICOM (Use abacavir sulfate-lamivudine)	61
enoxaparin sodium SOSY 30 MG/0.3ML	EPHEDRINE SULFATE SOLN IV	227	EQL EPSOM SALT GRAN XX	138
enoxaparin sodium SOSY 40 MG/0.4ML	EPHEDRINE SULFATE SOSY IV 25 MG/5ML	227	EQUALYTE SOLN (Use oral electrolytes)	181
enoxaparin sodium SOSY 60	EPHEDRINE SULFATE/SODIUMCHLORIDE	227		
	EPIDIOLEX	26		

EQUETRO .....	57	erythromycin base TBEC .....	140	esomeprazole magnesium CPDR 20 MG .....	222
ERAXIS .....	40	ERYTHROMYCIN ESTOLATE ...	79	esomeprazole magnesium CPDR 40 MG .....	222
ergocalciferol CAPS .....	228	ERYTHROMYCIN ETHYLSUCCINATE POWD .....	140	esomeprazole magnesium PACK	222
ERGOCALCIFEROL POWD .....	228	erythromycin ethylsuccinate SUSR 140		esomeprazole sodium 40 MG ....	222
ergocalciferol SOLN OR 8000 UNIT/ML .....	228	erythromycin ethylsuccinate TABS 140		estazolam .....	136
ERGOLOID MESYLATES .....	79	erythromycin lactobionate 500 MG 140		ESTRACE CREA (Use estradiol vaginal) .....	227
ergoloid mesylates TABS .....	217	ERYTHROMYCIN POWD .....	140	ESTRACE TABS (Use estradiol) .	126
ERGOTAMINE TARTRATE POWD 178		erythromycin stearate TABS 250 MG 140		estradiol & norethindrone acetate TABs .....	126
ergotamine w/ caffeine SUPP ....	178	ESBERITOX CHEW .....	185	ESTRADIOL BENZOATE .....	79
ERLEADA .....	54	ESBRIET CAPS (Use pirfenidone) 218		ESTRADIOL CYPIONATE .....	79
ERLOTINIB HYDROCHLORIDE ..79		ESBRIET TABS (Use pirfenidone) 218		estradiol GEL .....	126
ERMEZA SOLN OR .....	220	ESCITALOPRAM OXALATE .....	79	ESTRADIOL HEMIHYDRATE ....	79
ERTACZO .....	110	escitalopram oxalate SOLN .....	31	ESTRADIOL MICRONIZED .....	79
ERVEBO .....	225	escitalopram oxalate TABS 10 MG 31		ESTRADIOL POWD .....	79
ERYGEL GEL (Use erythromycin (acne aid)) .....	107	escitalopram oxalate TABS 20 MG 31		estradiol PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR .....	126
ERYPED 200 SUSR (Use erythromycin ethylsuccinate) .....	140	escitalopram oxalate TABS 5 MG .	31	estradiol PTTW 0.0375 MG/24HR 126	
ERYPED 400 SUSR (Use erythromycin ethylsuccinate) .....	140	ESGIC TABS (Use butalbital- acetaminophen-caffeine) .....	10	estradiol PTWK .....	126
erythromycin (acne aid) GEL .....	107	esmolol hcl SOLN 100 MG/10ML .	65	estradiol TABS .....	126
erythromycin (acne aid) PADS ...	107	esmolol hcl-sodium chloride .....	65	estradiol vaginal CREA .....	227
erythromycin (acne aid) SOLN ...	107	ESMOLOL HYDROCHLORIDE INWATER DOUBLE STRENGTH SOLN .....	65	estradiol vaginal TABS .....	227
erythromycin (ophth) .....	200	ESMOLOL HYDROCHLORIDE INWATER SOLN .....	65	estradiol valerate .....	126
ERYTHROMYCIN .....	200			ESTRADIOL VALERATE CRYs ...	79
erythromycin base CPEP .....	140			ESTRADIOL VALERATE POWD ..	79
ERYTHROMYCIN BASE POWD .	140			ESTRING RING .....	227
erythromycin base TABS .....	140			ESTRIOL .....	79
erythromycin base TBEC 500 MG 140					

ESTRIOL MICRONIZED .....	79	MCG-1 MG .....	100	EVOCLIN FOAM (Use clindamycin phosphate (topical)) .....	107
ESTROFACTORS TABS .....	190	ethynodiol diacet & eth estrad 50 MCG-1 MG .....	100	EVOLUTION AUTOCODE DEVI .	144
ESTRONE CRYSTALS .....	79	etodolac CAPS .....	8	EVOTAZ .....	61
ESTRONE POWD .....	79	etodolac TABS .....	8	EVRYSDI .....	195
eszopiclone .....	136	etodolac TB24 .....	8	EVUSHELD .....	204
ethacrynate sodium .....	123	etomidate .....	129	EXCELL-RDT SF BASE POWD .	211
ethacrynic acid .....	123	ETOMIDATE .....	79	EXELON 13.3 MG/24HR (Use rivastigmine) .....	215
ETHAMBUTOL HCL POWD .....	52	etonogestrel-ethinyl estradiol ....	101	EXELON 4.6 MG/24HR, 9.5 MG/24HR (Use rivastigmine) ....	215
ethambutol hcl TABS .....	52	ETOPOPHOS .....	55	exemestane .....	54
ETHANOL 190 PROOF .....	96	etravirine 100 MG .....	61	EXFORGE (Use amlodipine besylate-valsartan) .....	47
ETHER .....	96	etravirine 200 MG .....	61	EXFORGE HCT (Use amlodipine-valsartan-hydrochlorothiazide) ....	47
ETHINYL ESTRADIOL .....	126	EUCALYPTOL .....	79	EXJADE TBSO (Use deferasirox) .	39
ETHOSUXIMIDE .....	79	EUCALYPTUS FLAVOR OIL ....	208	EXPAREL .....	139
ethosuximide CAPS .....	29	EUCALYPTUS OIL .....	96	EXTAVIA KIT .....	216
ethosuximide SOLN .....	29	EUCRISA .....	119	EXTENCILLINE SUSR .....	204
ETHOXY DIGLYCOL .....	77	EUGENOL .....	96	EXTINA FOAM (Use ketoconazole (topical)) .....	110
ETHOXY DIGLYCOL NF/EP HIGH PURITY .....	77	EUGENOL FLAVOR LIQD .....	208	EXTRANEAL .....	186
ETHOXY ETHOXY ETHANOL REAGENT .....	77	EULEXIN .....	54	EYE HEALTH CAPS .....	189
ETHYL ACETATE .....	211	EVAMIST SOLN .....	126	EYE MULTIVITAMIN CAPS .....	189
ETHYL ALCOHOL 190 PROOF ..	96	EVANS BLUE .....	205	EYE MULTIVITAMIN/LUTEIN CAPS .	189
ETHYL ALCOHOL 200 PROOF .	210	EVEKEO ODT TBDP .....	2	EYLEA SOSY .....	199
ETHYL ALCOHOL 95 %, 100 % .	210	EVEKEO TABS (Use amphetamine sulfate) .....	2	EYSUVIS SUSP .....	201
ETHYL ALCOHOL SDA-40B 190 PROOF .....	96	everolimus (immunosuppressant) 185		ezetimibe .....	45
ETHYL OLEATE .....	79	EVERSENSE E3 SMART TRANSMITTER .....	144	ezetimibe-simvastatin .....	43
ETHYL VANILLIN .....	79	EVERSENSE SMART TRANSMITTER .....	144	FABIOR FOAM .....	107
ETHYLCELLULOSE .....	79	EVISTA (Use raloxifene hcl) ....	125		
ETHYLENEDIAMINE .....	79	EVKEEZA .....	43		
ethynodiol diacet & eth estrad 35					

FAGRON CAPFILL PRO	211	FDC GREEN #3	206	fenofibrate TABS 54 MG	44
FAGRON DISPERSAPRO	211	FDC RED #3	206	FENOFIBRATE TABS	44
FAGRON VERSIFIX LIQD	213	FDC RED 40	206	fenofibric acid	44
famciclovir	63	FDC YELLOW 5 ALUMINUM LAKE	206	FENOGLIDE TABS (Use fenofibrate)	44
FAMCICLOVIR	80	206			
FAMOTIDINE	80	FDC YELLOW 6	206	fenoprofen calcium CAPS 400 MG	8
famotidine in nacl SOLN	221	fe fum-iron polysacch complex-fa-b		FENOPROFEN CALCIUM POWD	8
famotidine SOLN 20 MG/2ML, 40		complex-c-zn-mn-cu	133	fenoprofen calcium TABS	8
MG/4ML, 200 MG/20ML	221	febuxostat	131	FENSOLVI SC	125
famotidine SUSR	221	febuxostat 80 MG	131	fentanyl citrate LPOP	11
famotidine TABS 10 MG	221	felbamate SUSP	28	FENTANYL CITRATE POWD	11
famotidine TABS 20 MG, 40 MG	221	felbamate TABS	28	FENTANYL CITRATE SOLN IJ (Use	
FANAPT	57	FELBATOL SUSP (Use felbamate)	28	fentanyl citrate)	12
FANAPT TITRATION PACK	57	FELBATOL TABS (Use felbamate)	28	fentanyl citrate SOLN IJ 50 MCG/ML,	
FARESTON (Use toremifene citrate)		FELDENE CAPS (Use piroxicam)	8	100 MCG/2ML, 250 MCG/5ML, 500	
	54	felodipine	67	MCG/10ML, 1000 MCG/20ML, 2500	
FARXIGA (Use dapagliflozin		FEMARA (Use letrozole)	54	MCG/50ML	11
propanediol)	37	FEMRING	227	FENTANYL CITRATE SOLN XX 500	
FARXIGA	37	FENBENDAZOLE	80	MG/50ML	12
FASENRA PEN SOAJ	20	FENOFIBRATE	80	FENTANYL CITRATE SOSY IJ 25	
FASENRA SOSY	20	fenofibrate CAPS	44	MCG/0.5ML, 50 MCG/ML, 100	
FATTYBLEND MISC	211	fenofibrate micronized 134 MG, 200		MCG/2ML	12
FD&C BLUE #2	206	MG	44	fentanyl citrate SOSY IJ	12
FD&C RED #40	206	fenofibrate micronized 30 MG	44	fentanyl citrate TABS	12
FD&C RED #40 ALUMINUM LAKE		fenofibrate micronized 43 MG, 90		FENTANYL FE	121
206		MG, 130 MG	44	fentanyl PT72 12 MCG/HR, 25	
FD&C YELLOW #5	206	fenofibrate micronized 67 MG	44	MCG/HR, 50 MCG/HR, 75 MCG/HR,	
FD&C YELLOW #6 ALUMINUM		fenofibrate TABS 160 MG	44	100 MCG/HR	12
LAKE	206	fenofibrate TABS 40 MG, 120 MG	44	fentanyl PT72 37.5 MCG/HR, 62.5	
FDC BLUE 1 ALUMINUM LAKE	206	fenofibrate TABS 48 MG, 145 MG	44	MCG/HR, 87.5 MCG/HR	12
FDC BLUE 1 POWD	206			FENTORA TABS (Use fentanyl	
FDC BLUE 2	206			citrate)	12
				FER-IN-SOL SOLN (Use ferrous	
				sulfate)	134

FERIVA 21/7 .....	133	FERROUS SULFATE TBEC (Use ferrous sulfate) .....	134	FIORICET/CODEINE 30 MG-40 MG- 50 MG-300 MG (Use butalbital- acetaminophen-caffeine w/ codeine) .	14
FERIVAFA .....	133	ferrous sulfate TBEC .....	134	FIRAZYR SOSY (Use icatibant acetate) .....	131
FERRIC AMMONIUM CITRATE ..	80	FERULIC ACID .....	80	FIRVANQ SOLR OR (Use vancomycin hcl) .....	50
FERRIC CHLORIDE HEXAHYDRATE MISC .....	80	ferumoxytol .....	134	FISH FLAVOR LIQD .....	208
FERRIC SUBSULFATE POWD ...	80	fesoterodine fumarate .....	223	FIXED OIL SUSPENSION .....	210
FERRIC SUBSULFATE SOLN ....	80	FETROJA .....	70	FIZZMIX BASE .....	211
FERRIC SULFATE HYDRATE ...	80	FETZIMA CP24 .....	33	FLAGYL CAPS (Use metronidazole) .	49
FERRIMIN 150 TABS .....	134	FETZIMA TITRATION PACK C4PK 33		FLAREX .....	201
FERROUS BISGLYCINATE CHELATE .....	80	FEVERALL JUNIOR STRENGTH SUPP .....	10	FLAVOR CONCENTRATE/CHLORHEXIDINE CONC .....	208
FERROUS FUMARATE .....	80	FEVERFEW .....	80	FLAVORX LIQD .....	208
ferrous fumarate TABS 324 MG ..	134	FEXOFENADINE HCL .....	80	flavoxate hcl .....	224
FERROUS GLUCONATE DIHYDRATE GRAN .....	80	fexofenadine hcl TABS 180 MG ...	42	flecainide acetate .....	20
FERROUS GLUCONATE DIHYDRATE POWD .....	80	fexofenadine hcl TABS 60 MG ....	42	FLECTOR PTCH EX (Use diclofenac epolamine) .....	111
FERROUS GLUCONATE POWD .	80	FIASP FLEXTOUCH SOPN .....	36	FLEET ENEMA ENEM (Use sodium phosphates) .....	138
FERROUS GLUCONATE TABS 324 MG .....	134	FIASP PENFILL SOCT .....	36	FLEET PEDIATRIC ENEM (Use sodium phosphates) .....	138
FERROUS SULFATE ANHYDROUS POWD .....	134	FIASP PUMPCART SOCT .....	36	FLEET SALINE ENEMA EXTRAVOLUME ENEM (Use sodium phosphates) .....	138
FERROUS SULFATE GRAN ....	134	FIASP SOLN .....	36	FLEQSUVY SUSP (Use baclofen)	193
FERROUS SULFATE HEPTAHYDRATE GRAN .....	134	FIBRICOR (Use fenofibric acid) ..	44	FLEXBUMIN .....	132
FERROUS SULFATE POWD ....	134	FIFTY50 GLUCOSE METER 2.0 KIT 144		FLIBANSERIN .....	80
ferrous sulfate SOLN 15 MG/ML .	134	FILSUVEZ .....	120	FLOMAX (Use tamsulosin hcl) ...	130
ferrous sulfate SOLN 220 MG/5ML, 300 MG/6.8ML .....	134	FINACEA FOAM .....	119	FLONASE ALLERGY RELIEF	
ferrous sulfate SOLN 300 MG/5ML 134		FINACEA GEL (Use azelaic acid) 119			
ferrous sulfate TABS 65 MG, 325 MG .....	134	finasteride .....	130		
		FINASTERIDE CRYSTALS .....	80		
		FINASTERIDE POWD .....	80		
		finingolimod hcl .....	216		
		FINTEPLA .....	26		

CHILDRENS SUSP (Use fluticasone propionate (nasal))	194	FLUMAZENIL	80	PSTE	187
FLOINASE ALLERGY RELIEF SUSP (Use fluticasone propionate (nasal))	194	flunisolide (nasal) 0.025 %	194	FLUOR-I-STRIPS A.T. STRP	202
FLORIVA	182	FLUNISOLIDE ANHYDROUS POWD	21	fluorometholone (ophth) SUSP	201
FLORIVA	191	FLUNIXIN MEGLUMINE	80	fluorouracil (topical) CREA 0.5 %	111
FLOVENT DISKUS AEPB (Use fluticasone propionate (inhalation))	21	fluocinolone acetonide (otic)	203	fluorouracil (topical) CREA 5 %	111
FLOW-EZE VENTED NEEDLE	164	fluocinolone acetonide CREA	114	fluorouracil (topical) SOLN	111
FLUAD 2024-2025	225	fluocinolone acetonide OIL	114	fluorouracil	53
FLUARIX 2024-2025 SUSY	225	fluocinolone acetonide OINT	115	FLUOROURACIL	80
FLUBLOK 2024-2025 SOSY	225	FLUOCINOLONE ACETONIDE POWD	115	fluoxetine hcl (pmdd) TABS	217
FLUCELVAX 2024-2025 SUSP	225	fluocinolone acetonide SOLN	115	FLUOXETINE HCL	80
FLUCELVAX 2024-2025 SUSY	225	fluocinonide CREA 0.05 %	115	fluoxetine hcl CAPS 10 MG, 20 MG	31
FLUCONAZOLE	80	fluocinonide CREA 0.1 %	115	fluoxetine hcl CAPS 40 MG	31
fluconazole in nacl 0.9 %-200 MG/100ML, 0.9 %-400 MG/200ML	41	fluocinonide emulsified base	115	fluoxetine hcl CAPS	31
fluconazole SUSR	41	fluocinonide GEL	115	fluoxetine hcl CPDR	31
fluconazole TABS 100 MG, 200 MG	41	fluocinonide OINT	115	fluoxetine hcl SOLN	31
fluconazole TABS 150 MG	41	FLUOCINONIDE POWD	115	fluoxetine hcl TABS 10 MG	31
fluconazole TABS 50 MG	41	fluocinonide SOLN	115	fluoxetine hcl TABS 20 MG	31
FLUCONAZOLE/SODIUM CHLORIDE	41	FLUORESCEIN	99	fluoxetine hcl TABS 60 MG	31
flucytosine	41	FLUORESCEIN SODIUM	99	FLUOXETINE HYDROCHLORIDE	80
FLUCYTOSINE	80	fluorescein sodium injection IV 10 %	202	FLUOXETINE HYDROCHLORIDE TABS (Use fluoxetine hcl)	31
FLUDROCORTISONE ACETATE POWD	104	fluorescein sodium topical STRP 1 MG	202	fluphenazine decanoate	59
fludrocortisone acetate TABS	104	FLUORESCEIN SODIUM/BENOXINATE HYDROCHLORIDE	202	FLUPHENAZINE DECANOATE LIQD	80
FLULAVAL 2024-2025 SUSY	225	FLUORIDEX SENSITIVITY RELIEF PSTE	187	FLUPHENAZINE DECANOATE POWD	80
flumazenil	39	FLUORIDEX SENSITIVITY RELIEF/SLS FREE PSTE	187	fluphenazine hcl CONC	59
		FLUORIMAX 5000 SENSITIVE		fluphenazine hcl ELIX	59
				fluphenazine hcl SOLN	59
				fluphenazine hcl TABS	59

flurandrenolide CREA .....	115	FLUZONE 2024-2025 SUSY .....	225	FOLTANX RF .....	122
flurandrenolide LOTN .....	115	FLUZONE HIGH-DOSE 2024-2025 SUSY .....	225	FOLTANX TABS .....	122
flurazepam hcl .....	136	F-MELT POWD .....	211	FOLTREXYL TABS .....	134
FLURBIPROFEN POWD .....	8	FML FORTE SUSP .....	201	FOLTIX TABS .....	122
flurbiprofen sodium .....	202	FML LIQUIFILM SUSP (Use fluorometholone (ophth)) .....	201	fomepizole 1.5 GM/1.5ML .....	39
flurbiprofen TABS 100 MG .....	8	FOCALIN TABS (Use dexmethylphenidate hcl) .....	3	FOOD COLOR BLACK .....	206
flutamide .....	54	FOCALIN XR CP24 (Use dexmethylphenidate hcl) .....	3	FOOD COLOR BLUE .....	206
fluticasone furoate-vilanterol .....	22	FOCINVEZ SOLN .....	40	FOOD COLOR BLUE ROYAL ...	206
fluticasone propionate (inhalation) AEPB .....	21	FOLAGENT DHA CAPS .....	189	FOOD COLOR BROWN .....	206
fluticasone propionate (nasal) SUSP . 194		FOLAMED DHA CAPS .....	189	FOOD COLOR FLESH .....	206
FLUTICASONE PROPIONATE ...	80	FOLBIC RF TABS .....	122	FOOD COLOR GREEN LIQD ...	206
fluticasone propionate CREA 0.05 % 115		FOLCYTEINE TABS .....	190	FOOD COLOR GREEN POWD ..	206
fluticasone propionate hfa 110 MCG/ACT, 220 MCG/ACT .....	21	FOLDITAM TABS .....	133	FOOD COLOR LIME GREEN ...	206
fluticasone propionate hfa 44 MCG/ACT .....	21	FOLGARD RX TABS .....	133	FOOD COLOR ORANGE .....	206
fluticasone propionate LOTN .....	115	FOLIC ACID POWD .....	133	FOOD COLOR PINK .....	206
fluticasone propionate OINT .....	115	folic acid SOLN .....	133	FOOD COLOR RED .....	206
fluticasone-salmeterol AEPB 100 MCG/ACT-50 MCG/ACT, 250 MCG/ACT-50 MCG/ACT, 500 MCG/ACT-50 MCG/ACT .....	23	folic acid TABS 1 MG .....	133	FOOD COLOR VIOLET .....	206
fluvastatin sodium CAPS .....	44	folic acid TABS 400 MCG .....	133	FOOD COLOR WHITE .....	206
fluvastatin sodium TB24 .....	44	folic acid-vitamin b6-vitamin b12 TABs 10 MG-800 MCG-115 MCG, 25 MG-2.2 MG-1 MG, 25 MG-2.5 MG-1 MG .....	134	FOOD COLOR YELLOW .....	206
fluvoxamine maleate CP24 .....	31	FOLITE .....	134	FORA 6 CONNECT DEVI .....	144
fluvoxamine maleate TABS 100 MG . 31		FOLIVANE-F .....	134	FORA G20 BLOOD GLUCOSE MONITORING SYSTEM KIT ....	144
fluvoxamine maleate TABS 25 MG, 50 MG .....	31	FOLIVANE-OB .....	191	FORA G30A BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	144
FLUZONE 2024-2025 SUSP .....	225	FOLIVANE-PLUS .....	134	FORA GD20 BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	144
		FOLIXAPURE TABS .....	134	FORA GD50 BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	144
		FOLIXATE TABS .....	134	FORA GTEL BLOOD GLUCOSE MONITORING SYSTEM/MULTI- FUNCTIONAL DEVI .....	144
				FORA PREMIUM V10 BLE BLOOD	



GLUCOSE MONITORING SYSTEM DEVI .....	144	FORACARE TEST N GO BLOODGLUCOSE MONITORING SYSTEM DEVI .....	144	FRAGMIN SOSY .....	24
FORA TEST N GO ADV MOBILE MULTI-FUNCTIONAL MONITORING SYSTEM DEVI .....	144	FORFIVO XL TB24 (Use bupropion hcl) .....	30	FRAICHE 5000 PREVI .....	187
FORA TEST N' GO ADVANCE MULTI-FUNCTIONING MONITORING SYSTEM DEVI ...	144	FORMOTEROL FUMARATE .....	80	FRAICHE 5000 SENSITIVE GEL	187
FORA TEST N' GO VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	144	formoterol fumarate NEBU .....	23	FREEDOM ADAPTADERM .....	213
FORA TN'G ADVANCE PRO MULTI- FUNCTIONAL MONITORING SYSTEM DEVI .....	144	FORSKOLIN .....	80	FREEDOM CEPAPRO .....	213
FORA TN'G VOICE BLOOD GLUCOSE MONITORING SYSTEM KIT .....	144	FORTEO SOPN (Use teriparatide (recombinant)) .....	124	FREEDOM ESTERDERM .....	77
FORA V10 BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI .....	144	FORTESTA GEL TD (Use testosterone) .....	16	FREEDOM LOLLIPOP BASE MISC 211	
FORA V12 BLOOD GLUCOSE MONITORING SYSTEM/NO- CODING DEVI .....	144	FORTISCARE T1 SELF- MONITORING BLOOD GLUCOSE SYSTEM DEVI .....	145	FREEDOM ODT BASE POWD ..	211
FORA V12 BLOOD GLUCOSE MONITORING SYSTEM/TALKING DEVI .....	144	FOS-A .....	210	FREEDOM SILOMAC ANHYDROUS .....	213
FORA V20 BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	144	FOSAMAX PLUS D .....	124	FREEDOM SIMPLECAP POWDER .	211
FORA V30A BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	144	FOSAMAX TABS 70 MG (Use alendronate sodium) .....	124	FREESTYLE FREEDOM LITE KIT 145	
FORA V30A BLOOD GLUCOSE MONITORING SYSTEM KIT .....	144	fosamprenavir calcium TABS .....	61	FREESTYLE INSULINX BLOODGLUCOSE TEST STRIPS STRP .....	121
FORACARE GD40 BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	144	fosaprepitant dimeglumine SOLR .	40	FREESTYLE LIBRE 14 DAY/READER/FLASH MONITORING SYSTEM .....	145
FORACARE PREMIUM V10 BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	144	foscarnet sodium 6000 MG/250ML 63		FREESTYLE LIBRE 14 DAY/SENSOR/FLASH MONITORING SYSTEM .....	145
		fosfomycin tromethamine .....	51	FREESTYLE LIBRE 2/READER/FLASH GLUCOSE MONITORING SYSTEM .....	145
		fosinopril sodium & hydrochlorothiazide .....	47	FREESTYLE LIBRE 2/SENSOR/FLASH GLUCOSE MONITORING SYSTEM .....	145
		fosinopril sodium .....	45	FREESTYLE LIBRE 3 PLUS/SESONR/GLUCOSE MONITORING SYSTEM .....	145
		fosinopril sodium 20 MG, 40 MG ..	45	FREESTYLE LIBRE 3/READER/GLUCOSE MONITORING SYSTEM .....	145
		fosphenytoin sodium .....	28		
		FOSRENOL CHEW (Use lanthanum carbonate) .....	129		
		FOSRENOL PACK .....	129		
		FRAGMIN SOLN 10000 UNIT/4ML 24			

FREESTYLE LIBRE 3/SENSOR/GLUCOSE MONITORING SYSTEM .....	145	FUROSEMIDE POWD .....	123	GAMMAKED 1 GM/10ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....	204
FREESTYLE LIBRE/READER/FLASH MONITORING SYSTEM .....	145	furosemide SOLN IJ 10 MG/ML ..	123	GAMUNEX-C 1 GM/10ML, 2.5 GM/25ML, 5 GM/50ML, 10 GM/100ML, 20 GM/200ML .....	204
FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	145	furosemide SOLN OR 10 MG/ML, 40 MG/5ML .....	123	ganciclovir sodium SOLR .....	63
FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM KIT .....	145	furosemide TABS .....	123	GANCICLOVIR SOLN .....	63
FREESTYLE LITE BLOOD GLUCOSE MONITORING SYSTEM KIT .....	145	FYCOMPA SUSP .....	25	GARDASIL 9 SUSP .....	225
FREESTYLE LITE TEST STRIPS STRP .....	121	FYCOMPA TABS .....	25	GARDASIL 9 SUSY .....	225
FREESTYLE PRECISION NEO BLOOD GLUCOSE MONITORING SYSTEM KIT .....	145	gabapentin (once-daily) TABS ...	217	GARDENIA FRAGRANCE .....	80
FREESTYLE PRECISION NEO BLOOD GLUCOSE TEST STRIPS STRP .....	121	GABAPENTIN .....	80	gatifloxacin (ophth) .....	200
FREESTYLE PRECISION NEO BLOOD GLUCOSE TEST STRIPS STRP .....	121	gabapentin CAPS .....	26	GATIFLOXACIN SESQUIHYDRATE .....	80
FREESTYLE TEST STRIPS STRP 121		gabapentin SOLN 250 MG/5ML ...	26	GAVRETO .....	55
FRESENIUS PROPOVEN 2% EMUL .....	129	gabapentin SOLN .....	26	GE100 BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	145
FRESH LINEN FRAGRANCE .....	71	gabapentin TABS 600 MG .....	26	GE100 BLOOD GLUCOSE MONITORING SYSTEM KIT .....	145
FRESHKOTE PF .....	198	gabapentin TABS 800 MG .....	26	GELATIN .....	211
FROVA (Use frovatriptan succinate) 178		GABITRIL (Use tiagabine hcl) ....	28	GELATIN TYPE A .....	211
frovatriptan succinate .....	178	GADAVIST SOSY .....	122	GELFILM OP .....	202
FRUCTOSE GRAN .....	196	gadobutrol SOLN .....	122	GEL-FLOW .....	135
FRUCTOSE POWD .....	196	gadoterate meglumine SOLN ....	122	GELFOAM DENTAL PACK MISC EX .....	135
FULLERS EARTH .....	99	gadoterate meglumine SOSY ....	122	GELFOAM POWD MT .....	135
fulvestrant SOSY .....	54	GALACTOSE .....	80	GELFOAM SPONGE COMPRESSED MISC EX .....	135
FUMARIC ACID .....	71	GALAFOLD .....	125	GELFOAM SPONGE MISC EX ..	135
FURAZOLIDONE .....	80	galantamine hydrobromide CP24	215	GELFOAM-JMI POWDER KIT ...	135
		galantamine hydrobromide SOLN 215		GELNIQUE GEL 10 % .....	223
		galantamine hydrobromide TABS	215	gemcitabine hcl SOLN .....	53
		GALEN IQ 900 .....	211	gemcitabine hcl SOLR .....	53
		GALZIN .....	184		
		GAMMA-AMINOBUTYRIC ACID .	80		
		GAMMAGARD LIQUID .....	204		
		GAMMAGARD S/D IGA LESS THAN 1MCG/ML SOLR .....	204		

GEMFIBROZIL POWD ..... 44	GILENYA 0.25 MG ..... 216	GLUCO PERFECT 3 BLOOD GLUCOSE MONITORING SYSTEM/VOICE DEVI ..... 145
gemfibrozil TABS ..... 44	GILENYA 0.5 MG ..... 216	GLUCOCARD 01 BLOOD GLUCOSE METER DEVI ..... 145
GEMTESA ..... 224	GIMOTI SOLN NA ..... 128	GLUCOCARD 01 BLOOD GLUCOSE MONITORING SYSTEM KIT ..... 145
GENADEK STEP 1 CAPS ..... 189	GINGER ROOT ..... 99	GLUCOCARD 01-MINI BLOOD GLUCOSE MONITORING SYSTEM KIT ..... 145
GENADEK STEP 2 CAPS ..... 189	GINSENG (AMERICAN) ..... 73	GLUCOCARD EXPRESSION AUDIO-ENABLED BLOOD GLUCOSE MONITORING KIT ... 145
GENADUR KIT KIT CO ..... 119	GINSENG ROOT ..... 80	GLUCOCARD SHINE CONNEX BLOOD GLUCOSE MONITORING SYSTEM KIT ..... 145
GENERESS FE (Use norethindrone & ethinyl estradiol-fe) ..... 100	GIVLAARI ..... 131	GLUCOCARD SHINE DEVI ..... 145
GENICIN VITA-Q TABS ..... 190	glatiramer acetate SOSY ..... 216	GLUCOCARD SHINE EXPRESS BLOOD GLUCOSE MONITORING SYSTEM KIT ..... 145
GENISTEIN ..... 80	GLEOLAN ..... 120	GLUCOCARD SHINE KIT ..... 145
gentamicin in saline 0.8 MG/ML-0.9 %, 1 MG/ML-0.9 %, 1.2 MG/ML-0.9 %, 1.6 MG/ML-0.9 %, 2 MG/ML-0.9 % ..... 4	GLEOSTINE 10 MG, 40 MG, 100 MG ..... 53	GLUCOCARD SHINE XL DEVI .. 145
gentamicin sulfate (ophth) SOLN .200	GLIADEL WAFER ..... 53	GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM BLACK KIT ..... 146
gentamicin sulfate (topical) CREA 109	glimepiride 1 MG, 2 MG ..... 38	GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM BLUE KIT ..... 146
gentamicin sulfate (topical) OINT 109	glimepiride 4 MG ..... 38	GLUCOCARD VITAL BLOOD GLUCOSE MONITORING SYSTEM PINK KIT ..... 146
gentamicin sulfate IJ ..... 4	GLIPIZIDE POWD ..... 38	GLUCOCARD X-METER KIT .... 146
gentamicin sulfate IJ ..... 4	glipizide TABS 5 MG, 10 MG ..... 38	GLUCOCOM AUTOLINK TELEMONITORING SYSTEM MISC .
GENTAMICIN SULFATE POWD .109	glipizide TABS ..... 38	
GENTIAN VIOLET POWD ..... 110	glipizide TB24 ..... 38	
GENVOYA ..... 61	glipizide-metformin hcl ..... 34	
GEODON (Use ziprasidone hcl) .. 57	GLOPERBA SOLN OR ..... 131	
GEODON (Use ziprasidone mesylate) ..... 57	GLOSTRIPS STRP 1 MG ..... 202	
GERANIUM NATURAL ..... 96	GLUCAGEN HYPOKIT ..... 35	
GERANIUM OIL ..... 96	glucagon (rdna) ..... 35	
GERMALL PLUS LIQD ..... 79	GLUCAGON ..... 120	
GERMANIUM SESQUIOXIDE .... 99	GLUCAGON EMERGENCY KIT (Use glucagon (rdna)) ..... 35	
GHT BLOOD GLUCOSE MONITORING SYSTEM KIT ..... 145	GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR ..... 35	
GILENYA (Use fingolimod hcl) .. 216	GLUCAGON HCL DIAGNOSTIC 120	
	GLUCO PERFECT 3 BLOOD GLUCOSE METER DEVI ..... 145	

146	GLUCOCOM BLOOD GLUCOSE MONITOR DEVI .....	146	GLUCOCOM BLOOD GLUCOSE MONITORING SYSTEM KIT .....	146	GLUCOCOM BLOOD GLUCOSE MONITORING SYSTEM VALUE KIT .....	146	GLUCONAVII BLOOD GLUCOSE MONITORING SYSTEM KIT .....	146	GLUCONOLACTONE .....	80	GLUCOSAMINE HYDROCHLORIDE .....	80	GLUCOSAMINE SULFATE .....	80	GLUCOSAMINE SULFATE POTASSIUM CHLORIDE .....	80	GLUCOSAMINE SULFATE SODIUM CHLORIDE .....	80	GLUCOTROL XL TB24 (Use glipizide) .....	38	GLUMETZA TB24 (Use metformin hcl) .....	34	GLUTARALDEHYDE IN WATER LIQD .....	80	GLUTARALDEHYDE SOLN 24 % .....	81	GLUTATHIONE POWD .....	197	GLUTATHIONE-L POWD .....	197	GLUTATHIONE-L REDUCED POWD .....	197	glyburide micronized 1.5 MG, 3 MG, 6 MG .....	38	GLYBURIDE POWD .....	38	glyburide TABS .....	38	glyburide-metformin .....	34	GLYDATE TABS .....	221	glycerin (laxative) SUPP 2 GM ...	137	GLYCERIN ADULT SUPP (Use glycerin (laxative)) .....	137	GLYCERIN LIQD .....	96	GLYCERIN SOLN .....	96	GLYCERINE LIQD .....	96	GLYCEROL FORMAL LIQD .....	96	GLYCEROL MONOOLEATE .....	81	GLYCERYL MONOSTEARATE FLAK .....	81	glycine (gu irrigant) SOLN 1.5 % .....	130	GLYCINE (L) POWD .....	130	GLYCINE POWD .....	130	GLYCINE SOYA PROTEIN .....	96	GLYCOFUROL .....	81	GLYCOLIC ACID CRYST .....	71	GLYCOLIC ACID GRAN .....	71	GLYCOPYRROLATE .....	81	glycopyrrolate SOLN IJ .....	221	GLYCOPYRROLATE SOSY IJ 0.6 MG/3ML .....	221	glycopyrrolate SOSY IJ .....	221	glycopyrrolate TABS 1 MG, 2 MG 221	221	GLYCOPYRROLATE TABS .....	221	GLYCOSAMINOGLYCANS .....	81	GLYCYRRHIZIC ACID .....	81	GLYNASE (Use glyburide micronized) .....	38	GLYRX-PF SOLN IJ .....	221	GLYRX-PF SOSY IJ .....	221	GLYXAMBI .....	34	GNP BORIC ACID POWD .....	99	GNP CALAMINE PLUS SPRAY AERO .....	118	GNP CINNAMON OIL .....	96	GNP EASY TOUCH GLUCOSE MONITORING SYSTEM DEVI ...	146	GNP EASY TOUCH GLUCOSE MONITORING SYSTEM/NO CODING DEVI .....	146	GNP ELECTROLYTE POWDER PACK .....	181	GNP EUCALYPTUS OIL .....	96	GNP PAIN RELIEF NIGHTTIME	135	GNP PEPPERMINT SPIRIT .....	96	GNP SODIUM SILICATE .....	96	GNP TRUE METRIX AIR SELFMONITORING BLOOD GLUCOSE METER KIT .....	146	GNP TRUE METRIX SELF MONITORING BLOOD GLUCOSE METER KIT .....	146	GOJJI MULTI-FUNCTIONAL MONITORING SYSTEM DEVI ...	146	GOJJI MULTI-FUNCTIONAL MONITORING SYSTEM WELCOME KIT KIT .....	146	GOLD SODIUM THIOMALATE ...	81	GOLYTELY SOLR (Use peg 3350-kcl-sod bicarb-sod chloride-sod sulfate) .....	137	GONITRO PACK .....	18	GOODSENSE ELECTROLYTE ADVANTAGE CARE SOLN .....	181	GOODSENSE ELECTROLYTE	
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POWDER PACK .....	181	GRISEOFULVIN MICRONIZED ..	81	35
GOODSENSE ISOPROPYL ALCOHOL XX .....	96	griseofulvin microsize SUSP .....	41	GVOKE HYOPEN 2-PACK SOAJ 35
GOODSENSE PREMIUM BLOODGLUCOSE MONITORING SYSTEM KIT .....	146	griseofulvin microsize TABS .....	41	GVOKE KIT SOLN .....
GOPRELTO .....	194	griseofulvin ultramicrosize .....	41	35
GRALISE MISC .....	217	GUAIACOL .....	96	GVOKE PFS SOSY 1 MG/0.2ML ..
GRALISE TABS (Use gabapentin (once-daily)) .....	217	GUAIFENESIN POWD .....	106	35
GRALISE TABS .....	217	guaifenesin TB12 1200 MG .....	106	GYMNEMA SYLVESTRIS LEAF ..
GRAMICIDIN D .....	81	guaifenesin TB12 600 MG .....	106	81
granisetron hcl SOLN IV 1 MG/ML, 4 MG/4ML .....	39	guaifenesin-codeine SOLN .....	105	GYNAZOLE-1 .....
granisetron hcl TABS .....	39	guaifenesin-codeine SYRP .....	105	226
GRAPE CONCORD OS LIQD ...	208	GUANABENZ ACETATE .....	81	HADLIMA PUSH TOUCH SOAJ ....
GRAPE FLAVOR LIQD .....	208	GUANETHIDINE HEMISULFATE	81	6
GRAPE SEED OIL .....	81	guanfacine hcl (adhd) .....	2	HADLIMA SOSY .....
GRAPEFRUIT FLAVOR PINK OIL 208		guanfacine hcl .....	46	6
GRAPEFRUIT OIL .....	96	GUANIDINEACETIC ACID .....	81	HAEGARDA SOLR SC .....
GRAPSEED OIL .....	81	GUAR GUM .....	81	132
GRASTEK SUBL .....	4	GUARANA SEED EXTRACT ....	81	HAIR/SKIN/NAILS CAPS .....
GREEN APPLE OS LIQD .....	208	GUARDIAN 4 GLUCOSE SENSOR .		189
GREEN SOAP .....	81	146		halcinonide CREA .....
GREEN TEA .....	79	GUARDIAN 4 TRANSMITTER KIT		115
GREEN TEA EXTRACT LIQD .....	81	146		HALCION 0.25 MG (Use triazolam)
GREEN TEA OIL FRAGRANCE ..	81	GUARDIAN CONNECT		136
GRILLED BEEF FLAVOR NATURAL OIL SOLUBLE LIQD .....	208	TRANSMITTER .....	146	HALDOL DECANOATE 100 (Use haloperidol decanoate) .....
GRILLED CHICKEN FLAVOR NATURAL OIL MISCIBLE LIQD ..	208	GUARDIAN LINK 3 TRANSMITTER KIT .....	146	58
GRISEOFULVIN .....	81	208		HALDOL DECANOATE 50 (Use haloperidol decanoate) .....
		GUM ARABIC MILLED .....	211	58
		GUM ARABIC SPRAY-DRIED ..	211	HALOBETASOL PROPIONATE CREA ....
		GUM BASE GELATIN .....	210	115
		GVOKE HYOPEN 1-PACK SOAJ		halobetasol propionate OINT .....
				115
				HALOG CREA (Use halcinonide) 115
				HALOG OINT .....
				115
				HALOG SOLN .....
				115
				HALOPERIDOL .....
				81
				haloperidol decanoate .....
				58
				HALOPERIDOL DECANOATE ...
				81
				haloperidol lactate CONC .....
				58
				haloperidol lactate SOLN .....
				58
				haloperidol TABS 0.5 MG, 1 MG, 2
				MG, 5 MG, 10 MG .....
				58
				haloperidol TABS 20 MG .....
				58
				HAM FLAVOR LIQD .....
				208

HARVONI PACK .....	63	UNIT/250ML .....	24	HORIZANT .....	217
HARVONI TABS .....	63	HEPARIN SODIUM/NACL 0.45% SOLN IV 0.45 %-12500 UNIT/250ML, 0.45 %-25000 UNIT/250ML .....	24	HORMONE CREAM BASE .....	213
HAVRIX .....	225	HEPARIN SODIUM/SODIUM CHLORIDE SOLN IV 0.45 %-25000 UNIT/250ML, 0.45 %-25000 UNIT/500ML .....	24	HORMONE CREAM BASE BOTANICAL .....	213
HAWTHORN BERRY .....	81	HEPES .....	81	HRT BASE .....	213
HEALON5 PRO SOSY .....	202	HEPLISAV-B SOSY .....	225	HRT BASE FOR MEN .....	213
HEALTHPRO BLOOD GLUCOSE MONITORING SYSTEM KIT .....	146	HEPSERA (Use adefovir dipivoxil) 63		HRT BOTANICAL .....	213
HEALTHY EYES SUPERVISION2 CAPS .....	189	HEPTAMINOL .....	81	HRT BOTANICAL BASE .....	213
HEMADY TABS .....	103	HERCEPTIN 150 MG .....	54	HRT BOTANICAL BASE .....	213
HEMANGEOL SOLN OR .....	65	HERCEPTIN HYLECTA .....	55	HRT CREAM BASE .....	213
HEMATEX LIQD .....	134	HERZUMA .....	54	HRT CREAM BASE WOMEN ...	213
HEMATEX POLYSACCHARIDE IRON COMPLEX TABS .....	134	hetastarch (hes /0.7 or /0.75) in sodium chloride .....	132	HRT ESSENTIAL CREAM .....	213
HEMATOXYLIN .....	81	HETLIOZ CAPS (Use tasimelteon) 137		HRT HEAVY .....	213
HEMLIBRA 12 MG/0.4ML .....	131	HETLIOZ LQ SUSP .....	137	HRT NATURAL LOTION .....	213
HEMOCYTE PLUS CAPS .....	134	HEXTEND .....	132	HUBER NEEDLE 20GX3/4"/RIGHT ANGLE .....	164
heparin (porcine) in sodium chloride SOLN IV 0.9 %-1000 UNIT/500ML, 0.9 %-2000 UNIT/L .....	24	HIBERIX SOLR IJ .....	224	HUBER NEEDLE/19GX3/4"/RIGHT ANGLE .....	164
heparin sodium (porcine) lock flush 10 UNIT/ML, 100 UNIT/ML .....	24	HIGH POTENCY MULTIVITAMIN TABS .....	190	HUBER NEEDLE/20G X 1- 1/4"/STRAIGHT .....	164
heparin sodium (porcine) SOLN IJ 1000 UNIT/ML, 5000 UNIT/0.5ML, 5000 UNIT/ML, 10000 UNIT/ML, 20000 UNIT/ML .....	24	HISTAMINE PHOSPHATE CRYSTALS .81		HUBER NEEDLE/22GX1-1/4"/RIGHT ANGLE .....	164
HEPARIN SODIUM .....	81	HM BORIC ACID POWD .....	99	HUBER NEEDLE/RIGHT ANGLE19G X 1" .....	164
HEPARIN SODIUM SOLN IJ 5000 UNIT/ML .....	24	HM ISOPROPYL RUBBING ALCOHOL XX .....	96	HUBER NEEDLE/RIGHT ANGLE20G X 1" .....	164
HEPARIN SODIUM SOSY IJ 5000 UNIT/0.5ML .....	24	HOMATROPINE METHYLBROMIDE POWD .....	99	HUBER NEEDLE/RIGHT ANGLE20G X 1-1/2" .....	164
HEPARIN SODIUM/D5W .....	24	HOME PAP KIT .....	121	HUBER NEEDLE/RIGHT ANGLE22G X 1-1/2" .....	164
HEPARIN SODIUM/DEXTROSE 25000 UNIT/500ML-5 %, 5 %-25000		HONEY ALMOND FRAGRANCE .81		HUBER NEEDLE/RIGHT ANGLE22G X 3/4" .....	164
		HONEY FLAVOR LIQD .....	208	HUBER NEEDLE/STRAIGHT 19GX	

1-1/4" .....	164	PNKT 80 MG/0.8ML .....	6	bitartrate-homatropine methylbromide) .....	104
HUBER NEEDLE/STRAIGHT 20GX 1" .....	164	HUMIRA PEN-PEDIATRIC UC STARTER PACK PNKT .....	6	HYDRALAZINE HCL .....	81
HUBER NEEDLE/STRAIGHT 20GX 1-1/2" .....	164	HUMIRA PEN-PS/UV STARTER PNKT .....	6	hydralazine hcl SOLN .....	49
HUBER NEEDLE/STRAIGHT 22GX1" .....	164	HUMIRA PSKT 10 MG/0.1ML, 20 MG/0.2ML .....	6	hydralazine hcl TABS .....	49
HUBER NEEDLE/STRAIGHT 22GX1-1/2" .....	164	HUMIRA PSKT 40 MG/0.4ML .....	6	HYDRALYTE FREEZER POPS SOLN .....	181
HULIO AJKT .....	6	HUMIRA PSKT 40 MG/0.8ML .....	7	HYDRALYTE PACK .....	181
HULIO PSKT .....	6	HUMIRA PSKT .....	6	HYDRALYTE SOLN .....	181
HUMALOG JUNIOR KWIKPEN SOPN .....	36	HUMULIN 70/30 KWIKPEN SUPN	36	HYDRATING ELECTROLYTE PACK	181
HUMALOG MIX 50/50 KWIKPEN SUPN .....	36	HUMULIN 70/30 SUSP .....	36	HYDRAZINE SULFATE .....	81
HUMALOG MIX 50/50 SUSP .....	36	HUMULIN N KWIKPEN SUPN ....	36	HYDREA (Use hydroxyurea) .....	55
HUMALOG MIX 75/25 KWIKPEN SUPN .....	36	HUMULIN N SUSP .....	36	HYDROCAINE .....	115
HUMALOG MIX 75/25 SUSP .....	36	HUMULIN R SOLN IJ .....	36	HYDROCHLORIC ACID .....	71
HUMALOG SOLN IJ .....	36	HUMULIN R U-500 (CONCENTRATED) SOLN SC ....	36	hydrochlorothiazide CAPS .....	124
HUMALOG TEMPO PEN SOPN ..	36	HUMULIN R U-500 KWIKPEN SOPN SC .....	36	HYDROCHLOROTHIAZIDE POWD	124
HUMAN ALBUMIN GRIFOLS ...	132	HUPERZINE SERRATE A .....	81	hydrochlorothiazide TABS 12.5 MG	124
HUMAN CHORIONIC GONADOTROPIN .....	77	HW EMBRACE PRO BLOOD GLUCOSE METER DEVI .....	146	hydrochlorothiazide TABS 25 MG, 50 MG .....	124
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT 80 MG/0.8ML .....	6	HW EMBRACE TALK BLOOD GLUCOSE MONITOR DEVI .....	146	hydrocodone bitartrate CP12 .....	12
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK PSKT ..	6	HW EMBRACE TALK BLOOD GLUCOSE MONITORING SYSTEM KIT .....	146	HYDROCODONE BITARTRATE CRYS .....	81
HUMIRA PEN PNKT 40 MG/0.4ML	6	HYALURONATE SODIUM .....	81	HYDROCODONE BITARTRATE POWD .....	81
HUMIRA PEN PNKT 40 MG/0.8ML	6	HYALURONIC ACID HYDROLYZED .....	81	hydrocodone bitartrate T24A .....	12
HUMIRA PEN PNKT 80 MG/0.8ML	6	HYALURONIC ACID SODIUM ....	81	hydrocodone bitartrate-homatropine methylbromide SOLN .....	104
HUMIRA PEN PNKT .....	6	HYALURONIC ACID SODIUM SALT .....	81	hydrocodone bitartrate-homatropine methylbromide TABS .....	104
HUMIRA PEN-CD/UC/HS STARTER		HYCODAN SOLN (Use hydrocodone		hydrocodone polistirex- chlorpheniramine polistirex SUER	

105	HYDROCORTISONE ACETATE POWD .....	116	hydromorphone hcl TABS 4 MG ...	12
hydrocodone-acetaminophen SOLN 108 MG/5ML-2.5 MG/5ML, 217 MG/10ML-5 MG/10ML, 325 MG/15ML-7.5 MG/15ML .....	15	hydrocortisone acetate w/ pramoxine CREA EX 1 %-1 % .....	17	hydromorphone hcl TABS 8 MG ...
hydrocodone-acetaminophen TABS 300 MG-10 MG, 300 MG-5 MG, 300 MG-7.5 MG .....	15	hydrocortisone butyrate CREA ...	116	hydromorphone hcl TB24 .....
hydrocodone-acetaminophen TABS 325 MG-10 MG, 325 MG-5 MG, 325 MG-7.5 MG .....	15	hydrocortisone butyrate hydrophilic lipo base .....	116	HYDROMORPHONE HYDROCHLORIDE SOLN IJ .....
hydrocodone-ibuprofen 10 MG-200 MG, 5 MG-200 MG, 7.5 MG-200 MG .	15	hydrocortisone butyrate LOTN ...	116	HYDROQUINONE POWD .....
HYDROCORT LOTION COMPLETEKIT THPK .....	115	hydrocortisone butyrate OINT ....	116	HYDROXATE GEL .....
hydrocortisone (intrarectal) .....	17	hydrocortisone butyrate SOLN ...	116	HYDROXOCOBALAMIN .....
hydrocortisone (rectal) EX 1 % ....	17	HYDROCORTISONE COMPLETE KIT THPK .....	116	hydroxocobalamin acetate SOLN
hydrocortisone (rectal) EX 2.5 % ..	17	HYDROCORTISONE HEMISUCCINATE MONOHYDRATE .....	81	133
hydrocortisone (topical) CREA 0.5 %	115	HYDROCORTISONE MICRONIZED .....	116	HYDROXOCOBALAMIN HYDROCHLORIDE .....
hydrocortisone (topical) CREA 1 %	115	HYDROCORTISONE POWD ....	116	81
hydrocortisone (topical) CREA 2.5 %	115	hydrocortisone TABS .....	103	HYDROXYAMPHETAMINE HYDROBROMIDE .....
hydrocortisone (topical) LOTN 2.5 % .	115	hydrocortisone valerate CREA ...	116	81
hydrocortisone (topical) OINT 1 %	115	hydrocortisone valerate OINT ....	116	HYDROXYCHLOROQUINE SULFATE .....
hydrocortisone (topical) OINT 2.5 % .	115	hydrocortisone w/acetic acid ....	203	81
hydrocortisone acetate (rectal) ....	17	HYDROCORTISONE/ACETIC ACID (Use hydrocortisone w/acetic acid)	203	hydroxychloroquine sulfate 100 MG, 200 MG .....
hydrocortisone acetate (topical) OINT .....	115	HYDROFLUORIC ACID .....	81	51
HYDROCORTISONE ACETATE MICRONIZED POWD .....	115	hydromorphone hcl LIQD .....	12	51
		HYDROMORPHONE HCL POWD	12	HYDROXYETHYL CELLULOSE 100 CPS POWD .....
		hydromorphone hcl SOLN IJ 1 MG/ML, 2 MG/ML, 4 MG/ML, 10 MG/ML, 50 MG/5ML, 500 MG/50ML .	12	81
		HYDROMORPHONE HCL SUPP .	12	HYDROXYETHYL CELLULOSE 5000 CPS POWD .....
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				HYDROXYETHYL CELLULOSE POWD .....
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				HYDROXYETHYL METHACRYLATE .....
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HYDROXYPROPYL CELLULOSE 75-100 CPS .....82	HYPERHEP B SOLN IM .....204	HYPODERMIC NEEDLE 23GX3/4" 165
HYDROXYPROPYL METHYLCELLULOSE .....82	HYPERHEP B SOSY 110 UNIT/0.5ML .....204	HYPODERMIC NEEDLE 25GX1" 165
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HYPODERMIC NEEDLES 23GX1"		SOAJ .....	IDEBENONE .....	82
165		HYRIMOZ SOAJ 40 MG/0.4ML .....	IDOSE TR IMPL .....	202
HYPODERMIC NEEDLES 23GX1-		HYRIMOZ SOAJ .....	IDOXURIDINE .....	82
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82		ibuprofen SUSP 40 MG/ML, 50	ILUMYA .....	111
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HYPROMELLOSE 4000 MPA-S ..	82	ibuprofen TABS 200 MG .....	IMIDUREA .....	82
HYPROMELLOSE 4000CPS .....	82	ibuprofen TABS 400 MG, 600 MG,	imipenem-cilastatin IV .....	50
HYPROMELLOSE METHOCEL		800 MG .....	IMIPRAMINE HCL POWD .....	33
K100M .....	82	ibuprofen-acetaminophen TABS .....	imipramine hcl TABS .....	33
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IMITREX 20 MG/ACT (Use sumatriptan) .....	178	INBRIJA CAPS .....	56	INOSITOL .....	82
IMITREX 5 MG/ACT (Use sumatriptan) .....	179	INCRUSE ELLIPTA .....	20	INOSITOL HEXANICOTINATE ...	82
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IMITREX STATDOSE REFILL SOCT 6 MG/0.5ML (Use sumatriptan succinate) .....	179	INDERAL LA CP24 (Use propranolol hcl) .....	65	INPEN 100/BLUE/HUMALOG DEVI 165	
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IMODIUM A-D CAPS (Use loperamide hcl) .....	38	indomethacin CPCR .....	8	INPEN 100/PINK/HUMALOG DEVI 166	
IMODIUM A-D TABS (Use loperamide hcl) .....	38	INDOMETHACIN POWD .....	8	INPEN 100/PINK/LILLY/HUMALOG DEVI .....	166
IMOGAM RABIES-HT SOLN 300 UNIT/2ML .....	204	indomethacin sodium .....	8	INPEN 100/PINK/NOVOLOG/FIASP DEVI .....	166
IMOVAX RABIES (H.D.C.V.) SUSR 225		indomethacin SUPP .....	8	INQOVI .....	55
IMPEKLO LOTN .....	116	indomethacin SUSP .....	8	INREBIC .....	55
IMURAN TABS (Use azathioprine) 185		INFANRIX .....	220	INSULIN ASPART FLEXPEN SOPN . 36	
IMVEXXY MAINTENANCE PACK INST .....	227	INFANTS ADVIL SUSP (Use ibuprofen) .....	8	INSULIN ASPART PENFILL SOCT 36	
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		INFINITY BLOOD GLUCOSE MONITORING SYSTEM KIT .....	147	INSULIN ASPART PROTAMINE/INSULIN ASPART SUSP .....	36
		INFINITY CONTROL SOLUTION HIGH SOLN .....	147	INSULIN ASPART SOLN IJ .....	36
		INFINITY VOICE KIT .....	147		
		INFLAMMATION TEST .....	121		
		INFLECTRA SOLR .....	128		
		INFUGEM .....	53		
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		INJECTAFER .....	134		
		INNOPRAN XL .....	65		

INSULIN DEGLUDEC FLEXTOUCH SOPN 100 UNIT/ML .....	36	INVEGA SUSTENNA 117 MG/0.75ML .....	57	IPRATROPIUM BROMIDE MONOHYDRATE POWD .....	20
INSULIN DEGLUDEC FLEXTOUCH SOPN 200 UNIT/ML .....	36	INVEGA SUSTENNA 156 MG/ML	.57	IPRATROPIUM BROMIDE POWD 20	
INSULIN DEGLUDEC SOLN .....	36	INVEGA SUSTENNA 234 MG/1.5ML	57	ipratropium bromide SOLN 0.02 %	20
INSULIN GLARGINE MAX SOLOSTAR SOPN .....	36	INVEGA SUSTENNA 39 MG/0.25ML	57	ipratropium-albuterol SOLN .....	23
INSULIN GLARGINE SOLN .....	36	INVEGA SUSTENNA 78 MG/0.5ML	57	irbesartan .....	46
INSULIN GLARGINE SOLOSTAR SOPN .....	36	INVEGA TRINZA 273 MG/0.88ML	57	irbesartan-hydrochlorothiazide ....	47
INSULIN GLARGINE-YFGN SOLN	36	INVEGA TRINZA 410 MG/1.32ML	57	IRON CHEWS PEDIATRIC CHEW	134
INSULIN GLARGINE-YFGN SOPN	36	INVEGA TRINZA 546 MG/1.75ML	58	IRON FOLATE PLUS .....	134
INSULIN LISPRO JUNIOR KWIKPEN SOPN .....	36	INVEGA TRINZA 819 MG/2.63ML	57	IRON FOLATE-F .....	134
INSULIN LISPRO KWIKPEN SOPN .	36	INVELTYS SUSP .....	201	iron-folic acid-vitamin c-vitamin b6- vitamin b12-zinc .....	134
INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN SUPN .....	36	INVOKAMET TABS .....	34	IROSPAN 24/6 .....	134
INSULIN LISPRO SOLN IJ .....	36	INVOKAMET XR TB24 .....	34	irrigation solutions, physiological	185
INTEGRA F .....	134	IODINE FLAK .....	82	ISENTRESS CHEW 100 MG .....	61
INTEGRA PLUS .....	134	IODINE RESUBLIMED CRYSTALS .....	82	ISENTRESS CHEW 25 MG .....	61
INTELENCE 100 MG (Use etravirine) .....	61	IODINE RESUBLIMED GRAN .....	82	ISENTRESS PACK .....	61
INTELENCE 200 MG (Use etravirine) .....	61	IODINE STRONG .....	82	ISENTRESS TABS .....	61
INTELENCE 25 MG .....	61	iodixanol .....	122	isoflurane .....	130
INTRALIPID .....	196	IODOFORM .....	99	ISOLYTE-P/DEXTROSE 5% ....	181
INTUNIV (Use guanfacine hcl (adhd)) .....	2	IDOQUINOL POWD .....	4	ISOLYTE-S .....	181
INVEGA (Use paliperidone) .....	57	IONOSOL-MB/DEXTROSE 5% .	181	ISOLYTE-S PH 7.4 .....	181
INVEGA HAFYERA .....	57	iopamidol IV .....	122	ISOMETHEPTENE MUCATE ....	82
		IOPANOIC ACID .....	82	ISONIAZID POWD .....	52
		IOPIDINE .....	199	isoniazid SOLN .....	52
		IPOL INACTIVATED IPV .....	225	isoniazid SYRP .....	52
		ipratropium bromide (nasal) 0.03 %	194	isoniazid TABS .....	52
		ipratropium bromide (nasal) 0.06 %	194	ISOPROPAMIDE IODIDE .....	221
				ISOPROPANOL XX .....	96
				ISOPROPYL ALCOHOL XX 70 %, .....	

100 % .....	96	itraconazole SOLN .....	41	JYNNEOS .....	225
isopropyl alcohol XX 91 %, 99 % ..	96	ivabradine hcl TABS .....	69	KABIVEN .....	196
isopropyl alcohol, rubbing XX .....	96	ivermectin (rosacea) .....	119	KAHLUA FLAVOR LIQD .....	208
ISOPROPYL MYRISTATE .....	82	ivermectin .....	18	KALBITOR .....	132
ISOPROPYL PALMITATE .....	96	IVERMECTIN .....	83	KALETRA SOLN (Use lopinavir- ritonavir) .....	61
ISOPROPYL RUBBING ALCOHOL XX .....	96	IXCHIQ .....	225	KALETRA TABS 25 MG-100 MG (Use lopinavir-ritonavir) .....	61
isoproterenol hcl .....	23	IXIARO .....	225	KALETRA TABS 50 MG-200 MG (Use lopinavir-ritonavir) .....	61
ISOPROTERENOL HCL .....	82	IYUZEH SOLN .....	203	KANAMYCIN SULFATE .....	83
ISOPTO ATROPINE SOLN .....	199	JADENU SPRINKLE PACK (Use deferasirox) .....	39	KANJINTI .....	54
ISORDIL TITRADOSE TABS (Use isosorbide dinitrate) .....	18	JADENU TABS (Use deferasirox) .	39	KAOLIN .....	38
ISOSORBIDE .....	82	JALYN (Use dutasteride-tamsulosin hcl) .....	131	KAOLIN COLLOIDAL .....	38
isosorbide dinitrate TABS 40 MG ..	18	JANSSEN COVID-19 VACCINE	225	KAPSPARGO SPRINKLE CS24 ..	65
isosorbide dinitrate TABS 5 MG, 10 MG, 20 MG, 30 MG .....	18	JANUMET XR TB24 .....	34	KAPVAY TB12 (Use clonidine hcl (adhd)) .....	2
isosorbide dinitrate-hydralazine hcl 68		JANUVIA .....	35	KARAYA GUM .....	211
isosorbide mononitrate TABS .....	18	JARDIANCE .....	37	KARBINAL ER SUER .....	42
isosorbide mononitrate TB24 .....	18	JASMINE FRAGRANCE .....	83	KATERZIA .....	67
isosulfan blue .....	120	JATENZO CAPS .....	16	KEDBUMIN .....	132
ISOTRETINOIN .....	82	JELENE .....	213	KEDRAB SOLN .....	204
isotretinoin 10 MG, 20 MG, 30 MG, 40 MG .....	107	JELMYTO SOLR UL .....	55	KENALOG-10 SUSP .....	103
isotretinoin 25 MG, 35 MG .....	107	JENTADUETO XR TB24 .....	34	KENALOG-80 SUSP .....	103
ISOVUE-250 MULTIPACK IV ....	122	JESDUVROQ .....	133	KENGREAL .....	132
ISOXSUPRINE HCL .....	82	JOENJA .....	184	KEPPRA SOLN OR 100 MG/ML (Use levetiracetam) .....	26
isradipine CAPS .....	67	JOJOBA OIL .....	83	KEPPRA TABS 1000 MG (Use levetiracetam) .....	26
ISTALOL SOLN (Use timolol maleate (ophth)) .....	199	JORNAY PM CP24 .....	3	KEPPRA TABS 250 MG, 750 MG (Use levetiracetam) .....	26
ITRACONAZOLE .....	83	J-TIP KIT W/VIAL ADAPTERS KIT 166		KEPPRA TABS 500 MG (Use levetiracetam) .....	26
itraconazole CAPS .....	41	JUBLIA .....	110		
		JULUCA .....	61		
		JUNIPER TAR .....	96		

KEPPRA XR TB24 (Use levetiracetam) .....	26	KETOROLAC TROMETHAMINE SOLN IJ 30 MG/ML .....	8	sodium (acne)) .....	107
KERALYT GEL (Use salicylic acid) 118		ketorolac tromethamine SOLN IM 30 MG/ML, 60 MG/2ML .....	8	KLEAR GUMMY BASE .....	210
KERENDIA .....	126	KETOROLAC TROMETHAMINE SOLN NA 15.75 MG/SPRAY .....	8	KLONOPIN TABS (Use clonazepam) .....	25
KERYDIN (Use tavaborole) .....	110	ketorolac tromethamine TABS .....	9	KLOXXADO LIQD .....	39
KESIMPTA .....	216	KETOSTIX STRP .....	121	KOJIC ACID .....	99
KETAMINE HCL .....	83	ketotifen fumarate (ophth) 0.035 % 202		KOMBIGLYZE XR (Use saxagliptin- metformin hcl) .....	34
ketamine hcl SOLN IJ .....	129	KETOTIFEN FUMARATE .....	83	KONVOMEF SUSR .....	223
KETAMINE HYDROCHLORIDE ..	83	KETOTIFEN HYDROGEN FUMARATE .....	83	KORSUVA .....	187
KETAMINE HYDROCHLORIDE SOLN IJ 10 MG/ML .....	129	KEVZARA SOAJ .....	7	K-PHOS NEUTRAL (Use pot phosphate monobasic w/ sod phosphate dibasic & monobasic) .	183
ketoconazole (topical) CREA .....	110	KEVZARA SOSY .....	7	K-PHOS NO 2 .....	130
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ketoconazole (topical) SHAM 2 % 110		KIMYRSA .....	50	KRIS-ESTER 236 .....	213
ketoconazole .....	41	KINDERLYTE IMMUNITY PACK .	181	KRISTALOSE PACK .....	137
KETOCONAZOLE .....	99	KINDERLYTE PACK .....	182	KROGER BLOOD GLUCOSE MONITORING KIT KIT .....	147
KETODAN KIT .....	110	KINDERLYTE PREMAX PACK ..	182	KROGER PREMIUM BLOOD GLUCOSE MONITORING KIT KIT	147
KETONE STRP .....	121	KINDERLYTE PREMAX SOLN ..	182	KRYSTAL SF .....	211
KETONE TEST STRIPS STRP ..	121	KINDERLYTE SOLN .....	182	K-TAB TBCR 10 MEQ, 20 MEQ (Use potassium chloride) .....	183
ketoprofen CAPS 25 MG .....	8	KINERET SOSY .....	7	KUDZU ROOT .....	83
ketoprofen CP24 .....	8	KINETIN .....	83	KYMRIAH .....	54
KETOPROFEN MICRONIZED POWD .....	83	KINEVAC .....	120	L-5- METHYLTETRAHYDROFOLICACID CALCIUM .....	83
KETOPROFEN POWD .....	83	KINRIX SUSY .....	220	LABETALOL HCL .....	83
KETOPROFEN ULTRA MICRONIZED POWD .....	83	KISUNLA .....	215	labetalol hcl SOLN .....	64
ketorolac tromethamine (ophth) 0.4 % .....	202	KIT FOR THE PREPARATION OF TECHNETIUM 99M SESTAMIBI	120	labetalol hcl TABS 100 MG .....	64
ketorolac tromethamine (ophth) 0.5 % .....	202	KIWI FRAGRANCE .....	83		
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		KLARON (Use sulfacetamide			

labetalol hcl TABS 200 MG .....64	lactulose (encephalopathy) ..... 129	lamivudine-zidovudine ..... 61
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LABELALOL HYDROCHLORIDE SOSY 10 MG/2ML .....64	L-ALANINE POWD ..... 197	lamotrigine TABS ..... 27
LABELALOL HYDROCHLORIDE/DEXTROSE 5 %-200 MG/200ML ..... 64	LAMICTAL CHEWABLE DISPERSIBLE CHEW (Use lamotrigine) ..... 26	lamotrigine TB24 .....27
LABELALOL HYDROCHLORIDE/SODIUM CHLORIDE 0.72 %-100 MG/100ML, 0.72 %-200 MG/200ML, 0.72 %-300 MG/300ML ..... 64	LAMICTAL ODT KIT (Use lamotrigine) ..... 26	LAMPIT ..... 49
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LACTOSE .....211	lamivudine SOLN ..... 61	lansoprazole TBDD 15 MG .....222
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LACTOSE HYDROUS .....211	lamivudine TABS 300 MG ..... 61	lansoprazole TBDD .....222
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LATANOPROST POWD .....83	LEFLUNOMIDE .....83	LEVBID TB12 (Use hyoscyamine sulfate) .....221
latanoprost SOLN .....203	LEMON BIOFLAVANOID .....83	LEVETIRACETAM .....83
LATANOPROST SOLN .....203	LEMON EXTRACT LIQD .....208	levetiracetam in sodium chloride ..27
LATUDA (Use lurasidone hcl) ....57	LEMON FLAVOR LIQD .....208	levetiracetam SOLN OR 100 MG/ML, 500 MG/5ML .....27
LAURETH-9 POLIDOCANOL ....83	LEMON FLAVOR OIL .....208	levetiracetam SOLN OR 100 MG/ML 27
LAURIC ACID .....83	LEMON OIL .....96	levetiracetam TABS 1000 MG .....27
LAVENDER OIL .....96	LEMONADE FLAVOR OIL .....208	levetiracetam TABS 250 MG, 750 MG .....27
LAVENDER OIL FRAGRANCE ...96	LEMONGRASS OIL .....96	levetiracetam TABS 500 MG .....27
LAVENDER OIL NATURAL .....96	LEMON-LIME SD POWD .....208	levetiracetam TABS 750 MG .....27
L-CARNITINE .....83	LENMELDY .....216	levetiracetam TB24 .....27
L-CARNITINE HCL .....83	LENTOCILIN SUSR .....204	LEVETIRACETAM/SODIUM CHLORIDE .....27
L-CARNOSINE .....77	LESCOL XL TB24 (Use fluvastatin sodium) .....44	levobunolol hcl 0.5 % .....199
L-CITRULLINE .....77	letrozole .....54	levocarnitine (metabolic modifiers) SOLN IV 200 MG/ML .....125
L-CYSTEINE CRYST .....77	LETROZOLE .....83	levocarnitine (metabolic modifiers) SOLN OR 1 GM/10ML .....125
L-CYSTEINE HCL MONOHYDRATE .....77	LEU TECHNELITE .....120	levocarnitine (metabolic modifiers) TABS .....125
L-CYSTEINE HYDROCHLORIDEMONOHYDRATE .....77	LEUCINE POWD XX .....198	LEVOCARNITINE .....83
L-CYSTEINE POWD .....77	LEUCOVORIN CALCIUM .....83	LEVOCETIRIZINE DIHYDROCHLORIDE .....83
L-CYSTINE POWD .....198	leucovorin calcium SOLN IJ 100 MG/10ML, 500 MG/50ML .....55	levocetirizine dihydrochloride TABS 42
LEAD ACETATE TRIHYDRATE POWD .....99	leucovorin calcium SOLR .....55	LEVODOPA POWD .....56
LEAD TETROXIDE .....83	leucovorin calcium TABS .....55	LEVOFLOXACIN HEMIHYDRATE 83
LECITHIN GRAN XX .....196	LEUKERAN .....53	levofloxacin in d5w .....127
LECITHIN ISOPROPYL PALMITATE SOLN .....211	LEUPROLIDE ACETATE .....83	
LECITHIN SOYA GRAN .....90	LEUPROLIDE ACETATE INJ .....54	
LECITHIN SOYA POWD .....90	levalbuterol hcl .....23	
	LEVALBUTEROL HCL .....83	
	levalbuterol tartrate .....23	



levofloxacin SOLN OR .....	127	sulfate) .....	221	LICORICE FLAVOR LIQD .....	208
levofloxacin TABS .....	127	LEXAPRO TABS 10 MG (Use escitalopram oxalate) .....	31	LICORICE ROOT POWD .....	99
LEVOMEFOLATE CALCIUM/N- ACETYLCYSTEINE/MECOBALAMIN /ALGAL POWD .....	122	LEXAPRO TABS 20 MG (Use escitalopram oxalate) .....	31	LIDAFLEX PTCH .....	118
levonorgestrel & eth estradiol TABS 100		LEXAPRO TABS 5 MG (Use escitalopram oxalate) .....	31	LIDOCAINE BASE POWD .....	84
levonorgestrel (emergency oc) 1.5 MG .....	101	LEXIVA SUSP .....	61	lidocaine CREA 4 % .....	118
levonorgestrel-eth estradiol (triphasic) .....	100	LEXIVA TABS (Use fosamprenavir calcium) .....	61	LIDOCAINE CRYST .....	84
levonorgestrel-ethinyl estradiol (91- day) .....	101	L-GLUTAMIC ACID .....	198	lidocaine hcl (cardiac) SOSY .....	20
levonorgestrel-ethinyl estradiol (91- day) 0.03 MG-0.15 MG .....	101	L-GLUTAMIC ACID HCL POWD .....	123	lidocaine hcl (local anesth.) SOLN 139	
levonorgestrel-ethinyl estradiol (continuous) .....	101	L-GLUTAMIC ACID MONOSODIUM 84		lidocaine hcl (mouth-throat) 2 % .....	187
levonorgestrel-ethinyl estradiol-iron 101		L-GLUTAMINE CRYST .....	198	lidocaine hcl (mouth-throat) 4 % .....	187
LEVORPHANOL TARTRATE .....	83	L-GLUTAMINE POWD XX .....	198	LIDOCAINE HCL .....	84
levorphanol tartrate TABS 3 MG ...	12	L-GLUTATHIONE CRYST .....	198	lidocaine hcl CREA 3 %, 4 % .....	118
levorphanol tartrate TABS .....	12	L-HISTIDINE .....	198	lidocaine hcl GEL 2.8 % .....	118
LEVOTHYROXINE SODIUM (T4) .....	83	L-HISTIDINE MONOHYDROCHLORIDE CRYST 198		LIDOCAINE HCL MONOHYDRATE . 84	
LEVOTHYROXINE SODIUM .....	83	L-HISTIDINE MONOHYDROCHLORIDE MONOHYDRATE POWD .....	198	lidocaine hcl PRSY .....	118
levothyroxine sodium CAPS .....	220	LIALDA TBEC (Use mesalamine) 128		lidocaine hcl SOLN .....	118
LEVOTHYROXINE SODIUM SOLN IV .....	220	LIBERTY BLOOD GLUCOSE METER DEVI .....	147	LIDOCAINE HCL SOLN .....	20
LEVOTHYROXINE SODIUM SOLR IV (Use levothyroxine sodium) ...	220	LIBERTY NEXT GENERATION BLOOD GLUCOSE MONITOR DEVI 147		LIDOCAINE HCL- HYDROCORTISONE ACETATE WITH ALOE GEL .....	17
levothyroxine sodium SOLR IV ...	220	LIBERVANT FILM .....	25	LIDOCAINE HYDROCHLORIDE . 84	
levothyroxine sodium TABS .....	220	LICART PT24 .....	111	LIDOCAINE HYDROCHLORIDE MONOHYDRATE .....	84
LEVSIN TABS (Use hyoscyamine sulfate) .....	221	LICORICE DEGLYCYRRHIZINATED .....	83	LIDOCAINE HYDROCHLORIDE SOLN .....	139
LEVSIN/SL SUBL (Use hyoscyamine				LIDOCAINE HYDROCHLORIDE SOSY IV 1 %, 100 MG/5ML .....	139
				lidocaine in d5w 5 %-4 MG/ML, 5 %- 8 MG/ML .....	20
				lidocaine OINT .....	118
				LIDOCAINE POWD .....	84

lidocaine PTCH 4 %, 5 % .....	118	LINOLEIC ACID .....	84	lisinopril TABS 2.5 MG, 5 MG, 10 MG, 20 MG, 30 MG, 40 MG .....	45
lidocaine w/ epinephrine SOLN 1 :100000-1 %, 1 :100000-2 %, 1 :200000-0.5 %, 1 :200000-1.5 %, 1 :200000-2 % .....	138	LINSEED OIL RAW .....	96	L-ISOLEUCINE POWD XX .....	198
LIDOCAINE/EPINEPHRINE SOLN 138		LINZESS .....	129	LISSAMINE GREEN B .....	206
LIDOCAINE/TETRACAINE CREA 7 %-7 % .....	118	LIOOTHYRONINE .....	84	lithium .....	57
lidocaine-hydrocortisone acetate (rectal) CREA EX .....	17	LIOOTHYRONINE SODIUM (T3) ..	84	lithium carbonate CAPS .....	57
lidocaine-hydrocortisone acetate (rectal) KIT .....	17	LIOOTHYRONINE SODIUM .....	84	LITHIUM CARBONATE POWD ...	57
lidocaine-prilocaine CREA .....	118	liothyronine sodium SOLN .....	220	lithium carbonate TABS .....	57
lidocaine-prilocaine KIT .....	118	liothyronine sodium TABS .....	220	lithium carbonate TBCR .....	57
LIDOCAINE-PRILOCAINE-CREAM BASE 2.5 %-2.5 % .....	213	LIP BALM BASE NATURAL .....	213	LITHIUM CITRATE TETRAHYDRATE .....	84
LIDOPURE PATCH .....	118	LIPACTIVE INCA INCHI WO .....	83	LITHOBID TBCR (Use lithium carbonate) .....	57
LIDOTRAL + HYDROCORTISONE LOTN 1 %-5 % .....	116	LIPITOR TABS (Use atorvastatin calcium) .....	44	LITHOSTAT .....	131
LIDOTRAL CREA .....	118	LIPMAX SOLN .....	211	LIVALO (Use pitavastatin calcium) 44	
LIDOTRAL GEL 5 % .....	118	LIPOFEN CAPS (Use fenofibrate) .	44	LIVDELZI .....	129
LIDOTRAN CREA .....	118	LIPOFEN CAPS 50 MG (Use fenofibrate) .....	44	LIVER CONCENTRATE LIQD ...	208
LIKMEZ SUSP .....	49	LIPOIC ACID .....	73	LIVER FLAVOR LIQD .....	208
LIME FLAVOR OIL .....	208	LIPOIC ACID/DL-ALPHA (DL- THIOCTIC ACID) .....	73	LIVER FLAVOR POWD .....	208
LIME OIL .....	96	LIPOIL OIL .....	211	LIVMARLI .....	128
LIMONENE .....	84	LIPOPEN ANHYDROUS .....	213	L-LEUCINE POWD XX .....	198
lincomycin hcl .....	51	LIPOSOMAL HAIR .....	213	L-LYSINE HCL POWD .....	84
LINCOMYCIN HCL .....	84	LIPOVAN BASE CREA .....	213	L-LYSINE MONOHYDROCHLORIDE POWD .....	84
LINEZOLID .....	51	LIQUID I.V. PACK .....	182	L-MENTHOL .....	99
linezolid SOLN .....	51	LIQUIGEL COMPLEX .....	211	L-METHIONINE POWD XX .....	198
linezolid SUSR .....	51	liraglutide .....	35	L-METHYL-B6-B12 TABS .....	122
linezolid TABS .....	51	lisdexamphetamine dimesylate CAPS 2		L-METHYLFOLATE CA ME-CBLNAC .....	122
		lisdexamphetamine dimesylate CHEW . 2		L-METHYLFOLATE CA/P-5-P/ME- CBL .....	122
		lisinopril & hydrochlorothiazide ...	48		
		LISINOPRIL .....	84		

L-METHYLFOLATE CALCIUM ... 84	LOPROX CREA (Use ciclopirox olamine) .....110	hcl) ..... 45
L-METHYL-MC .....122	LOPROX KIT .....110	LOTENSIN HCT 12.5 MG-10 MG, 12.5 MG-20 MG, 25 MG-20 MG (Use benazepril & hydrochlorothiazide) .48
LMX 4 CREA (Use lidocaine) .....118	LOPROX SHAMPOO SHAM (Use ciclopirox) .....110	Ioteprednol etabonate GEL .....201
LO LOESTRIN FE TABS .....101	LOPROX SUSP (Use ciclopirox olamine) .....110	Ioteprednol etabonate SUSP 0.2 % 201
LOCAMETZ KIT ..... 120	loratadine & pseudoephedrine TB12 . 105	Ioteprednol etabonate SUSP 0.5 % 201
LOCOID LIPOCREAM .....116	LORATADINE .....84	LOTREL 10 MG-5 MG, 20 MG-10 MG, 20 MG-5 MG, 40 MG-10 MG (Use amlodipine besylate-benazepril hcl) ..... 48
LOCOID LOTN (Use hydrocortisone butyrate) ..... 116	loratadine TABS .....42	LOTRONEX (Use alosetron hcl) .129
LOCUST BEAN GUM .....77	loratadine TBDP 10 MG ..... 42	LOVASTATIN ..... 84
LODOSYN (Use carbidopa) .....55	LORAZEPAM .....84	lovastatin TABS 10 MG, 20 MG ... 45
LOHIST-D LIQD ..... 105	lorazepam CONC .....19	lovastatin TABS 40 MG .....44
LOKELMA .....186	lorazepam SOLN .....19	LOVAZA (Use omega-3-acid ethyl esters) .....43
LOLLIBASE .....211	lorazepam TABS 0.5 MG, 2 MG ...19	LOVENOX SOLN IJ 300 MG/3ML (Use enoxaparin sodium) .....24
LOLLIPOP BASE .....211	lorazepam TABS 1 MG .....19	LOVENOX SOSY 100 MG/ML, 150 MG/ML (Use enoxaparin sodium) . 24
LOMOTIL TABS (Use diphenoxylate w/ atropine) .....38	LOREEV XR CS24 .....19	LOVENOX SOSY 100 MG/ML, 150 MG/ML (Use enoxaparin sodium) . 25
loperamide hcl CAPS .....38	L-ORNITHINE HYDROCHLORIDE 87	LOVENOX SOSY 30 MG/0.3ML (Use enoxaparin sodium) .....24
LOPERAMIDE HCL POWD .....38	L-ORNITHINE POWD .....198	LOVENOX SOSY 30 MG/0.3ML (Use enoxaparin sodium) .....25
loperamide hcl TABS .....38	losartan potassium & hydrochlorothiazide .....48	LOVENOX SOSY 40 MG/0.4ML (Use enoxaparin sodium) .....24
LOPERAMIDE HYDROCHLORIDE POWD .....38	losartan potassium .....46	LOVENOX SOSY 40 MG/0.4ML (Use enoxaparin sodium) .....25
LOPID TABS (Use gemfibrozil) ...44	LOSARTAN POTASSIUM ..... 84	LOVENOX SOSY 60 MG/0.6ML (Use enoxaparin sodium) .....25
lopinavir-ritonavir SOLN ..... 61	LOSEASONIQUE (Use levonorgestrel-ethinyl estradiol (91-day)) ..... 101	
lopinavir-ritonavir TABS 25 MG-100 MG .....61	LOTEMAX OINT .....201	
lopinavir-ritonavir TABS 50 MG-200 MG .....61	LOTEMAX SM GEL ..... 201	
LOPRESSOR TABS 100 MG (Use metoprolol tartrate) .....65	LOTENSIN 10 MG, 20 MG (Use benazepril hcl) ..... 45	
LOPRESSOR TABS 50 MG (Use metoprolol tartrate) .....65	LOTENSIN 40 MG (Use benazepril	
LOPROX ..... 110		

LOVENOX SOSY 80 MG/0.8ML (Use enoxaparin sodium) .....	24	LUTEIN BEAD .....	84	MAGELLAN TUBERCULIN SAFETY SYRINGE/1ML/27G X 1/2" MISC	166
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (Use enoxaparin sodium) .	24	LUTEIN POWD .....	84	MAGELLAN TUBERCULIN SAFETY SYRINGE/1ML/28G X 1/2" MISC	166
LOVENOX SOSY 80 MG/0.8ML, 120 MG/0.8ML (Use enoxaparin sodium) .	25	LUXIQ FOAM (Use betamethasone valerate) .....	116	MAGNASWEET 110 LIQD .....	73
LOVO-ODF CUSTOM LIQD .....	211	LUXTURNA .....	200	MAGNASWEET 135 POWD .....	73
loxapine succinate .....	58	LUZU (Use luliconazole) .....	110	MAGNESIUM ALUMINUM SILICATE .....	84
LOXORAL BASE .....	211	L-VALINE CRYSTALS .....	198	MAGNESIUM AMINO ACID CHELLATE 20% .....	84
L-PHENYLALANINE POWD .....	198	L-VALINE POWD XX .....	198	MAGNESIUM ASCORBATE .....	84
L-PROLINE POWD .....	198	LYBALVI .....	215	MAGNESIUM BISGLYCINATE CHELATE .....	84
L-SELENOMETHIONINE .....	84	LYRICA CAPS (Use pregabalin) ..	27	MAGNESIUM BISGLYCINATE DIHYDRATE .....	84
L-SELENOMETHIONINE BLEND ..	84	LYRICA CR (Use pregabalin (once-daily)) .....	217	MAGNESIUM BISGLYCINATE DIHYDRATE .....	84
L-SERINE .....	90	LYRICA SOLN (Use pregabalin) ..	27	MAGNESIUM CARBONATE GRAN 18	
L-THREONINE CRYSTALS .....	198	LYSTEDA TABS (Use tranexamic acid) .....	135	MAGNESIUM CARBONATE HEAVY POWD XX .....	182
L-TRYPTOPHAN POWD .....	198	LYUMJEV KWIKPEN SOPN .....	37	MAGNESIUM CARBONATE LIGHT POWD XX .....	182
L-TYROSINE POWD XX .....	198	LYUMJEV SOLN .....	37	MAGNESIUM CHLORIDE HEXAHYDRATE CRYSTALS .....	183
lubiprostone .....	128	LYUMJEV TEMPO PEN SOPN ...	37	MAGNESIUM CHLORIDE POWD 183	
LUBRAJEL NP .....	213	LYVISPAH PACK .....	193	magnesium chloride SOLN .....	183
LUCEMYRA .....	215	MACA ROOT .....	84	MAGNESIUM CITRATE .....	84
LUGOLS 5 %-10 % .....	83	MACADAMIA NUT OIL .....	96	magnesium citrate 1.745 GM/30ML 138	
LUGOLS STRONG IODINE SOLN 60		MACRILEN .....	120	MAGNESIUM CITRATE TRIBASIC .	84
luliconazole .....	110	MACROBID (Use nitrofurantoin monohyd macro) .....	51	MAGNESIUM GLUCONATE .....	84
LUMAKRAS .....	55	MACRODANTIN (Use nitrofurantoin macrocrystal) .....	51	MAGNESIUM GLYCINATE .....	84
LUMIFY .....	199	MAFENIDE ACETATE .....	84	MAGNESIUM HYDROXIDE .....	84
LUMIGAN SOLN 0.01 % .....	203	mafenide acetate PACK .....	113		
LUNESTA (Use eszopiclone) ....	136	MAFENIDE HCL .....	84		
LUPKYNIS .....	185	MAGELLAN SYRINGE/HYPODERMIC SAFETY NEEDLE/1ML/23G X 1" .....	166		
lurasidone hcl .....	57				

magnesium hydroxide SUSP 7.75 %, 400 MG/5ML, 1200 MG/15ML, 2400 MG/30ML .....	138	MANGANESE GLUCONATE .....	85	polymy-dexameth) .....	201
MAGNESIUM MALATE .....	85	MANGANESE SULFATE .....	85	MAXITROL SUSP (Use neomycin-polymy-dexameth) .....	201
magnesium oxide (mg supplement) TABS 241.5 MG, 400 MG .....	183	MANGO FLAVOR LIQD .....	208	MAXI-TUSS PE MAX LIQD .....	105
MAGNESIUM OXIDE HEAVY POWD .....	18	MANGO FLAVOR POWD .....	208	MAXZIDE TABS (Use triamterene & hydrochlorothiazide) .....	123
MAGNESIUM OXIDE LIGHT POWD .	18	MANGO FLAVOR SWEETENED POWD .....	208	MAXZIDE-25 TABS (Use triamterene & hydrochlorothiazide) .....	123
magnesium oxide TABS 400 MG ..	18	MANGO PASSION FRUIT OS LIQD .	208	MAYZENT TABS 2 MG .....	216
MAGNESIUM PHOSPHATE DIBASIC TRIHYDRATE .....	85	MANNITOL .....	99	MEBENDAZOLE POWD .....	18
MAGNESIUM STEARATE .....	211	mannitol 10 %, 20 %, 25 % .....	124	MECAMYLAMINE HCL .....	85
MAGNESIUM SULFATE HEPTAHYDRATE POWD .....	138	MAPLE FLAVOR LIQD .....	208	MECHLORETHAMINE HCL .....	85
magnesium sulfate IJ 50 % .....	183	maraviroc TABS 150 MG .....	61	meclizine hcl CHEW .....	40
MAGNESIUM SULFATE IJ 50 % ..	183	maraviroc TABS 300 MG .....	61	MECLIZINE HCL MONOHYDRATE POWD .....	40
magnesium sulfate in dextrose ..	183	MARGENZA .....	54	MECLIZINE HCL POWD .....	40
MAGNESIUM SULFATE POWD ..	138	MARINOL CAPS 2.5 MG (Use dronabinol) .....	40	meclizine hcl TABS 12.5 MG, 25 MG, 50 MG .....	40
MAGNESIUM TRISILICATE .....	18	MARINOL CAPS 5 MG, 10 MG (Use dronabinol) .....	40	meclizine hcl TABS 12.5 MG, 25 MG 40	
MAGNESIUM TRISILICATE HYDRATE .....	18	MARPLAN .....	30	MECLIZINE HYDROCHLORIDE MONOHYDRATE POWD .....	40
MAGOX 400 TABS (Use magnesium oxide (mg supplement)) .....	183	MARSHMALLOW ARTIFICIAL FLAVOR CONC .....	208	meclofenamate sodium CAPS .....	9
malathion .....	120	MARSHMALLOW FLAVOR LIQD	208	MECLOFENAMATE SODIUM POWD .....	9
MALEIC ACID .....	85	MARSHMALLOW OS LIQD .....	208	MECLOFENOXATE HYDROCHLORIDE .....	85
MALIC ACID .....	85	MARSHMALLOW WS LIQD .....	208	MEDIBASE C .....	213
MALTODEXTRIN .....	85	MAVYRET PACK .....	63	MEDICATED BUCCAL DNA COLLECTION KIT .....	121
MANDELIC ACID .....	85	MAVYRET TABS .....	63	MEDICATED BUCCAL DNA COLLECTION KIT 2 .....	121
manganese chloride .....	183	MAXALT TABS 10 MG (Use rizatriptan benzoate) .....	179	MEDICATED DNA COLLECTIONKIT .....	121
MANGANESE CHLORIDE TETRAHYDRATE .....	85	MAXALT-MLT TBDP 10 MG (Use rizatriptan benzoate) .....	179		
		MAXIDEX SUSP OP .....	201		
		MAXITROL OINT (Use neomycin-			

MEDI-RDT BASE POWD .....	211	MEGLUMINE .....	85	MENQUADFI .....	224
MEDI-RDT KIT (MULTIDOSE) KIT 211		MEIJER BLOOD GLUCOSE MONITORING KIT KIT .....	147	MENS 50+ ADVANCED CAPS ...	189
MEDI-RDT KIT KIT .....	211	MEIJER ESSENTIAL BLOOD GLUCOSE MONITORING SYSTEM KIT .....	147	MENTHOL .....	99
MEDIUM CHAIN TRIGLYCERIDES . 85		MEIJER PREMIUM BLOOD GLUCOSE MONITORING KIT KIT 147		MENTHOL-L .....	99
MEDROL DOSEPAK TBPK (Use methylprednisolone) .....	103	MEIJER TRUE2GO BLOOD GLUCOSE MONITORING SYSTEM KIT .....	147	menthol-methyl salicylate (liniments) PTCH .....	118
MEDROL TABS (Use methylprednisolone) .....	103	MEIJER TRUERESULT BLOOD GLUCOSE MONITORING SYSTEM KIT .....	147	MENTICAM CREA .....	118
MEDROL TABS .....	103	MEIJER TRUETRACK BLOOD GLUCOSE MONITORING KIT KIT 147		MENVEO SOLN .....	224
medroxyprogesterone acetate (contraceptive) SUSP IM .....	102	MEKTOVI .....	55	MENVEO SOLR .....	224
medroxyprogesterone acetate (contraceptive) SUSY IM .....	102	MELATONIN .....	99	MEPACRINE DIHYDROCHLORIDE DIHYDRATE .....	52
MEDROXYPROGESTERONE ACETATE .....	85	MELOXICAM .....	85	MEPERIDINE HCL POWD .....	12
medroxyprogesterone acetate 2.5 MG, 5 MG, 10 MG .....	214	meloxicam CAPS .....	9	mepidrine hcl SOLN IJ 25 MG/ML, 50 MG/ML, 100 MG/ML .....	12
MEDROXYPROGESTERONE ACETATE MICRONIZED .....	85	meloxicam TABS 15 MG .....	9	mepidrine hcl SOLN OR 50 MG/5ML .....	12
MEDROXYPROGESTERONE ACETATE YAM .....	85	meloxicam TABS .....	9	mepidrine hcl TABS 50 MG .....	12
MEDROXYPROGESTERONE MICRONIZED .....	85	memantine hcl CP24 .....	215	MEPHYTON TABS (Use phytonadione) .....	228
mefenamic acid CAPS .....	9	memantine hcl SOLN 2 MG/ML ..	215	MEPIVACAINE HCL POWD .....	139
MEFENAMIC ACID POWD .....	9	memantine hcl TABS .....	215	mepivacaine hcl SOLN 1 %, 1.5 %, 2 % .....	139
mefloquine hcl .....	52	MENACTRA .....	224	meprobamate .....	19
megestrol acetate (appetite) .....	214	MENADIONE .....	85	MEQUINOL .....	85
MEGESTROL ACETATE POWD ..	54	MENADIONE SODIUM BISULFITE CRYS .....	99	MERCAPTOPYRINE .....	85
megestrol acetate SUSP 40 MG/ML . 54		MENATROL CAPS .....	189	MERCAPTOPYRINE MONOHYDRATE .....	85
megestrol acetate SUSP .....	54	MENEST .....	127	mercaptopyrurine TABS .....	53
megestrol acetate TABS .....	54	MENOSTAR PTWK .....	127	meropenem .....	50
				MEROPENEM .....	50
				MEROPENEM/SODIUM CHLORIDE .....	50
				mesalamine CP24 .....	128

mesalamine CPDR .....	128	metformin hcl TABS 850 MG .....	35	methenamine-hyosc-methylene blue- benzoic acid-phenyl sal .....	49
mesalamine ENEM .....	128	metformin hcl TB24 500 MG, 1000 MG .....	35	methenamine-hyosc-methylene blue- sod phos-phenyl sal CAPS .....	49
MESALAMINE POWD .....	128	metformin hcl TB24 500 MG .....	35	methenamine-hyosc-methylene blue- sod phos-phenyl sal TABS 10.8 MG- 81 MG-32.4 MG-0.12 MG-40.8 MG	49
mesalamine SUPP .....	128	metformin hcl TB24 750 MG .....	35		
mesalamine TBEC 1.2 GM .....	128	METFORMIN HYDROCHLORIDE 85			
mesalamine TBEC 800 MG .....	128	METHACHOLINE CHLORIDE CRYST .....	85	methenamine-hyosc-methylene blue- sod phos-phenyl sal TABS 10.8 MG- 81.6 MG-0.12 MG-36.2 MG-40.8 MG, 10.8 MG-81.6 MG-36.2 MG-0.12 MG- 40.8 MG .....	49
mesalamine w/ cleanser .....	128	METHACHOLINE CHLORIDE POWD .....	85	METHIMAZOLE POWD .....	220
MESTINON TABS (Use pyridostigmine bromide) .....	52	METHACRYLIC ACID COPOLYMER TYPE A .....	85	methimazole TABS .....	220
MESTINON TIMESPAN TBCR (Use pyridostigmine bromide) .....	52	methadone hcl CONC .....	12	METHIONINE POWD XX .....	198
METACRESOL ACETATE .....	85	METHADONE HCL POWD .....	12	METHITEST TABS .....	16
METADATE CD CPCR (Use methylphenidate hcl) .....	3	methadone hcl SOLN IJ 10 MG/ML 12		METHOCARBAMOL .....	85
METAFOFBIC .....	122	METHADONE HCL SOLN IJ .....	12	methocarbamol SOLN .....	193
METAFOFBIC PLUS .....	122	methadone hcl TABS 10 MG .....	12	methocarbamol TABS 500 MG, 750 MG .....	193
METAFOFBIC PLUS RF .....	122	methadone hcl TABS 5 MG .....	12	methocarbamol TABS .....	193
METANX .....	122	methadone hcl TBSO .....	12	METHOCARBAMOL TABS .....	193
METAPROTERENOL SULFATE POWD .....	23	methamphetamine hcl .....	2	METHOCEL E4M .....	82
metaxalone .....	193	METHANESULFONIC ACID .....	85	METHOCEL E4M PREMIUM .....	82
metaxalone 400 MG .....	193	METHANOL .....	96	METHOCEL E4M PREMIUM CR .....	82
METER BUFFER PH 10 .....	210	METHAZOLAMIDE POWD .....	123	METHOCEL K100 PREMIUM .....	82
METER BUFFER PH 4 .....	210	methazolamide TABS .....	123	METHOCEL K100M PREMIUM .....	82
METER BUFFER PH 7 .....	210	methenamine hippurate .....	51	METHOTREXATE POWD .....	53
METFORMIN HCL .....	85	METHENAMINE MANDELATE .....	99	methotrexate sodium SOLN 1 GM/40ML, 50 MG/2ML, 250 MG/10ML, 1000 MG/40ML .....	53
metformin hcl SOLN .....	34	methenamine mandelate 0.5 GM, 1 GM .....	51	methotrexate sodium SOLR .....	53
metformin hcl TABS 1000 MG .....	34	METHENAMINE POWD .....	99	methotrexate sodium TABS 2.5 MG	
metformin hcl TABS 500 MG .....	34	methenamine-hyoscamine-methylene blue-sodium phosphate TABS .....	49		
metformin hcl TABS 625 MG .....	34				
metformin hcl TABS 850 MG .....	34				

53			METHYLSULFONYLMETHANE CRYS ..... 85
METHOXSALEN POWD ..... 119	methylphenidate hcl CP24 10 MG, 20 MG, 30 MG, 40 MG, 60 MG .....3		METHYLSULFONYLMETHANE POWD .....85
methoxsalen rapid ..... 111	methylphenidate hcl CP24 ..... 3		
METHOXYAMINE HYDROCHLORIDE ..... 85	methylphenidate hcl CPCR ..... 3		methyltestosterone CAPS ..... 16
METHOXYETHANOL .....85	methylphenidate hcl SOLN .....3		METHYLTESTOSTERONE POWD 16
methscopolamine bromide .....221	methylphenidate hcl TABS 10 MG, 20 MG ..... 3		METHYLTETRAHYDROFOLATE CALCIUM ..... 85
METHSCOPOLAMINE BROMIDE 85	methylphenidate hcl TABS 5 MG ... 3		METHYSERGIDE MALEATE .....85
METHSCOPOLAMINE NITRATE .85	methylphenidate hcl TB24 18 MG, 27 MG, 54 MG .....3		METOCLOPRAMIDE HCL MONOHYDRATE ..... 128
methsuximide .....29	methylphenidate hcl TB24 36 MG ..3		METOCLOPRAMIDE HCL POWD 128
METHYL ALCOHOL ..... 96	methylphenidate hcl TBCR 10 MG, 20 MG ..... 3		metoclopramide hcl SOLN IJ 5 MG/ML .....128
METHYL METHACRYLATE CROSSPOLYMER .....85	methylphenidate hcl TBCR 18 MG, 27 MG, 54 MG .....3		metoclopramide hcl SOLN OR 5 MG/5ML, 10 MG/10ML ..... 128
METHYL SULFONE CRYST .....85	methylphenidate hcl TBCR 36 MG ..3		metoclopramide hcl TABS .....128
METHYLCELLULOSE GEL .....211	methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG .....3		METOCLOPRAMIDE HYDROCHLORIDE POWD ..... 128
METHYLCELLULOSE POWD ... 211	methylphenidate hcl TBCR 45 MG, 63 MG, 72 MG .....3		metolazone .....124
METHYLCOBALAMIN ..... 85	methylphenidate PTCH ..... 3		METOPIRONE .....120
methyldopa TABS .....46	METHYLPREDNISOLONE ACETATE POWD ..... 103		metoprolol & hydrochlorothiazide TABs 25 MG-100 MG, 25 MG-50 MG .....48
methylene blue (antidote) SOLN IV 39	METHYLPREDNISOLONE ACETATE SUSP 40 MG/ML, 80 MG/ML .....103		metoprolol & hydrochlorothiazide TABs 50 MG-100 MG ..... 48
METHYLENE BLUE .....99	methylprednisolone acetate SUSP 103		metoprolol succinate TB24 200 MG 65
METHYLENE CHLORIDE ..... 85	METHYLPREDNISOLONE POWD 103		metoprolol succinate TB24 25 MG, 50 MG, 100 MG .....65
methylergonovine maleate SOLN 203	methylprednisolone sod succ 40 MG, 125 MG, 500 MG, 1000 MG .....103		METOPROLOL TARTRATE POWD . 65
methylergonovine maleate TABS 203	methylprednisolone TABS 4 MG .103		metoprolol tartrate SOLN IV 5
METHYLIN SOLN (Use methylphenidate hcl) .....3	methylprednisolone TABS .....103		
METHYLMETHACRYLATE CROSSPOLYMER (310) ..... 85	methylprednisolone TBPK .....103		
METHYLPARABEN .....205	METHYLPYRROLIDONE ..... 85		
METHYLPHENIDATE HCL ..... 85			
methylphenidate hcl CHEW .....3			



MG/5ML .....	65	MICARDIS HCT (Use telmisartan-hydrochlorothiazide) .....	48	MG/100ML .....	136
metoprolol tartrate TABS 100 MG .	65	MICATIN CREA (Use miconazole nitrate (topical)) .....	110	MIDAZOLAM/SODIUM CHLORIDE .	136
metoprolol tartrate TABS 25 MG, 50 MG .....	65	MICONAZOLE .....	41	midazolam-sodium chloride .....	136
metoprolol tartrate TABS 37.5 MG, 75 MG .....	65	miconazole nitrate (topical) CREA 110		MIDNITE CHEW .....	185
METROCREAM CREA (Use metronidazole (topical)) .....	119	MICONAZOLE NITRATE POWD XX . 110		MIDNITE FOR MENOPAUSE CHEW .....	185
METROGEL GEL 1 % (Use metronidazole (topical)) .....	119	miconazole nitrate vaginal CREA 2 % .....	226	MIDNITE PM CHEW .....	185
METROLOTION LOTN (Use metronidazole (topical)) .....	119	miconazole nitrate vaginal KIT ...	226	MIDNITE SLEEP AID .....	4
metronidazole (topical) CREA ....	119	miconazole nitrate vaginal SUPP 100 MG .....	226	midodrine hcl .....	227
metronidazole (topical) GEL 0.75 % 119		miconazole nitrate vaginal SUPP 200 MG .....	226	MIEBO .....	202
metronidazole (topical) GEL 1 % .	119	miconazole-zinc oxide-white petrolatum .....	110	mifepristone .....	126
metronidazole (topical) LOTN ....	119	MICRHOGAM ULTRA-FILTEREDPLUS SOSY IM .....	204	miglitol .....	34
METRONIDAZOLE .....	85	MICROCRYSTALLINE CELLULOSE NF 101 POWD .....	77	MILK THISTLE .....	86
METRONIDAZOLE BENZOATE ..	85	MICROCRYSTALLINE CELLULOSE NF 102 POWD .....	77	MILKSCREEN FOR BREASTFEEDING .....	121
metronidazole CAPS .....	49	MICROCRYSTALLINE CELLULOSE NF 105 POWD .....	77	milrinone lactate .....	68
metronidazole SOLN .....	49	MICRODOT BLOOD GLUCOSE MONITORING SYSTEM KIT .....	147	milrinone lactate in dextrose .....	68
metronidazole TABS 500 MG .....	49	MICROPLEGIA MSA/MSG .....	68	MINASTRIN 24 FE CHEW (Use norethin acet & estrad-fe) .....	101
metronidazole TABS .....	49	MIDAZOLAM .....	86	MINERAL OIL HEAVY OIL XX ...	137
metronidazole vaginal .....	226	midazolam hcl SOLN IJ .....	136	MINERAL OIL LIGHT XX .....	137
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MEXILETINE HYDROCHLORIDE 85		MIDAZOLAM		MINILINK REAL-TIME TRANSMITTER .....	147
MIACALCIN IJ (Use calcitonin (salmon)) .....	124	MIDAZOLAM HYDROCHLORIDE/SODIUM CHLORIDE SOLN IV 0.8 %-100		MINIMED 630G GUARDIAN PRESS STARTER TRANSMITTER KIT .	147
MICAFUNGIN .....	40			MINIPRESS CAPS (Use prazosin hcl) .....	46
micafungin sodium .....	40			MINIVELLE PTTW 0.025 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR (Use estradiol) .....	127
MICAFUNGIN/SODIUM CHLORIDE 40				MINIVELLE PTTW 0.0375 MG/24HR	
MICARDIS (Use telmisartan) .....	46				

(Use estradiol) .....	127	MIRVASO (Use brimonidine tartrate (topical)) .....	119	molindone hcl .....	59
MINOCIN SOLR .....	219	misoprostol .....	223	MOLYBDENUM .....	86
minocycline hcl CAPS .....	219	MISOPROSTOL .....	86	MOMETASONE FUROATE .....	86
MINOCYCLINE HCL POWD .....	219	MISOPROSTOL-HPMC .....	86	mometasone furoate CREA .....	116
minocycline hcl TABS .....	219	MITIGARE CAPS (Use colchicine) 131 .....		mometasone furoate OINT .....	116
minocycline hcl TB24 105 MG, 135 MG .....	219	MITOMYCIN .....	86	mometasone furoate SOLN .....	116
minocycline hcl TB24 .....	219	mitomycin SOLR IV .....	55	MONISTAT 3 COMBINATION PACK KIT (Use miconazole nitrate vaginal) .	226
MINOLIRA TB24 .....	219	MITOTANE .....	86	MONISTAT 7 SIMPLY CURE CREA (Use miconazole nitrate vaginal) .	226
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minoxidil 10 MG .....	49	MM BLULINK GLUCOSE MONITORING SYSTEM DEVI ...	147	MONOBENZONE .....	86
minoxidil 2.5 MG .....	49	MM BLULINK GLUCOSE TEST STRIPS STRP .....	121	MONOETHANOLAMINE .....	86
MINT CHOCOLATE CHIP FLAVOR LIQD .....	208	MM EASY TOUCH BLOOD GLUCOSE METER KIT .....	147	MONOFERRIC .....	134
MIOCHOL-E SOLR .....	199	M-M-R II SOLR .....	225	MONOJECT 1ML LUER LOCK TUBERCULIN SYRINGE/TIP CAP	166
MIOSTAT IO .....	199	modafinil .....	3	MONOJECT 20ML SYRINGE REGULAR TIP .....	166
mirabegron TB24 .....	224	MODAFINIL .....	86	MONOJECT 3ML SYRINGE/STANDARD HYPODERMIC NEEDLE/21GX1-1/2" .....	166
MIRALAX POWD (Use polyethylene glycol 3350) .....	137	MODERNA COVID-19 VACCINE SUSP .....	225	MONOJECT ALLERGIST TRAY/DETACH NEEDLE/1ML/27G X 1/2" KIT .....	166
MIRAPEX ER TB24 (Use pramipexole dihydrochloride) .....	56	MODERNA COVID-19 VACCINE/6MO-11Y/2023-24 SUSP .	225	MONOJECT ALLERGIST TRAY/PERM NEEDLE/0.5ML/28G X 1/2" KIT .....	166
MIRCETTE (Use desogestrel-ethinyl estradiol (biphasic)) .....	101	MODERNA COVID-19 VACCINE/BIVALENT/BA.4/BA.5	225	MONOJECT ALLERGIST TRAY/PERM NEEDLE/1ML/28G X 1/2" KIT .....	166
MIRTAZAPINE .....	86	MODERNA COVID-19 VACCINE6MO-5Y SUSP .....	225	MONOJECT BLUNT CANNULA/20GX1-1/2" .....	166
mirtazapine TABS 15 MG .....	29	moexipril hcl .....	45		
mirtazapine TABS 15 MG .....	30	MOLASSES FLAVOR POWD .....	208		
mirtazapine TABS 30 MG .....	29				
mirtazapine TABS 30 MG .....	30				
mirtazapine TABS 7.5 MG, 45 MG	29				
mirtazapine TBDP 15 MG .....	30				
mirtazapine TBDP 30 MG .....	30				
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MONOJECT BLUNT CANNULA/21GX1" .....166	HUB/LUER LOCK/REG BEVEL/22G X 1" .....167	HUB/LUER LOCK/SPEC BEVEL/16G X 3/4" .....167
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MONOJECT HYPO/ALUM HUB/LUER LOCK/INTM BEVEL/27G X 1/2" .....166	MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/19G TW X 1-1/2" ..... 167	MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/20G X 1" ..167
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MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/20G X 1" .....167	MONOJECT HYPO/ALUM HUB/LUER LOCK/SPEC BEVEL/16G X 1-1/2" .....167	MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/20G X 1-1/2" 167
MONOJECT HYPO/ALUM HUB/LUER LOCK/REG BEVEL/20G X 1-1/2" .....167	MONOJECT HYPO/ALUM HUB/LUER LOCK/SPEC BEVEL/16G X 1-1/2" .....167	MONOJECT HYPO/POLYPROPYLENE HUB/LL/REG BEVEL/20G X 1-1/2" 167
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MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLENE/23GX1 " .....	171	MONOJECT SYRINGE/ECCENTRIC LUER/35ML .....	171	MONOJECT SYRINGE/LUER LOCK/6ML/21G X 1-1/2" .....	172
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLENE/25GX1 " .....	171	MONOJECT SYRINGE/ECCENTRIC TIP/60ML .....	171	MONOJECT SYRINGE/LUER-LOCK TIP/12ML .....	172
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLENE/25GX1 " .....	171	MONOJECT SYRINGE/LUER LOCK/20ML .....	171	MONOJECT SYRINGE/LUER-LOCK TIP/140ML .....	172
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLENE/25GX1 -1/2" .....	171	MONOJECT SYRINGE/LUER LOCK/35ML .....	171	MONOJECT SYRINGE/LUER-LOCK TIP/3ML .....	172
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLENE/25GX1 -1/2" .....	171	MONOJECT SYRINGE/LUER LOCK/3ML .....	171	MONOJECT SYRINGE/LUER-LOCK TIP/60ML .....	172
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLENE/25GX5 /8" .....	171	MONOJECT SYRINGE/LUER LOCK/3ML/20G X 1" .....	171	MONOJECT SYRINGE/LUER- LOCK/3ML/21G X 1" .....	172
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLENE/25GX5 /8" .....	171	MONOJECT SYRINGE/LUER LOCK/3ML/20G X 1-1/2" .....	171	MONOJECT SYRINGE/LUER- LOCK/3ML/21G X 1-1/2" .....	172
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLENE/26GX1 -1/2" .....	171	MONOJECT SYRINGE/LUER LOCK/3ML/20G X 3/4" .....	171	MONOJECT SYRINGE/LUER- LOCK/6ML .....	172
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLENE/26GX1 -1/2" .....	171	MONOJECT SYRINGE/LUER LOCK/3ML/22G X 1" .....	171	MONOJECT SYRINGE/REG LUER/12ML .....	172
MONOJECT STANDARD HYPODERMIC NEEDLE/POLYPROPYLENE/27GX1 /2" .....	171	MONOJECT SYRINGE/LUER LOCK/3ML/22G X 1-1/2" .....	171	MONOJECT SYRINGE/REG LUER/20ML .....	172
MONOJECT SYRINGE 6ML .....	171	MONOJECT SYRINGE/LUER LOCK/3ML/23G X 1" .....	171	MONOJECT SYRINGE/REG LUER/35ML .....	172
MONOJECT SYRINGE PHARMACY TRAY/1ML LUER LOCK .....	171	MONOJECT SYRINGE/LUER LOCK/3ML/25G X 1" .....	171	MONOJECT SYRINGE/REG LUER/3ML .....	172
MONOJECT		MONOJECT SYRINGE/LUER LOCK/3ML/25G X 5/8" .....	171	MONOJECT SYRINGE/REG LUER/6ML .....	172

MONOJECT SYRINGE/REGULARTIP/3ML ...172	MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/6ML/21G X1" .....173	173 MONOJECT TUBERCULIN SYRINGE/PERM NEEDLE/1ML/28G X 1/2" MISC .....173
MONOJECT SYRINGE/REGULARTIP/60ML .172	MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/6ML/21GX1-1/2" .... 173	MONOJECT TUBERCULIN SYRINGE/WITHOUT NEEDLE/REG LUER/1ML ..... 173
MONOJECT SYRINGE/REGULARTIP/6ML ...172	MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/6ML/22GX1-1/2" .... 173	MONTELUKAST SODIUM .....86 montelukast sodium CHEW ..... 20 montelukast sodium PACK ..... 20
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/20GX1" .....172	MONOJECT SYRINGE/TOOMEY TYPE/60ML ..... 173	montelukast sodium TABS ..... 21
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/20GX1-1/2" .... 172	MONOJECT TB SYRINGE-NDL 1ML 26GX3/8" MISC .....173	MONUROL (Use fosfomycin tromethamine) ..... 51
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/21GX1" .....172	MONOJECT TB SYRINGE-NDL 1ML 27GX1/2" MISC .....173	MOOD FOOD CAPS ..... 189 MOOD FOOD ES CAPS ..... 189
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/22GX1" .....172	MONOJECT TUBERCULIN SAFETY SYRINGE/1ML/25G X 5/8" MISC 173	MORANTEL TARTRATE ..... 86
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/22GX1-1/2" .... 172	MONOJECT TUBERCULIN SAFETY SYRINGE/1ML/28G X 1/2" MISC 173	MORNINGSICKLESS LOZG .....185
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/23GX1" .....172	MONOJECT TUBERCULIN SYRINGE SOFTPACK 1ML REGULAR LUER TIP .....173	morphine sulfate beads ..... 12 morphine sulfate CP24 10 MG, 20 MG, 30 MG, 50 MG, 60 MG, 80 MG, 100 MG .....13
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/25GX1" .....172	MONOJECT TUBERCULIN SYRINGE/1ML/25GX5/8" MISC ..173	morphine sulfate for continuous microinfusion ..... 12
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/25GX1-1/4" .... 173	MONOJECT TUBERCULIN SYRINGE/1ML/28G X 1/2" MISC 173	MORPHINE SULFATE POWD .... 13
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/25GX5/8" .....173	MONOJECT TUBERCULIN SYRINGE/DETACH NEEDLE/1ML/25G X 5/8" MISC ..173	MORPHINE SULFATE SOLN IV 2 MG/ML, 4 MG/ML, 8 MG/ML, 10 MG/ML, 50 MG/ML .....13
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/25GX5/8" .....173	MONOJECT TUBERCULIN SYRINGE/DETACH NEEDLE/1ML/26G X 3/8" MISC ..173	morphine sulfate SOLN IV 4 MG/ML, 8 MG/ML, 10 MG/ML, 50 MG/ML ..13
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/3ML/27GX1-1/4" .... 173	MONOJECT TUBERCULIN SYRINGE/DETACH NEEDLE/1ML/27G X 1/2" MISC ..173	morphine sulfate SOLN OR 10 MG/5ML, 20 MG/5ML .....13
MONOJECT SYRINGE/STANDARDHYPODERMI C NEEDLE/6ML/20GX1-1/2" .... 173	MONOJECT TUBERCULIN SYRINGE/PERM NEEDLE/0.5ML/28G X 1/2" MISC	morphine sulfate SOLN OR 20 MG/ML, 100 MG/5ML .....13 morphine sulfate SOLN OR 20 MG/ML ..... 13

morphine sulfate SUPP .....	13	sulfate) .....	13	MULTIVITAMIN INFANT & TODDLER SOLN OR .....	191
morphine sulfate TABS .....	13	MUCINEX D MAXIMUM STRENGTH TB12 (Use pseudoephedrine- guaifenesin) .....	105	MULTIVITAMIN INFANT/TODDLER SOLN OR .....	191
morphine sulfate TBCR .....	13	MUCINEX D TB12 (Use pseudoephedrine-guaifenesin) ...	105	MULTIVITAMIN TABS .....	190
MORPHINE SULFATE/SODIUM CHLORIDE SOLN IV .....	12	MUCINEX DM TB12 (Use dextromethorphan-guaifenesin) ..	105	MULTIVITAMIN W/IRON/INFANT/TODDLER SOLN	191
MORPHINE SULFATE/SODIUM CHLORIDE SOSY IJ 2 MG/2ML-0.9 % .....	13	MUCINEX MAXIMUM STRENGTH TB12 (Use guaifenesin) .....	106	MULTRYS .....	184
MOTTEGRITY .....	127	MUCINEX TB12 (Use guaifenesin) 106		MUPIROCIN .....	86
MOTTEGRITY 2 MG .....	127	MUCOLOX LIQD .....	211	mupirocin calcium (topical) .....	109
MOTOFEN .....	38	MULTAQ .....	20	mupirocin OINT .....	109
MOTPOLY XR CP24 .....	27	MULTI VITAMIN TABS .....	190	MURI-LUBE XX .....	138
MOTRIN CHILDRENS CHEW (Use ibuprofen) .....	9	MULTI VITAMIN/D-3 TABS .....	190	MUSE PLLT 250 MCG, 500 MCG, 1000 MCG .....	69
MOTRIN INFANTS DROPS SUSP (Use ibuprofen) .....	9	MULTIA CAPS .....	189	MUSTARD OIL .....	96
MOUNJARO .....	35	MULTI-DRAW NEEDLE 20GX1-1/2" 173		MVASI .....	53
MOVANTIK .....	129	MULTI-DRAW NEEDLE 21GX1" 173		MVW COMPLETE FORMULATION CAPS .....	189
MOVIPREP (Use peg 3350-kcl-nacl- na sulfate-na ascorbate-ascorbic acid) .....	137	MULTI-DRAW NEEDLE 21GX1-1/2" 174		MVW COMPLETE FORMULATIOND3000 CAPS ....	189
moxifloxacin hcl (ophth) SOLN OP 200		MULTI-DRAW NEEDLE 22GX1" 174		MVW COMPLETE FORMULATIOND500 CAPS .....	189
MOXIFLOXACIN HCL .....	86	MULTI-DRAW NEEDLE 22GX1-1/2" 174		MVW COMPLETE FORMULATIONMINIS CAPS ....	189
moxifloxacin hcl in sodium chloride 127		MULTI-DRAW NEEDLE/20G X 1" 174		MVW MODULATOR FORMULATION CAPS .....	189
moxifloxacin hcl TABS .....	127	MULTI-MAC .....	191	MVW MODULATOR FORMULATION MINIS CAPS .....	189
MOXIFLOXACIN HYDROCHLORIDE .....	86	multiple vitamin TABS .....	190	MYAMBUTOL TABS 400 MG (Use ethambutol hcl) .....	52
MOXIFLOXACIN HYDROCHLORIDE SOLN 400 MG/250ML .....	127	multiple vitamins w/ calcium TABS 188		MYCOBUTIN (Use rifabutin) .....	52
MOXISYLYTE HCL .....	86	multiple vitamins w/ minerals CAPS 189		MYCOPHENOLATE MOFETIL ...	86
MRESVIA .....	225	MULTIVITAMIN ADULT TABS ...	190	mycophenolate mofetil CAPS ....	185
MS CONTIN TBCR (Use morphine					



mycophenolate mofetil hcl	185	N-ACETYL-L-CARNOSINE	86	NALOXONE HYDROCHLORIDE DIHYDRATE	86
mycophenolate mofetil SUSR	185	N-ACETYL-L-CYSTEINE POWD	106	NALTREXONE	86
mycophenolate mofetil TABS	185	NADH	86	naltrexone hcl	39
mycophenolate sodium	185	NADOLOL POWD	65	NALTREXONE HCL	86
MYDAYIS CP24 (Use amphetamine- dextroamphetamine)	2	nadolol TABS 20 MG, 40 MG, 80 MG	65	NALTREXONE HYDROCHLORIDE	86
MYDCOMBI SOCT	199	nadolol TABS 20 MG, 40 MG, 80 MG	66	NALTREXONE HYDROCHLORIDE MICRONIZED ANHYDROUS	86
MYDRIACYL SOLN (Use tropicamide)	199	NAFCILLIN	205	NALTREXONE HYDROCHLORIDEANHYDROUS	86
MYFEMBREE	126	nafcillin sodium IJ 1 GM, 2 GM	205	NALTREXONE HYDROCHLORIDEDIHYDRATE	86
MYFORTIC (Use mycophenolate sodium)	185	naftifine hcl CREA	110	NAMENDA TABS 10 MG (Use memantine hcl)	215
MYGLUCOHEALTH BLOOD GLUCOSE MONITORING SYSTEM KIT	147	naftifine hcl GEL 2 %	110	NAMENDA TITRATION PAK TABS (Use memantine hcl)	215
MYHIBBIN SUSP	185	NAFTIN GEL (Use naftifine hcl)	110	NAMENDA XR CP24 (Use memantine hcl)	215
MYLERAN TABS	53	NAFTIN GEL	110	NAMZARIC C4PK	215
MYLICON INFANTS GAS RELIEF DYE FREE SUSP (Use simethicone)	127	nalbuphine hcl	16	NAMZARIC CP24	215
MYLICON INFANTS GAS RELIEF SUSP (Use simethicone)	127	NALBUPHINE HCL	86	NANDROLONE DECANOATE	86
MYRBETRIQ SRER	224	NALFON CAPS (Use fenoprofen calcium)	9	NAPHAZOLINE HCL POWD	86
MYRBETRIQ TB24 (Use mirabegron)	224	NALFON TABS (Use fenoprofen calcium)	9	naphazoline w/ pheniramine 0.3 %- 0.025 %	200
MYRBETRIQ TB24	224	NALIDIXIC ACID	51	NAPHCAN-A (Use naphazoline w/ pheniramine)	200
MYRJ 53 POWD	214	NALMEFENE HYDROCHLORIDE IJ	39	NAPRELAN TB24 (Use naproxen sodium)	9
MYSOLINE (Use primidone)	27	NALOCET TABS	15	NAPRELAN TB24 500 MG (Use naproxen sodium)	9
MYTESI	38	NALOXONE HCL	86	NAPROSYN SUSP (Use naproxen)	9
MYXREDLIN	37	NALOXONE HCL DIHYDRATE	86	NAPROSYN TABS 500 MG (Use naproxen)	9
NABI-HB SOLN IM	204	naloxone hcl LIQD	39		
NABUMETONE	86	naloxone hcl SOCT	39		
nabumetone	9	naloxone hcl SOLN 0.4 MG/ML, 4 MG/10ML	39		
		naloxone hcl SOSY 0.4 MG/ML	39		
		naloxone hcl SOSY 2 MG/2ML	39		

NAPROXEN POWD	9	NATURAL BITTERNESS	211	modified (for microemulsion))	185
NAPROXEN SODIUM POWD	9	NATURAL CAMEL LIQD	208	NEORAL SOLN (Use cyclosporine modified (for microemulsion))	185
naproxen sodium TABS 220 MG	9	NATURAL MIXED TOCOPHEROLS30%	93	NEOSPORIN ORIGINAL OINT (Use neomycin-bacitracin-polymyxin)	109
naproxen sodium TABS 275 MG, 550 MG	9	NAYZILAM	25	NEOSPORIN PLUS PAIN RELIEF MAXIMUM STRENGTH (Use neomycin-polymyxin w/ pramoxine)	109
naproxen sodium TB24	9	nebivolol hcl	65	NEOSTIGMINE METHYLSULFATE	86
naproxen SUSP	9	nefazodone hcl	32	neostigmine methylsulfate SOLN IV 5 MG/10ML, 10 MG/10ML	52
naproxen TABS	9	NEFFY SOLN NA	227	NEOSTIGMINE METHYLSULFATE SOLN IV 5 MG/10ML, 10 MG/10ML	52
naproxen TBEC	9	nelarabine	53	NEOSTIGMINE METHYLSULFATE SOSY 3 MG/3ML	52
naproxen-esomeprazole magnesium	9	NEMBUTAL SODIUM SOLN (Use pentobarbital sodium)	135	neostigmine methylsulfate SOSY	52
naproxen-esomeprazole magnesium 375 MG-20 MG	9	NEMLUVIO	117	NEO-SYNALAR	109
naratriptan hcl	179	NEOMULTIVITE TABS	190	NEO-SYNALAR KIT	109
NARCAN LIQD (Use naloxone hcl)	39	NEOMYCIN SULFATE	109	NEPHPLEX RX	188
NARDIL (Use phenelzine sulfate)	30	neomycin sulfate TABS	5	NEPHRON FA	134
NASACORT ALLERGY 24HR AERO (Use triamcinolone acetonide (nasal))	194	neomycin/polymyxin b gu	130	NESACAINE IJ	139
NASALCROM (Use cromolyn sodium (nasal))	194	neomycin-bacitracin zn-polymyxin 200		NESTABS	191
NAT BITTERNESS	211	neomycin-bacitracin-polymyxin OINT	109	NESTABS DHA	191
NATACYN	200	neomycin-polymy-dexameth OINT	201	NESTABS ONE	191
NATAL PNV TABS	191	neomycin-polymy-dexameth SUSP	201	NETSPOT	121
NATAPRES LIQD	71	neomycin-polymyxin w/ pramoxine	109	NETTLE LEAF	86
NATAZIA	101	neomycin-polymyxin-gramicidin	200	NEUAC KIT	107
nateglinide	37	neomycin-polymyxin-hc (ophth)	201	NEUPRO	56
nateglinide 60 MG	37	neomycin-polymyxin-hc (otic) SOLN	203	NEURIVA CHEW	185
NATESTO GEL NA	16	neomycin-polymyxin-hc (otic) SUSP	203	NEURONTIN CAPS (Use gabapentin)	27
NATROBA (Use spinosad)	120	NEORAL CAPS (Use cyclosporine			

NEURONTIN SOLN (Use gabapentin) .....	27	niacin TABS 500 MG .....	228	nicotine polacrilex LOZG 4 MG ..	218
NEURONTIN TABS 600 MG (Use gabapentin) .....	27	niacin TBCR .....	228	nicotine polacrilex LOZG .....	217
NEURONTIN TABS 800 MG (Use gabapentin) .....	27	NIACINAMIDE POWD .....	228	nicotine polacrilex LOZG .....	218
NEUTROGENA T/GEL SHAM 0.5 % (Use coal tar extract) .....	120	niacinamide w/ zinc-copper-methylfolate-se-cr .....	193	nicotine PT24 TD 7 MG/24HR, 14 MG/24HR, 21 MG/24HR .....	218
NEVANAC .....	202	NIAOULI .....	96	NICOTINE TARTRATE .....	86
nevirapine SUSP .....	61	nicardipine hcl CAPS .....	67	NICOTINE TRANSDERMAL SYSTEM KIT .....	218
nevirapine TABS .....	61	nicardipine hcl SOLN .....	67	NICOTROL INHALER INHA .....	218
nevirapine TB24 100 MG .....	61	NICARDIPINE HYDROCHLORIDE SOLN .....	67	NICOTROL NS SOLN .....	218
nevirapine TB24 400 MG .....	61	NICARDIPINE HYDROCHLORIDE/SODIUM CHLORIDE SOLN 0.9 %-40 MG/200ML .....	67	NIFEDIPINE .....	86
NEXICLON XR TB24 (Use clonidine hcl) .....	46	NICE PURE BAKING SODA .....	90	nifedipine CAPS .....	67
NEXIUM 24HR CLEAR MINIS CPDR (Use esomeprazole magnesium) .....	222	NICLOSAMIDE .....	86	NIFEDIPINE MICRONIZED .....	86
NEXIUM 24HR CPDR (Use esomeprazole magnesium) .....	222	NICORETTE GUM 4 MG (Use nicotine polacrilex) .....	217	nifedipine TB24 30 MG, 90 MG .....	67
NEXIUM CPDR 40 MG (Use esomeprazole magnesium) .....	222	NICORETTE LOZG (Use nicotine polacrilex) .....	217	nifedipine TB24 60 MG .....	67
NEXIUM PACK (Use esomeprazole magnesium) .....	222	NICORETTE MINI LOZG (Use nicotine polacrilex) .....	217	NIFEREX TABS .....	134
NEXIUM PACK .....	222	NICORETTE STARTER KIT GUM 4 MG (Use nicotine polacrilex) .....	217	nilutamide .....	54
NEXLETOL .....	43	NICOTINAMIDE ADENINE DINUCLEOTIDE (NAD) .....	86	NIMBEX SOLN (Use cisatracurium besylate) .....	195
NEXLIZET .....	43	NICOTINAMIDE ADENINE DINUCLEOTIDE .....	86	NIMODIPINE .....	86
NEXTERONE .....	20	NICOTINAMIDE POWD .....	228	nimodipine CAPS .....	67
NEXTSTELLIS .....	101	NICOTINAMIDE RIBOSIDE CHLORIDE .....	86	NINJACOF-D .....	105
NEXVIAZYME .....	125	NICOTINE POLACRILEX .....	86	NIPENT .....	55
NGENLA .....	125	nicotine polacrilex GUM 4 MG .....	217	nisoldipine .....	67
niacin (antihyperlipidemic) TBCR ..	45	nicotine polacrilex GUM .....	217	NITAZOXANIDE .....	86
niacin CPCR 250 MG .....	228			nitazoxanide TABS .....	49
NIACIN POWD XX .....	228			NITRIC ACID .....	71
				NITRO-BID OINT .....	18
				NITRO-DUR PT24 (Use nitroglycerin) .....	18
				NITRO-DUR PT24 .....	18

nitrofurantoin .....	51	norelgestromin-ethinyl estradiol .	101	norethindrone acetate TABS .....	214
NITROFURANTOIN .....	51	NOREPHINEPHRINE		norethindrone acetate-ethinyl	
NITROFURANTOIN .....	86	BITARTRATE/SODIUM CHLORIDE		estradiol .....	126
NITROFURANTOIN ANHYDROUS .		SOLN .....	227	norethindrone acetate-ethinyl	
86		NOREPINEPHRINE BITARTRATE		estradiol-fe .....	101
nitrofurantoin macrocrystal 25 MG .	51	87		norethindrone-eth estradiol (triphasic)	
nitrofurantoin macrocrystal 50 MG,		norepinephrine bitartrate IV .....	227	.....	101
100 MG .....	51	NOREPINEPHRINE BITARTRATE		NORGESIC FORTE (Use	
nitrofurantoin monohyd macro .....	51	IV .....	227	orphenadrine w/ aspirin & caff) ...	194
NITROFURANTOIN		NOREPINEPHRINE		norgestimate-ethinyl estradiol	
MONOHYDRATE .....	86	BITARTRATE/DEXTROSE SOLN 5		(triphasic) .....	101
NITROFURAZONE .....	113	%-16 MG/250ML, 5 %-4 MG/250ML,		norgestimate-ethinyl estradiol ...	101
nitroglycerin (intra-anal) .....	17	5 %-8 MG/250ML .....	227	norgestrel & ethinyl estradiol 30	
nitroglycerin CPR .....	18	NOREPINEPHRINE		MCG-0.3 MG .....	101
nitroglycerin in d5w .....	18	BITARTRATE/SODIUM CHLORIDE		NORITATE CREA .....	119
nitroglycerin PT24 .....	18	SOLN 0.9 %-16 MG/250ML, 0.9 %-4		NORLIQVA SOLN .....	67
NITROGLYCERIN SOLN IV .....	18	MG/250ML, 0.9 %-8 MG/250ML .	228	NORMALYTE PACK .....	182
nitroglycerin SOLN TL 0.4		NOREPINEPHRINE/DEXTROSE		NORM-JECT LUER LOCK SYRINGE	
MG/SPRAY .....	18	SOLN 5 %-16 MG/250ML, 5 %-4		.....	174
nitroglycerin SUBL .....	18	MG/250ML, 5 %-8 MG/250ML ...	228	NORM-JECT TUBERKULIN	
nitroprusside sodium .....	49	NOREPINEPHRINE/SODIUM		1MLLUER SLIP .....	174
nitroprusside sodium-sodium chloride		CHLORIDE SOLN 0.9 %-16		NORMOSOL -R .....	182
.....	49	MG/250ML, 0.9 %-4 MG/250ML, 0.9		NORMOSOL-M/D5W .....	182
NITROSTAT SUBL (Use		%-8 MG/250ML .....	228	NORMOSOL-R .....	182
nitroglycerin) .....	18	norethin acet & estrad-fe CAPS ..	101	NORMOSOL-R/5% DEXTROSE	182
NIVA THYROID TABS .....	220	norethin acet & estrad-fe CHEW .	101	NORPACE CAPS (Use disopyramide	
NIX CREME RINSE LIQD EX (Use		norethin acet & estrad-fe TABS 1		phosphate) .....	19
permethrin) .....	120	MG-20 MCG-75 MG, 1.5 MG-30		NORPACE CR CP12 100 MG .....	19
nizatidine CAPS .....	221	MCG-75 MG .....	101	NORPACE CR CP12 150 MG .....	19
NOCDURNA SUBL .....	126	norethindrone & eth estradiol ...	101	NORPRAMIN TABS 10 MG (Use	
NONOXYNOL-9 .....	86	norethindrone & ethinyl estradiol-fe		desipramine hcl) .....	33
NORDITROPIN FLEXPPO SOPN		101		NORPRAMIN TABS 25 MG (Use	
125		norethindrone (contraceptive) ...	102	desipramine hcl) .....	33
Index 87		NORETHINDRONE .....	87	nortriptyline hcl CAPS .....	33
		norethindrone acet & eth estra ...	101		
		NORETHINDRONE ACETATE			
		POWD .....	214		

NORTRIPTYLINE HCL POWD .....33	NOVOLOG FLEXPEN RELION SOPN .....37	NUVESSA .....227
nortriptyline hcl SOLN .....33	NOVOLOG FLEXPEN SOPN .....37	NUVIGIL (Use armodafinil) .....3
NORVASC TABS (Use amlodipine besylate) .....67	NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION SUPN .....37	NUWIQ KIT .....131
NORVASC TABS 10 MG (Use amlodipine besylate) .....67	NOVOLOG MIX 70/30 PREFILLED FLEXPEN SUPN .....37	NUWIQ SOLR .....131
NORVIR PACK .....61	NOVOLOG MIX 70/30 RELION SUSP .....37	NUZYRA SOLR .....219
NORVIR TABS (Use ritonavir) .....61	NOVOLOG MIX 70/30 SUSP .....37	NUZYRA TABS .....219
NOURIANZ .....55	NOVOLOG PENFILL SOCT .....37	NYLIDRIN HYDROCHLORIDE ...69
NOURISIL GEL .....90	NOVOLOG RELION SOLN IJ .....37	NYMALIZE SOLN 6 MG/ML .....67
NOVA MAX BLOOD GLUCOSE MONITORING SYSTEM DEVI ...147	NOVOLOG SOLN IJ .....37	NYSTATIN (Use nystatin (mouth- throat)) .....187
NOVA MAX BLOOD GLUCOSE MONITORING SYSTEM KIT .....147	NOVOPEN ECHO DEVI .....174	nystatin (mouth-throat) .....187
NOVAFILM .....213	NOXAFIL PACK .....41	nystatin (topical) CREA .....110
NOVAVAX COVID-19 VACCINE 225	NP THYROID 120 TABS .....220	nystatin (topical) OINT .....110
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MG/ML .....	228	PIRACETAM .....	88	PLURONIC F127 POWD .....	212
phytonadione TABS 5 MG .....	228	PIRACETAM .....	88	PLURONIC GEL .....	212
PIASKY .....	132	PIRACETAM .....	88	PLURONIC L64 LIQD .....	212
PIFELTRO .....	61	PIRACETAM .....	88	PMX-1184 SILICONE LIQD .....	90
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pilocarpine hcl (oral) 7.5 MG .....	188	PIRACETAM .....	88	PNEUMOVAX 23/1 DOSE .....	224
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POLY HUB NEEDLE/21G X 1" ..	174	polyethylene glycol 3350 PACK ..	137	POLYSORBATE 60 .....	97
POLY HUB NEEDLE/21G X 1-1/2" 174		polyethylene glycol 3350 POWD ..	137	POLYSORBATE 80 .....	97
POLY HUB NEEDLE/22G X 1" ..	174	POLYETHYLENE GLYCOL 3350 POWD .....	214	POLYTUSSIN DM LIQD .....	105
POLY HUB NEEDLE/22G X 1-1/2" 174		POLYETHYLENE GLYCOL 400	214	POLY-VI-FLOR SUSP .....	191
POLY HUB NEEDLE/23G X 1" ..	174	POLYETHYLENE GLYCOL 4500 214		POLY-VI-FLOR/IRON CHEW .....	191
POLY HUB NEEDLE/23G X 1-1/2" 174		POLYETHYLENE GLYCOL 600	214	POLY-VI-FLOR/IRON SUSP .....	191
POLY HUB NEEDLE/25G X 1" ..	174	POLYETHYLENE GLYCOL 8000 GRAN .....	214	POLYVINYL ALCOHOL .....	88
POLY HUB NEEDLE/25G X 1-1/2" 174		POLYETHYLENE GLYCOL 8000 POWD .....	214	polyvinyl alcohol 1.4 % .....	198
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POLY HUB NEEDLE/27G X 1/2" ..	174	POLYETHYLENE GLYCOL 8000 POWD .....	214	POLYVINYLPIRROLIDONE K-90 88	
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POLYETHYLENE GLYCOL 1450 FLAK .....	213	polymyxin b sulfate SOLR .....	51	PONAZURIL .....	88
POLYETHYLENE GLYCOL 1450 LIQD .....	213	polymyxin b-trimethoprim .....	200	posaconazole SOLN .....	41
POLYETHYLENE GLYCOL 1450 POWD .....	214	POLYOXYL 40 HYDROGENATEDCASTOR OIL ..	88	posaconazole SUSP .....	41
		POLYOXYL 40 STEARATE PLLT	214	posaconazole TBEC .....	41
		POLYOXYL 40 STEARATE POWD	214	POSFREA SOLN .....	40
		POLYPEG SUPPOSITORY BASE MISC .....	212	POSLUMA .....	121
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POTASSIUM ACETATE CRYSTALS ...	potassium chloride in dextrose 5 %-10 MEQ/L, 5 %-20 MEQ/L .....	182	POTASSIUM IODIDE CRYSTALS .....	88
POTASSIUM ACETATE POWDER ...	potassium chloride in NaCl 20 MEQ/L-0.45 %, 20 MEQ/L-0.9 %, 40 MEQ/L-0.9 % .....	182	POTASSIUM IODIDE GRANULAR .....	88
potassium acetate SOLN 2 MEQ/ML .183	potassium chloride microencapsulated crystals ..	183	POTASSIUM IODIDE POWDER .....	88
POTASSIUM ACETATE SOLN 2 MEQ/ML .....	183	POTASSIUM METABISULFITE POWDER .....	88	
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POTASSIUM ASPARTATE .....	88	POTASSIUM NITRATE POWDER ...	99	
POTASSIUM AZELAIOYL DIGLYCINATE .....	88	POTASSIUM PERCHLORATE ...	99	
POTASSIUM BENZOATE .....	88	POTASSIUM PERMANGANATE GRANULAR .....	88	
POTASSIUM BICARBONATE GRANULAR .....	183	POTASSIUM PHOSPHATE DIBASIC ANHYDROUS GRANULAR .....	88	
POTASSIUM BICARBONATE POWDER .....	183	POTASSIUM PHOSPHATE DIBASIC GRANULAR .....	88	
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POTASSIUM BITARTRATE .....	99	POTASSIUM PHOSPHATE MONOBASIC POWDER .....	89	
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POTASSIUM BROMIDE GRANULAR ...	99	POTASSIUM PHOSPHATES ...	183	
POTASSIUM BROMIDE POWDER ...	99	potassium phosphates 236 MG/ML-224 MG/ML .....	183	
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potassium chloride CPCR 8 MEQ .183	potassium citrate (alkalinizer) TBCR 10 MEQ, 540 MG, 1080 MG .....	130	POTASSIUM SODIUM TARTRATE POWDER .....	89
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POTASSIUM CHLORIDE GRANULAR .183	POTASSIUM CITRATE MONOHYDRATE GRANULAR .....	130	POTASSIUM SORBATE POWDER .	205
potassium chloride in dextrose & sodium chloride 5 %-0.075 %-0.45 %, 5 %-0.15 %-0.225 %, 5 %-0.15 %-0.9 %, 5 %-10 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.2 %, 5 %-20 MEQ/L-0.225 %, 5 %-20 MEQ/L-0.45 %, 5 %-20 MEQ/L-0.9 %, 5 %-30 MEQ/L-	POTASSIUM CITRATE POWDER ..	130	POTASSIUM SULFATE .....	89
	POTASSIUM GLUCONATE ANHYDROUS .....	99	POVIDONE .....	89
	POTASSIUM HYDROXIDE PLLET .	71	POVIDONE IODINE .....	200
	POTASSIUM HYDROXIDE SOLN XX 10 %, 20 %, 45 % .....	71		

POVIDONE K-30 .....	89	PRECISION XTRA BLOOD	103
POVIDONE-IODINE FLAK .....	89	GLUCOSE TEST STRIPS STRP	122
POVIDONE-IODINE POWD .....	89	PRECISION XTRA KIT .....	149
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PRADAXA CAPS (Use dabigatran etexilate mesylate) .....	25	PRED FORTE (Use prednisolone acetate (ophth)) .....	201
PRADAXA CAPS 75 MG .....	25	PRED MILD .....	201
PRADAXA CAPS .....	25	prednicarbate OINT .....	116
PRALIDOXIME CHLORIDE .....	89	prednisolone acetate (ophth) ....	201
PRALINES AND CREAM FLAVOR LIQD .....	209	PREDNISOLONE ACETATE P-F 201	
pramipexole dihydrochloride TABS 0.75 MG, 1 MG, 1.5 MG .....	56	PREDNISOLONE ACETATE POWD . 103	
pramipexole dihydrochloride TABS 56		PREDNISOLONE ANHYDROUS POWD .....	103
pramipexole dihydrochloride TB24 0.375 MG, 2.25 MG, 3 MG, 3.75 MG . 56		PREDNISOLONE POWD .....	103
pramipexole dihydrochloride TB24	56	PREDNISOLONE SODIUM PHOSPHATE .....	201
PRAMOSONE CREA 2.5 %-1 % (Use pramoxine-hc) .....	116	PREDNISOLONE SODIUM PHOSPHATE POWD .....	103
PRAMOXINE HCL POWD .....	118	prednisolone sodium phosphate SOLN 20 MG/5ML .....	103
pramoxine-hc CREA 2.5 %-1 % ..	116	prednisolone sodium phosphate SOLN 5 MG/5ML, 10 MG/5ML, 15 MG/5ML, 25 MG/5ML .....	103
prasugrel hcl .....	132	prednisolone sodium phosphate SOLN 6.7 MG/5ML .....	103
prasugrel hcl 10 MG .....	132	prednisolone sodium phosphate TBDP .....	103
pravastatin sodium .....	45	PREDNISOLONE SODIUM PHOSPHATE, USP POWD .....	103
PRAXBIND .....	39	prednisolone SOLN .....	103
praziquantel .....	18	prednisolone TABS .....	103
PRAZQUANTEL POWD .....	89	PREDNISOLONEUSP, MICRONIZED ANHYDROUS POWD	
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PRAZOSIN HYDROCHLORIDE POWD .....	46		
PRECEDEX SOLN .....	136		
		PREDNISONE INTENSOL CONC 103	
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		prednisone SOLN .....	103
		prednisone TABS .....	103
		prednisone TBPK .....	103
		PREFEST .....	126
		pregabalin (once-daily) .....	217
		PREGABALIN .....	89
		pregabalin CAPS .....	27
		pregabalin SOLN .....	27
		PREGNENOLONE .....	99
		PREGNENOLONE MICRONIZED 99	
		PREGNITUDE .....	196
		PREHEVBRIO .....	226
		PREMARIN .....	227
		PREMARIN SOLR .....	127
		PREMARIN TABS .....	127
		PREMESISRX .....	192
		PREMPHASE .....	126
		PREMPRO .....	126
		PRENA1 PEARL .....	192
		prenatal vit w/ ferrous fumarate-I methylfolate-folic acid .....	192
		prenatal vit w/ iron carbonyl-folic acid TABS 120 MG-10 MG-1.25 MG-315 UNIT-15 MCG-3.4 MG-10 MG-1 MG- 2 MG-15 MG-10 MG-20 UNIT-2100 UNIT-50 MG, 120 MG-3 MG-30 MCG-1 MG-400 UNIT-8 MCG-3 MG- 20 MG-7 MG-3 MG-100 MG-15 MG-3	



MG-4000 UNIT-200 MG-150 MCG-30 UNIT-29 MG .....	192	PRESERVISION AREDS CAPS .	189	darunavir) .....	62
prenatal without a w/ fe fumarate-l methylfolate-fa-dha .....	192	PRESERVISION/LUTEIN CAPS .	189	PRIFTIN .....	52
PRENATE .....	192	PRETOMANID .....	52	PRILOCAINE .....	89
PRENATE AM .....	192	PRETZ SOLN .....	97	PRILOCAINE HCL .....	89
PRENATE DHA 90 MG-26 MG-400 MCG-400 UNIT-25 MCG-155 MG-50 MG-300 MG-40 UNIT-600 MCG-18 MG .....	192	PREVACID CPDR 30 MG (Use lansoprazole) .....	223	PRILOCAINE HCLUSP .....	89
PRENATE ELITE 75 MG-21 MG-330 MCG-400 MCG-600 UNIT-13 MCG-3.5 MG-21 MG-3 MG-155 MG-25 MG-15 MG-1.5 MG-2600 UNIT-150 MCG-40 UNIT-600 MCG-20 MG .	192	PREVACID SOLUTAB TBDD (Use lansoprazole) .....	223	PRILOCAINE HYDROCHLORIDE	89
PRENATE ENHANCE .....	192	PREVDUO .....	38	PRILOSEC OTC TBEC (Use omeprazole magnesium) .....	223
PRENATE ESSENTIAL 90 MG-26 MG-280 MCG-400 MCG-220 UNIT-13 MCG-155 MG-50 MG-300 MG-150 MCG-10 UNIT-40 MG-600 MCG-18 MG .....	192	PREVIDENT 5000 BOOSTER PLUS PSTE DT (Use sodium fluoride (dental)) .....	187	PRILOSEC PACK .....	223
PRENATE MINI 60 MG-26 MG-280 MCG-400 MCG-1000 UNIT-13 MCG-80 MG-25 MG-350 MG-18 MG-150 MCG-10 UNIT-600 MCG-25 MG .	192	PREVIDENT 5000 DRY MOUTH GEL (Use sodium fluoride (dental))	187	PRIMACARE .....	192
PRENATE PIXIE .....	192	PREVIDENT 5000 KIDS PSTE DT (Use sodium fluoride (dental))	187	PRIMAQUINE PHOSPHATE TABS (Use primaquine phosphate) .....	52
PRENATE RESTORE .....	192	PREVIDENT 5000 ORTHO DEFENSE PSTE DT (Use sodium fluoride (dental)) .....	187	primaquine phosphate TABS .....	52
PRENATVITE COMPLETE TABS	192	PREVIDENT 5000 PLUS CREA (Use sodium fluoride (dental)) .....	187	primidone .....	27
PRENATVITE PLUS TABS .....	192	PREVIDENT 5000 PLUS CREA (Use sodium fluoride (dental)) .....	187	PRIMIDONE .....	89
PREPIDIL GEL .....	203	PREVIDENT FLUORIDE GEL (Use sodium fluoride (dental)) .....	187	primidone 50 MG, 250 MG .....	27
PRESCRIPTION SUPPORT CAPS	189	PREVIDENT RINSE SOLN .....	187	PRIORIX SUSR .....	226
PRESERVISION AREDS 2 + MULTI VITAMIN CAPS .....	189	PREVNAR 13 .....	224	PRISTIQ 100 MG (Use desvenlafaxine succinate) .....	33
PRESERVISION AREDS 2 CAPS	189	PREVNAR 20 .....	224	PRISTIQ 25 MG, 50 MG (Use desvenlafaxine succinate) .....	33
		PREZCOBIX .....	62	PRISTIQ 50 MG (Use desvenlafaxine succinate) .....	33
		PREZISTA SUSP .....	62	PRO DNA COLLECTION KIT ...	122
		PREZISTA TABS 150 MG .....	62	PRO VOICE V8 BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	149
		PREZISTA TABS 600 MG (Use darunavir) .....	62	PRO VOICE V9 BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	149
		PREZISTA TABS 75 MG .....	62	PROAIR DIGIHALER .....	23
		PREZISTA TABS 800 MG (Use		PROAIR RESPICLICK AEPB .....	23
				probenecid .....	131
				PROCAINAMIDE HCL POWD .....	19

procainamide hcl SOLN .....	19	GLUCOSE METER KIT KIT .....	149	105	
PROCAINE HCL CRYSTALS .....	139	PROFLAVINE HEMISULFATE .....	89	PROMETHAZINE HCL POWD .....	89
PROCAINE HYDROCHLORIDE POWD .....	139	progesterone CAPS .....	214	promethazine hcl SOLN IJ 25 MG/ML, 50 MG/ML .....	43
PROCAP 90 CAPSULE EXCIPIENT 212		PROGESTERONE MICRONIZED (SOY) .....	89	promethazine hcl SOLN OR 6.25 MG/5ML .....	43
PROCARBAZINE HCL .....	89	PROGESTERONE MICRONIZED (YAM) .....	89	promethazine hcl SUPP 12.5 MG, 25 MG .....	43
PROCARDIA XL TB24 30 MG, 90 MG (Use nifedipine) .....	67	PROGESTERONE MICRONIZED 89		promethazine hcl SUPP .....	43
PROCARDIA XL TB24 60 MG (Use nifedipine) .....	67	PROGESTERONE MICRONIZED PREMIUM .....	89	promethazine hcl TABS 25 MG, 50 MG .....	43
prochlorperazine .....	59	PROGESTERONE MILLED POWD 89		promethazine hcl TABS .....	43
PROCHLORPERAZINE EDISYLATE .....	89	progesterone OIL .....	214	promethazine w/codeine SOLN ..	105
prochlorperazine edisylate 10 MG/2ML .....	59	PROGESTERONE POWD .....	89	promethazine w/codeine SYRP ..	105
PROCHLORPERAZINE MALEATE POWD .....	59	PROGESTERONE ULTRA MICRONIZED .....	89	promethazine-dm SYRP .....	105
prochlorperazine maleate TABS ...	59	PROGESTERONE WETTABLE (SOY) POWD .....	89	promethazine-phenylephrine-codeine .....	105
PROCRIPT .....	133	PROGESTERONE WETTABLE (YAM) POWD .....	89	PROMETRIUM CAPS (Use progesterone) .....	214
PROCTOFOAM HC FOAM EX ....	17	PROGESTERONE WETTABLE POWD .....	89	propafenone hcl CP12 .....	20
PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	149	PROGESTERONE WETTABLE POWD .....	89	propafenone hcl TABS .....	20
PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING SYSTEM KIT .....	149	PROGRAF CAPS (Use tacrolimus) 185		PROPANEDIOL .....	89
PRODIGY AUTOCODE BLOOD GLUCOSE MONITORING/TALKING KIT .....	149	PROGRAF PACK .....	185	PROPANTHELIN BROMIDE POWD .....	221
PRODIGY NO CODING BLOOD GLUCOSE KIT .....	149	PROGRAF SOLN .....	185	proparacaine hcl .....	201
PRODIGY POCKET BLOOD GLUCOSE METER KIT KIT .....	149	PROLATE SOLN .....	15	PROPARACAINE HCL .....	89
PRODIGY VOICE BLOOD		PROLATE TABS .....	15	propofol EMUL .....	129
		PROLENSA (Use bromfenac sodium (ophth)) .....	202	propranolol hcl CP24 .....	66
		PROMACTA PACK .....	133	PROPRANOLOL HCL POWD .....	66
		PROMAZINE HCL .....	89	propranolol hcl SOLN IV 1 MG/ML	66
		promethazine & phenylephrine SYRP.		propranolol hcl SOLN OR 20 MG/5ML, 40 MG/5ML .....	66
				propranolol hcl TABS .....	66

PROPYL GALLATE .....	89	PROZAC CAPS 10 MG, 20 MG (Use fluoxetine hcl) .....	32	PYRAZINAMIDE .....	89
PROPYLENE GLYCOL .....	89	PROZAC CAPS 40 MG (Use fluoxetine hcl) .....	32	pyrethrins-piperonyl butoxide SHAM 4 %-0.3 %-0.33 %, 4 %-0.33 % ..	120
PROPYLENE GLYCOL MONOSTEARATE .....	89	pseudoephed-bromphen-dm SYRP 10 MG/5ML-30 MG/5ML-2 MG/5ML 105		PYRIDIDIUM TABS (Use phenazopyridine hcl) .....	131
PROPYLPARABEN .....	205	PSEUDOEPHEDRINE HCL CRYSTALS 195		PYRIDOSTIGMINE BROMIDE ...	89
propylthiouracil .....	220	PSEUDOEPHEDRINE HCL POWDER 195		pyridostigmine bromide SOLN OR	52
PROPYLTHIOURACIL .....	89	pseudoephedrine hcl TABS .....	195	pyridostigmine bromide TABS 30 MG .....	52
PROQUAD SUSP .....	226	pseudoephedrine hcl TB12 .....	195	pyridostigmine bromide TABS 60 MG .....	52
PRORENAL+D/OMEGA-3 CAPS	189	pseudoephedrine-guaifenesin TB12 1200 MG-120 MG .....	105	pyridostigmine bromide TBCR .....	52
PROSCAR (Use finasteride) .....	131	pseudoephedrine-guaifenesin TB12 600 MG-60 MG .....	105	PYRIDOXAL-5-PHOSPHATE MONOHYDRATE .....	89
PROSOL SOLN .....	198	PSYLLIUM HUSK .....	89	PYRIDOXINE HCL POWD .....	228
PROSTAGLANDIN E1 .....	99	PTS PANELS CHOL+GLU .....	122	pyridoxine hcl TABS 25 MG, 50 MG, 100 MG .....	228
PROSTAGLANDIN E2 .....	79	PTS PANELS LIPID PANEL+EGLU TEST STRIPS .....	122	PYRIDOXINE HYDROCHLORIDE POWD .....	228
PROSTIN VR PEDIATRIC .....	187	PULLULAN .....	89	PYRILAMINE MALEATE CRYSTALS ...	42
protamine sulfate .....	133	PULMICORT FLEXHALER AEPB .	21	PYRILAMINE MALEATE POWD ..	42
PROTAMINE SULFATE .....	89	PULMICORT SUSP 0.25 MG/2ML, 0.5 MG/2ML (Use budesonide (inhalation)) .....	21	PYRIMETHAMINE .....	89
PROTEASE .....	89	PULMICORT SUSP 1 MG/2ML (Use budesonide (inhalation)) .....	21	PYROGALLOL .....	99
PROTECT CARDIO AF CAPS ...	189	PUMICE (FLOUR) .....	99	PYRUVIC ACID LIQD .....	99
PROTECT PLUS SO CAPS .....	189	PUMPKIN FLAVOR LIQD .....	209	PYRUVIC ACID POWD .....	99
PROTEGRA CAPS .....	189	PURIXAN SUSP .....	53	QBRELIS SOLN .....	45
PROTONIX PACK (Use pantoprazole sodium) .....	223	PYLARIFY .....	121	QC BORIC ACID POWD .....	99
PROTONIX TBEC 20 MG (Use pantoprazole sodium) .....	223	PYRANTEL PAMOATE .....	89	QC CAMPHOR SPIRIT .....	97
PROTONIX TBEC 40 MG (Use pantoprazole sodium) .....	223	pyrazinamide .....	52	QC CASTOR OIL .....	97
PROTOPAM CHLORIDE SOLR ...	39			QC OCUHEALTH VISION SUPPORT 2 CAPS .....	189
protriptyline hcl .....	33			QC SWEET OIL .....	97
PROVENGE .....	54			QDOLO SOLN (Use tramadol hcl) .	13
PROVERA (Use medroxyprogesterone acetate) ...	214				
PROVIGIL (Use modafinil) .....	3				

QELBREE .....	2	QUFLORA GUMMIES CHEW .....	191	QUVIVIQ .....	137
QNASL .....	194	QUICKTEK KIT .....	149	QVAR REDIHALER 40 MCG/ACT	21
QNASL CHILDRENS .....	194	QUILLICHEW ER CHER .....	3	QVAR REDIHALER 80 MCG/ACT	21
QTERN .....	34	QUILLIVANT XR SRER .....	3	RA ARTHRITIS PAIN RELIEF CREA	118
QUADRACEL SUSP .....	220	QUINACRINE DIHYDROCHLORIDE		RA EPSOM SALT GRAN XX .....	138
QUADRACEL SUSY .....	220	.....	52	RA PETROLEUM JELLY .....	214
QUARTETTE (Use levonorgestrel- ethinyl estradiol (91-day)) .....	101	QUINACRINE DIHYDROCHLORIDE DIHYDRATE .....	52	RABAVERT .....	226
QUASSIA VINEGAR MS .....	97	QUINACRINE HYDROCHLORIDE	52	rabeprazole sodium TBEC .....	223
QUATERNIUM-15 .....	89	quinapril hcl .....	45	RACEPINEPHRINE HCL .....	90
quazepam .....	136	quinapril-hydrochlorothiazide 12.5 MG-10 MG .....	48	RAGWITEK SUBL .....	4
QUDEXY XR CS24 (Use topiramate) 27		quinapril-hydrochlorothiazide 12.5 MG-20 MG .....	48	raloxifene hcl .....	125
QUERCETIN DIHYDRATE .....	89	quinapril-hydrochlorothiazide 12.5 MG-20 MG .....	48	ramelteon .....	137
QUESTRAN LIGHT POWD (Use cholestyramine light) .....	44	quinapril-hydrochlorothiazide 25 MG- 20 MG .....	48	ramipril CAPS .....	45
QUESTRAN PACK (Use cholestyramine) .....	44	quinidine gluconate TBCR .....	19	RANEXA TB12 (Use ranolazine) ..	18
QUESTRAN POWD (Use cholestyramine) .....	44	QUINIDINE SULFATE DIHYDRATE CRYS .....	99	ranolazine TB12 .....	18
quetiapine fumarate TABS 150 MG 59		quinidine sulfate TABS .....	20	RAPAFLO (Use silodosin) .....	131
quetiapine fumarate TABS 200 MG, 400 MG .....	59	QUININE HCL .....	89	RAPAFLO 8 MG (Use silodosin) .	131
quetiapine fumarate TABS 25 MG, 50 MG, 100 MG, 200 MG .....	59	quinine sulfate CAPS 324 MG .....	52	RAPAMUNE SOLN (Use sirolimus)	185
quetiapine fumarate TABS 300 MG, 400 MG .....	59	QUININE SULFATE DIHYDRATE POWD .....	52	RAPAMUNE TABS (Use sirolimus)	185
quetiapine fumarate TB24 150 MG, 200 MG, 300 MG, 400 MG .....	59	QUININE SULFATE POWD .....	52	RAPSEED OIL .....	90
quetiapine fumarate TB24 .....	59	QUINIZARIN GREEN SS .....	206	RAPIVAB .....	64
QUFLORA FE .....	190	QUINTABS TABS .....	191	rasagiline mesylate .....	57
QUFLORA FE PEDIATRIC LIQD	191	QUINTET AC BLOOD GLUCOSEMONITORING SYSTEM DEVI .....	149	RASAGILINE MESYLATE .....	90
		QUINTET BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	149	RASPBERRY CONCENTRATE CONC .....	209
		QUTENZA .....	118	RASPBERRY FLAVOR ARTIFICIAL CONC .....	209
				RASPBERRY FLAVOR LIQD .....	209
				RASPBERRY FLAVOR POWD ..	209

RASPBERRY OS LIQD .....	209	REFRESH OPTIVE ADVANCED SENSITIVE .....	198	RELION PREMIER COMPACT BLOOD GLUCOSE MONITORING SYSTEM KIT .....	149
RASUVO SOAJ 20 MG/0.4ML .....	5	REFRESH OPTIVE MEGA-3 ....	198	RELION PREMIER VOICE BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	149
RASUVO SOAJ 7.5 MG/0.15ML, 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML .....	5	REFRESH RELIEVA PF SOLN ..	198	RELION PRIME BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	149
RAUWOLFIA SERPENTINA .....	90	REFUAH PLUS BLOOD GLUCOSEMONITORING SYSTEM KIT .....	149	RELION TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH KIT .....	149
RAYALDEE .....	125	regadenoson .....	120	RELION ULTIMA BLOOD GLUCOSE MONITORING SYSTEM KIT .....	149
RAYOS TBEC .....	103	REGENT ALCOHOL .....	210	RELISTOR SOLN .....	129
RAZADYNE ER CP24 (Use galantamine hydrobromide) .....	215	REGLAN TABS (Use metoclopramide hcl) .....	128	RELISTOR TABS .....	129
RDT BASE POWD .....	212	REGONOL SOLN IV .....	52	RELNATE DHA CAPS .....	192
RDT-PLUS POWD .....	212	RELAFEN DS .....	9	RELPAK (Use eletriptan hydrobromide) .....	179
REBIF REBIDOSE SOAJ .....	216	RELENZA DISKHALER .....	64	RELPAK 40 MG (Use eletriptan hydrobromide) .....	179
REBIF REBIDOSE TITRATIONPACK SOAJ .....	216	RELEXXII TBCR 18 MG, 27 MG, 36 MG, 45 MG, 54 MG, 63 MG (Use methylphenidate hcl) .....	4	RELTONE CAPS .....	127
REBIF SOSY .....	216	RELEXXII TBCR 18 MG, 27 MG, 54 MG .....	4	REMDESIVIR SOLR 100 MG .....	64
REBIF TITRATION PACK SOSY .....	216	RELEXXII TBCR 36 MG .....	3	REMEDIENT CAPS .....	190
REBLOZYL .....	133	RELEXXII TBCR 72 MG .....	4	REMERON SOLTAB TBDP 15 MG (Use mirtazapine) .....	30
REBYOTA .....	129	RELEXXII TBCR .....	4	REMERON SOLTAB TBDP 30 MG (Use mirtazapine) .....	30
RECARBRIO .....	50	RELION CONFIRM BLOOD GLUCOSE MONITORING SYSTEM KIT .....	149	REMERON SOLTAB TBDP 45 MG (Use mirtazapine) .....	30
RECOMBIVAX HB SUSP .....	226	RELION KETONE TEST STRIPS STRP .....	122	REMERON TABS 15 MG (Use mirtazapine) .....	30
RECOMBIVAX HB SUSY .....	226	RELION MICRO BLOOD GLUCOSE MONITORING SYSTEM KIT .....	149	REMERON TABS 30 MG (Use mirtazapine) .....	30
RECOTHROM .....	135	RELION PREMIER BLU BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	149	remifentanil hcl .....	13
RECOTHROM/SPRAY APPLICATOR KIT .....	135	RELION PREMIER CLASSIC BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	149	RENAGEL (Use sevelamer hcl) .	129
RED YEAST RICE .....	90				
RED YEAST RICE EXTRACT ....	90				
REDITREX SOSY .....	5				
REFRESH .....	198				
REFRESH DIGITAL PF .....	198				

RENEWCREAM HRT .....	214	RETIN-A MICRO PUMP (Use tretinoin microsphere) .....	108	ribavirin (hepatitis c) CAPS .....	63
RENFLEXIS .....	129	RETINALDEHYDE .....	90	ribavirin .....	64
RENOVAGE .....	93	RETINOIC ACID POWD .....	108	RIBAVIRIN .....	90
RENVELA PACK (Use sevelamer carbonate) .....	129	RETINOIC ACID-ALL TRANS POWD .....	108	RIBOFLAVIN .....	90
RENVELA TABS (Use sevelamer carbonate) .....	129	RETINOL MOLECULAR FILM OIL	94	riboflavin TABS .....	228
repaglinide .....	37	RETROVIR CAPS (Use zidovudine) .	62	RIBOFLAVIN-5-PHOSPHATE SODIUM .....	90
RESERPINE POWD .....	46	RETROVIR IV INFUSION SOLN ..	62	RIBOFLAVIN-5-PHOSPHATE SODIUM ANHYDROUS .....	90
RESORCINOL CRYST .....	99	RETROVIR SYRP (Use zidovudine) .	62	RIBOSE (D) .....	79
RESORCINOL POWD .....	99	REXALL BLOOD GLUCOSE MONITORING SYSTEM KIT .....	149	RIDAURA .....	7
RESTASIS EMUL (Use cyclosporine (ophth)) .....	201	REXTOVY LIQD .....	39	rifabutin .....	52
RESTASIS MULTIDOSE EMUL ..	201	REXULTI .....	60	RIFAMPIN .....	90
RESTORIL 15 MG, 30 MG (Use temazepam) .....	136	REYATAZ CAPS 200 MG (Use atazanavir sulfate) .....	62	rifampin CAPS .....	52
RESTORIL 7.5 MG, 22.5 MG (Use temazepam) .....	136	REYATAZ CAPS 300 MG (Use atazanavir sulfate) .....	62	rifampin SOLR .....	52
RESVERATROL .....	90	REYATAZ PACK .....	62	RIFAXIMIN .....	90
RESVERATROL 98% .....	90	REYVOW .....	179	RIGHTEST GM100 BLOOD GLUCOSE MONITORING SYSTEM KIT .....	149
RESVERATROL 98+% .....	90	REZDIFFRA .....	128	RIGHTEST GM300 BLOOD GLUCOSE MONITORING SYSTEM KIT .....	149
RETACRIT .....	133	REZIPRES 47 MG/10ML .....	228	RIGHTEST GM550 BLOOD GLUCOSE MONITORING SYSTEM KIT .....	149
RETAVASE 10 UNIT .....	133	REZUROCK .....	184	RIGHTEST GT333 BLOOD GLUCOSE MONITORING SYSTEM DEVI .....	150
RETAVASE HALF-KIT 10 UNIT ..	133	REZVOGLAR KWIKPEN .....	37	RILUTEK TABS (Use riluzole) ....	195
RETEVMO TABS .....	55	REZZAYO .....	40	riluzole TABS .....	195
RETIN-A CREA (Use tretinoin) ...	108	R-GENE 10 .....	120	rimantadine hydrochloride TABS ..	64
RETIN-A GEL 0.01 % (Use tretinoin) .	108	RHOFADE .....	119	RIMSO-50 .....	130
RETIN-A GEL 0.025 % (Use tretinoin) .....	108	RHOGAM ULTRA-FILTERED PLUS SOSY IM .....	204	ringer's .....	182
RETIN-A MICRO (Use tretinoin microsphere) .....	108	RHOPHYLAC SOSY IJ .....	204		
RETIN-A MICRO .....	108	RHOPRESSA .....	201		

ringer's irrigation .....	185	RITUXAN .....	53	ROSE BENGAL B .....	90
RINVOQ TB24 15 MG .....	5	RITUXAN HYCELA .....	55	ROSE OIL .....	97
RINVOQ TB24 .....	5	rivastigmine 13.3 MG/24HR .....	215	ROSEMARY OIL .....	97
RIOMET SOLN (Use metformin hcl) . 35		rivastigmine 4.6 MG/24HR, 9.5 MG/24HR .....	215	RO SIN LUMP MISC .....	99
risedronate sodium TABS 150 MG 124		rivastigmine tartrate CAPS .....	215	RO SIN POWD .....	100
risedronate sodium TABS 35 MG 124		rizatRIPTAN benzoate TABS .....	179	ROSUVASTATIN CALCIUM .....	90
risedronate sodium TABS 35 MG 125		rizatRIPTAN benzoate TBDP 10 MG 179		rosuvastatin calcium TABS .....	45
risedronate sodium TABS 5 MG, 30 MG .....	124	rizatRIPTAN benzoate TBDP .....	179	ROTARIX SUSP .....	226
risedronate sodium TBEC .....	125	ROBINUL FORTE TABS (Use glycopyrrolate) .....	221	ROTARIX SUSR .....	226
RISPERDAL CONSTA (Use risperidone microspheres) .....	58	ROBINUL TABS (Use glycopyrrolate) .....	221	ROTATEQ SOLN .....	226
RISPERDAL SOLN (Use risperidone) .....	58	ROCALTROL CAPS (Use calcitriol) 125		ROWASA (Use mesalamine w/ cleanser) .....	129
RISPERDAL TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG (Use risperidone) 58		ROCKLATAN .....	201	ROXICODONE TABS 15 MG, 30 MG (Use oxycodone hcl) .....	13
risperidone microspheres .....	58	ROCURONIUM BROMIDE .....	90	ROXYBOND TABA .....	13
risperidone SOLN .....	58	rocuronium bromide SOLN .....	195	ROZEREM (Use ramelteon) .....	137
risperidone TABS 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG .....	58	roflumilast .....	21	ROZLYTREK CAPS .....	55
risperidone TABS .....	58	RONIDAZOLE .....	90	RUBIDIUM CHLORIDE .....	90
risperidone TBDP 0.5 MG, 1 MG, 3 MG, 4 MG .....	58	ROOT BEER FLAVOR LIQD .....	209	RUCONEST .....	132
risperidone TBDP .....	58	ropinirole hydrochloride TABS 0.25 MG, 3 MG, 4 MG .....	56	rufinamide SUSP .....	27
RITALIN LA CP24 (Use methylphenidate hcl) .....	4	ropinirole hydrochloride TABS 0.5 MG, 1 MG, 2 MG, 5 MG .....	56	rufinamide TABS .....	27
RITALIN TABS 10 MG, 20 MG (Use methylphenidate hcl) .....	4	ropinirole hydrochloride TB24 .....	56	RUKOBIA .....	62
RITALIN TABS 5 MG (Use methylphenidate hcl) .....	4	ropivacaine hcl SOLN IJ .....	139	RUTIN .....	90
ritonavir TABS .....	62	ROPIVACAINE HYDROCHLORIDE . 90		RUXIENCE .....	53
		ROPIVACAINE HYDROCHLORIDE SOLN IJ 2 MG/ML .....	139	RYALTRIS .....	194
		ROSADAN KIT .....	119	RYANODEX SUSR .....	193
				RYBELSUS TABS .....	35
				RYBREVANT .....	53
				RYKINDO SRER .....	58
				RYLAZE .....	55
				RYSTIGGO 280 MG/2ML, 420	

MG/3ML .....	184	IMMUNE GUMMY CHEW .....	185	menthol) .....	111
RYSTIGGO 560 MG/4ML, 840		SAMBUCUS ELDERBERRY		SASSAFRAS OIL .....	97
MG/6ML .....	184	IMMUNE SUPPORT CHEW .....	186	SAVAYSA .....	23
RYTARY CPCR .....	56	SAMBUCUS ELDERBERRY		SAVELLA TABS .....	216
RYTELO .....	55	IMMUNE SUPPORT KIDS CHEW		SAVELLA TITRATION PACK MISC	
RYTHMOL SR CP12 (Use		186		216	
propafenone hcl) .....	20	SAMBUCUS ELDERBERRY LOZG		SAW PALMETTO BERRY POWD .	90
RYVENT TABS .....	42	186		saxagliptin hcl .....	35
SABRIL PACK (Use vigabatrin) ...	28	SAMBUCUS ELDERBERRY		saxagliptin-metformin hcl .....	34
SABRIL TABS (Use vigabatrin) ...	28	VITAMIN C LOZG .....	186	SAXENDA .....	2
SACCHARIN CALCIUM .....	90	SAMBUCUS ELDERBERRY ZINC		SCAR CARE BASE ENHANCED	
SACCHARIN POWD .....	123	LOZG .....	186	214	
S-ADENOSYL-L-METHIONINE		SAMBUCUS KIDS COUGH RELIEF		SCARLET RED .....	90
DISULFATE TOSYLATE .....	73	+ IMMUNE GUMMY CHEW .....	186	SCARTRATE .....	119
SAFFLOWER OIL .....	97	SANCUSO PTCH .....	40	SCENESSE .....	119
SAGE LEAF .....	90	SANDIMMUNE CAPS (Use		scopolamine .....	40
SALAGEN 5 MG (Use pilocarpine hcl		cyclosporine) .....	185	SCOPOLAMINE HBR POWD ....	221
(oral)) .....	188	SANDIMMUNE SOLN IV 50 MG/ML .		SEASONIQUE (Use levonorgestrel-	
SALICATE LIQD .....	118	185		ethinyl estradiol (91-day)) .....	101
SALICYLIC ACID CRYST .....	90	SANDIMMUNE SOLN OR 100		SECRETIN-MANNITOL .....	90
salicylic acid FOAM .....	118	MG/ML .....	185	SECUADO .....	59
salicylic acid GEL 6 % .....	118	SANDOSTATIN LAR DEPOT KIT		SECURESAFE SAFETY	
salicylic acid LIQD 2 %, 17 %, 27.5 %		126		HYPODERMIC NEEDLE/19G X 1"	
.....	118	SANOFI COVID-19		174	
SALICYLIC ACID POWD .....	90	VACCINE/ANTIGEN COMPONENT .		SECURESAFE SAFETY	
SALICYLIC ACID SOLN .....	90	226		HYPODERMIC NEEDLE/19G X 1-	
SALIMEZ CREA .....	118	SAPHNELO .....	187	1/2" .....	174
saline SOLN .....	194	SAPHRIS (Use asenapine maleate) .		SECURESAFE SAFETY	
salsalate .....	11	59		HYPODERMIC NEEDLE/21G X 1-	
SALSALATE .....	90	SAPHRIS .....	59	1/2" .....	174
SALYCIM CREA .....	118	SAPHRIS 5 MG (Use asenapine		SECURESAFE SAFETY	
SAMBUCUS COUGH RELIEF +		maleate) .....	59	HYPODERMIC NEEDLE/22G X 1"	
Index 107		SARCLISA .....	53	174	
		SARDINE FLAVOR LIQD .....	209	SECURESAFE SAFETY	
		SARNA LOTN (Use camphor &		HYPODERMIC NEEDLE/22G X 1"	



HYPODERMIC NEEDLE/25G X 1-1/2" .....	174	SELENIUM SULFIDE .....	90	CHEW .....	138
SECURES SAFE SAFETY HYPODERMIC NEEDLE/26G X 1/2" .....	174	selenium sulfide LOTN 1 % .....	112	SENOKOT LAXATIVE TEA .....	137
SECURES SAFE SAFETY HYPODERMIC NEEDLE/27G X 1/2" .....	174	selenium sulfide LOTN 2.5 % .....	112	SENOKOT S TABS (Use sennosides-docusate sodium) .....	137
SECURES SAFE SYRINGE/NEEDLE/1ML/25G X 1-1/2" .....	174	selenium sulfide SHAM 1 % .....	112	SENOKOT TABS (Use sennosides) 138	
SECURES SAFE SYRINGE/NEEDLE/1ML/27G X 1/2" 174		selenium sulfide SHAM 2.25 % .....	112	SENSORCAINE-MPF/EPINEPHRINE SOLN .....	139
SECURES SAFE SYRINGE/NEEDLE/3ML/20G X 1" 174		SELENIUM YEAST .....	90	SENTRIVA-ES CHEW .....	17
SECURES SAFE SYRINGE/NEEDLE/3ML/20G X 1-1/2" .....	175	SELSUN BLUE CARE MENS MAXIMUM STRENGTH LOTN (Use selenium sulfide) .....	112	SEPICALM VG .....	95
SECURES SAFE SYRINGE/NEEDLE/3ML/21G X 1-1/2" .....	175	SELSUN BLUE DAILY LOTN (Use selenium sulfide) .....	112	SEPINEO P 600 .....	212
SECURES SAFE SYRINGE/NEEDLE/3ML/22G X 1-1/2" .....	175	SELSUN BLUE LOTN (Use selenium sulfide) .....	112	SEREVENT DISKUS .....	23
SECURES SAFE SYRINGE/NEEDLE/3ML/25G X 5/8" 175		SELSUN BLUE MEDICATED LOTN (Use selenium sulfide) .....	112	SERMORELIN ACETATE .....	90
SEGLENTIS .....	15	SELSUN BLUE MOISTURIZING LOTN (Use selenium sulfide) .....	112	SEROQUEL TABS 25 MG, 50 MG, 100 MG, 200 MG (Use quetiapine fumarate) .....	59
SEGLUROMET .....	34	SELZENTRY SOLN .....	62	SEROQUEL TABS 300 MG, 400 MG (Use quetiapine fumarate) .....	59
SELECT-OB CHEW .....	192	SELZENTRY TABS 150 MG (Use maraviroc) .....	62	SEROQUEL XR TB24 (Use quetiapine fumarate) .....	59
SELECT-OB+DHA MISC .....	192	SELZENTRY TABS 25 MG, 75 MG 62		SEROTONIN HCL .....	90
selegiline hcl CAPS .....	57	SELZENTRY TABS 300 MG (Use maraviroc) .....	62	SERTRALINE HCL .....	90
SELEGILINE HCL POWD .....	57	SEMGLEE SOLN .....	37	sertraline hcl CONC .....	32
selegiline hcl TABS .....	57	SEMGLEE SOPN .....	37	sertraline hcl TABS 100 MG .....	32
selenious acid .....	184	SENN A EXTR .....	90	sertraline hcl TABS 25 MG, 50 MG 32	
		sennosides TABS 8.6 MG .....	138	SERTRALINE HYDROCHLORIDE CAPS .....	32
		sennosides-docusate sodium TABS 137		SESAME OIL .....	97
		SENOKOT KIDS LAXATIVE GUMMIES CHEW .....	138	sevelamer carbonate PACK .....	129
		SENOKOT LAXATIVE GUMMIES		sevelamer carbonate TABS .....	129
				sevelamer hcl .....	129
				SEVENFACT .....	131

sevoflurane .....	130	SILVER NITRATE SOLN 0.5 % ..	113	SINTRA-ES TABS .....	18
SFROWASA ENEM .....	129	SILVER PROTEIN MILD .....	60	SINUVA IMPL .....	194
SHARK CARTILAGE .....	90	silver sulfadiazine .....	113	SIROLIMUS .....	91
SHEA BUTTER .....	212	SILVER SULFADIAZINE .....	91	sirolimus SOLN .....	185
SHEA BUTTER ORGANIC .....	212	SIMBRINZA .....	200	sirolimus TABS .....	185
SHINGRIX .....	226	simethicone CHEW 80 MG .....	127	SIRTURO .....	52
SHOWER FRESH FRAGRANCE .	91	SIMETHICONE LIQD XX .....	127	SITAGLIPTIN .....	35
SHRIMP FLAVOR LIQD .....	209	simethicone SUSP .....	127	SITAGLIPTIN/METFORMIN HYDROCHLORIDE .....	34
SIBERIAN GINSENG .....	91	SIMLANDI 1-PEN KIT AJKT .....	7	SITAVIG TABS BU .....	63
SIBERIAN PINE OIL .....	80	SIMLANDI 2-PEN KIT AJKT .....	7	SIVEXTRO SOLR .....	51
sildenafil citrate (pulmonary hypertension) SUSR .....	69	SIMPLGEL 30 .....	214	SIVEXTRO TABS .....	51
SILDENAFIL CITRATE .....	91	SIMPONI ARIA SOLN .....	7	SKIN HAIR & NAILS ADVANCED BEAUTY CAPS .....	190
SILENOR (Use doxepin hcl (sleep)) . 136		SIMPONI SOAJ .....	7	SKIN PROTECTANT PETROLATUM .....	214
SILICA GEL GEL .....	100	SIMPONI SOSY .....	7	SKYRIZI SOCT .....	129
SILICA GEL ULTRAMICRONIZED GEL .....	100	SIMULECT .....	185	SKYTROFA .....	125
SILICON DIOXIDE (SYLOID 244 FP) POWD .....	100	SIMVASTATIN .....	91	SLO-NIACIN TBCR (Use niacin) .	228
SILICON DIOXIDE POWD .....	100	simvastatin TABS 10 MG, 20 MG, 40 MG .....	45	SLOWMAG MG CALM+SLEEP ....	4
SILICONE BLEND CUSTOM PSTE 91		simvastatin TABS 5 MG, 10 MG, 20 MG, 40 MG .....	45	SLYND .....	102
SILICONE ELASTOMER BLEND GEL .....	91	simvastatin TABS 80 MG .....	45	SM BORIC ACID POWD .....	100
SILICONE ELASTOMER BLEND LIQD .....	91	SINCALIDE .....	120	SM CAMPHOR SPIRIT .....	97
SILICONE FLUID 556 LIQD .....	91	SINCALIDE IN MANNITOL .....	91	SM ISOPROPYL ALCOHOL RUBBING XX .....	97
SILIQ .....	111	SINEMET TABS 100 MG-10 MG, 100 MG-25 MG (Use carbidopa- levodopa) .....	56	SM ISOPROPYL ALCOHOL XX ...	97
silodosin .....	131	SINGULAIR CHEW (Use montelukast sodium) .....	21	SM ONE DAILY ESSENTIAL TABS 188	
SILVADENE (Use silver sulfadiazine) .....	113	SINGULAIR PACK (Use montelukast sodium) .....	21	SM SWEET OIL .....	97
SILVER NITRATE CRYSTALS .....	113	SINGULAIR TABS (Use montelukast sodium) .....	21	SMART SENSE PREMIUM BLOODGLUCOSE MONITORING SYSTEM KIT .....	150

SMART SENSE VALUE	SODIUM BENZOATE .....212	SODIUM CHLORIDE SOLN IV 4
BLOODGLUCOSE MONITORING	sodium bicarbonate (antacid) TABS	MEQ/ML ..... 184
SYSTEM KIT ..... 150	325 MG, 650 MG .....18	SODIUM CHLORIDE/SODIUM
SMARTEST EJECT BLOOD	SODIUM BICARBONATE .....91	BICARBONATE .....100
GLUCOSE MONITORING SYSTEM	sodium bicarbonate IV 4.2 %, 7.5 %, 8.4 % .....180	SODIUM CHLORITE FLAK .....91
DEVI ..... 150	SODIUM BICARBONATE IV ..... 180	sodium citrate & citric acid ..... 130
SMARTEST EJECT STARTER KIT	SODIUM BISULFITE .....91	SODIUM CITRATE ANHYDROUS
KIT ..... 150	SODIUM BITARTRATE	GRAN XX .....130
SMARTEST PERSONA	SODIUM BORATE DECAHYDRATE	SODIUM CITRATE ANHYDROUS
STARTERKIT KIT ..... 150	POWD .....71	POWD ..... 130
SMARTEST PRONTO STARTERKIT	SODIUM BORATE POWD .....71	SODIUM CITRATE CRYST .....130
KIT ..... 150	SODIUM BROMIDE .....100	SODIUM CITRATE DIHYDRATE
SMARTEST PROTEGE BLOOD	SODIUM BUTYRATE .....100	GRAN ..... 91
GLUCOSE MONITORING SYSTEM	SODIUM CACODYLATE ..... 100	SODIUM CITRATE DIHYDRATE
DEVI ..... 150	SODIUM CAPRATE .....91	POWD .....91
SMARTEST PROTEGE	SODIUM CAPRYLATE FOOD	SODIUM COCOYL GLUTAMATE 91
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SODIUM 4-	SODIUM	sodium) ..... 124
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STAMARIL SUSP .....	226	STRAWBERRY OS LIQD .....	209	SUCROSE OCTAACETATE .....	92
STANNOUS CHLORIDE DIHYDRATE .....	92	STREPTOMYCIN SULFATE POWD .	5	SUCROSE POWD .....	100
STANNOUS FLUORIDE POWD .	100	streptomycin sulfate SOLR .....	5	SUCROSE POWDERED CONFECTIONERS POWD .....	100
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STEGLATRO .....	38	SUBOXONE FILM SL 0.5 MG-2 MG, 1 MG-4 MG (Use buprenorphine hcl-naloxone hcl dihydrate) .....	16	sulfacetamide sodium (ophth) OINT 200	
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		SUCCINYLCHOLINE CHLORIDE			

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SUSTIVA CAPS 50 MG (Use efavirenz) .....	62	SYNALAR OINTMENT KIT .....	116	SYRINGE/LUER LOCK/3ML/22GX1" .....	175
SUSTIVA TABS (Use efavirenz) ..	62	SYNALAR SOLN (Use fluocinolone acetonide) .....	116	SYRINGE/LUER LOCK/3ML/22GX1-1/2" .....	175
SUSTOL PRSY .....	40	SYNALAR TS .....	116	SYRINGE/LUER LOCK/3ML/23G X 1" .....	175
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SWEET CORN FLAVOR CONCENTRATE CONC .....	209	SYNJARDY TABS .....	34	SYRINGE/LUER LOCK/3ML/23GX1" .....	175
SWEET DROPS LIQD .....	209	SYNJARDY XR TB24 .....	34	SYRINGE/LUER LOCK/3ML/25G X 1" .....	175
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SYMFI (Use efavirenz-lamivudine-tenofovir disoproxil fumarate) .....	62	SYRINGE/LUER LOCK/3ML ...	175	SYRINGE/LUER LOCK/3ML/20G X 1" .....	175
SYMFI LO (Use efavirenz-lamivudine-tenofovir disoproxil fumarate) .....	62	SYRINGE/LUER LOCK/3ML/20G X 1-1/2" .....	175	SYRINGE/LUER LOCK/5ML ....	175
SYMJEPI SOSY .....	227	SYRINGE/LUER LOCK/3ML/20GX1-1/2" .....	175	SYRINGE/LUER LOCK/5ML/20G X 1-1/2" .....	175
SYMLINPEN 120 SOPN .....	34	SYRINGE/LUER LOCK/3ML ...	175	SYRINGE/LUER LOCK/60ML ...	175
SYMLINPEN 60 SOPN .....	34	SYRINGE/LUER LOCK/3ML/21G X 1" .....	175	SYRINGE/LUER SLIP/10ML ....	175
SYMPAZAN FILM .....	25	SYRINGE/LUER LOCK/3ML/21G X 1-1/2" .....	175	SYRINGE/LUER SLIP/1ML .....	175
SYMTUZA .....	62	SYRINGE/LUER LOCK/3ML/21GX1" .....	175	SYRINGE/LUER SLIP/1ML/25G X 5/8" .....	175
SYNAGIS SOLN .....	204	SYRINGE/LUER LOCK/3ML/21GX1-1/2" .....	175	SYRINGE/LUER SLIP/1ML/26G X 3/8" .....	176
SYN-AKE .....	79	SYRINGE/LUER LOCK/3ML/22G X 1" .....	175	SYRINGE/LUER SLIP/1ML/27G X 1/2" .....	176
SYNALAR CREA (Use fluocinolone acetonide) .....	116	SYRINGE/LUER LOCK/3ML/22G X 1-1/2" .....	175	SYRINGE/LUER SLIP/35ML ....	176
SYNALAR CREAM KIT .....	116			SYRINGE/LUER SLIP/3ML .....	176
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SYRINGES/LUER LOCK/10ML/22GX1-1/2" .....176	TACLONEX SUSP (Use calcipotriene-betamethasone dipropionate) .....116	tamsulosin hcl .....131
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SYRINGES/LUER LOCK/5ML/20GX1-1/2" .....176	tacrolimus (topical) OINT 0.1 % .. 117	TANGERINE FLAVOR OIL ..... 209
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SYRINGES/LUER LOCK/5ML/21GX1-1/2" .....176	tacrolimus CAPS .....185	TANGERINE FLAVOR SWEETENED POWD ..... 209
SYRINGES/LUER LOCK/5ML/22GX1-1/2" .....176	TACROLIMUS MONOHYDRATE .93	TANGERINE OIL .....97
SYRINGES/LUER LOCK/WITHOUT NEEDLE/10ML .....176	tadalafil ..... 69	TANNIC ACID .....119
SYRINGES/LUER LOCK/WITHOUT NEEDLE/20ML .....176	TADALAFIL .....93	TARON FORTE .....134
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SYRINGES/LUER LOCK/WITHOUT NEEDLE/5ML ..... 176	TAKHZYRO SOSY ..... 132	TARTARIC ACID POWD ..... 71
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	TALTZ SOSY 80 MG/ML .....111	TAVNEOS .....132
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	TAMIFLU CAPS 30 MG (Use oseltamivir phosphate) .....64	TAZAROTENE FOAM .....108
	TAMIFLU CAPS 45 MG, 75 MG (Use oseltamivir phosphate) .....64	tazarotene GEL .....112
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TDVAX SUSP .....220	TENORETIC 100 (Use atenolol & chlorthalidone) .....48	testosterone GEL TD 1 %, 10 MG/ACT, 20.25 MG/1.25GM, 25 MG/2.5GM, 40.5 MG/2.5GM, 50 MG/5GM .....17
TEA COCOYL GLUTAMINE .....93	TENORETIC 50 (Use atenolol & chlorthalidone) .....48	testosterone GEL TD 1.62 % .....17
TEA TREE OIL .....93	TENORMIN TABS (Use atenolol) . 65	TESTOSTERONE MICRONIZED (SOY) POWD .....93
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tioconazole vaginal 6.5 % ..... 227	tobramycin sulfate SOLN IJ 1.2 GM/30ML, 10 MG/ML, 80 MG/2ML .5	TOPAMAX TABS 200 MG (Use topiramate) .....28
tiotropium bromide monohydrate CAPS .....20	tobramycin sulfate SOLN IJ 40 MG/ML .....5	TOPAMAX TABS 25 MG, 50 MG (Use topiramate) ..... 28
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topiramate TABS 100 MG .....	28	tramadol hcl TB24 .....	14	TRECATOR .....	52
topiramate TABS 200 MG .....	28	TRAMADOL HYDROCHLORIDE .....	94	TRELEGY ELLIPTA .....	23
topiramate TABS 25 MG, 50 MG ..	28	TRAMADOL HYDROCHLORIDE SOLN (Use tramadol hcl) .....	14	TREMFYA SOPN .....	112
TOPROL XL TB24 200 MG (Use metoprolol succinate) .....	65	tramadol-acetaminophen .....	15	TREMFYA SOSY .....	112
TOPROL XL TB24 25 MG, 50 MG, 100 MG (Use metoprolol succinate) 65		trandolapril 1 MG, 2 MG .....	45	TRESIBA FLEXTOUCH SOPN 100 UNIT/ML .....	37
toremifene citrate .....	54	trandolapril 4 MG .....	45	TRESIBA FLEXTOUCH SOPN 200 UNIT/ML .....	37
torsemidate TABS 20 MG .....	124	trandolapril-verapamil hcl .....	48	TRESIBA SOLN .....	37
torsemidate TABS 5 MG, 10 MG, 100 MG .....	124	TRANEXAMIC ACID .....	94	TRETINOIN (ALL-TRANS RETINOIC ACID) POWD .....	108
TOSYMRA .....	179	tranexamic acid SOLN 1000 MG/10ML .....	135	tretinoin CREA 0.025 %, 0.05 %, 0.1 % .....	108
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TOUJEO SOLOSTAR SOPN .....	37	TRANEXAMIC ACID/SODIUM CHLORIDE .....	135	tretinoin GEL 0.025 % .....	108
TOVET KIT .....	117	tranexamic acid-sodium chloride	135	tretinoin GEL 0.05 % .....	108
TOVIAZ (Use fesoterodine fumarate) .....	224	TRANILAST CRYST .....	94	tretinoin microsphere .....	108
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TRADJENTA .....	35	TRANXENE T TABS 7.5 MG (Use clorazepate dipotassium) .....	19	TRACETIN .....	94
TRAGACANTH POWD .....	212	tranylcypropromine sulfate .....	30	TRIAMCINOLONE .....	94
TRALEMENT .....	184	TRAVATAN Z SOLN (Use travoprost) .....	203	triamcinolone acetonide (mouth)	187
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tramadol hcl CP24 100 MG, 200 MG, 300 MG .....	14	TRAZIMERA 150 MG .....	54	triamcinolone acetonide (topical) AERS .....	117
tramadol hcl SOLN .....	14	TRAZIMERA 420 MG .....	54	triamcinolone acetonide (topical) CREA 0.025 % .....	117
tramadol hcl TABS 100 MG .....	14	TRAZODONE HCL POWD .....	32		
tramadol hcl TABS 25 MG .....	14	trazodone hcl TABS 300 MG .....	32		

triamcinolone acetonide (topical) CREA 0.1 % .....	117	TRIAMTERENE POWD .....	124	trimethobenzamide hcl CAPS .....	40
triamcinolone acetonide (topical) CREA 0.5 % .....	117	triazolam .....	136	TRIMETHOPRIM POWD .....	49
triamcinolone acetonide (topical) LOTN .....	117	TRIBENZOR (Use olmesartan medoxomil-amlodipine- hydrochlorothiazide) .....	48	trimethoprim TABS .....	49
triamcinolone acetonide (topical) OINT 0.025 %, 0.5 % .....	117	TRICHLORMETHIAZIDE .....	94	trimipramine maleate CAPS .....	34
triamcinolone acetonide (topical) OINT 0.05 %, 0.1 % .....	117	TRICHLOROACETIC ACID CRYSTALS .....	94	TRIMIPRAMINE MALEATE POWD 34	
triamcinolone acetonide (topical) OINT 0.05 % .....	117	TRICHLOROACETIC ACID POWD 94		TRIMO-SAN .....	226
triamcinolone acetonide (topical) OINT 0.05 % .....	117	TRICHLOROACETIC ACID SOLN .....	94	TRINTELLIX .....	32
TRIAMCINOLONE ACETONIDE POWD .....	117	TRICLOSAN .....	94	TRIOSTAT SOLN (Use liothyronine sodium) .....	220
triamcinolone acetonide SUSP 40 MG/ML, 200 MG/5ML, 400 MG/10ML .....	103	TRICOR TABS (Use fenofibrate) ..	44	TRIOXSALEN .....	94
TRIAMCINOLONE ACETONIDE SUSP 40 MG/ML, 80 MG/ML .....	103	TRIETHANOLAMINE LAURYL SULFATE .....	94	TRIPLENNAMINE HCL .....	42
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TRIAMCINOLONE DIACETATE .....	103	TRIFERIC PACK .....	134	TRIPONEL LIQD .....	105
TRIAMCINOLONE DIACETATE MICRONIZED .....	104	TRIFERIC SOLN HM .....	134	TRIPROLDINE HCL .....	94
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triamterene CAPS .....	124	TRIKAFTA TBPK .....	218	TRIUMEQ TABS .....	62
		TRILEPTAL SUSP (Use oxcarbazepine) .....	28	TRI-VI-FLOR .....	191
		TRILEPTAL TABS (Use oxcarbazepine) .....	28	TRI-VI-FLORO .....	191
		TRILIPIX (Use choline fenofibrate) 44		TRIZIVIR .....	62
		TRILOSTANE .....	94	TROKENDI XR CP24 (Use topiramate) .....	28
		TRIMEPRAZINE TARTRATE .....	94	TROLAMINE .....	205
		TRIMETHOBENZAMIDE HCL .....	94	TROMETHAMINE .....	180
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TROPICAL FUSION WS LIQD ...	209	TRUE METRIX DEVI .....	150	TUNA FLAVOR LIQD .....	209
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TROPICAMIDE POWD .....	199	TRUE MULTIVITAMIN TABS ....	191	TUNA TYPE FLAVOR OS LIQD .	209
tropicamide SOLN .....	199	TRUE VITAMIN B1 TABS .....	229	TURMERIC .....	94
TROPOLONE .....	94	TRUE VITAMIN B6 TABS .....	229	TURMERIC ROOT .....	94
tropium chloride CP24 .....	224	TRUELYTE SOLN .....	182	TURPENTINE PURIFIED .....	97
tropium chloride TABS .....	224	TRUERESULT BLOOD GLUCOSEMONITORING SYSTEM/NO CODING KIT .....	150	TURPENTINE SPIRITS .....	97
TRUCLEAR STEVIA PLUS .....	93	TRUETRACK BLOOD GLUCOSE MONITORING SYSTEM DEVI ...	150	TUSNEL PEDIATRIC LIQD 1.25 MG/ML-25 MG/ML, 50 MG/5ML-5 MG/5ML-15 MG/5ML .....	105
TRUE COMFORT PRO INSULIN SYRINGE/1ML/32GX5/16" .....	176	TRUETRACK BLOOD GLUCOSE MONITORING SYSTEM KIT .....	150	TUSNEL-DM PEDIATRIC LIQD 1.25 MG/ML-25 MG/ML-2.5 MG/ML ...	105
TRUE COMFORT PRO INSULINSYRINGE/0.5ML/32G X 5/16" .....	176	TRUETRACK SMART SYSTEM KIT . 150		TUTTI FRUTTI CONCENTRATE CONC .....	209
TRUE COMFORT PRO PEN NEEDLES 32G X 4MM .....	176	TRULANCE .....	127	TUTTI FRUTTI FLAVOR LIQD ...	209
TRUE COMFORT SAFETY INSULIN SYRINGE/1ML/32GX5/16" .....	176	TRULICITY .....	35	TUTTI-FRUTTI FLAVOR LIQD ...	209
TRUE COMFORT SAFETY PEN NEEDLES 31G X 5MM .....	176	TRUMENBA .....	224	TUXARIN ER TB12 .....	105
TRUE COMFORT SAFETY PEN NEEDLES 32G X 4MM .....	176	TRUVADA 200 MG-300 MG (Use emtricitabine-tenofovir disoproxil fumarate) .....	62	TWINRIX SUSY .....	226
TRUE FOCUS BLOOD GLUCOSESELF MONITORING METER DEVI .....	150	TRUXIMA .....	53	TWIRLA .....	101
TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH DEVI .....	150	TRYPAN BLUE .....	206	TYBLUME CHEW .....	101
TRUE METRIX AIR BLOOD GLUCOSE METER/BLUETOOTH SMART KIT .....	150	TRYPSIN POWD .....	94	TYBOST .....	62
TRUE METRIX AIR W/BLUETOOTH SMART KIT .....	150	TRYPTOPHAN POWD .....	198	TYENNE SOLN .....	7
TRUE METRIX BLOOD GLUCOSEMETER KIT .....	150	TUBERSOL .....	120	TYLENOL CHILDRENS CHEWABLES/PAIN + FEVER CHEW (Use acetaminophen) .....	10
		TUDORZA PRESSAIR .....	20	TYLENOL CHILDRENS PAIN +FEVER SUSP (Use acetaminophen) .....	10
		TULIVITE TABS .....	134	TYLENOL CHILDRENS SUSP (Use acetaminophen) .....	11
		TUMS CHEW (Use calcium carbonate (antacid)) .....	18	TYLENOL EXTRA STRENGTH TABS (Use acetaminophen) .....	11
		TUMS LASTING EFFECTS CHEW (Use calcium carbonate (antacid)) .	18	TYLENOL FOR CHILDREN/ADULTS SUSP (Use acetaminophen) .....	11

TYLENOL INFANTS PAIN+FEVER SUSP (Use acetaminophen) .....	11	SYRINGE/1ML/25G X 5/8" MISC	177	UNISOM SLEEPTABS (Use doxylamine succinate (sleep)) ....	135
TYLENOL TABS (Use acetaminophen) .....	11	ULTICARE TUBERCULIN SAFETY SYRINGES/1ML/27G X 1/2" .....	177	UNITUXIN .....	53
TYLOSIN TARTRATE .....	94	ULTIGUARD SAFEPACK/TINY PEN NEEDLE/32G X 4MM/SHARPS CONTAINNE .....	177	UPLIZNA .....	185
TYLOXAPOL .....	94	ULTIGUARD SAFEPACK/TINY PEN NEEDLE/32G X 6MM/SHARPS CONTAINNE .....	177	UPSPRING STOMACH SETTLE LOZG .....	186
TYMLOS .....	125	ULTRABAG/DIANEAL LOW CALCIUM/2.5% DEXTROSE ....	186	UPTRAVI SOLR .....	69
TYPHIM VI SOLN .....	224	ULTRABAG/DIANEAL LOW CALCIUM/4.25% DEXTROSE 4.25 %-448 MG/100ML-538 MG/100ML- 5.08 MG/100ML-18.3 MG/100ML	186	UPTRAVI TABS 200 MCG .....	69
TYPHIM VI SOSY .....	224	ULTRABAG/DIANEAL PD-2/1.5% DEXTROSE .....	186	UPTRAVI TABS .....	69
TYRVAYA .....	199	ULTRABAG/DIANEAL PD-2/2.5% DEXTROSE .....	186	UPTRAVI TITRATION PACK TBPK 69	
UBIDECARENONE .....	100	ULTRABAG/DIANEAL PD-2/4.25% DEXTROSE .....	186	UREA BEAD .....	94
UBIQUINOL .....	94	ULTRACET (Use tramadol- acetaminophen) .....	15	urea CREA 20 %, 39 %, 41 % ....	117
UCARE POLYMER JR-400 POWD 212		ULTRAM TABS (Use tramadol hcl) 14		urea CREA 40 % .....	117
UCERIS (Use budesonide (intrarectal)) .....	17	ULTRAVATE LOTN .....	117	UREA CREA .....	117
UCERIS TB24 (Use budesonide)	104	ULTRAVIST 62 %, 77 % .....	122	urea in lactic acid vehicle .....	117
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ULORIC (Use febuxostat) .....	131	UNIFINE PROTECT SAFETY PEN NEEDLE 32G X 4MM .....	177	UREA PRILLED BEAD .....	94
ULTICARE SYRINGE/LOW DEADSPACE/1ML/22G X1-1/2" .	176	UNIFINE SAFECONTROL PEN NEEDLE 31GX5MM .....	177	UREAPRO POWD .....	94
ULTICARE SYRINGE/LOW DEADSPACE/3ML/22G X1-1/2" .	176	UNIFINE SAFECONTROL PEN NEEDLE 31GX8MM .....	177	URIBEL .....	49
ULTICARE TUBERCULIN SAFETSYRINGES/1ML/27G X 5/8" .	176	UNIFINE SAFECONTROL PEN NEEDLE 31GX8MM .....	177	URIDINE .....	94
ULTICARE TUBERCULIN SAFETSYRINGES/1ML/28G X 1/2" .	177	UROCIT-K 10 TBCR (Use potassium citrate (alkalinizer)) .....	130	URINX MEDICATED SPECIMENCOLLECTION PACKAGE .....	122
ULTICARE TUBERCULIN SAFETY SYRINGE/1ML/25G X 1" MISC ..	177	UROCIT-K 5 TBCR (Use potassium citrate (alkalinizer)) .....	130	UROXATRAL (Use alfuzosin hcl) 131	
ULTICARE TUBERCULIN SAFETY		URSO 250 TABS (Use ursodiol) .	127	URSODIOL .....	94



ursodiol CAPS .....	127	MG-160 MG, 12.5 MG-320 MG, 25	95
URSODIOL CAPS .....	127	MG-160 MG, 25 MG-320 MG .....	48
ursodiol TABS 250 MG .....	128	VALTOCO 10 MG DOSE LIQD ...	25
ursodiol TABS 500 MG .....	128	VALTOCO 15 MG DOSE LQPK ...	25
VABYSMO .....	199	VALTOCO 20 MG DOSE LQPK ...	26
VAFSEO .....	133	VALTOCO 5 MG DOSE LIQD .....	26
VAGIFEM TABS (Use estradiol vaginal) .....	227	VALTRESX 1 GM (Use valacyclovir hcl) .....	63
VALACYCLOVIR HCL .....	94	VALTRESX 500 MG (Use valacyclovir hcl) .....	63
valacyclovir hcl 1 GM, 1000 MG ...	63	VANACOF 2 .....	105
valacyclovir hcl 1 GM .....	63	VANACOF CP LIQD .....	105
valacyclovir hcl 500 MG .....	63	VANACOF DMX LIQD .....	106
VALACYCLOVIR HYDROCHLORIDE .....	94	VANACOF XP LIQD .....	106
VALCYTE TABS (Use valganciclovir hcl) .....	63	VANADIUM .....	95
VALERIAN ROOT POWD .....	94	VANADYL SULFATE HYDRATE ..	95
valganciclovir hcl SOLR .....	63	VANALICE GEL .....	120
valganciclovir hcl TABS .....	63	VANCOCIN CAPS 125 MG (Use vancomycin hcl) .....	50
VALINE POWD XX .....	198	VANCOCIN CAPS 250 MG (Use vancomycin hcl) .....	50
VALIUM TABS (Use diazepam) ...	19	VANCOMYCIN HCL .....	95
VALPROATE SODIUM .....	95	vancomycin hcl CAPS 125 MG ...	50
valproate sodium SOLN IV 100 MG/ML, 500 MG/5ML .....	29	vancomycin hcl CAPS 250 MG ...	50
valproate sodium SOLN OR 250 MG/5ML .....	29	VANCOMYCIN HCL SOLN .....	50
valproic acid CAPS .....	29	vancomycin hcl SOLR IV 1 GM, 1000 MG .....	50
VALPROIC ACID POWD .....	95	vancomycin hcl SOLR IV 1.25 GM, 1.5 GM, 5 GM, 10 GM, 750 MG ...	50
valsartan SOLN .....	46	vancomycin hcl SOLR IV 500 MG .	50
valsartan TABS .....	46	vancomycin hcl SOLR OR 25 MG/ML, 50 MG/ML, 250 MG/5ML .	50
valsartan-hydrochlorothiazide ....	48	VANCOMYCIN HYDROCHLORIDE .	
valsartan-hydrochlorothiazide 12.5			
		VANCOMYCIN HYDROCHLORIDE SOLN IV 500 MG/100ML, 750 MG/150ML, 1000 MG/200ML, 1250 MG/250ML, 1500 MG/300ML, 1750 MG/350ML .....	50
		VANCOMYCIN HYDROCHLORIDE SOLR IV 1 GM .....	50
		VANCOMYCIN HYDROCHLORIDE SOLR IV 1.25 GM, 1.5 GM, 1.75 GM, 2 GM, 5 GM, 10 GM, 750 MG .....	50
		VANCOMYCIN HYDROCHLORIDE SOLR IV 500 MG .....	50
		VANCOMYCIN HYDROCHLORIDE/DEXTROSE 1 GM/200ML-5 %, 1.25 GM/250ML-5 %, 1.5 GM/300ML-5 %, 500 MG/100ML-5 %, 750 MG/150ML-5 % .....	50
		VANCOMYCIN HYDROCHLORIDE/SODIUM CHLORIDE SOLN 750 MG/150ML-0.9 % .....	50
		VANCOMYCIN SOLN IV .....	50
		VANDAZOLE .....	227
		VANILLA BUTTERNUT FLAVOR LIQD .....	209
		VANILLA FLAVOR LIQD .....	209
		VANILLA OS LIQD .....	209
		VANILLIN CRYSTALS .....	95
		VANILLIN FLAVOR POWD .....	209
		VANILLIN POWD .....	95
		VANISHPOINT ALLERGY SYRINGE TRAY/1ML/27G X 1/2" KIT .....	177
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