

CONNECTICUT MEDICAID	ACNE AGENTS, TOPICAL ‡	ANGIOTENSIN MODULATORS, CONT.	ANTICONVULSANTS
<b>Preferred Drug List (PDL)</b>	(STEP THERAPY CATEGORY)	RAMIPRIL CAPSULE (ORAL)	CARBAMAZEPINE TAB CHEW, IR TABLET (not ER) (ORAL)
	(DX CODE REQUIRED - DIFFERIN, EPIDUO and RETIN-A)	VALSARTAN, VALSARTAN / HCTZ (ORAL)	<b>CARBATROL ER CAPSULE (ORAL)</b>
	ACNE MEDICATION 5% & 10% GEL (OTC BENZOYL PEROXIDE) (TOPICAL)		CLOBAZAM TABLET (ORAL)
	ACNE MEDICATION LOTION (OTC BENZOYL PEROXIDE) (TOPICAL)		CLONAZEPAM IR TABLET (not ODT or ER) (ORAL)
<ul style="list-style-type: none"> <li>The Connecticut Medicaid Preferred Drug List (PDL) is a listing of prescription products selected by the Pharmaceutical and Therapeutics Committee as efficacious, safe and cost effective choices when prescribing for HUSKY A, HUSKY C, HUSKY D, EMDS, Tuberculosis (TB) and Family Planning (FAMPL) clients.</li> <li>Preferred or Non-Preferred status ONLY applies to those medications that fall within the drug classes listed on this PDL</li> <li>HIV medications are excluded from the PDL and do not require prior authorization</li> <li>"OTC" notation will appear for OTC Products Covered for clients over the age of 21</li> </ul>	ADAPALENE/BENZOYL PEROXIDE 0.1-2.5% (EPIDUO) (DX CODE REQ.)	<b>ANGIOTENSIN MODULATOR COMBINATIONS</b>	<b>DEPAKOTE SPRINKLE (not TABLET) (ORAL)</b>
	ADAPALENE 0.1% GEL (OTC) (TOPICAL) (DX CODE REQ.)	AMLODIPINE / BENAZEPRIL CAPSULE (ORAL)	DIASTAT ACUDIAL KIT (RECTAL)
	BENZOYL PEROXIDE 2.5%, 5%, 10% GEL (OTC) (TOPICAL)	AMLODIPINE / OLMESARTAN TABLET (ORAL)	DIASTAT 2.5 MG PEDI SYSTEM (RECTAL)
	BENZOYL PEROXIDE 5%, 10% WASH (OTC) (TOPICAL)	AMLODIPINE / VALSARTAN TABLET (ORAL)	DIAZEPAM 2.5 MG RECTAL GEL SYS (RECTAL)
	CLINDAMYCIN PH 1% PLEGET (TOPICAL)		DIAZEPAM RECTAL GEL SYSTEM (RECTAL)
	CLINDAMYCIN PH 1% GEL (not GENERIC CLINDAGEL) (TOPICAL)		DIVALPROEX SOD DR TABLET (not SPRINKLE) (ORAL)
	CLINDAMYCIN PH 1% LOTION, SOLUTION (TOPICAL)*	<b>ANTHELMINTICS</b>	DIVALPROEX SOD ER TABLET (ORAL)
	CLINDAMYCIN / BENZOYL PEROXIDE 1.2%-5% (DUAC) (TOPICAL)	ALBENDAZOLE TABLET (ORAL)	EPIDIOLEX SOLUTION (ORAL)
	ERYTHROMYCIN 2% GEL, SOLUTION (TOPICAL)*	<b>BILTRICIDE TABLET (ORAL)</b>	ETHOSUXIMIDE CAPSULE, SOLUTION (ORAL)
	<b>RETIN-A CREAM (TOPICAL) (DX CODE REQ.)</b>	IVERMECTIN TABLET (ORAL)	GABITRIL TABLET (ORAL)
<b>RETIN-A GEL (not MICRO)(TOPICAL) (DX CODE REQ.)</b>		LACOSAMIDE TABLET, SOLUTION (not CUP)	
<b>OTC Expansion Coverage List</b>	<b>ALZHEIMER'S AGENTS</b>	<b>ANTI-ALLERGENS, ORAL</b>	LAMOTRIGINE CHEW DISPERS TAB (not ODT) (ORAL)
<ul style="list-style-type: none"> <li>Preferred brand-name medications with non-preferred generic equivalents are listed in <b>BOLD (LAST UPDATED 7/31/2024)</b></li> <li>"DX CODE REQUIRED" notation will appear for preferred agents that require ICD-10 code for reimbursement</li> </ul>	DONEPEZIL ODT (ORAL)	All agents require non-PDL PA	LAMOTRIGINE TABLET (not ER) (ORAL)
	DONEPEZIL 5MG & 10MG TABLET (not 23MG) (ORAL)		LEVETIRACETAM SOLUTION, IR TABLET (not ER) (ORAL)
	<b>EXELON PATCH (TRANSDERMAL)</b>	<b>ANTIBIOTICS, GI</b>	NAYZILAM NASAL SPRAY (NASAL)
<ul style="list-style-type: none"> <li>"CHEWABLE" notation will appear for chewable preferred agents</li> </ul>	MEMANTINE IR TABLET (not ER CAPSULES) (ORAL)	METRONIDAZOLE TABLET (not CAPSULE) (ORAL)	OXCARBAZEPINE TABLET (ORAL)
	MEMANTINE 5-10MG TITRATION PACK (ORAL)	TINIDAZOLE TABLET (ORAL)	PHENOBARBITAL ELIXIR, SOLUTION, TABLET (ORAL)
	RIVASTIGMINE CAPSULES (ORAL)	VANCOMYCIN CAPSULE (ORAL)	PHENYTOIN CHEW TABLET, SUSPENSION (ORAL)
		VANCOMYCIN 50 MG/ML SOLUTION (FIRVANQ) (ORAL)	PHENYTOIN SOD EXT 100 MG CAPS (not 200MG, 300MG) (ORAL)
<b>HUSKY Therapeutic Class ICD-10 Diagnosis List</b>	<b>ANALGESICS, NARCOTICS SHORT</b>		PRIMIDONE TABLET (ORAL)
<ul style="list-style-type: none"> <li>** New Therapeutic Class added to PDL effective 7/1/24</li> <li>* New Drug added to the PDL effective 7/1/24</li> </ul>	*** OPIOIDS MAY REQUIRE CLINICAL MEDICALLY NECESSARY PA BASED ON CLIENT MME LEVEL***		<b>SABRIL 500 MG POWDER PACK (ORAL)</b>
	***OPIOID CLINICAL PRIOR AUTHORIZATION FORM***		<b>SABRIL 500 MG TABLET (ORAL)</b>
<b>Non - PDL PA Requirements</b>	APAP / CODEINE 300-30 MG/12.5 ML SOLUTION (ORAL)	<b>ANTIBIOTICS, INHALED</b>	<b>TEGRETOL 100 MG/5 ML SUSPENSION (ORAL)</b>
<a href="#">Connecticut Medicaid PDL PA Form</a>	APAP / CODEINE 120-12 MG/5 ML SOLUTION (ORAL)	<b>BETHKIS 300 MG/4 ML AMPULE (INHALATION)</b>	<b>TEGRETOL XR TABLET (ORAL)</b>
<ul style="list-style-type: none"> <li>Intolerance of the preferred agents</li> <li>Adverse reaction to the preferred agents</li> <li>Inadequate response from the preferred agents</li> <li>Determined medically necessary appropriate</li> <li>Absence of appropriate formulation of the preferred agent</li> </ul>	APAP / CODEINE #2, #3, #4 TABLET (ORAL)	<b>KITABIS PAK 300 MG/5 ML (INHALATION)</b>	TIAGABINE TABLET (ORAL)
	HYDROCODONE / APAP SOLUTION (ORAL)	TOBI PODHALER 28MG INHALE CAPSULE (INHALATION)	TOPIRAMATE SPRINKLE CAPSULE (ORAL)
	HYDROCODONE / APAP TABLET (ORAL)	TOBRAMYCIN 300 MG/5 ML AMPULE (TOBI) (not PAK) (INHALA	TOPIRAMATE TABLET (not ER) (ORAL)
	HYDROMORPHONE TABLET (IR) (ORAL)		<b>TRILEPTAL 300 MG/5 ML SUSPENSION (ORAL)</b>
	MORPHINE CONC, SOLUTION, SYRUP (ORAL)	<b>ANTIBIOTICS, TOPICAL</b>	VALPROIC ACID CAPSULE, SOLUTION (ORAL)
	MORPHINE IR TABLET (ORAL)	GENTAMICIN 0.1% CREAM (TOPICAL)	VALTOGO NASAL SPRAY (NASAL)
		GENTAMICIN 0.1% OINTMENT (TOPICAL)	ZONISAMIDE CAPSULE (ORAL)
<b>Step Therapy PA Requirements</b>	OXYCODONE / APAP CAPSULE, TABLET (ORAL)	MUPIROCI 2% OINTMENT (not CREAM) (TOPICAL)	<b>ANTIDEPRESSANTS, OTHER</b>
<b>STEP THERAPY PA FORM</b>	OXYCODONE TABLET (not CAPSULE) (ORAL)		BUPROPION HCL TABLET (ORAL)
‡ Agents from the following FIVE categories:	OXYCODONE 5 MG/5 ML SOLUTION (ORAL)		BUPROPION SR TABLET (ORAL)
ACNE AGENTS, TOPICAL, ANTIMIGRAINE AGENTS, CYTOKINE/CAM ANTAGONISTS, LIPOTROPICS, STATINS, PROTON PUMP INHIBITORS	TRAMADOL 50 MG TABLET (not 100 MG) (ORAL)	<b>ANTIBIOTICS, VAGINAL</b>	BUPROPION XL TABLET (NOT 450MG) (ORAL)
	TRAMADOL / APAP (ORAL)	CLEOCIN OVULES (VAGINAL)	DESVENLAFAXINE SUCC ER TABLET (ORAL)
		CLINDAMYCIN 2% VAGINAL CREAM (VAGINAL)*	MIRTAZAPINE TABLET, ODT (ORAL)
		METRONIDAZOLE VAGINAL 0.75% GEL (VAGINAL)	TRAZODONE TABLET (ORAL)
<b>Important Connecticut Medicaid Phone Numbers</b>	<b>ANDROGENIC AGENTS</b>	<b>NUVESSA VAGINAL 1.3% GEL (VAGINAL)</b>	TRINTELLIX TABLET (ORAL)
Gainwell Technologies Pharmacy Prior Authorization Center Phone #: 1-866-409-8386 (toll-free) Fax #: 1-866-759-4110 (toll-free)	ANDROGEL 1.62% GEL PUMP (TRANSDERMAL)		VENLAFAXINE ER CASPULES (not IR or ER TABLET) (ORAL)
	TESTOSTERONE 1.62% GEL PUMP (TRANSDERMAL)		VILAZODONE TABLET (ORAL)
		<b>ANTICOAGULANTS</b>	
<b>PA forms are available on our website:</b> <a href="http://www.CTDSSMAP.com">http://www.CTDSSMAP.com</a> Navigate to: <i>Pharmacy Information</i> or: <i>information &gt; publications &gt; forms</i>	<b>ANGIOTENSIN MODULATORS</b>	ELIQUIS STARTER PACK (ORAL)	<b>ANTIDEPRESSANTS, SSRIs</b>
	BENAZEPRIL TABLET (ORAL)	ELIQUIS TABLET (ORAL)	CITALOPRAM TABLET, SOLUTION (ORAL)
	BENAZEPRIL / HCTZ (ORAL)	ENOXAPARIN SYRINGE (SUBCUTANEOUS)	ESCITALOPRAM TABLET, SOLUTION (ORAL)
	ENALAPRIL, ENALAPRIL / HCTZ (not SOLUTION) (ORAL)	ENOXAPARIN VIAL (SUBCUTANEOUS)	FLUOXETINE 20 MG/5 ML SOLUTION (ORAL)
ENTRESTO TABLET (ORAL)	JANTOVEN TABLET (ORAL)	FLUOXETINE CAPSULE (not 90 MG) (ORAL)	
Gainwell Technologies Provider Assistance Center 1-800-842-8440 (toll-free)	IRBESARTAN, IRBESARTAN / HCTZ (ORAL)	<b>PRADAXA CAPSULE (not PELLETT PACK) (ORAL)</b>	FLUOXETINE 10 MG TABLET (not 20 MG or 60 MG) (ORAL)
	LISINAPRIL, LISINAPRIL / HCTZ (ORAL)	WARFARIN TABLET (ORAL)	FLUVOXAMINE IR TABLET (not ER) (ORAL)
Dept of Social Services Rx Consultant 1-860-424-5150	LOSARTAN, LOSARTAN / HCTZ (ORAL)	XARELTO TABLET (ORAL)	PAROXETINE TABLET (IR only) (ORAL)
	OLMESARTAN, OLMESARTAN / HCTZ (ORAL)	XARELTO STARTER PACK (ORAL)	SERTRALINE TABLET, ORAL CONC (not CAPSULE) (ORAL)

ANTIEMETIC / ANTIVERTIGO AGENTS	ANTIMIGRAINE AGENTS, TRIPTANS ‡	ANTIPSYCHOTICS, CONT.	BLADDER RELAXANT PREPARATIONS
APREPITANT CAPSULE (not PACK) (ORAL)	(STEP THERAPY CATEGORY)	LURASIDONE TABLET (ORAL)	FESOTERODINE ER TABLET (ORAL)
BONJESTA ER TABLET (ORAL)	RELPAKX TABLET (ORAL)	MOLINDONE TABLET (ORAL)	MYRBETRIQ ER TABLET (ORAL)*
DICLEGIS TABLET (ORAL)	RIZATRIPTAN ODT (ORAL)	OLANZAPINE TABLET, ODT (ORAL)	OXYBUTYNYN ER TABLET (ORAL)
DRONABINOL CAPSULE (ORAL)	RIZATRIPTAN TABLET (ORAL)	OLANZAPINE / FLUOXETINE CAPSULE (ORAL)	OXYBUTYNYN SOLUTION, TABLET (not 2.5MG) (ORAL)
EMEND 80 MG CAPSULE (not TRIPACK) (ORAL)	SUMATRIPTAN NASAL SPRAY (NASAL)*	PALIPERIDONE ER TABLET (ORAL)	SOLIFENACIN TABLET (ORAL)
ONDANSETRON ODT 4MG & 8MG(ORAL)	SUMATRIPTAN TABLET (ORAL)	PERPHENAZINE TABLET (ORAL)	<b>BONE RESORPTION SUPPRESSION &amp; RELATED AGENTS</b>
ONDANSETRON SOLUTION, TABLET (ORAL)	SUMATRIPTAN VIAL (not AUTOINJECT) (SUBCUTANEOUS)	PERPHENAZINE / AMITRIPTYLINE TABLET (ORAL)	ALENDRONATE TABLET (ORAL)
<b>TRANSDERM-SCOP PATCH (TRANSDERM)</b>		PERSERIS ER SYRINGE KIT (SUBCUTANEOUS)	CALCITONIN-SALMON 200 UNITS SPRAY (NASAL)
<b>ANTIFUNGALS, ORAL</b>		PIMOZIDE TABLET (ORAL)	<b>FORTEO 600 MCG/2.4 ML PEN INJ (SUBCUTANE.)</b>
CLOTRIMAZOLE 10 MG TROCHE (MUCOUS MEM)	<b>ANTIPARASITICS, TOPICAL</b>	QUETIAPINE TABLET, ER TABLET (ORAL)	IBANDRONATE TABLETS (ORAL)
FLUCONAZOLE SUSPENSION, TABLET (ORAL)	<b>NATROBA 0.9% SUSPENSION (TOPICAL)</b>	REXULTI TABLET (not PACK) (ORAL)	<b>BOTULINUM TOXINS</b>
GRISEOFULVIN SUSPENSION (not TABLET) (ORAL)	PERMETHRIN 1% CREAM RINSE (OTC) (TOPICAL)	<b>RISPERDAL CONSTA VIAL (INTRAMUSC.)</b>	BOTOX VIAL (not COSMETIC) (INTRAMUSC)
NYSTATIN SUSPENSION (not TABLET) (ORAL)	PERMETHRIN 5% CREAM (TOPICAL)	RISPERIDONE ODT, SOLUTION, TABLET (ORAL)	DYSPOPT VIAL (INTRAMUSC)
POSACONAZOLE DR TABLET (ORAL)*	PIPERONYL BUTOXIDE / PYRETHRINS LICE KILLING SHAMPOO	THIORIDAZINE TABLET (ORAL)	<b>BPH TREATMENTS</b>
TERBINAFINE TABLET (ORAL)		THIOTHIXENE CAPSULE (ORAL)	(DX CODE REQUIRED - TADALAFIL)
<b>ANTIFUNGALS, TOPICAL</b>		TRIFLUOPERAZINE TABLET (ORAL)	ALFUZOSIN ER TABLET (ORAL)
CICLOPIROX 0.77% CREAM (not GEL) (TOPICAL)*	<b>ANTIPARKINSON'S AGENTS</b>	UZEDY ER SYRINGE (SUBCUTANEOUS)	DOXAZOSIN MESYLATE TABLET (ORAL)
CLOTRIMAZOLE 1% CREAM (RX and OTC) (TOPICAL)	AMANTADINE CAPSULE, SOLUTION, TABLET (ORAL)	VRAYLAR CAPSULE, PACK (ORAL)	DUTASTERIDE CAPSULE (ORAL)
CLOTRIMAZOLE 1% SOLUTION (TOPICAL)	BENZTROPINE MES TABLET (ORAL)	ZIPRASIDONE CAPSULE (ORAL)	FINASTERIDE 5 MG TABLET (not 1 MG) (ORAL)
CLOTRIMAZOLE-BETAMETHASONE CREAM (not LOTION) (TOPICAL)	CARBIDOPA / LEVODOPA TABLET (not ODT) (ORAL)		TAMSULOSIN CAPSULE (ORAL)
KETOCONAZOLE 2% CREAM (not FOAM) (TOPICAL)	CARBIDOPA / LEVODOPA ER TABLET (ORAL)	<b>ANTIVIRALS, ORAL</b>	TERAZOSIN CAPSULE (ORAL)
KETOCONAZOLE 2% SHAMPOO (TOPICAL)	CARBIDOPA / LEVODOPA / ENTACAPONE TABLET (ORAL)	ACYCLOVIR CAPSULE, TABLET (ORAL)	<b>BRONCHODILATORS, BETA AGONIST</b>
MICONAZOLE 2% CREAM (OTC) (TOPICAL)	PRAMIPEXOLE IR TABLET (not ER) (ORAL)	ACYCLOVIR SUSPENSION (ORAL)	ALBUTEROL NEB SOLN 100 MG/20 ML (INHALATION)
MICONAZOLE 2% POWDER (OTC) (TOPICAL)	ROPINIROLE IR TABLET (not ER) (ORAL)	FAMCICLOVIR TABLET (ORAL)	ALBUTEROL NEB SOLN 0.63, 1.25, 2.5 MG/3 ML (INHALATION)
NYSTATIN CREAM, OINTMENT, POWDER (TOPICAL)	SELEGILINE CAPSULE, TABLET (ORAL)	OSELTAMIVIR CAPSULE (ORAL)	ALBUTEROL NEB SOLN 2.5 MG/0.5 ML (INHALATION)
NYSTATIN-TRIAMCINOLONE CREAM, OINTMENT (TOPICAL)	TRIHEXYPHENIDYL ELIXIR, TABLET (ORAL)	OSELTAMIVIR SUSPENSION (ORAL)	ALBUTEROL SOLUTION, SYRUP (not TABLET) (ORAL)
		VALACYCLOVIR TABLET (ORAL)	PROAIR RESPICLICK (INHALATION)
<b>ANTIHISTAMINES, MINIMALLY SEDATING</b>	<b>ANTIPSORIATICS, ORAL</b>		SEREVENT DISKUS (INHALATION)
CETIRIZINE TABLET (OTC) (not CHEWABLE or SOFTGEL)	ACITRETIN CAPSULE (ORAL)	<b>ANTIVIRALS, TOPICAL</b>	<b>VENTOLIN HFA (INHALATION)</b>
CETIRIZINE SOLUTION, SYRUP (not CUP) (RX & OTC) (ORAL)		ACYCLOVIR 5% CREAM (TOPICAL)	<b>XOPENEX HFA (INHALATION)</b>
CETIRIZINE-PSE TABLET (OTC) (ORAL)	<b>ANTIPSORIATICS, TOPICAL</b>	ACYCLOVIR 5% OINTMENT (TOPICAL)	
FEXOFENADINE 30 MG/5 ML SUSP (OTC) (ORAL)	CALCIPOTRIENE 0.005% CREAM, OINTMENT (TOPICAL)		<b>CALCIUM CHANNEL BLOCKERS</b>
FEXOFENADINE-PSE ER 60-120MG TABLET (OTC) (ORAL)	CALCIPOTRIENE 0.005% SOLUTION (TOPICAL)	<b>ANXIOLYTICS</b>	AMLODIPINE TABLET (ORAL)
LEVOCETIRIZINE TABLETS (RX & OTC) (ORAL)	CALCIPOTRIENE-BETAMETH DP OINTMENT (TOPICAL)*	ALPRAZOLAM IR TABLET (not ER or ODT) (ORAL)	CARTIA XT CAPSULE (ORAL)
LORATADINE SOLUTION, SYRUP (OTC) (ORAL)		BUSPIRONE TABLET (ORAL)	DILTIAZEM 12HR ER CAPSULE (ORAL)
LORATADINE OTC TABLET (not ODT or CHEW) (ORAL)	<b>ANTIPSYCHOTICS</b>	CHLORDIAZEPOXIDE CAPSULE (ORAL)	DILTAZEM 24HR ER (CD or XR) CAPSULE (not TABS) (ORAL)
	ABILIFY ASIMTUFI (INTRAMUSC)	DIAZEPAM 5 MG/5 ML SOLUTION (not 5 MG/ML CONC) (ORAL)	DILTIAZEM IR TABLET (ORAL)
<b>ANTIHYPERTENSIVES, SYMPATHOLYTICS</b>	ABILIFY MAINTENA ER SYRINGE, VIAL (INTRAMUSC.)	DIAZEPAM TABLET (ORAL)	FELODIPINE ER TABLET (ORAL)
CLONIDINE PATCH (TRANSDERM)	ADASUVE 10 MG INHALATION POWDER (INHALATION)	LORAZEPAM TABLET, 2MG/ML INTENSOL (ORAL)	NIFEDIPINE ER TABLET (not IR CAP) (ORAL)
CLONIDINE TABLET (not ER 0.17 MG) (ORAL)	ARIPRAZOLE SOLUTION, TABLET (not ODT) (ORAL)		TAZTIA XT CAPSULE (ORAL)
GUANFACINE TABLET (ORAL)	ARISTADA ER (INTRAMUSC)	<b>BETA-BLOCKERS</b>	VERAPAMIL TABLET (ORAL)
METHYLDOPA TABLET (ORAL)	ARISTADA INITIO (INTRAMUSC)	ATENOLOL TABLET (ORAL)	VERAPAMIL TABLET ER TABLET (not ER CAPS) (ORAL)
	CAPLYTA CAPSULE (ORAL)	ATENOLOL / CHLORTHALIDONE (ORAL)	
<b>ANTIHYPERTENSIVES, SYMPATHOLYTICS</b>	CHLORPROMAZINE AMPULE (INJECTION)	BISOPROLOL TABLET (ORAL)	<b>CEPHALOSPORINS AND RELATED ANTIBIOTICS</b>
ALLOPURINOL TABLET (not 200MG) (ORAL)	CHLORPROMAZINE ORAL CONC, TABLET (ORAL)	BISOPROLOL / HCTZ TABLET (ORAL)	AMOXICILLIN / CLAV SUSPENSION (ORAL)
COLCHICINE TABLET (not CAPSULE) (ORAL)	CLOZAPINE TABLET (not ODT) (ORAL)	CARVEDILOL TABLET (not ER) (ORAL)	AMOXICILLIN / CLAV TABLET (not CHEW TAB or ER) (ORAL)
FEBUXOSTAT TABLET (ORAL)	FLUPHENAZINE DECANOATE (INJECTION)	HEMANGEOL SOLUTION (ORAL)*	CEFACTOR CAPSULE (not SUSPENSION) (ORAL)
PROBENECID TABLET (ORAL)	FLUPHENAZINE ELIXIR/SOLN, TABLET, VIAL (ORAL)	LABETALOL TABLET (ORAL)	CEFADROXIL CAPSULE, SUSPENSION (not 1G TAB) (ORAL)
PROBENECID / COLCHICINE TABLET (ORAL)	HALOPERIDOL TABLET (ORAL)	METOPROLOL SUCCINATE ER TABLET (ORAL)	CEFDINIR CAPSULE, SUSPENSION (ORAL)
	HALOPERIDOL DECANOATE AMPULE, VIAL (INJECTION)	METOPROLOL TARTRATE TABLET (ORAL)	CEFPROZIL SUSPENSION, TABLET (ORAL)
<b>ANTIMIGRAINE AGENTS, OTHER</b>	HALOPERIDOL LACTATE SYRINGE, VIAL (INJECTION)	PROPRANOLOL SOLUTION, TABLET (ORAL)	CEFURXIME AXETIL TABLET (ORAL)
AJOVY AUTOINJECT, SYRINGE (SUBCUTANEOUS)	HALOPERIDOL LACTATE 2 MG/ML CONC (ORAL)	PROPRANOLOL ER CAPSULE (ORAL)	CEPHALEXIN CAPSULE, SUSPENSION (not TABLET) (ORAL)
EMGALITY 120 MG/ML PEN (SUBCUTANEOUS)	INVEGA HAFYERA (INTRAMUSC)	SOTALOL TABLET (ORAL)	
EMGALITY 120MG SYRINGE (not 100 MG) (SUBCUTANEOUS)	INVEGA SUSTENNA (INTRAMUSC)	<b>BILE SALTS</b>	<b>COLONY STIMULATING FACTORS</b>
NURTEC ODT (ORAL)	INVEGA TRINZA (INTRAMUSC)	URSODIOL 250MG, 500MG TABLET (ORAL)	FYLNETRA SYRINGE (SUBCUTANEOUS)
UBRELVY TABLET (ORAL)	LOXAPINE CAPSULE (ORAL)	URSODIOL 300MG CAPSULE (ORAL)	NEUPOGEN DISP SYRINGE, VIAL (INJECTION)

CONTRACEPTIVES, ORAL	CONTRACEPTIVES, ORAL, CONT.	CYTOKINE & CAM ANTAGONISTS ‡	GLUCOCORTICIDS, ORAL
*** PREFERRED EMERGENCY CONTRACEPTIVES ***	LOW-OGESTREL-28 (ORAL)	(STEP THERAPY CATEGORY)	BUDESONIDE DR & EC CAPSULE (ORAL)
	LO-ZUMANDIMINE (ORAL)	ENBREL DISP SYRINGE, KIT, PEN (INJECTION)	DEXAMETHASONE TABLET (ORAL)
ELLA 30 MG TABLET (ORAL)	MARLISSA-28 (ORAL)	ENBREL MINI CARTRIDGE (SUBCUTANE.)	HYDROCORTISONE TABLET (ORAL)
OPCICON ONE-STEP 1.5 MG TABLET (ORAL)	MICROGESTIN FE 1.5-30 TABLET (ORAL)	ENBREL VIAL (SUBCUTANEOUS)	METHYLPREDNISOLONE DOSE PACK (4 MG) (ORAL)
	MICROGESTIN FE 1-20 TABLET (ORAL)	HUMIRA KIT, PEN INJ KIT (INJECTION)	PREDNISOLONE 15 MG/5 ML SOLUTION (ORAL)
	MILI 0.25-0.035 MG(ORAL)	INFLIXIMAB VIAL (INJECTION)	PREDNISOLONE 5 MG/5 ML SOLUTION (ORAL)
ALTAVERA-28 TABLET (ORAL)	MIRCETTE 28 (ORAL)	OTEZLA STARTER PACK, TABLET (ORAL)	PREDNISOLONE SOD PH 25MG/5 ML SOLUTION (ORAL)
ALYACEN 1-35 28 TABLET (ORAL)	MONO-LINYAH-28 (ORAL)	XELJANZ IR TABLET (not XR or SOLUTION) (ORAL)	PREDNISONE TABLET (not DOSE PACK) (ORAL)
AMETHIA 0.15-0.03-0.01 MG TAB (ORAL)	NATAZIA-28 (ORAL)		
APRI 28 DAY TABLET (ORAL)	NIKKI 3 MG-0.02 MG (ORAL)		
ASHLYNA 0.15-0.03-0.01 MG (ORAL)	NORETHINDRONE 0.35 (ORAL)	AMMONIUM LACTATE 12% CREAM (TOPICAL)	
AUBRA-28 (not AUBRA EQ) (ORAL)	NORETHINDRONE/ETHINYL ESTRADIOL 1-0.02 MG (ORAL)	AMMONIUM LACTATE 12% LOTION (TOPICAL)	
AUROVELA 1 MG-20 MCG (ORAL)	NORETHINDRONE/ETHINYL ESTRADIOL 1.5-0.03 MG(21) (ORAL)		<b>GROWTH FACTORS</b>
AUROVELA 21 1.5-30 TABLET (ORAL)	NORETHINDRONE/ETHINYL ESTRADIOL FE MONOPHASIC (L)	<b>ZAVESCA 100 MG CAPSULE (ORAL)</b>	INCRELEX VIAL (SUBCUTANEOUS)
AUROVELA FE 1-20 MCG, FE 1.5-30 MCG (ORAL)	NORGESTIMATE/ETHINYL ESTRADIOL MONOPHASIC 0.25-0.035 MG (ORAL)		
AVIANE -28 TABLET (ORAL)	NORGESTIMATE/ETHINYL ESTRADIOL TRIPHASIC (ORAL)		<b>GROWTH HORMONE</b>
BLISOVI FE 1.5-30, BLISOVI FE 1-20 (ORAL)	NORLYDA 0.35 MG (ORAL)	<b>EPINEPHRINE, SELF-INJECTED</b>	GENOTROPIN CARTRIDGE (INJECTION)
CAMILA 0.35 MG TABLET (ORAL)	PHILITH 0.4-0.035 MG (ORAL)	EPINEPHRINE 0.15 MG (49502-0101-02) (INJECTION)	GENOTROPIN MINIQUICK (INJECTION)
CAMRESE LO, CAMRESE 0.15-0.03-0.01 MG (ORAL)	PIMTREA-28 (ORAL)	EPINEPHRINE 0.3 MG (49502-0102-02) (INJECTION)	NORDITROPIN FLEXPOR (INJECTION)
CHARLOTTE 24 FE CHEWABLE (ORAL)	PIRMELLA 1-35 28, PIRMELLA 7-7-7-28 (ORAL)	EPIPEN AUTO-INJECTOR (INTRAMUSC)	
CHATEAL-28 (not CHATEAL EQ) (ORAL)	PORTIA-28 (ORAL)	EPIPEN JR AUTO-INJECTOR (INTRAMUSC)	
DASETTA 1-35-28 TABLET (ORAL)	PREVIFEM (ORAL)		<b>H. PYLORI TREATMENT</b>
DAYSEE 0.15-0.03-0.01 MG (ORAL)	RECLIPSEN-28 (ORAL)	<b>ERYTHROPOIESIS STIMULATING PROTEINS</b>	PYLERA CAPSULE (ORAL)
DEBLITANE 0.35 MG TABLET (ORAL)	SHAROBEL 0.35 MG (ORAL)	(DX CODE REQUIRED - ARANESP and RETACRIT)	
DESOGESTREL / ETHINYL ESTRADIOL 0.15-0.03 MG (ORAL)	SIMPESSE 0.15-0.03-0.01 MG (ORAL)	ARANESP DISP SYRIN, VIAL (INJECTION) (DX CODE REQ.)	<b>HEMOPHILIA TREATMENT</b>
DROSPIRENONE-EE 3-0.02 MG TAB (ORAL)	SPRINTEC-28 (ORAL)	EPOGEN VIAL (INJECTION) (DX CODE REQ.)	ALPHANATE VIAL (not ALPHANATE SD) (INTRAVEN.)
DROSPIRENONE-EE 3-0.03 MG TAB (ORAL)	SRONYX 0.1/0.02 (ORAL)	RETACRIT VIAL (PFIZER Brand Only) (INJECTION) (DX CODE REQ.)	<b>BENEFIX KIT (INTRAVEN.)</b>
ELINEST-28 TABLET (ORAL)	SYEDA-28 (ORAL)		<b>FLUOROQUINOLONES, ORAL</b>
EMOQUETTE 28 (ORAL)	TRI FEMYNOR 28 (ORAL)		COAGADEX VIAL (INTRAVEN)
ENSKYCE 28 (ORAL)	TRI-LINYAH (ORAL)		CORIFACT KIT (INTRAVEN)
ERRIN 0.35 MG (ORAL)	TRI-LO-ESTARYLLA (ORAL)		FEIBA NF (INTRAVEN)
ESTARYLLA 0.25-0.035 MG (ORAL)	TRI-LO-MARZIA (ORAL)		HEMLIBRA VIAL (SUBCUTANE.)
FALMINA-28 (ORAL)	TRI-LO-MILI (ORAL)	<b>GI MOTILITY, CHRONIC</b>	HUMATE-P KIT (INTRAVEN.)
GIANVI 3 MG-0.02 MG (ORAL)	TRI-LO-SPRINTEC (ORAL)		
HEATHER 0.35 MG (ORAL)	TRI-SPRINTEC (ORAL)	<b>GLUCAGON AGENTS</b>	WILATE VIAL (INTRAVEN)
ISIBLOOM 28 (ORAL)	<b>TRIVORA-28 (ORAL)</b>	BAQSIMI SPRAY (NASAL)	XYNTHA KIT (INTRAVEN)
JAIMIESS 0.15-0.03-0.01 MG (ORAL)	VIENVA-28 (ORAL)	GLUCAGON VIAL (ELI LILLY Brand) (INJECTION)	XYNTHA SOLOFUSE SYRINGE KIT (INTRAVEN.)
JENCYCLA 0.35 MG (ORAL)	ZOVIA 1-35 (ORAL)*	GLUCAGON EMERGENCY KIT (ELI LILLY Brand) (INJECTION)	
JULEBER-28 (ORAL)		<b>PROGLYCEM SUSPENSION (ORAL)</b>	<b>HEPATITIS C AGENTS</b>
JUNEL 1 MG/20 MCG, JUNEL 1.5 MG/30 MCG (ORAL)		ZEGALOGUE AUTOINJECTOR (SUBCUTAN.)	MAVYRET TABLET, PELLET PACKET (ORAL)
JUNEL FE 1 MG/20 MCG, JUNEL FE 1.5 MG /30 MCG (not 24) (ORAL)		ZEGALOGUE SYRINGE (SUBCUTANEOUS)	PEGASYS SYRINGE, VIAL (SUBCUTANEOUS)
KURVELO-28 (ORAL)			<b>GLUCOCORTICIDS, INHALED</b>
LARIN FE 1/20, LARIN FE 1.5/30 (ORAL) (not 24)	<b>CONTRACEPTIVES, OTHER</b>	<b>ADVAIR DISKUS (INHALATION)</b>	RIBAVIRIN 200 MG TABLET (not CAPSULE) (ORAL)
LESSINA-28 (ORAL)	<b>NUVARING (VAGINAL)</b>	<b>ADVAIR HFA (INHALATION)</b>	SOFOBUVIR / VELPATASVIR TABLET (ORAL)
LEVONOR-ETH ESTRADIOL-28 0.1/0.02 (ORAL)	TWIRLA PATCH (TRANSDERM)	ARNUITY ELLIPTA (INHALATION)	VOSEVI TABLET (ORAL)
LEVONOR-ETH ESTRADIOL-91 0.1/0.02 (ORAL)	ZAFEMY PATCH (not XULANE) (TRANSDERM)	ASMANEX TWISTHALER (not HFA) (INHALATION)	
LEVONOR-ETH ESTRADIOL-28 0.15/0.03 (ORAL)		<b>BREO ELLIPTA (INHALATION)</b>	<b>HISTAMINE II RECEPTOR BLOCKER</b>
LEVONOR-ETH ESTRADIOL-91 0.15/0.03 (ORAL)		BUDESONIDE 0.25, 0.5, 1 MG RESPULES (INHALATION)	FAMOTIDINE SUSPENSION (ORAL)
LEVORA-28 (ORAL)	<b>COPD AGENTS</b>	DULERA INHALER (INHALATION)	FAMOTIDINE TABLET (not CHEW) (Rx and OTC) (ORAL)
LO LOESTRIN FE (ORAL)	ALBUTEROL / IPRATROPIUM NEB SOLUTION (INHALATION)	FLOVENT DISKUS (INHALATION)	
LOESTRIN 21 1/20, LOESTRIN 21 1.5/30 (ORAL)	ANORO ELLIPTA (INHALATION)	FLOVENT HFA (INHALATION)	
LOESTRIN FE 1/20, LOESTRIN FE 1/5.30 (ORAL)	ATROVENT 17 MCG HFA (INHALATION)	FLUTICASONE DISKUS (INHALATION)	<b>HYPOGLYCEMICS, ALPHA-GLUCOSIDASE INHIBITORS</b>
LOJAIMIESS 0.1-0.02-0.01 (ORAL)	COMBIVENT RESPIMAT (INHALATION)	FLUTICASONE HFA (INHALATION)	ACARBOSE TABLET (ORAL)
LORYNA 3 MG-0.02 MG (ORAL)	IPRATROPIUM BR 0.02% SOLUTION (INHALATION)	PULMICORT FLEXHALER (INHALATION)	
	ROFLUMILAST TABLET (ORAL)	PULMICORT RESPULE (INHALATION)	<b>HYPOGLYCEMICS, INCRETIN MIMETICS/ENHANCERS</b>
	<b>SPIRIVA HANDIHALER (INHALATION) (not RESPIMAT)</b>	<b>SYMBICORT INHALER (INHALATION)</b>	BYETTA DOSE PEN (SUBCUTANEOUS)
	STIOLTO RESPIMAT (INHALATION)	TRELEGY ELLIPTA (INHALATION)	JANUMET TABLET (ORAL)

HYPOGLYCEMICS, INCRETIN MIMETICS/ENHANCERS, CONT.	IDIOPATHIC PULMONARY FIBROSIS	LEUKOTRIENE MODIFIERS	NEUROPATHIC PAIN
JANUMET XR TABLET (ORAL)	OFEV CAPSULE (ORAL)	MONTELUKAST CHEW TABLET (not GRANULES) (ORAL)	CAPSAICIN 0.025%, 0.075%, 0.1% CREAM (OTC) (TOPICAL)
JANUVIA TABLET (ORAL)	PIRFENIDONE CAPSULE, TABLET (ORAL)	MONTELUKAST TABLET (ORAL)	CAPSAICIN 0.15% LIQUID (OTC) (TOPICAL)
JENTADUETO TABLET (ORAL)			DULOXETINE 20MG, 30MG, 60MG CAPSULES (not 40MG) (ORAL)
JENTADUETO XR TABLET (ORAL)	IMMUNOMODULATORS, ASTHMA	LIPOTROPICS, OTHER	GABAPENTIN CAPSULE (ORAL)
OZEMPIC DOSE PEN, SYRINGE (SUBCUTANE.)	FASENRA PEN, SYRINGE (SUBCUTANEOUS)	CHOLESTYRAMINE PACKET (with SUCROSE) (not LIGHT) (ORAL)	GABAPENTIN TABLET (ORAL)
SAXAGLIPTIN TABLET (ORAL)*	XOLAIR AUTOINJECTOR, SYRINGE, VIAL (SUBCUTANEOUS)	COLESEVELAM TABLET (ORAL)	LIDOCAINE 5% PATCH (TOPICAL)
TRADJENTA TABLET (ORAL)	IMMUNOMODULATORS, ATOPIC DERMATITIS	COLESTIPOL TABLET (not GRANULES PACKET) (ORAL)	LIDODERM 5% PATCH (TOPICAL)
TRULICITY PEN (SUBCUTANE.)	*** DUPIXENT REQUIRES CLINICAL PRIOR AUTHORIZATION***	EZETIMIBE TABLET (ORAL)	LYRICA CAPSULE (IR) (not CR) (ORAL)
<b>VICTOZA PEN (SUBCUTANEOUS)*</b>	<a href="#">***DUPIXENT MN PA FORM***</a>	FENOFIBRATE 67MG, 134MG, 200MG CAPSULE (ORAL)	PREGABALIN CAPSULE (IR) (ORAL)
		FENOFIBRATE 48MG, 54MG, 145MG, 160MG TABLET (ORAL)	NSAIDS
HYPOGLYCEMICS, INSULIN & RELATED AGENTS	DUPIXENT PEN (SUBCUTANEOUS)	GEMFIBROZIL TABLET (ORAL)	CELECOXIB CAPSULES (ORAL)
APIDRA SOLOSTAR PEN (SUBCUTANEOUS)	DUPIXENT SYRINGE (SUBCUTANEOUS)	NIACIN CAPLET, CAPSULE, TABLET (RX & OTC) (ORAL)	DICLOFENAC 1% GEL (not SOLUTION) (TOPICAL)
APIDRA VIAL (SUBCUTANEOUS)		NIACIN ER, SLO-NIACIN TABLET (ORAL)	DICLOFENAC SODIUM DR & EC TABLET (not ER 100 MG) (ORAL)
HUMALOG 100 UNIT/ML CARTRIDGE (SUBCUTANEOUS)	<b>ELIDEL 1% CREAM (TOPICAL)</b>	OMEGA-3 ACID ETHYL ESTERS 1GM CAPSULE (ORAL)	<b>FLECTOR 1.3% PATCH (TOPICAL)</b>
HUMALOG 100 UNIT/ML KWIKPEN (not 200 UNIT/ML) (SUBCUTANEOUS)	EUCRISA 2% OINTMENT (TOPICAL)	<b>VASCEPA CAPSULE (ORAL)</b>	IBUPROFEN INFANT DROPS 50 MG/1.25 ML (ORAL)
HUMALOG 100 UNIT/ML VIAL (not 200 UNIT/ML) (SUBCUTANEOUS)	TACROLIMUS 0.1% OINTMENT (TOPICAL)		IBUPROFEN SUSPENSION, TABLET (ORAL)
HUMALOG JR 100 UNIT/ML KWIKPEN (SUBCUTANEOUS)	TACROLIMUS 0.3% OINTMENT (TOPICAL)	LIPOTROPICS, STATINS ‡	INDOMETHACIN IR CAPSULE (not ER 75 MG) (ORAL)
HUMALOG MIX 50-50 KWIKPEN (SUBCUTANEOUS)		<a href="#">[STEP THERAPY CATEGORY]</a>	MELOXICAM TABLET (not CAPSULE) (ORAL)
HUMALOG MIX 75-25 KWIKPEN, VIAL (SUBCUTANEOUS)	IMMUNOMODULATORS, TOPICAL	ATORVASTATIN TABLET (ORAL)	NABUMETONE TABLET (ORAL)
HUMULIN 70/30 KWIKPEN OTC (SUBCUTANE.)	IMIQUIMOD 5% CREAM PACKET (not 3.75%) (TOPICAL)	LOVASTATIN TABLET (ORAL)	NAPROXEN 250MG, 375MG, 500MG TABLET (not DR or ER) (ORAL)
HUMULIN 70/30 VIAL OTC (SUBCUTANEOUS)	PODOFILOX 0.5% SOLUTION (TOPICAL)	PRAVASTATIN TABLET (ORAL)	NAPROXEN SUSPENSION (ORAL)
HUMULIN N 100 UNITS/ML VIAL (not KWIKPEN) (SUBCUTANEOUS)		ROSUVASTATIN TABLET (ORAL)	<b>PENNSAID 2% PUMP (not SOLUTION PACKET) (TOPICAL)</b>
HUMULIN R 100 UNITS/ML VIAL (SUBCUTANEOUS)	IMMUNOSUPPRESSIVES, ORAL	SIMVASTATIN TABLET (ORAL)	SULINDAC TABLET (ORAL)
HUMULIN R 500 UNITS/ML KWIKPEN, VIAL (SUBCUTANEOUS)	AZATHIOPRINE TABLET (ORAL)		ONCOLOGY, ORAL - BREAST
INSULIN ASPART 100 UNIT/ML CARTRIDGE, PEN, VIAL (SUBCUTANEOUS)	<b>CELLCEPT 200 MG/ML SUSPENSION (ORAL)</b>	MACROLIDES/KETOLIDES	ANASTROZOLE TABLET (ORAL)
INSULIN ASPART PROT (MIX 70-30) PEN, VIAL (SUBCUTANEOUS)	CYCLOSPORINE MODIFIED CAPSULE (not 50MG) (ORAL)	AZITHROMYCIN 1 GM POWDER PACKET (ORAL)	CAPECITABINE TABLET (ORAL)
INSULIN LISPRO 100 UNIT/ML PEN (SUBCUTANEOUS)	CYCLOSPORINE MODIFIED SOLUTION (ORAL)	AZITHROMYCIN SUSPENSION, TABLET (ORAL)	CYCLOPHOSPHAMIDE CAPSULE, TABLET (ORAL)
INSULIN LISPRO 100 UNIT/ML VIAL (SUBCUTANEOUS)	EVEROLIMUS TABLET (ORAL)	CLARITHROMYCIN IR TABLET (not ER) (ORAL)	EXEMESTANE TABLET (ORAL)
INSULIN LISPRO JR 100 UNIT/ML KWIKPEN (SUBCUTANEOUS)	GENGRAF CAPSULE, SOLUTION (ORAL)	ERYTHROCIN 250 MG FILM-COATED TAB (ORAL)	FULVESTRANT SYRINGE (INTRAMUSC)
<b>LANTUS SOLOSTAR (SUBCUTANEOUS)</b>	MYCOPHENOLATE MOFETIL CAPSULE, TABLET (ORAL)	ERYTHROMYCIN 200 MG/5 ML SUSPENSION (ORAL)	IBRANCE CAPSULE (not TABLET) (ORAL)
<b>LANTUS VIAL (SUBCUTANEOUS)</b>	<b>RAPAMUNE SOLUTION (not TABLET) (ORAL)</b>	ERYTHROMYCIN DR TABLET (not IR or ES 400MG) (ORAL)	LETROZOLE TABLET (ORAL)
NOVOLOG 100 UNIT/ML CARTRIDGE, FLEXPEN, VIAL (SUBCUTANEOUS)	TACROLIMUS IR CAPSULE (ORAL)		TAMOXIFEN CITRATE TABLET (ORAL)
NOVOLOG MIX 70-30 FLEXPEN (not VIAL) (SUBCUTANEOUS)			ONCOLOGY, ORAL - HEMATOLOGIC
TRESIBA FLEXTOUCH (not VIAL) (SUBCUTANEOUS)			BOSULIF TABLET (ORAL)
<b>TOUJEO MAX SOLOSTAR PEN (SUBCUTANEOUS)*</b>	INTRANASAL RHINITIS AGENTS	METHOTREXATE SODIUM PF VIAL (INJECTION)	BRUKINSA CAPSULE (ORAL)
<b>TOUJEO SOLOSTAR PEN (SUBCUTANEOUS)*</b>	AZELASTINE 0.1% SPRAY 137MCG (not 0.15%) (NASAL)	METHOTREXATE TABLET, VIAL (ORAL)	CALQUENCE CAPSULE (ORAL)
	FLUTICASONE PROP 50 MCG SPRAY (RX & OTC) (NASAL)		COPIKTRA CAPSULE (ORAL)
	IPRATROPIUM 0.03%, 0.06% SPRAY (NASAL)	MOVEMENT DISORDERS	DAURISMO TABLET (ORAL)
	TRIAMCINOLONE 55 MCG SPRAY OTC (NASAL)	AUSTEDO TABLET (ORAL)	HYDROXYUREA CAPSULE (ORAL)
HYPOGLYCEMICS, METFORMINS		AUSTEDO XR TABLET (ORAL)	ICLUSIG TABLET (ORAL)
GLIPIZIDE-METFORMIN TABLET (ORAL)	IRON, ORAL	AUSTEDO XR TITR PK (ORAL)	IDHIFA TABLET (ORAL)
<b>GLUMETZA ER 500MG &amp; 1,000MG (ORAL)</b>	CHILD FERROUS SULFATE 15 MG/ML DROPS OTC (ORAL)	INGREZZA CAPSULE (not SPRINKLE CAP) (ORAL)	IMATINIB TABLET (ORAL)
GLYBURIDE-METFORMIN TABLET (ORAL)	FERATE 27 MG OTC TABLET (ORAL)	INGREZZA INITIATION PACK (ORAL)	IMBRUVICA CAPSULE, SUSP, TABLET (ORAL)
METFORMIN TABLET (not 625MG) (ORAL)	FERROUS FUMARATE 324 MG OTC TABLET (ORAL)	TETRABENAZINE TABLET (ORAL)	INQOVI TABLET (ORAL)
METFORMIN ER 500MG & 750MG TAB (generic GLUCOPHAGE)	FERROUS GLUCONATE 324 MG OTC TABLET (ORAL)		INREBIC CAPSULE (ORAL)
	FERROUS SULFATE 15 MG/ML DROPS OTC (ORAL)		JAKAFI TABLET (ORAL)
HYPOGLYCEMICS, SGLT2	FERROUS SULF 44 MG IRON/5ML LIQUID OTC (ORAL)	MULTIPLE SCLEROSIS AGENTS	LEUKERAN TABLET (ORAL)
<b>FARXIGA TABLET (ORAL)</b>	FERROUS SULFATE 65 MG TABLET OTC (ORAL)	AVONEX PEN, PREFILLED SYRINGE (INTRAMUSC.)	MATULANE CAPSULE (ORAL)
INVOKAMET TABLET (not XR) (ORAL)	FERROUS SULFATE 300 MG/5 ML LIQUID OTC (ORAL)	BETASERON 0.3 MG KIT (not VIAL) (SUBCUTANEOUS)	MERCAPTOPYRINE TABLET (ORAL)
INVOKANA TABLET (ORAL)	FERROUS SULFATE 220 MG/5 ML ELIXIR OTC (ORAL)	<b>COPAXONE 20 MG/ML SYRINGE (not 40 MG/ML) (SUBCUTANEOUS)</b>	MYLERAN TABLET (ORAL)
JARDIANCE TABLET (ORAL)	FERROUS SULFATE 300 MG/6.8ML SOLUTION OTC (ORAL)	DALFAMPRIDINE ER TABLET (ORAL)	NINLARO CAPSULE (ORAL)
SYNJARDY TABLET (not XR) (ORAL)	FERROUS SULFATE 325 MG OTC (ORAL)	DIMETHYL FUMARATE DR CAPSULE (ORAL)	OJJAARA TABLET (ORAL)
<b>XIGDUO XR TABLET (ORAL)</b>	FERROUS SULFATE EC 324 MG OTC TABLET (ORAL)	DIMETHYL FUMARATE DR STARTER PACK (ORAL)	ONUREG TABLET (ORAL)
	FERROUS SULFATE EC 325 MG OTC TABLET (ORAL)	FINGOLIMOD CAPSULE (ORAL)	POMALYST CAPSULE (ORAL)
HYPOGLYCEMICS, TZD	IRON 45 MG TABLET OTC (ORAL)	KESIMPTA PEN (SUBCUTANEOUS)	<b>REVLIMID CAPSULE (ORAL)</b>
PIOGLITAZONE TABLET (ORAL)	POLYSACCHARIDE IRON 150 MG CAPSULE OTC (ORAL)	TERIFLUNOMIDE TABLET (ORAL)	REZLIDHIA CAPSULE (ORAL)

ONCOLOGY, ORAL - HEMATOLOGIC, CONT.	ONCOLOGY, ORAL - OTHER, CONT.	OPHTHALMIC ANTIBIOTIC-STEROID COMBINATIONS	OTIC ANTI-INFECTIVES & ANESTHETICS
RYDAPT CAPSULE (ORAL)	TEMOZOLAMIDE CAPSULE (ORAL)	NEOMYCIN / POLY / DEXAMETHASONE OINTMENT (OPHTHALMIC)	ACETIC ACID 2% EAR SOLUTION (OTIC)
SCEMBLIX TABLET (ORAL)	TURALIO CAPSULE (ORAL)	NEOMYCIN / POLY / DEXAMETHASONE DROP (OPHTHALMIC)	
SPRYCEL TABLET (ORAL)	VITRAKVI CAPSULE, SOLUTION (ORAL)	SULFACETAMIDE / PREDNISOLONE 10-0.23% (OPHTHALMIC)	<b>PAH AGENTS, ORAL AND INHALED</b>
TABLOID TABLET (ORAL)	ZEJULA CAPSULE (ORAL)	TOBRADEX EYE DROP (OPHTHALMIC)	(DX CODE REQUIRED - SILDENAFIL & TADALAFIL)
TASIGNA CAPSULE (ORAL)		TOBRADEX EYE OINTMENT (OPHTHALMIC)	ALYQ 20 MG TABLET (ORAL) (DX CODE REQ.)
THALOMID CAPSULE (ORAL)	<b>ONCOLOGY, ORAL - PROSTATE</b>	TOBRAMYCIN-DEXAMETH OPHTH SUSP (OPHTHALMIC)	AMBRISENTAN TABLET (ORAL)
TIBSOVO TABLET (ORAL)	ABIRATERONE TABLET (ORAL)	<b>OPHTHALMIC, ANTI-INFLAMMATORIES</b>	SILDENAFIL 20 MG TABLET (ORAL) (DX CODE REQ.)
TRETINOIN CAPSULE (ORAL)	AKEEGA TABLET (ORAL)	DICLOFENAC 0.1% DROP (OPHTHALMIC)	TADALAFIL 20 MG TABLET (ADCIRCA) (ORAL) (DX CODE REQ.)
VANFLYTA TABLET (ORAL)	BICALUTAMIDE TABLET (ORAL)	<b>DUREZOL 0.05% EYE DROPS (OPHTHALMIC)</b>	<b>TRACLEER 62.5 MG &amp; 125 MG TABLET (ORAL)</b>
VENCLEXTA TABLET, STARTING PACK (ORAL)	EMCYT CAPSULE (ORAL)	FLUOROMETHOLONE 0.1% DROP (OPHTHALMIC)	VENTAVIS SOLUTION (INHALATION)
VONJO CAPSULE (ORAL)	ERLEADA TABLET (ORAL)	FML FORTE 0.25% DROP (not LIQUIFILM) (OPHTHALMIC)	
XOSPATA TABLET (ORAL)	FLUTAMIDE CAPSULE (ORAL)	KETOROLAC 0.5% SOLUTION (not 0.4%) (OPHTHALMIC)	
XPOVIO WEEKLY DOSE (ORAL)	NILUTAMIDE TABLET (ORAL)	<b>LOTEMAX 0.5% EYE DROP (not GEL) (OPHTHALMIC)</b>	<b>PANCREATIC ENZYMES</b>
ZOLINZA CAPSULE (ORAL)	NUBEQA TABLET (ORAL)	NEVANAC 0.1% DROPTAINER (OPHTHALMIC)	CREON CAPSULE (ORAL)
ZYDELIG TABLET (ORAL)	ORGOVYX TABLET (ORAL)	PRED MILD 0.12% EYE DROP (not FORTE) (OPHTHALMIC)	ZENPEP CAPSULE (ORAL)
	XTANDI CAPSULE, TABLET (ORAL)	PREDNISOLONE AC 1% EYE DROP (OPHTHALMIC)	
<b>ONCOLOGY, ORAL - LUNG</b>	YONSA TABLET (ORAL)		<b>PHOSPHATE BINDERS</b>
ALECENSA CAPSULE (ORAL)		<b>OPHTHALMIC, ANTI-INFLAMMATORY/IMMUNOMODULATOR</b>	CALCIUM ACETATE CAPSULE, GELCAP (not TAB) (ORAL)
ALUNBRIG TABLET, TABLET PACK (ORAL)		<b>RESTASIS 0.05% EYE EMULSION (OPHTHALMIC)</b>	CALCIUM ACETATE TABLET OTC (not RX) (ORAL)
AUGTYRO CAPSULE (ORAL)	<b>ONCOLOGY, ORAL - RENAL CELL</b>	RESTASIS MULTIDOSE 0.05% (OPHTHALMIC)	SEVELAMER CARBONATE TABLET (ORAL)*
ERLOTINIB TABLET (ORAL)	CABOMETYX TABLET (ORAL)	XIIDRA 5% DROPS (OPHTHALMIC)	
EXKIVITY CAPSULE (ORAL)	EVEROLIMUS TABLET (not DISPERZ TABS) (ORAL)		
GAVRETO CAPSULE (ORAL)	FOTIVDA CAPSULE (ORAL)	<b>OPHTHALMICS, GLAUCOMA AGENTS</b>	<b>PITUITARY SUPPRESSIVE AGENTS, LHRH</b>
GILOTRIF TABLET (ORAL)	INLYTA TABLET (ORAL)	<b>ALPHAGAN P 0.15% EYE DROP (not 0.1%) (OPHTHALMIC)</b>	ELIGARD SYRINGE (SUBCUTANEOUS)
HYCANTIN CAPSULE (ORAL)	LENVIMA CAPSULE, DAILY DOSE (ORAL)	BETOPTIC S 0.25% EYE DROP (OPHTHALMIC)	FENSOLVI SYRINGE (SUBCUTANEOUS)
<b>IRESSA TABLET (ORAL)</b>	<b>NEXAVAR TABLET (ORAL)</b>	BRIMONIDINE 0.2% EYE DROP (not 0.15% or 0.1%) (OPHTHALMIC)	LEUPROLIDE ACETATE KIT (SUBCUTANEOUS)
KRAZATI TABLET (ORAL)	<b>SUTENT CAPSULE (ORAL)</b>	CARTEOLOL 1% EYE DROP (OPHTHALMIC)	LEUPROLIDE ACETATE VIAL (not DEPOT) (SUBCUTANEOUS)
LORBRENA TABLET (ORAL)	<b>VOTRIENT TABLET (ORAL)</b>	<b>COMBIGAN 0.2%-0.5% DROP (OPHTHALMIC)</b>	LUPRON DEPOT KIT (INJECTION)
LUMAKRAS TABLET (ORAL)	WELIREG TABLET (ORAL)	DORZOLAMIDE 2% DROP (OPHTHALMIC)	LUPRON DEPOT-PED KIT (INJECTION)
RETEVMO CAPSULE (ORAL)		DORZOLAMIDE / TIMOLOL EYE DROP (OPHTHALMIC)	SYNAREL NASAL SPRAY (NASAL)
ROZLYTREK CAPSULE, PELLETT PACKET (ORAL)	BRAFTOVI CAPSULE (ORAL)	DORZOLAMIDE / TIMOLOL / PF DROPS (OPHTHALMIC)	
TABRECTA TABLET (ORAL)	COTELLIC TABLET (ORAL)	LATANOPROST 0.005% DROP (OPHTHALMIC)	
TAGRISSO TABLET (ORAL)	ERIVEDGE CAPSULE (ORAL)	LEVONUNOLOL 0.5% EYE DROP (OPHTHALMIC)	<b>PLATELET AGGREGATION INHIBITORS</b>
TARCEVA TABLET (ORAL)	MEKINIST TABLET (ORAL)	PILOCARPINE 1%, 2%, 4% EYE DROPS (OPHTHALMIC)	BRILINTA TABLET (ORAL)
TEPMETKO TABLET (ORAL)	MEKTOVI TABLET (ORAL)	RHOPRESSA 0.02% EYE DROP (OPHTHALMIC)	CLOPIDOGREL TABLET (ORAL)
VIZIMPRO TABLET (ORAL)	ODOMZO CAPSULE (ORAL)	ROCKLATAN 0.02%-0.005% EYE DROP (OPHTHALMIC)	DIPYRIDAMOLE TABLET (ORAL)
XALKORI CAPSULE, PELLETT (ORAL)	OJEMDA SUSP, TABLET (ORAL)*	TIMOLOL 0.25% EYE DROP (not OCUDOSE) (OPHTHALMIC)	PRASUGREL TABLET (ORAL)
ZYKADIA CAPSULE (ORAL)	TAFINLAR CAPSULE (ORAL)	TIMOLOL 0.5% EYE DROP (not ONCE DAILY or PF) (OPHTHALMIC)	
	ZELBORAF TABLET (ORAL)	TIMOLOL 0.25%, 0.5% GEL-SOLUTION (OPHTHALMIC)	
		<b>TRAVATAN Z 0.004% EYE DROP (OPHTHALMIC)</b>	
<b>ONCOLOGY, ORAL - OTHER</b>	<b>OPHTHALMICS FOR ALLERGIC CONJUNCTIVITIS</b>	<b>OPIATE DEPENDENCE TREATMENTS</b>	<b>POTASSIUM BINDERS</b>
AYVAKIT TABLET (ORAL)	<b>ALREX 0.2% EYE DROP (OPHTHALMIC)</b>	BRIXADI MONTHLY, WEEKLY SYR (SUBCUTANEOUS)*	LOKELMA 5 GM POWDER PACKET (00310-1105-30) (ORAL)
BALVERSA TABLET (ORAL)	CROMOLYN SODIUM 4% DROPS (OPHTHALMIC)	BUPRENORPHINE SL TABLET (SUBLINGUAL)	LOKELMA 10 GM POWDER PACKET (00310-1110-30) (ORAL)
CAPRELSA TABLET (ORAL)	OLOPATADINE OTC 0.1% EYE DROP (not RX) (OPHTHALMIC)	BUPRENORPHINE / NALOXONE TABLETS (not FILM) (SUBLINGUAL)	SODIUM POLYSTYRENE SULF POWDER (ORAL)
COMETRIQ DAILY-DOSE PACK (ORAL)	OLOPATADINE OTC 0.2% EYE DROP (not RX) (OPHTHALMIC)	KLOXXADO SPRAY (NASAL)*	VELTASSA POWDER PACKET (ORAL)*
FRUZAQLA CAPSULE (ORAL)	PATADAY ONCE DAILY 0.7% DROPS (OTC) (OPHTHALMIC)	LIFEMS NALOXONE 2 MG/2 ML KIT (INJECTION)	
IWILFIN TABLET (ORAL)		NALOXONE CARPUJECT, SYRINGE, VIAL (INJECTION)	<b>PRENATAL VITAMINS</b>
JAYPIRCA TABLET (ORAL)		NALTREXONE TABLET (ORAL)	COMPLETE NATAL DHA (OTC) (ORAL)
KOSELUGO CAPSULE (ORAL)	<b>OPHTHALMIC ANTIBIOTICS</b>	<b>NARCAN NASAL SPRAY (NASAL)</b>	COMPLETENATE CHEW TABLET (OTC) (ORAL)
LONSURF TABLET (ORAL)	BACITRACIN-POLYMYXIN B SULFATE OINTMENT (OPHTHALMIC)	SUBLOCADE SYRINGE (SUBCUTANEOUS)	FOLIVANE-OB CAPSULE (OTC) (ORAL)
LYNPARZA TABLET (ORAL)	CIPROFLOXACIN 0.3% SOLUTION (OPHTHALMIC)	<b>SUBOXONE FILM (SUBLINGUAL)</b>	M-NATAL PLUS TABLET (OTC) (ORAL)
LYTGOBI DAILY DOSE PACK (ORAL)	ERYTHROMYCIN 0.5% OINTMENT (OPHTHALMIC)	VIVITROL VIAL (SUBCUTANEOUS)	NIVA-PLUS TABLET (OTC) (ORAL)
OGSIVEO TABLET (ORAL)	GENTAMICIN 0.3% SOLUTION (OPHTHALMIC)		
PEMAZYRE TABLET (ORAL)	MOXIFLOXACIN 0.5% DROPS (OPHTHALMIC)	<b>OTIC ANTIBIOTICS</b>	PNV 29-1 TABLET (OTC) (ORAL)
QINLOCK TABLET (ORAL)	OFLOXACIN 0.3% SOLUTION (OPHTHALMIC)	CIPRODEX OTIC SUSPENSION (OTIC)	PNV-DHA SOFTGEL (42192-0321-30) (OTC) (ORAL)
RUBRACA TABLET (ORAL)	POLYMYXIN B-TMP DROP (OPHTHALMIC)	CIPROFLOX-DEXAMETH OTIC SUSPENSION (OTIC)	PRENATAL VITAMIN PLUS LOW IRON (OTC) (ORAL)
STIVARGA TABLET (ORAL)	TOBRAMYCIN 0.3% SOLUTION (OPHTHALMIC)	NEOMYCIN / POLYMYXIN / HC EAR SOLUTION, SUSPENSION	PRENATAL VITAMINS TABLET (46122-0098-78) (OTC) (ORAL)
TAZVERIK TABLET (ORAL)	TOBREX 0.3% EYE OINTMENT (OPHTHALMIC)	OFLOXACIN 0.3% EAR DROP (OTIC)	

PRENATAL VITAMINS, CONT.	SMOKING CESSATION	STIMULANTS AND RELATED AGENTS (DX CODE REQ.), CONT.
SELECT-OB + DHA PACK (OTC) (ORAL)	BUPROPION HCL SR 150 MG TABLET (ORAL)	DEXMETHYLPHENIDATE IR (FOCALIN)(ORAL)(DX CODE REQ.)
SE-NATAL-19 TABLET (OTC) (ORAL)	CHANTIX TABLET (ORAL)	DEXTRAMPHETAMINE TABLET (not ER) (ORAL)(DX CODE REQ.)
THRIVITE RX TABLET (OTC) (ORAL)	CHANTIX STARTING MONTH BOX, CONT MONTH BOX (ORAL)	DEXTRAMPHETAMINE / AMPHETAMINE ER CAPSULE (ORAL)(DX CODE REQ.)*
TRICARE PRENATAL TABLET (OTC) (ORAL)	NICOTINE GUM OTC (not BRAND) (BUCCAL)	DEXTRAMPHETAMINE / AMPHETAMINE TABLET (IR) (ORAL) (DX CODE REQ.)
TRINATAL RX 1 TABLET (OTC) (ORAL)	NICOTINE LOZENGE OTC (not BRAND) (MUCOUS MEM)	FOCALIN XR CAPSULE (ORAL) (DX CODE REQ.)
VITAFOL FE PLUS SOFTGEL (ORAL)	NICOTINE PATCH OTC (not BRAND) (TRANSDERMAL)	GUANFACINE ER TABLET (ORAL)
VITAFOL GUMMIES (OTC) (ORAL)	NICOTINE TRANSDERMAL SYSTEM OTC (TRANSDERMAL)	LISDEXAMFETAMINE CHEWABLE TABLET (ORAL)(DX CODE REQ.)*
VITAFOL NANO TABLET (OTC) (ORAL)	VARENICLINE TABLET (ORAL)	METHYLPHENIDATE IR TABLET (RITALIN) (ORAL) (DX CODE REQ.)
VITAFOL ULTRA SOFTGEL (OTC) (ORAL)	VARENICLINE STARTING MONTH BOX, CONT MONTH BOX (ORAL)	METHYLPHENIDATE ER TABLET (CONCERTA) (ORAL) (DX CODE REQ.)*
VITAFOL-OB CAPLET (OTC) (ORAL)	<b>STERIODS, TOPICAL HIGH POTENCY</b>	METHYLPHENIDATE ER TABLET (METADATE ER) (ORAL) (DX CODE REQ.)
VITAFOL-OB+DHA COMBO PACK (OTC) (ORAL)	BETAMETHASONE DP AUG 0.05% CREAM (TOPICAL)	METHYLPHENIDATE SOLUTION (ORAL) (DX CODE REQ.)
VITAFOL-ONE CAPSULE (OTC) (ORAL)	BETAMETHASONE VALERATE 0.1% CREAM (TOPICAL)	MODAFINIL TABLET (ORAL) (DX CODE REQ.)
WESCAP-PN DHA CAPSULE (OTC) (ORAL)	BETAMETHASONE VALERATE 0.1% LOTION (TOPICAL)	QUILLICHEW ER CHEWABLE TABLET (ORAL)(DX CODE REQ.)
WESNATAL DHA COMPLETE (OTC) (ORAL)	BETAMETHASONE VALERATE 0.1% OINTMENT (TOPICAL)	QUILLIVANT XR SUSPENSION (ORAL) (DX CODE REQ.)
WESTAB PLUS TABLET (69367-0267-01) (OTC) (ORAL)	TRIAMCINOLONE ACETONIDE 0.025%, 0.1%, 0.5% CREAM (TOPICAL)	<b>VYVANSE CAPSULE (ORAL) (DX CODE REQ.)</b>
ZATEAN-PN DHA CAPSULE (OTC) (ORAL)	TRIAMCINOLONE ACETONIDE 0.025%, 0.1% LOTION (TOPICAL)	
	TRIAMCINOLONE ACETONIDE 0.05%, 0.1%, 0.5% OINTMENT (TOPICAL)	<b>TETRACYCLINES</b>
	<b>STERIODS, TOPICAL LOW POTENCY</b>	DOXYCYCLINE HYCLATE CAPSULE (not DR) (ORAL)
<b>PROGESTATIONAL AGENTS</b>	<b>DERMA-SMOOTHIE-FS BODY OIL (TOPICAL)</b>	DOXYCYCLINE HYCLATE TABLET (not DR) (ORAL)
MEDROXYPROGESTERONE TABLET (ORAL)	<b>DERMA-SMOOTHIE-FS SCALP OIL (TOPICAL)</b>	DOXYCYCLINE MONOHYDRATE 50 MG, 100 MG CAPSULE (ORAL)
NORETHINDRONE TABLET (ORAL)	DESONIDE CREAM (TOPICAL)	DOXYCYCLINE MONOHYDRATE TABLET (ORAL)
PROGESTERONE CAPSULE (ORAL)	DESONIDE 0.05% OINTMENT (not LOTION) (TOPICAL)	MINOCYCLINE CAPSULE (not TABLET) (not ER) (ORAL)
PROGESTERONE VIAL (INTRAMUSC)	HYDROCORTISONE 0.5% CREAM (not ACETATE) (OTC) (TOPICAL)	MORGIDOX CAPSULE (not KIT) (ORAL)
	HYDROCORTISONE 1% CREAM (not ACETATE) (RX or OTC) (TOPICAL)	
	HYDROCORTISONE 1% OINTMENT (RX or OTC) (TOPICAL)	
	HYDROCORTISONE 2.5% CREAM (TOPICAL)	
<b>PROTON PUMP INHIBITORS ‡</b>	HYDROCORTISONE 2.5% LOTION (TOPICAL)	<b>THROMBOPOIESIS STIMULATING PROTEINS</b>
<b>(STEP THERAPY CATEGORY)</b>	HYDROCORTISONE 2.5% OINTMENT (TOPICAL)	DOPTELET TABLET (ORAL)
ESOMEPRAZOLE 20MG CAPSULE (OTC & RX) (ORAL)	HYDROCORTISONE (PROCTO) RECTAL CREAM 2.5% (TOPICAL)	PROMACTA TABLET (not SUSPENSION PACKET) (ORAL)
ESOMEPRAZOLE 40MG CAPSULE (ORAL)		
<b>NEXIUM PACKET SUSPENSION (not CAPSULE) (ORAL)</b>	<b>STERIODS, TOPICAL MEDIUM POTENCY</b>	
OMEPRAZOLE 10MG, 20MG, 40MG CAPSULE (Rx ONLY) (ORAL)	FLUTICASONE PROPIONATE 0.05% CREAM (TOPICAL)	<b>ULCERATIVE COLITIS AGENTS</b>
PANTOPRAZOLE TABLET (ORAL)	FLUTICASONE PROPIONATE 0.005% OINTMENT (TOPICAL)	<b>APRISO ER CAPSULE (ORAL)</b>
<b>PROTONIX SUSPENSION (ORAL)</b>	MOMETASONE FUROATE 0.1% CREAM (TOPICAL)	MESALAMINE DR TABLET (ORAL)*
	MOMETASONE FUROATE 0.1% OINTMENT (TOPICAL)	MESALAMINE SUPPOSITORY (CANASA) (RECTAL)
	MOMETASONE FUROATE 0.1% SOLUTION (TOPICAL)	PENTASA 250MG CAPSULE (ORAL)
		<b>PENTASA 500MG CAPSULE (ORAL)</b>
<b>SEDATIVE HYPNOTICS</b>		SULFASALAZINE TABLET (ORAL)
ESZOPICLONE TABLET (ORAL)		SULFASALAZINE DR TABLET (ORAL)
FLURAZEPAM CAPSULE (ORAL)		
TEMAZEPAM 15MG, 30MG CAPSULE (not 7.5MG or 22.5MG) (ORAL)	<b>STERIODS, TOPICAL VERY HIGH POTENCY</b>	
ZALEPLON CAPSULE (ORAL)	CLOBETASOL EMOLLIENT 0.05% CREAM (TOPICAL)	
ZOLPIDEM TARTRATE 5MG, 10MG TABLET (not ER or SL) (ORAL)	CLOBETASOL PROPIONATE 0.05% CREAM (TOPICAL)	<b>UTERINE DISORDER TREATMENTS</b>
	CLOBETASOL PROPIONATE 0.05% GEL (TOPICAL)	MYFEMBREE TABLET (ORAL)
	CLOBETASOL PROPIONATE 0.05% OINTMENT (TOPICAL)	ORIAHNN CAPSULE (ORAL)*
<b>SICKLE CELL ANEMIA TREATMENTS</b>	CLOBETASOL PROPIONATE 0.05% SHAMPOO (TOPICAL)	ORILISSA TABLET (ORAL)
ADAKVEO VIAL (INTRAVENOUS)	CLOBETASOL PROPIONATE 0.05% SOLUTION (TOPICAL)	
DROXIA CAPSULE (ORAL)	HALOBETASOL PROPIONATE 0.05% CREAM (TOPICAL)	
ENDARI POWDER PACKET(ORAL)	HALOBETASOL PROPIONATE OINTMENT (TOPICAL)	
OXBRYTA TABLET, TABLET FOR SUSP (ORAL)	<b>STIMULANTS AND RELATED AGENTS (DX CODE REQ.)</b>	<b>VASODILATORS, CORONARY</b>
SIKLOS TABLET (ORAL)	<b>(DX CODE REQUIRED - SEE SELECT AGENTS)</b>	ISOSORBIDE DINITRATE TABS (not OCEANSIDE BRAND) (ORAL)
	ADDERALL TABLET (ORAL) (DX CODE REQ.)	ISOSORBIDE MONONITRATE TABLET (ORAL)
<b>SKELETAL MUSCLE RELAXANTS</b>	AMPHETAMINE SALT COMBO TABLET (IR) (ORAL) (DX CODE REQ.)	ISOSORBIDE MONONITRATE ER / SR TABLET (ORAL)
BACLOFEN TABLET (not SOLUTION) (ORAL)	ATOMOXETINE CAPSULE (ORAL)	NITRO-BID 2% OINTMENT (TRANSDERM)
CYCLOBENZAPRINE TABLET (not ER CAPS) (ORAL)	CLONIDINE ER TABLET (ORAL)	NITROGLYCERIN PATCH (TRANSDERM)
METHOCARBAMOL TABLET (ORAL)	CLONIDINE TABLET (ORAL)	NITROGLYCERIN SL TABLET (SUBLINGUAL)
DEXMETHYLPHENIDATE ER CAPSULE (ORAL)(DX CODE REQ.)		