



Community Health Choice (HMO D-SNP)

# FORMULARIO PARA 2022

## LISTA DE MEDICAMENTOS CUBIERTOS

LEA LO SIGUIENTE: ESTE DOCUMENTO CONTIENE INFORMACIÓN ACERCA DE LOS MEDICAMENTOS QUE CUBRIMOS EN ESTE PLAN

Este formulario se actualizó el 10/09/2021. Para consultar un listado completo o si tiene otras preguntas, comuníquese con Community Health Choice Servicio al Miembros al 1-833-276-8306. Los usuarios de TTY deben llamar al 711, del 1 de octubre al 31 de marzo, de 8:00 a.m. a 8:00 p.m., los 7 días de la semana, y de abril al 30 de septiembre, de lunes a viernes, de 8:00 a.m. a 8:00 p.m., o visite [www.communityhealthchoice.org/Medicare](http://www.communityhealthchoice.org/Medicare).

**[CommunityHealthChoice.org/Medicare](http://CommunityHealthChoice.org/Medicare)**

833.276.8306 or 713.295.5007 (TTY 711)  
October 1 through March 31, 8:00 am to 8:00 pm,  
7 days a week and April 1 through September 30,  
Monday through Friday, 8:00 am to 8:00 pm



**Nota para los miembros actuales: este Formulario ha cambiado con respecto al año pasado. Revise este documento para asegurarse de que aún contiene los medicamentos que toma.**

Cuando esta Lista de medicamentos (Formulario) menciona “nosotros”, “nos” o “nuestro”, hace referencia a Community Health Choice. Cuando dice “plan” o “nuestro plan”, hace referencia a Community Health Choice (HMO D-SNP).

Este documento incluye una lista de los medicamentos (Formulario) de nuestro plan, la cual está en vigencia desde el 10/09/2021. Comuníquese con nosotros para obtener un formulario actualizado. Nuestra información de contacto, junto con la fecha de la última actualización del Formulario, aparece en las páginas de la portada y la portada posterior.

Generalmente, debe concurrir a las farmacias de la red para usar el beneficio de medicamentos con receta. Los beneficios, el formulario, la red de farmacias o los copagos/el coseguro pueden cambiar el 1 de enero de 2022 y periódicamente durante el año.

## ¿Qué es el Formulario de Community Health Choice (HMO D-SNP)?

Un Formulario es una lista de medicamentos cubiertos seleccionados por Community Health Choice con la colaboración de un equipo de proveedores de atención médica, que representa los tratamientos con receta que se consideran una parte necesaria de un programa de tratamiento de calidad. Normalmente, Community Health Choice cubrirá los medicamentos incluidos en el formulario, siempre que el medicamento sea médicaamente necesario, el medicamento con receta se obtenga en una farmacia de la red de Community Health Choice y se cumpla con otras normas del plan. Para obtener más información sobre cómo obtener sus medicamentos con receta, consulte la Evidencia de cobertura.

## ¿Puede cambiar el Formulario (lista de medicamentos)?

La mayoría de los cambios en la cobertura de los medicamentos ocurre el 1 de enero, pero se podrían agregar o quitar medicamentos de la Lista de medicamentos durante el año, moverlos a diferentes niveles de costo compartido o agregar nuevas restricciones por parte de Community Health Choice. Debemos seguir las normas de Medicare al hacer estos cambios.

**Cambios que pueden afectarlo este año:** En los casos a continuación, usted se verá afectado por los cambios de cobertura durante el año:

- **Nuevos medicamentos genéricos.** Podemos eliminar inmediatamente un medicamento de marca de nuestra Lista de medicamentos si lo reemplazamos con un nuevo medicamento genérico que aparecerá en el mismo nivel de costo compartido o en un nivel de costo compartido más bajo y con las mismas restricciones o menos. Además, cuando agreguemos el nuevo medicamento genérico, podemos decidir mantener el medicamento de marca en nuestra Lista de medicamentos, pero inmediatamente moverlo a un nivel de costo compartido diferente o agregar nuevas restricciones. Si actualmente está tomando ese medicamento de marca, quizás no le informemos con antelación antes de que realicemos el cambio, pero más adelante le proporcionaremos información sobre los cambios específicos que hemos realizado.
  - Si realizamos un cambio, usted o la persona autorizada a dar recetas pueden solicitarnos que hagamos una excepción y sigamos cubriendo el medicamento de marca para usted. En el aviso que le proporcionamos también se incluirá información sobre cómo solicitar una excepción, y usted también puede encontrar información en la sección a continuación titulada “¿Cómo puedo solicitar que se haga una excepción al Formulario de Community Health Choice (HMO D-SNP)?”.
- **Medicamentos retirados del mercado.** Si la Administración de Drogas y Alimentos considera que un medicamento de nuestro Formulario es inseguro o el fabricante del medicamento lo retira del mercado, eliminaremos de inmediato dicho medicamento de nuestro Formulario y les notificaremos a los miembros que toman el medicamento en cuestión.
- **Otros cambios.** Podemos hacer otros cambios que afectan a los miembros que actualmente toman un medicamento. Por ejemplo, podríamos agregar un nuevo medicamento genérico para reemplazar un medicamento de marca que actualmente se encuentra en el Formulario;

o agregar nuevas restricciones al medicamento de marca o moverlo a un nivel de costo compartido diferente o a ambos. O podemos hacer cambios en función de las nuevas pautas clínicas. Si retiramos medicamentos de nuestro Formulario, [o] agregamos autorizaciones previas, restricciones de límite de cantidad o de tratamiento escalonado sobre un medicamento, debemos notificarles a los miembros afectados por el cambio al menos 30 días antes de que entre en vigencia dicho cambio, o cuando el miembro solicite un resurtido del medicamento, momento en el cual el miembro recibirá un suministro del medicamento para 30 días.

- o Si realizamos estos otros cambios, usted o la persona autorizada a dar recetas pueden solicitarnos que hagamos una excepción y sigamos cubriendo el medicamento de marca para usted. En el aviso que le proporcionamos también se incluirá información sobre cómo solicitar una excepción, y usted también puede encontrar información en la sección a continuación titulada “¿Cómo puedo solicitar que se haga una excepción al Formulario de Community Health Choice (HMO D-SNP)?”.

**Cambios que no lo afectarán si actualmente toma el medicamento.** En general, si usted toma un medicamento de nuestro Formulario para 2022 que estaba cubierto al comienzo del año, nosotros no discontiñaremos ni reduciremos la cobertura del medicamento durante el año de cobertura de 2022, excepto como se describe anteriormente. Esto significa que, por el resto del año de cobertura, estos medicamentos continuarán disponibles al mismo costo compartido y sin nuevas restricciones para aquellos miembros que estén tomándolos. No recibirá un aviso directo este año sobre cambios que no lo afectan. Sin embargo, dichos cambios lo afectarían a partir del 1 de enero del año siguiente, y es importante que verifique la Lista de medicamentos del nuevo año de beneficios por cualquier cambio en los medicamentos.

El Formulario adjunto entra en vigencia el 10/09/2021. Para recibir información actualizada sobre los medicamentos cubiertos por Community Health Choice comuníquese con nosotros. Nuestra información de contacto aparece en las páginas de la portada y la portada posterior.

## ¿Cómo utilizo el Formulario?

Hay dos formas para encontrar su medicamento dentro del Formulario:

### Afección médica

El Formulario comienza en la página 8. Los medicamentos de este Formulario están agrupados en categorías según el tipo de afección médica para cuyo tratamiento se los emplea. Por ejemplo, los medicamentos utilizados para tratar una afección cardíaca se enumeran dentro de la categoría Agentes cardiovasculares. Si sabe para qué se utiliza su medicamento, busque el nombre de la categoría en la lista que empieza en la página 8. Luego, busque su medicamento debajo del nombre de la categoría.

### Listado alfabético

Si no está seguro de qué categoría consultar, debe buscar su medicamento en el Índice que comienza en la página 8. El Índice proporciona una lista alfabética de todos los medicamentos incluidos en este documento. En el Índice, están tanto los medicamentos de marca como los genéricos. Busque en el Índice y encuentre su medicamento. Junto a su medicamento, verá el

número de página donde puede encontrar información acerca de la cobertura. Vaya a la página que figura en el Índice y encuentre el nombre de su medicamento en la primera columna de la lista.

## ¿Qué son los medicamentos genéricos?

Community Health Choice cubre tanto los medicamentos de marca como los genéricos. Un medicamento genérico está aprobado por la Administración de Drogas y Alimentos (FDA), dado que se considera que tiene el mismo ingrediente activo que el medicamento de marca. Normalmente, los medicamentos genéricos cuestan menos que los de marca.

## ¿Hay alguna restricción en mi cobertura?

Algunos medicamentos cubiertos pueden tener requisitos o límites adicionales de cobertura. Estos requisitos y límites pueden incluir:

- **Autorización previa:** Community Health Choice exige que usted [o su médico] obtenga una autorización previa para determinados medicamentos. Esto significa que necesitará contar con Community Health Choice antes de obtener sus medicamentos con receta. Si no obtiene autorización, es posible que Community Health Choice no cubra el medicamento.
- **Límites de cantidad:** Para ciertos medicamentos, Community Health Choice limita la cantidad del medicamento que cubrirá Community Health Choice. Por ejemplo, Community Health Choice proporciona 60 por receta para Celecoxib. Esto puede ser complementario a un suministro estándar para un mes o tres meses.
- **Tratamiento escalonado:** En algunos casos, Community Health Choice requiere que usted primero pruebe ciertos medicamentos para tratar su afección médica antes de que cubramos otro medicamento para esa enfermedad. Por ejemplo, si el medicamento A y el medicamento B tratan su afección médica, es posible que Community Health Choice no cubra el medicamento B, a menos que usted pruebe primero el medicamento A. Si el medicamento A no funciona para usted, Community Health Choice cubrirá el medicamento B.

Para averiguar si su medicamento tiene requisitos o límites adicionales, consulte el Formulario que empieza en la página 8. También puede obtener más información sobre las restricciones que se aplican a medicamentos cubiertos específicos en nuestro sitio web. Hemos publicado en línea documentos para explicar nuestra restricción de autorización previa y de tratamiento escalonado. También puede solicitarnos que le envíemos una copia. Nuestra información de contacto, junto con la fecha de la última actualización del Formulario, aparece en las páginas de la portada y la portada posterior.

Puede pedirle a Community Health Choice que haga una excepción a estas restricciones o límites, o puede solicitarle una lista de otros medicamentos similares que puedan tratar su afección médica. Consulte la sección “¿Cómo puedo solicitar que se haga una excepción al Formulario de Community Health Choice?” en la página 8 para obtener información acerca de cómo solicitar una excepción.

## ¿Qué son los medicamentos de venta libre?

Los medicamentos de venta libre (OTC) son medicamentos sin receta que, normalmente, no están cubiertos por un plan de medicamentos con receta de Medicare. Community Health Choice paga por ciertos medicamentos de venta libre. Para obtener una lista de los medicamentos de venta libre cubiertos, consulte la Guía de referencia rápida de beneficios de venta libre (OTC) de 2022. Community Health Choice proporcionará estos medicamentos de venta libre, sin costo alguno para usted.

El costo para Community Health Choice de estos medicamentos de venta libre no se tendrá en cuenta para los costos totales de medicamentos de la Parte D (es decir, el costo de los medicamentos de venta libre no se tiene en cuenta para el período sin cobertura).

## ¿Qué pasa si mi medicamento no está en el Formulario?

Si el medicamento que toma no está incluido en este Formulario (lista de medicamentos cubiertos), primero debe comunicarse con Servicios para los miembros y preguntar si su medicamento está cubierto.

Si resulta que Community Health Choice no cubre el medicamento que toma, tiene dos alternativas:

- Puede pedir a Servicios para los miembros una lista de medicamentos similares que estén cubiertos por Community Health Choice. Cuando reciba la lista, muéstresela a su médico y pídale que le recete un medicamento similar que esté cubierto por Community Health Choice.
- Puede solicitar que Community Health Choice haga una excepción y cubra su medicamento. Consulte a continuación para obtener información sobre cómo solicitar una excepción.

## ¿Cómo puedo solicitar que se haga una excepción al Formulario de Community Health Choice?

Puede solicitarle a Community Health Choice que haga una excepción a nuestras normas de cobertura. Hay varios tipos de excepciones que puede solicitarnos.

- Puede pedirnos que cubramos un medicamento, incluso si no está en nuestro Formulario. Si se aprueba, este medicamento estará cubierto a un nivel de costo compartido predeterminado, y usted no podrá pedirnos que le brindemos el medicamento a un nivel de costo compartido menor.
- Puede pedirnos que no apliquemos restricciones o límites de cobertura para su medicamento. Por ejemplo, para ciertos medicamentos, Community Health Choice limita la cantidad del medicamento que cubriremos. Si su medicamento tiene un límite de cantidad, puede pedirnos que hagamos una excepción al límite y cubramos una cantidad mayor.

Por lo general, Community Health Choice solo aprobará su solicitud de excepción si los medicamentos alternativos incluidos en el formulario del plan o las restricciones de uso adicionales no serían tan efectivos para tratar su afección y / o causarían efectos médicos adversos.

Debe comunicarse con nosotros para solicitarnos una decisión inicial de cobertura para una excepción al Formulario, o a la restricción de uso. **Cuando solicita una excepción al Formulario, o a la restricción de uso, debe presentar una declaración de su médico o de la persona autorizada a dar recetas que respalte su solicitud.** Por lo general, debemos tomar una decisión dentro de las 72 horas a partir de la fecha de haber recibido la declaración que respalda su solicitud por parte de la persona autorizada a dar recetas. Puede solicitar una excepción acelerada (rápida) si usted o su médico consideran que esperar 72 horas para la toma de la decisión podría perjudicar gravemente su salud. Si se le concede el trámite rápido de la excepción, debemos comunicarle nuestra decisión a más tardar dentro de las 24 horas después de haber recibido la declaración de respaldo de su médico o de otra persona autorizada a dar recetas.

## **¿Qué debo hacer antes de hablar con mi médico sobre el cambio de los medicamentos que tomo o la solicitud de una excepción?**

Como miembro nuevo o permanente de nuestro plan, es posible que esté tomando medicamentos que no están incluidos en el Formulario. También es posible que esté tomando un medicamento incluido en el Formulario, pero su capacidad de conseguirlo sea limitada. Por ejemplo, puede necesitar nuestra autorización previa antes de poder obtener su medicamento con receta. Debe consultar con su médico para decidir si debe cambiar su medicamento por uno apropiado que nosotros cubramos o solicitar una excepción al formulario para que le cubramos el medicamento que toma. Mientras evalúa con su médico el procedimiento adecuado para seguir en su caso, podemos cubrir su medicamento, en ciertos casos, durante los primeros 90 días en que usted sea miembro de nuestro plan.

Para cada uno de los medicamentos que no estén incluidos en el Formulario, o si su capacidad para conseguir los medicamentos es limitada, cubriremos un suministro temporal para 30 días. Si su receta está indicada para menos días, permitiremos que realice resurtidos por un máximo de hasta 30 días del medicamento. Después del primer suministro para 30 días, no seguiremos pagando estos medicamentos, incluso si ha sido miembro del plan durante menos de 90 días.

Si es residente de un centro de atención a largo plazo y necesita un medicamento que no está en el Formulario o si su capacidad para conseguir los medicamentos es limitada, pero ya pasaron los primeros 90 días de membresía en nuestro plan, cubriremos un suministro de emergencia del medicamento para 31 días mientras solicita la excepción al formulario.

Las excepciones están disponibles para los miembros que han experimentado un cambio en el nivel de atención que están recibiendo, lo que les obliga a pasar de un centro o centro de tratamiento a otro. Los siguientes son ejemplos de situaciones en las que los miembros serían elegibles para la excepción de surtido temporal por única vez cuando se encuentran fuera de sus primeros 90 días de inscripción en nuestro plan:

- i. Miembros que ingresan a un centro de atención a largo plazo (LTC) desde hospitales con una lista de alta de medicamentos del formulario del hospital, teniendo en cuenta la planificación a muy corto plazo (por ejemplo, menos de 8 horas).
- ii. Afiliados que son dados de alta de un hospital a un domicilio teniendo en cuenta una planificación a muy corto plazo.

- iii. Miembros que finalizan su estadía en la Parte A de Medicare en un centro de enfermería especializada (donde los pagos incluyen todos los cargos de farmacia) y que deben regresar al formulario de su plan de la Parte D.
- iv. Miembros que renuncian al estatus de hospicio para regresar a los beneficios estándar de las Partes A y B de Medicare.
- v. Los miembros que terminan una un centro de atención a largo plazo (LTC) se quedan y regresan a la comunidad.
- vi. Miembros que son dados de alta de hospitales psiquiátricos con regímenes de medicamentos altamente individualizados.

## Para obtener más información

Para obtener información más detallada sobre la cobertura para medicamentos con receta de Community Health Choice, consulte la Evidencia de cobertura y otra documentación del plan.

Si tiene alguna pregunta sobre Community Health Choice, comuníquese con nosotros. Nuestra información de contacto, junto con la fecha de la última actualización del Formulario, aparece en las páginas de la portada y la portada posterior.

Si tiene preguntas generales sobre su cobertura para medicamentos con receta de Medicare, llame a Medicare al 1-800-MEDICARE (1-800-633-4227), las 24 horas, los 7 días de la semana. Los usuarios de TTY deben llamar al 1-877-486-2048. O visite <http://www.medicare.gov>.

## Formulario de Community Health Choice

El Formulario comienza en la siguiente página proporciona información acerca de la cobertura de los medicamentos cubiertos por Community Health Choice. Si tiene alguna dificultad para encontrar el medicamento que toma en la lista, consulte el Índice que comienza en la página 101.

La primera columna de la tabla menciona el nombre del medicamento. Los medicamentos de marca están en letra mayúscula (por ejemplo, HUMIRA y los medicamentos genéricos están en letra minúscula y cursiva, por ejemplo, celecoxib).

La información incluida en la columna de Requisitos/límites indica si Community Health Choice tiene algún requisito especial para la cobertura del medicamento.

Las siguientes tablas describen las abreviaturas utilizadas en la Tabla de lista de medicamentos.

| ABBREVIATION | SIGNIFICADO DE LA ABREVIATURA  |
|--------------|--|
| FF           | Primer surtido limitado a un suministro de un mes: Es posible que pueda recibir un suministro de más de un mes de la mayoría de los medicamentos de su Formulario. Los medicamentos marcados con “FF” están limitados a un suministro de 1 mes para pedidos al por menor y por correo únicamente en su primer surtido. Después del primer llenado, estaría disponible un suministro de día extendido.                                  |
| LD           | Distribución limitada: el símbolo [LD] junto al nombre de un medicamento indica que la Administración de Alimentos y Medicamentos ha señalado que el medicamento está restringido a ciertas farmacias. Estos medicamentos solo pueden obtenerse en farmacias especializadas designadas que puedan manejar los medicamentos de manera adecuada.   |
| NDS          | Suministro de día no extendido: Es posible que pueda recibir un suministro de más de 1 mes de la mayoría de los medicamentos en su Formulario a través de pedido por correo a un costo compartido reducido. Los medicamentos indicados con “NDS” están limitados a un suministro de 1 mes tanto para pedidos minoristas como por correo.   |
| PA           | Autorización previa: Community Health Choice requiere que usted o su médico obtengan autorización previa para ciertos medicamentos. Esto significa que deberá obtener nuestra aprobación antes de surtir sus recetas. Si no obtiene la aprobación, es posible que no cubramos el medicamento.  |
| PA_BvD       | Restricción de autorización previa para la Parte B frente a la Parte D: este medicamento puede ser elegible para el pago de la Parte B o la Parte D de Medicare. Usted o su médico deben obtener nuestra autorización previa para determinar que este medicamento está cubierto por la Parte D de Medicare antes que usted. Surta su receta para este medicamento. Sin aprobación previa, es posible que no cubramos este medicamento. |
| PA_NSO       | Restricción de autorización previa solo para nuevos comienzos: si este medicamento es nuevo para usted, usted (o su médico) deben obtener una autorización previa de Community Health Choice antes de surtir su receta para este medicamento. Sin aprobación previa, es posible que no cubramos este medicamento.  |
| QL           | Límites de cantidad: para ciertos medicamentos, limitamos la cantidad de medicamento que se cubrirá. Esto podría incluir un límite: por llenado, diario, mensual o anual.  |
| ST           | Terapia escalonada: en algunos casos, le pedimos que primero pruebe ciertos medicamentos para tratar su afección médica antes de que cubramos otro medicamento para esa afección. Por ejemplo, si el Medicamento A y el Medicamento B tratan su afección médica, es posible que no cubramos el Medicamento B a menos que pruebe el Medicamento A primero. Si el medicamento A no le funciona, cubriremos el medicamento B.             |
| ST_NSO       | Terapia escalonada solo para nuevos comienzos: si este medicamento es nuevo para usted, debe probar primero ciertos medicamentos para tratar su afección médica antes de que cubramos otro medicamento para esa afección.  |

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites      |
|--|----------------------|-------------------------|
| <b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS</b>           |                      |                         |
| <b>AMPHETAMINES</b>  |                      |                         |
| <i>amphetamine-dextroamphetamine 10mg ER cap</i>               | 1                    |                         |
| <i>amphetamine-dextroamphetamine 10mg tab</i>                  | 1                    |                         |
| <i>amphetamine-dextroamphetamine 12.5mg tab</i>                | 1                    |                         |
| <i>amphetamine-dextroamphetamine 15mg ER cap</i>               | 1                    |                         |
| <i>amphetamine-dextroamphetamine 15mg tab</i>                  | 1                    |                         |
| <i>amphetamine-dextroamphetamine 20mg ER cap</i>               | 1                    |                         |
| <i>amphetamine-dextroamphetamine 20mg tab</i>                  | 1                    |                         |
| <i>amphetamine-dextroamphetamine 25mg ER cap</i>               | 1                    |                         |
| <i>amphetamine-dextroamphetamine 30mg ER cap</i>               | 1                    |                         |
| <i>amphetamine-dextroamphetamine 30mg tab</i>                  | 1                    |                         |
| <i>amphetamine-dextroamphetamine 5mg ER cap</i>                | 1                    |                         |
| <i>amphetamine-dextroamphetamine 5mg tab</i>                   | 1                    |                         |
| <i>amphetamine-dextroamphetamine 7.5mg tab</i>                 | 1                    |                         |
| <i>dextroamphetamine sulfate 10mg er cap</i>                   | 1                    |                         |
| <i>dextroamphetamine sulfate 10mg tab</i>                      | 1                    |                         |
| <i>dextroamphetamine sulfate 15mg er cap</i>                   | 1                    |                         |
| <i>dextroamphetamine sulfate 5mg er cap</i>                    | 1                    |                         |
| <i>dextroamphetamine sulfate 5mg tab</i>                       | 1                    |                         |
| <b>ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS</b>  |                      |                         |
| <i>atomoxetine 100mg cap</i>                                   | 1                    | QL=60 EA/30 Días        |
| <i>atomoxetine 10mg cap</i>                                    | 1                    | QL=60 EA/30 Días        |
| <i>atomoxetine 18mg cap</i>                                    | 1                    | QL=60 EA/30 Días        |
| <i>atomoxetine 25mg cap</i>                                    | 1                    | QL=60 EA/30 Días        |
| <i>atomoxetine 40mg cap</i>                                    | 1                    | QL=60 EA/30 Días        |
| <i>atomoxetine 60mg cap</i>                                    | 1                    | QL=60 EA/30 Días        |
| <i>atomoxetine 80mg cap</i>                                    | 1                    | QL=60 EA/30 Días        |
| <i>clonidine 0.1mg er tab</i>                                  | 1                    |                         |
| <i>guanfacine 1mg er tab</i>                                   | 1                    |                         |
| <i>guanfacine 2mg er tab</i>                                   | 1                    |                         |
| <i>guanfacine 3mg er tab</i>                                   | 1                    |                         |
| <i>guanfacine 4mg er tab</i>                                   | 1                    |                         |
| <b>DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)</b> |                      |                         |
| <i>SUNOSI 150MG TAB</i>  | 1                    | PA QL=30 EA/30 Días     |
| <i>SUNOSI 75MG TAB</i>   | 1                    | PA QL=30 EA/30 Días     |
| <b>HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS</b>       |                      |                         |
| <i>WAKIX 17.8MG TAB</i>  | 1                    | NDS PA QL=60 EA/30 Días |
| <i>WAKIX 4.45MG TAB</i>  | 1                    | NDS PA QL=60 EA/30 Días |
| <b>STIMULANTS - MISC.</b>                                      |                      |                         |
| <i>armodafinil 150mg tab</i>                                   | 1                    | PA QL=30 EA/30 Días     |
| <i>armodafinil 200mg tab</i>                                   | 1                    | PA QL=30 EA/30 Días     |
| <i>armodafinil 250mg tab</i>                                   | 1                    | PA QL=30 EA/30 Días     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Nombre del medicamento

Nivel de  
Medicamento

## Requisitos/Límites

|                                  |   |                          |
|----------------------------------|---|--------------------------|
| armodafinil 50mg tab             | 1 | PA QL=30 EA/30 Días      |
| dexamfetamine 10mg er cap        | 1 |                          |
| dexamfetamine 10mg tab           | 1 |                          |
| dexamfetamine 15mg er cap        | 1 |                          |
| dexamfetamine 2.5mg tab          | 1 |                          |
| dexamfetamine 20mg er cap        | 1 |                          |
| dexamfetamine 25mg er cap        | 1 |                          |
| dexamfetamine 30mg er cap        | 1 |                          |
| dexamfetamine 35mg er cap        | 1 |                          |
| dexamfetamine 40mg er cap        | 1 |                          |
| dexamfetamine 5mg er cap         | 1 |                          |
| dexamfetamine 5mg tab            | 1 |                          |
| methylphenidate 10mg cr cap      | 1 |                          |
| methylphenidate 10mg er tab      | 1 |                          |
| methylphenidate 10mg la cap      | 1 |                          |
| methylphenidate 10mg tab         | 1 |                          |
| methylphenidate 18mg er tab      | 1 |                          |
| METHYLPHENIDATE 18MG ER TAB      | 1 |                          |
| methylphenidate 1mg/ml oral soln | 1 |                          |
| methylphenidate 20mg cr cap      | 1 |                          |
| methylphenidate 20mg er tab      | 1 |                          |
| methylphenidate 20mg la cap      | 1 |                          |
| methylphenidate 20mg tab         | 1 |                          |
| methylphenidate 27mg er tab      | 1 |                          |
| methylphenidate 27mg sr tab      | 1 |                          |
| methylphenidate 2mg/ml oral soln | 1 |                          |
| methylphenidate 30mg cr cap      | 1 |                          |
| methylphenidate 30mg la cap      | 1 |                          |
| methylphenidate 36mg er tab      | 1 |                          |
| methylphenidate 36mg sr tab      | 1 |                          |
| methylphenidate 40mg cr cap      | 1 |                          |
| methylphenidate 40mg la cap      | 1 |                          |
| methylphenidate 50mg cr cap      | 1 |                          |
| methylphenidate 54mg er tab      | 1 |                          |
| methylphenidate 54mg sr tab      | 1 |                          |
| methylphenidate 5mg tab          | 1 |                          |
| methylphenidate 60mg cr cap      | 1 |                          |
| modafinil 100mg tab              | 1 | PA QL=60 EA/30 Días      |
| modafinil 200mg tab              | 1 | PA QL=60 EA/30 Días      |
| <b>AMINOGLYCOSIDES</b>           |   |                          |
| <b>AMINOGLYCOSIDES</b>           |   |                          |
| amikacin 250mg/ml inj            | 1 |                          |
| ARIKAYCE 590MG/8.4ML INH SUSP    | 1 | NDS PA QL=252 ML/30 Días |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites       |
|--|----------------------|--------------------------|
| GENTAMICIN 0.8MG/ML INJ  | 1                    |                          |
| <i>gentamicin 1.2mg/ml inj</i>   | 1                    |                          |
| GENTAMICIN 1.6MG/ML INJ  | 1                    |                          |
| GENTAMICIN 1MG/ML INJ  | 1                    |                          |
| <i>gentamicin 40mg/ml inj</i>  | 1                    |                          |
| <i>neomycin sulfate 500mg tab</i>  | 1                    |                          |
| <i>paromomycin 250mg cap</i>   | 1                    |                          |
| STREPTOMYCIN 1000MG INJ  | 1                    |                          |
| TOBRAMYCIN 10MG/ML INJ   | 1                    |                          |
| <i>tobramycin 40mg/ml inj</i>  | 1                    |                          |
| <i>tobramycin 60mg/ml inh soln</i>   | 1                    | NDS PA QL=300 ML/30 Días |
| <b>ANALGESICS - ANTI-INFLAMMATORY</b>  |                      |                          |
| <b>ANTIRHEUMATIC - ENZYME INHIBITORS</b>                                     |                      |                          |
| OLUMIANT 1MG TAB   | 1                    | NDS PA QL=30 EA/30 Días  |
| OLUMIANT 2MG TAB   | 1                    | NDS PA QL=30 EA/30 Días  |
| RINVOQ 15MG ER TAB   | 1                    | NDS PA QL=30 EA/30 Días  |
| XELJANZ 10MG TAB   | 1                    | NDS PA QL=60 EA/30 Días  |
| XELJANZ 11MG ER TAB  | 1                    | NDS PA QL=30 EA/30 Días  |
| XELJANZ 1MG/ML ORAL SOLN   | 1                    | NDS PA QL=300 ML/30 Días |
| XELJANZ 22MG ER TAB  | 1                    | NDS PA QL=30 EA/30 Días  |
| XELJANZ 5MG TAB  | 1                    | NDS PA QL=60 EA/30 Días  |
| <b>ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES</b>                                |                      |                          |
| HUMIRA 10MG/0.1ML SYRINGE  | 1                    | NDS PA QL=2 EA/28 Días   |
| HUMIRA 20MG/0.2ML SYRINGE  | 1                    | NDS PA QL=2 EA/28 Días   |
| HUMIRA 40MG/0.4ML AUTO-Injector  | 1                    | NDS PA QL=6 EA/28 Días   |
| HUMIRA 40MG/0.4ML SYRINGE  | 1                    | NDS PA QL=6 EA/28 Días   |
| HUMIRA 40MG/0.8ML AUTO-Injector  | 1                    | NDS PA QL=6 EA/28 Días   |
| HUMIRA 40MG/0.8ML SYRINGE  | 1                    | NDS PA QL=6 EA/28 Días   |
| HUMIRA 80MG/0.8ML AUTO-Injector  | 1                    | NDS PA QL=2 EA/28 Días   |
| HUMIRA PEDIATRIC CROHN'S STARTER PACK SYRINGE (2) 40MG/0.4ML, 80MG/0.8ML     | 1                    | NDS PA QL=2 EA/180 Días  |
| HUMIRA PEN - CROHN'S STARTER PACK 40MG/0.8ML INJ                             | 1                    | PA QL=6 EA/180 Días      |
| HUMIRA PEN - CROHN'S STARTER PACK 80MG/0.8ML INJ                             | 1                    | PA QL=3 EA/180 Días      |
| HUMIRA PEN - PEDIATRIC UC STARTER PACK 80MG/0.8ML INJ                        | 1                    | PA QL=4 EA/180 Días      |
| HUMIRA PEN - PSORIASIS STARTER PACK 40MG/0.8ML                               | 1                    | PA QL=4 EA/180 Días      |
| HUMIRA PEN 80MG/0.8ML AND 40MG/0.4ML - PSORIASIS/UVEITIS STARTER PACK        | 1                    | NDS PA QL=3 EA/180 Días  |
| HUMIRA PREFILLED SYRINGE 80MG/0.8ML STARTER PACK - PEDIATRIC CROHN'S DISEASE | 1                    | NDS PA QL=3 EA/180 Días  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                 | Nivel de Medicamento | Requisitos/Límites        |
|--|----------------------|---------------------------|
| SIMPONI 100MG/ML AUTO-INJECTOR                         | 1                    | NDS PA QL=1 ML/28 Días    |
| SIMPONI 100MG/ML SYRINGE                               | 1                    | NDS PA QL=1 ML/28 Días    |
| SIMPONI 50MG/0.5ML AUTO-INJECTOR                       | 1                    | NDS PA QL=.50 ML/28 Días  |
| SIMPONI 50MG/0.5ML SYRINGE                             | 1                    | NDS PA QL=.50 ML/28 Días  |
| <b>GOLD COMPOUNDS</b>                                  |                      |                           |
| RIDAURA 3MG CAP  | 1                    |                           |
| <b>INTERLEUKIN-1 BLOCKERS</b>                          |                      |                           |
| ARCALYST 220MG INJ                                     | 1                    | NDS PA                    |
| <b>INTERLEUKIN-6 RECEPTOR INHIBITORS</b>               |                      |                           |
| ACTEMRA 162MG/0.9ML AUTO-INJECTOR                      | 1                    | NDS PA QL=3.60 ML/28 Días |
| ACTEMRA 162MG/0.9ML SYRINGE                            | 1                    | NDS PA QL=3.60 ML/28 Días |
| KEVZARA 150MG/1.14ML AUTO-INJECTOR                     | 1                    | NDS PA QL=2.28 ML/28 Días |
| KEVZARA 150MG/1.14ML SYRINGE                           | 1                    | NDS PA QL=2.28 ML/28 Días |
| KEVZARA 200MG/1.14ML AUTO-INJECTOR                     | 1                    | NDS PA QL=2.28 ML/28 Días |
| KEVZARA 200MG/1.14ML SYRINGE                           | 1                    | NDS PA QL=2.28 ML/28 Días |
| <b>NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)</b>  |                      |                           |
| <i>celecoxib 100mg cap</i>                             | 1                    | QL=60 EA/30 Días          |
| <i>celecoxib 200mg cap</i>                             | 1                    | QL=60 EA/30 Días          |
| <i>celecoxib 400mg cap</i>                             | 1                    | QL=60 EA/30 Días          |
| <i>celecoxib 50mg cap</i>                              | 1                    | QL=60 EA/30 Días          |
| <i>diclofenac potassium 50mg tab</i>                   | 1                    |                           |
| <i>diclofenac sodium 100mg er tab</i>                  | 1                    |                           |
| <i>diclofenac sodium 25mg dr tab</i>                   | 1                    |                           |
| <i>diclofenac sodium 50mg dr tab</i>                   | 1                    |                           |
| <i>diclofenac sodium 50mg/misoprostol 0.2mg dr tab</i> | 1                    |                           |
| <i>diclofenac sodium 75mg dr tab</i>                   | 1                    |                           |
| <i>diclofenac sodium 75mg/misoprostol 0.2mg dr tab</i> | 1                    |                           |
| <i>etodolac 200mg cap</i>                              | 1                    |                           |
| <i>etodolac 300mg cap</i>                              | 1                    |                           |
| <i>etodolac 400mg er tab</i>                           | 1                    |                           |
| <i>etodolac 400mg tab</i>                              | 1                    |                           |
| <i>etodolac 500mg er tab</i>                           | 1                    |                           |
| <i>etodolac 500mg tab</i>                              | 1                    |                           |
| <i>etodolac 600mg er tab</i>                           | 1                    |                           |
| <i>flurbiprofen 100mg tab</i>                          | 1                    |                           |
| <i>ibu 600mg tab</i>                                   | 1                    |                           |
| <i>ibu 800mg tab</i>                                   | 1                    |                           |
| <i>ibuprofen 20mg/ml susp</i>                          | 1                    |                           |
| <i>ibuprofen 400mg tab</i>                             | 1                    |                           |
| <i>ibuprofen 600mg tab</i>                             | 1                    |                           |
| <i>ibuprofen 800mg tab</i>                             | 1                    |                           |
| <i>INDOCIN 50MG RECTAL SUPP</i>                        | 1                    |                           |
| <i>indomethacin 25mg cap</i>                           | 1                    |                           |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                               | Nivel de Medicamento | Requisitos/Límites        |
|--|----------------------|---------------------------|
| <i>indomethacin 50mg cap</i>                         | 1                    |                           |
| <i>indomethacin 75mg er cap</i>                      | 1                    |                           |
| <i>ketorolac tromethamine 10mg tab</i>               | 1                    | QL=20 EA/5 Días           |
| <i>meloxicam 15mg tab</i>                            | 1                    |                           |
| <i>meloxicam 7.5mg tab</i>                           | 1                    |                           |
| <i>nabumetone 500mg tab</i>                          | 1                    |                           |
| <i>nabumetone 750mg tab</i>                          | 1                    |                           |
| <i>naproxen 250mg tab</i>                            | 1                    |                           |
| <i>naproxen 375mg dr tab</i>                         | 1                    |                           |
| <i>naproxen 375mg tab</i>                            | 1                    |                           |
| <i>naproxen 500mg dr tab</i>                         | 1                    |                           |
| <i>naproxen 500mg tab</i>                            | 1                    |                           |
| <i>naproxen sodium 275mg tab</i>                     | 1                    |                           |
| <i>naproxen sodium 550mg tab</i>                     | 1                    |                           |
| <i>oxaprozin 600mg tab</i>                           | 1                    |                           |
| <i>piroxicam 10mg cap</i>                            | 1                    |                           |
| <i>piroxicam 20mg cap</i>                            | 1                    |                           |
| <i>sulindac 150mg tab</i>                            | 1                    |                           |
| <i>sulindac 200mg tab</i>                            | 1                    |                           |
| <b>PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</b>         |                      |                           |
| OTEZLA 28-DAY STARTER PACK                           | 1                    | NDS PA QL=55 EA/28 Días   |
| OTEZLA 30MG TAB                                      | 1                    | NDS PA QL=60 EA/30 Días   |
| <b>PYRIMIDINE SYNTHESIS INHIBITORS</b>               |                      |                           |
| <i>leflunomide 10mg tab</i>                          | 1                    |                           |
| <i>leflunomide 20mg tab</i>                          | 1                    |                           |
| <b>SELECTIVE COSTIMULATION MODULATORS</b>            |                      |                           |
| ORENCIA 125MG/ML AUTO-INJECTOR                       | 1                    | NDS PA QL=4 ML/28 Días    |
| ORENCIA 125MG/ML SYRINGE                             | 1                    | NDS PA QL=4 ML/28 Días    |
| ORENCIA 50MG/0.4ML SYRINGE                           | 1                    | NDS PA QL=1.60 ML/28 Días |
| ORENCIA 87.5MG/0.7ML SYRINGE                         | 1                    | NDS PA QL=2.80 ML/28 Días |
| <b>SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS</b> |                      |                           |
| ENBREL 25MG INJ                                      | 1                    | NDS PA QL=8 ML/28 Días    |
| ENBREL 25MG/0.5ML INJ                                | 1                    | NDS PA QL=8 ML/28 Días    |
| ENBREL 25MG/0.5ML SYRINGE                            | 1                    | NDS PA QL=8.16 ML/28 Días |
| ENBREL 50MG/ML AUTO-INJECTOR                         | 1                    | NDS PA QL=8 ML/28 Días    |
| ENBREL 50MG/ML CARTRIDGE                             | 1                    | NDS PA QL=8 ML/28 Días    |
| ENBREL 50MG/ML SYRINGE                               | 1                    | NDS PA QL=8 ML/28 Días    |
| <b>ANALGESICS - NONNARCOTIC</b>                      |                      |                           |
| <b>SALICYLATES</b>                                   |                      |                           |
| <i>diflunisal 500mg tab</i>                          | 1                    |                           |
| <b>ANALGESICS - OPIOID</b>                           |                      |                           |
| <b>OPIOID AGONISTS</b>                               |                      |                           |
| CODEINE SULFATE 15MG TAB                             | 1                    | QL=240 EA/30 Días         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Nombre del medicamento

## Nivel de Medicamento

## Requisitos/Límites

|                                    |   |                      |
|------------------------------------|---|----------------------|
| CODEINE SULFATE 30MG TAB           | 1 | QL=240 EA/30 Días    |
| CODEINE SULFATE 60MG TAB           | 1 | QL=180 EA/30 Días    |
| fentanyl 0.012mg/hr patch          | 1 | QL=10 EA/30 Días     |
| fentanyl 0.025mg/hr patch          | 1 | QL=10 EA/30 Días     |
| fentanyl 0.05mg/hr patch           | 1 | QL=10 EA/30 Días     |
| fentanyl 0.075mg/hr patch          | 1 | QL=10 EA/30 Días     |
| FENTANYL 0.1MG BUCCAL TAB          | 1 | PA QL=120 EA/30 Días |
| fentanyl 0.1mg/hr patch            | 1 | QL=10 EA/30 Días     |
| FENTANYL 0.2MG BUCCAL TAB          | 1 | PA QL=120 EA/30 Días |
| FENTANYL 0.4MG BUCCAL TAB          | 1 | PA QL=120 EA/30 Días |
| FENTANYL 0.6MG BUCCAL TAB          | 1 | PA QL=120 EA/30 Días |
| FENTANYL 0.8MG BUCCAL TAB          | 1 | PA QL=120 EA/30 Días |
| fentanyl 1200mcg lozenge           | 1 | PA QL=120 EA/30 Días |
| fentanyl 1600mcg lozenge           | 1 | PA QL=120 EA/30 Días |
| fentanyl 200mcg lozenge            | 1 | PA QL=120 EA/30 Días |
| fentanyl 400mcg lozenge            | 1 | PA QL=120 EA/30 Días |
| fentanyl 600mcg lozenge            | 1 | PA QL=120 EA/30 Días |
| fentanyl 800mcg lozenge            | 1 | PA QL=120 EA/30 Días |
| FENTORA 100MCG BUCCAL TAB          | 1 | PA QL=120 EA/30 Días |
| FENTORA 200MCG BUCCAL TAB          | 1 | PA QL=120 EA/30 Días |
| FENTORA 400MCG BUCCAL TAB          | 1 | PA QL=120 EA/30 Días |
| FENTORA 600MCG BUCCAL TAB          | 1 | PA QL=120 EA/30 Días |
| FENTORA 800MCG BUCCAL TAB          | 1 | PA QL=120 EA/30 Días |
| hydrocodone bitartrate 10mg er cap | 1 | QL=60 EA/30 Días     |
| hydrocodone bitartrate 15mg er cap | 1 | QL=60 EA/30 Días     |
| hydrocodone bitartrate 20mg er cap | 1 | QL=60 EA/30 Días     |
| hydrocodone bitartrate 30mg er cap | 1 | QL=60 EA/30 Días     |
| hydrocodone bitartrate 40mg er cap | 1 | QL=60 EA/30 Días     |
| hydrocodone bitartrate 50mg er cap | 1 | QL=60 EA/30 Días     |
| hydromorphone 1mg/ml oral soln     | 1 | QL=2400 ML/30 Días   |
| hydromorphone 2mg tab              | 1 | QL=450 EA/30 Días    |
| hydromorphone 4mg tab              | 1 | QL=240 EA/30 Días    |
| hydromorphone 8mg tab              | 1 | QL=120 EA/30 Días    |
| methadone 10mg tab                 | 1 | QL=360 EA/30 Días    |
| methadone 5mg tab                  | 1 | QL=360 EA/30 Días    |
| morphine sulfate 100mg er tab      | 1 | QL=120 EA/30 Días    |
| morphine sulfate 15mg er tab       | 1 | QL=120 EA/30 Días    |
| MORPHINE SULFATE 15MG TAB          | 1 | QL=180 EA/30 Días    |
| morphine sulfate 200mg er tab      | 1 | QL=120 EA/30 Días    |
| morphine sulfate 20mg/ml oral soln | 1 | QL=180 ML/30 Días    |
| morphine sulfate 2mg/ml oral soln  | 1 | QL=1800 ML/30 Días   |
| morphine sulfate 30mg er tab       | 1 | QL=120 EA/30 Días    |
| MORPHINE SULFATE 30MG TAB          | 1 | QL=180 EA/30 Días    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                               | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| morphine sulfate 4mg/ml oral soln                    | 1                    | QL=900 ML/30 Días  |
| morphine sulfate 60mg er tab                         | 1                    | QL=120 EA/30 Días  |
| NUCYNTA 100MG ER TAB                                 | 1                    | QL=60 EA/30 Días   |
| NUCYNTA 150MG ER TAB                                 | 1                    | QL=60 EA/30 Días   |
| NUCYNTA 200MG ER TAB                                 | 1                    | QL=60 EA/30 Días   |
| NUCYNTA 250MG ER TAB                                 | 1                    | QL=60 EA/30 Días   |
| NUCYNTA 50MG ER TAB                                  | 1                    | QL=60 EA/30 Días   |
| oxycodone 10mg tab                                   | 1                    | QL=180 EA/30 Días  |
| oxycodone 15mg tab                                   | 1                    | QL=180 EA/30 Días  |
| oxycodone 1mg/ml oral soln                           | 1                    | QL=5400 ML/30 Días |
| oxycodone 20mg tab                                   | 1                    | QL=180 EA/30 Días  |
| oxycodone 20mg/ml oral soln                          | 1                    | QL=270 ML/30 Días  |
| oxycodone 30mg tab                                   | 1                    | QL=180 EA/30 Días  |
| oxycodone 5mg cap                                    | 1                    | QL=360 EA/30 Días  |
| oxycodone 5mg tab                                    | 1                    | QL=360 EA/30 Días  |
| oxymorphone 10mg tab                                 | 1                    | QL=360 EA/30 Días  |
| oxymorphone 5mg tab                                  | 1                    | QL=360 EA/30 Días  |
| tramadol 100mg er tab                                | 1                    | QL=60 EA/30 Días   |
| tramadol 100mg er tab (matrix delivery)              | 1                    | QL=60 EA/30 Días   |
| tramadol 200mg er tab                                | 1                    | QL=60 EA/30 Días   |
| tramadol 200mg er tab (matrix delivery)              | 1                    | QL=60 EA/30 Días   |
| tramadol 300mg er tab                                | 1                    | QL=60 EA/30 Días   |
| tramadol 300mg er tab (matrix delivery)              | 1                    | QL=60 EA/30 Días   |
| tramadol 50mg tab                                    | 1                    | QL=240 EA/30 Días  |
| XTAMPZA 13.5MG ER CAP                                | 1                    | QL=120 EA/30 Días  |
| XTAMPZA 18MG ER CAP                                  | 1                    | QL=120 EA/30 Días  |
| XTAMPZA 27MG ER CAP                                  | 1                    | QL=120 EA/30 Días  |
| XTAMPZA 36MG ER CAP                                  | 1                    | QL=120 EA/30 Días  |
| XTAMPZA 9MG ER CAP                                   | 1                    | QL=120 EA/30 Días  |
| <b>OPIOID COMBINATIONS</b>                           |                      |                    |
| acetaminophen 300mg/codeine phosphate 15mg tab       | 1                    | QL=390 EA/30 Días  |
| acetaminophen 300mg/codeine phosphate 30mg tab       | 1                    | QL=390 EA/30 Días  |
| acetaminophen 300mg/codeine phosphate 60mg tab       | 1                    | QL=390 EA/30 Días  |
| acetaminophen 300mg/hydrocodone bitartrate 10mg tab  | 1                    | QL=390 EA/30 Días  |
| acetaminophen 300mg/hydrocodone bitartrate 5mg tab   | 1                    | QL=390 EA/30 Días  |
| acetaminophen 300mg/hydrocodone bitartrate 7.5mg tab | 1                    | QL=390 EA/30 Días  |
| acetaminophen 325mg/hydrocodone bitartrate 10mg tab  | 1                    | QL=360 EA/30 Días  |
| acetaminophen 325mg/hydrocodone bitartrate 5mg tab   | 1                    | QL=360 EA/30 Días  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites   |
|--|----------------------|----------------------|
| acetaminophen 325mg/hydrocodone bitartrate 7.5mg tab           | 1                    | QL=360 EA/30 Días    |
| acetaminophen 325mg/oxycodone 10mg tab                         | 1                    | QL=360 EA/30 Días    |
| acetaminophen 325mg/oxycodone 2.5mg tab                        | 1                    | QL=360 EA/30 Días    |
| acetaminophen 325mg/oxycodone 5mg tab                          | 1                    | QL=360 EA/30 Días    |
| acetaminophen 325mg/oxycodone 7.5mg tab                        | 1                    | QL=360 EA/30 Días    |
| acetaminophen 325mg/tramadol 37.5mg tab                        | 1                    | QL=360 EA/30 Días    |
| acetaminophen/codeine phosphate 24mg-2.4mg/ml oral soln        | 1                    | QL=4980 ML/30 Días   |
| acetaminophen/hydrocodone bitartrate 21.7mg-0.5mg/ml oral soln | 1                    | QL=5400 ML/30 Días   |
| endocet 325-10mg tab   | 1                    | QL=360 EA/30 Días    |
| endocet 325-5mg tab  | 1                    | QL=360 EA/30 Días    |
| endocet 325-7.5mg tab  | 1                    | QL=360 EA/30 Días    |
| hydrocodone bitartrate 10mg/ibuprofen 200mg tab                | 1                    | QL=480 EA/30 Días    |
| hydrocodone bitartrate 5mg/ibuprofen 200mg tab                 | 1                    | QL=480 EA/30 Días    |
| hydrocodone bitartrate 7.5mg/ibuprofen 200mg tab               | 1                    | QL=480 EA/30 Días    |
| <b>OPIOID PARTIAL AGONISTS</b>                                 |                      |                      |
| buprenorphine 12mg/naloxone 3mg sublingual film                | 1                    | QL=60 EA/30 Días     |
| buprenorphine 2mg sl tab                                       | 1                    | QL=90 EA/30 Días     |
| buprenorphine 2mg/naloxone 0.5mg sl tab                        | 1                    | QL=90 EA/30 Días     |
| buprenorphine 2mg/naloxone 0.5mg sublingual film               | 1                    | QL=90 EA/30 Días     |
| buprenorphine 4mg/naloxone 1mg sublingual film                 | 1                    | QL=90 EA/30 Días     |
| buprenorphine 8mg sl tab                                       | 1                    | QL=90 EA/30 Días     |
| buprenorphine 8mg/naloxone 2mg sl tab                          | 1                    | QL=90 EA/30 Días     |
| buprenorphine 8mg/naloxone 2mg sublingual film                 | 1                    | QL=90 EA/30 Días     |
| butorphanol tartrate 1mg/act nasal inhaler                     | 1                    | QL=10 ML/30 Días     |
| ZUBSOLV 1.4-0.36MG SL TAB                                      | 1                    | QL=90 EA/30 Días     |
| ZUBSOLV 11.4-2.9MG SL TAB                                      | 1                    | QL=60 EA/30 Días     |
| ZUBSOLV 2.9-0.71MG SL TAB                                      | 1                    | QL=90 EA/30 Días     |
| ZUBSOLV 5.7-1.4MG SL TAB                                       | 1                    | QL=90 EA/30 Días     |
| ZUBSOLV 8.6-2.1MG SL TAB                                       | 1                    | QL=60 EA/30 Días     |
| <b>ANDROGENS-ANABOLIC ANABOLIC STEROIDS</b>                    |                      |                      |
| oxandrolone 10mg tab   | 1                    | PA QL=60 EA/30 Días  |
| oxandrolone 2.5mg tab  | 1                    | PA QL=120 EA/30 Días |
| <b>ANDROGENS</b>   |                      |                      |
| ANDRODERM 2MG/24HR PATCH                                       | 1                    | PA QL=60 EA/30 Días  |
| ANDRODERM 4MG/24HR PATCH                                       | 1                    | PA QL=30 EA/30 Días  |
| danazol 100mg cap  | 1                    |                      |
| danazol 200mg cap  | 1                    |                      |
| danazol 50mg cap   | 1                    |                      |
| testosterone 1% (12.5mg/act) gel pump                          | 1                    | PA QL=300 GM/30 Días |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                    | Nivel de Medicamento | Requisitos/Límites   |
|---|----------------------|----------------------|
| <i>testosterone 1% (25mg) gel packet</i>                  | 1                    | PA QL=300 GM/30 Días |
| <i>testosterone 1% (50mg) gel packet</i>                  | 1                    | PA QL=300 GM/30 Días |
| <i>testosterone 1.62% (1.25gm) gel packet</i>             | 1                    | PA QL=75 GM/30 Días  |
| <i>testosterone 1.62% (2.5gm) gel packet</i>              | 1                    | PA QL=150 GM/30 Días |
| <i>testosterone 1.62% (20.25mg/act) gel pump</i>          | 1                    | PA QL=150 GM/30 Días |
| <i>testosterone 30mg/act topical soln</i>                 | 1                    | PA QL=180 ML/30 Días |
| <i>testosterone cypionate 100mg/ml inj</i>                | 1                    |                      |
| <i>testosterone cypionate 200mg/ml (1ml) inj</i>          | 1                    |                      |
| <i>testosterone cypionate 200mg/ml inj</i>                | 1                    |                      |
| TESTOSTERONE ENANTHATE 200MG/ML INJ                       | 1                    |                      |
| <b>ANORECTAL AND RELATED PRODUCTS</b>                     |                      |                      |
| <b>INTRARECTAL STEROIDS</b>                               |                      |                      |
| <i>hydrocortisone 1.67mg/ml enema</i>                     | 1                    |                      |
| UCERIS 2MG/ACT RECTAL FOAM                                | 1                    | PA                   |
| <b>RECTAL COMBINATIONS</b>                                |                      |                      |
| <i>hydrocortisone acetate/pramoxine 1-1% rectal cream</i> | 1                    |                      |
| <b>RECTAL STEROIDS</b>                                    |                      |                      |
| <i>hydrocortisone 2.5% cream</i>                          | 1                    |                      |
| <i>procto-med 2.5% cream</i>                              | 1                    |                      |
| <i>procto-pak 1% rectal cream</i>                         | 1                    |                      |
| <i>proctosol 2.5% cream</i>                               | 1                    |                      |
| <i>proctozone hc 2.5% cream</i>                           | 1                    |                      |
| <b>VASODILATING AGENTS</b>                                |                      |                      |
| RECTIV 0.4% RECTAL OINTMENT                               | 1                    | QL=30 GM/30 Días     |
| <b>ANTHELMINTICS</b>                                      |                      |                      |
| <b>ANTHELMINTICS</b>                                      |                      |                      |
| <i>albendazole 200mg tab</i>                              | 1                    |                      |
| BENZNIDAZOLE 100MG TAB                                    | 1                    | PA                   |
| BENZNIDAZOLE 12.5MG TAB                                   | 1                    | PA                   |
| <i>ivermectin 3mg tab</i>                                 | 1                    |                      |
| <b>ANTIANGINAL AGENTS</b>                                 |                      |                      |
| <b>ANTIANGINALS-OTHER</b>                                 |                      |                      |
| <i>ranolazine 1000mg er tab</i>                           | 1                    |                      |
| <i>ranolazine 500mg er tab</i>                            | 1                    |                      |
| <b>NITRATES</b>   |                      |                      |
| <i>isosorbide dinitrate 10mg tab</i>                      | 1                    |                      |
| <i>isosorbide dinitrate 20mg tab</i>                      | 1                    |                      |
| <i>isosorbide dinitrate 30mg tab</i>                      | 1                    |                      |
| <i>isosorbide dinitrate 5mg tab</i>                       | 1                    |                      |
| <i>isosorbide mononitrate 10mg tab</i>                    | 1                    |                      |
| <i>isosorbide mononitrate 120mg er tab</i>                | 1                    |                      |
| <i>isosorbide mononitrate 20mg tab</i>                    | 1                    |                      |
| <i>isosorbide mononitrate 30mg er tab</i>                 | 1                    |                      |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                    | Nivel de Medicamento | Requisitos/Límites |
|---|----------------------|--------------------|
| <i>isosorbide mononitrate 60mg er tab</i> | 1                    |                    |
| <i>minitran 0.1mg/hr patch</i>            | 1                    |                    |
| <i>minitran 0.2mg/hr patch</i>            | 1                    |                    |
| <i>minitran 0.4mg/hr patch</i>            | 1                    |                    |
| <i>minitran 0.6mg/hr patch</i>            | 1                    |                    |
| <b>NITRO-BID 2% OINTMENT</b>              | 1                    |                    |
| <b>NITRO-DUR 0.3MG/HR PATCH</b>           | 1                    |                    |
| <b>NITRO-DUR 0.8MG/HR PATCH</b>           | 1                    |                    |
| <i>nitroglycerin 0.1mg/hr patch</i>       | 1                    |                    |
| <i>nitroglycerin 0.2mg/hr patch</i>       | 1                    |                    |
| <i>nitroglycerin 0.3mg sl tab</i>         | 1                    |                    |
| <i>nitroglycerin 0.4mg sl tab</i>         | 1                    |                    |
| <i>nitroglycerin 0.4mg/act spray</i>      | 1                    |                    |
| <i>nitroglycerin 0.4mg/hr patch</i>       | 1                    |                    |
| <i>nitroglycerin 0.6mg sl tab</i>         | 1                    |                    |
| <i>nitroglycerin 0.6mg/hr patch</i>       | 1                    |                    |
| <b>ANTIANXIETY AGENTS</b>                 |                      |                    |
| <b>ANTIANXIETY AGENTS - MISC.</b>         |                      |                    |
| <i>buspirone 10mg tab</i>                 | 1                    |                    |
| <i>buspirone 15mg tab</i>                 | 1                    |                    |
| <i>buspirone 30mg tab</i>                 | 1                    |                    |
| <i>buspirone 5mg tab</i>                  | 1                    |                    |
| <i>buspirone 7.5mg tab</i>                | 1                    |                    |
| <i>hydroxyzine 10mg tab</i>               | 1                    |                    |
| <i>hydroxyzine 25mg tab</i>               | 1                    |                    |
| <i>hydroxyzine 2mg/ml oral soln</i>       | 1                    |                    |
| <i>hydroxyzine 50mg tab</i>               | 1                    |                    |
| <b>HYDROXYZINE PAMOATE 100MG CAP</b>      | 1                    |                    |
| <i>hydroxyzine pamoate 25mg cap</i>       | 1                    |                    |
| <i>hydroxyzine pamoate 50mg cap</i>       | 1                    |                    |
| <b>BENZODIAZEPINES</b>                    |                      |                    |
| <i>alprazolam 0.25mg tab</i>              | 1                    | QL=120 EA/30 Días  |
| <i>alprazolam 0.5mg er tab</i>            | 1                    | QL=30 EA/30 Días   |
| <i>alprazolam 0.5mg tab</i>               | 1                    | QL=120 EA/30 Días  |
| <i>alprazolam 1mg er tab</i>              | 1                    | QL=30 EA/30 Días   |
| <i>alprazolam 1mg tab</i>                 | 1                    | QL=120 EA/30 Días  |
| <i>alprazolam 2mg er tab</i>              | 1                    | QL=90 EA/30 Días   |
| <i>alprazolam 2mg tab</i>                 | 1                    | QL=150 EA/30 Días  |
| <i>alprazolam 3mg er tab</i>              | 1                    | QL=90 EA/30 Días   |
| <i>chlordiazepoxide 10mg cap</i>          | 1                    | QL=120 EA/30 Días  |
| <i>chlordiazepoxide 25mg cap</i>          | 1                    | QL=120 EA/30 Días  |
| <i>chlordiazepoxide 5mg cap</i>           | 1                    | QL=120 EA/30 Días  |
| <i>clorazepate dipotassium 15mg tab</i>   | 1                    | QL=180 EA/30 Días  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento             | Nivel de Medicamento | Requisitos/Límites |
|------------------------------------|----------------------|--------------------|
| clorazepate dipotassium 3.75mg tab | 1                    | QL=180 EA/30 Días  |
| clorazepate dipotassium 7.5mg tab  | 1                    | QL=180 EA/30 Días  |
| diazepam 10mg tab                  | 1                    | QL=120 EA/30 Días  |
| diazepam 1mg/ml oral soln          | 1                    | QL=1200 ML/30 Días |
| diazepam 2mg tab                   | 1                    | QL=120 EA/30 Días  |
| diazepam 5mg tab                   | 1                    | QL=120 EA/30 Días  |
| diazepam 5mg/ml oral soln          | 1                    | QL=240 ML/30 Días  |
| lorazepam 0.5mg tab                | 1                    | QL=150 EA/30 Días  |
| lorazepam 1mg tab                  | 1                    | QL=150 EA/30 Días  |
| lorazepam 2mg tab                  | 1                    | QL=150 EA/30 Días  |
| lorazepam 2mg/ml oral soln         | 1                    | QL=150 ML/30 Días  |
| <b>ANTIARRHYTHMICS</b>             |                      |                    |
| <b>ANTIARRHYTHMICS TYPE I-A</b>    |                      |                    |
| disopyramide 100mg cap             | 1                    |                    |
| disopyramide 150mg cap             | 1                    |                    |
| NORPACE 100MG ER CAP               | 1                    |                    |
| NORPACE 150MG ER CAP               | 1                    |                    |
| quinidine gluconate 324mg er tab   | 1                    |                    |
| QUINIDINE SULFATE 200MG TAB        | 1                    |                    |
| QUINIDINE SULFATE 300MG TAB        | 1                    |                    |
| <b>ANTIARRHYTHMICS TYPE I-B</b>    |                      |                    |
| mexiletine 150mg cap               | 1                    |                    |
| mexiletine 200mg cap               | 1                    |                    |
| mexiletine 250mg cap               | 1                    |                    |
| <b>ANTIARRHYTHMICS TYPE I-C</b>    |                      |                    |
| flecainide acetate 100mg tab       | 1                    |                    |
| flecainide acetate 150mg tab       | 1                    |                    |
| flecainide acetate 50mg tab        | 1                    |                    |
| propafenone 150mg tab              | 1                    |                    |
| propafenone 225mg er cap           | 1                    |                    |
| propafenone 225mg tab              | 1                    |                    |
| propafenone 300mg tab              | 1                    |                    |
| propafenone 325mg er cap           | 1                    |                    |
| propafenone 425mg er cap           | 1                    |                    |
| <b>ANTIARRHYTHMICS TYPE III</b>    |                      |                    |
| amiodarone 200mg tab               | 1                    |                    |
| amiodarone 400mg tab               | 1                    |                    |
| dofetilide 0.125mg cap             | 1                    |                    |
| dofetilide 0.25mg cap              | 1                    |                    |
| dofetilide 0.5mg cap               | 1                    |                    |
| MULTAQ 400MG TAB                   | 1                    |                    |
| pacerone 200mg tab                 | 1                    |                    |
| pacerone 400mg tab                 | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                 | Nivel de Medicamento | Requisitos/Límites       |
|--|----------------------|--------------------------|
| <b>ANTIASTHMATIC AND BRONCHODILATOR AGENTS</b>         |                      |                          |
| <b>ANTIASTHMATIC - MONOCLONAL ANTIBODIES</b>           |                      |                          |
| FASENRA 30MG/ML AUTO-INJECTOR                          | 1                    | PA                       |
| FASENRA 30MG/ML SYRINGE                                | 1                    | PA                       |
| NUCALA 100MG INJ                                       | 1                    | NDS PA                   |
| NUCALA 100MG/ML AUTO-INJECTOR                          | 1                    | NDS PA                   |
| NUCALA 100MG/ML SYRINGE                                | 1                    | NDS PA                   |
| XOLAIR 150MG INJ                                       | 1                    | NDS PA                   |
| XOLAIR 150MG/ML SYRINGE                                | 1                    | NDS PA                   |
| XOLAIR 75MG/0.5ML SYRINGE                              | 1                    | NDS PA                   |
| <b>BRONCHODILATORS - ANTICHOLINERGICS</b>              |                      |                          |
| ATROVENT 17MCG INHALER                                 | 1                    |                          |
| INCRUSE 62.5MCG/INH INHALER                            | 1                    |                          |
| <i>ipratropium bromide 0.2mg/ml inh soln</i>           | 1                    | PA BvD                   |
| LONHALA 25MCG/ML INH SOLN                              | 1                    | ST QL=60 ML/30 Días      |
| SPIRIVA RESPIMAT 1.25MCG/ACT INH                       | 1                    | ST QL=4 GM/30 Días       |
| <b>LEUKOTRIENE MODULATORS</b>                          |                      |                          |
| <i>montelukast 10mg tab</i>                            | 1                    |                          |
| <i>montelukast 4mg chew tab</i>                        | 1                    |                          |
| <i>montelukast 4mg granules</i>                        | 1                    |                          |
| <i>montelukast 5mg chew tab</i>                        | 1                    |                          |
| <i>zafirlukast 10mg tab</i>                            | 1                    |                          |
| <i>zafirlukast 20mg tab</i>                            | 1                    |                          |
| <b>SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS</b> |                      |                          |
| DALIRESP 250MCG TAB                                    | 1                    |                          |
| DALIRESP 500MCG TAB                                    | 1                    |                          |
| <b>STEROID INHALANTS</b>                               |                      |                          |
| ARNUITY 100MCG INHALER                                 | 1                    | QL=30 EA/30 Días         |
| ARNUITY 200MCG INHALER                                 | 1                    | QL=30 EA/30 Días         |
| ARNUITY 50MCG INHALER                                  | 1                    | QL=30 EA/30 Días         |
| ASMANEX 100MCG INHALER                                 | 1                    | QL=13 GM/30 Días         |
| ASMANEX 110MCG/INH INHALER                             | 1                    | QL=1 EA/30 Días          |
| ASMANEX 200MCG INHALER                                 | 1                    | QL=13 GM/30 Días         |
| ASMANEX 220MCG (120ACT) INHALER                        | 1                    | QL=1 EA/30 Días          |
| ASMANEX 220MCG (30ACT) INHALER                         | 1                    | QL=1 EA/30 Días          |
| ASMANEX 220MCG (60ACT) INHALER                         | 1                    | QL=1 EA/30 Días          |
| ASMANEX 50MCG INHALER                                  | 1                    | QL=13 GM/30 Días         |
| <i>budesonide 0.125mg/ml inh susp</i>                  | 1                    | PA BvD QL=120 ML/30 Días |
| <i>budesonide 0.25mg/ml inh susp</i>                   | 1                    | PA BvD QL=120 ML/30 Días |
| <i>budesonide 0.5mg/ml inh susp</i>                    | 1                    | PA BvD QL=120 ML/30 Días |
| FLOVENT 100MCG DISKUS                                  | 1                    | QL=60 EA/30 Días         |
| FLOVENT 110MCG HFA INHALER                             | 1                    | QL=24 GM/30 Días         |
| FLOVENT 220MCG HFA INHALER                             | 1                    | QL=24 GM/30 Días         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                              | Nivel de Medicamento | Requisitos/Límites  |
|---|----------------------|---------------------|
| FLOVENT 250MCG DISKUS                               | 1                    | QL=60 EA/30 Días    |
| FLOVENT 44MCG HFA INHALER                           | 1                    | QL=21.20 GM/30 Días |
| FLOVENT 50MCG DISKUS                                | 1                    | QL=60 EA/30 Días    |
| <b>SYMPATHOMIMETICS</b>                             |                      |                     |
| ADVAIR 100-50MCG DISKUS                             | 1                    | QL=60 EA/30 Días    |
| ADVAIR 115-21MCG HFA INHALER                        | 1                    | QL=12 GM/30 Días    |
| ADVAIR 230-21MCG HFA INHALER                        | 1                    | QL=12 GM/30 Días    |
| ADVAIR 250-50MCG DISKUS                             | 1                    | QL=60 EA/30 Días    |
| ADVAIR 45-21MCG/ACT HFA INHALER                     | 1                    | QL=12 GM/30 Días    |
| ADVAIR 500-50MCG DISKUS                             | 1                    | QL=60 EA/30 Días    |
| <i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i>    | 1                    | PA BvD              |
| <i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>       | 1                    |                     |
| <i>albuterol 0.83mg/ml (0.083%) inh soln</i>        | 1                    | PA BvD              |
| <i>albuterol 2mg tab</i>                            | 1                    |                     |
| <i>albuterol 4mg tab</i>                            | 1                    |                     |
| <i>albuterol 5mg/ml inh soln</i>                    | 1                    | PA BvD              |
| <i>albuterol neb soln 1.25mg/3ml</i>                | 1                    | PA BvD              |
| ANORO ELLIPTA 62.5-25MCG INHALER                    | 1                    | QL=60 EA/30 Días    |
| BREO ELLIPTA 100-25MCG INHALER                      | 1                    | QL=60 EA/30 Días    |
| BREO ELLIPTA 200-25MCG INHALER                      | 1                    | QL=60 EA/30 Días    |
| BREZTRI AEROSPHERE 160-9-4.8MCG/ACT INHALER         | 1                    | QL=10.70 GM/30 Días |
| COMBIVENT 20-100MCG/ACT INH                         | 1                    |                     |
| DULERA 100-5MCG INHALER                             | 1                    | QL=13 GM/30 Días    |
| DULERA 200-5MCG INHALER                             | 1                    | QL=13 GM/30 Días    |
| DULERA 50-5MCG INHALER                              | 1                    | QL=13 GM/30 Días    |
| <i>ipratropium/albuterol 0.5-2.5mg/3ml inh soln</i> | 1                    | PA BvD              |
| <i>levalbuterol 0.21mg/ml inh soln</i>              | 1                    | PA BvD              |
| LEVALBUTEROL 45MCG INHALER                          | 1                    | ST QL=30 GM/30 Días |
| <i>levalbuterol neb soln 0.31mg/3ml</i>             | 1                    | PA BvD              |
| <i>levalbuterol neb soln 1.25mg/0.5ml</i>           | 1                    | PA BvD              |
| <i>levalbuterol neb soln 1.25mg/3ml</i>             | 1                    | PA BvD              |
| SEREVENT 50MCG/DOSE INHALER                         | 1                    |                     |
| STIOLTO 2.5-2.5MCG/ACT INH                          | 1                    | QL=4 GM/30 Días     |
| SYMBICORT 160-4.5MCG INHALER                        | 1                    | QL=10.20 GM/30 Días |
| SYMBICORT 80-4.5MCG INHALER                         | 1                    | QL=10.20 GM/30 Días |
| <i>terbutaline sulfate 2.5mg tab</i>                | 1                    |                     |
| <i>terbutaline sulfate 5mg tab</i>                  | 1                    |                     |
| TRELEGY ELLIPTA 100-62.5-25MCG INHALER              | 1                    | QL=60 EA/30 Días    |
| TRELEGY ELLIPTA 200-62.5-25 MCG INHALER             | 1                    | QL=60 EA/30 Días    |
| VENTOLIN 108MCG HFA INHALER                         | 1                    | QL=36 GM/30 Días    |
| <b>XANTHINES</b>                                    |                      |                     |
| THEOPHYLLINE 300MG ER TAB                           | 1                    |                     |

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| Nombre del medicamento                        | Nivel de Medicamento | Requisitos/Límites |
|---|----------------------|--------------------|
| theophylline 400mg er tab                     | 1                    |                    |
| theophylline 5.33mg/ml oral soln              | 1                    |                    |
| theophylline 600mg er tab                     | 1                    |                    |
| <b>ANTICOAGULANTS</b>                         |                      |                    |
| <b>COUMARIN ANTICOAGULANTS</b>                |                      |                    |
| jantoven 10mg tab                             | 1                    |                    |
| jantoven 1mg tab                              | 1                    |                    |
| jantoven 2.5mg tab                            | 1                    |                    |
| jantoven 2mg tab                              | 1                    |                    |
| jantoven 3mg tab                              | 1                    |                    |
| jantoven 4mg tab                              | 1                    |                    |
| jantoven 5mg tab                              | 1                    |                    |
| jantoven 6mg tab                              | 1                    |                    |
| jantoven 7.5mg tab                            | 1                    |                    |
| warfarin sodium 10mg tab                      | 1                    |                    |
| warfarin sodium 1mg tab                       | 1                    |                    |
| warfarin sodium 2.5mg tab                     | 1                    |                    |
| warfarin sodium 2mg tab                       | 1                    |                    |
| warfarin sodium 3mg tab                       | 1                    |                    |
| warfarin sodium 4mg tab                       | 1                    |                    |
| warfarin sodium 5mg tab                       | 1                    |                    |
| warfarin sodium 6mg tab                       | 1                    |                    |
| warfarin sodium 7.5mg tab                     | 1                    |                    |
| <b>DIRECT FACTOR XA INHIBITORS</b>            |                      |                    |
| ELIQUIS 2.5MG TAB                             | 1                    |                    |
| ELIQUIS 30-DAY STARTER PACK 5MG               | 1                    |                    |
| ELIQUIS 5MG TAB                               | 1                    |                    |
| XARELTO 10MG TAB                              | 1                    |                    |
| XARELTO 15MG TAB                              | 1                    |                    |
| XARELTO 2.5MG TAB                             | 1                    |                    |
| XARELTO 20MG TAB                              | 1                    |                    |
| XARELTO KIT PACK                              | 1                    |                    |
| <b>HEPARINS AND HEPARINOID-LIKE AGENTS</b>    |                      |                    |
| enoxaparin sodium 100mg/ml (0.3ml) syringe    | 1                    | QL=18 ML/30 Días   |
| enoxaparin sodium 100mg/ml (0.4ml) syringe    | 1                    | QL=24 ML/30 Días   |
| enoxaparin sodium 100mg/ml (0.6ml) syringe    | 1                    | QL=36 ML/30 Días   |
| enoxaparin sodium 100mg/ml (0.8ml) syringe    | 1                    | QL=48 ML/30 Días   |
| enoxaparin sodium 100mg/ml (1ml) syringe      | 1                    | QL=60 ML/30 Días   |
| enoxaparin sodium 150mg/ml (0.8ml) syringe    | 1                    | QL=48 ML/30 Días   |
| enoxaparin sodium 150mg/ml (1ml) syringe      | 1                    | QL=60 ML/30 Días   |
| fondaparinux sodium 12.5mg/ml (0.4ml) syringe | 1                    |                    |
| fondaparinux sodium 12.5mg/ml (0.6ml) syringe | 1                    |                    |
| fondaparinux sodium 12.5mg/ml (0.8ml) syringe | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                         | Nivel de Medicamento | Requisitos/Límites      |
|--|----------------------|-------------------------|
| <i>fondaparinux sodium 5mg/ml syringe</i>      | 1                    |                         |
| FRAGMIN 10000UNIT/ML SYRINGE                   | 1                    |                         |
| FRAGMIN 12500UNIT/0.5ML SYRINGE                | 1                    |                         |
| FRAGMIN 15000UNIT/0.6ML SYRINGE                | 1                    |                         |
| FRAGMIN 18000UNT/0.72ML SYRINGE                | 1                    |                         |
| FRAGMIN 2500UNIT/0.2ML SYRINGE                 | 1                    |                         |
| FRAGMIN 5000UNIT/0.2ML SYRINGE                 | 1                    |                         |
| FRAGMIN 7500UNIT/0.3ML SYRINGE                 | 1                    |                         |
| FRAGMIN 95000UNIT/3.8ML INJ                    | 1                    |                         |
| <i>heparin sodium porcine 10000unit/ml inj</i> | 1                    |                         |
| <i>heparin sodium porcine 1000unit/ml inj</i>  | 1                    |                         |
| <i>heparin sodium porcine 20000unit/ml inj</i> | 1                    |                         |
| <i>heparin sodium porcine 5000unit/ml inj</i>  | 1                    |                         |
| <b>ANTICONVULSANTS</b>                         |                      |                         |
| <b>AMPA GLUTAMATE RECEPTOR ANTAGONISTS</b>     |                      |                         |
| FYCOMPA 0.5MG/ML SUSP                          | 1                    | PA NSO                  |
| FYCOMPA 10MG TAB                               | 1                    | PA NSO                  |
| FYCOMPA 12MG TAB                               | 1                    | PA NSO                  |
| FYCOMPA 2MG TAB                                | 1                    | PA NSO                  |
| FYCOMPA 4MG TAB                                | 1                    | PA NSO                  |
| FYCOMPA 6MG TAB                                | 1                    | PA NSO                  |
| FYCOMPA 8MG TAB                                | 1                    | PA NSO                  |
| <b>ANTICONVULSANTS - BENZODIAZEPINES</b>       |                      |                         |
| <i>clobazam 10mg tab</i>                       | 1                    | QL=60 EA/30 Días        |
| <i>clobazam 2.5mg/ml susp</i>                  | 1                    | QL=480 ML/30 Días       |
| <i>clobazam 20mg tab</i>                       | 1                    | QL=60 EA/30 Días        |
| <i>clonazepam 0.125mg odt</i>                  | 1                    | QL=90 EA/30 Días        |
| <i>clonazepam 0.25mg odt</i>                   | 1                    | QL=90 EA/30 Días        |
| <i>clonazepam 0.5mg odt</i>                    | 1                    | QL=90 EA/30 Días        |
| <i>clonazepam 0.5mg tab</i>                    | 1                    | QL=90 EA/30 Días        |
| <i>clonazepam 1mg odt</i>                      | 1                    | QL=90 EA/30 Días        |
| <i>clonazepam 1mg tab</i>                      | 1                    | QL=90 EA/30 Días        |
| <i>clonazepam 2mg odt</i>                      | 1                    | QL=300 EA/30 Días       |
| <i>clonazepam 2mg tab</i>                      | 1                    | QL=300 EA/30 Días       |
| DIASTAT 10MG RECTAL GEL                        | 1                    | QL=10 EA/30 Días        |
| DIASTAT 2.5MG RECTAL GEL                       | 1                    | QL=10 EA/30 Días        |
| DIASTAT 20MG RECTAL GEL                        | 1                    | QL=10 EA/30 Días        |
| DIAZEPAM 10MG/2ML RECTAL GEL                   | 1                    | QL=10 EA/30 Días        |
| DIAZEPAM 2.5MG/0.5ML RECTAL GEL                | 1                    | QL=10 EA/30 Días        |
| DIAZEPAM 20MG/4ML RECTAL GEL                   | 1                    | QL=10 EA/30 Días        |
| NAYZILAM 5MG/0.1ML NASAL SPRAY                 | 1                    | QL=10 EA/30 Días        |
| SYMPAZAN 10MG ORAL FILM                        | 1                    | ST_NSQ QL=60 EA/30 Días |
| SYMPAZAN 20MG ORAL FILM                        | 1                    | ST_NSQ QL=60 EA/30 Días |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Nombre del medicamento

Nivel de  
Medicamento

## Requisitos/Límites

|  |   |                              |
|--|---|------------------------------|
| SYMPAZAN 5MG ORAL FILM                 | 1 | ST NSO QL=60 EA/30 Días      |
| VALTOCO 10MG DOSE KIT 10MG/0.1ML PACK  | 1 | QL=10 EA/30 Días             |
| VALTOCO 15MG DOSE KIT 7.5MG/0.1ML PACK | 1 | QL=10 EA/30 Días             |
| VALTOCO 20MG DOSE KIT 10MG/0.1ML PACK  | 1 | QL=10 EA/30 Días             |
| VALTOCO 5MG DOSE KIT 5MG/0.1ML PACK    | 1 | QL=10 EA/30 Días             |
| <b>ANTICONVULSANTS - MISC.</b>         |   |                              |
| APTIOM 200MG TAB                       | 1 | PA NSO                       |
| APTIOM 400MG TAB                       | 1 | PA NSO                       |
| APTIOM 600MG TAB                       | 1 | PA NSO                       |
| APTIOM 800MG TAB                       | 1 | PA NSO                       |
| BRIVIACT 100MG TAB                     | 1 | PA NSO QL=60 EA/30 Días      |
| BRIVIACT 10MG TAB                      | 1 | PA NSO QL=60 EA/30 Días      |
| BRIVIACT 10MG/ML ORAL SOLN             | 1 | PA NSO                       |
| BRIVIACT 25MG TAB                      | 1 | PA NSO QL=60 EA/30 Días      |
| BRIVIACT 50MG TAB                      | 1 | PA NSO QL=60 EA/30 Días      |
| BRIVIACT 75MG TAB                      | 1 | PA NSO QL=60 EA/30 Días      |
| <i>carbamazepine 100mg chew tab</i>    | 1 |                              |
| <i>carbamazepine 100mg er cap</i>      | 1 |                              |
| <i>carbamazepine 100mg er tab</i>      | 1 |                              |
| <i>carbamazepine 200mg er cap</i>      | 1 |                              |
| <i>carbamazepine 200mg er tab</i>      | 1 |                              |
| <i>carbamazepine 200mg tab</i>         | 1 |                              |
| <i>carbamazepine 20mg/ml susp</i>      | 1 |                              |
| <i>carbamazepine 300mg er cap</i>      | 1 |                              |
| <i>carbamazepine 400mg er tab</i>      | 1 |                              |
| DIACOMIT 250MG CAP                     | 1 | NDS PA NSO                   |
| DIACOMIT 250MG POWDER FOR ORAL SUSP    | 1 | NDS PA NSO                   |
| DIACOMIT 500MG CAP                     | 1 | NDS PA NSO                   |
| DIACOMIT 500MG POWDER FOR ORAL SUSP    | 1 | NDS PA NSO                   |
| EPIDIOLEX 100MG/ML ORAL SOLN           | 1 | PA NSO                       |
| <i>epitol 200mg tab</i>                | 1 |                              |
| FINTEPLA 2.2MG/ML ORAL SOLN            | 1 | NDS PA NSO QL=360 ML/30 Días |
| <i>gabapentin 100mg cap</i>            | 1 |                              |
| <i>gabapentin 300mg cap</i>            | 1 |                              |
| <i>gabapentin 400mg cap</i>            | 1 |                              |
| <i>gabapentin 50mg/ml oral soln</i>    | 1 |                              |
| <i>gabapentin 600mg tab</i>            | 1 |                              |
| <i>gabapentin 800mg tab</i>            | 1 |                              |
| <i>lamotrigine 100mg er tab</i>        | 1 |                              |
| <i>lamotrigine 100mg odt</i>           | 1 |                              |
| <i>lamotrigine 100mg tab</i>           | 1 |                              |
| <i>lamotrigine 150mg tab</i>           | 1 |                              |
| <i>lamotrigine 200mg er tab</i>        | 1 |                              |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento           | Nivel de Medicamento | Requisitos/Límites |
|----------------------------------|----------------------|--------------------|
| lamotrigine 200mg odt            | 1                    |                    |
| lamotrigine 200mg tab            | 1                    |                    |
| lamotrigine 250mg er tab         | 1                    |                    |
| lamotrigine 25mg chew tab        | 1                    |                    |
| lamotrigine 25mg er tab          | 1                    |                    |
| lamotrigine 25mg odt             | 1                    |                    |
| lamotrigine 25mg tab             | 1                    |                    |
| lamotrigine 300mg er tab         | 1                    |                    |
| lamotrigine 50mg er tab          | 1                    |                    |
| lamotrigine 50mg odt             | 1                    |                    |
| lamotrigine 5mg chew tab         | 1                    |                    |
| levetiracetam 1000mg tab         | 1                    |                    |
| levetiracetam 100mg/ml oral soln | 1                    |                    |
| levetiracetam 250mg tab          | 1                    |                    |
| levetiracetam 500mg er tab       | 1                    |                    |
| levetiracetam 500mg tab          | 1                    |                    |
| levetiracetam 750mg er tab       | 1                    |                    |
| levetiracetam 750mg tab          | 1                    |                    |
| oxcarbazepine 150mg tab          | 1                    |                    |
| oxcarbazepine 300mg tab          | 1                    |                    |
| oxcarbazepine 600mg tab          | 1                    |                    |
| oxcarbazepine 60mg/ml susp       | 1                    |                    |
| pregabalin 100mg cap             | 1                    |                    |
| pregabalin 150mg cap             | 1                    |                    |
| pregabalin 200mg cap             | 1                    |                    |
| pregabalin 20mg/ml oral soln     | 1                    |                    |
| pregabalin 225mg cap             | 1                    |                    |
| pregabalin 25mg cap              | 1                    |                    |
| pregabalin 300mg cap             | 1                    |                    |
| pregabalin 50mg cap              | 1                    |                    |
| pregabalin 75mg cap              | 1                    |                    |
| primidone 250mg tab              | 1                    |                    |
| primidone 50mg tab               | 1                    |                    |
| roweepra 500mg tab               | 1                    |                    |
| rufinamide 200mg tab             | 1                    | PA NSO             |
| rufinamide 400mg tab             | 1                    | PA NSO             |
| rufinamide 40mg/ml susp          | 1                    | PA NSO             |
| SPRITAM 1000MG TAB FOR ORAL SUSP | 1                    | PA NSO             |
| SPRITAM 250MG TAB FOR ORAL SUSP  | 1                    | PA NSO             |
| SPRITAM 500MG TAB FOR ORAL SUSP  | 1                    | PA NSO             |
| SPRITAM 750MG TAB FOR ORAL SUSP  | 1                    | PA NSO             |
| topiramate 100mg tab             | 1                    |                    |
| topiramate 15mg cap              | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                | Nivel de Medicamento | Requisitos/Límites |
|---------------------------------------|----------------------|--------------------|
| topiramate 200mg tab                  | 1                    |                    |
| topiramate 25mg cap                   | 1                    |                    |
| topiramate 25mg tab                   | 1                    |                    |
| topiramate 50mg tab                   | 1                    |                    |
| VIMPAT 100MG TAB                      | 1                    | QL=60 EA/30 Días   |
| VIMPAT 10MG/ML ORAL SOLN              | 1                    |                    |
| VIMPAT 150MG TAB                      | 1                    | QL=60 EA/30 Días   |
| VIMPAT 200MG TAB                      | 1                    | QL=60 EA/30 Días   |
| VIMPAT 50MG TAB                       | 1                    | QL=60 EA/30 Días   |
| zonisamide 100mg cap                  | 1                    |                    |
| zonisamide 25mg cap                   | 1                    |                    |
| zonisamide 50mg cap                   | 1                    |                    |
| <b>CARBAMATES</b>                     |                      |                    |
| felbamate 120mg/ml susp               | 1                    |                    |
| felbamate 400mg tab                   | 1                    |                    |
| felbamate 600mg tab                   | 1                    |                    |
| XCOPRI 100MG TAB                      | 1                    |                    |
| XCOPRI 12.5/25MG TITRATION PACK       | 1                    |                    |
| XCOPRI 150/200MG PACK TAB             | 1                    |                    |
| XCOPRI 150/200MG TITRATION PACK       | 1                    |                    |
| XCOPRI 150MG TAB                      | 1                    |                    |
| XCOPRI 200MG TAB                      | 1                    |                    |
| XCOPRI 50/100MG TITRATION PACK        | 1                    |                    |
| XCOPRI 50/200MG PACK TAB              | 1                    |                    |
| XCOPRI 50MG TAB                       | 1                    |                    |
| XCOPRI TAB 100/150MG MAINTENANCE PACK | 1                    |                    |
| <b>GABA MODULATORS</b>                |                      |                    |
| tiagabine 12mg tab                    | 1                    |                    |
| tiagabine 16mg tab                    | 1                    |                    |
| tiagabine 2mg tab                     | 1                    |                    |
| tiagabine 4mg tab                     | 1                    |                    |
| vigabatrin 500mg powder for oral soln | 1                    | NDS PA NSO         |
| vigabatrin 500mg tab                  | 1                    | NDS PA NSO         |
| vigadrona 500mg powder for oral soln  | 1                    | NDS PA NSO         |
| <b>HYDANTOINS</b>                     |                      |                    |
| DILANTIN 30MG ER CAP                  | 1                    |                    |
| phenytoin 25mg/ml susp                | 1                    |                    |
| phenytoin 50mg chew tab               | 1                    |                    |
| phenytoin sodium 100mg er cap         | 1                    |                    |
| phenytoin sodium 200mg er cap         | 1                    |                    |
| phenytoin sodium 300mg er cap         | 1                    |                    |
| <b>SUCCINIMIDES</b>                   |                      |                    |
| CELONTIN 300MG CAP                    | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                 | Nivel de Medicamento | Requisitos/Límites      |
|--|----------------------|-------------------------|
| <i>ethosuximide 250mg cap</i>                          | 1                    |                         |
| <i>ethosuximide 50mg/ml oral soln</i>                  | 1                    |                         |
| <b>VALPROIC ACID</b>                                   |                      |                         |
| <i>divalproex sodium 125mg dr cap</i>                  | 1                    |                         |
| <i>divalproex sodium 125mg dr tab</i>                  | 1                    |                         |
| <i>divalproex sodium 250mg dr tab</i>                  | 1                    |                         |
| <i>divalproex sodium 250mg er tab</i>                  | 1                    |                         |
| <i>divalproex sodium 500mg dr tab</i>                  | 1                    |                         |
| <i>divalproex sodium 500mg er tab</i>                  | 1                    |                         |
| <i>valproic acid 250mg cap</i>                         | 1                    |                         |
| <i>valproic acid 50mg/ml oral soln</i>                 | 1                    |                         |
| <b>ANTIDEPRESSANTS</b>                                 |                      |                         |
| <b>ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)</b>     |                      |                         |
| <i>mirtazapine 15mg odt</i>                            | 1                    |                         |
| <i>mirtazapine 15mg tab</i>                            | 1                    |                         |
| <i>mirtazapine 30mg odt</i>                            | 1                    |                         |
| <i>mirtazapine 30mg tab</i>                            | 1                    |                         |
| <i>mirtazapine 45mg odt</i>                            | 1                    |                         |
| <i>mirtazapine 45mg tab</i>                            | 1                    |                         |
| <i>mirtazapine 7.5mg tab</i>                           | 1                    |                         |
| <b>ANTIDEPRESSANTS - MISC.</b>                         |                      |                         |
| <i>bupropion 100mg er tab</i>                          | 1                    |                         |
| <i>bupropion 100mg tab</i>                             | 1                    |                         |
| <i>bupropion 150mg sr (12 hr) tab</i>                  | 1                    |                         |
| <i>bupropion 150mg xl (24 hr) tab</i>                  | 1                    |                         |
| <i>bupropion 200mg er tab</i>                          | 1                    |                         |
| <i>bupropion 300mg er tab</i>                          | 1                    |                         |
| <i>bupropion 75mg tab</i>                              | 1                    |                         |
| <b>MONOAMINE OXIDASE INHIBITORS (MAOIS)</b>            |                      |                         |
| <i>EMSAM 12MG/24HR PATCH</i>                           | 1                    | ST_NSO QL=30 EA/30 Días |
| <i>EMSAM 6MG/24HR PATCH</i>                            | 1                    | ST_NSO QL=30 EA/30 Días |
| <i>EMSAM 9MG/24HR PATCH</i>                            | 1                    | ST_NSO QL=30 EA/30 Días |
| <i>MARPLAN 10MG TAB</i>                                | 1                    |                         |
| <i>phenelzine 15mg tab</i>                             | 1                    |                         |
| <i>tranylcypromine 10mg tab</i>                        | 1                    |                         |
| <b>SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)</b> |                      |                         |
| <i>citalopram 10mg tab</i>                             | 1                    |                         |
| <i>citalopram 20mg tab</i>                             | 1                    |                         |
| <i>citalopram 2mg/ml oral soln</i>                     | 1                    |                         |
| <i>citalopram 40mg tab</i>                             | 1                    |                         |
| <i>escitalopram 10mg tab</i>                           | 1                    |                         |
| <i>escitalopram 1mg/ml oral soln</i>                   | 1                    |                         |
| <i>escitalopram 20mg tab</i>                           | 1                    |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                      | Nivel de Medicamento | Requisitos/Límites      |
|---|----------------------|-------------------------|
| <i>escitalopram 5mg tab</i>                                 | 1                    |                         |
| <i>fluoxetine 10mg cap</i>                                  | 1                    |                         |
| <i>fluoxetine 20mg cap</i>                                  | 1                    |                         |
| <i>fluoxetine 40mg cap</i>                                  | 1                    |                         |
| <i>fluoxetine 4mg/ml oral soln</i>                          | 1                    |                         |
| <i>fluvoxamine maleate 100mg tab</i>                        | 1                    |                         |
| <i>fluvoxamine maleate 25mg tab</i>                         | 1                    |                         |
| <i>fluvoxamine maleate 50mg tab</i>                         | 1                    |                         |
| <i>paroxetine 10mg tab</i>                                  | 1                    |                         |
| <i>paroxetine 12.5mg er tab</i>                             | 1                    |                         |
| <i>paroxetine 20mg tab</i>                                  | 1                    |                         |
| <i>paroxetine 25mg er tab</i>                               | 1                    |                         |
| <i>paroxetine 30mg tab</i>                                  | 1                    |                         |
| <i>paroxetine 37.5mg er tab</i>                             | 1                    |                         |
| <i>paroxetine 40mg tab</i>                                  | 1                    |                         |
| PAXIL 10MG/5ML SUSP   | 1                    |                         |
| <i>sertraline 100mg tab</i>                                 | 1                    |                         |
| <i>sertraline 20mg/ml oral soln</i>                         | 1                    |                         |
| <i>sertraline 25mg tab</i>                                  | 1                    |                         |
| <i>sertraline 50mg tab</i>                                  | 1                    |                         |
| <b>SEROTONIN MODULATORS</b>                                 |                      |                         |
| NEFAZODONE 100MG TAB  | 1                    |                         |
| NEFAZODONE 150MG TAB  | 1                    |                         |
| NEFAZODONE 200MG TAB  | 1                    |                         |
| NEFAZODONE 250MG TAB  | 1                    |                         |
| NEFAZODONE 50MG TAB   | 1                    |                         |
| <i>trazodone 100mg tab</i>                                  | 1                    |                         |
| <i>trazodone 150mg tab</i>                                  | 1                    |                         |
| <i>trazodone 50mg tab</i>                                   | 1                    |                         |
| TRINTELLIX 10MG TAB   | 1                    | ST_NSO QL=30 EA/30 Días |
| TRINTELLIX 20MG TAB   | 1                    | ST_NSO QL=30 EA/30 Días |
| TRINTELLIX 5MG TAB  | 1                    | ST_NSO QL=30 EA/30 Días |
| VIIBRYD 10/20MG STARTER PACK                                | 1                    | ST_NSO QL=30 EA/30 Días |
| VIIBRYD 10MG TAB  | 1                    | ST_NSO QL=30 EA/30 Días |
| VIIBRYD 20MG TAB  | 1                    | ST_NSO QL=30 EA/30 Días |
| VIIBRYD 40MG TAB  | 1                    | ST_NSO QL=30 EA/30 Días |
| <b>SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)</b> |                      |                         |
| <i>desvenlafaxine succinate 100mg er tab</i>                | 1                    |                         |
| <i>desvenlafaxine succinate 25mg er tab</i>                 | 1                    |                         |
| <i>desvenlafaxine succinate 50mg er tab</i>                 | 1                    |                         |
| DRIZALMA 20MG DR CAP  | 1                    | ST_NSO QL=60 EA/30 Días |
| DRIZALMA 30MG DR CAP  | 1                    | ST_NSO QL=60 EA/30 Días |
| DRIZALMA 40MG DR CAP  | 1                    | ST_NSO QL=60 EA/30 Días |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento           | Nivel de Medicamento | Requisitos/Límites      |
|----------------------------------|----------------------|-------------------------|
| DRIZALMA 60MG DR CAP             | 1                    | ST_NSO QL=60 EA/30 Días |
| <i>duloxetine 20mg dr cap</i>    | 1                    |                         |
| <i>duloxetine 30mg dr cap</i>    | 1                    |                         |
| <i>duloxetine 60mg dr cap</i>    | 1                    |                         |
| FETZIMA 120MG ER CAP             | 1                    | ST_NSO QL=30 EA/30 Días |
| FETZIMA 20MG ER CAP              | 1                    | ST_NSO QL=30 EA/30 Días |
| FETZIMA 40MG ER CAP              | 1                    | ST_NSO QL=30 EA/30 Días |
| FETZIMA 80MG ER CAP              | 1                    | ST_NSO QL=30 EA/30 Días |
| FETZIMA PACK                     | 1                    | ST_NSO QL=30 EA/30 Días |
| <i>venlafaxine 100mg tab</i>     | 1                    |                         |
| <i>venlafaxine 150mg er cap</i>  | 1                    |                         |
| <i>venlafaxine 25mg tab</i>      | 1                    |                         |
| <i>venlafaxine 37.5mg er cap</i> | 1                    |                         |
| <i>venlafaxine 37.5mg tab</i>    | 1                    |                         |
| <i>venlafaxine 50mg tab</i>      | 1                    |                         |
| <i>venlafaxine 75mg er cap</i>   | 1                    |                         |
| <i>venlafaxine 75mg tab</i>      | 1                    |                         |
| <b>TRICYCLIC AGENTS</b>          |                      |                         |
| <i>amitriptyline 100mg tab</i>   | 1                    |                         |
| <i>amitriptyline 10mg tab</i>    | 1                    |                         |
| <i>amitriptyline 150mg tab</i>   | 1                    |                         |
| <i>amitriptyline 25mg tab</i>    | 1                    |                         |
| <i>amitriptyline 50mg tab</i>    | 1                    |                         |
| <i>amitriptyline 75mg tab</i>    | 1                    |                         |
| AMOXAPINE 100MG TAB              | 1                    |                         |
| AMOXAPINE 150MG TAB              | 1                    |                         |
| AMOXAPINE 25MG TAB               | 1                    |                         |
| AMOXAPINE 50MG TAB               | 1                    |                         |
| <i>clomipramine 25mg cap</i>     | 1                    |                         |
| <i>clomipramine 50mg cap</i>     | 1                    |                         |
| <i>clomipramine 75mg cap</i>     | 1                    |                         |
| <i>desipramine 100mg tab</i>     | 1                    |                         |
| <i>desipramine 10mg tab</i>      | 1                    |                         |
| <i>desipramine 150mg tab</i>     | 1                    |                         |
| <i>desipramine 25mg tab</i>      | 1                    |                         |
| <i>desipramine 50mg tab</i>      | 1                    |                         |
| <i>desipramine 75mg tab</i>      | 1                    |                         |
| <i>doxepin 100mg cap</i>         | 1                    |                         |
| <i>doxepin 10mg cap</i>          | 1                    |                         |
| <i>doxepin 10mg/ml oral soln</i> | 1                    |                         |
| DOXEPIН 150MG CAP                | 1                    |                         |
| <i>doxepin 25mg cap</i>          | 1                    |                         |
| <i>doxepin 50mg cap</i>          | 1                    |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento               | Nivel de Medicamento | Requisitos/Límites  |
|--------------------------------------|----------------------|---------------------|
| doxepin 75mg cap                     | 1                    |                     |
| imipramine 10mg tab                  | 1                    |                     |
| imipramine 25mg tab                  | 1                    |                     |
| imipramine 50mg tab                  | 1                    |                     |
| nortriptyline 10mg cap               | 1                    |                     |
| nortriptyline 25mg cap               | 1                    |                     |
| NORTRIPTYLINE 2MG/ML ORAL SOLN       | 1                    |                     |
| nortriptyline 50mg cap               | 1                    |                     |
| nortriptyline 75mg cap               | 1                    |                     |
| protriptyline 10mg tab               | 1                    |                     |
| protriptyline 5mg tab                | 1                    |                     |
| trimipramine 100mg cap               | 1                    |                     |
| trimipramine 25mg cap                | 1                    |                     |
| trimipramine 50mg cap                | 1                    |                     |
| <b>ANTIDIABETICS</b>                 |                      |                     |
| <b>ALPHA-GLUCOSIDASE INHIBITORS</b>  |                      |                     |
| acarbose 100mg tab                   | 1                    |                     |
| acarbose 25mg tab                    | 1                    |                     |
| acarbose 50mg tab                    | 1                    |                     |
| miglitol 100mg tab                   | 1                    |                     |
| miglitol 25mg tab                    | 1                    |                     |
| miglitol 50mg tab                    | 1                    |                     |
| <b>ANTIDIABETIC COMBINATIONS</b>     |                      |                     |
| glipizide 2.5mg/metformin 250mg tab  | 1                    |                     |
| glipizide 2.5mg/metformin 500mg tab  | 1                    |                     |
| glipizide 5mg/metformin 500mg tab    | 1                    |                     |
| glyburide 1.25mg/metformin 250mg tab | 1                    |                     |
| glyburide 2.5mg/metformin 500mg tab  | 1                    |                     |
| glyburide 5mg/metformin 500mg tab    | 1                    |                     |
| GLYXAMBI 10-5MG TAB                  | 1                    | QL=30 EA/30 Días    |
| GLYXAMBI 25-5MG TAB                  | 1                    | QL=30 EA/30 Días    |
| JANUMET 1000-100MG ER TAB            | 1                    | QL=30 EA/30 Días    |
| JANUMET 1000-50MG ER TAB             | 1                    | QL=60 EA/30 Días    |
| JANUMET 1000-50MG TAB                | 1                    | QL=60 EA/30 Días    |
| JANUMET 500-50MG ER TAB              | 1                    | QL=60 EA/30 Días    |
| JANUMET 500-50MG TAB                 | 1                    | QL=60 EA/30 Días    |
| JENTADUETO 2.5-1000MG ER TAB         | 1                    | QL=30 EA/30 Días    |
| JENTADUETO 2.5-1000MG TAB            | 1                    | QL=60 EA/30 Días    |
| JENTADUETO 2.5-500MG TAB             | 1                    | QL=60 EA/30 Días    |
| JENTADUETO 2.5-850MG TAB             | 1                    | QL=60 EA/30 Días    |
| JENTADUETO 5-1000MG ER TAB           | 1                    | QL=30 EA/30 Días    |
| SOLIQUA PEN INJ                      | 1                    | PA QL=15 ML/25 Días |
| SYNJARDY 10-1000MG ER TAB            | 1                    | QL=30 EA/30 Días    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                   | Nivel de Medicamento | Requisitos/Límites  |
|--|----------------------|---------------------|
| SYNJARDY 12.5-1000MG ER TAB                              | 1                    | QL=60 EA/30 Días    |
| SYNJARDY 12.5-1000MG TAB                                 | 1                    | QL=60 EA/30 Días    |
| SYNJARDY 12.5-500MG TAB                                  | 1                    | QL=60 EA/30 Días    |
| SYNJARDY 25-1000MG ER TAB                                | 1                    | QL=30 EA/30 Días    |
| SYNJARDY 5-1000MG ER TAB                                 | 1                    | QL=60 EA/30 Días    |
| SYNJARDY 5-1000MG TAB                                    | 1                    | QL=60 EA/30 Días    |
| SYNJARDY 5-500MG TAB                                     | 1                    | QL=60 EA/30 Días    |
| TRIJARDY 10-5-1000MG ER TAB                              | 1                    | QL=30 EA/30 Días    |
| TRIJARDY 12.5-2.5-1000MG ER TAB                          | 1                    | QL=60 EA/30 Días    |
| TRIJARDY 25-5-1000MG ER TAB                              | 1                    | QL=30 EA/30 Días    |
| TRIJARDY 5-2.5-1000MG ER TAB                             | 1                    | QL=60 EA/30 Días    |
| XIGDUO 10-1000MG ER TAB                                  | 1                    | QL=30 EA/30 Días    |
| XIGDUO 10-500MG ER TAB                                   | 1                    | QL=30 EA/30 Días    |
| XIGDUO 2.5-1000MG ER TAB                                 | 1                    | QL=60 EA/30 Días    |
| XIGDUO 5-1000MG ER TAB                                   | 1                    | QL=60 EA/30 Días    |
| XIGDUO 5-500MG ER TAB                                    | 1                    | QL=30 EA/30 Días    |
| XULTOPHY 100UNIT-3.6MG/ML PEN INJ                        | 1                    | PA QL=15 ML/30 Días |
| <b>BIGUANIDES</b>  |                      |                     |
| <i>metformin 1000mg tab</i>                              | 1                    |                     |
| <i>metformin 500mg er tab</i>                            | 1                    |                     |
| <i>metformin 500mg tab</i>                               | 1                    |                     |
| <i>metformin 750mg er tab</i>                            | 1                    |                     |
| <i>metformin 850mg tab</i>                               | 1                    |                     |
| <b>DIABETIC OTHER</b>                                    |                      |                     |
| BAQSIMI 3MG/DOSE NASAL POWDER                            | 1                    | QL=2 EA/7 Días      |
| <i>diazoxide 50mg/ml susp</i>                            | 1                    |                     |
| GLUCAGEN 1MG INJ   | 1                    | QL=2 EA/7 Días      |
| GLUCAGON (RDNA) 1MG INJ                                  | 1                    | QL=2 EA/7 Días      |
| GVOKE 0.5MG/0.1ML AUTO-INJECTOR                          | 1                    | QL=.20 ML/7 Días    |
| GVOKE 0.5MG/0.1ML SYRINGE                                | 1                    | QL=.20 ML/7 Días    |
| GVOKE 1MG/0.2ML AUTO-INJECTOR                            | 1                    | QL=.40 ML/7 Días    |
| GVOKE 1MG/0.2ML SYRINGE                                  | 1                    | QL=.40 ML/7 Días    |
| KORLYM 300MG TAB   | 1                    | NDS PA              |
| <b>Dipeptidyl Peptidase-4 (DPP-4) INHIBITORS</b>         |                      |                     |
| JANUVIA 100MG TAB  | 1                    | QL=30 EA/30 Días    |
| JANUVIA 25MG TAB   | 1                    | QL=30 EA/30 Días    |
| JANUVIA 50MG TAB   | 1                    | QL=30 EA/30 Días    |
| TRADJENTA 5MG TAB  | 1                    | QL=30 EA/30 Días    |
| <b>INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)</b> |                      |                     |
| BYDUREON 2MG/0.85ML AUTO-INJECTOR                        | 1                    | QL=3.40 ML/28 Días  |
| OZEMPIC 2MG/1.5ML PEN INJ                                | 1                    | QL=1.50 ML/28 Días  |
| OZEMPIC 2MG/1.5ML PEN INJ (1MG DOSE)                     | 1                    | QL=3 ML/28 Días     |
| OZEMPIC 4MG/3ML PEN INJ                                  | 1                    | QL=3 ML/28 Días     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento               | Nivel de Medicamento | Requisitos/Límites |
|--------------------------------------|----------------------|--------------------|
| RYBELSUS 14MG TAB                    | 1                    | QL=30 EA/30 Días   |
| RYBELSUS 3MG TAB                     | 1                    | QL=30 EA/30 Días   |
| RYBELSUS 7MG TAB                     | 1                    | QL=30 EA/30 Días   |
| TRULICITY 0.75MG/0.5ML AUTO-INJECTOR | 1                    | QL=2 ML/28 Días    |
| TRULICITY 1.5MG/0.5ML AUTO-INJECTOR  | 1                    | QL=2 ML/28 Días    |
| TRULICITY 3MG/0.5ML AUTO-INJECTOR    | 1                    | QL=2 ML/28 Días    |
| TRULICITY 4.5MG/0.5ML AUTO-INJECTOR  | 1                    | QL=2 ML/28 Días    |
| VICTOZA 18MG/3ML PEN INJ             | 1                    | QL=9 ML/30 Días    |
| <b>INSULIN</b>                       |                      |                    |
| FIASP 100UNIT/ML CARTRIDGE           | 1                    |                    |
| FIASP 100UNIT/ML INJ                 | 1                    | PA BvD             |
| FIASP 100UNIT/ML PEN INJ             | 1                    |                    |
| HUMALOG 100UNIT/ML INJ               | 1                    | PA BvD             |
| HUMULIN R 500UNIT/ML INJ             | 1                    | PA BvD             |
| HUMULIN R 500UNIT/ML PEN INJ         | 1                    |                    |
| LANTUS 100UNIT/ML INJ                | 1                    |                    |
| LANTUS 100UNIT/ML PEN INJ            | 1                    |                    |
| LEVEMIR 100UNIT/ML INJ               | 1                    |                    |
| LEVEMIR 100UNIT/ML PEN INJ           | 1                    |                    |
| NOVOLIN 70-30UNIT/ML INJ             | 1                    |                    |
| NOVOLIN 70-30UNIT/ML PEN INJ         | 1                    |                    |
| NOVOLIN N 100UNIT/ML INJ             | 1                    |                    |
| NOVOLIN N 100UNIT/ML PEN INJ         | 1                    |                    |
| NOVOLIN R 100UNIT/ML INJ             | 1                    |                    |
| NOVOLIN R 100UNIT/ML PEN INJ         | 1                    |                    |
| NOVOLOG 100UNIT/ML CARTRIDGE         | 1                    |                    |
| NOVOLOG 100UNIT/ML INJ               | 1                    | PA BvD             |
| NOVOLOG 100UNIT/ML PEN INJ           | 1                    |                    |
| NOVOLOG MIX 70-30UNIT/ML INJ         | 1                    |                    |
| NOVOLOG MIX 70-30UNIT/ML PEN INJ     | 1                    |                    |
| TOUJEO 300UNIT/ML PEN INJ            | 1                    |                    |
| TOUJEO MAX 300UNIT/ML PEN INJ (3ML)  | 1                    |                    |
| TRESIBA 100UNIT/ML INJ               | 1                    |                    |
| TRESIBA 100UNIT/ML PEN INJ           | 1                    |                    |
| TRESIBA 200UNIT/ML PEN INJ           | 1                    |                    |
| <b>INSULIN SENSITIZING AGENTS</b>    |                      |                    |
| pioglitazone 15mg tab                | 1                    |                    |
| pioglitazone 30mg tab                | 1                    |                    |
| pioglitazone 45mg tab                | 1                    |                    |
| <b>MEGLITINIDE ANALOGUES</b>         |                      |                    |
| nateglinide 120mg tab                | 1                    |                    |
| nateglinide 60mg tab                 | 1                    |                    |
| repaglinide 0.5mg tab                | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <i>repaglinide 1mg tab</i>   | 1                    |                    |
| <i>repaglinide 2mg tab</i>   | 1                    |                    |
| <b>SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS</b>          |                      |                    |
| FARXIGA 10MG TAB   | 1                    | QL=30 EA/30 Días   |
| FARXIGA 5MG TAB  | 1                    | QL=30 EA/30 Días   |
| JARDIANCE 10MG TAB   | 1                    | QL=30 EA/30 Días   |
| JARDIANCE 25MG TAB   | 1                    | QL=30 EA/30 Días   |
| <b>SULFONYLUREAS</b>   |                      |                    |
| <i>glimepiride 1mg tab</i>   | 1                    |                    |
| <i>glimepiride 2mg tab</i>   | 1                    |                    |
| <i>glimepiride 4mg tab</i>   | 1                    |                    |
| <i>glipizide 10mg er tab</i>                                       | 1                    |                    |
| <i>glipizide 10mg tab</i>  | 1                    |                    |
| <i>glipizide 2.5mg er tab</i>                                      | 1                    |                    |
| <i>glipizide 5mg er tab</i>  | 1                    |                    |
| <i>glipizide 5mg tab</i>   | 1                    |                    |
| <i>glyburide 1.25mg tab</i>  | 1                    |                    |
| <i>glyburide 1.5mg tab</i>   | 1                    |                    |
| <i>glyburide 2.5mg tab</i>   | 1                    |                    |
| <i>glyburide 3mg tab</i>   | 1                    |                    |
| <i>glyburide 5mg tab</i>   | 1                    |                    |
| <i>glyburide 6mg tab</i>   | 1                    |                    |
| <b>ANTIDIARRHEAL/PROBIOTIC AGENTS</b>                              |                      |                    |
| <b>ANTIPERISTALTIC AGENTS</b>                                      |                      |                    |
| ATROPINE SULFATE<br>0.005MG/ML/DIPHENOXYLATE 0.5MG/ML ORAL<br>SOLN | 1                    |                    |
| <i>atropine sulfate 0.025mg/diphenoxylate 2.5mg tab</i>            | 1                    |                    |
| <i>loperamide 2mg cap</i>  | 1                    |                    |
| <b>ANTIDOTES AND SPECIFIC ANTAGONISTS</b>                          |                      |                    |
| <b>ANTIDOTES - CHELATING AGENTS</b>                                |                      |                    |
| CHEMET 100MG CAP   | 1                    |                    |
| <i>deferasirox 125mg tab for oral susp</i>                         | 1                    |                    |
| <i>deferasirox 180mg granules</i>                                  | 1                    | NDS                |
| <i>deferasirox 180mg tab</i>                                       | 1                    |                    |
| <i>deferasirox 250mg tab for oral susp</i>                         | 1                    |                    |
| <i>deferasirox 360mg granules</i>                                  | 1                    | NDS                |
| <i>deferasirox 360mg tab</i>                                       | 1                    |                    |
| <i>deferasirox 500mg tab for oral susp</i>                         | 1                    |                    |
| <i>deferasirox 90mg granules</i>                                   | 1                    | NDS                |
| <i>deferasirox 90mg tab</i>  | 1                    |                    |
| <i>deferiprone 500mg tab</i>                                       | 1                    | NDS PA             |
| FERRIPROX 1000MG TAB   | 1                    | NDS PA             |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites      |
|---|----------------------|-------------------------|
| FERRIPROX 100MG/ML ORAL SOLN                                    | 1                    | NDS PA                  |
| <b>OPIOID ANTAGONISTS</b>                                       |                      |                         |
| NALOXONE 0.4MG/ML CARTRIDGE                                     | 1                    | QL=2 ML/2 Días          |
| <i>naloxone 0.4mg/ml inj</i>                                    | 1                    | QL=2 ML/2 Días          |
| <i>naloxone 1mg/ml syringe</i>                                  | 1                    |                         |
| <i>naltrexone 50mg tab</i>                                      | 1                    |                         |
| NARCAN 4MG/0.1ML NASAL SPRAY                                    | 1                    |                         |
| VIVITROL 380MG INJ  | 1                    | NDS                     |
| <b>ANTIEMETICS</b>  |                      |                         |
| <b>5-HT3 RECEPTOR ANTAGONISTS</b>                               |                      |                         |
| <i>granisetron 1mg tab</i>                                      | 1                    | PA BvD QL=60 EA/30 Días |
| <i>ondansetron 0.8mg/ml oral soln</i>                           | 1                    | PA BvD                  |
| ONDANSETRON 24MG TAB  | 1                    | PA BvD                  |
| <i>ondansetron 4mg odt</i>                                      | 1                    | PA BvD                  |
| <i>ondansetron 4mg tab</i>                                      | 1                    | PA BvD                  |
| <i>ondansetron 8mg odt</i>                                      | 1                    | PA BvD                  |
| <i>ondansetron 8mg tab</i>                                      | 1                    | PA BvD                  |
| <b>ANTIEMETICS - ANTICHOLINERGIC</b>                            |                      |                         |
| <i>meclizine 12.5mg tab</i>                                     | 1                    |                         |
| <i>meclizine 25mg tab</i>                                       | 1                    |                         |
| <i>scopolamine 0.0139mg/hr patch</i>                            | 1                    |                         |
| <i>trimethobenzamide 300mg cap</i>                              | 1                    |                         |
| <b>ANTIEMETICS - MISCELLANEOUS</b>                              |                      |                         |
| <i>doxylamine succinate 10mg/pyridoxine 10mg dr tab</i>         | 1                    | QL=120 EA/30 Días       |
| <i>dronabinol 10mg cap</i>                                      | 1                    | PA QL=60 EA/30 Días     |
| <i>dronabinol 2.5mg cap</i>                                     | 1                    | PA QL=60 EA/30 Días     |
| <i>dronabinol 5mg cap</i>                                       | 1                    | PA QL=60 EA/30 Días     |
| <b>SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS</b>      |                      |                         |
| <i>aprepitant 125mg cap</i>                                     | 1                    | PA BvD QL=3 EA/2 Días   |
| <i>aprepitant 125mg/aprepitant 80mg pack</i>                    | 1                    | PA BvD QL=6 EA/4 Días   |
| <i>aprepitant 40mg cap</i>                                      | 1                    | PA BvD QL=3 EA/2 Días   |
| <i>aprepitant 80mg cap</i>                                      | 1                    | PA BvD QL=6 EA/4 Días   |
| VARUBI 90MG TAB   | 1                    | PA BvD QL=4 EA/28 Días  |
| <b>ANTIFUNGALS</b>  |                      |                         |
| <b>ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (ECHINOCANDINS)</b> |                      |                         |
| <i>caspofungin acetate 50mg inj</i>                             | 1                    | NDS                     |
| <i>caspofungin acetate 70mg inj</i>                             | 1                    | NDS                     |
| ERAXIS 100MG INJ  | 1                    |                         |
| ERAXIS 50MG INJ   | 1                    |                         |
| <i>micafungin sodium 100mg inj</i>                              | 1                    |                         |
| <i>micafungin sodium 50mg inj</i>                               | 1                    |                         |
| <b>ANTIFUNGALS</b>  |                      |                         |
| ABELCET 5MG/ML INJ  | 1                    | PA BvD                  |

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| Nombre del medicamento                   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| AMBISOME 50MG INJ                        | 1                    | PA BvD             |
| AMPHOTERICIN B 50MG INJ                  | 1                    | PA BvD             |
| <i>flucytosine 250mg cap</i>             | 1                    |                    |
| <i>flucytosine 500mg cap</i>             | 1                    |                    |
| <i>griseofulvin 125mg tab</i>            | 1                    |                    |
| <i>griseofulvin 250mg tab</i>            | 1                    |                    |
| <i>griseofulvin 25mg/ml susp</i>         | 1                    |                    |
| <i>griseofulvin 500mg tab</i>            | 1                    |                    |
| <i>nystatin 500000unit tab</i>           | 1                    |                    |
| <i>terbinafine 250mg tab</i>             | 1                    |                    |
| <b>IMIDAZOLE-RELATED ANTIFUNGALS</b>     |                      |                    |
| <i>fluconazole 100mg tab</i>             | 1                    |                    |
| <i>fluconazole 10mg/ml susp</i>          | 1                    |                    |
| <i>fluconazole 150mg tab</i>             | 1                    |                    |
| <i>fluconazole 200mg tab</i>             | 1                    |                    |
| <i>fluconazole 2mg/ml (100ml) inj</i>    | 1                    |                    |
| <i>fluconazole 2mg/ml (200ml) inj</i>    | 1                    |                    |
| <i>fluconazole 40mg/ml susp</i>          | 1                    |                    |
| <i>fluconazole 50mg tab</i>              | 1                    |                    |
| <i>itraconazole 100mg cap</i>            | 1                    | PA                 |
| <i>ketoconazole 200mg tab</i>            | 1                    |                    |
| NOXAFIL 40MG/ML SUSP                     | 1                    | PA                 |
| <i>posaconazole 100mg dr tab</i>         | 1                    | PA                 |
| <i>voriconazole 200mg inj</i>            | 1                    | PA                 |
| <i>voriconazole 200mg tab</i>            | 1                    | PA                 |
| <i>voriconazole 40mg/ml susp</i>         | 1                    | PA                 |
| <i>voriconazole 50mg tab</i>             | 1                    | PA                 |
| <b>ANTIHISTAMINES</b>                    |                      |                    |
| <b>ANTIHISTAMINES - NON-SEDATING</b>     |                      |                    |
| <i>cetirizine 1mg/ml oral soln</i>       | 1                    |                    |
| <i>desloratadine 5mg tab</i>             | 1                    |                    |
| <i>levocetirizine 0.5mg/ml oral soln</i> | 1                    |                    |
| <i>levocetirizine 5mg tab</i>            | 1                    |                    |
| <b>ANTIHISTAMINES - PHENOTHIAZINES</b>   |                      |                    |
| <i>promethazine 1.25mg/ml oral soln</i>  | 1                    |                    |
| <i>promethazine 12.5mg rectal supp</i>   | 1                    |                    |
| <i>promethazine 12.5mg tab</i>           | 1                    |                    |
| <i>promethazine 25mg rectal supp</i>     | 1                    |                    |
| <i>promethazine 25mg tab</i>             | 1                    |                    |
| <i>promethazine 50mg tab</i>             | 1                    |                    |
| <i>promethegan 25mg rectal supp</i>      | 1                    |                    |
| PROMETHEGAN 50MG RECTAL SUPP             | 1                    |                    |
| <b>ANTIHISTAMINES - PIPERIDINES</b>      |                      |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <i>cyproheptadine 0.4mg/ml oral soln</i>                             | 1                    |                    |
| <i>cyproheptadine 4mg tab</i>  | 1                    |                    |
| <b>ANTIHYPERLIPIDEMICS</b>   |                      |                    |
| <b>ANTIHYPERLIPIDEMICS - MISC.</b>                                   |                      |                    |
| <i>omega-3 acid ethyl esters (usp) 1000mg cap</i>                    | 1                    |                    |
| <i>VASCEPA 0.5GM CAP</i>   | 1                    | QL=120 EA/30 Días  |
| <i>VASCEPA 1GM CAP</i>   | 1                    | QL=120 EA/30 Días  |
| <b>BILE ACID SEQUESTRANTS</b>  |                      |                    |
| <i>cholestyramine resin (sugar-free) 4000mg powder for oral susp</i> | 1                    |                    |
| <i>cholestyramine resin 4000mg powder for oral susp</i>              | 1                    |                    |
| <i>colesevelam 3750mg powder for oral susp</i>                       | 1                    |                    |
| <i>colesevelam 625mg tab</i>   | 1                    |                    |
| <i>colestipol 1000mg tab</i>   | 1                    |                    |
| <i>colestipol 5000mg granules for oral susp</i>                      | 1                    |                    |
| <i>prevalite 4gm powder for oral susp</i>                            | 1                    |                    |
| <b>FIBRIC ACID DERIVATIVES</b>                                       |                      |                    |
| <i>fenofibrate 134mg cap</i>   | 1                    |                    |
| <i>fenofibrate 145mg tab</i>   | 1                    |                    |
| <i>FENOFIBRATE 150MG CAP</i>   | 1                    |                    |
| <i>fenofibrate 160mg tab</i>   | 1                    |                    |
| <i>fenofibrate 200mg cap</i>   | 1                    |                    |
| <i>fenofibrate 48mg tab</i>  | 1                    |                    |
| <i>FENOFIBRATE 50MG CAP</i>  | 1                    |                    |
| <i>fenofibrate 54mg tab</i>  | 1                    |                    |
| <i>fenofibrate 67mg cap</i>  | 1                    |                    |
| <i>fenofibric acid 135mg dr cap</i>                                  | 1                    |                    |
| <i>fenofibric acid 45mg dr cap</i>                                   | 1                    |                    |
| <i>gemfibrozil 600mg tab</i>   | 1                    |                    |
| <b>HMG COA REDUCTASE INHIBITORS</b>                                  |                      |                    |
| <i>atorvastatin 10mg tab</i>   | 1                    |                    |
| <i>atorvastatin 20mg tab</i>   | 1                    |                    |
| <i>atorvastatin 40mg tab</i>   | 1                    |                    |
| <i>atorvastatin 80mg tab</i>   | 1                    |                    |
| <i>fluvastatin 20mg cap</i>  | 1                    |                    |
| <i>fluvastatin 40mg cap</i>  | 1                    |                    |
| <i>fluvastatin 80mg er tab</i>                                       | 1                    |                    |
| <i>lovastatin 10mg tab</i>   | 1                    |                    |
| <i>lovastatin 20mg tab</i>   | 1                    |                    |
| <i>lovastatin 40mg tab</i>   | 1                    |                    |
| <i>pravastatin sodium 10mg tab</i>                                   | 1                    |                    |
| <i>pravastatin sodium 20mg tab</i>                                   | 1                    |                    |
| <i>pravastatin sodium 40mg tab</i>                                   | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites    |
|--|----------------------|-----------------------|
| <i>pravastatin sodium 80mg tab</i>                               | 1                    |                       |
| <i>rosuvastatin calcium 10mg tab</i>                             | 1                    |                       |
| <i>rosuvastatin calcium 20mg tab</i>                             | 1                    |                       |
| <i>rosuvastatin calcium 40mg tab</i>                             | 1                    |                       |
| <i>rosuvastatin calcium 5mg tab</i>                              | 1                    |                       |
| <i>simvastatin 10mg tab</i>                                      | 1                    |                       |
| <i>simvastatin 20mg tab</i>                                      | 1                    |                       |
| <i>simvastatin 40mg tab</i>                                      | 1                    |                       |
| <i>simvastatin 5mg tab</i>                                       | 1                    |                       |
| <i>simvastatin 80mg tab</i>                                      | 1                    |                       |
| <b>INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS</b>              |                      |                       |
| <i>ezetimibe 10mg tab</i>  | 1                    | QL=30 EA/30 Días      |
| <b>MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP) INHIBITORS</b> |                      |                       |
| <i>JUXTAPID 10MG CAP</i>   | 1                    | NDS PA                |
| <i>JUXTAPID 20MG CAP</i>   | 1                    | NDS PA                |
| <i>JUXTAPID 30MG CAP</i>   | 1                    | NDS PA                |
| <i>JUXTAPID 5MG CAP</i>  | 1                    | NDS PA                |
| <b>NICOTINIC ACID DERIVATIVES</b>                                |                      |                       |
| <i>niacin 1000mg er tab</i>                                      | 1                    |                       |
| <i>niacin 500mg er tab</i>                                       | 1                    |                       |
| <i>niacin 750mg er tab</i>                                       | 1                    |                       |
| <b>PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS</b>  |                      |                       |
| <i>PRALUENT 150MG/ML AUTO-INJECTOR</i>                           | 1                    | PA QL=2 ML/28 Días    |
| <i>PRALUENT 75MG/ML AUTO-INJECTOR</i>                            | 1                    | PA QL=2 ML/28 Días    |
| <i>REPATHA 140MG/ML AUTO-INJECTOR</i>                            | 1                    | PA QL=2 ML/28 Días    |
| <i>REPATHA 140MG/ML SYRINGE</i>                                  | 1                    | PA QL=2 ML/28 Días    |
| <i>REPATHA 420MG/3.5ML CARTRIDGE</i>                             | 1                    | PA QL=3.50 ML/28 Días |
| <b>ANTIHYPERTENSIVES</b>   |                      |                       |
| <b>ACE INHIBITORS</b>  |                      |                       |
| <i>benazepril 10mg tab</i>                                       | 1                    |                       |
| <i>benazepril 20mg tab</i>                                       | 1                    |                       |
| <i>benazepril 40mg tab</i>                                       | 1                    |                       |
| <i>benazepril 5mg tab</i>  | 1                    |                       |
| <i>captopril 100mg tab</i>                                       | 1                    |                       |
| <i>captopril 12.5mg tab</i>                                      | 1                    |                       |
| <i>captopril 25mg tab</i>  | 1                    |                       |
| <i>captopril 50mg tab</i>  | 1                    |                       |
| <i>enalapril maleate 10mg tab</i>                                | 1                    |                       |
| <i>enalapril maleate 2.5mg tab</i>                               | 1                    |                       |
| <i>enalapril maleate 20mg tab</i>                                | 1                    |                       |
| <i>enalapril maleate 5mg tab</i>                                 | 1                    |                       |
| <i>fosinopril sodium 10mg tab</i>                                | 1                    |                       |
| <i>fosinopril sodium 20mg tab</i>                                | 1                    |                       |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Nombre del medicamento

Nivel de  
Medicamento

## Requisitos/Límites

|  |   |     |
|--|---|-----|
| <i>fosinopril sodium 40mg tab</i>          | 1 |     |
| <i>lisinopril 10mg tab</i>                 | 1 |     |
| <i>lisinopril 2.5mg tab</i>                | 1 |     |
| <i>lisinopril 20mg tab</i>                 | 1 |     |
| <i>lisinopril 30mg tab</i>                 | 1 |     |
| <i>lisinopril 40mg tab</i>                 | 1 |     |
| <i>lisinopril 5mg tab</i>                  | 1 |     |
| <i>moexipril 15mg tab</i>                  | 1 |     |
| <i>moexipril 7.5mg tab</i>                 | 1 |     |
| <i>perindopril erbumine 2mg tab</i>        | 1 |     |
| <i>perindopril erbumine 4mg tab</i>        | 1 |     |
| <i>perindopril erbumine 8mg tab</i>        | 1 |     |
| <i>QBRELIS 1MG/ML ORAL SOLN</i>            | 1 | PA  |
| <i>quinapril 10mg tab</i>                  | 1 |     |
| <i>quinapril 20mg tab</i>                  | 1 |     |
| <i>quinapril 40mg tab</i>                  | 1 |     |
| <i>quinapril 5mg tab</i>                   | 1 |     |
| <i>ramipril 1.25mg cap</i>                 | 1 |     |
| <i>ramipril 10mg cap</i>                   | 1 |     |
| <i>ramipril 2.5mg cap</i>                  | 1 |     |
| <i>ramipril 5mg cap</i>                    | 1 |     |
| <i>trandolapril 1mg tab</i>                | 1 |     |
| <i>trandolapril 2mg tab</i>                | 1 |     |
| <i>trandolapril 4mg tab</i>                | 1 |     |
| <b>AGENTS FOR PHEOCHROMOCYTOMA</b>         |   |     |
| <i>metyrosine 250mg cap</i>                | 1 | NDS |
| <i>phenoxybenzamine 10mg cap</i>           | 1 |     |
| <b>ANGIOTENSIN II RECEPTOR ANTAGONISTS</b> |   |     |
| <i>candesartan cilexetil 16mg tab</i>      | 1 |     |
| <i>candesartan cilexetil 32mg tab</i>      | 1 |     |
| <i>candesartan cilexetil 4mg tab</i>       | 1 |     |
| <i>candesartan cilexetil 8mg tab</i>       | 1 |     |
| <i>irbesartan 150mg tab</i>                | 1 |     |
| <i>irbesartan 300mg tab</i>                | 1 |     |
| <i>irbesartan 75mg tab</i>                 | 1 |     |
| <i>losartan potassium 100mg tab</i>        | 1 |     |
| <i>losartan potassium 25mg tab</i>         | 1 |     |
| <i>losartan potassium 50mg tab</i>         | 1 |     |
| <i>olmesartan medoxomil 20mg tab</i>       | 1 |     |
| <i>olmesartan medoxomil 40mg tab</i>       | 1 |     |
| <i>olmesartan medoxomil 5mg tab</i>        | 1 |     |
| <i>telmisartan 20mg tab</i>                | 1 |     |
| <i>telmisartan 40mg tab</i>                | 1 |     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites |
|---|----------------------|--------------------|
| <i>telmisartan 80mg tab</i>   | 1                    |                    |
| <i>valsartan 160mg tab</i>  | 1                    |                    |
| <i>valsartan 320mg tab</i>  | 1                    |                    |
| <i>valsartan 40mg tab</i>   | 1                    |                    |
| <i>valsartan 80mg tab</i>   | 1                    |                    |
| <b>ANTIADRENERGIC ANTIHYPERTENSIVES</b>                               |                      |                    |
| <i>clonidine 0.00417mg/hr weekly patch</i>                            | 1                    |                    |
| <i>clonidine 0.00833mg/hr weekly patch</i>                            | 1                    |                    |
| <i>clonidine 0.0125mg/hr weekly patch</i>                             | 1                    |                    |
| <i>clonidine 0.1mg tab</i>  | 1                    |                    |
| <i>clonidine 0.2mg tab</i>  | 1                    |                    |
| <i>clonidine 0.3mg tab</i>  | 1                    |                    |
| <i>doxazosin 1mg tab</i>  | 1                    |                    |
| <i>doxazosin 2mg tab</i>  | 1                    |                    |
| <i>doxazosin 4mg tab</i>  | 1                    |                    |
| <i>doxazosin 8mg tab</i>  | 1                    |                    |
| <i>guanfacine 1mg tab</i>   | 1                    |                    |
| <i>guanfacine 2mg tab</i>   | 1                    |                    |
| <i>methyldopa 250mg tab</i>   | 1                    |                    |
| <i>methyldopa 500mg tab</i>   | 1                    |                    |
| <i>prazosin 1mg cap</i>   | 1                    |                    |
| <i>prazosin 2mg cap</i>   | 1                    |                    |
| <i>prazosin 5mg cap</i>   | 1                    |                    |
| <i>terazosin 10mg cap</i>   | 1                    |                    |
| <i>terazosin 1mg cap</i>  | 1                    |                    |
| <i>terazosin 2mg cap</i>  | 1                    |                    |
| <i>terazosin 5mg cap</i>  | 1                    |                    |
| <b>ANTIHYPERTENSIVE COMBINATIONS</b>                                  |                      |                    |
| <i>amlodipine 10mg/benazepril 20mg cap</i>                            | 1                    |                    |
| <i>amlodipine 10mg/benazepril 40mg cap</i>                            | 1                    |                    |
| <i>amlodipine 10mg/hydrochlorothiazide 12.5mg/valsartan 160mg tab</i> | 1                    |                    |
| <i>amlodipine 10mg/hydrochlorothiazide 25mg/valsartan 160mg tab</i>   | 1                    |                    |
| <i>amlodipine 10mg/hydrochlorothiazide 25mg/valsartan 320mg tab</i>   | 1                    |                    |
| <i>amlodipine 10mg/olmesartan medoxomil 20mg tab</i>                  | 1                    |                    |
| <i>amlodipine 10mg/olmesartan medoxomil 40mg tab</i>                  | 1                    |                    |
| <i>amlodipine 10mg/valsartan 160mg tab</i>                            | 1                    |                    |
| <i>amlodipine 10mg/valsartan 320mg tab</i>                            | 1                    |                    |
| <i>amlodipine 2.5mg/benazepril 10mg cap</i>                           | 1                    |                    |
| <i>amlodipine 5mg/benazepril 10mg cap</i>                             | 1                    |                    |
| <i>amlodipine 5mg/benazepril 20mg cap</i>                             | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites |
|---|----------------------|--------------------|
| amlodipine 5mg/benazepril 40mg cap                            | 1                    |                    |
| amlodipine 5mg/hydrochlorothiazide 12.5mg/valsartan 160mg tab | 1                    |                    |
| amlodipine 5mg/hydrochlorothiazide 25mg/valsartan 160mg tab   | 1                    |                    |
| amlodipine 5mg/olmesartan medoxomil 20mg tab                  | 1                    |                    |
| amlodipine 5mg/olmesartan medoxomil 40mg tab                  | 1                    |                    |
| amlodipine 5mg/valsartan 160mg tab                            | 1                    |                    |
| amlodipine 5mg/valsartan 320mg tab                            | 1                    |                    |
| atenolol 100mg/chlorthalidone 25mg tab                        | 1                    |                    |
| atenolol 50mg/chlorthalidone 25mg tab                         | 1                    |                    |
| benazepril 10mg/hydrochlorothiazide 12.5mg tab                | 1                    |                    |
| benazepril 20mg/hydrochlorothiazide 12.5mg tab                | 1                    |                    |
| benazepril 20mg/hydrochlorothiazide 25mg tab                  | 1                    |                    |
| benazepril 5mg/hydrochlorothiazide 6.25mg tab                 | 1                    |                    |
| bisoprolol fumarate 10mg/hydrochlorothiazide 6.25mg tab       | 1                    |                    |
| bisoprolol fumarate 2.5mg/hydrochlorothiazide 6.25mg tab      | 1                    |                    |
| bisoprolol fumarate 5mg/hydrochlorothiazide 6.25mg tab        | 1                    |                    |
| enalapril maleate 10mg/hydrochlorothiazide 25mg tab           | 1                    |                    |
| enalapril maleate 5mg/hydrochlorothiazide 12.5mg tab          | 1                    |                    |
| fosinopril sodium 10mg/hydrochlorothiazide 12.5mg tab         | 1                    |                    |
| fosinopril sodium 20mg/hydrochlorothiazide 12.5mg tab         | 1                    |                    |
| hydrochlorothiazide 12.5mg/irbesartan 150mg tab               | 1                    |                    |
| hydrochlorothiazide 12.5mg/irbesartan 300mg tab               | 1                    |                    |
| hydrochlorothiazide 12.5mg/lisinopril 10mg tab                | 1                    |                    |
| hydrochlorothiazide 12.5mg/lisinopril 20mg tab                | 1                    |                    |
| hydrochlorothiazide 12.5mg/losartan potassium 100mg tab       | 1                    |                    |
| hydrochlorothiazide 12.5mg/losartan potassium 50mg tab        | 1                    |                    |
| hydrochlorothiazide 12.5mg/olmesartan medoxomil 20mg tab      | 1                    |                    |
| hydrochlorothiazide 12.5mg/olmesartan medoxomil 40mg tab      | 1                    |                    |
| hydrochlorothiazide 12.5mg/quinapril 10mg tab                 | 1                    |                    |
| hydrochlorothiazide 12.5mg/quinapril 20mg tab                 | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                    | Nivel de Medicamento | Requisitos/Límites      |
|---|----------------------|-------------------------|
| hydrochlorothiazide 12.5mg/valsartan 160mg tab            | 1                    |                         |
| hydrochlorothiazide 12.5mg/valsartan 320mg tab            | 1                    |                         |
| hydrochlorothiazide 12.5mg/valsartan 80mg tab             | 1                    |                         |
| hydrochlorothiazide 25mg/lisinopril 20mg tab              | 1                    |                         |
| hydrochlorothiazide 25mg/losartan potassium 100mg tab     | 1                    |                         |
| hydrochlorothiazide 25mg/metoprolol tartrate 100mg tab    | 1                    |                         |
| hydrochlorothiazide 25mg/metoprolol tartrate 50mg tab     | 1                    |                         |
| hydrochlorothiazide 25mg/olmesartan medoxomil 40mg tab    | 1                    |                         |
| hydrochlorothiazide 25mg/quinapril 20mg tab               | 1                    |                         |
| hydrochlorothiazide 25mg/valsartan 160mg tab              | 1                    |                         |
| hydrochlorothiazide 25mg/valsartan 320mg tab              | 1                    |                         |
| HYDROCHLOROTHIAZIDE 50MG/METOPROLOL TARTRATE 100MG TAB    | 1                    |                         |
| TRANDOLAPRIL 1MG/VERAPAMIL 240MG ER TAB                   | 1                    |                         |
| trandolapril 2mg/verapamil 180mg er tab                   | 1                    |                         |
| trandolapril 2mg/verapamil 240mg er tab                   | 1                    |                         |
| trandolapril 4mg/verapamil 240mg er tab                   | 1                    |                         |
| <b>DIRECT RENIN INHIBITORS</b>                            |                      |                         |
| aliskiren 150mg tab                                       | 1                    |                         |
| aliskiren 300mg tab                                       | 1                    |                         |
| <b>SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)</b> |                      |                         |
| eplerenone 25mg tab                                       | 1                    |                         |
| eplerenone 50mg tab                                       | 1                    |                         |
| <b>VASODILATORS</b>                                       |                      |                         |
| hydralazine 100mg tab                                     | 1                    |                         |
| hydralazine 10mg tab                                      | 1                    |                         |
| hydralazine 25mg tab                                      | 1                    |                         |
| hydralazine 50mg tab                                      | 1                    |                         |
| minoxidil 10mg tab  | 1                    |                         |
| minoxidil 2.5mg tab                                       | 1                    |                         |
| <b>ANTI-INFECTIVE AGENTS - MISC.</b>                      |                      |                         |
| <b>ANTI-INFECTIVE AGENTS - MISC.</b>                      |                      |                         |
| IMPAVIDO 50MG CAP   | 1                    | NDS PA QL=84 EA/28 Días |
| metronidazole 250mg tab                                   | 1                    |                         |
| metronidazole 500mg tab                                   | 1                    |                         |
| metronidazole 5mg/ml inj                                  | 1                    |                         |
| pentamidine isethionate 300mg inj                         | 1                    |                         |
| pentamidine isethionate 50mg/ml inh soln                  | 1                    | PA BvD QL=1 EA/28 Días  |
| tinidazole 250mg tab                                      | 1                    |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                 | Nivel de Medicamento | Requisitos/Límites  |
|--|----------------------|---------------------|
| <i>tinidazole 500mg tab</i>                            | 1                    |                     |
| <i>trimethoprim 100mg tab</i>                          | 1                    |                     |
| XIFAXAN 200MG TAB                                      | 1                    | QL=9 EA/3 Días      |
| XIFAXAN 550MG TAB                                      | 1                    | PA QL=60 EA/30 Días |
| <b>ANTI-INFECTIVE MISC. - COMBINATIONS</b>             |                      |                     |
| <i>sulfamethoxazole 400mg/trimethoprim 80mg tab</i>    | 1                    |                     |
| <i>sulfamethoxazole 800mg/trimethoprim 160mg tab</i>   | 1                    |                     |
| <i>sulfamethoxazole/trimethoprim 200-40mg/5ml susp</i> | 1                    |                     |
| <b>ANTIPROTOZOAL AGENTS</b>                            |                      |                     |
| <i>atovaquone 150mg/ml susp</i>                        | 1                    |                     |
| <i>nitazoxanide 500mg tab</i>                          | 1                    | PA QL=6 EA/3 Días   |
| <b>CARBAPENEMS</b>                                     |                      |                     |
| <i>CILASTATIN 250MG/IMIPENEM 250MG INJ</i>             | 1                    |                     |
| <i>cilastatin 500mg/imipenem 500mg inj</i>             | 1                    |                     |
| <i>ertapenem 1000mg inj</i>                            | 1                    |                     |
| <i>meropenem 1000mg inj</i>                            | 1                    |                     |
| <i>meropenem 500mg inj</i>                             | 1                    |                     |
| <b>CYCLIC LIPOPEPTIDES</b>                             |                      |                     |
| <i>daptomycin 500mg inj</i>                            | 1                    | NDS                 |
| <b>GLYCOPEPTIDES</b>                                   |                      |                     |
| <i>DALVANCE 500MG INJ</i>                              | 1                    | NDS                 |
| <i>FIRVANQ 25MG/ML ORAL SOLN</i>                       | 1                    |                     |
| <i>FIRVANQ 50MG/ML ORAL SOLN</i>                       | 1                    |                     |
| <i>vancomycin 1000mg inj</i>                           | 1                    |                     |
| <i>vancomycin 100mg/ml inj</i>                         | 1                    |                     |
| <i>vancomycin 125mg cap</i>                            | 1                    | QL=120 EA/30 Días   |
| <i>vancomycin 250mg cap</i>                            | 1                    | QL=120 EA/30 Días   |
| <i>VANCOMYCIN 250MG INJ</i>                            | 1                    |                     |
| <i>vancomycin 500mg inj</i>                            | 1                    |                     |
| <i>vancomycin 750mg inj</i>                            | 1                    |                     |
| <b>LEPROSTATICOS</b>                                   |                      |                     |
| <i>dapsone 100mg tab</i>                               | 1                    |                     |
| <i>dapsone 25mg tab</i>                                | 1                    |                     |
| <b>LINCOSAMIDES</b>                                    |                      |                     |
| <i>clindamycin 12mg/ml inj</i>                         | 1                    |                     |
| <i>clindamycin 150mg cap</i>                           | 1                    |                     |
| <i>clindamycin 150mg/ml (2ml) inj</i>                  | 1                    |                     |
| <i>clindamycin 150mg/ml (4ml) inj</i>                  | 1                    |                     |
| <i>clindamycin 150mg/ml (6ml) inj</i>                  | 1                    |                     |
| <i>clindamycin 15mg/ml oral soln</i>                   | 1                    |                     |
| <i>clindamycin 18mg/ml inj</i>                         | 1                    |                     |
| <i>clindamycin 300mg cap</i>                           | 1                    |                     |
| <i>clindamycin 6mg/ml inj</i>                          | 1                    |                     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites      |
|---|----------------------|-------------------------|
| <i>clindamycin 75mg cap</i>                                   | 1                    |                         |
| <b>MONOBACTAMS</b>  |                      |                         |
| <i>aztreonam 1000mg inj</i>                                   | 1                    |                         |
| CAYSTON 75MG INH SOLN   | 1                    | NDS PA QL=84 ML/28 Días |
| <b>OXAZOLIDINONES</b>   |                      |                         |
| <i>linezolid 20mg/ml susp</i>                                 | 1                    |                         |
| <i>linezolid 2mg/ml inj</i>                                   | 1                    |                         |
| <i>linezolid 600mg tab</i>                                    | 1                    |                         |
| SIVEXTRO 200MG INJ  | 1                    | NDS PA QL=6 EA/6 Días   |
| SIVEXTRO 200MG TAB  | 1                    | NDS PA QL=6 EA/6 Días   |
| <b>POLYMYXINS</b>   |                      |                         |
| <i>colistin 75mg/ml inj</i>                                   | 1                    |                         |
| <i>polymyxin b 250000unit/ml inj</i>                          | 1                    |                         |
| <b>URINARY ANTI-INFECTIVES</b>                                |                      |                         |
| <i>methenamine hippurate 1000mg tab</i>                       | 1                    |                         |
| <i>nitrofurantoin macro 25mg/nitrofurantoin mono 75mg cap</i> | 1                    |                         |
| <i>nitrofurantoin macrocrystals 100mg cap</i>                 | 1                    |                         |
| <i>nitrofurantoin macrocrystals 50mg cap</i>                  | 1                    |                         |
| <b>ANTIMALARIALS</b>  |                      |                         |
| <b>ANTIMALARIAL COMBINATIONS</b>                              |                      |                         |
| <i>atovaquone 250mg/proguanil 100mg tab</i>                   | 1                    |                         |
| <i>atovaquone 62.5mg/proguanil 25mg tab</i>                   | 1                    |                         |
| COARTEM 20-120MG TAB  | 1                    |                         |
| <b>ANTIMALARIALS</b>  |                      |                         |
| <i>chloroquine phosphate 250mg tab</i>                        | 1                    |                         |
| CHLOROQUINE PHOSPHATE 500MG TAB                               | 1                    |                         |
| <i>hydroxychloroquine sulfate 200mg tab</i>                   | 1                    |                         |
| KRINTAFEL 150MG TAB   | 1                    |                         |
| MEFLOQUINE 250MG TAB  | 1                    |                         |
| PRIMAQUINE PHOSPHATE 26.3MG TAB                               | 1                    |                         |
| <i>quinine sulfate 324mg cap</i>                              | 1                    | PA                      |
| <b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>                      |                      |                         |
| <b>ANTIMYASTHENIC/CHOLINERGIC AGENTS</b>                      |                      |                         |
| <i>pyridostigmine bromide 180mg er tab</i>                    | 1                    |                         |
| <i>pyridostigmine bromide 60mg tab</i>                        | 1                    |                         |
| RUZURGI 10MG TAB  | 1                    | NDS PA                  |
| <b>ANTIMYCOBACTERIAL AGENTS</b>                               |                      |                         |
| <b>ANTIMYCOBACTERIAL AGENTS</b>                               |                      |                         |
| <i>ethambutol 100mg tab</i>                                   | 1                    |                         |
| <i>ethambutol 400mg tab</i>                                   | 1                    |                         |
| ISONIAZID 100MG TAB   | 1                    |                         |
| ISONIAZID 10MG/ML ORAL SOLN                                   | 1                    |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                          | Nivel de Medicamento | Requisitos/Límites           |
|---|----------------------|------------------------------|
| <i>isoniazid 300mg tab</i>                      | 1                    |                              |
| PASER D/R 4GM GRANULES                          | 1                    |                              |
| PRETOMANID 200MG TAB                            | 1                    | QL=30 EA/30 Días             |
| PRIFTIN 150MG TAB                               | 1                    |                              |
| PYRAZINAMIDE 500MG TAB                          | 1                    |                              |
| <i>rifabutin 150mg cap</i>                      | 1                    |                              |
| <i>rifampin 150mg cap</i>                       | 1                    |                              |
| <i>rifampin 300mg cap</i>                       | 1                    |                              |
| <i>rifampin 600mg inj</i>                       | 1                    |                              |
| SIRTURO 100MG TAB                               | 1                    | NDS PA                       |
| SIRTURO 20MG TAB                                | 1                    | NDS PA                       |
| TRECATOR 250MG TAB                              | 1                    |                              |
| <b>ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES</b> |                      |                              |
| <b>ALKYLATING AGENTS</b>                        |                      |                              |
| CYCLOPHOSPHAMIDE 25MG CAP                       | 1                    | PA BvD                       |
| CYCLOPHOSPHAMIDE 25MG TAB                       | 1                    | PA BvD                       |
| CYCLOPHOSPHAMIDE 50MG CAP                       | 1                    | PA BvD                       |
| CYCLOPHOSPHAMIDE 50MG TAB                       | 1                    | PA BvD                       |
| LEUKERAN 2MG TAB                                | 1                    |                              |
| <b>ANTIMETABOLITES</b>                          |                      |                              |
| <i>mercaptopurine 50mg tab</i>                  | 1                    |                              |
| <i>methotrexate 2.5mg tab</i>                   | 1                    |                              |
| <i>methotrexate 25mg/ml (2ml) inj</i>           | 1                    |                              |
| <i>methotrexate 25mg/ml inj</i>                 | 1                    |                              |
| ONUREG 200MG TAB                                | 1                    | NDS PA NSO QL=14 EA/28 Días  |
| ONUREG 300MG TAB                                | 1                    | NDS PA NSO QL=14 EA/28 Días  |
| PURIXAN 2000MG/100ML SUSP                       | 1                    |                              |
| TABLOID 40MG TAB                                | 1                    |                              |
| XATMEP 2.5MG/ML ORAL SOLN                       | 1                    | PA                           |
| <b>ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS</b> |                      |                              |
| INLYTA 1MG TAB                                  | 1                    | NDS PA NSO                   |
| INLYTA 5MG TAB                                  | 1                    | NDS PA NSO                   |
| LENVIMA 10 10MG PACK                            | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| LENVIMA 12 4MG PACK                             | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| LENVIMA 14 PACK                                 | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| LENVIMA 18 PACK                                 | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| LENVIMA 20 10MG PACK                            | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| LENVIMA 24 PACK                                 | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| LENVIMA 4 4MG PACK                              | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| LENVIMA 8 4MG PACK                              | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| <b>ANTINEOPLASTIC - ANTI-HER2 AGENTS</b>        |                      |                              |
| TUKYSA 150MG TAB                                | 1                    | NDS PA NSO QL=120 EA/30 Días |
| TUKYSA 50MG TAB                                 | 1                    | NDS PA NSO QL=120 EA/30 Días |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                              | Nivel de Medicamento | Requisitos/Límites           |
|---|----------------------|------------------------------|
| <b>ANTINEOPLASTIC - BCL-2 INHIBITORS</b>            |                      |                              |
| VENCLEXTA 100MG TAB                                 | 1                    | NDS PA NSO                   |
| VENCLEXTA 10MG TAB                                  | 1                    | PA NSO                       |
| VENCLEXTA 50MG TAB                                  | 1                    | PA NSO                       |
| VENCLEXTA STARTING PACK                             | 1                    | NDS PA NSO                   |
| <b>ANTINEOPLASTIC - EGFR INHIBITORS</b>             |                      |                              |
| <i>erlotinib 100mg tab</i>                          | 1                    | PA NSO                       |
| <i>erlotinib 150mg tab</i>                          | 1                    | PA NSO                       |
| <i>erlotinib 25mg tab</i>                           | 1                    | PA NSO                       |
| GILOTRIF 20MG TAB                                   | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| GILOTRIF 30MG TAB                                   | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| GILOTRIF 40MG TAB                                   | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| IRESSA 250MG TAB                                    | 1                    | NDS PA NSO                   |
| TAGRISSO 40MG TAB                                   | 1                    | NDS PA NSO                   |
| TAGRISSO 80MG TAB                                   | 1                    | NDS PA NSO                   |
| VIZIMPRO 15MG TAB                                   | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| VIZIMPRO 30MG TAB                                   | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| VIZIMPRO 45MG TAB                                   | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| <b>ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS</b> |                      |                              |
| DAURISMO 100MG TAB                                  | 1                    | NDS PA NSO                   |
| DAURISMO 25MG TAB                                   | 1                    | NDS PA NSO                   |
| ERIVEDGE 150MG CAP                                  | 1                    | NDS PA NSO                   |
| ODOMZO 200MG CAP                                    | 1                    | NDS PA NSO                   |
| <b>ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS</b> |                      |                              |
| <i>abiraterone acetate 250mg tab</i>                | 1                    | QL=120 EA/30 Días            |
| <i>anastrozole 1mg tab</i>                          | 1                    |                              |
| <i>bicalutamide 50mg tab</i>                        | 1                    |                              |
| ELIGARD 22.5MG SYRINGE                              | 1                    | QL=1 EA/84 Días              |
| ELIGARD 30MG SYRINGE                                | 1                    | QL=1 EA/112 Días             |
| ELIGARD 45MG SYRINGE                                | 1                    | QL=1 EA/168 Días             |
| ELIGARD 7.5MG SYRINGE                               | 1                    | QL=1 EA/28 Días              |
| EMCYT 140MG CAP                                     | 1                    |                              |
| ERLEADA 60MG TAB                                    | 1                    | NDS PA NSO QL=120 EA/30 Días |
| <i>exemestane 25mg tab</i>                          | 1                    |                              |
| FIRMAGON 120MG/VIAL INJ                             | 1                    | PA NSO                       |
| FIRMAGON 80MG INJ                                   | 1                    | PA NSO                       |
| FLUTAMIDE 125MG CAP                                 | 1                    |                              |
| <i>letrozole 2.5mg tab</i>                          | 1                    |                              |
| <i>leuprolide acetate 5mg/ml inj</i>                | 1                    |                              |
| LUPRON 11.25MG SYRINGE                              | 1                    | QL=1 EA/84 Días              |
| LUPRON 22.5MG SYRINGE                               | 1                    | QL=1 EA/84 Días              |
| LUPRON 3.75MG SYRINGE                               | 1                    | QL=1 EA/28 Días              |
| LUPRON 30MG SYRINGE                                 | 1                    | QL=1 EA/112 Días             |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                         | Nivel de Medicamento | Requisitos/Límites           |
|--|----------------------|------------------------------|
| LUPRON 45MG SYRINGE                            | 1                    | QL=1 EA/168 Días             |
| LUPRON 7.5MG SYRINGE                           | 1                    | QL=1 EA/28 Días              |
| LYSODREN 500MG TAB                             | 1                    |                              |
| <i>megestrol acetate 20mg tab</i>              | 1                    | PA NSO                       |
| <i>megestrol acetate 40mg tab</i>              | 1                    | PA NSO                       |
| <i>megestrol acetate 40mg/ml susp</i>          | 1                    | PA                           |
| <i>nilutamide 150mg tab</i>                    | 1                    | NDS                          |
| NUBEQA 300MG TAB                               | 1                    | NDS PA NSO QL=120 EA/30 Días |
| ORGOVYX 120MG TAB                              | 1                    | NDS PA NSO QL=30 EA/28 Días  |
| SOLTAMOX 10MG/5ML ORAL SOLN                    | 1                    | PA NSO                       |
| <i>tamoxifen 10mg tab</i>                      | 1                    |                              |
| <i>tamoxifen 20mg tab</i>                      | 1                    |                              |
| <i>toremifene 60mg tab</i>                     | 1                    |                              |
| TRELSTAR 11.25MG INJ                           | 1                    | QL=1 EA/84 Días              |
| TRELSTAR 22.5MG INJ                            | 1                    | QL=1 EA/168 Días             |
| TRELSTAR 3.75MG INJ                            | 1                    | QL=1 EA/28 Días              |
| XTANDI 40MG CAP                                | 1                    | NDS PA NSO QL=120 EA/30 Días |
| <b>ANTINEOPLASTIC - IMMUNOMODULATORS</b>       |                      |                              |
| POMALYST 1MG CAP                               | 1                    | NDS PA NSO                   |
| POMALYST 2MG CAP                               | 1                    | NDS PA NSO                   |
| POMALYST 3MG CAP                               | 1                    | NDS PA NSO                   |
| POMALYST 4MG CAP                               | 1                    | NDS PA NSO                   |
| <b>ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS</b> |                      |                              |
| AYVAKIT 100MG TAB                              | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| AYVAKIT 200MG TAB                              | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| AYVAKIT 300MG TAB                              | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| <b>ANTINEOPLASTIC - XPO1 INHIBITORS</b>        |                      |                              |
| XPOVIO 100 MG ONCE WEEKLY                      | 1                    | NDS PA NSO QL=20 EA/28 Días  |
| XPOVIO 100MG ONCE WEEKLY CARTON (8-PACK)       | 1                    | NDS PA NSO QL=8 EA/28 Días   |
| XPOVIO 40MG ONCE WEEKLY CARTON (4-PACK)        | 1                    | NDS PA NSO QL=4 EA/28 Días   |
| XPOVIO 40MG ONCE WEEKLY PACK                   | 1                    | NDS PA NSO QL=8 EA/28 Días   |
| XPOVIO 40MG TWICE WEEKLY CARTON (8-PACK)       | 1                    | NDS PA NSO QL=8 EA/28 Días   |
| XPOVIO 40MG TWICE WEEKLY PACK                  | 1                    | NDS PA NSO QL=16 EA/28 Días  |
| XPOVIO 60 MG ONCE WEEKLY                       | 1                    | NDS PA NSO QL=12 EA/28 Días  |
| XPOVIO 60MG ONCE WEEKLY CARTON (4-PACK)        | 1                    | NDS PA NSO QL=4 EA/28 Días   |
| XPOVIO 60MG TWICE WEEKLY PACK                  | 1                    | NDS PA NSO QL=24 EA/28 Días  |
| XPOVIO 80 MG ONCE WEEKLY                       | 1                    | NDS PA NSO QL=16 EA/28 Días  |
| XPOVIO 80 MG TWICE WEEKLY                      | 1                    | NDS PA NSO QL=32 EA/28 Días  |
| XPOVIO 80MG ONCE WEEKLY CARTON (8-PACK)        | 1                    | NDS PA NSO QL=8 EA/28 Días   |
| <b>ANTINEOPLASTIC COMBINATIONS</b>             |                      |                              |
| INQOVI 5 TABLET PACK                           | 1                    | NDS PA NSO QL=5 EA/28 Días   |
| KISQALI FEMARA CO-PACK 200 PACK                | 1                    | NDS PA NSO QL=49 EA/28 Días  |
| KISQALI FEMARA CO-PACK 400 PACK                | 1                    | NDS PA NSO QL=70 EA/28 Días  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                       | Nivel de Medicamento | Requisitos/Límites           |
|--|----------------------|------------------------------|
| KISQALI FEMARA CO-PACK 600 PACK              | 1                    | NDS PA NSO QL=91 EA/28 Días  |
| LONSURF 6.14-15MG TAB                        | 1                    | NDS PA NSO                   |
| LONSURF 8.19-20MG TAB                        | 1                    | NDS PA NSO                   |
| <b>ANTINEOPLASTIC ENZYME INHIBITORS</b>      |                      |                              |
| AFINITOR 10MG TAB                            | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| AFINITOR 2MG TAB FOR ORAL SUSP               | 1                    | NDS PA NSO                   |
| AFINITOR 3MG TAB FOR ORAL SUSP               | 1                    | NDS PA NSO                   |
| AFINITOR 5MG TAB FOR ORAL SUSP               | 1                    | NDS PA NSO                   |
| ALECENSA 150MG CAP                           | 1                    | NDS PA NSO QL=240 EA/30 Días |
| ALUNBRIG 180MG TAB                           | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| ALUNBRIG 30MG TAB                            | 1                    | NDS PA NSO QL=120 EA/30 Días |
| ALUNBRIG 90MG TAB                            | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| ALUNBRIG INITIATION PACK                     | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| BALVERSA 3MG TAB                             | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| BALVERSA 4MG TAB                             | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| BALVERSA 5MG TAB                             | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| BOSULIF 100MG TAB                            | 1                    | NDS PA NSO                   |
| BOSULIF 400MG TAB                            | 1                    | NDS PA NSO                   |
| BOSULIF 500MG TAB                            | 1                    | NDS PA NSO                   |
| BRAFTOVI 75MG CAP                            | 1                    | NDS PA NSO QL=180 EA/30 Días |
| BRUKINSA 80MG CAP                            | 1                    | NDS PA NSO QL=120 EA/30 Días |
| CABOMETYX 20MG TAB                           | 1                    | NDS PA NSO                   |
| CABOMETYX 40MG TAB                           | 1                    | NDS PA NSO                   |
| CABOMETYX 60MG TAB                           | 1                    | NDS PA NSO                   |
| CALQUENCE 100MG CAP                          | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| CAPRELSA 100MG TAB                           | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| CAPRELSA 300MG TAB                           | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| COMETRIQ CAP 100MG DAILY DOSE CARTON<br>PACK | 1                    | NDS PA NSO                   |
| COMETRIQ CAP 140MG DAILY DOSE CARTON<br>PACK | 1                    | NDS PA NSO                   |
| COMETRIQ CAP 60MG DAILY DOSE CARTON<br>PACK  | 1                    | NDS PA NSO                   |
| COPIKTRA 15MG CAP                            | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| COPIKTRA 25MG CAP                            | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| COTELLIC 20MG TAB                            | 1                    | NDS PA NSO QL=63 EA/28 Días  |
| <i>everolimus 2.5mg tab</i>                  | 1                    | PA NSO QL=30 EA/30 Días      |
| <i>everolimus 5mg tab</i>                    | 1                    | PA NSO QL=30 EA/30 Días      |
| <i>everolimus 7.5mg tab</i>                  | 1                    | PA NSO QL=30 EA/30 Días      |
| FARYDAK 10MG CAP                             | 1                    | NDS PA NSO                   |
| FARYDAK 15MG CAP                             | 1                    | NDS PA NSO                   |
| FARYDAK 20MG CAP                             | 1                    | NDS PA NSO                   |
| FOTIVDA 0.89MG CAP                           | 1                    | NDS PA NSO QL=21 EA/28 Días  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento        | Nivel de Medicamento | Requisitos/Límites           |
|-------------------------------|----------------------|------------------------------|
| FOTIVDA 1.34MG CAP            | 1                    | NDS PA NSO QL=21 EA/28 Días  |
| GAVRETO 100MG CAP             | 1                    | NDS PA NSO QL=120 EA/30 Días |
| IBRANCE 100MG CAP             | 1                    | NDS PA NSO QL=21 EA/28 Días  |
| IBRANCE 100MG TAB             | 1                    | NDS PA NSO QL=21 EA/28 Días  |
| IBRANCE 125MG CAP             | 1                    | NDS PA NSO QL=21 EA/28 Días  |
| IBRANCE 125MG TAB             | 1                    | NDS PA NSO QL=21 EA/28 Días  |
| IBRANCE 75MG CAP              | 1                    | NDS PA NSO QL=21 EA/28 Días  |
| IBRANCE 75MG TAB              | 1                    | NDS PA NSO QL=21 EA/28 Días  |
| ICLUSIG 10MG TAB              | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| ICLUSIG 15MG TAB              | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| ICLUSIG 30MG TAB              | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| ICLUSIG 45MG TAB              | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| IDHIFA 100MG TAB              | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| IDHIFA 50MG TAB               | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| <i>imatinib 100mg tab</i>     | 1                    |                              |
| <i>imatinib 400mg tab</i>     | 1                    |                              |
| IMBRUVICA 140MG CAP           | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| IMBRUVICA 140MG TAB           | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| IMBRUVICA 280MG TAB           | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| IMBRUVICA 420MG TAB           | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| IMBRUVICA 560MG TAB           | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| IMBRUVICA 70MG CAP            | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| INREBIC 100MG CAP             | 1                    | NDS PA NSO QL=120 EA/30 Días |
| JAKAFI 10MG TAB               | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| JAKAFI 15MG TAB               | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| JAKAFI 20MG TAB               | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| JAKAFI 25MG TAB               | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| JAKAFI 5MG TAB                | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| KISQALI 200MG DAILY DOSE PACK | 1                    | NDS PA NSO QL=21 EA/28 Días  |
| KISQALI 400MG DAILY DOSE PACK | 1                    | NDS PA NSO QL=42 EA/28 Días  |
| KISQALI 600MG DAILY DOSE PACK | 1                    | NDS PA NSO QL=63 EA/28 Días  |
| KOSELUGO 10MG CAP             | 1                    | NDS PA NSO QL=120 EA/30 Días |
| KOSELUGO 25MG CAP             | 1                    | NDS PA NSO QL=120 EA/30 Días |
| <i>lapatinib 250mg tab</i>    | 1                    | NDS PA NSO                   |
| LORBRENA 100MG TAB            | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| LORBRENA 25MG TAB             | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| LYNPARZA 100MG TAB            | 1                    | NDS PA NSO QL=120 EA/30 Días |
| LYNPARZA 150MG TAB            | 1                    | NDS PA NSO QL=120 EA/30 Días |
| MEKINIST 0.5MG TAB            | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| MEKINIST 2MG TAB              | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| MEKTOVI 15MG TAB              | 1                    | NDS PA NSO QL=180 EA/30 Días |
| NERLYNX 40MG TAB              | 1                    | NDS PA NSO                   |
| NEXAVAR 200MG TAB             | 1                    | NDS PA NSO                   |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento             | Nivel de Medicamento | Requisitos/Límites           |
|------------------------------------|----------------------|------------------------------|
| NINLARO 2.3MG CAP                  | 1                    | NDS PA NSO                   |
| NINLARO 3MG CAP                    | 1                    | NDS PA NSO                   |
| NINLARO 4MG CAP                    | 1                    | NDS PA NSO                   |
| PEMAZYRE 13.5MG TAB                | 1                    | NDS PA NSO QL=14 EA/21 Días  |
| PEMAZYRE 4.5MG TAB                 | 1                    | NDS PA NSO QL=14 EA/21 Días  |
| PEMAZYRE 9MG TAB                   | 1                    | NDS PA NSO QL=14 EA/21 Días  |
| PIQRAY 200MG DAILY DOSE PACK       | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| PIQRAY 250MG DAILY DOSE PACK       | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| PIQRAY 300MG DAILY DOSE 150MG PACK | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| QINLOCK 50MG TAB                   | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| RETEVMO 40MG CAP                   | 1                    | NDS PA NSO QL=120 EA/30 Días |
| RETEVMO 80MG CAP                   | 1                    | NDS PA NSO QL=120 EA/30 Días |
| ROZLYTREK 100MG CAP                | 1                    | NDS PA NSO QL=150 EA/30 Días |
| ROZLYTREK 200MG CAP                | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| RUBRACA 200MG TAB                  | 1                    | NDS PA NSO QL=120 EA/30 Días |
| RUBRACA 250MG TAB                  | 1                    | NDS PA NSO QL=120 EA/30 Días |
| RUBRACA 300MG TAB                  | 1                    | NDS PA NSO QL=120 EA/30 Días |
| RYDAPT 25MG CAP                    | 1                    | NDS PA NSO                   |
| SPRYCEL 100MG TAB                  | 1                    | NDS PA NSO                   |
| SPRYCEL 140MG TAB                  | 1                    | NDS PA NSO                   |
| SPRYCEL 20MG TAB                   | 1                    | NDS PA NSO                   |
| SPRYCEL 50MG TAB                   | 1                    | NDS PA NSO                   |
| SPRYCEL 70MG TAB                   | 1                    | NDS PA NSO                   |
| SPRYCEL 80MG TAB                   | 1                    | NDS PA NSO                   |
| STIVARGA 40MG TAB                  | 1                    | NDS PA NSO QL=84 EA/28 Días  |
| SUTENT 12.5MG CAP                  | 1                    | NDS PA NSO                   |
| SUTENT 25MG CAP                    | 1                    | NDS PA NSO                   |
| SUTENT 37.5MG CAP                  | 1                    | NDS PA NSO                   |
| SUTENT 50MG CAP                    | 1                    | NDS PA NSO                   |
| TABRECTA 150MG TAB                 | 1                    | NDS PA NSO QL=120 EA/30 Días |
| TABRECTA 200MG TAB                 | 1                    | NDS PA NSO QL=120 EA/30 Días |
| TAFINLAR 50MG CAP                  | 1                    | NDS PA NSO QL=120 EA/30 Días |
| TAFINLAR 75MG CAP                  | 1                    | NDS PA NSO QL=120 EA/30 Días |
| TALZENNA 0.25MG CAP                | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| TALZENNA 1MG CAP                   | 1                    | NDS PA NSO QL=30 EA/30 Días  |
| TASIGNA 150MG CAP                  | 1                    | NDS PA NSO                   |
| TASIGNA 200MG CAP                  | 1                    | NDS PA NSO                   |
| TASIGNA 50MG CAP                   | 1                    | NDS PA NSO                   |
| TAZVERIK 200MG TAB                 | 1                    | NDS PA NSO QL=240 EA/30 Días |
| TEPMETKO 225MG TAB                 | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| TIBSOVO 250MG TAB                  | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| TURALIO 200MG CAP                  | 1                    | NDS PA NSO QL=120 EA/30 Días |
| UKONIQ 200MG TAB                   | 1                    | NDS PA NSO QL=120 EA/30 Días |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                | Nivel de Medicamento | Requisitos/Límites           |
|---|----------------------|------------------------------|
| VERZENIO 100MG TAB                                    | 1                    | NDS PA NSO QL=56 EA/28 Días  |
| VERZENIO 150MG TAB                                    | 1                    | NDS PA NSO QL=56 EA/28 Días  |
| VERZENIO 200MG TAB                                    | 1                    | NDS PA NSO QL=56 EA/28 Días  |
| VERZENIO 50MG TAB                                     | 1                    | NDS PA NSO QL=56 EA/28 Días  |
| VITRAKVI 100MG CAP                                    | 1                    | NDS PA NSO                   |
| VITRAKVI 20MG/ML ORAL SOLN                            | 1                    | NDS PA NSO                   |
| VITRAKVI 25MG CAP                                     | 1                    | NDS PA NSO                   |
| VOTRIENT 200MG TAB                                    | 1                    | NDS PA NSO                   |
| XALKORI 200MG CAP                                     | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| XALKORI 250MG CAP                                     | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| XOSPATA 40MG TAB                                      | 1                    | NDS PA NSO                   |
| ZEJULA 100MG CAP                                      | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| ZELBORAF 240MG TAB                                    | 1                    | NDS PA NSO QL=240 EA/30 Días |
| ZOLINZA 100MG CAP                                     | 1                    | NDS PA NSO                   |
| ZYDELIG 100MG TAB                                     | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| ZYDELIG 150MG TAB                                     | 1                    | NDS PA NSO QL=60 EA/30 Días  |
| ZYKADIA 150MG TAB                                     | 1                    | NDS PA NSO QL=90 EA/30 Días  |
| <b>ANTINEOPLASTICS MISC.</b>                          |                      |                              |
| ACTIMMUNE 2000000UNIT/0.5ML INJ                       | 1                    | NDS PA NSO                   |
| <i>bexarotene 75mg cap</i>                            | 1                    | PA NSO                       |
| <i>hydroxyurea 500mg cap</i>                          | 1                    |                              |
| INTRON A 10MU INJ                                     | 1                    |                              |
| INTRON A 10MU/ML INJ                                  | 1                    |                              |
| INTRON A 18MU INJ                                     | 1                    | NDS                          |
| INTRON A 50MU INJ                                     | 1                    | NDS                          |
| INTRON A 6000000UNIT/ML INJ                           | 1                    |                              |
| MATULANE 50MG CAP                                     | 1                    | NDS                          |
| SYNRIBO 3.5MG INJ                                     | 1                    | NDS PA NSO                   |
| <i>tretinoin 10mg cap</i>                             | 1                    |                              |
| <b>CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS</b> |                      |                              |
| <i>leucovorin 10mg tab</i>                            | 1                    |                              |
| <i>leucovorin 15mg tab</i>                            | 1                    |                              |
| <i>leucovorin 25mg tab</i>                            | 1                    |                              |
| <i>leucovorin 5mg tab</i>                             | 1                    |                              |
| MESNEX 400MG TAB                                      | 1                    |                              |
| <b>ANTIPARKINSON AND RELATED THERAPY AGENTS</b>       |                      |                              |
| <b>ANTIPARKINSON ADJUNCTIVE THERAPY</b>               |                      |                              |
| <i>carbidopa 25mg tab</i>                             | 1                    |                              |
| NOURIANZ 20MG TAB                                     | 1                    | PA QL=30 EA/30 Días          |
| NOURIANZ 40MG TAB                                     | 1                    | PA QL=30 EA/30 Días          |
| <b>ANTIPARKINSON ANTICHOLINERGICS</b>                 |                      |                              |
| <i>benztropine mesylate 0.5mg tab</i>                 | 1                    |                              |
| <i>benztropine mesylate 1mg tab</i>                   | 1                    |                              |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <i>benztropine mesylate 2mg tab</i>                              | 1                    |                    |
| <i>trihexyphenidyl 0.4mg/ml oral soln</i>                        | 1                    |                    |
| <i>trihexyphenidyl 2mg tab</i>                                   | 1                    |                    |
| <i>trihexyphenidyl 5mg tab</i>                                   | 1                    |                    |
| <b>ANTIPARKINSON COMT INHIBITORS</b>                             |                      |                    |
| <i>entacapone 200mg tab</i>                                      | 1                    |                    |
| <i>tolcapone 100mg tab</i>                                       | 1                    |                    |
| <b>ANTIPARKINSON DOPAMINERGICS</b>                               |                      |                    |
| <i>amantadine 100mg cap</i>                                      | 1                    |                    |
| <i>amantadine 100mg tab</i>                                      | 1                    |                    |
| <i>amantadine 10mg/ml oral soln</i>                              | 1                    |                    |
| <i>bromocriptine 2.5mg tab</i>                                   | 1                    |                    |
| <i>bromocriptine 5mg cap</i>                                     | 1                    |                    |
| <i>carbidopa 10mg/levodopa 100mg odt</i>                         | 1                    |                    |
| <i>carbidopa 10mg/levodopa 100mg tab</i>                         | 1                    |                    |
| <b>CARBIDOPA 12.5MG/ENTACAPONE<br/>200MG/LEVODOPA 50MG TAB</b>   | 1                    |                    |
| <b>CARBIDOPA 18.75MG/ENTACAPONE<br/>200MG/LEVODOPA 75MG TAB</b>  | 1                    |                    |
| <b>CARBIDOPA 25MG/ENTACAPONE<br/>200MG/LEVODOPA 100MG TAB</b>    | 1                    |                    |
| <i>carbidopa 25mg/levodopa 100mg er tab</i>                      | 1                    |                    |
| <i>carbidopa 25mg/levodopa 100mg odt</i>                         | 1                    |                    |
| <i>carbidopa 25mg/levodopa 100mg tab</i>                         | 1                    |                    |
| <i>carbidopa 25mg/levodopa 250mg odt</i>                         | 1                    |                    |
| <i>carbidopa 25mg/levodopa 250mg tab</i>                         | 1                    |                    |
| <b>CARBIDOPA 31.25MG/ENTACAPONE<br/>200MG/LEVODOPA 125MG TAB</b> | 1                    |                    |
| <b>CARBIDOPA 37.5MG/ENTACAPONE<br/>200MG/LEVODOPA 150MG TAB</b>  | 1                    |                    |
| <b>CARBIDOPA 50MG/ENTACAPONE<br/>200MG/LEVODOPA 200MG TAB</b>    | 1                    |                    |
| <i>carbidopa 50mg/levodopa 200mg er tab</i>                      | 1                    |                    |
| <b>KYNMOBI 10MG SUBLINGUAL FILM</b>                              | 1                    | NDS PA             |
| <b>KYNMOBI 15MG SUBLINGUAL FILM</b>                              | 1                    | NDS PA             |
| <b>KYNMOBI 20MG SUBLINGUAL FILM</b>                              | 1                    | NDS PA             |
| <b>KYNMOBI 25MG SUBLINGUAL FILM</b>                              | 1                    | NDS PA             |
| <b>KYNMOBI 30MG SUBLINGUAL FILM</b>                              | 1                    | NDS PA             |
| <b>NEUPRO 1MG/24HR PATCH</b>                                     | 1                    |                    |
| <b>NEUPRO 2MG/24HR PATCH</b>                                     | 1                    |                    |
| <b>NEUPRO 3MG/24HR PATCH</b>                                     | 1                    |                    |
| <b>NEUPRO 4MG/24HR PATCH</b>                                     | 1                    |                    |
| <b>NEUPRO 6MG/24HR PATCH</b>                                     | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                            | Nivel de Medicamento | Requisitos/Límites |
|---|----------------------|--------------------|
| NEUPRO 8MG/24HR PATCH                             | 1                    |                    |
| <i>pramipexole 0.125mg tab</i>                    | 1                    |                    |
| <i>pramipexole 0.25mg tab</i>                     | 1                    |                    |
| <i>pramipexole 0.375mg er tab</i>                 | 1                    |                    |
| <i>pramipexole 0.5mg tab</i>                      | 1                    |                    |
| <i>pramipexole 0.75mg er tab</i>                  | 1                    |                    |
| <i>pramipexole 0.75mg tab</i>                     | 1                    |                    |
| <i>pramipexole 1.5mg er tab</i>                   | 1                    |                    |
| <i>pramipexole 1.5mg tab</i>                      | 1                    |                    |
| <i>pramipexole 1mg tab</i>                        | 1                    |                    |
| <i>pramipexole 2.25mg er tab</i>                  | 1                    |                    |
| <i>pramipexole 3.75mg er tab</i>                  | 1                    |                    |
| <i>pramipexole 3mg er tab</i>                     | 1                    |                    |
| <i>pramipexole 4.5mg er tab</i>                   | 1                    |                    |
| <i>ropinirole 0.25mg tab</i>                      | 1                    |                    |
| <i>ropinirole 0.5mg tab</i>                       | 1                    |                    |
| <i>ropinirole 12mg er tab</i>                     | 1                    |                    |
| <i>ropinirole 1mg tab</i>                         | 1                    |                    |
| <i>ropinirole 2mg er tab</i>                      | 1                    |                    |
| <i>ropinirole 2mg tab</i>                         | 1                    |                    |
| <i>ropinirole 3mg tab</i>                         | 1                    |                    |
| <i>ropinirole 4mg er tab</i>                      | 1                    |                    |
| <i>ropinirole 4mg tab</i>                         | 1                    |                    |
| <i>ropinirole 5mg tab</i>                         | 1                    |                    |
| <i>ropinirole 6mg er tab</i>                      | 1                    |                    |
| <i>ropinirole 8mg er tab</i>                      | 1                    |                    |
| STALEVO 18.75-200-75MG TAB                        | 1                    |                    |
| STALEVO 25-200-100MG TAB                          | 1                    |                    |
| STALEVO 31.25-200-125MG TAB                       | 1                    |                    |
| <b>ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS</b> |                      |                    |
| <i>rasagiline 0.5mg tab</i>                       | 1                    |                    |
| <i>rasagiline 1mg tab</i>                         | 1                    |                    |
| <i>selegiline 5mg cap</i>                         | 1                    |                    |
| SELEGILINE 5MG TAB                                | 1                    |                    |
| <b>ANTIPISYCHOTICS/ANTIMANIC AGENTS</b>           |                      |                    |
| <b>ANTIMANIC AGENTS</b>                           |                      |                    |
| <i>lithium carbonate 150mg cap</i>                | 1                    |                    |
| <i>lithium carbonate 300mg cap</i>                | 1                    |                    |
| <i>lithium carbonate 300mg er tab</i>             | 1                    |                    |
| <i>lithium carbonate 300mg tab</i>                | 1                    |                    |
| <i>lithium carbonate 450mg er tab</i>             | 1                    |                    |
| LITHIUM CARBONATE 600MG CAP                       | 1                    |                    |
| LITHIUM CITRATE 60MG/ML ORAL SOLN                 | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento           | Nivel de Medicamento | Requisitos/Límites      |
|----------------------------------|----------------------|-------------------------|
| <b>ANTIPSYCHOTICS - MISC.</b>    |                      |                         |
| CAPLYTA 42MG CAP                 | 1                    | PA NSO QL=30 EA/30 Días |
| LATUDA 120MG TAB                 | 1                    | ST_NSO QL=30 EA/30 Días |
| LATUDA 20MG TAB                  | 1                    | ST_NSO QL=30 EA/30 Días |
| LATUDA 40MG TAB                  | 1                    | ST_NSO QL=30 EA/30 Días |
| LATUDA 60MG TAB                  | 1                    | ST_NSO QL=30 EA/30 Días |
| LATUDA 80MG TAB                  | 1                    | ST_NSO QL=30 EA/30 Días |
| NUPLAZID 10MG TAB                | 1                    | PA NSO QL=30 EA/30 Días |
| NUPLAZID 34MG CAP                | 1                    | PA NSO QL=30 EA/30 Días |
| VRAYLAR 1.5/3MG MIXED PACK       | 1                    | PA NSO QL=30 EA/30 Días |
| VRAYLAR 1.5MG CAP                | 1                    | PA NSO QL=30 EA/30 Días |
| VRAYLAR 3MG CAP                  | 1                    | PA NSO QL=30 EA/30 Días |
| VRAYLAR 4.5MG CAP                | 1                    | PA NSO QL=30 EA/30 Días |
| VRAYLAR 6MG CAP                  | 1                    | PA NSO QL=30 EA/30 Días |
| <i>ziprasidone 20mg cap</i>      | 1                    |                         |
| <i>ziprasidone 20mg inj</i>      | 1                    | QL=60 EA/30 Días        |
| <i>ziprasidone 40mg cap</i>      | 1                    |                         |
| <i>ziprasidone 60mg cap</i>      | 1                    |                         |
| <i>ziprasidone 80mg cap</i>      | 1                    |                         |
| <b>BENZISOXAZOLES</b>            |                      |                         |
| FANAPT 10MG TAB                  | 1                    | PA NSO QL=60 EA/30 Días |
| FANAPT 12MG TAB                  | 1                    | PA NSO QL=60 EA/30 Días |
| FANAPT 1MG TAB                   | 1                    | PA NSO QL=60 EA/30 Días |
| FANAPT 2MG TAB                   | 1                    | PA NSO QL=60 EA/30 Días |
| FANAPT 4MG TAB                   | 1                    | PA NSO QL=60 EA/30 Días |
| FANAPT 6MG TAB                   | 1                    | PA NSO QL=60 EA/30 Días |
| FANAPT 8MG TAB                   | 1                    | PA NSO QL=60 EA/30 Días |
| FANAPT TITRATION PACK            | 1                    | PA NSO QL=60 EA/30 Días |
| INVEGA 117MG/0.75ML SYRINGE      | 1                    | QL=.75 ML/28 Días       |
| INVEGA 156MG/ML SYRINGE          | 1                    | QL=1 ML/28 Días         |
| INVEGA 234MG/1.5ML SYRINGE       | 1                    | QL=1.50 ML/28 Días      |
| INVEGA 273MG/0.875ML SYRINGE     | 1                    | QL=.88 ML/84 Días       |
| INVEGA 39MG/0.25ML SYRINGE       | 1                    | QL=.25 ML/28 Días       |
| INVEGA 410MG/1.315ML SYRINGE     | 1                    | QL=1.32 ML/84 Días      |
| INVEGA 546MG/1.75ML SYRINGE      | 1                    | QL=1.75 ML/84 Días      |
| INVEGA 78MG/0.5ML SYRINGE        | 1                    | QL=.50 ML/28 Días       |
| INVEGA 819MG/2.625ML SYRINGE     | 1                    | QL=2.63 ML/84 Días      |
| <i>paliperidone 1.5mg er tab</i> | 1                    | PA NSO QL=30 EA/30 Días |
| <i>paliperidone 3mg er tab</i>   | 1                    | PA NSO QL=30 EA/30 Días |
| <i>paliperidone 6mg er tab</i>   | 1                    | PA NSO QL=60 EA/30 Días |
| <i>paliperidone 9mg er tab</i>   | 1                    | PA NSO QL=30 EA/30 Días |
| PERSERIS 120MG SYRINGE           | 1                    | NDS QL=1 EA/28 Días     |
| PERSERIS 90MG SYRINGE            | 1                    | NDS QL=1 EA/28 Días     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

**Nombre del medicamento****Nivel de Medicamento****Requisitos/Límites**

|   |   |                         |
|---|---|-------------------------|
| RISPERDAL 12.5MG INJ                            | 1 | QL=2 EA/28 Días         |
| RISPERDAL 25MG INJ                              | 1 | QL=2 EA/28 Días         |
| RISPERDAL 37.5MG INJ                            | 1 | QL=2 EA/28 Días         |
| RISPERDAL 50MG INJ                              | 1 | QL=2 EA/28 Días         |
| RISPERIDONE 0.25MG ODT                          | 1 |                         |
| <i>risperidone 0.25mg tab</i>                   | 1 |                         |
| <i>risperidone 0.5mg odt</i>                    | 1 |                         |
| <i>risperidone 0.5mg tab</i>                    | 1 |                         |
| <i>risperidone 1mg odt</i>                      | 1 |                         |
| <i>risperidone 1mg tab</i>                      | 1 |                         |
| <i>risperidone 1mg/ml oral soln</i>             | 1 |                         |
| <i>risperidone 2mg odt</i>                      | 1 |                         |
| <i>risperidone 2mg tab</i>                      | 1 |                         |
| <i>risperidone 3mg odt</i>                      | 1 |                         |
| <i>risperidone 3mg tab</i>                      | 1 |                         |
| <i>risperidone 4mg odt</i>                      | 1 |                         |
| <i>risperidone 4mg tab</i>                      | 1 |                         |
| <b>BUTYROPHENONES</b>                           |   |                         |
| <i>haloperidol 0.5mg tab</i>                    | 1 |                         |
| <i>haloperidol 10mg tab</i>                     | 1 |                         |
| <i>haloperidol 1mg tab</i>                      | 1 |                         |
| <i>haloperidol 20mg tab</i>                     | 1 |                         |
| <i>haloperidol 2mg tab</i>                      | 1 |                         |
| <i>haloperidol 2mg/ml oral soln</i>             | 1 |                         |
| <i>haloperidol 5mg tab</i>                      | 1 |                         |
| <i>haloperidol 5mg/ml inj</i>                   | 1 |                         |
| <i>haloperidol decanoate 100mg/ml (1ml) inj</i> | 1 |                         |
| <i>haloperidol decanoate 100mg/ml inj</i>       | 1 |                         |
| <i>haloperidol decanoate 50mg/ml (1ml) inj</i>  | 1 |                         |
| <i>haloperidol decanoate 50mg/ml inj</i>        | 1 |                         |
| <b>DIBENZAPINES</b>                             |   |                         |
| <i>asenapine 10mg sl tab</i>                    | 1 | PA NSO QL=60 EA/30 Días |
| <i>asenapine 2.5mg sl tab</i>                   | 1 | PA NSO QL=60 EA/30 Días |
| <i>asenapine 5mg sl tab</i>                     | 1 | PA NSO QL=60 EA/30 Días |
| <i>clozapine 100mg odt</i>                      | 1 |                         |
| <i>clozapine 100mg tab</i>                      | 1 |                         |
| CLOZAPINE 12.5MG ODT                            | 1 |                         |
| CLOZAPINE 150MG ODT                             | 1 |                         |
| CLOZAPINE 200MG ODT                             | 1 |                         |
| <i>clozapine 200mg tab</i>                      | 1 |                         |
| <i>clozapine 25mg odt</i>                       | 1 |                         |
| <i>clozapine 25mg tab</i>                       | 1 |                         |
| <i>clozapine 50mg tab</i>                       | 1 |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                 | Nivel de Medicamento | Requisitos/Límites      |
|--|----------------------|-------------------------|
| <i>loxapine 10mg cap</i>               | 1                    |                         |
| <i>loxapine 25mg cap</i>               | 1                    |                         |
| <i>loxapine 50mg cap</i>               | 1                    |                         |
| <i>loxapine 5mg cap</i>                | 1                    |                         |
| <i>olanzapine 10mg inj</i>             | 1                    |                         |
| <i>olanzapine 10mg odt</i>             | 1                    |                         |
| <i>olanzapine 10mg tab</i>             | 1                    |                         |
| <i>olanzapine 15mg odt</i>             | 1                    |                         |
| <i>olanzapine 15mg tab</i>             | 1                    |                         |
| <i>olanzapine 2.5mg tab</i>            | 1                    |                         |
| <i>olanzapine 20mg odt</i>             | 1                    |                         |
| <i>olanzapine 20mg tab</i>             | 1                    |                         |
| <i>olanzapine 5mg odt</i>              | 1                    |                         |
| <i>olanzapine 5mg tab</i>              | 1                    |                         |
| <i>olanzapine 7.5mg tab</i>            | 1                    |                         |
| <i>quetiapine 100mg tab</i>            | 1                    |                         |
| <i>quetiapine 150mg er tab</i>         | 1                    |                         |
| <i>quetiapine 200mg er tab</i>         | 1                    |                         |
| <i>quetiapine 200mg tab</i>            | 1                    |                         |
| <i>quetiapine 25mg tab</i>             | 1                    |                         |
| <i>quetiapine 300mg er tab</i>         | 1                    |                         |
| <i>quetiapine 300mg tab</i>            | 1                    |                         |
| <i>quetiapine 400mg er tab</i>         | 1                    |                         |
| <i>quetiapine 400mg tab</i>            | 1                    |                         |
| <i>quetiapine 50mg er tab</i>          | 1                    |                         |
| <i>quetiapine 50mg tab</i>             | 1                    |                         |
| <i>SECUADO 3.8MG/24HR PATCH</i>        | 1                    | PA NSO QL=30 EA/30 Días |
| <i>SECUADO 5.7MG/24HR PATCH</i>        | 1                    | PA NSO QL=30 EA/30 Días |
| <i>SECUADO 7.6MG/24HR PATCH</i>        | 1                    | PA NSO QL=30 EA/30 Días |
| <i>VERSACLOZ 50MG/ML SUSP</i>          | 1                    |                         |
| <i>ZYPREXA 210MG INJ</i>               | 1                    | QL=2 EA/28 Días         |
| <b>DIHYDROINDOLONES</b>                |                      |                         |
| <i>MOLINDONE 10MG TAB</i>              | 1                    |                         |
| <i>MOLINDONE 25MG TAB</i>              | 1                    |                         |
| <i>MOLINDONE 5MG TAB</i>               | 1                    |                         |
| <b>PHENOTHIAZINES</b>                  |                      |                         |
| <i>chlorpromazine 100mg tab</i>        | 1                    |                         |
| <i>chlorpromazine 10mg tab</i>         | 1                    |                         |
| <i>chlorpromazine 200mg tab</i>        | 1                    |                         |
| <i>chlorpromazine 25mg tab</i>         | 1                    |                         |
| <i>chlorpromazine 50mg tab</i>         | 1                    |                         |
| <i>compro 25mg rectal supp</i>         | 1                    |                         |
| <i>FLUPHENAZINE 0.5MG/ML ORAL SOLN</i> | 1                    |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento             | Nivel de Medicamento | Requisitos/Límites      |
|------------------------------------|----------------------|-------------------------|
| fluphenazine 10mg tab              | 1                    |                         |
| fluphenazine 1mg tab               | 1                    |                         |
| fluphenazine 2.5mg tab             | 1                    |                         |
| FLUPHENAZINE 2.5MG/ML INJ          | 1                    |                         |
| fluphenazine 5mg tab               | 1                    |                         |
| FLUPHENAZINE 5MG/ML ORAL SOLN      | 1                    |                         |
| fluphenazine decanoate 25mg/ml inj | 1                    |                         |
| perphenazine 16mg tab              | 1                    |                         |
| perphenazine 2mg tab               | 1                    |                         |
| perphenazine 4mg tab               | 1                    |                         |
| perphenazine 8mg tab               | 1                    |                         |
| prochlorperazine 10mg tab          | 1                    |                         |
| prochlorperazine 25mg rectal supp  | 1                    |                         |
| prochlorperazine 5mg tab           | 1                    |                         |
| thioridazine 100mg tab             | 1                    |                         |
| thioridazine 10mg tab              | 1                    |                         |
| thioridazine 25mg tab              | 1                    |                         |
| thioridazine 50mg tab              | 1                    |                         |
| trifluoperazine 10mg tab           | 1                    |                         |
| trifluoperazine 1mg tab            | 1                    |                         |
| trifluoperazine 2mg tab            | 1                    |                         |
| trifluoperazine 5mg tab            | 1                    |                         |
| <b>QUINOLINONE DERIVATIVES</b>     |                      |                         |
| ABILIFY 300MG INJ                  | 1                    | NDS QL=1 EA/28 Días     |
| ABILIFY 300MG SYRINGE              | 1                    | NDS QL=1 EA/28 Días     |
| ABILIFY 400MG INJ                  | 1                    | NDS QL=1 EA/28 Días     |
| ABILIFY 400MG SYRINGE              | 1                    | NDS QL=1 EA/28 Días     |
| ariPIPRAZOLE 10mg odt              | 1                    | QL=60 EA/30 Días        |
| ariPIPRAZOLE 10mg tab              | 1                    |                         |
| ariPIPRAZOLE 15mg odt              | 1                    | QL=60 EA/30 Días        |
| ariPIPRAZOLE 15mg tab              | 1                    |                         |
| ariPIPRAZOLE 1mg/ml oral soln      | 1                    |                         |
| ariPIPRAZOLE 20mg tab              | 1                    |                         |
| ariPIPRAZOLE 2mg tab               | 1                    |                         |
| ariPIPRAZOLE 30mg tab              | 1                    |                         |
| ariPIPRAZOLE 5mg tab               | 1                    |                         |
| ARISTADA 1064MG/3.9ML SYRINGE      | 1                    | QL=3.90 ML/56 Días      |
| ARISTADA 441MG/1.6ML SYRINGE       | 1                    | NDS QL=1.60 ML/28 Días  |
| ARISTADA 662MG/2.4ML SYRINGE       | 1                    | NDS QL=2.40 ML/28 Días  |
| ARISTADA 675MG/2.4ML SYRINGE       | 1                    | NDS QL=2.40 ML/42 Días  |
| ARISTADA 882MG/3.2ML SYRINGE       | 1                    | QL=3.20 ML/28 Días      |
| REXULTI 0.25MG TAB                 | 1                    | PA NSO QL=30 EA/30 Días |
| REXULTI 0.5MG TAB                  | 1                    | PA NSO QL=30 EA/30 Días |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites      |
|--|----------------------|-------------------------|
| REXULTI 1MG TAB  | 1                    | PA NSO QL=30 EA/30 Días |
| REXULTI 2MG TAB  | 1                    | PA NSO QL=30 EA/30 Días |
| REXULTI 3MG TAB  | 1                    | PA NSO QL=30 EA/30 Días |
| REXULTI 4MG TAB  | 1                    | PA NSO QL=30 EA/30 Días |
| <b>THIOXANTHENES</b>   |                      |                         |
| <i>thiothixene 10mg cap</i>  | 1                    |                         |
| <i>thiothixene 1mg cap</i>   | 1                    |                         |
| <i>thiothixene 2mg cap</i>   | 1                    |                         |
| <i>thiothixene 5mg cap</i>   | 1                    |                         |
| <b>ANTIVIRALS</b>  |                      |                         |
| <b>ANTIRETROVIRALS</b>   |                      |                         |
| <i>abacavir 20mg/ml oral soln</i>  | 1                    |                         |
| <i>abacavir 300mg tab</i>  | 1                    |                         |
| <i>abacavir 300mg/lamivudine 150mg/zidovudine 300mg tab</i>                        | 1                    |                         |
| <i>abacavir 600mg/lamivudine 300mg tab</i>   | 1                    |                         |
| APTVUS 250MG CAP   | 1                    | NDS                     |
| <i>atazanavir 150mg cap</i>  | 1                    |                         |
| <i>atazanavir 200mg cap</i>  | 1                    |                         |
| <i>atazanavir 300mg cap</i>  | 1                    |                         |
| BIKTARVY 50-200-25MG TAB   | 1                    | NDS                     |
| CIMDUO 300-300MG TAB   | 1                    | NDS                     |
| COMPLERA 200-25-300MG TAB  | 1                    | NDS                     |
| DELSTRIGO 100-300-300MG TAB  | 1                    | NDS                     |
| DESCOVY 200-25MG TAB   | 1                    | NDS QL=30 EA/30 Días    |
| DOVATO 50-300MG TAB  | 1                    | NDS                     |
| EDURANT 25MG TAB   | 1                    | NDS                     |
| <i>efavirenz 200mg cap</i>   | 1                    |                         |
| <i>efavirenz 400mg/lamivudine 300mg/tenofovir disoproxil fumarate 300mg tab</i>    | 1                    |                         |
| <i>efavirenz 50mg cap</i>  | 1                    |                         |
| <i>efavirenz 600mg tab</i>   | 1                    |                         |
| <i>efavirenz 600mg/emtricitabine 200mg/tenofovir disoproxil fumarate 300mg tab</i> | 1                    | NDS                     |
| <i>efavirenz 600mg/lamivudine 300mg/tenofovir disoproxil fumarate 300mg tab</i>    | 1                    |                         |
| <i>emtricitabine 100mg/tenofovir disoproxil fumarate 150mg tab</i>                 | 1                    | NDS QL=30 EA/30 Días    |
| <i>emtricitabine 133mg/tenofovir disoproxil fumarate 200mg tab</i>                 | 1                    | NDS QL=30 EA/30 Días    |
| <i>emtricitabine 167mg/tenofovir disoproxil fumarate 250mg tab</i>                 | 1                    | NDS QL=30 EA/30 Días    |
| <i>emtricitabine 200mg cap</i>   | 1                    |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites   |
|--|----------------------|----------------------|
| <i>emtricitabine 200mg/tenofovir disoproxil fumarate 300mg tab</i> | 1                    | NDS QL=30 EA/30 Días |
| EMTRIVA 10MG/ML ORAL SOLN  | 1                    |                      |
| EVOTAZ 300-150MG TAB   | 1                    | NDS                  |
| <i>fosamprenavir 700mg tab</i>                                     | 1                    | NDS                  |
| FUZEON 90MG INJ  | 1                    | NDS                  |
| GENVOYA 150-150-200-10MG TAB                                       | 1                    | NDS                  |
| INTELENCE 100MG TAB  | 1                    | NDS                  |
| INTELENCE 200MG TAB  | 1                    | NDS                  |
| INTELENCE 25MG TAB   | 1                    | NDS                  |
| INVIRASE 500MG TAB   | 1                    | NDS                  |
| ISENTRESS 100MG CHEW TAB   | 1                    |                      |
| ISENTRESS 100MG GRANULES FOR ORAL SUSP                             | 1                    |                      |
| ISENTRESS 25MG CHEW TAB  | 1                    |                      |
| ISENTRESS 400MG TAB  | 1                    |                      |
| ISENTRESS 600MG TAB  | 1                    |                      |
| JULUCA 50-25MG TAB   | 1                    | NDS                  |
| KALETTRA 100-25MG TAB  | 1                    |                      |
| KALETTRA 200-50MG TAB  | 1                    | NDS                  |
| <i>lamivudine 10mg/ml oral soln</i>                                | 1                    |                      |
| <i>lamivudine 150mg tab</i>  | 1                    |                      |
| <i>lamivudine 150mg/zidovudine 300mg tab</i>                       | 1                    |                      |
| <i>lamivudine 300mg tab</i>  | 1                    |                      |
| LEXIVA 50MG/ML SUSP  | 1                    |                      |
| <i>lopinavir 80mg/ml/ritonavir 20mg/ml oral soln</i>               | 1                    | NDS                  |
| NEVIRAPINE 100MG ER TAB  | 1                    |                      |
| <i>nevirapine 10mg/ml susp</i>                                     | 1                    |                      |
| <i>nevirapine 200mg tab</i>  | 1                    |                      |
| <i>nevirapine 400mg er tab</i>                                     | 1                    |                      |
| NORVIR 100MG ORAL POWDER   | 1                    |                      |
| NORVIR 80MG/ML ORAL SOLN   | 1                    |                      |
| ODEFSEY 200-25-25MG TAB  | 1                    | NDS                  |
| PIFELTRO 100MG TAB   | 1                    | NDS                  |
| PREZCOBIX 150-800MG TAB  | 1                    | NDS                  |
| PREZISTA 100MG/ML SUSP   | 1                    |                      |
| PREZISTA 150MG TAB   | 1                    |                      |
| PREZISTA 600MG TAB   | 1                    | NDS                  |
| PREZISTA 75MG TAB  | 1                    |                      |
| PREZISTA 800MG TAB   | 1                    | NDS                  |
| REYATAZ 50MG ORAL POWDER   | 1                    | NDS                  |
| <i>ritonavir 100mg tab</i>   | 1                    |                      |
| RUKOBIA 600MG ER TAB   | 1                    | NDS                  |
| SELZENTRY 150MG TAB  | 1                    | NDS                  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                         | Nivel de Medicamento | Requisitos/Límites      |
|--|----------------------|-------------------------|
| SELZENTRY 20MG/ML ORAL SOLN                    | 1                    | NDS                     |
| SELZENTRY 25MG TAB                             | 1                    |                         |
| SELZENTRY 300MG TAB                            | 1                    | NDS                     |
| SELZENTRY 75MG TAB                             | 1                    | NDS                     |
| STRIBILD 150-150-200-300MG TAB                 | 1                    | NDS                     |
| SYMTUZA 150-800-200-10MG TAB                   | 1                    | NDS                     |
| TEMIXYS 300-300MG TAB                          | 1                    | NDS                     |
| <i>tenofovir disoproxil fumarate 300mg tab</i> | 1                    |                         |
| TIVICAY 10MG TAB                               | 1                    |                         |
| TIVICAY 25MG TAB                               | 1                    |                         |
| TIVICAY 50MG TAB                               | 1                    | NDS                     |
| TIVICAY 5MG TAB FOR ORAL SUSP                  | 1                    |                         |
| TRIUMEQ 600-50-300MG TAB                       | 1                    | NDS                     |
| TYBOST 150MG TAB                               | 1                    |                         |
| VIRACEPT 250MG TAB                             | 1                    | NDS                     |
| VIRACEPT 625MG TAB                             | 1                    | NDS                     |
| VIREAD 150MG TAB                               | 1                    | NDS                     |
| VIREAD 200MG TAB                               | 1                    | NDS                     |
| VIREAD 250MG TAB                               | 1                    | NDS                     |
| VIREAD 40MG/GM ORAL POWDER                     | 1                    |                         |
| <i>zidovudine 100mg cap</i>                    | 1                    |                         |
| <i>zidovudine 10mg/ml oral soln</i>            | 1                    |                         |
| <i>zidovudine 300mg tab</i>                    | 1                    |                         |
| <b>CMV AGENTS</b>                              |                      |                         |
| PREVYMIS 240MG TAB                             | 1                    | NDS PA QL=30 EA/30 Días |
| PREVYMIS 480MG TAB                             | 1                    | NDS PA QL=30 EA/30 Días |
| <i>valganciclovir 450mg tab</i>                | 1                    | NDS                     |
| <i>valganciclovir 50mg/ml oral soln</i>        | 1                    | NDS                     |
| <b>HEPATITIS AGENTS</b>                        |                      |                         |
| <i>adefovir dipivoxil 10mg tab</i>             | 1                    |                         |
| <i>entecavir 0.5mg tab</i>                     | 1                    |                         |
| <i>entecavir 1mg tab</i>                       | 1                    |                         |
| EPIVIR HBV 5MG/ML ORAL SOLN                    | 1                    |                         |
| <i>lamivudine 100mg tab</i>                    | 1                    |                         |
| MAVYRET 100-40MG TAB                           | 1                    | NDS PA QL=90 EA/30 Días |
| PEGASYS 180MCG/0.5ML SYRINGE                   | 1                    | NDS                     |
| PEGASYS 180MCG/ML INJ                          | 1                    | NDS                     |
| <i>ribavirin 200mg cap</i>                     | 1                    |                         |
| <i>ribavirin 200mg tab</i>                     | 1                    |                         |
| SOFOSBUVIR 400MG/VELPATASVIR 100MG TAB         | 1                    | NDS PA QL=30 EA/30 Días |
| VEMLIDY 25MG TAB                               | 1                    | NDS                     |
| VOSEVI 400-100-100MG TAB                       | 1                    | NDS PA QL=30 EA/30 Días |
| <b>HERPES AGENTS</b>                           |                      |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                | Nivel de Medicamento | Requisitos/Límites |
|---------------------------------------|----------------------|--------------------|
| acyclovir 200mg cap                   | 1                    |                    |
| acyclovir 400mg tab                   | 1                    |                    |
| acyclovir 40mg/ml susp                | 1                    |                    |
| acyclovir 50mg/ml inj                 | 1                    | PA BvD             |
| acyclovir 800mg tab                   | 1                    |                    |
| famciclovir 125mg tab                 | 1                    |                    |
| famciclovir 250mg tab                 | 1                    |                    |
| famciclovir 500mg tab                 | 1                    |                    |
| valacyclovir 1000mg tab               | 1                    |                    |
| valacyclovir 500mg tab                | 1                    |                    |
| <b>INFLUENZA AGENTS</b>               |                      |                    |
| oseltamivir 30mg cap                  | 1                    | QL=84 EA/180 Días  |
| oseltamivir 45mg cap                  | 1                    | QL=42 EA/180 Días  |
| oseltamivir 6mg/ml susp               | 1                    | QL=540 ML/180 Días |
| oseltamivir 75mg cap                  | 1                    | QL=42 EA/180 Días  |
| RELENZA 5MG/BLISTER INHALER           | 1                    | QL=120 EA/30 Días  |
| RIMANTADINE 100MG TAB                 | 1                    |                    |
| XOFLUZA 20MG THERAPY PACK             | 1                    | QL=2 EA/30 Días    |
| XOFLUZA 40MG THERAPY PACK             | 1                    | QL=2 EA/30 Días    |
| <b>BETA BLOCKERS</b>                  |                      |                    |
| <b>ALPHA-BETA BLOCKERS</b>            |                      |                    |
| carvedilol 12.5mg tab                 | 1                    |                    |
| carvedilol 25mg tab                   | 1                    |                    |
| carvedilol 3.125mg tab                | 1                    |                    |
| carvedilol 6.25mg tab                 | 1                    |                    |
| labetalol 100mg tab                   | 1                    |                    |
| labetalol 200mg tab                   | 1                    |                    |
| labetalol 300mg tab                   | 1                    |                    |
| <b>BETA BLOCKERS CARDIO-SELECTIVE</b> |                      |                    |
| acebutolol 200mg cap                  | 1                    |                    |
| acebutolol 400mg cap                  | 1                    |                    |
| atenolol 100mg tab                    | 1                    |                    |
| atenolol 25mg tab                     | 1                    |                    |
| atenolol 50mg tab                     | 1                    |                    |
| betaxolol 10mg tab                    | 1                    |                    |
| betaxolol 20mg tab                    | 1                    |                    |
| bisoprolol fumarate 10mg tab          | 1                    |                    |
| bisoprolol fumarate 5mg tab           | 1                    |                    |
| BYSTOLIC 10MG TAB                     | 1                    |                    |
| BYSTOLIC 2.5MG TAB                    | 1                    |                    |
| BYSTOLIC 20MG TAB                     | 1                    |                    |
| BYSTOLIC 5MG TAB                      | 1                    |                    |
| metoprolol succinate 100mg er tab     | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <i>metoprolol succinate 200mg er tab</i> | 1                    |                    |
| <i>metoprolol succinate 25mg er tab</i>  | 1                    |                    |
| <i>metoprolol succinate 50mg er tab</i>  | 1                    |                    |
| <i>metoprolol tartrate 100mg tab</i>     | 1                    |                    |
| <i>metoprolol tartrate 25mg tab</i>      | 1                    |                    |
| <i>metoprolol tartrate 50mg tab</i>      | 1                    |                    |
| <b>BETA BLOCKERS NON-SELECTIVE</b>       |                      |                    |
| <i>INDERAL 120MG ER CAP</i>              | 1                    |                    |
| <i>INNOPRAN 120MG ER CAP</i>             | 1                    |                    |
| <i>INNOPRAN 80MG ER CAP</i>              | 1                    |                    |
| <i>nadolol 20mg tab</i>                  | 1                    |                    |
| <i>nadolol 40mg tab</i>                  | 1                    |                    |
| <i>nadolol 80mg tab</i>                  | 1                    |                    |
| <i>pindolol 10mg tab</i>                 | 1                    |                    |
| <i>pindolol 5mg tab</i>                  | 1                    |                    |
| <i>propranolol 10mg tab</i>              | 1                    |                    |
| <i>propranolol 120mg er cap</i>          | 1                    |                    |
| <i>propranolol 160mg er cap</i>          | 1                    |                    |
| <i>propranolol 20mg tab</i>              | 1                    |                    |
| <i>propranolol 40mg tab</i>              | 1                    |                    |
| <i>PROPRANOLOL 4MG/ML ORAL SOLN</i>      | 1                    |                    |
| <i>propranolol 60mg er cap</i>           | 1                    |                    |
| <i>propranolol 60mg tab</i>              | 1                    |                    |
| <i>propranolol 80mg er cap</i>           | 1                    |                    |
| <i>propranolol 80mg tab</i>              | 1                    |                    |
| <i>PROPRANOLOL 8MG/ML ORAL SOLN</i>      | 1                    |                    |
| <i>sorine 120mg tab</i>                  | 1                    |                    |
| <i>sorine 160mg tab</i>                  | 1                    |                    |
| <i>sorine 240mg tab</i>                  | 1                    |                    |
| <i>sorine 80mg tab</i>                   | 1                    |                    |
| <i>sotalol 120mg tab</i>                 | 1                    |                    |
| <i>sotalol 160mg tab</i>                 | 1                    |                    |
| <i>sotalol 240mg tab</i>                 | 1                    |                    |
| <i>sotalol 80mg tab</i>                  | 1                    |                    |
| <i>sotalol af 120mg tab</i>              | 1                    |                    |
| <i>sotalol af 160mg tab</i>              | 1                    |                    |
| <i>sotalol af 80mg tab</i>               | 1                    |                    |
| <i>timolol 10mg tab</i>                  | 1                    |                    |
| <i>timolol 20mg tab</i>                  | 1                    |                    |
| <i>timolol 5mg tab</i>                   | 1                    |                    |
| <b>CALCIUM CHANNEL BLOCKERS</b>          |                      |                    |
| <b>CALCIUM CHANNEL BLOCKERS</b>          |                      |                    |
| <i>amlodipine 10mg tab</i>               | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Nombre del medicamento

Nivel de  
Medicamento

## Requisitos/Límites

|                                |   |  |
|--------------------------------|---|--|
| amlodipine 2.5mg tab           | 1 |  |
| amlodipine 5mg tab             | 1 |  |
| cartia 120mg er cap            | 1 |  |
| cartia 180mg er cap            | 1 |  |
| cartia 240mg er cap            | 1 |  |
| cartia 300mg er cap            | 1 |  |
| dilt 120mg er cap              | 1 |  |
| dilt 180mg er cap              | 1 |  |
| dilt 240mg er cap              | 1 |  |
| diltiazem 120mg er (12 hr) cap | 1 |  |
| diltiazem 120mg er (24 hr) cap | 1 |  |
| diltiazem 120mg tab            | 1 |  |
| diltiazem 180mg er cap         | 1 |  |
| diltiazem 180mg er tab         | 1 |  |
| diltiazem 240mg er cap         | 1 |  |
| diltiazem 240mg er tab         | 1 |  |
| diltiazem 300mg er cap         | 1 |  |
| diltiazem 300mg er tab         | 1 |  |
| diltiazem 30mg tab             | 1 |  |
| diltiazem 360mg er cap         | 1 |  |
| diltiazem 360mg er tab         | 1 |  |
| diltiazem 420mg er cap         | 1 |  |
| diltiazem 60mg er cap          | 1 |  |
| diltiazem 60mg tab             | 1 |  |
| diltiazem 90mg er cap          | 1 |  |
| diltiazem 90mg tab             | 1 |  |
| felodipine 10mg er tab         | 1 |  |
| felodipine 2.5mg er tab        | 1 |  |
| felodipine 5mg er tab          | 1 |  |
| isradipine 2.5mg cap           | 1 |  |
| isradipine 5mg cap             | 1 |  |
| matzim 180mg er tab            | 1 |  |
| matzim 240mg er tab            | 1 |  |
| matzim 300mg er tab            | 1 |  |
| matzim 360mg er tab            | 1 |  |
| matzim 420mg er tab            | 1 |  |
| nicardipine 20mg cap           | 1 |  |
| nicardipine 30mg cap           | 1 |  |
| nifedipine 30mg er tab         | 1 |  |
| nifedipine 30mg osmotic er tab | 1 |  |
| nifedipine 60mg er tab         | 1 |  |
| nifedipine 60mg osmotic er tab | 1 |  |
| nifedipine 90mg er tab         | 1 |  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                | Nivel de Medicamento | Requisitos/Límites |
|---------------------------------------|----------------------|--------------------|
| <i>nifedipine 90mg osmotic er tab</i> | 1                    |                    |
| <i>nimodipine 30mg cap</i>            | 1                    |                    |
| <i>nisoldipine 17mg er tab</i>        | 1                    |                    |
| NISOLDIPINE 20MG ER TAB               | 1                    |                    |
| NISOLDIPINE 25.5MG ER TAB             | 1                    |                    |
| NISOLDIPINE 30MG ER TAB               | 1                    |                    |
| <i>nisoldipine 34mg er tab</i>        | 1                    |                    |
| NISOLDIPINE 40MG ER TAB               | 1                    |                    |
| <i>nisoldipine 8.5mg er tab</i>       | 1                    |                    |
| <i>taztia 120mg er cap</i>            | 1                    |                    |
| <i>taztia 180mg er cap</i>            | 1                    |                    |
| <i>taztia 240mg er cap</i>            | 1                    |                    |
| <i>taztia 300mg er cap</i>            | 1                    |                    |
| <i>taztia 360mg er cap</i>            | 1                    |                    |
| <i>tiadylt 120mg er cap</i>           | 1                    |                    |
| <i>tiadylt 180mg er cap</i>           | 1                    |                    |
| <i>tiadylt 240mg er cap</i>           | 1                    |                    |
| <i>tiadylt 300mg er cap</i>           | 1                    |                    |
| <i>tiadylt 360mg er cap</i>           | 1                    |                    |
| <i>tiadylt 420mg er cap</i>           | 1                    |                    |
| VERAPAMIL 100MG ER CAP                | 1                    |                    |
| <i>verapamil 120mg er cap</i>         | 1                    |                    |
| <i>verapamil 120mg er tab</i>         | 1                    |                    |
| <i>verapamil 120mg tab</i>            | 1                    |                    |
| <i>verapamil 180mg er cap</i>         | 1                    |                    |
| <i>verapamil 180mg er tab</i>         | 1                    |                    |
| VERAPAMIL 200MG ER CAP                | 1                    |                    |
| <i>verapamil 240mg er cap</i>         | 1                    |                    |
| <i>verapamil 240mg er tab</i>         | 1                    |                    |
| VERAPAMIL 300MG ER CAP                | 1                    |                    |
| VERAPAMIL 360MG ER CAP                | 1                    |                    |
| <i>verapamil 40mg tab</i>             | 1                    |                    |
| <i>verapamil 80mg tab</i>             | 1                    |                    |
| <b>CARDIOTONICS</b>                   |                      |                    |
| <b>CARDIAC GLYCOSIDES</b>             |                      |                    |
| <i>digitek 0.125mg tab</i>            | 1                    |                    |
| <i>digitek 0.25mg tab</i>             | 1                    |                    |
| <i>digox 125mcg tab</i>               | 1                    |                    |
| <i>digox 250mcg tab</i>               | 1                    |                    |
| DIGOXIN 0.05MG/ML ORAL SOLN           | 1                    |                    |
| <i>digoxin 0.125mg tab</i>            | 1                    |                    |
| <i>digoxin 0.25mg tab</i>             | 1                    |                    |
| <b>CARDIOVASCULAR AGENTS - MISC.</b>  |                      |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Nombre del medicamento

Nivel de  
Medicamento

## Requisitos/Límites

**CARDIOVASCULAR AGENTS MISC. - COMBINATIONS**

|   |   |                  |
|---|---|------------------|
| <i>amlodipine 10mg/atorvastatin 10mg tab</i>  | 1 |                  |
| <i>amlodipine 10mg/atorvastatin 20mg tab</i>  | 1 |                  |
| <i>amlodipine 10mg/atorvastatin 40mg tab</i>  | 1 |                  |
| <i>amlodipine 10mg/atorvastatin 80mg tab</i>  | 1 |                  |
| <i>amlodipine 2.5mg/atorvastatin 10mg tab</i> | 1 |                  |
| <i>amlodipine 2.5mg/atorvastatin 20mg tab</i> | 1 |                  |
| <i>amlodipine 2.5mg/atorvastatin 40mg tab</i> | 1 |                  |
| <i>amlodipine 5mg/atorvastatin 10mg tab</i>   | 1 |                  |
| <i>amlodipine 5mg/atorvastatin 20mg tab</i>   | 1 |                  |
| <i>amlodipine 5mg/atorvastatin 40mg tab</i>   | 1 |                  |
| <i>amlodipine 5mg/atorvastatin 80mg tab</i>   | 1 |                  |
| <i>BIDIL 37.5-20MG TAB</i>                    | 1 |                  |
| <i>ENTRESTO 24-26MG TAB</i>                   | 1 | QL=60 EA/30 Días |
| <i>ENTRESTO 49-51MG TAB</i>                   | 1 | QL=60 EA/30 Días |
| <i>ENTRESTO 97-103MG TAB</i>                  | 1 | QL=60 EA/30 Días |

**PROSTAGLANDIN VASODILATORS**

|                                   |   |                          |
|-----------------------------------|---|--------------------------|
| <i>ORENITRAM 0.125MG ER TAB</i>   | 1 | PA                       |
| <i>ORENITRAM 0.25MG ER TAB</i>    | 1 | NDS PA                   |
| <i>ORENITRAM 1MG ER TAB</i>       | 1 | NDS PA                   |
| <i>ORENITRAM 2.5MG ER TAB</i>     | 1 | NDS PA                   |
| <i>ORENITRAM 5MG ER TAB</i>       | 1 | NDS PA                   |
| <i>VENTAVIS 10MCG/ML INH SOLN</i> | 1 | NDS PA QL=270 ML/30 Días |
| <i>VENTAVIS 20MCG/ML INH SOLN</i> | 1 | NDS PA QL=270 ML/30 Días |

**PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS**

|  |   |                          |
|--|---|--------------------------|
| <i>ambrisentan 10mg tab</i>            | 1 | PA QL=30 EA/30 Días      |
| <i>ambrisentan 5mg tab</i>             | 1 | PA QL=30 EA/30 Días      |
| <i>bosentan 125mg tab</i>              | 1 | PA QL=60 EA/30 Días      |
| <i>bosentan 62.5mg tab</i>             | 1 | PA QL=60 EA/30 Días      |
| <i>OPSUMIT 10MG TAB</i>                | 1 | NDS PA QL=30 EA/30 Días  |
| <i>TRACLEER 32MG TAB FOR ORAL SUSP</i> | 1 | NDS PA QL=120 EA/30 Días |

**PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS**

|                            |   |    |
|----------------------------|---|----|
| <i>alyq 20mg tab</i>       | 1 | PA |
| <i>sildenafil 20mg tab</i> | 1 | PA |
| <i>tadalafil 20mg tab</i>  | 1 | PA |

**PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST**

|                            |   |        |
|----------------------------|---|--------|
| <i>UPTRAVI 1000MCG TAB</i> | 1 | NDS PA |
| <i>UPTRAVI 1200MCG TAB</i> | 1 | NDS PA |
| <i>UPTRAVI 1400MCG TAB</i> | 1 | NDS PA |
| <i>UPTRAVI 1600MCG TAB</i> | 1 | NDS PA |
| <i>UPTRAVI 200MCG TAB</i>  | 1 | NDS PA |
| <i>UPTRAVI 400MCG TAB</i>  | 1 | NDS PA |
| <i>UPTRAVI 600MCG TAB</i>  | 1 | NDS PA |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites       |
|--|----------------------|--------------------------|
| UPTRAVI 800MCG TAB   | 1                    | NDS PA                   |
| UPTRAVI TITRATION PACK   | 1                    | NDS PA QL=200 EA/28 Días |
| <b>PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR</b> |                      |                          |
| ADEMPAS 0.5MG TAB  | 1                    | NDS PA                   |
| ADEMPAS 1.5MG TAB  | 1                    | NDS PA                   |
| ADEMPAS 1MG TAB  | 1                    | NDS PA                   |
| ADEMPAS 2.5MG TAB  | 1                    | NDS PA                   |
| ADEMPAS 2MG TAB  | 1                    | NDS PA                   |
| <b>SINUS NODE INHIBITORS</b>                                     |                      |                          |
| CORLANOR 5MG TAB   | 1                    | PA                       |
| CORLANOR 5MG/5ML ORAL SOLN                                       | 1                    | PA                       |
| CORLANOR 7.5MG TAB   | 1                    | PA                       |
| <b>TRANSTHYRETIN STABILIZERS</b>                                 |                      |                          |
| VYNDAMAX 61MG CAP  | 1                    | NDS PA QL=30 EA/30 Días  |
| VYNDAQEL 20MG CAP  | 1                    | NDS PA QL=120 EA/30 Días |
| <b>VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)</b>     |                      |                          |
| VERQUVO 10MG TAB   | 1                    | PA QL=30 EA/30 Días      |
| VERQUVO 2.5MG TAB  | 1                    | PA QL=30 EA/30 Días      |
| VERQUVO 5MG TAB  | 1                    | PA QL=30 EA/30 Días      |
| <b>CEPHALOSPORINS</b>  |                      |                          |
| <b>CEPHALOSPORIN COMBINATIONS</b>                                |                      |                          |
| AVYCAZ 500-2000MG INJ  | 1                    | NDS                      |
| ZERBAXA 1000-500MG INJ   | 1                    | NDS                      |
| <b>CEPHALOSPORINS - 1ST GENERATION</b>                           |                      |                          |
| CEFADROXIL 1000MG TAB  | 1                    |                          |
| <i>cefadroxil 100mg/ml susp</i>                                  | 1                    |                          |
| <i>cefadroxil 500mg cap</i>                                      | 1                    |                          |
| <i>cefadroxil 50mg/ml susp</i>                                   | 1                    |                          |
| <i>cefazolin 1000mg inj</i>                                      | 1                    |                          |
| <i>cefazolin 200mg/ml inj</i>                                    | 1                    |                          |
| <i>cefazolin 500mg inj</i>                                       | 1                    |                          |
| <i>cephalexin 250mg cap</i>                                      | 1                    |                          |
| <i>cephalexin 25mg/ml susp</i>                                   | 1                    |                          |
| <i>cephalexin 500mg cap</i>                                      | 1                    |                          |
| <i>cephalexin 50mg/ml susp</i>                                   | 1                    |                          |
| <b>CEPHALOSPORINS - 2ND GENERATION</b>                           |                      |                          |
| CEFACLOR 250MG CAP   | 1                    |                          |
| CEFACLOR 500MG CAP   | 1                    |                          |
| <i>cefotetan 1000mg inj</i>                                      | 1                    |                          |
| <i>cefotetan 2000mg inj</i>                                      | 1                    |                          |
| <i>cefoxitin 1000mg inj</i>                                      | 1                    |                          |
| <i>cefoxitin 2000mg inj</i>                                      | 1                    |                          |
| <i>cefoxitin 200mg/ml inj</i>                                    | 1                    |                          |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <i>cefprozil 250mg tab</i>               | 1                    |                    |
| <i>cefprozil 25mg/ml susp</i>            | 1                    |                    |
| <i>cefprozil 500mg tab</i>               | 1                    |                    |
| <i>cefprozil 50mg/ml susp</i>            | 1                    |                    |
| <i>cefuroxime 1500mg inj</i>             | 1                    |                    |
| <i>cefuroxime 250mg tab</i>              | 1                    |                    |
| <i>cefuroxime 500mg tab</i>              | 1                    |                    |
| <i>cefuroxime 750mg inj</i>              | 1                    |                    |
| <i>cefuroxime 95mg/ml inj</i>            | 1                    |                    |
| <b>CEPHALOSPORINS - 3RD GENERATION</b>   |                      |                    |
| <i>cefdinir 25mg/ml susp</i>             | 1                    |                    |
| <i>cefdinir 300mg cap</i>                | 1                    |                    |
| <i>cefdinir 50mg/ml susp</i>             | 1                    |                    |
| <i>cefixime 20mg/ml susp</i>             | 1                    |                    |
| <i>cefixime 400mg cap</i>                | 1                    |                    |
| <i>cefixime 40mg/ml susp</i>             | 1                    |                    |
| <i>cefpodoxime 100mg tab</i>             | 1                    |                    |
| <i>cefpodoxime 10mg/ml susp</i>          | 1                    |                    |
| <i>cefpodoxime 200mg tab</i>             | 1                    |                    |
| <i>cefpodoxime 20mg/ml susp</i>          | 1                    |                    |
| <i>ceftazidime 1000mg inj</i>            | 1                    |                    |
| <i>ceftazidime 2000mg inj</i>            | 1                    |                    |
| <i>ceftazidime 200mg/ml inj</i>          | 1                    |                    |
| <i>ceftriaxone 1000mg inj</i>            | 1                    |                    |
| <i>ceftriaxone 100mg/ml inj</i>          | 1                    |                    |
| <i>ceftriaxone 2000mg inj</i>            | 1                    |                    |
| <i>ceftriaxone 250mg inj</i>             | 1                    |                    |
| <i>ceftriaxone 500mg inj</i>             | 1                    |                    |
| <i>tazicef 1gm inj</i>                   | 1                    |                    |
| <i>tazicef 2gm inj</i>                   | 1                    |                    |
| <i>tazicef 6gm inj</i>                   | 1                    |                    |
| <b>CEPHALOSPORINS - 4TH GENERATION</b>   |                      |                    |
| <i>cefepime 1000mg inj</i>               | 1                    |                    |
| <i>cefepime 2000mg inj</i>               | 1                    |                    |
| <b>CEPHALOSPORINS - 5TH GENERATION</b>   |                      |                    |
| <i>TEFLARO 400MG INJ</i>                 | 1                    | NDS                |
| <i>TEFLARO 600MG INJ</i>                 | 1                    | NDS                |
| <b>CONTRACEPTIVES</b>                    |                      |                    |
| <b>COMBINATION CONTRACEPTIVES - ORAL</b> |                      |                    |
| <i>altavera 28 day pack</i>              | 1                    |                    |
| <i>alyacen 1/35 pack</i>                 | 1                    |                    |
| <i>amethia 91 day pack</i>               | 1                    |                    |
| <i>apri 28 day pack</i>                  | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| aranelle 28 pack   | 1                    |                    |
| ashlyna 91 day pack  | 1                    |                    |
| aubra 28 day pack  | 1                    |                    |
| aviane 28 pack   | 1                    |                    |
| balziva 28 day pack  | 1                    |                    |
| blisovi 21 fe 1.5/30 28 day pack   | 1                    |                    |
| blisovi 24 fe 1/20 28 day pack   | 1                    |                    |
| briellyn 28 day pack   | 1                    |                    |
| camreselo 91 day pack  | 1                    |                    |
| caziant 28 day pack  | 1                    |                    |
| cryselle 28 pack   | 1                    |                    |
| cyclafem 1/35 28 day pack  | 1                    |                    |
| cyclafem 7/7/7 28 day pack   | 1                    |                    |
| cyred 28 day pack  | 1                    |                    |
| desogestrel 0.15mg/ethinyl estradiol 0.01mg/ethinyl estradiol 0.02mg 28 day pack     | 1                    |                    |
| desogestrel/ethinyl estradiol/inert ingredients 0.15mg-0.03mg-1mg pack               | 1                    |                    |
| dolishale 28 day pack  | 1                    |                    |
| drospirenone 3mg/ethinyl estradiol 0.02mg/inert ingredients 1mg pack                 | 1                    |                    |
| drospirenone 3mg/ethinyl estradiol 0.03mg/inert ingredients 1mg pack                 | 1                    |                    |
| emoquette pack   | 1                    |                    |
| enpresse 28 day pack   | 1                    |                    |
| enskyce 28 day pack  | 1                    |                    |
| estarrylla 28 day pack   | 1                    |                    |
| ethinyl estradiol 0.01mg/ethinyl estradiol 0.02mg/levonorgestrel 0.1mg 91 day pack   | 1                    |                    |
| ethinyl estradiol 0.01mg/ethinyl estradiol 0.03mg/levonorgestrel 0.15mg 91 day pack  | 1                    |                    |
| ethinyl estradiol 0.025mg/ferrous fumarate 75mg/norethindrone 0.8mg pack             | 1                    |                    |
| ethinyl estradiol 0.025mg/inert/norgestimate 0.18mg/0.215mg/0.25mg pack              | 1                    |                    |
| ethinyl estradiol 0.02mg/ferrous fumarate 75mg/norethindrone acetate 1mg 21 day pack | 1                    |                    |
| ethinyl estradiol 0.02mg/inert ingredients 1mg/levonorgestrel 0.1mg pack             | 1                    |                    |
| ethinyl estradiol 0.02mg/norethindrone acetate 1mg pack                              | 1                    |                    |
| ethinyl estradiol 0.035mg/ethynodiol diacetate 1mg/inert ingredients 1mg pack        | 1                    |                    |

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| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites |
|---|----------------------|--------------------|
| <i>ethinyl estradiol 0.035mg/ferrous fumarate<br/>75mg/norethindrone 0.4mg pack</i>     | 1                    |                    |
| <i>ethinyl estradiol 0.035mg/inert ingredients<br/>1mg/norgestimate 0.25mg pack</i>     | 1                    |                    |
| <i>ethinyl estradiol 0.035mg/inert/norgestimate<br/>0.18mg/0.215mg/0.25mg pack</i>      | 1                    |                    |
| <i>ethinyl estradiol 0.03mg/inert ingredients<br/>1mg/levonorgestrel 0.15mg pack</i>    | 1                    |                    |
| <i>ethinyl estradiol 0.05mg/ethynodiol diacetate<br/>1mg/inert ingredients 1mg pack</i> | 1                    |                    |
| <i>ethinyl estradiol/inert ingredients/levonorgestrel<br/>0.03-1-0.15mg pack(84)</i>    | 1                    |                    |
| <i>ethinyl estradiol/levonorgestrel 91 day pack</i>                                     | 1                    |                    |
| <i>falmina 28 day pack</i>  | 1                    |                    |
| <i>fayosim 91 day pack</i>  | 1                    |                    |
| <i>femynor 28 day pack</i>  | 1                    |                    |
| <i>hailey 24 fe 28 day pack</i>   | 1                    |                    |
| <i>iclevia 91 day pack</i>  | 1                    |                    |
| <i>introvale 91 day pack</i>  | 1                    |                    |
| <i>isibloom 28 day pack</i>   | 1                    |                    |
| <i>jasmiel 28 day pack</i>  | 1                    |                    |
| <i>juleber 28 day pack</i>  | 1                    |                    |
| <i>junel 1.5/30 21 day pack</i>   | 1                    |                    |
| <i>junel 1/20 21 day pack</i>   | 1                    |                    |
| <i>junel fe 1.5/30 28 day pack</i>  | 1                    |                    |
| <i>junel fe 1/20 28 day pack</i>  | 1                    |                    |
| <i>junel fe 24 1/20 28 day pack</i>   | 1                    |                    |
| <i>kaitlib fe 28 day pack</i>   | 1                    |                    |
| <i>kariva 28 day pack</i>   | 1                    |                    |
| <i>kelnor 1/35 28 day pack</i>  | 1                    |                    |
| <i>kelnor 1/50 28 day pack</i>  | 1                    |                    |
| <i>kurvelo pack</i>   | 1                    |                    |
| <i>larin 1.5/30 pack</i>  | 1                    |                    |
| <i>larin 1/20 pack</i>  | 1                    |                    |
| <i>larin fe 1.5/30 pack</i>   | 1                    |                    |
| <i>larin fe 1/20 pack</i>   | 1                    |                    |
| <i>larissa 28 day pack</i>  | 1                    |                    |
| <i>layolis fe 28 pack</i>   | 1                    |                    |
| <i>leena 28 day pack</i>  | 1                    |                    |
| <i>lessina 28 day pack</i>  | 1                    |                    |
| <i>levonest 28 day pack</i>   | 1                    |                    |
| <i>levonorgestrel-ethinyl estradiol<br/>0.05-30/0.075-40/0.125-30mg-mcg pack</i>        | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <i>levora 0.15/30 28 day pack</i>        | 1                    |                    |
| <i>loestrin fe 1/20 28 day pack</i>      | 1                    |                    |
| <i>loryna 28 day pack</i>                | 1                    |                    |
| <i>low-ogestrel 28 day pack</i>          | 1                    |                    |
| <i>lutera 28 day pack</i>                | 1                    |                    |
| <i>marlissa 28 day pack</i>              | 1                    |                    |
| <i>microgestin 1.5/30 21 day pack</i>    | 1                    |                    |
| <i>microgestin 1/20 21 day pack</i>      | 1                    |                    |
| <i>microgestin fe 1.5/30 28 day pack</i> | 1                    |                    |
| <i>microgestin fe 1/20 28 day pack</i>   | 1                    |                    |
| <i>mili 28 day pack</i>                  | 1                    |                    |
| <b>NATAZIA 28 DAY PACK</b>               | 1                    |                    |
| <i>necon 0.5/35 28 day pack</i>          | 1                    |                    |
| <i>nikki 28 day pack</i>                 | 1                    |                    |
| <i>nortrel 0.5/35 28 day pack</i>        | 1                    |                    |
| <i>nortrel 1/35 21 day pack</i>          | 1                    |                    |
| <i>nortrel 1/35 28 day pack</i>          | 1                    |                    |
| <i>nortrel 7/7/7 28 day pack</i>         | 1                    |                    |
| <i>nylia 7/7/7 28 day pack</i>           | 1                    |                    |
| <i>nymyo 28 day pack</i>                 | 1                    |                    |
| <i>ocella 28 day pack</i>                | 1                    |                    |
| <i>orsythia 28 day pack</i>              | 1                    |                    |
| <i>pimtrea pack</i>                      | 1                    |                    |
| <i>pirmella 1/35 28 day pack</i>         | 1                    |                    |
| <i>portia 28 day pack</i>                | 1                    |                    |
| <i>previfem 28 day pack</i>              | 1                    |                    |
| <i>reclipsen 28 day pack</i>             | 1                    |                    |
| <i>rivilsa 91 day pack</i>               | 1                    |                    |
| <i>setlakin 91 day pack</i>              | 1                    |                    |
| <i>sprintec 28 day pack</i>              | 1                    |                    |
| <i>sronyx 28 day pack</i>                | 1                    |                    |
| <i>syeda 28 day pack</i>                 | 1                    |                    |
| <i>tarina 24 fe 1/20 28 day pack</i>     | 1                    |                    |
| <i>tarina fe 1/20 28 day pack</i>        | 1                    |                    |
| <i>tilia fe pack</i>                     | 1                    |                    |
| <i>tri-estarrylla 28 day pack</i>        | 1                    |                    |
| <i>tri-legest 28 day pack</i>            | 1                    |                    |
| <i>tri-lo- estarrylla 28 day pack</i>    | 1                    |                    |
| <i>tri-lo-sprintec 28 day pack</i>       | 1                    |                    |
| <i>tri-mili 28 day pack</i>              | 1                    |                    |
| <i>tri-nymyo 28 day pack</i>             | 1                    |                    |
| <i>tri-previfem 28 day pack</i>          | 1                    |                    |
| <i>tri-sprintec 28 day pack</i>          | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites  |
|---|----------------------|---------------------|
| tri-vylibra 28 day pack   | 1                    |                     |
| tri-vylibra lo 28 day pack  | 1                    |                     |
| trivora 28 day pack   | 1                    |                     |
| velivet 28 day pack   | 1                    |                     |
| vestura 3-0.02mg pack   | 1                    |                     |
| vienna 28 day pack  | 1                    |                     |
| vyfemla 28 day pack   | 1                    |                     |
| vylibra 28 day pack   | 1                    |                     |
| wymzya fe 28 day pack   | 1                    |                     |
| zarah pack  | 1                    |                     |
| zovia 1/35e 28 day pack   | 1                    |                     |
| <b>COMBINATION CONTRACEPTIVES - TRANSDERMAL</b>                   |                      |                     |
| xulane 150-35mcg/24hr patch                                       | 1                    |                     |
| zafemy 150-35mcg/24hr patch                                       | 1                    |                     |
| <b>COMBINATION CONTRACEPTIVES - VAGINAL</b>                       |                      |                     |
| eluryng 0.120-0.015mg/24hr vaginal system                         | 1                    |                     |
| ethinyl estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system | 1                    |                     |
| <b>PROGESTIN CONTRACEPTIVES - INJECTABLE</b>                      |                      |                     |
| medroxyprogesterone acetate 150mg/ml inj                          | 1                    |                     |
| medroxyprogesterone acetate 150mg/ml syringe                      | 1                    |                     |
| <b>PROGESTIN CONTRACEPTIVES - ORAL</b>                            |                      |                     |
| camila 28 day 0.35mg pack   | 1                    |                     |
| deblitane 28 day 0.35mg pack                                      | 1                    |                     |
| errin 28 day 0.35mg pack  | 1                    |                     |
| incassia 28 day 0.35mg pack                                       | 1                    |                     |
| lyeq 28 day 0.35mg pack   | 1                    |                     |
| lyza 0.35mg pack  | 1                    |                     |
| nora-be 28 day 0.35mg pack  | 1                    |                     |
| norethindrone 0.35mg pack   | 1                    |                     |
| sharobel 28 day 0.35mg pack                                       | 1                    |                     |
| SLYND 4MG PACK  | 1                    |                     |
| <b>CORTICOSTEROIDS</b>  |                      |                     |
| <b>GLUCOCORTICOSTEROIDS</b>                                       |                      |                     |
| budesonide 3mg dr cap   | 1                    |                     |
| budesonide 9mg er tab   | 1                    | PA QL=30 EA/30 Días |
| dexamethasone 0.1mg/ml oral soln                                  | 1                    |                     |
| dexamethasone 0.5mg tab   | 1                    |                     |
| dexamethasone 0.75mg tab  | 1                    |                     |
| dexamethasone 1.5mg tab   | 1                    |                     |
| DEXAMETHASONE 1MG TAB   | 1                    |                     |
| DEXAMETHASONE 2MG TAB   | 1                    |                     |
| dexamethasone 4mg tab   | 1                    |                     |

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| Nombre del medicamento                  | Nivel de Medicamento | Requisitos/Límites  |
|---|----------------------|---------------------|
| dexamethasone 6mg tab                   | 1                    |                     |
| hydrocortisone 10mg tab                 | 1                    |                     |
| hydrocortisone 20mg tab                 | 1                    |                     |
| hydrocortisone 5mg tab                  | 1                    |                     |
| MEDROL 2MG TAB                          | 1                    | PA BvD              |
| methylprednisolone 16mg tab             | 1                    | PA BvD              |
| methylprednisolone 32mg tab             | 1                    | PA BvD              |
| methylprednisolone 4mg pack             | 1                    |                     |
| methylprednisolone 4mg tab              | 1                    | PA BvD              |
| methylprednisolone 8mg tab              | 1                    | PA BvD              |
| prednisolone 10mg odt                   | 1                    | PA BvD              |
| prednisolone 15mg odt                   | 1                    | PA BvD              |
| prednisolone 1mg/ml oral soln           | 1                    | PA BvD              |
| prednisolone 30mg odt                   | 1                    | PA BvD              |
| PREDNISOLONE 3MG/ML ORAL SOLN           | 1                    | PA BvD              |
| prednisone 10mg tab                     | 1                    | PA BvD              |
| prednisone 1mg tab                      | 1                    | PA BvD              |
| PREDNISONE 1MG/ML ORAL SOLN             | 1                    | PA BvD              |
| prednisone 2.5mg tab                    | 1                    | PA BvD              |
| prednisone 20mg tab                     | 1                    | PA BvD              |
| prednisone 50mg tab                     | 1                    | PA BvD              |
| prednisone 5mg tab                      | 1                    | PA BvD              |
| PREDNISONE 5MG/ML ORAL SOLN             | 1                    | PA BvD              |
| <b>MINERALOCORTICOIDS</b>               |                      |                     |
| fludrocortisone acetate 0.1mg tab       | 1                    |                     |
| <b>COUGH/COLD/ALLERGY</b>               |                      |                     |
| <b>MUCOLYTICS</b>                       |                      |                     |
| acetylcysteine 100mg/ml inh soln        | 1                    | PA BvD              |
| acetylcysteine 200mg/ml inh soln        | 1                    | PA BvD              |
| <b>DERMATOLOGICALS</b>                  |                      |                     |
| <b>ACNE PRODUCTS</b>                    |                      |                     |
| accutane 20mg cap                       | 1                    |                     |
| accutane 30mg cap                       | 1                    |                     |
| accutane 40mg cap                       | 1                    |                     |
| adapalene 0.1% cream                    | 1                    | PA QL=45 GM/30 Días |
| adapalene 0.1% gel                      | 1                    | PA QL=45 GM/30 Días |
| adapalene 0.3% gel                      | 1                    | PA QL=45 GM/30 Días |
| adapalene/benzoyl peroxide 0.1-2.5% gel | 1                    | PA QL=45 GM/30 Días |
| amnesteem 10mg cap                      | 1                    |                     |
| amnesteem 20mg cap                      | 1                    |                     |
| amnesteem 40mg cap                      | 1                    |                     |
| avita 0.025% cream                      | 1                    | PA QL=45 GM/30 Días |
| avita 0.025% gel                        | 1                    | PA QL=45 GM/30 Días |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                 | Nivel de Medicamento | Requisitos/Límites  |
|--|----------------------|---------------------|
| claravis 10mg cap                      | 1                    |                     |
| claravis 20mg cap                      | 1                    |                     |
| claravis 30mg cap                      | 1                    |                     |
| claravis 40mg cap                      | 1                    |                     |
| clindacin 1% pad                       | 1                    | QL=120 EA/30 Días   |
| clindamycin 1% gel                     | 1                    | QL=75 GM/30 Días    |
| clindamycin 1% lotion                  | 1                    | QL=60 ML/30 Días    |
| clindamycin 1% pad                     | 1                    | QL=120 EA/30 Días   |
| clindamycin 1% topical soln            | 1                    | QL=60 ML/30 Días    |
| clindamycin/benzoyl peroxide 1-5% gel  | 1                    | QL=100 GM/30 Días   |
| EPIDUO 0.3-2.5% GEL                    | 1                    | PA QL=60 GM/30 Días |
| ERY 2% PAD                             | 1                    | QL=60 EA/30 Días    |
| erythromycin 2% gel                    | 1                    | QL=60 GM/30 Días    |
| erythromycin 2% topical soln           | 1                    | QL=60 ML/30 Días    |
| erythromycin/benzoyl peroxide 5-3% gel | 1                    | QL=46.60 GM/30 Días |
| isotretinoin 10mg cap                  | 1                    |                     |
| isotretinoin 20mg cap                  | 1                    |                     |
| isotretinoin 30mg cap                  | 1                    |                     |
| isotretinoin 40mg cap                  | 1                    |                     |
| myorisan 10mg cap                      | 1                    |                     |
| myorisan 20mg cap                      | 1                    |                     |
| myorisan 30mg cap                      | 1                    |                     |
| myorisan 40mg cap                      | 1                    |                     |
| sulfacetamide sodium 10% lotion        | 1                    |                     |
| tretinooin 0.01% gel                   | 1                    | PA QL=45 GM/30 Días |
| tretinooin 0.025% cream                | 1                    | PA QL=45 GM/30 Días |
| tretinooin 0.025% gel                  | 1                    | PA QL=45 GM/30 Días |
| tretinooin 0.04% gel                   | 1                    | PA QL=50 GM/30 Días |
| tretinooin 0.05% cream                 | 1                    | PA QL=45 GM/30 Días |
| tretinooin 0.05% gel                   | 1                    | PA QL=45 GM/30 Días |
| tretinooin 0.1% cream                  | 1                    | PA QL=45 GM/30 Días |
| tretinooin 0.1% gel                    | 1                    | PA QL=50 GM/30 Días |
| zenatane 10mg cap                      | 1                    |                     |
| zenatane 20mg cap                      | 1                    |                     |
| zenatane 30mg cap                      | 1                    |                     |
| zenatane 40mg cap                      | 1                    |                     |
| <b>ANTIBIOTICS - TOPICAL</b>           |                      |                     |
| gentamicin 0.1% cream                  | 1                    | QL=30 GM/30 Días    |
| gentamicin 0.1% ointment               | 1                    | QL=120 GM/30 Días   |
| mupirocin 2% ointment                  | 1                    | QL=220 GM/30 Días   |
| <b>ANTIFUNGALS - TOPICAL</b>           |                      |                     |
| ciclopirox 0.77% cream                 | 1                    | QL=90 GM/30 Días    |
| ciclopirox 0.77% gel                   | 1                    | QL=100 GM/30 Días   |

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| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites           |
|---|----------------------|------------------------------|
| ciclopirox 0.77% lotion                                       | 1                    | QL=60 ML/30 Días             |
| ciclopirox 1% shampoo   | 1                    | QL=120 ML/30 Días            |
| ciclopirox 8% topical soln                                    | 1                    | QL=13.20 ML/30 Días          |
| clotrimazole 1% cream   | 1                    | QL=45 GM/30 Días             |
| clotrimazole 1% topical soln                                  | 1                    | QL=30 ML/30 Días             |
| clotrimazole/betamethasone 1-0.05% cream                      | 1                    | QL=90 GM/30 Días             |
| clotrimazole/betamethasone 1-0.05% lotion                     | 1                    | QL=60 ML/30 Días             |
| econazole nitrate 1% cream                                    | 1                    | QL=85 GM/30 Días             |
| ketoconazole 2% cream   | 1                    | QL=120 GM/30 Días            |
| ketoconazole 2% shampoo                                       | 1                    | QL=240 ML/30 Días            |
| NAFTIFINE 1% CREAM  | 1                    | QL=60 GM/30 Días             |
| naftifine 2% cream  | 1                    | QL=60 GM/30 Días             |
| nyamyc 100000unit/gm topical powder                           | 1                    | QL=60 GM/30 Días             |
| nystatin 100000 unit/gm ointment                              | 1                    | QL=30 GM/30 Días             |
| nystatin 100000unit/gm topical powder                         | 1                    | QL=60 GM/30 Días             |
| nystatin 100000unit/ml cream                                  | 1                    | QL=30 GM/30 Días             |
| nystop 100000unit/gm topical powder                           | 1                    | QL=60 GM/30 Días             |
| <b>ANTI-INFLAMMATORY AGENTS - TOPICAL</b>                     |                      |                              |
| diclofenac sodium 1% gel                                      | 1                    | QL=1000 GM/30 Días           |
| diclofenac sodium 1.5% topical soln                           | 1                    | QL=300 ML/30 Días            |
| <b>ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL</b> |                      |                              |
| diclofenac sodium 3% gel                                      | 1                    | PA QL=100 GM/30 Días         |
| FLUOROURACIL 2% TOPICAL SOLN                                  | 1                    | QL=10 ML/30 Días             |
| fluorouracil 5% cream   | 1                    | QL=40 GM/30 Días             |
| FLUOROURACIL 5% TOPICAL SOLN                                  | 1                    | QL=10 ML/30 Días             |
| TARGRETIN 1% GEL  | 1                    | NDS PA NSO QL=60 GM/30 Días  |
| VALCHLOR 0.016% GEL   | 1                    | NDS PA NSO QL=240 GM/30 Días |
| <b>ANTIPSORIATICS</b>   |                      |                              |
| acitretin 10mg cap  | 1                    |                              |
| acitretin 17.5mg cap  | 1                    |                              |
| acitretin 25mg cap  | 1                    |                              |
| calcipotriene 0.005% cream                                    | 1                    | PA QL=120 GM/30 Días         |
| calcipotriene 0.005% ointment                                 | 1                    | PA QL=120 GM/30 Días         |
| calcipotriene 0.005% topical soln                             | 1                    | PA QL=120 ML/30 Días         |
| methoxsalen 10mg cap  | 1                    |                              |
| SKYRIZI 150MG DOSE PACK 75MG/0.83ML                           | 1                    | PA QL=7 EA/365 Días          |
| SKYRIZI 150MG/ML AUTO-INJECTOR                                | 1                    | PA QL=7 ML/365 Días          |
| SKYRIZI 150MG/ML SYRINGE                                      | 1                    | PA QL=7 ML/365 Días          |
| STELARA 45MG/0.5ML INJ  | 1                    | PA QL=.50 ML/28 Días         |
| STELARA 45MG/0.5ML SYRINGE                                    | 1                    | PA QL=.50 ML/28 Días         |
| STELARA 90MG/ML SYRINGE                                       | 1                    | PA QL=1 ML/28 Días           |
| TALTZ 80MG/ML AUTO-INJECTOR                                   | 1                    | NDS PA QL=3 ML/28 Días       |
| TALTZ 80MG/ML SYRINGE   | 1                    | NDS PA QL=3 ML/28 Días       |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                           | Nivel de Medicamento | Requisitos/Límites     |
|--|----------------------|------------------------|
| <i>tazarotene 0.1% cream</i>                     | 1                    | PA QL=60 GM/30 Días    |
| TAZORAC 0.05% CREAM                              | 1                    | PA QL=60 GM/30 Días    |
| TREMFYA 100MG/ML AUTO-INJECTOR                   | 1                    | NDS PA QL=2 ML/28 Días |
| TREMFYA 100MG/ML SYRINGE                         | 1                    | NDS PA QL=2 ML/28 Días |
| <b>ANTISEBorrheic PRODUCTS</b>                   |                      |                        |
| <i>selenium sulfide 2.5% shampoo</i>             | 1                    |                        |
| <b>ANTIVIRALS - TOPICAL</b>                      |                      |                        |
| <i>acyclovir 5% ointment</i>                     | 1                    | QL=30 GM/30 Días       |
| <b>BURN PRODUCTS</b>                             |                      |                        |
| <i>silver sulfadiazine 1% cream</i>              | 1                    |                        |
| <i>ssd 1% cream</i>                              | 1                    |                        |
| SULFAMYLYON 85MG/GM CREAM                        | 1                    |                        |
| <b>CORTICOSTEROIDS - TOPICAL</b>                 |                      |                        |
| <i>ala-cort 1% cream</i>                         | 1                    | QL=240 GM/30 Días      |
| <i>ala-cort 2.5% cream</i>                       | 1                    | QL=454 GM/30 Días      |
| <i>alclometasone dipropionate 0.05% cream</i>    | 1                    | QL=120 GM/30 Días      |
| <i>alclometasone dipropionate 0.05% ointment</i> | 1                    | QL=120 GM/30 Días      |
| <i>betamethasone 0.05% aug cream</i>             | 1                    | QL=100 GM/30 Días      |
| <i>betamethasone 0.05% aug lotion</i>            | 1                    | QL=120 ML/30 Días      |
| <i>betamethasone 0.05% aug ointment</i>          | 1                    | QL=100 GM/30 Días      |
| <i>betamethasone 0.05% cream</i>                 | 1                    | QL=90 GM/30 Días       |
| BETAMETHASONE 0.05% GEL                          | 1                    | QL=100 GM/30 Días      |
| <i>betamethasone 0.05% lotion</i>                | 1                    | QL=120 ML/30 Días      |
| <i>betamethasone 0.05% ointment</i>              | 1                    | QL=90 GM/30 Días       |
| <i>betamethasone 0.1% cream</i>                  | 1                    | QL=180 GM/30 Días      |
| <i>betamethasone 0.1% lotion</i>                 | 1                    | QL=120 ML/30 Días      |
| <i>betamethasone 0.1% ointment</i>               | 1                    | QL=180 GM/30 Días      |
| <i>clobetasol propionate 0.05% cream</i>         | 1                    | QL=120 GM/30 Días      |
| <i>clobetasol propionate 0.05% e cream</i>       | 1                    | QL=120 GM/30 Días      |
| <i>clobetasol propionate 0.05% foam</i>          | 1                    | QL=100 GM/30 Días      |
| <i>clobetasol propionate 0.05% gel</i>           | 1                    | QL=120 GM/30 Días      |
| <i>clobetasol propionate 0.05% lotion</i>        | 1                    | QL=118 ML/30 Días      |
| <i>clobetasol propionate 0.05% ointment</i>      | 1                    | QL=120 GM/30 Días      |
| <i>clobetasol propionate 0.05% shampoo</i>       | 1                    | QL=236 ML/30 Días      |
| <i>clobetasol propionate 0.05% spray</i>         | 1                    | QL=125 ML/30 Días      |
| <i>clobetasol propionate 0.05% topical soln</i>  | 1                    | QL=100 ML/30 Días      |
| <i>clodan 0.05% shampoo</i>                      | 1                    | QL=236 ML/30 Días      |
| <i>desonide 0.05% ointment</i>                   | 1                    | QL=120 GM/30 Días      |
| <i>desoximetasone 0.25% cream</i>                | 1                    | QL=120 GM/30 Días      |
| <i>desoximetasone 0.25% ointment</i>             | 1                    | QL=120 GM/30 Días      |
| <i>fluocinolone acetonide 0.01% cream</i>        | 1                    | QL=120 GM/30 Días      |
| <i>fluocinolone acetonide 0.01% oil</i>          | 1                    | QL=120 ML/30 Días      |
| <i>fluocinolone acetonide 0.01% topical soln</i> | 1                    | QL=90 ML/30 Días       |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                         | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <i>fluocinolone acetonide 0.025% cream</i>     | 1                    | QL=120 GM/30 Días  |
| <i>fluocinolone acetonide 0.025% ointment</i>  | 1                    | QL=120 GM/30 Días  |
| <i>fluocinonide 0.05% cream</i>                | 1                    | QL=60 GM/30 Días   |
| <i>fluocinonide 0.05% e cream</i>              | 1                    | QL=120 GM/30 Días  |
| <i>fluocinonide 0.05% gel</i>                  | 1                    | QL=60 GM/30 Días   |
| <i>fluocinonide 0.05% ointment</i>             | 1                    | QL=60 GM/30 Días   |
| <i>fluocinonide 0.05% topical soln</i>         | 1                    | QL=60 ML/30 Días   |
| <i>fluocinonide 0.1% cream</i>                 | 1                    | QL=60 GM/30 Días   |
| <i>fluticasone propionate 0.005% ointment</i>  | 1                    | QL=240 GM/30 Días  |
| <i>fluticasone propionate 0.05% cream</i>      | 1                    | QL=240 GM/30 Días  |
| <i>halobetasol propionate 0.05% cream</i>      | 1                    | QL=50 GM/30 Días   |
| <i>halobetasol propionate 0.05% ointment</i>   | 1                    | QL=50 GM/30 Días   |
| <i>hydrocortisone 1% cream</i>                 | 1                    | QL=240 GM/30 Días  |
| <i>hydrocortisone 2.5% lotion</i>              | 1                    | QL=118 ML/30 Días  |
| <i>hydrocortisone 2.5% ointment</i>            | 1                    | QL=240 GM/30 Días  |
| <i>mometasone furoate 0.1% cream</i>           | 1                    | QL=180 GM/30 Días  |
| <i>mometasone furoate 0.1% lotion</i>          | 1                    | QL=180 ML/30 Días  |
| <i>mometasone furoate 0.1% ointment</i>        | 1                    | QL=180 GM/30 Días  |
| <b>PREDNICARBATE 0.1% OINTMENT</b>             | 1                    | QL=120 GM/30 Días  |
| <i>triamcinolone acetonide 0.025% cream</i>    | 1                    | QL=454 GM/30 Días  |
| <i>triamcinolone acetonide 0.025% lotion</i>   | 1                    | QL=120 ML/30 Días  |
| <i>triamcinolone acetonide 0.025% ointment</i> | 1                    | QL=454 GM/30 Días  |
| <i>triamcinolone acetonide 0.1% cream</i>      | 1                    | QL=454 GM/30 Días  |
| <i>triamcinolone acetonide 0.1% lotion</i>     | 1                    | QL=120 ML/30 Días  |
| <i>triamcinolone acetonide 0.1% ointment</i>   | 1                    | QL=454 GM/30 Días  |
| <i>triamcinolone acetonide 0.5% cream</i>      | 1                    | QL=454 GM/30 Días  |
| <i>triamcinolone acetonide 0.5% ointment</i>   | 1                    | QL=120 GM/30 Días  |
| <i>triderm 0.1% cream</i>                      | 1                    | QL=454 GM/30 Días  |
| <i>triderm 0.5% cream</i>                      | 1                    | QL=454 GM/30 Días  |
| <b>ECZEMA AGENTS</b>                           |                      |                    |
| DUPIXENT 200MG/1.14ML SYRINGE                  | 1                    | NDS PA             |
| DUPIXENT 300MG/2ML AUTO-INJECTOR               | 1                    | NDS PA             |
| DUPIXENT 300MG/2ML SYRINGE                     | 1                    | NDS PA             |
| <b>EMOLLIENTS</b>                              |                      |                    |
| <i>ammonium lactate 12% cream</i>              | 1                    |                    |
| <i>ammonium lactate 12% lotion</i>             | 1                    |                    |
| <b>ENZYMES - TOPICAL</b>                       |                      |                    |
| SANTYL 250UNIT/GM OINTMENT                     | 1                    | QL=90 GM/30 Días   |
| <b>IMMUNOMODULATING AGENTS - TOPICAL</b>       |                      |                    |
| <i>imiquimod 5% cream</i>                      | 1                    | QL=24 EA/30 Días   |
| <b>IMMUNOSUPPRESSIVE AGENTS - TOPICAL</b>      |                      |                    |
| <i>pimecrolimus 1% cream</i>                   | 1                    | QL=100 GM/30 Días  |
| <i>tacrolimus 0.03% ointment</i>               | 1                    | QL=100 GM/30 Días  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                       | Nivel de Medicamento | Requisitos/Límites   |
|--|----------------------|----------------------|
| <i>tacrolimus 0.1% ointment</i>              | 1                    | QL=100 GM/30 Días    |
| <b>KERATOLYTIC/ANTIMITOTIC AGENTS</b>        |                      |                      |
| <i>podofilox 0.5% topical soln</i>           | 1                    | QL=7 ML/30 Días      |
| <b>LOCAL ANESTHETICS - TOPICAL</b>           |                      |                      |
| <i>lidocaine 4% topical soln</i>             | 1                    | QL=50 ML/30 Días     |
| <i>lidocaine 5% ointment</i>                 | 1                    | PA QL=107 GM/30 Días |
| <i>lidocaine 5% patch</i>                    | 1                    | PA QL=90 EA/30 Días  |
| <i>lidocaine/prilocaine 2.5-2.5% cream</i>   | 1                    | QL=30 GM/30 Días     |
| <b>ROSACEA AGENTS</b>                        |                      |                      |
| <i>azelaic acid 15% gel</i>                  | 1                    | QL=50 GM/30 Días     |
| <i>FINACEA 15% FOAM</i>                      | 1                    | QL=50 GM/30 Días     |
| <i>metronidazole 0.75% cream</i>             | 1                    | QL=45 GM/30 Días     |
| <i>metronidazole 0.75% gel</i>               | 1                    | QL=45 GM/30 Días     |
| <i>metronidazole 0.75% lotion</i>            | 1                    | QL=59 ML/30 Días     |
| <i>metronidazole 1% gel</i>                  | 1                    | QL=60 GM/30 Días     |
| <b>SCABICIDES &amp; PEDICULICIDES</b>        |                      |                      |
| <i>LINDANE 1% SHAMPOO</i>                    | 1                    |                      |
| <i>malathion 0.5% lotion</i>                 | 1                    |                      |
| <i>permethrin 5% cream</i>                   | 1                    |                      |
| <b>WOUND CARE PRODUCTS</b>                   |                      |                      |
| <i>REGRANEX 0.01% GEL</i>                    | 1                    | PA QL=30 GM/15 Días  |
| <b>DIGESTIVE AIDS</b>                        |                      |                      |
| <b>DIGESTIVE ENZYME</b>                      |                      |                      |
| <i>CREON 120000-24000-76000UNIT DR CAP</i>   | 1                    |                      |
| <i>CREON 15000-3000-9500UNIT DR CAP</i>      | 1                    |                      |
| <i>CREON 180000-36000-114000UNIT DR CAP</i>  | 1                    |                      |
| <i>CREON 30000-6000-19000UNIT DR CAP</i>     | 1                    |                      |
| <i>CREON 60000-12000-38000UNIT DR CAP</i>    | 1                    |                      |
| <i>SUCRAID 8500UNIT/ML ORAL SOLN</i>         | 1                    | NDS PA               |
| <i>ZENPEP 105000-25000-79000UNIT DR CAP</i>  | 1                    | ST                   |
| <i>ZENPEP 14000-3000-10000UNIT DR CAP</i>    | 1                    | ST                   |
| <i>ZENPEP 24000-5000-17000UNIT DR CAP</i>    | 1                    | ST                   |
| <i>ZENPEP 40000-126000-168000UNIT DR CAP</i> | 1                    | ST                   |
| <i>ZENPEP 42000-10000-32000UNIT DR CAP</i>   | 1                    | ST                   |
| <i>ZENPEP 63000-15000-47000UNIT DR CAP</i>   | 1                    | ST                   |
| <i>ZENPEP 84000-20000-63000UNIT DR CAP</i>   | 1                    | ST                   |
| <b>DIURETICS</b>                             |                      |                      |
| <b>CARBONIC ANHYDRASE INHIBITORS</b>         |                      |                      |
| <i>acetazolamide 125mg tab</i>               | 1                    |                      |
| <i>acetazolamide 250mg tab</i>               | 1                    |                      |
| <i>acetazolamide 500mg er cap</i>            | 1                    |                      |
| <i>methazolamide 25mg tab</i>                | 1                    |                      |
| <i>methazolamide 50mg tab</i>                | 1                    |                      |

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| Nombre del medicamento                           | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <b>DIURETIC COMBINATIONS</b>                     |                      |                    |
| amiloride 5mg/hydrochlorothiazide 50mg tab       | 1                    |                    |
| hydrochlorothiazide 25mg/spironolactone 25mg tab | 1                    |                    |
| hydrochlorothiazide 25mg/triamterene 37.5mg cap  | 1                    |                    |
| hydrochlorothiazide 25mg/triamterene 37.5mg tab  | 1                    |                    |
| hydrochlorothiazide 50mg/triamterene 75mg tab    | 1                    |                    |
| <b>LOOP DIURETICS</b>                            |                      |                    |
| bumetanide 0.25mg/ml inj                         | 1                    |                    |
| bumetanide 0.5mg tab                             | 1                    |                    |
| bumetanide 1mg tab                               | 1                    |                    |
| bumetanide 2mg tab                               | 1                    |                    |
| ethacrynic acid 25mg tab                         | 1                    |                    |
| furosemide 10mg/ml inj                           | 1                    |                    |
| furosemide 10mg/ml oral soln                     | 1                    |                    |
| furosemide 10mg/ml syringe                       | 1                    |                    |
| furosemide 20mg tab                              | 1                    |                    |
| furosemide 40mg tab                              | 1                    |                    |
| furosemide 80mg tab                              | 1                    |                    |
| FUROSEMIDE 8MG/ML ORAL SOLN                      | 1                    |                    |
| torsemide 100mg tab                              | 1                    |                    |
| torsemide 10mg tab                               | 1                    |                    |
| torsemide 20mg tab                               | 1                    |                    |
| torsemide 5mg tab                                | 1                    |                    |
| <b>POTASSIUM SPARING DIURETICS</b>               |                      |                    |
| amiloride 5mg tab                                | 1                    |                    |
| spironolactone 100mg tab                         | 1                    |                    |
| spironolactone 25mg tab                          | 1                    |                    |
| spironolactone 50mg tab                          | 1                    |                    |
| triamterene 100mg cap                            | 1                    |                    |
| triamterene 50mg cap                             | 1                    |                    |
| <b>THIAZIDES AND THIAZIDE-LIKE DIURETICS</b>     |                      |                    |
| chlorthalidone 25mg tab                          | 1                    |                    |
| chlorthalidone 50mg tab                          | 1                    |                    |
| DIURIL 250MG/5ML SUSP                            | 1                    |                    |
| hydrochlorothiazide 12.5mg cap                   | 1                    |                    |
| hydrochlorothiazide 12.5mg tab                   | 1                    |                    |
| hydrochlorothiazide 25mg tab                     | 1                    |                    |
| hydrochlorothiazide 50mg tab                     | 1                    |                    |
| indapamide 1.25mg tab                            | 1                    |                    |
| indapamide 2.5mg tab                             | 1                    |                    |
| metolazone 10mg tab                              | 1                    |                    |
| metolazone 2.5mg tab                             | 1                    |                    |
| metolazone 5mg tab                               | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                           | Nivel de Medicamento | Requisitos/Límites        |
|--|----------------------|---------------------------|
| <b>ENDOCRINE AND METABOLIC AGENTS - MISC.</b>    |                      |                           |
| <b>ADRENAL STEROID INHIBITORS</b>                |                      |                           |
| ISTURISA 10MG TAB                                | 1                    | NDS PA QL=180 EA/30 Días  |
| ISTURISA 1MG TAB                                 | 1                    | NDS PA QL=240 EA/30 Días  |
| ISTURISA 5MG TAB                                 | 1                    | NDS PA QL=60 EA/30 Días   |
| <b>BONE DENSITY REGULATORS</b>                   |                      |                           |
| <i>alendronate sodium 10mg tab</i>               | 1                    |                           |
| <i>alendronate sodium 35mg tab</i>               | 1                    |                           |
| <i>alendronate sodium 70mg tab</i>               | 1                    |                           |
| <i>alendronate sodium 70mg/75ml oral soln</i>    | 1                    |                           |
| FORTEO 600MCG/2.4ML PEN INJ                      | 1                    | NDS QL=2.40 ML/28 Días    |
| <i>ibandronic acid 150mg tab</i>                 | 1                    | QL=1 EA/30 Días           |
| NATPARA 100MCG CARTRIDGE                         | 1                    | NDS PA                    |
| NATPARA 25MCG CARTRIDGE                          | 1                    | NDS PA                    |
| NATPARA 50MCG CARTRIDGE                          | 1                    | NDS PA                    |
| NATPARA 75MCG CARTRIDGE                          | 1                    | NDS PA                    |
| PROLIA 60MG/ML SYRINGE                           | 1                    | PA QL=1 ML/168 Días       |
| <i>risedronate sodium 150mg tab</i>              | 1                    |                           |
| <i>risedronate sodium 30mg tab</i>               | 1                    |                           |
| <i>risedronate sodium 35mg (12) pack</i>         | 1                    |                           |
| <i>risedronate sodium 35mg (4) pack</i>          | 1                    |                           |
| <i>risedronate sodium 35mg tab</i>               | 1                    |                           |
| <i>risedronate sodium 5mg tab</i>                | 1                    |                           |
| <i>salmon calcitonin 200unit/act nasal spray</i> | 1                    |                           |
| TYMLOS 3120MCG/1.56ML PEN INJ                    | 1                    | NDS QL=1.56 ML/30 Días    |
| XGEVA 120MG/1.7ML INJ                            | 1                    | NDS PA QL=1.70 ML/28 Días |
| <b>GNRH/LHRH ANTAGONISTS</b>                     |                      |                           |
| ORILISSA 150MG TAB                               | 1                    | PA QL=30 EA/30 Días       |
| ORILISSA 200MG TAB                               | 1                    | PA QL=60 EA/30 Días       |
| <b>GROWTH HORMONE RECEPTOR ANTAGONISTS</b>       |                      |                           |
| SOMAVERT 10MG INJ                                | 1                    | NDS PA                    |
| SOMAVERT 15MG INJ                                | 1                    | NDS PA                    |
| SOMAVERT 20MG INJ                                | 1                    | NDS PA                    |
| SOMAVERT 25MG INJ                                | 1                    | NDS PA                    |
| SOMAVERT 30MG INJ                                | 1                    | NDS PA                    |
| <b>GROWTH HORMONES</b>                           |                      |                           |
| GENOTROPIN 0.2MG SYRINGE                         | 1                    | NDS PA                    |
| GENOTROPIN 0.4MG SYRINGE                         | 1                    | NDS PA                    |
| GENOTROPIN 0.6MG SYRINGE                         | 1                    | NDS PA                    |
| GENOTROPIN 0.8MG SYRINGE                         | 1                    | NDS PA                    |
| GENOTROPIN 1.2MG SYRINGE                         | 1                    | NDS PA                    |
| GENOTROPIN 1.4MG SYRINGE                         | 1                    | NDS PA                    |
| GENOTROPIN 1.6MG SYRINGE                         | 1                    | NDS PA                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                 | Nivel de Medicamento | Requisitos/Límites      |
|--|----------------------|-------------------------|
| GENOTROPIN 1.8MG SYRINGE                               | 1                    | NDS PA                  |
| GENOTROPIN 12MG CARTRIDGE                              | 1                    | NDS PA                  |
| GENOTROPIN 1MG SYRINGE                                 | 1                    | NDS PA                  |
| GENOTROPIN 2MG SYRINGE                                 | 1                    | NDS PA                  |
| GENOTROPIN 5MG CARTRIDGE                               | 1                    | NDS PA                  |
| <b>HORMONE RECEPTOR MODULATORS</b>                     |                      |                         |
| OSPHENA 60MG TAB                                       | 1                    | PA                      |
| <i>raloxifene 60mg tab</i>                             | 1                    |                         |
| <b>INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)</b>      |                      |                         |
| INCRELEX 40MG/4ML INJ                                  | 1                    | NDS PA                  |
| <b>LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS</b> |                      |                         |
| LUPANETA 1-MONTH PACK                                  | 1                    | NDS PA QL=1 EA/28 Días  |
| LUPANETA 3-MONTH PACK                                  | 1                    | PA QL=1 EA/84 Días      |
| SYNAREL 2MG/ML NASAL INHALER                           | 1                    | NDS PA                  |
| <b>METABOLIC MODIFIERS</b>                             |                      |                         |
| <i>calcitriol 0.00025mg cap</i>                        | 1                    |                         |
| <i>calcitriol 0.0005mg cap</i>                         | 1                    |                         |
| <i>calcitriol 0.001mg/ml oral soln</i>                 | 1                    |                         |
| CARBAGLU 200MG TAB FOR ORAL SUSP                       | 1                    | PA                      |
| <i>cinacalcet 30mg tab</i>                             | 1                    |                         |
| <i>cinacalcet 60mg tab</i>                             | 1                    |                         |
| <i>cinacalcet 90mg tab</i>                             | 1                    |                         |
| <i>doxercalciferol 0.0005mg cap</i>                    | 1                    |                         |
| <i>doxercalciferol 0.001mg cap</i>                     | 1                    |                         |
| <i>doxercalciferol 0.0025mg cap</i>                    | 1                    |                         |
| GALAFOLD 28 DAY WALLET 123MG PACK                      | 1                    | NDS PA QL=15 EA/30 Días |
| <i>levocarnitine 100mg/ml oral soln</i>                | 1                    |                         |
| <i>levocarnitine 330mg tab</i>                         | 1                    |                         |
| <i>nitisinone 10mg cap</i>                             | 1                    | NDS PA                  |
| <i>nitisinone 2mg cap</i>                              | 1                    | NDS PA                  |
| <i>nitisinone 5mg cap</i>                              | 1                    | NDS PA                  |
| ORFADIN 20MG CAP                                       | 1                    | NDS PA                  |
| ORFADIN 4MG/ML SUSP                                    | 1                    | NDS PA                  |
| PALYNZIQ 10MG/0.5ML SYRINGE                            | 1                    | NDS PA                  |
| PALYNZIQ 2.5MG/0.5ML SYRINGE                           | 1                    | NDS PA                  |
| PALYNZIQ 20MG/ML SYRINGE                               | 1                    | NDS PA                  |
| <i>paricalcitol 0.001mg cap</i>                        | 1                    |                         |
| <i>paricalcitol 0.002mg cap</i>                        | 1                    |                         |
| <i>paricalcitol 0.004mg cap</i>                        | 1                    |                         |
| RAVICTI 1.1GM/ML ORAL SOLN                             | 1                    | NDS PA                  |
| <i>sapropterin 100mg powder for oral soln</i>          | 1                    | NDS PA                  |
| <i>sapropterin 100mg tab</i>                           | 1                    | NDS PA                  |
| <i>sapropterin 500mg powder for oral soln</i>          | 1                    | NDS PA                  |

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| Nombre del medicamento                                      | Nivel de Medicamento | Requisitos/Límites       |
|---|----------------------|--------------------------|
| sodium phenylbutyrate 3gm/tsp oral powder                   | 1                    |                          |
| <b>POSTERIOR PITUITARY HORMONES</b>                         |                      |                          |
| desmopressin acetate 0.01% (0.01mg/act) nasal spray         | 1                    |                          |
| desmopressin acetate 0.1mg tab                              | 1                    |                          |
| desmopressin acetate 0.2mg tab                              | 1                    |                          |
| <b>PROLACTIN INHIBITORS</b>                                 |                      |                          |
| cabergoline 0.5mg tab                                       | 1                    |                          |
| <b>SOMATOSTATIC AGENTS</b>                                  |                      |                          |
| octreotide 0.05mg/ml inj                                    | 1                    | PA                       |
| octreotide 0.1mg/ml inj                                     | 1                    | PA                       |
| octreotide 0.2mg/ml inj                                     | 1                    | PA                       |
| octreotide 0.5mg/ml inj                                     | 1                    | PA                       |
| octreotide 1mg/ml inj                                       | 1                    | PA                       |
| SIGNIFOR 0.3MG/ML INJ                                       | 1                    | NDS PA QL=60 ML/30 Días  |
| SIGNIFOR 0.6MG/ML INJ                                       | 1                    | NDS PA QL=60 ML/30 Días  |
| SIGNIFOR 0.9MG/ML INJ                                       | 1                    | NDS PA QL=60 ML/30 Días  |
| <b>VASOPRESSIN RECEPTOR ANTAGONISTS</b>                     |                      |                          |
| JYNARQUE 15MG TAB   | 1                    | NDS PA QL=120 EA/30 Días |
| JYNARQUE 30MG TAB   | 1                    | NDS PA QL=120 EA/30 Días |
| JYNARQUE TAB 15/15 CARTON 15MG PACK                         | 1                    | NDS PA QL=60 EA/30 Días  |
| JYNARQUE TAB 30/15 CARTON PACK                              | 1                    | NDS PA QL=60 EA/30 Días  |
| JYNARQUE TAB 45/15 CARTON PACK                              | 1                    | NDS PA QL=60 EA/30 Días  |
| JYNARQUE TAB 60/30 CARTON PACK                              | 1                    | NDS PA QL=60 EA/30 Días  |
| JYNARQUE TAB 90/30 CARTON PACK                              | 1                    | NDS PA QL=60 EA/30 Días  |
| <b>ESTROGENS</b>  |                      |                          |
| <b>ESTROGEN COMBINATIONS</b>                                |                      |                          |
| amabelz 0.5/0.1mg 28 day pack                               | 1                    |                          |
| amabelz 1/0.5mg 28 day pack                                 | 1                    |                          |
| COMBIPATCH 0.00208-0.00583MG/HR PATCH                       | 1                    |                          |
| COMBIPATCH 0.00208-0.0104MG/HR PATCH                        | 1                    |                          |
| estradiol 0.5mg/norethindrone acetate 0.1mg pack            | 1                    |                          |
| estradiol 1mg/norethindrone acetate 0.5mg pack              | 1                    |                          |
| ethinyl estradiol 0.0025mg/norethindrone acetate 0.5mg pack | 1                    |                          |
| ethinyl estradiol 0.005mg/norethindrone acetate 1mg pack    | 1                    |                          |
| fyavolv 0.0025-0.5mg tab                                    | 1                    |                          |
| fyavolv 0.005-1mg tab                                       | 1                    |                          |
| jinteli 0.005-1mg tab                                       | 1                    |                          |
| mimvey pack   | 1                    |                          |
| ORIAHNN 28 DAY KIT PACK                                     | 1                    | PA QL=56 EA/28 Días      |
| PREMPHASE 28 DAY PACK                                       | 1                    |                          |
| PREMPRO 0.3/1.5MG 28 DAY PACK                               | 1                    |                          |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                           | Nivel de Medicamento | Requisitos/Límites  |
|--|----------------------|---------------------|
| PREMPRO 0.45/1.5MG 28 DAY PACK                   | 1                    |                     |
| PREMPRO 0.625/2.5MG 28 DAY PACK                  | 1                    |                     |
| PREMPRO 0.625/5MG 28 DAY PACK                    | 1                    |                     |
| <b>ESTROGENS</b>                                 |                      |                     |
| <i>dotti 0.025mg/24hr patch</i>                  | 1                    |                     |
| <i>dotti 0.0375mg/24hr patch</i>                 | 1                    |                     |
| <i>dotti 0.05mg/24hr patch</i>                   | 1                    |                     |
| <i>dotti 0.075mg/24hr patch</i>                  | 1                    |                     |
| <i>dotti 0.1mg/24hr patch</i>                    | 1                    |                     |
| <i>estradiol 0.00104mg/hr twice weekly patch</i> | 1                    |                     |
| <i>estradiol 0.00104mg/hr weekly patch</i>       | 1                    |                     |
| <i>estradiol 0.00156mg/hr twice weekly patch</i> | 1                    |                     |
| <i>estradiol 0.00156mg/hr weekly patch</i>       | 1                    |                     |
| <i>estradiol 0.00208mg/hr twice weekly patch</i> | 1                    |                     |
| <i>estradiol 0.00208mg/hr weekly patch</i>       | 1                    |                     |
| <i>estradiol 0.0025mg/hr weekly patch</i>        | 1                    |                     |
| <i>estradiol 0.00312mg/hr weekly patch</i>       | 1                    |                     |
| <i>estradiol 0.00313mg/hr twice weekly patch</i> | 1                    |                     |
| <i>estradiol 0.00417mg/hr twice weekly patch</i> | 1                    |                     |
| <i>estradiol 0.00417mg/hr weekly patch</i>       | 1                    |                     |
| <i>estradiol 0.5mg tab</i>                       | 1                    |                     |
| <i>estradiol 1mg tab</i>                         | 1                    |                     |
| <i>estradiol 2mg tab</i>                         | 1                    |                     |
| <i>estradiol valerate 20mg/ml inj</i>            | 1                    |                     |
| <i>estradiol valerate 40mg/ml inj</i>            | 1                    |                     |
| <i>lyllana 0.025mg/24hr patch</i>                | 1                    |                     |
| <i>lyllana 0.0375mg/24hr patch</i>               | 1                    |                     |
| <i>lyllana 0.05mg/24hr patch</i>                 | 1                    |                     |
| <i>lyllana 0.075mg/24hr patch</i>                | 1                    |                     |
| <i>lyllana 0.1mg/24hr patch</i>                  | 1                    |                     |
| PREMARIN 0.3MG TAB                               | 1                    |                     |
| PREMARIN 0.45MG TAB                              | 1                    |                     |
| PREMARIN 0.625MG TAB                             | 1                    |                     |
| PREMARIN 0.9MG TAB                               | 1                    |                     |
| PREMARIN 1.25MG TAB                              | 1                    |                     |
| <b>FLUOROQUINOLONES</b>                          |                      |                     |
| <b>FLUOROQUINOLONES</b>                          |                      |                     |
| BAXDELA 450MG TAB                                | 1                    | PA QL=60 EA/30 Días |
| <i>ciprofloxacin 250mg tab</i>                   | 1                    |                     |
| <i>ciprofloxacin 2mg/ml inj</i>                  | 1                    |                     |
| <i>ciprofloxacin 500mg tab</i>                   | 1                    |                     |
| <i>ciprofloxacin 750mg tab</i>                   | 1                    |                     |
| <i>levofloxacin 250mg tab</i>                    | 1                    |                     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                  | Nivel de Medicamento | Requisitos/Límites      |
|---|----------------------|-------------------------|
| levofloxacin 25mg/ml inj                                | 1                    |                         |
| levofloxacin 25mg/ml oral soln                          | 1                    |                         |
| levofloxacin 500mg tab                                  | 1                    |                         |
| levofloxacin 5mg/ml (100ml) inj                         | 1                    |                         |
| levofloxacin 5mg/ml (150ml) inj                         | 1                    |                         |
| levofloxacin 750mg tab                                  | 1                    |                         |
| MOXIFLOXACIN 1.6MG/ML INJ                               | 1                    |                         |
| moxifloxacin 400mg tab                                  | 1                    |                         |
| ofloxacin 400mg tab                                     | 1                    |                         |
| <b>GASTROINTESTINAL AGENTS - MISC.</b>                  |                      |                         |
| <b>AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)</b> |                      |                         |
| TRULANCE 3MG TAB  | 1                    |                         |
| <b>BILE ACID SYNTHESIS DISORDER AGENTS</b>              |                      |                         |
| CHOLBAM 250MG CAP                                       | 1                    | NDS PA                  |
| CHOLBAM 50MG CAP  | 1                    | NDS PA                  |
| <b>FARNESOID X RECEPTOR (FXR) AGONISTS</b>              |                      |                         |
| OCALIVA 10MG TAB  | 1                    | NDS PA QL=30 EA/30 Días |
| OCALIVA 5MG TAB   | 1                    | NDS PA QL=30 EA/30 Días |
| <b>GALLSTONE SOLUBILIZING AGENTS</b>                    |                      |                         |
| CHENODAL 250MG TAB                                      | 1                    | NDS                     |
| ursodiol 250mg tab                                      | 1                    |                         |
| ursodiol 300mg cap                                      | 1                    |                         |
| ursodiol 500mg tab                                      | 1                    |                         |
| <b>GASTROINTESTINAL ANTIALLERGY AGENTS</b>              |                      |                         |
| cromolyn sodium 20mg/ml oral soln                       | 1                    |                         |
| <b>GASTROINTESTINAL STIMULANTS</b>                      |                      |                         |
| metoclopramide 10mg tab                                 | 1                    |                         |
| metoclopramide 1mg/ml oral soln                         | 1                    |                         |
| metoclopramide 5mg tab                                  | 1                    |                         |
| <b>INFLAMMATORY BOWEL AGENTS</b>                        |                      |                         |
| balsalazide disodium 750mg cap                          | 1                    |                         |
| CIMZIA 200MG INJ  | 1                    | NDS PA QL=2 EA/28 Días  |
| CIMZIA 200MG/ML SYRINGE                                 | 1                    | NDS PA QL=2 EA/28 Días  |
| DIPENTUM 250MG CAP                                      | 1                    |                         |
| mesalamine 1000mg rectal supp                           | 1                    |                         |
| mesalamine 1200mg dr tab                                | 1                    |                         |
| mesalamine 375mg er cap                                 | 1                    |                         |
| mesalamine 400mg dr cap                                 | 1                    |                         |
| mesalamine 66.7mg/ml enema                              | 1                    |                         |
| mesalamine 800mg dr tab                                 | 1                    |                         |
| sulfasalazine 500mg dr tab                              | 1                    |                         |
| sulfasalazine 500mg tab                                 | 1                    |                         |
| <b>INTESTINAL ACIDIFIERS</b>                            |                      |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                 | Nivel de Medicamento | Requisitos/Límites      |
|--|----------------------|-------------------------|
| <i>enulose 10gm/15ml oral soln</i>                     | 1                    |                         |
| <i>generlac 10gm/15ml oral soln</i>                    | 1                    |                         |
| <b>IRRITABLE BOWEL SYNDROME (IBS) AGENTS</b>           |                      |                         |
| <i>alosetron 0.5mg tab</i>                             | 1                    |                         |
| <i>alosetron 1mg tab</i>                               | 1                    |                         |
| VIBERZI 100MG TAB                                      | 1                    | PA                      |
| VIBERZI 75MG TAB                                       | 1                    | PA                      |
| <b>PERIPHERAL OPIOID RECEPTOR ANTAGONISTS</b>          |                      |                         |
| MOVANTIK 12.5MG TAB                                    | 1                    | PA                      |
| MOVANTIK 25MG TAB                                      | 1                    | PA                      |
| RELISTOR 12MG/0.6ML INJ                                | 1                    | PA                      |
| RELISTOR 12MG/0.6ML SYRINGE                            | 1                    | PA                      |
| RELISTOR 8MG/0.4ML SYRINGE                             | 1                    | PA                      |
| SYMPROIC 0.2MG TAB                                     | 1                    | PA                      |
| <b>PHOSPHATE BINDER AGENTS</b>                         |                      |                         |
| AURYXIA 210MG TAB                                      | 1                    | PA                      |
| <i>calcium acetate 667mg cap</i>                       | 1                    |                         |
| <i>calcium acetate 667mg tab</i>                       | 1                    |                         |
| FOSRENOL 1000MG ORAL POWDER                            | 1                    |                         |
| FOSRENOL 750MG ORAL POWDER                             | 1                    |                         |
| <i>lanthanum carbonate 1000mg chew tab</i>             | 1                    |                         |
| <i>lanthanum carbonate 500mg chew tab</i>              | 1                    |                         |
| <i>lanthanum carbonate 750mg chew tab</i>              | 1                    |                         |
| PHOSLYRA 667MG/5ML ORAL SOLN                           | 1                    |                         |
| <i>sevelamer carbonate 2400mg powder for oral susp</i> | 1                    |                         |
| <i>sevelamer carbonate 800mg powder for oral susp</i>  | 1                    |                         |
| <i>sevelamer carbonate 800mg tab</i>                   | 1                    |                         |
| <b>SHORT BOWEL SYNDROME (SBS) AGENTS</b>               |                      |                         |
| GATTEX 5MG INJ   | 1                    | NDS PA                  |
| <b>TRYPTOPHAN HYDROXYLASE INHIBITORS</b>               |                      |                         |
| XERMELO 250MG TAB                                      | 1                    | NDS PA QL=90 EA/30 Días |
| <b>GENITOURINARY AGENTS - MISCELLANEOUS</b>            |                      |                         |
| <b>ALKALINIZERS</b>                                    |                      |                         |
| <i>potassium citrate 10meq er tab</i>                  | 1                    |                         |
| <i>potassium citrate 15meq er tab</i>                  | 1                    |                         |
| <i>potassium citrate 5meq er tab</i>                   | 1                    |                         |
| <b>CYSTINOSIS AGENTS</b>                               |                      |                         |
| CYSTAGON 150MG CAP                                     | 1                    |                         |
| CYSTAGON 50MG CAP                                      | 1                    |                         |
| <b>GENITOURINARY IRRIGANTS</b>                         |                      |                         |
| <i>sodium chloride 0.9% irrigation soln</i>            | 1                    |                         |
| <b>INTERSTITIAL CYSTITIS AGENTS</b>                    |                      |                         |
| ELMIRON 100MG CAP                                      | 1                    |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                          | Nivel de Medicamento | Requisitos/Límites      |
|---|----------------------|-------------------------|
| <b>PROSTATIC HYPERTROPHY AGENTS</b>             |                      |                         |
| <i>alfuzosin 10mg er tab</i>                    | 1                    |                         |
| <i>dutasteride 0.5mg cap</i>                    | 1                    |                         |
| <i>dutasteride 0.5mg/tamsulosin 0.4mg cap</i>   | 1                    |                         |
| <i>finasteride 5mg tab</i>                      | 1                    |                         |
| <i>silodosin 4mg cap</i>                        | 1                    |                         |
| <i>silodosin 8mg cap</i>                        | 1                    |                         |
| <i>tamsulosin 0.4mg cap</i>                     | 1                    |                         |
| <b>URINARY STONE AGENTS</b>                     |                      |                         |
| LITHOSTAT 250MG TAB                             | 1                    |                         |
| THIOLA 100MG DR TAB                             | 1                    |                         |
| THIOLA 300MG DR TAB                             | 1                    |                         |
| <i>tiopronin 100mg tab</i>                      | 1                    |                         |
| <b>GOUT AGENTS</b>                              |                      |                         |
| <b>GOUT AGENT COMBINATIONS</b>                  |                      |                         |
| <i>colchicine 0.5mg/probenecid 500mg tab</i>    | 1                    |                         |
| <b>GOUT AGENTS</b>                              |                      |                         |
| <i>allopurinol 100mg tab</i>                    | 1                    |                         |
| <i>allopurinol 300mg tab</i>                    | 1                    |                         |
| <i>colchicine 0.6mg tab</i>                     | 1                    |                         |
| <i>febuxostat 40mg tab</i>                      | 1                    | ST                      |
| <i>febuxostat 80mg tab</i>                      | 1                    | ST                      |
| <b>URICOSURICS</b>                              |                      |                         |
| <i>probenecid 500mg tab</i>                     | 1                    |                         |
| <b>HEMATOLOGICAL AGENTS - MISC.</b>             |                      |                         |
| <b>BRADYKININ B2 RECEPTOR ANTAGONISTS</b>       |                      |                         |
| <i>icatibant 10mg/ml syringe</i>                | 1                    | NDS PA                  |
| <b>COMPLEMENT INHIBITORS</b>                    |                      |                         |
| BERINERT 500UNIT INJ                            | 1                    | NDS PA                  |
| CINRYZE 500UNIT INJ                             | 1                    | NDS PA                  |
| HAEGARDA 2000UNIT INJ                           | 1                    | NDS PA                  |
| HAEGARDA 3000UNIT INJ                           | 1                    | NDS PA                  |
| RUCONEST 2100UNIT INJ                           | 1                    | NDS PA                  |
| <b>HEMATOLOGIC - TYROSINE KINASE INHIBITORS</b> |                      |                         |
| TAVALISSE 100MG TAB                             | 1                    | NDS PA QL=60 EA/30 Días |
| TAVALISSE 150MG TAB                             | 1                    | NDS PA QL=60 EA/30 Días |
| <b>HEMATORHEOLOGIC AGENTS</b>                   |                      |                         |
| <i>pentoxifylline 400mg er tab</i>              | 1                    |                         |
| <b>PLASMA KALLIKREIN INHIBITORS</b>             |                      |                         |
| TAKHZYRO 300MG/2ML INJ                          | 1                    | NDS PA QL=4 ML/28 Días  |
| <b>PLATELET AGGREGATION INHIBITORS</b>          |                      |                         |
| <i>anagrelide 0.5mg cap</i>                     | 1                    |                         |
| <i>anagrelide 1mg cap</i>                       | 1                    |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                 | Nivel de Medicamento | Requisitos/Límites       |
|--|----------------------|--------------------------|
| aspirin 25mg/dipyridamole 200mg er cap | 1                    |                          |
| BRILINTA 60MG TAB                      | 1                    |                          |
| BRILINTA 90MG TAB                      | 1                    |                          |
| CABLIVI 11MG INJ                       | 1                    | NDS PA QL=30 EA/30 Días  |
| cilostazol 100mg tab                   | 1                    |                          |
| cilostazol 50mg tab                    | 1                    |                          |
| clopidogrel 75mg tab                   | 1                    |                          |
| dipyridamole 25mg tab                  | 1                    |                          |
| dipyridamole 50mg tab                  | 1                    |                          |
| dipyridamole 75mg tab                  | 1                    |                          |
| prasugrel 10mg tab                     | 1                    |                          |
| prasugrel 5mg tab                      | 1                    |                          |
| <b>HEMATOPOIETIC AGENTS</b>            |                      |                          |
| <b>AGENTS FOR GAUCHER DISEASE</b>      |                      |                          |
| CERDELGA 84MG CAP                      | 1                    | NDS PA QL=60 EA/30 Días  |
| miglustat 100mg cap                    | 1                    | NDS PA                   |
| <b>AGENTS FOR SICKLE CELL DISEASE</b>  |                      |                          |
| DROXIA 200MG CAP                       | 1                    |                          |
| DROXIA 300MG CAP                       | 1                    |                          |
| DROXIA 400MG CAP                       | 1                    |                          |
| ENDARI 5GM POWDER FOR ORAL SOLN        | 1                    | NDS PA QL=180 EA/30 Días |
| OXBRYTA 500MG TAB                      | 1                    | NDS PA QL=150 EA/30 Días |
| <b>HEMATOPOIETIC GROWTH FACTORS</b>    |                      |                          |
| ARANESP 100MCG/0.5ML SYRINGE           | 1                    | PA                       |
| ARANESP 100MCG/ML INJ                  | 1                    | PA                       |
| ARANESP 10MCG/0.4ML SYRINGE            | 1                    | PA                       |
| ARANESP 150MCG/0.3ML SYRINGE           | 1                    | PA                       |
| ARANESP 200MCG/0.4ML SYRINGE           | 1                    | PA                       |
| ARANESP 200MCG/ML INJ                  | 1                    | PA                       |
| ARANESP 25MCG/0.42ML SYRINGE           | 1                    | PA                       |
| ARANESP 25MCG/ML INJ                   | 1                    | PA                       |
| ARANESP 300MCG/0.6ML SYRINGE           | 1                    | PA                       |
| ARANESP 300MCG/ML INJ                  | 1                    | PA                       |
| ARANESP 40MCG/0.4ML SYRINGE            | 1                    | PA                       |
| ARANESP 40MCG/ML INJ                   | 1                    | PA                       |
| ARANESP 500MCG/ML SYRINGE              | 1                    | PA                       |
| ARANESP 60MCG/0.3ML SYRINGE            | 1                    | PA                       |
| ARANESP 60MCG/ML INJ                   | 1                    | PA                       |
| DOPTELET 20MG TAB                      | 1                    | NDS PA QL=60 EA/30 Días  |
| DOPTELET TAB 40MG DAILY DOSE PACK      | 1                    | NDS PA QL=10 EA/5 Días   |
| DOPTELET TAB 60MG DAILY DOSE PACK      | 1                    | NDS PA QL=15 EA/5 Días   |
| FULPHILA 6MG/0.6ML SYRINGE             | 1                    | NDS                      |
| NIVESTYM 300MCG/0.5ML SYRINGE          | 1                    | NDS                      |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                           | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| NIVESTYM 300MCG/ML INJ                           | 1                    | NDS                |
| NIVESTYM 480MCG/0.8ML SYRINGE                    | 1                    | NDS                |
| NIVESTYM 480MCG/1.6ML INJ                        | 1                    | NDS                |
| PROMACTA 12.5MG POWDER FOR ORAL SUSP             | 1                    | NDS PA             |
| PROMACTA 12.5MG TAB                              | 1                    | NDS PA             |
| PROMACTA 25MG POWDER FOR ORAL SUSP               | 1                    | NDS PA             |
| PROMACTA 25MG TAB                                | 1                    | NDS PA             |
| PROMACTA 50MG TAB                                | 1                    | NDS PA             |
| PROMACTA 75MG TAB                                | 1                    | NDS PA             |
| RETACRIT 10000UNIT/ML INJ                        | 1                    | PA                 |
| RETACRIT 20000UNIT/2ML INJ                       | 1                    | PA                 |
| RETACRIT 20000UNIT/ML INJ                        | 1                    | PA                 |
| RETACRIT 2000UNIT/ML INJ                         | 1                    | PA                 |
| RETACRIT 3000UNIT/ML INJ                         | 1                    | PA                 |
| RETACRIT 4000UNIT/ML INJ                         | 1                    | PA                 |
| RETACRIT 4000UNIT/ML INJ                         | 1                    | PA                 |
| ZARXIO 300MCG/0.5ML SYRINGE                      | 1                    | NDS                |
| ZARXIO 480MCG/0.8ML SYRINGE                      | 1                    | NDS                |
| ZIEXTENZO 6MG/0.6ML SYRINGE                      | 1                    | NDS                |
| <b>HEMOSTATICS</b>                               |                      |                    |
| <b>HEMOSTATICS - SYSTEMIC</b>                    |                      |                    |
| <i>tranexamic acid 650mg tab</i>                 | 1                    |                    |
| <b>HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS</b> |                      |                    |
| <b>BARBITURATE HYPNOTICS</b>                     |                      |                    |
| <i>phenobarbital 100mg tab</i>                   | 1                    |                    |
| <i>phenobarbital 15mg tab</i>                    | 1                    |                    |
| <i>phenobarbital 16.2mg tab</i>                  | 1                    |                    |
| <i>phenobarbital 30mg tab</i>                    | 1                    |                    |
| <i>phenobarbital 32.4mg tab</i>                  | 1                    |                    |
| <i>phenobarbital 4mg/ml oral soln</i>            | 1                    |                    |
| <i>phenobarbital 60mg tab</i>                    | 1                    |                    |
| <i>phenobarbital 64.8mg tab</i>                  | 1                    |                    |
| <i>phenobarbital 97.2mg tab</i>                  | 1                    |                    |
| <b>NON-BARBITURATE HYPNOTICS</b>                 |                      |                    |
| <i>estazolam 1mg tab</i>                         | 1                    | QL=30 EA/30 Días   |
| <i>estazolam 2mg tab</i>                         | 1                    | QL=30 EA/30 Días   |
| <i>eszopiclone 1mg tab</i>                       | 1                    | QL=30 EA/30 Días   |
| <i>eszopiclone 2mg tab</i>                       | 1                    | QL=30 EA/30 Días   |
| <i>eszopiclone 3mg tab</i>                       | 1                    | QL=30 EA/30 Días   |
| <i>FLURAZEPAM 15MG CAP</i>                       | 1                    | QL=30 EA/30 Días   |
| <i>FLURAZEPAM 30MG CAP</i>                       | 1                    | QL=30 EA/30 Días   |
| <i>temazepam 15mg cap</i>                        | 1                    | QL=30 EA/30 Días   |
| <i>temazepam 30mg cap</i>                        | 1                    | QL=30 EA/30 Días   |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites       |
|---|----------------------|--------------------------|
| <i>triazolam 0.125mg tab</i>  | 1                    | QL=30 EA/30 Días         |
| <i>triazolam 0.25mg tab</i>   | 1                    | QL=60 EA/30 Días         |
| <i>zaleplon 10mg cap</i>  | 1                    | QL=30 EA/30 Días         |
| <i>zaleplon 5mg cap</i>   | 1                    | QL=30 EA/30 Días         |
| <i>zolpidem tartrate 10mg tab</i>   | 1                    | QL=30 EA/30 Días         |
| <i>zolpidem tartrate 5mg tab</i>  | 1                    | QL=60 EA/30 Días         |
| <b>SELECTIVE MELATONIN RECEPTOR AGONISTS</b>                                |                      |                          |
| <i>HETLIOZ 20MG CAP</i>   | 1                    | NDS PA QL=30 EA/30 Días  |
| <i>HETLIOZ 4MG/ML SUSP</i>  | 1                    | NDS PA QL=158 ML/30 Días |
| <i>ramelteon 8mg tab</i>  | 1                    | QL=30 EA/30 Días         |
| <b>LAXATIVES</b>  |                      |                          |
| <b>LAXATIVE COMBINATIONS</b>  |                      |                          |
| <i>CLENPIQ 75-21.9-0.0625MG/ML ORAL SOLN</i>                                | 1                    |                          |
| <i>GAVILYTE-C POWDER FOR ORAL SOLN</i>                                      | 1                    |                          |
| <i>gavilyte-g powder for oral soln</i>                                      | 1                    |                          |
| <i>gavilyte-n powder for oral soln</i>                                      | 1                    |                          |
| <i>peg 3350/electrolyte oral soln</i>                                       | 1                    |                          |
| <i>peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln</i> | 1                    |                          |
| <i>trilyte powder for oral soln</i>   | 1                    |                          |
| <b>LAXATIVES - MISCELLANEOUS</b>  |                      |                          |
| <i>constulose 10gm/15ml oral soln</i>                                       | 1                    |                          |
| <i>lactulose 667mg/ml oral soln</i>   | 1                    |                          |
| <b>MACROLIDES</b>   |                      |                          |
| <b>AZITHROMYCIN</b>   |                      |                          |
| <i>azithromycin 20mg/ml susp</i>  | 1                    |                          |
| <i>azithromycin 250mg pack</i>  | 1                    |                          |
| <i>azithromycin 250mg tab</i>   | 1                    |                          |
| <i>azithromycin 40mg/ml susp</i>  | 1                    |                          |
| <i>azithromycin 500mg inj</i>   | 1                    |                          |
| <i>azithromycin 500mg pack</i>  | 1                    |                          |
| <i>azithromycin 500mg tab</i>   | 1                    |                          |
| <i>azithromycin 600mg tab</i>   | 1                    |                          |
| <b>CLARITHROMYCIN</b>   |                      |                          |
| <i>clarithromycin 250mg tab</i>   | 1                    |                          |
| <i>CLARITHROMYCIN 25MG/ML SUSP</i>  | 1                    |                          |
| <i>clarithromycin 500mg er tab</i>  | 1                    |                          |
| <i>clarithromycin 500mg tab</i>   | 1                    |                          |
| <i>CLARITHROMYCIN 50MG/ML SUSP</i>  | 1                    |                          |
| <b>ERYTHROMYCINS</b>  |                      |                          |
| <i>ERYTHROCIN 500MG INJ</i>   | 1                    |                          |
| <i>ERYTHROMYCIN 250MG DR CAP</i>  | 1                    |                          |
| <i>erythromycin 250mg tab</i>   | 1                    |                          |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                       | Nivel de Medicamento | Requisitos/Límites  |
|--|----------------------|---------------------|
| erythromycin 500mg tab                                       | 1                    |                     |
| erythromycin ethylsuccinate 40mg/ml susp                     | 1                    |                     |
| erythromycin ethylsuccinate 80mg/ml susp                     | 1                    |                     |
| <b>MEDICAL DEVICES AND SUPPLIES</b>                          |                      |                     |
| <b>BANDAGES-DRESSINGS-TAPE</b>                               |                      |                     |
| GAUZE PADS & DRESSINGS - PADS 2 X 2                          | 1                    |                     |
| <b>MISC. DEVICES</b>   |                      |                     |
| ALCOHOL SWAB 1"x1" (DIABETIC)                                | 1                    |                     |
| <b>PARENTERAL THERAPY SUPPLIES</b>                           |                      |                     |
| INSULIN PEN NEEDLE   | 1                    |                     |
| INSULIN SYRINGE (DISP) U-100 0.3ML                           | 1                    |                     |
| INSULIN SYRINGE (DISP) U-100 1/2ML                           | 1                    |                     |
| INSULIN SYRINGE (DISP) U-100 1ML                             | 1                    |                     |
| NEEDLES INSULIN DISP. SAFETY                                 | 1                    |                     |
| <b>MIGRAINE PRODUCTS</b>                                     |                      |                     |
| <b>CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG</b> |                      |                     |
| AIMOVIG 140MG/ML AUTO-INJECTOR                               | 1                    | PA                  |
| AIMOVIG 70MG/ML AUTO-INJECTOR                                | 1                    | PA                  |
| EMGALITY 100MG/ML SYRINGE                                    | 1                    | PA                  |
| EMGALITY 120MG/ML AUTO-INJECTOR                              | 1                    | PA                  |
| EMGALITY 120MG/ML SYRINGE                                    | 1                    | PA                  |
| NURTEC 75MG ODT  | 1                    | PA QL=16 EA/30 Días |
| UBRELVY 100MG TAB  | 1                    | PA QL=16 EA/30 Días |
| UBRELVY 50MG TAB   | 1                    | PA QL=16 EA/30 Días |
| <b>MIGRAINE PRODUCTS</b>                                     |                      |                     |
| dihydroergotamine mesylate 0.5mg/act nasal inhaler           | 1                    | PA QL=16 ML/30 Días |
| <b>SEROTONIN AGONISTS</b>                                    |                      |                     |
| eletriptan 20mg tab  | 1                    | QL=18 EA/30 Días    |
| eletriptan 40mg tab  | 1                    | QL=18 EA/30 Días    |
| naratriptan 1mg tab  | 1                    | QL=18 EA/30 Días    |
| naratriptan 2.5mg tab  | 1                    | QL=18 EA/30 Días    |
| REVVOW 100MG TAB   | 1                    | PA QL=8 EA/30 Días  |
| REVVOW 50MG TAB  | 1                    | PA QL=8 EA/30 Días  |
| rizatriptan 10mg odt   | 1                    | QL=36 EA/60 Días    |
| rizatriptan 10mg tab   | 1                    | QL=36 EA/60 Días    |
| rizatriptan 5mg odt  | 1                    | QL=36 EA/60 Días    |
| rizatriptan 5mg tab  | 1                    | QL=36 EA/60 Días    |
| sumatriptan 100mg tab  | 1                    | QL=18 EA/30 Días    |
| sumatriptan 12mg/ml auto-injector                            | 1                    | QL=5 ML/30 Días     |
| sumatriptan 12mg/ml cartridge                                | 1                    | QL=5 ML/30 Días     |
| sumatriptan 12mg/ml inj                                      | 1                    | QL=5 ML/30 Días     |
| sumatriptan 20mg/act nasal spray                             | 1                    | QL=12 EA/30 Días    |
| sumatriptan 25mg tab   | 1                    | QL=18 EA/30 Días    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| sumatriptan 50mg tab   | 1                    | QL=18 EA/30 Días   |
| sumatriptan 5mg/act nasal spray  | 1                    | QL=12 EA/30 Días   |
| sumatriptan 8mg/ml auto-injector   | 1                    | QL=5 ML/30 Días    |
| sumatriptan 8mg/ml cartridge   | 1                    | QL=5 ML/30 Días    |
| zolmitriptan 2.5mg odt   | 1                    | QL=18 EA/30 Días   |
| zolmitriptan 2.5mg tab   | 1                    | QL=18 EA/30 Días   |
| zolmitriptan 5mg odt   | 1                    | QL=18 EA/30 Días   |
| zolmitriptan 5mg tab   | 1                    | QL=18 EA/30 Días   |
| ZOMIG 2.5MG NASAL SPRAY  | 1                    | QL=16 EA/30 Días   |
| ZOMIG 5MG NASAL SPRAY  | 1                    | QL=12 EA/30 Días   |
| <b>MINERALS &amp; ELECTROLYTES</b>   |                      |                    |
| <b>ELECTROLYTE MIXTURES</b>  |                      |                    |
| GLUCOSE 100MG/ML/SODIUM CHLORIDE<br>2MG/ML INJ                                 | 1                    | PA BvD             |
| GLUCOSE 100MG/ML/SODIUM CHLORIDE<br>4.5MG/ML INJ                               | 1                    | PA BvD             |
| GLUCOSE 25MG/ML/SODIUM CHLORIDE<br>4.5MG/ML INJ                                | 1                    |                    |
| glucose 50mg/ml/potassium chloride<br>0.01meq/ml/sodium chloride 4.5mg/ml inj  | 1                    |                    |
| glucose 50mg/ml/potassium chloride 0.02meq/ml inj                              | 1                    |                    |
| glucose 50mg/ml/potassium chloride<br>0.02meq/ml/sodium chloride 2.25mg/ml inj | 1                    |                    |
| glucose 50mg/ml/potassium chloride<br>0.02meq/ml/sodium chloride 4.5mg/ml inj  | 1                    |                    |
| glucose 50mg/ml/potassium chloride<br>0.02meq/ml/sodium chloride 9mg/ml inj    | 1                    |                    |
| glucose 50mg/ml/potassium chloride<br>0.03meq/ml/sodium chloride 4.5mg/ml inj  | 1                    |                    |
| glucose 50mg/ml/potassium chloride<br>0.04meq/ml/sodium chloride 4.5mg/ml inj  | 1                    |                    |
| GLUCOSE 50MG/ML/POTASSIUM CHLORIDE<br>0.04MEQ/ML/SODIUM CHLORIDE 9MG/ML INJ    | 1                    |                    |
| glucose 50mg/ml/sodium chloride 2mg/ml inj                                     | 1                    |                    |
| glucose 50mg/ml/sodium chloride 4.5mg/ml inj                                   | 1                    |                    |
| glucose 50mg/ml/sodium chloride 9mg/ml inj                                     | 1                    |                    |
| ISOLYTE P INJ  | 1                    |                    |
| ISOLYTE S INJ  | 1                    |                    |
| KCL/D5W/LR INJ 0.15%   | 1                    |                    |
| PLASMA-LYTE 148 INJ  | 1                    |                    |
| PLASMALYTE A INJ   | 1                    |                    |
| POTASSIUM CHLORIDE 0.02MEQ/ML/SODIUM<br>CHLORIDE 4.5MG/ML INJ                  | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites          |
|---|----------------------|-----------------------------|
| <i>potassium chloride 0.02meq/ml/sodium chloride 9mg/ml inj</i> | 1                    |                             |
| POTASSIUM CHLORIDE 0.04MEQ/ML/SODIUM CHLORIDE 9MG/ML INJ        | 1                    |                             |
| <b>MAGNESIUM</b>  |                      |                             |
| <i>magnesium sulfate 500mg/ml inj</i>                           | 1                    |                             |
| <i>magnesium sulfate 500mg/ml syringe</i>                       | 1                    |                             |
| <b>POTASSIUM</b>  |                      |                             |
| K-TAB 8MEQ ER TAB   | 1                    |                             |
| <i>klor-con 10meq er tab</i>                                    | 1                    |                             |
| <i>klor-con 10meq micro er tab</i>                              | 1                    |                             |
| KLOR-CON 15MEQ MICRO ER TAB                                     | 1                    |                             |
| <i>klor-con 20meq micro er tab</i>                              | 1                    |                             |
| <i>klor-con 20meq powder for oral soln</i>                      | 1                    |                             |
| <i>klor-con 8meq er tab</i>                                     | 1                    |                             |
| POTASSIUM CHLORIDE 0.1MEQ/ML INJ                                | 1                    |                             |
| POTASSIUM CHLORIDE 0.2MEQ/ML INJ                                | 1                    |                             |
| POTASSIUM CHLORIDE 0.4MEQ/ML INJ                                | 1                    |                             |
| <i>potassium chloride 1.33meq/ml oral soln</i>                  | 1                    |                             |
| <i>potassium chloride 10meq er cap</i>                          | 1                    |                             |
| <i>potassium chloride 10meq er tab</i>                          | 1                    |                             |
| <i>potassium chloride 10meq micro er tab</i>                    | 1                    |                             |
| <i>potassium chloride 2.67meq/ml oral soln</i>                  | 1                    |                             |
| <i>potassium chloride 20meq er tab</i>                          | 1                    |                             |
| <i>potassium chloride 20meq micro er tab</i>                    | 1                    |                             |
| <i>potassium chloride 20meq powder for oral soln</i>            | 1                    |                             |
| <i>potassium chloride 2meq/ml (20ml) inj</i>                    | 1                    |                             |
| <i>potassium chloride 2meq/ml inj</i>                           | 1                    |                             |
| <i>potassium chloride 8meq er cap</i>                           | 1                    |                             |
| <i>potassium chloride 8meq er tab</i>                           | 1                    |                             |
| <b>SODIUM</b>   |                      |                             |
| <i>sodium chloride 30mg/ml inj</i>                              | 1                    |                             |
| <i>sodium chloride 4.5mg/ml inj</i>                             | 1                    |                             |
| <i>sodium chloride 50mg/ml inj</i>                              | 1                    |                             |
| <i>sodium chloride 9mg/ml inj</i>                               | 1                    |                             |
| <b>MISCELLANEOUS THERAPEUTIC CLASSES</b>                        |                      |                             |
| <b>CHELATING AGENTS</b>   |                      |                             |
| <i>clovique 250mg cap</i>                                       | 1                    | PA                          |
| <i>penicillamine 250mg tab</i>                                  | 1                    |                             |
| <i>trientine 250mg cap</i>                                      | 1                    | PA                          |
| <b>IMMUNOMODULATORS</b>   |                      |                             |
| REVLIMID 10MG CAP   | 1                    | NDS PA NSO QL=30 EA/30 Días |
| REVLIMID 15MG CAP   | 1                    | NDS PA NSO QL=30 EA/30 Días |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                          | Nivel de Medicamento | Requisitos/Límites          |
|---|----------------------|-----------------------------|
| REVLIMID 2.5MG CAP                              | 1                    | NDS PA NSO QL=30 EA/30 Días |
| REVLIMID 20MG CAP                               | 1                    | NDS PA NSO QL=30 EA/30 Días |
| REVLIMID 25MG CAP                               | 1                    | NDS PA NSO QL=30 EA/30 Días |
| REVLIMID 5MG CAP                                | 1                    | NDS PA NSO QL=30 EA/30 Días |
| THALOMID 100MG CAP                              | 1                    | NDS PA NSO                  |
| THALOMID 150MG CAP                              | 1                    | NDS PA NSO                  |
| THALOMID 200MG CAP                              | 1                    | NDS PA NSO                  |
| THALOMID 50MG CAP                               | 1                    | NDS PA NSO                  |
| <b>IMMUNOSUPPRESSIVE AGENTS</b>                 |                      |                             |
| ASTAGRAF 0.5MG ER CAP                           | 1                    | PA BvD                      |
| ASTAGRAF 1MG ER CAP                             | 1                    | PA BvD                      |
| ASTAGRAF 5MG ER CAP                             | 1                    | PA BvD                      |
| <i>azathioprine 50mg tab</i>                    | 1                    | PA BvD                      |
| <i>cyclosporine 100mg cap</i>                   | 1                    | PA BvD                      |
| <i>cyclosporine 25mg cap</i>                    | 1                    | PA BvD                      |
| <i>cyclosporine modified 100mg cap</i>          | 1                    | PA BvD                      |
| <i>cyclosporine modified 100mg/ml oral soln</i> | 1                    | PA BvD                      |
| <i>cyclosporine modified 25mg cap</i>           | 1                    | PA BvD                      |
| <i>cyclosporine modified 50mg cap</i>           | 1                    | PA BvD                      |
| ENSPRYNG 120MG/ML SYRINGE                       | 1                    | NDS PA QL=2 ML/28 Días      |
| ENVARSUS 0.75MG ER TAB                          | 1                    | PA BvD                      |
| ENVARSUS 1MG ER TAB                             | 1                    | PA BvD                      |
| ENVARSUS 4MG ER TAB                             | 1                    | PA BvD                      |
| <i>everolimus 0.25mg tab</i>                    | 1                    | PA BvD                      |
| <i>everolimus 0.5mg tab</i>                     | 1                    | PA BvD                      |
| <i>everolimus 0.75mg tab</i>                    | 1                    | PA BvD                      |
| <i>gengraf 100mg cap</i>                        | 1                    | PA BvD                      |
| <i>gengraf 100mg/ml oral soln</i>               | 1                    | PA BvD                      |
| <i>gengraf 25mg cap</i>                         | 1                    | PA BvD                      |
| LUPKYNIS 7.9MG CAP                              | 1                    | NDS PA QL=180 EA/30 Días    |
| <i>mycophenolate mofetil 200mg/ml susp</i>      | 1                    | PA BvD                      |
| <i>mycophenolate mofetil 250mg cap</i>          | 1                    | PA BvD                      |
| <i>mycophenolate mofetil 500mg tab</i>          | 1                    | PA BvD                      |
| <i>mycophenolic acid 180mg dr tab</i>           | 1                    | PA BvD                      |
| <i>mycophenolic acid 360mg dr tab</i>           | 1                    | PA BvD                      |
| PROGRAF 0.2MG GRANULES FOR ORAL SUSP            | 1                    | PA BvD                      |
| PROGRAF 1MG GRANULES FOR ORAL SUSP              | 1                    | PA BvD                      |
| SANDIMMUNE 100MG/ML ORAL SOLN                   | 1                    | PA BvD                      |
| <i>sirolimus 0.5mg tab</i>                      | 1                    | PA BvD                      |
| <i>sirolimus 1mg tab</i>                        | 1                    | PA BvD                      |
| <i>sirolimus 1mg/ml oral soln</i>               | 1                    | PA BvD                      |
| <i>sirolimus 2mg tab</i>                        | 1                    | PA BvD                      |
| <i>tacrolimus 0.5mg cap</i>                     | 1                    | PA BvD                      |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites     |
|--|----------------------|------------------------|
| <i>tacrolimus 1mg cap</i>  | 1                    | PA BvD                 |
| <i>tacrolimus 5mg cap</i>  | 1                    | PA BvD                 |
| <b>POTASSIUM REMOVING AGENTS</b>                                 |                      |                        |
| LOKELMA 10GM POWDER FOR ORAL SUSP                                | 1                    | PA                     |
| LOKELMA 5GM POWDER FOR ORAL SUSP                                 | 1                    | PA                     |
| <i>sodium polystyrene sulfonate 15000mg powder for oral susp</i> | 1                    |                        |
| SPS 15GM/60ML SUSP   | 1                    |                        |
| VELTASSA 16.8GM POWDER FOR ORAL SUSP                             | 1                    | PA                     |
| VELTASSA 25.2GM POWDER FOR ORAL SUSP                             | 1                    | PA                     |
| VELTASSA 8.4GM POWDER FOR ORAL SUSP                              | 1                    | PA                     |
| <b>SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS</b>                       |                      |                        |
| BENLYSTA 200MG/ML AUTO-INJECTOR                                  | 1                    | NDS PA QL=4 ML/28 Días |
| BENLYSTA 200MG/ML SYRINGE  | 1                    | NDS PA QL=4 ML/28 Días |
| <b>MOUTH/THROAT/DENTAL AGENTS</b>                                |                      |                        |
| <b>ANESTHETICS TOPICAL ORAL</b>                                  |                      |                        |
| <i>lidocaine viscous 2% topical soln</i>                         | 1                    |                        |
| <b>ANTI-INFECTIVES - THROAT</b>                                  |                      |                        |
| <i>clotrimazole 10mg lozenge</i>                                 | 1                    |                        |
| <i>nystatin 100000unit/ml susp</i>                               | 1                    |                        |
| <b>ANTISEPTICS - MOUTH/THROAT</b>                                |                      |                        |
| <i>chlorhexidine gluconate 0.12% mouthwash</i>                   | 1                    |                        |
| <i>periogard 0.12% mouthwash</i>                                 | 1                    |                        |
| <b>STEROIDS - MOUTH/THROAT/DENTAL</b>                            |                      |                        |
| <i>triamcinolone acetonide 0.1% oral paste</i>                   | 1                    |                        |
| <b>THROAT PRODUCTS - MISC.</b>                                   |                      |                        |
| <i>cevimeline 30mg cap</i>                                       | 1                    |                        |
| <i>pilocarpine 5mg tab</i>                                       | 1                    |                        |
| <i>pilocarpine 7.5mg tab</i>                                     | 1                    |                        |
| <b>MUSCULOSKELETAL THERAPY AGENTS</b>                            |                      |                        |
| <b>CENTRAL MUSCLE RELAXANTS</b>                                  |                      |                        |
| <i>baclofen 10mg tab</i>   | 1                    |                        |
| <i>baclofen 20mg tab</i>   | 1                    |                        |
| <i>carisoprodol 350mg tab</i>                                    | 1                    |                        |
| <i>chlorzoxazone 500mg tab</i>                                   | 1                    |                        |
| <i>cyclobenzaprine 10mg tab</i>                                  | 1                    |                        |
| <i>cyclobenzaprine 5mg tab</i>                                   | 1                    |                        |
| <i>metaxalone 800mg tab</i>                                      | 1                    |                        |
| <i>methocarbamol 500mg tab</i>                                   | 1                    |                        |
| <i>methocarbamol 750mg tab</i>                                   | 1                    |                        |
| <i>orphenadrine citrate 100mg er tab</i>                         | 1                    |                        |
| <i>tizanidine 2mg tab</i>  | 1                    |                        |
| <i>tizanidine 4mg tab</i>  | 1                    |                        |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                       | Nivel de Medicamento | Requisitos/Límites       |
|--|----------------------|--------------------------|
| <b>DIRECT MUSCLE RELAXANTS</b>                               |                      |                          |
| <i>dantrolene sodium 100mg cap</i>                           | 1                    |                          |
| <i>dantrolene sodium 25mg cap</i>                            | 1                    |                          |
| <i>dantrolene sodium 50mg cap</i>                            | 1                    |                          |
| <b>NASAL AGENTS - SYSTEMIC AND TOPICAL</b>                   |                      |                          |
| <b>NASAL ANTIALLERGY</b>                                     |                      |                          |
| <i>azelastine 0.15% (206mcg/act) nasal inhaler</i>           | 1                    |                          |
| <i>azelastine 1% (137mcg/act) nasal inhaler</i>              | 1                    |                          |
| <i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i>          | 1                    |                          |
| <b>NASAL ANTICHOLINERGICS</b>                                |                      |                          |
| <i>ipratropium bromide 0.03% (0.021mg/act) nasal inhaler</i> | 1                    |                          |
| <i>ipratropium bromide 0.06% (0.042mg/act) nasal inhaler</i> | 1                    |                          |
| <b>NASAL STEROIDS</b>  |                      |                          |
| <i>FLUNISOLIDE 0.025MG/ACT NASAL INHALER</i>                 | 1                    | QL=50 ML/30 Días         |
| <i>fluticasone propionate 50mcg/act nasal inhaler</i>        | 1                    | QL=32 GM/30 Días         |
| <b>NEUROMUSCULAR AGENTS</b>                                  |                      |                          |
| <b>ALS AGENTS</b>  |                      |                          |
| <i>riluzole 50mg tab</i>                                     | 1                    |                          |
| <b>SPINAL MUSCULAR ATROPHY AGENTS (SMA)</b>                  |                      |                          |
| <i>EVRYSDI 0.75MG/ML ORAL SOLN</i>                           | 1                    | NDS PA QL=200 ML/30 Días |
| <b>NUTRIENTS</b>   |                      |                          |
| <b>CARBOHYDRATES</b>   |                      |                          |
| <i>glucose 100mg/ml inj</i>                                  | 1                    | PA BvD                   |
| <i>glucose 50mg/ml inj</i>                                   | 1                    |                          |
| <b>LIPIDS</b>  |                      |                          |
| <i>INTRALIPID 20GM/100ML INJ</i>                             | 1                    | PA BvD                   |
| <i>NUTRILIPID 20GM/100ML INJ</i>                             | 1                    | PA BvD                   |
| <b>PROTEINS</b>  |                      |                          |
| <i>AMINOSYN-PF 7% INJ</i>                                    | 1                    | PA BvD                   |
| <i>CLINIMIX 4.25/10 INJ</i>                                  | 1                    | PA BvD                   |
| <i>CLINIMIX 4.25/5 INJ</i>                                   | 1                    | PA BvD                   |
| <i>CLINIMIX 5/15 INJ</i>                                     | 1                    | PA BvD                   |
| <i>CLINIMIX 5/20 INJ</i>                                     | 1                    | PA BvD                   |
| <i>CLINIMIX E 2.75/5 INJ</i>                                 | 1                    | PA BvD                   |
| <i>CLINIMIX E 4.25/10 INJ</i>                                | 1                    | PA BvD                   |
| <i>CLINIMIX E 4.25/5 INJ</i>                                 | 1                    | PA BvD                   |
| <i>CLINIMIX E 5/15 INJ</i>                                   | 1                    | PA BvD                   |
| <i>CLINIMIX E 5/20 INJ</i>                                   | 1                    | PA BvD                   |
| <i>clinisol 15 inj</i>                                       | 1                    | PA BvD                   |
| <i>HEPATAMINE 8 INJ</i>                                      | 1                    | PA BvD                   |
| <i>plenamine 15% inj</i>                                     | 1                    | PA BvD                   |

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| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites |
|---|----------------------|--------------------|
| PREMASOL 10% INJ  | 1                    | PA BvD             |
| PROCALAMINE 3% INJ  | 1                    | PA BvD             |
| PROSOL 20% INJ  | 1                    | PA BvD             |
| TRAVASOL 10% INJ  | 1                    | PA BvD             |
| TROPHAMINE 10% INJ  | 1                    | PA BvD             |
| <b>OPHTHALMIC AGENTS</b>  |                      |                    |
| <b>BETA-BLOCKERS - OPHTHALMIC</b>   |                      |                    |
| <i>betaxolol 0.5% ophth soln</i>  | 1                    |                    |
| BETIMOL 0.25% OPHTH SOLN  | 1                    |                    |
| BETIMOL 0.5% OPHTH SOLN   | 1                    |                    |
| BETOPTIC S 0.25% OPHTH SUSP   | 1                    |                    |
| CARTEOLOL 1% OPHTH SOLN   | 1                    |                    |
| COMBIGAN 2-5MG/ML OPHTH SOLN  | 1                    |                    |
| <i>dorzolamide/timolol 22.3-6.8mg/ml ophth soln</i>                       | 1                    |                    |
| <i>dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)</i> | 1                    |                    |
| LEVOBUNOLOL 0.5% OPHTH SOLN   | 1                    |                    |
| <i>timolol 0.25% ophth gel</i>  | 1                    |                    |
| <i>timolol 0.25% ophth soln</i>   | 1                    |                    |
| <i>timolol 0.5% 24hr ophth soln</i>                                       | 1                    |                    |
| <i>timolol 0.5% ophth gel</i>   | 1                    |                    |
| <i>timolol 0.5% ophth soln</i>  | 1                    |                    |
| <b>CYCLOPLEGIC MYDRIATICS</b>   |                      |                    |
| ATROPINE SULFATE 1% OPHTH SOLN  | 1                    |                    |
| <b>MIOTICS</b>  |                      |                    |
| <i>pilocarpine 1% ophth soln</i>  | 1                    |                    |
| <i>pilocarpine 2% ophth soln</i>  | 1                    |                    |
| <i>pilocarpine 4% ophth soln</i>  | 1                    |                    |
| <b>OPHTHALMIC ADRENERGIC AGENTS</b>                                       |                      |                    |
| ALPHAGAN 0.1% OPHTH SOLN  | 1                    |                    |
| <i>apraclonidine 0.5% ophth soln</i>                                      | 1                    |                    |
| <i>brimonidine tartrate 0.15% ophth soln</i>                              | 1                    |                    |
| <i>brimonidine tartrate 0.2% ophth soln</i>                               | 1                    |                    |
| IOPIDINE 1% OPHTH SOLN  | 1                    |                    |
| SIMBRINZA 0.2-1% OPHTH SUSP   | 1                    |                    |
| <b>OPHTHALMIC ANTI-INFECTIVES</b>   |                      |                    |
| AZASITE 1% OPHTH SOLN   | 1                    |                    |
| BACITRACIN 500UNIT/GM OPHTH OINTMENT                                      | 1                    |                    |
| <i>bacitracin/polymyxin B 0.5-10unit/mg ophth ointment</i>                | 1                    | QL=7 GM/7 Días     |
| <i>ciprofloxacin 0.3% ophth soln</i>                                      | 1                    | QL=60 ML/30 Días   |
| <i>erythromycin 0.5% ophth ointment</i>                                   | 1                    | QL=7 GM/7 Días     |
| <i>gatifloxacin 0.5% ophth soln</i>                                       | 1                    | QL=5 ML/7 Días     |
| GENTAK 0.3% OPHTH OINTMENT  | 1                    | QL=7 GM/7 Días     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites        |
|--|----------------------|---------------------------|
| <i>gentamicin 0.3% ophth soln</i>  | 1                    | QL=10 ML/7 Días           |
| <i>levofloxacin 0.5% ophth soln</i>  | 1                    | QL=60 ML/30 Días          |
| <i>moxifloxacin 0.5% ophth soln</i>  | 1                    | QL=6 ML/7 Días            |
| NATACYN 5% OPHTH SUSP  | 1                    | QL=15 ML/7 Días           |
| <i>neomycin/bacitracin/polymyxin ophth ointment 5(3.5)mg-400unit-10000unit</i> | 1                    | QL=7 GM/7 Días            |
| NEOMYCIN/POLYMYXIN B/GRAMICIDIN 1.75-10000-0.025MG-UNT-MG/ML OPHTH SOLN        | 1                    | QL=10 ML/7 Días           |
| <i>ofloxacin 0.3% ophth soln</i>   | 1                    | QL=60 ML/30 Días          |
| <i>polymyxin b(trimethoprim 10000 Unit/ML-0.1% ophth soln</i>                  | 1                    | QL=10 ML/7 Días           |
| SULFACETAMIDE SODIUM 10% OPHTH OINTMEN   | 1                    | QL=7 GM/7 Días            |
| <i>sulfacetamide sodium 10% ophth soln</i>                                     | 1                    | QL=15 ML/7 Días           |
| <i>tobramycin 0.3% ophth soln</i>  | 1                    | QL=60 ML/30 Días          |
| TRIFLURIDINE 1% OPHTH SOLN   | 1                    | QL=15 ML/7 Días           |
| ZIRGAN 0.15% OPHTH GEL   | 1                    | QL=10 GM/7 Días           |
| <b>OPHTHALMIC IMMUNOMODULATORS</b>   |                      |                           |
| RESTASIS 0.05% OPHTH SUSP  | 1                    |                           |
| <b>OPHTHALMIC KINASE INHIBITORS</b>  |                      |                           |
| RHOPRESSA 0.02% OPHTH SOLN   | 1                    | QL=5 ML/30 Días           |
| ROCKLATAN 0.05-0.2MG/ML OPHTH SOLN   | 1                    | QL=5 ML/30 Días           |
| <b>OPHTHALMIC LOCAL ANESTHETICS</b>  |                      |                           |
| <i>proparacaine 0.5% ophth soln</i>  | 1                    |                           |
| <b>OPHTHALMIC NERVE GROWTH FACTORS</b>   |                      |                           |
| OXERVATE 0.002% OPHTH SOLN   | 1                    | NDS PA QL=112 ML/365 Días |
| <b>OPHTHALMIC STEROIDS</b>   |                      |                           |
| ALREX 0.2% OPHTH SUSP  | 1                    |                           |
| BLEPHAMIDE 0.2-10% OPHTH SUSP  | 1                    |                           |
| DEXAMETHASONE PHOSPHATE 0.1% OPHTH SOLN  | 1                    |                           |
| <i>dexamethasone/neomycin/polymyxin b 0.1% ophth ointment</i>                  | 1                    |                           |
| <i>dexamethasone/tobramycin 0.3-0.1% ophth susp</i>                            | 1                    |                           |
| DUREZOL 0.05% OPHTH SUSP   | 1                    |                           |
| <i>fluorometholone 0.1% ophth susp</i>   | 1                    |                           |
| LOTEMAX 0.5% OPHTH OINTMENT  | 1                    |                           |
| <i>loteprednol etabonate 0.5% ophth gel</i>                                    | 1                    |                           |
| <i>loteprednol etabonate 0.5% ophth susp</i>                                   | 1                    |                           |
| MAXIDEX 0.1% OPHTH SUSP  | 1                    |                           |
| <i>neomycin/polymyxin/bacitracin/hydrocortisone ophth 1% ointment</i>          | 1                    |                           |
| <i>neomycin/polymyxin/dexamethasone 0.1% ophth susp</i>                        | 1                    |                           |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites      |
|---|----------------------|-------------------------|
| NEOMYCIN/POLYMYXIN/HYDROCORTISONE<br>3.5-10000UNIT-10MG/ML OPHTH SUSP | 1                    |                         |
| PRED MILD 0.12% OPHTH SUSP  | 1                    |                         |
| PRED-G 0.3-1% OPHTH SUSP  | 1                    |                         |
| PREDNISOLONE 1% OPHTH SOLN  | 1                    |                         |
| PREDNISOLONE ACETATE 1% OPHTH SUSP                                    | 1                    |                         |
| SULFACETAMIDE/PREDNISOLONE 10-0.25%<br>OPHTH SOLN                     | 1                    |                         |
| TOBRADEX 0.1-0.3% OPHTH OINTMENT                                      | 1                    |                         |
| ZYLET 0.5-0.3% OPHTH SUSP   | 1                    |                         |
| <b>OPHTHALMICS - MISC.</b>  |                      |                         |
| ALOCRIL 2% OPHTH SOLN   | 1                    |                         |
| ALOMIDE 0.1% OPHTH SOLN   | 1                    |                         |
| <i>azelastine 0.05% ophth soln</i>                                    | 1                    |                         |
| <i>bepotastine besilate 1.5% ophth soln</i>                           | 1                    |                         |
| <i>brinzolamide 1% ophth susp</i>                                     | 1                    |                         |
| <i>bromfenac 0.09% ophth soln</i>                                     | 1                    | QL=6.80 ML/365 Días     |
| <i>cromolyn sodium 4% ophth soln</i>                                  | 1                    |                         |
| CYSTADROPS 0.37% OPHTH SOLN   | 1                    | NDS PA QL=20 ML/28 Días |
| CYSTARAN 0.44% OPHTH SOLN   | 1                    | NDS PA QL=60 ML/28 Días |
| <i>diclofenac sodium 0.1% ophth soln</i>                              | 1                    | QL=20 ML/365 Días       |
| <i>dorzolamide 2% ophth soln</i>                                      | 1                    |                         |
| <i>epinastine 0.05% ophth soln</i>                                    | 1                    |                         |
| FLURBIPROFEN SODIUM 0.03% OPHTH SOLN                                  | 1                    |                         |
| ILEVRO 0.3% OPHTH SUSP  | 1                    | QL=12 ML/365 Días       |
| <i>ketorolac tromethamine 0.4% ophth soln</i>                         | 1                    | QL=20 ML/365 Días       |
| <i>ketorolac tromethamine 0.5% ophth soln</i>                         | 1                    |                         |
| NEVANAC 0.1% OPHTH SUSP   | 1                    | QL=12 ML/365 Días       |
| <i>olopatadine 0.1% ophth soln</i>                                    | 1                    |                         |
| <i>olopatadine 0.2% ophth soln</i>                                    | 1                    |                         |
| <b>PROSTAGLANDINS - OPHTHALMIC</b>                                    |                      |                         |
| <i>bimatoprost 0.03% ophth soln</i>                                   | 1                    | QL=5 ML/30 Días         |
| <i>latanoprost 0.005% ophth soln</i>                                  | 1                    | QL=5 ML/30 Días         |
| LUMIGAN 0.01% OPHTH SOLN  | 1                    | QL=5 ML/30 Días         |
| <i>travoprost 0.004% ophth soln</i>                                   | 1                    | QL=5 ML/30 Días         |
| <b>OTIC AGENTS</b>  |                      |                         |
| <b>OTIC AGENTS - MISCELLANEOUS</b>                                    |                      |                         |
| <i>acetic acid 2% otic soln</i>                                       | 1                    |                         |
| <b>OTIC ANTI-INFECTIVES</b>   |                      |                         |
| CETRAXAL 0.2% OTIC SOLN   | 1                    |                         |
| CIPROFLOXACIN 0.2% OTIC SOLN  | 1                    |                         |
| <i>ofloxacin 0.3% otic soln</i>                                       | 1                    |                         |
| <b>OTIC COMBINATIONS</b>  |                      |                         |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento  | Nivel de Medicamento | Requisitos/Límites |
|---|----------------------|--------------------|
| <i>ciprofloxacin/dexamethasone 0.3-0.1% otic susp</i>               | 1                    |                    |
| <i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic soln</i> | 1                    |                    |
| <i>neomycin/polymyxin/hydrocortisone 3.5-10000unit-1% otic susp</i> | 1                    |                    |
| <b>OTIC STEROIDS</b>  |                      |                    |
| <i>flac 0.01% otic soln</i>   | 1                    |                    |
| <i>fluocinolone acetonide 0.01% otic soln</i>                       | 1                    |                    |
| <i>hydrocortisone/acetic acid 1-2% otic soln</i>                    | 1                    |                    |
| <b>PASSIVE IMMUNIZING AND TREATMENT AGENTS</b>                      |                      |                    |
| <b>IMMUNE SERUMS</b>  |                      |                    |
| BIVIGAM 5GM/50ML INJ  | 1                    | NDS PA             |
| FLEBOGAMMA 5GM/50ML INJ   | 1                    | NDS PA             |
| GAMMAGARD 10GM INJ  | 1                    | NDS PA             |
| GAMMAGARD 2.5GM/25ML INJ  | 1                    | NDS PA             |
| GAMMAGARD 5GM INJ   | 1                    | NDS PA             |
| GAMMAKED 1GM/10ML INJ   | 1                    | NDS PA             |
| GAMMAPLEX 10GM/100ML INJ  | 1                    | NDS PA             |
| GAMMAPLEX 10GM/200ML INJ  | 1                    | NDS PA             |
| GAMMAPLEX 20GM/200ML INJ  | 1                    | NDS PA             |
| GAMMAPLEX 5GM/50ML INJ  | 1                    | NDS PA             |
| GAMUNEX 1GM/10ML INJ  | 1                    | NDS PA             |
| OCTAGAM 1GM/20ML INJ  | 1                    | NDS PA             |
| OCTAGAM 2GM/20ML INJ  | 1                    | NDS PA             |
| PANZYGA 10GM/100ML INJ  | 1                    | NDS PA             |
| PANZYGA 1GM/10ML INJ  | 1                    | NDS PA             |
| PANZYGA 2.5GM/25ML INJ  | 1                    | NDS PA             |
| PANZYGA 20GM/200ML INJ  | 1                    | NDS PA             |
| PANZYGA 30GM/300ML INJ  | 1                    | NDS PA             |
| PANZYGA 5GM/50ML INJ  | 1                    | NDS PA             |
| PRIVIGEN 20GM/200ML INJ   | 1                    | NDS PA             |
| VARIZIG 125UNIT/1.2ML INJ   | 1                    | NDS                |
| <b>PENICILLINS</b>  |                      |                    |
| <b>AMINOPENICILLINS</b>   |                      |                    |
| AMOXICILLIN 125MG CHEW TAB  | 1                    |                    |
| <i>amoxicillin 250mg cap</i>  | 1                    |                    |
| AMOXICILLIN 250MG CHEW TAB  | 1                    |                    |
| <i>amoxicillin 25mg/ml susp</i>                                     | 1                    |                    |
| <i>amoxicillin 40mg/ml susp</i>                                     | 1                    |                    |
| <i>amoxicillin 500mg cap</i>  | 1                    |                    |
| <i>amoxicillin 500mg tab</i>  | 1                    |                    |
| <i>amoxicillin 50mg/ml susp</i>                                     | 1                    |                    |
| <i>amoxicillin 80mg/ml susp</i>                                     | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                               | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <i>amoxicillin 875mg tab</i>                         | 1                    |                    |
| <i>ampicillin 1000mg inj</i>                         | 1                    |                    |
| <i>ampicillin 100mg/ml inj</i>                       | 1                    |                    |
| AMPICILLIN 125MG INJ                                 | 1                    |                    |
| AMPICILLIN 500MG CAP                                 | 1                    |                    |
| <b>NATURAL PENICILLINS</b>                           |                      |                    |
| BICILLIN L-A 1200000UNIT/2ML SYRINGE                 | 1                    |                    |
| BICILLIN L-A 2400000UNIT/4ML SYRINGE                 | 1                    |                    |
| BICILLIN L-A 600000UNIT/ML SYRINGE                   | 1                    |                    |
| <i>penicillin g potassium 1000000unit/ml inj</i>     | 1                    |                    |
| PENICILLIN G POTASSIUM 40000UNIT/ML INJ              | 1                    |                    |
| PENICILLIN G POTASSIUM 60000UNIT/ML INJ              | 1                    |                    |
| PENICILLIN G PROCAINE 600000UNIT/ML SYRINGE          | 1                    |                    |
| PENICILLIN G SODIUM 100000UNIT/ML INJ                | 1                    |                    |
| <i>penicillin v potassium 250mg tab</i>              | 1                    |                    |
| PENICILLIN V POTASSIUM 25MG/ML ORAL SOLN             | 1                    |                    |
| <i>penicillin v potassium 500mg tab</i>              | 1                    |                    |
| PENICILLIN V POTASSIUM 50MG/ML ORAL SOLN             | 1                    |                    |
| <b>PENICILLIN COMBINATIONS</b>                       |                      |                    |
| AMOXICILLIN 1000MG/CLAVULANATE 62.5MG ER TAB         | 1                    |                    |
| AMOXICILLIN 200MG/CLAVULANATE 28.5MG CHEW TAB        | 1                    |                    |
| <i>amoxicillin 250mg/clavulanate 125mg tab</i>       | 1                    |                    |
| AMOXICILLIN 400MG/CLAVULANATE 57MG CHEW TAB          | 1                    |                    |
| <i>amoxicillin 500mg/clavulanate 125mg tab</i>       | 1                    |                    |
| <i>amoxicillin 875mg/clavulanate 125mg tab</i>       | 1                    |                    |
| <i>amoxicillin/k clavulanate 200-28.5mg/5ml susp</i> | 1                    |                    |
| <i>amoxicillin/k clavulanate 250-62.5mg/5ml susp</i> | 1                    |                    |
| <i>amoxicillin/k clavulanate 400-57mg/5ml susp</i>   | 1                    |                    |
| <i>amoxicillin/k clavulanate 600-42.9mg/5ml susp</i> | 1                    |                    |
| <i>ampicillin 1000mg/sulbactam 500mg inj</i>         | 1                    |                    |
| <i>ampicillin 100mg/ml/sulbactam 50mg/ml inj</i>     | 1                    |                    |
| <i>ampicillin 2000mg/sulbactam 1000mg inj</i>        | 1                    |                    |
| BICILLIN 300000-300000UNIT/ML SYRINGE                | 1                    |                    |
| BICILLIN 450000-150000UNIT/ML SYRINGE                | 1                    |                    |
| <i>piperacillin 2000mg/tazobactam 250mg inj</i>      | 1                    |                    |
| <i>piperacillin 200mg/ml/tazobactam 25mg/ml inj</i>  | 1                    |                    |
| <i>piperacillin 3000mg/tazobactam 375mg inj</i>      | 1                    |                    |
| <i>piperacillin 4000mg/tazobactam 500mg inj</i>      | 1                    |                    |
| ZOSYN 2000-250MG INJ                                 | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                   | Nivel de Medicamento | Requisitos/Límites       |
|--|----------------------|--------------------------|
| ZOSYN 3000-375MG INJ                                     | 1                    |                          |
| <b>PENICILLINASE-RESISTANT PENICILLINS</b>               |                      |                          |
| <i>dicloxacillin 250mg cap</i>                           | 1                    |                          |
| <i>dicloxacillin 500mg cap</i>                           | 1                    |                          |
| <i>nafcillin 1000mg inj</i>                              | 1                    |                          |
| <i>nafcillin 100mg/ml inj</i>                            | 1                    |                          |
| <i>nafcillin 2000mg inj</i>                              | 1                    |                          |
| <i>oxacillin 1000mg inj</i>                              | 1                    |                          |
| <i>oxacillin 100mg/ml inj</i>                            | 1                    |                          |
| <i>oxacillin 2000mg inj</i>                              | 1                    |                          |
| OXACILLIN 20MG/ML INJ                                    | 1                    |                          |
| OXACILLIN 40MG/ML INJ                                    | 1                    |                          |
| <b>PROGESTINS</b>  |                      |                          |
| <b>PROGESTINS</b>  |                      |                          |
| <i>medroxyprogesterone acetate 10mg tab</i>              | 1                    |                          |
| <i>medroxyprogesterone acetate 2.5mg tab</i>             | 1                    |                          |
| <i>medroxyprogesterone acetate 5mg tab</i>               | 1                    |                          |
| <i>megestrol acetate 125mg/ml susp</i>                   | 1                    | PA                       |
| <i>norethindrone acetate 5mg tab</i>                     | 1                    |                          |
| <i>progesterone 100mg cap</i>                            | 1                    |                          |
| <i>progesterone 200mg cap</i>                            | 1                    |                          |
| <b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</b> |                      |                          |
| <b>AGENTS FOR CHEMICAL DEPENDENCY</b>                    |                      |                          |
| <i>acamprosate calcium 333mg dr tab</i>                  | 1                    |                          |
| <i>disulfiram 250mg tab</i>                              | 1                    |                          |
| <i>disulfiram 500mg tab</i>                              | 1                    |                          |
| <b>ANTI-CATALEPTIC AGENTS</b>                            |                      |                          |
| XYREM 500MG/ML ORAL SOLN                                 | 1                    | NDS PA QL=540 ML/30 Días |
| <b>ANTIDEMENTIA AGENTS</b>                               |                      |                          |
| <i>donepezil 10mg odt</i>                                | 1                    | QL=30 EA/30 Días         |
| <i>donepezil 10mg tab</i>                                | 1                    |                          |
| <i>donepezil 23mg tab</i>                                | 1                    | QL=30 EA/30 Días         |
| <i>donepezil 5mg odt</i>                                 | 1                    | QL=30 EA/30 Días         |
| <i>donepezil 5mg tab</i>                                 | 1                    |                          |
| <i>galantamine 12mg tab</i>                              | 1                    |                          |
| <i>galantamine 4mg tab</i>                               | 1                    |                          |
| <i>galantamine 8mg tab</i>                               | 1                    |                          |
| <i>galantamine hydrobromide 16mg er cap</i>              | 1                    |                          |
| <i>galantamine hydrobromide 24mg er cap</i>              | 1                    |                          |
| GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN                | 1                    |                          |
| <i>galantamine hydrobromide 8mg er cap</i>               | 1                    |                          |
| <i>memantine 10mg tab</i>                                | 1                    |                          |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                               | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| memantine 10mg/memantine 5mg pack                    | 1                    |                    |
| memantine 14mg er cap                                | 1                    |                    |
| memantine 21mg er cap                                | 1                    |                    |
| memantine 28mg er cap                                | 1                    |                    |
| memantine 2mg/ml oral soln                           | 1                    |                    |
| memantine 5mg tab                                    | 1                    |                    |
| memantine 7mg er cap                                 | 1                    |                    |
| rivastigmine 0.192mg/hr patch                        | 1                    |                    |
| rivastigmine 0.396mg/hr patch                        | 1                    |                    |
| rivastigmine 0.554mg/hr patch                        | 1                    |                    |
| rivastigmine 1.5mg cap                               | 1                    |                    |
| rivastigmine 3mg cap                                 | 1                    |                    |
| rivastigmine 4.5mg cap                               | 1                    |                    |
| rivastigmine 6mg cap                                 | 1                    |                    |
| <b>FIBROMYALGIA AGENTS</b>                           |                      |                    |
| SAVELLA 100MG TAB                                    | 1                    | QL=60 EA/30 Días   |
| SAVELLA 12.5MG TAB                                   | 1                    | QL=60 EA/30 Días   |
| SAVELLA 25MG TAB                                     | 1                    | QL=60 EA/30 Días   |
| SAVELLA 4-WEEK TITRATION PACK                        | 1                    |                    |
| SAVELLA 50MG TAB                                     | 1                    | QL=60 EA/30 Días   |
| <b>MOVEMENT DISORDER DRUG THERAPY</b>                |                      |                    |
| AUSTEDO 12MG TAB                                     | 1                    | NDS PA             |
| AUSTEDO 6MG TAB                                      | 1                    | NDS PA             |
| AUSTEDO 9MG TAB                                      | 1                    | NDS PA             |
| INGREZZA 40MG CAP                                    | 1                    | NDS PA             |
| INGREZZA 80MG CAP                                    | 1                    | NDS PA             |
| tetrabenazine 12.5mg tab                             | 1                    | PA                 |
| tetrabenazine 25mg tab                               | 1                    | PA                 |
| <b>MULTIPLE SCLEROSIS AGENTS</b>                     |                      |                    |
| AUBAGIO 14MG TAB                                     | 1                    | NDS                |
| AUBAGIO 7MG TAB                                      | 1                    | NDS                |
| AVONEX 30MCG/0.5ML AUTO-INJECTOR                     | 1                    | NDS                |
| AVONEX 30MCG/0.5ML SYRINGE                           | 1                    | NDS                |
| dalfampridine 10mg er tab                            | 1                    | QL=60 EA/30 Días   |
| dimethyl fumarate 120mg dr cap                       | 1                    | NDS                |
| dimethyl fumarate 120mg/dimethyl fumarate 240mg pack | 1                    | NDS                |
| dimethyl fumarate 240mg dr cap                       | 1                    | NDS                |
| EXTAVIA 0.3MG INJ                                    | 1                    | NDS                |
| GILENYA 0.5MG CAP                                    | 1                    | NDS                |
| glatiramer acetate 20mg/ml syringe                   | 1                    |                    |
| glatiramer acetate 40mg/ml syringe                   | 1                    |                    |
| glatopa 20mg/ml syringe                              | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                   | Nivel de Medicamento | Requisitos/Límites       |
|--|----------------------|--------------------------|
| <i>glatopa 40mg/ml syringe</i>                           | 1                    |                          |
| KESIMPTA 20MG/0.4ML PEN INJ                              | 1                    | NDS                      |
| MAYZENT 0.25MG TAB                                       | 1                    | NDS                      |
| MAYZENT 2MG TAB  | 1                    | NDS                      |
| PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR                      | 1                    | NDS                      |
| PLEGRIDY 125MCG/0.5ML SYRINGE                            | 1                    | NDS                      |
| REBIF 22MCG/0.5ML AUTO-INJECTOR                          | 1                    | NDS                      |
| REBIF 22MCG/0.5ML SYRINGE                                | 1                    | NDS                      |
| REBIF 44MCG/0.5ML AUTO-INJECTOR                          | 1                    | NDS                      |
| REBIF 44MCG/0.5ML SYRINGE                                | 1                    | NDS                      |
| REBIF REBIDOSE PACK                                      | 1                    | NDS                      |
| REBIF TITRATION PACK                                     | 1                    | NDS                      |
| <b>PSEUDOBULBAR AFFECT (PBA) AGENTS</b>                  |                      |                          |
| NUEDEXTA 20-10MG CAP                                     | 1                    | PA QL=60 EA/30 Días      |
| <b>PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.</b> |                      |                          |
| ERGOLOID MESYLATES USP 1MG TAB                           | 1                    |                          |
| PIMOZIDE 1MG TAB   | 1                    |                          |
| PIMOZIDE 2MG TAB   | 1                    |                          |
| <b>SMOKING DETERRENTS</b>                                |                      |                          |
| <i>bupropion 150mg sr tab</i>                            | 1                    |                          |
| CHANTIX 0.5MG TAB  | 1                    |                          |
| CHANTIX 1MG CONTINUING MONTH THERAPY PACK                | 1                    |                          |
| CHANTIX 1MG TAB  | 1                    |                          |
| CHANTIX FIRST MONTH THERAPY PACK                         | 1                    |                          |
| NICOTROL 10MG INH SOLN                                   | 1                    |                          |
| NICOTROL 10MG/ML NASAL INHALER                           | 1                    |                          |
| <b>TRANSTHYRETIN AMYLOIDOSIS AGENTS</b>                  |                      |                          |
| TEGSEDI 284MG/1.5ML SYRINGE                              | 1                    | NDS PA QL=6 ML/28 Días   |
| <b>RESPIRATORY AGENTS - MISC.</b>                        |                      |                          |
| <b>ALPHA-PROTEINASE INHIBITOR (HUMAN)</b>                |                      |                          |
| ARALAST 1000MG INJ                                       | 1                    | NDS PA                   |
| GLASSIA 1000MG/50ML INJ                                  | 1                    | NDS PA                   |
| PROLASTIN 1000MG INJ                                     | 1                    | NDS PA                   |
| ZEMAIRA 1000MG INJ                                       | 1                    | NDS PA                   |
| <b>CYSTIC FIBROSIS AGENTS</b>                            |                      |                          |
| KALYDECO 150MG TAB                                       | 1                    | NDS PA QL=60 EA/30 Días  |
| KALYDECO 25MG GRANULES                                   | 1                    | NDS PA QL=60 EA/30 Días  |
| KALYDECO 50MG GRANULES                                   | 1                    | NDS PA QL=60 EA/30 Días  |
| KALYDECO 75MG GRANULES                                   | 1                    | NDS PA QL=60 EA/30 Días  |
| ORKAMBI 125-100MG GRANULES                               | 1                    | NDS PA QL=60 EA/30 Días  |
| ORKAMBI 125-100MG TAB                                    | 1                    | NDS PA QL=120 EA/30 Días |
| ORKAMBI 125-200MG TAB                                    | 1                    | NDS PA QL=120 EA/30 Días |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                     | Nivel de Medicamento | Requisitos/Límites           |
|--|----------------------|------------------------------|
| ORKAMBI 188-150MG GRANULES                 | 1                    | NDS PA QL=60 EA/30 Días      |
| PULMOZYME 1MG/ML INH SOLN                  | 1                    | NDS PA BvD QL=150 ML/30 Días |
| SYMDEKO 50-75MG/75MG PACK                  | 1                    | NDS PA QL=60 EA/30 Días      |
| SYMDEKO TAB 4-WEEK PACK                    | 1                    | NDS PA QL=60 EA/30 Días      |
| TRIKAFTA 100-50-75MG/150MG PACK            | 1                    | NDS PA QL=90 EA/30 Días      |
| <b>PULMONARY FIBROSIS AGENTS</b>           |                      |                              |
| ESBRIET 267MG CAP                          | 1                    | NDS PA                       |
| ESBRIET 267MG TAB                          | 1                    | NDS PA                       |
| ESBRIET 801MG TAB                          | 1                    | NDS PA                       |
| OFEV 100MG CAP                             | 1                    | NDS PA                       |
| OFEV 150MG CAP                             | 1                    | NDS PA                       |
| <b>SULFONAMIDES</b>                        |                      |                              |
| <b>SULFONAMIDES</b>                        |                      |                              |
| SULFADIAZINE 500MG TAB                     | 1                    |                              |
| <b>TETRACYCLINES</b>                       |                      |                              |
| <b>AMINOMETHYLCYCLINES</b>                 |                      |                              |
| NUZYRA 150MG TAB                           | 1                    | NDS PA QL=30 EA/14 Días      |
| <b>GLYCYLCYCLINES</b>                      |                      |                              |
| TIGECYCLINE 50MG INJ                       | 1                    | NDS                          |
| <b>TETRACYCLINES</b>                       |                      |                              |
| <i>demecclocycline 150mg tab</i>           | 1                    |                              |
| <i>demecclocycline 300mg tab</i>           | 1                    |                              |
| <i>doxy 100mg inj</i>                      | 1                    |                              |
| <i>doxycycline hyclate 100mg cap</i>       | 1                    |                              |
| <i>doxycycline hyclate 100mg tab</i>       | 1                    |                              |
| <i>doxycycline hyclate 20mg tab</i>        | 1                    |                              |
| <i>doxycycline hyclate 50mg cap</i>        | 1                    |                              |
| <i>doxycycline monohydrate 100mg cap</i>   | 1                    |                              |
| <i>doxycycline monohydrate 100mg tab</i>   | 1                    |                              |
| <i>doxycycline monohydrate 50mg cap</i>    | 1                    |                              |
| <i>doxycycline monohydrate 50mg tab</i>    | 1                    |                              |
| <i>doxycycline monohydrate 5mg/ml susp</i> | 1                    |                              |
| <i>minocycline 100mg cap</i>               | 1                    |                              |
| <i>minocycline 100mg tab</i>               | 1                    |                              |
| <i>minocycline 50mg cap</i>                | 1                    |                              |
| <i>minocycline 50mg tab</i>                | 1                    |                              |
| <i>minocycline 75mg cap</i>                | 1                    |                              |
| <i>minocycline 75mg tab</i>                | 1                    |                              |
| <i>monodoxine 100mg cap</i>                | 1                    |                              |
| <i>tetracycline 250mg cap</i>              | 1                    |                              |
| <i>tetracycline 500mg cap</i>              | 1                    |                              |
| <b>THYROID AGENTS</b>                      |                      |                              |
| <b>ANTITHYROID AGENTS</b>                  |                      |                              |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                  | Nivel de Medicamento | Requisitos/Límites |
|---|----------------------|--------------------|
| <i>methimazole 10mg tab</i>             | 1                    |                    |
| <i>methimazole 5mg tab</i>              | 1                    |                    |
| <i>propylthiouracil 50mg tab</i>        | 1                    |                    |
| <b>THYROID HORMONES</b>                 |                      |                    |
| <i>euthyrox 100mcg tab</i>              | 1                    |                    |
| <i>euthyrox 112mcg tab</i>              | 1                    |                    |
| <i>euthyrox 125mcg tab</i>              | 1                    |                    |
| <i>euthyrox 137mcg tab</i>              | 1                    |                    |
| <i>euthyrox 150mcg tab</i>              | 1                    |                    |
| <i>euthyrox 175mcg tab</i>              | 1                    |                    |
| <i>euthyrox 200mcg tab</i>              | 1                    |                    |
| <i>euthyrox 25mcg tab</i>               | 1                    |                    |
| <i>euthyrox 50mcg tab</i>               | 1                    |                    |
| <i>euthyrox 75mcg tab</i>               | 1                    |                    |
| <i>euthyrox 88mcg tab</i>               | 1                    |                    |
| <i>levo-t 100mcg tab</i>                | 1                    |                    |
| <i>levo-t 112mcg tab</i>                | 1                    |                    |
| <i>levo-t 125mcg tab</i>                | 1                    |                    |
| <i>levo-t 137mcg tab</i>                | 1                    |                    |
| <i>levo-t 150mcg tab</i>                | 1                    |                    |
| <i>levo-t 175mcg tab</i>                | 1                    |                    |
| <i>levo-t 200mcg tab</i>                | 1                    |                    |
| <i>levo-t 25mcg tab</i>                 | 1                    |                    |
| <i>levo-t 300mcg tab</i>                | 1                    |                    |
| <i>levo-t 50mcg tab</i>                 | 1                    |                    |
| <i>levo-t 75mcg tab</i>                 | 1                    |                    |
| <i>levo-t 88mcg tab</i>                 | 1                    |                    |
| <i>levothyroxine sodium 0.025mg tab</i> | 1                    |                    |
| <i>levothyroxine sodium 0.05mg tab</i>  | 1                    |                    |
| <i>levothyroxine sodium 0.075mg tab</i> | 1                    |                    |
| <i>levothyroxine sodium 0.088mg tab</i> | 1                    |                    |
| <i>levothyroxine sodium 0.112mg tab</i> | 1                    |                    |
| <i>levothyroxine sodium 0.125mg tab</i> | 1                    |                    |
| <i>levothyroxine sodium 0.137mg tab</i> | 1                    |                    |
| <i>levothyroxine sodium 0.15mg tab</i>  | 1                    |                    |
| <i>levothyroxine sodium 0.175mg tab</i> | 1                    |                    |
| <i>levothyroxine sodium 0.1mg tab</i>   | 1                    |                    |
| <i>levothyroxine sodium 0.2mg tab</i>   | 1                    |                    |
| <i>levothyroxine sodium 0.3mg tab</i>   | 1                    |                    |
| <i>levoxyl 100mcg tab</i>               | 1                    |                    |
| <i>levoxyl 112mcg tab</i>               | 1                    |                    |
| <i>levoxyl 125mcg tab</i>               | 1                    |                    |
| <i>levoxyl 137mcg tab</i>               | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                 | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <i>levoxyl 150mcg tab</i>              | 1                    |                    |
| <i>levoxyl 175mcg tab</i>              | 1                    |                    |
| <i>levoxyl 200mcg tab</i>              | 1                    |                    |
| <i>levoxyl 25mcg tab</i>               | 1                    |                    |
| <i>levoxyl 50mcg tab</i>               | 1                    |                    |
| <i>levoxyl 75mcg tab</i>               | 1                    |                    |
| <i>levoxyl 88mcg tab</i>               | 1                    |                    |
| <i>liothyronine sodium 0.005mg tab</i> | 1                    |                    |
| <i>liothyronine sodium 0.025mg tab</i> | 1                    |                    |
| <i>liothyronine sodium 0.05mg tab</i>  | 1                    |                    |
| <b>SYNTHROID 100MCG TAB</b>            | 1                    |                    |
| <b>SYNTHROID 112MCG TAB</b>            | 1                    |                    |
| <b>SYNTHROID 125MCG TAB</b>            | 1                    |                    |
| <b>SYNTHROID 137MCG TAB</b>            | 1                    |                    |
| <b>SYNTHROID 150MCG TAB</b>            | 1                    |                    |
| <b>SYNTHROID 175MCG TAB</b>            | 1                    |                    |
| <b>SYNTHROID 200MCG TAB</b>            | 1                    |                    |
| <b>SYNTHROID 25MCG TAB</b>             | 1                    |                    |
| <b>SYNTHROID 300MCG TAB</b>            | 1                    |                    |
| <b>SYNTHROID 50MCG TAB</b>             | 1                    |                    |
| <b>SYNTHROID 75MCG TAB</b>             | 1                    |                    |
| <b>SYNTHROID 88MCG TAB</b>             | 1                    |                    |
| <i>unithroid 100mcg tab</i>            | 1                    |                    |
| <i>unithroid 112mcg tab</i>            | 1                    |                    |
| <i>unithroid 125mcg tab</i>            | 1                    |                    |
| <i>unithroid 137mcg tab</i>            | 1                    |                    |
| <i>unithroid 150mcg tab</i>            | 1                    |                    |
| <i>unithroid 175mcg tab</i>            | 1                    |                    |
| <i>unithroid 200mcg tab</i>            | 1                    |                    |
| <i>unithroid 25mcg tab</i>             | 1                    |                    |
| <i>unithroid 300mcg tab</i>            | 1                    |                    |
| <i>unithroid 50mcg tab</i>             | 1                    |                    |
| <i>unithroid 75mcg tab</i>             | 1                    |                    |
| <i>unithroid 88mcg tab</i>             | 1                    |                    |
| <b>TOXOIDS</b>                         |                      |                    |
| <b>TOXOID COMBINATIONS</b>             |                      |                    |
| <b>ADACEL INJ</b>                      | 1                    |                    |
| <b>ADACEL SYRINGE</b>                  | 1                    |                    |
| <b>BOOSTRIX INJ</b>                    | 1                    |                    |
| <b>BOOSTRIX SYRINGE</b>                | 1                    |                    |
| <b>DAPTACEL INJ</b>                    | 1                    |                    |
| <b>DIPHTHERIA/TETANUS TOXOID INJ</b>   | 1                    | PA BvD             |
| <b>INFANRIX SYRINGE</b>                | 1                    |                    |

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| Nombre del medicamento                             | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| KINRIX INJ   | 1                    |                    |
| KINRIX SYRINGE                                     | 1                    |                    |
| PEDIARIX SYRINGE                                   | 1                    |                    |
| QUADRACEL INJ                                      | 1                    |                    |
| TDVAX 4-4UNIT/ML INJ                               | 1                    | PA BvD             |
| TENIVAC 4-10UNIT/ML SYRINGE                        | 1                    | PA BvD             |
| <b>ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS</b> |                      |                    |
| <b>ANTISPASMODICS</b>                              |                      |                    |
| <i>dicyclomine 10mg cap</i>                        | 1                    |                    |
| <i>dicyclomine 20mg tab</i>                        | 1                    |                    |
| <i>dicyclomine 2mg/ml oral soln</i>                | 1                    |                    |
| <i>glycopyrrolate 1mg tab</i>                      | 1                    |                    |
| <i>glycopyrrolate 2mg tab</i>                      | 1                    |                    |
| <i>methscopolamine bromide 2.5mg tab</i>           | 1                    |                    |
| <i>methscopolamine bromide 5mg tab</i>             | 1                    |                    |
| <b>H-2 ANTAGONISTS</b>                             |                      |                    |
| <i>cimetidine 200mg tab</i>                        | 1                    |                    |
| <i>cimetidine 300mg tab</i>                        | 1                    |                    |
| <i>cimetidine 400mg tab</i>                        | 1                    |                    |
| <i>cimetidine 60mg/ml oral soln</i>                | 1                    |                    |
| <i>cimetidine 800mg tab</i>                        | 1                    |                    |
| <i>famotidine 20mg tab</i>                         | 1                    |                    |
| <i>famotidine 40mg tab</i>                         | 1                    |                    |
| <i>famotidine 8mg/ml susp</i>                      | 1                    |                    |
| <i>NIZATIDINE 150MG CAP</i>                        | 1                    |                    |
| <i>NIZATIDINE 300MG CAP</i>                        | 1                    |                    |
| <b>MISC. ANTI-ULCER</b>                            |                      |                    |
| <i>sucralfate 1000mg tab</i>                       | 1                    |                    |
| <i>sucralfate 100mg/ml susp</i>                    | 1                    |                    |
| <b>PROTON PUMP INHIBITORS</b>                      |                      |                    |
| <i>esomeprazole 20mg dr cap</i>                    | 1                    |                    |
| <i>esomeprazole 40mg dr cap</i>                    | 1                    |                    |
| <i>lansoprazole 15mg dr cap</i>                    | 1                    |                    |
| <i>lansoprazole 30mg dr cap</i>                    | 1                    |                    |
| <i>omeprazole 10mg dr cap</i>                      | 1                    |                    |
| <i>omeprazole 20mg dr cap</i>                      | 1                    |                    |
| <i>omeprazole 40mg dr cap</i>                      | 1                    |                    |
| <i>pantoprazole 20mg dr tab</i>                    | 1                    |                    |
| <i>pantoprazole 40mg dr tab</i>                    | 1                    |                    |
| <i>rabeprazole sodium 20mg dr tab</i>              | 1                    |                    |
| <b>ULCER DRUGS - PROSTAGLANDINS</b>                |                      |                    |
| <i>misoprostol 0.1mg tab</i>                       | 1                    |                    |
| <i>misoprostol 0.2mg tab</i>                       | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <b>ULCER THERAPY COMBINATIONS</b>  |                      |                    |
| amoxicillin 500mg/clarithromycin 500mg/lansoprazole 30mg pack PYLERA 140-125-125MG CAP | 1                    |                    |
|  | 1                    |                    |
| <b>URINARY ANTISPASMODICS</b>  |                      |                    |
| <b>URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)</b>                       |                      |                    |
| oxybutynin chloride 10mg er tab  | 1                    |                    |
| oxybutynin chloride 15mg er tab  | 1                    |                    |
| oxybutynin chloride 1mg/ml oral soln   | 1                    |                    |
| oxybutynin chloride 5mg er tab   | 1                    |                    |
| oxybutynin chloride 5mg tab  | 1                    |                    |
| solifenacina succinato 10mg tab  | 1                    |                    |
| solifenacina succinato 5mg tab   | 1                    |                    |
| tolterodine tartrate 1mg tab   | 1                    |                    |
| tolterodine tartrate 2mg er cap  | 1                    |                    |
| tolterodine tartrate 2mg tab   | 1                    |                    |
| tolterodine tartrate 4mg er cap  | 1                    |                    |
| trospium chloride 20mg tab   | 1                    |                    |
| trospium chloride 60mg er cap  | 1                    |                    |
| <b>URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS</b>                             |                      |                    |
| MYRBETRIQ 25MG ER TAB  | 1                    |                    |
| MYRBETRIQ 50MG ER TAB  | 1                    |                    |
| <b>URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS</b>                                   |                      |                    |
| bethanechol chloride 10mg tab  | 1                    |                    |
| bethanechol chloride 25mg tab  | 1                    |                    |
| bethanechol chloride 50mg tab  | 1                    |                    |
| bethanechol chloride 5mg tab   | 1                    |                    |
| <b>URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS</b>                                |                      |                    |
| flavoxate 100mg tab  | 1                    |                    |
| <b>VACCINES</b>  |                      |                    |
| <b>BACTERIAL VACCINES</b>  |                      |                    |
| ACTHIB INJ   | 1                    |                    |
| BCG LIVE TICE STRAIN 50MG INJ  | 1                    |                    |
| BEXSERO SYRINGE  | 1                    |                    |
| HIBERIX 10MCG INJ  | 1                    |                    |
| MENACTRA INJ   | 1                    |                    |
| MENQUADFI INJ  | 1                    |                    |
| MENVEO INJ   | 1                    |                    |
| PEDVAXHIB 7.5MCG/0.5ML INJ   | 1                    |                    |
| TRUMENBA SYRINGE   | 1                    |                    |
| TYPHIM VI 25MCG/0.5ML INJ  | 1                    |                    |
| TYPHIM VI 25MCG/0.5ML SYRINGE  | 1                    |                    |
| <b>VIRAL VACCINES</b>  |                      |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                    | Nivel de Medicamento | Requisitos/Límites |
|---|----------------------|--------------------|
| ENGERIX-B 10MCG/0.5ML SYRINGE             | 1                    | PA BvD             |
| ENGERIX-B 20MCG/ML SYRINGE                | 1                    | PA BvD             |
| GARDASIL 9 INJ                            | 1                    |                    |
| GARDASIL 9 SYRINGE                        | 1                    |                    |
| HAVRIX 1440ELU/ML SYRINGE                 | 1                    |                    |
| HAVRIX 720ELU/0.5ML SYRINGE               | 1                    |                    |
| IMOVAX 2.5UNIT/ML INJ                     | 1                    | PA BvD             |
| IPOL INJ                                  | 1                    |                    |
| IXIARO 0.012MG/ML SYRINGE                 | 1                    |                    |
| M-M-R II INJ                              | 1                    |                    |
| PROQUAD INJ                               | 1                    |                    |
| RABAVERT 2.5UNIT/ML INJ                   | 1                    | PA BvD             |
| RECOMBIVAX 10MCG/ML INJ                   | 1                    | PA BvD             |
| RECOMBIVAX 10MCG/ML SYRINGE               | 1                    | PA BvD             |
| RECOMBIVAX 40MCG/ML INJ                   | 1                    | PA BvD             |
| RECOMBIVAX 5MCG/0.5ML SYRINGE             | 1                    | PA BvD             |
| ROTARIX SUSP                              | 1                    |                    |
| ROTAQUE SUSP                              | 1                    |                    |
| SHINGRIX 50MCG/0.5ML INJ                  | 1                    | QL=2 EA/365 Días   |
| TWINRIX SYRINGE                           | 1                    |                    |
| VAQTA 25UNIT/0.5ML INJ                    | 1                    |                    |
| VAQTA 25UNIT/0.5ML SYRINGE                | 1                    |                    |
| VAQTA 50UNIT/ML INJ                       | 1                    |                    |
| VAQTA 50UNIT/ML SYRINGE                   | 1                    |                    |
| VARIVAX 1350PFU/0.5ML INJ                 | 1                    |                    |
| YF-VAX INJ                                | 1                    |                    |
| <b>VAGINAL AND RELATED PRODUCTS</b>       |                      |                    |
| <b>VAGINAL ANTI-INFECTIVES</b>            |                      |                    |
| <i>clindamycin 2% vaginal cream</i>       | 1                    |                    |
| <i>metronidazole 0.75% vaginal gel</i>    | 1                    |                    |
| <i>terconazole 0.4% vaginal cream</i>     | 1                    |                    |
| <i>terconazole 0.8% vaginal cream</i>     | 1                    |                    |
| <i>terconazole 80mg vaginal insert</i>    | 1                    |                    |
| <i>vandazole 0.75% vaginal gel</i>        | 1                    |                    |
| <b>VAGINAL ESTROGENS</b>                  |                      |                    |
| <i>estradiol 0.01% vaginal cream</i>      | 1                    |                    |
| ESTRING 2MG (7.5 MCG/24HR) VAGINAL SYSTEM | 1                    | ST                 |
| PREMARIN 0.625MG/GM VAGINAL CREAM         | 1                    |                    |
| <b>VAGINAL PROGESTINS</b>                 |                      |                    |
| CRINONE 4% VAGINAL GEL                    | 1                    | PA                 |
| CRINONE 8% VAGINAL GEL                    | 1                    | PA                 |
| <b>VASOPRESSORS</b>                       |                      |                    |
| <b>ANAPHYLAXIS THERAPY AGENTS</b>         |                      |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Nombre del medicamento                                   | Nivel de Medicamento | Requisitos/Límites |
|--|----------------------|--------------------|
| <i>epinephrine 0.5mg/ml auto-injector</i>                | 1                    | QL=2 EA/15 Días    |
| <i>epinephrine 1mg/ml auto-injector</i>                  | 1                    | QL=2 EA/15 Días    |
| SYMJEPI 0.15MG/0.3ML SYRINGE                             | 1                    | QL=2 EA/15 Días    |
| SYMJEPI 0.3MG/0.3ML SYRINGE                              | 1                    | QL=2 EA/15 Días    |
| <b>NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS</b> |                      |                    |
| <i>droxidopa 100mg cap</i>                               | 1                    | PA                 |
| <i>droxidopa 200mg cap</i>                               | 1                    | PA                 |
| <i>droxidopa 300mg cap</i>                               | 1                    | PA                 |
| <b>VASOPRESSORS</b>                                      |                      |                    |
| <i>midodrine 10mg tab</i>                                | 1                    |                    |
| <i>midodrine 2.5mg tab</i>                               | 1                    |                    |
| <i>midodrine 5mg tab</i>                                 | 1                    |                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Índice

|   |    |   |    |  |     |
|---|----|---|----|--|-----|
| <b>A</b>  |    |   |    |  |     |
| <i>abacavir 20mg/ml oral soln</i>                           | 56 | <i>acetaminophen 300mg/hydrocodone bitartrate 5mg tab</i>   | 14 | <i>acetylcysteine 200mg/ml inh soln</i>        | 70  |
| <i>abacavir 300mg tab</i>                                   | 56 | <i>acetaminophen 300mg/hydrocodone bitartrate 7.5mg tab</i> | 14 | <i>acitretin 10mg cap</i>                      | 72  |
| <i>abacavir 300mg/lamivudine 150mg/zidovudine 300mg tab</i> | 56 | <i>acetaminophen 325mg/hydrocodone bitartrate 10mg tab</i>  | 14 | <i>acitretin 17.5mg cap</i>                    | 72  |
| <i>abacavir 600mg/lamivudine 300mg tab</i>                  | 56 | <i>acetaminophen 325mg/hydrocodone bitartrate 5mg tab</i>   | 14 | <i>acitretin 25mg cap</i>                      | 72  |
| ABELCET 5MG/ML INJ  | 33 | <i>acetaminophen 325mg/hydrocodone bitartrate 7.5mg tab</i> | 15 | ACTEMRA  | 11  |
| ABILIFY 300MG INJ   | 55 | <i>acetaminophen 325mg/hydrocodone bitartrate 10mg tab</i>  | 14 | 162MG/0.9ML AUTO-Injector                      |     |
| ABILIFY 300MG SYRINGE                                       | 55 | <i>acetaminophen 325mg/hydrocodone bitartrate 5mg tab</i>   | 14 | ACTEMRA  | 11  |
| ABILIFY 400MG INJ   | 55 | <i>acetaminophen 325mg/hydrocodone bitartrate 7.5mg tab</i> | 15 | 162MG/0.9ML SYRINGE                            |     |
| ABILIFY 400MG SYRINGE                                       | 55 | <i>acetaminophen 325mg/hydrocodone bitartrate 10mg tab</i>  | 15 | ACTHIB INJ                                     | 105 |
| <i>abiraterone acetate 250mg tab</i>                        | 44 | <i>acetaminophen 325mg/hydrocodone 2.5mg tab</i>            | 15 | ACTIMMUNE                                      | 49  |
| <i>acamprosate calcium 333mg dr tab</i>                     | 98 | <i>acetaminophen 325mg/hydrocodone 5mg tab</i>              | 15 | 2000000UNIT/0.5ML INJ                          |     |
| <i>acarbose 100mg tab</i>                                   | 29 | <i>acetaminophen 325mg/hydrocodone 7.5mg tab</i>            | 15 | <i>acyclovir 200mg cap</i>                     | 59  |
| <i>acarbose 25mg tab</i>                                    | 29 | <i>acetaminophen 325mg/hydrocodone 10mg tab</i>             | 15 | <i>acyclovir 400mg tab</i>                     | 59  |
| <i>acarbose 50mg tab</i>                                    | 29 | <i>acetaminophen 325mg/oxycodone 2.5mg tab</i>              | 15 | <i>acyclovir 40mg/ml susp</i>                  | 59  |
| <i>accutane 20mg cap</i>                                    | 70 | <i>acetaminophen 325mg/oxycodone 5mg tab</i>                | 15 | <i>acyclovir 5% ointment</i>                   | 73  |
| <i>accutane 30mg cap</i>                                    | 70 | <i>acetaminophen 325mg/oxycodone 7.5mg tab</i>              | 15 | <i>acyclovir 50mg/ml inj</i>                   | 59  |
| <i>accutane 40mg cap</i>                                    | 70 | <i>acetaminophen 325mg/oxycodone 10mg tab</i>               | 15 | <i>acyclovir 800mg tab</i>                     | 59  |
| <i>acebutolol 200mg cap</i>                                 | 59 | <i>acetaminophen 325mg/tramadol 37.5mg tab</i>              | 15 | ADACEL INJ                                     | 103 |
| <i>acebutolol 400mg cap</i>                                 | 59 | <i>acetaminophen 325mg/tramadol 37.5mg tab</i>              | 15 | ADACEL SYRINGE                                 | 103 |
| <i>acetaminophen 300mg/codeine phosphate 15mg tab</i>       | 14 | <i>acetaminophen 325mg/oxycodone 2.5mg tab</i>              | 15 | <i>adapalene 0.1% cream</i>                    | 70  |
| <i>acetaminophen 300mg/codeine phosphate 30mg tab</i>       | 14 | <i>acetaminophen 325mg/oxycodone 5mg tab</i>                | 15 | <i>adapalene 0.1% gel</i>                      | 70  |
| <i>acetaminophen 300mg/codeine phosphate 60mg tab</i>       | 14 | <i>acetaminophen 325mg/oxycodone 7.5mg tab</i>              | 15 | <i>adapalene 0.3% gel</i>                      | 70  |
| <i>acetaminophen 300mg/hydrocodone bitartrate 10mg tab</i>  | 14 | <i>acetaminophen 325mg/oxycodone 10mg tab</i>               | 15 | <i>adapalene/benzoyl peroxide 0.1-2.5% gel</i> |     |
|   |    | <i>acetaminophen 325mg/oxycodone 2.5mg tab</i>              | 15 | <i>adefovir dipivoxil 10mg tab</i>             | 58  |
|   |    | <i>acetaminophen 325mg/oxycodone 5mg tab</i>                | 15 | ADEMPAS 0.5MG TAB                              | 64  |
|   |    | <i>acetaminophen 325mg/oxycodone 7.5mg tab</i>              | 15 | ADEMPAS 1.5MG TAB                              | 64  |
|   |    | <i>acetaminophen 325mg/oxycodone 10mg tab</i>               | 15 | ADEMPAS 1MG TAB                                | 64  |
|   |    | <i>acetaminophen 325mg/oxycodone 2.5mg tab</i>              | 15 | ADEMPAS 2.5MG TAB                              | 64  |
|   |    | <i>acetaminophen 325mg/oxycodone 5mg tab</i>                | 15 | ADEMPAS 2MG TAB                                | 64  |
|   |    | <i>acetaminophen 325mg/oxycodone 7.5mg tab</i>              | 15 | ADVAIR 100-50MCG                               | 20  |
|   |    | <i>acetaminophen 325mg/oxycodone 10mg tab</i>               | 15 | DISKUS   |     |
|   |    | <i>acetazolamide 125mg tab</i>                              | 75 | ADVAIR 115-21MCG                               | 20  |
|   |    | <i>acetazolamide 250mg tab</i>                              | 75 | HFA INHALER                                    |     |
|   |    | <i>acetazolamide 500mg er cap</i>                           | 75 | ADVAIR 230-21MCG                               | 20  |
|   |    | <i>acetic acid 2% otic soln</i>                             | 95 | HFA INHALER                                    |     |
|   |    | <i>acetylcysteine 100mg/ml inh soln</i>                     | 70 | ADVAIR 250-50MCG                               | 20  |
|   |    |   |    | DISKUS   |     |
|   |    |   |    | ADVAIR 45-21MCG/ACT                            | 20  |
|   |    |   |    | HFA INHALER                                    |     |
|   |    |   |    | ADVAIR 500-50MCG                               | 20  |
|   |    |   |    | DISKUS   |     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |    |   |    |  |    |
|--|----|---|----|--|----|
| AFINITOR 10MG TAB                                | 46 | <i>allopurinol 300mg tab</i>            | 83 | <i>amiodarone 400mg tab</i>                              | 18 |
| AFINITOR 2MG TAB FOF                             | 46 | <i>ALOCRIL 2% OPHTH</i>                 | 95 | <i>amitriptyline 100mg tab</i>                           | 28 |
| ORAL SUSP  |    | <i>SOLN</i>                             |    | <i>amitriptyline 10mg tab</i>                            | 28 |
| AFINITOR 3MG TAB FOF                             | 46 | <i>ALOMIDE 0.1% OPHTH</i>               | 95 | <i>amitriptyline 150mg tab</i>                           | 28 |
| ORAL SUSP  |    | <i>SOLN</i>                             |    | <i>amitriptyline 25mg tab</i>                            | 28 |
| AFINITOR 5MG TAB FOF                             | 46 | <i>alosetron 0.5mg tab</i>              | 82 | <i>amitriptyline 50mg tab</i>                            | 28 |
| ORAL SUSP  |    | <i>alosetron 1mg tab</i>                | 82 | <i>amitriptyline 75mg tab</i>                            | 28 |
| AIMOVIG 140MG/ML                                 | 87 | <i>ALPHAGAN 0.1%</i>                    | 93 | <i>amlodipine 10mg tab</i>                               | 60 |
| AUTO-INJECTOR                                    |    | <i>OPHTH SOLN</i>                       |    | <i>amlodipine</i>  | 63 |
| AIMOVIG 70MG/ML                                  | 87 | <i>alprazolam 0.25mg tab</i>            | 17 | <i>10mg/atorvastatin 10mg tab</i>                        |    |
| AUTO-INJECTOR                                    |    | <i>alprazolam 0.5mg er tab</i>          | 17 | <i>amlodipine</i>  | 63 |
| <i>ala-cort 1% cream</i>                         | 73 | <i>alprazolam 0.5mg tab</i>             | 17 | <i>10mg/atorvastatin 20mg tab</i>                        |    |
| <i>ala-cort 2.5% cream</i>                       | 73 | <i>alprazolam 1mg er tab</i>            | 17 | <i>amlodipine</i>  | 63 |
| <i>albendazole 200mg tab</i>                     | 16 | <i>alprazolam 1mg tab</i>               | 17 | <i>10mg/atorvastatin 40mg tab</i>                        |    |
| <i>albuterol 0.21mg/ml (0.63mg/3ml) inh soln</i> | 20 | <i>alprazolam 2mg er tab</i>            | 17 | <i>amlodipine</i>  | 63 |
| <i>albuterol 0.4mg/ml (2mg/5ml) oral soln</i>    | 20 | <i>alprazolam 2mg tab</i>               | 17 | <i>10mg/atorvastatin 80mg tab</i>                        |    |
| <i>albuterol 0.83mg/ml (0.083%) inh soln</i>     | 20 | <i>alprazolam 3mg er tab</i>            | 17 | <i>amlodipine</i>  | 38 |
| <i>albuterol 2mg tab</i>                         | 20 | <i>ALREX 0.2% OPHTH</i>                 | 94 | <i>10mg/benazepril 20mg cap</i>                          |    |
| <i>albuterol 4mg tab</i>                         | 20 | <i>SUSP</i>                             |    | <i>amlodipine</i>  | 38 |
| <i>albuterol 5mg/ml inh soln</i>                 | 20 | <i>altavera 28 day pack</i>             | 65 | <i>10mg/benazepril 40mg cap</i>                          |    |
| <i>albuterol neb soln 1.25mg/3ml</i>             | 20 | <i>ALUNBRIG 180MG TAB</i>               | 46 | <i>amlodipine</i>  | 38 |
| <i>alclometasone dipropionate 0.05% cream</i>    | 73 | <i>ALUNBRIG 30MG TAB</i>                | 46 | <i>10mg/benazepril 12.5mg/valsartan 160mg tab</i>        |    |
| <i>alclometasone dipropionate 0.05% ointment</i> | 73 | <i>ALUNBRIG 90MG TAB</i>                | 46 | <i>amlodipine</i>  | 38 |
| <i>ALCOHOL SWAB 1"x1" (DIABETIC)</i>             | 87 | <i>ALUNBRIG INITIATION PACK</i>         | 46 | <i>10mg/benazepril 40mg cap</i>                          |    |
| <i>ALECENSA 150MG CAP</i>                        | 46 | <i>alyacen 1/35 pack</i>                | 65 | <i>amlodipine</i>  | 38 |
| <i>alendronate sodium 10mg tab</i>               | 77 | <i>alyq 20mg tab</i>                    | 63 | <i>10mg/hydrochlorothiazide 25mg/valsartan 160mg tab</i> |    |
| <i>alendronate sodium 35mg tab</i>               | 77 | <i>amabelz 0.5/0.1mg 28 day pack</i>    | 79 | <i>amlodipine</i>  | 38 |
| <i>alendronate sodium 70mg tab</i>               | 77 | <i>amabelz 1/0.5mg 28 day pack</i>      | 79 | <i>10mg/hydrochlorothiazide 25mg/valsartan 320mg tab</i> |    |
| <i>alendronate sodium 70mg/75ml oral soln</i>    | 77 | <i>amantadine 100mg cap</i>             | 50 | <i>amlodipine</i>  | 38 |
| <i>alfuzosin 10mg er tab</i>                     | 83 | <i>amantadine 100mg tab</i>             | 50 | <i>10mg/hydrochlorothiazide 25mg/valsartan 160mg tab</i> |    |
| <i>aliskiren 150mg tab</i>                       | 40 | <i>ambisome 50MG INJ</i>                | 34 | <i>amlodipine</i>  | 38 |
| <i>aliskiren 300mg tab</i>                       | 40 | <i>ambrisentan 10mg tab</i>             | 63 | <i>10mg/hydrochlorothiazide 25mg/valsartan 320mg tab</i> |    |
| <i>allopurinol 100mg tab</i>                     | 83 | <i>ambrisentan 5mg tab</i>              | 63 | <i>amlodipine</i>  | 38 |
|  |    | <i>amethia 91 day pack</i>              | 65 | <i>10mg/olmesartan medoxomil 20mg tab</i>                |    |
|  |    | <i>amikacin 250mg/ml inj</i>            | 9  | <i>amlodipine</i>  | 38 |
|  |    | <i>amiloride 5mg tab</i>                | 76 | <i>10mg/olmesartan medoxomil 40mg tab</i>                |    |
|  |    | <i>amiloride</i>                        | 76 | <i>amlodipine</i>  | 38 |
|  |    | <i>5mg/hydrochlorothiazide 50mg tab</i> |    | <i>10mg/olmesartan medoxomil 20mg tab</i>                |    |
|  |    | <i>AMINOSYN-PF 7% INJ</i>               | 92 | <i>amlodipine</i>  | 38 |
|  |    | <i>amiodarone 200mg tab</i>             | 18 | <i>10mg/olmesartan medoxomil 40mg tab</i>                |    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |    |   |    |                                  |     |
|--|----|---|----|----------------------------------|-----|
| <i>amlodipine</i>  | 38 | <i>amlodipine</i>                         | 39 | <i>amoxicillin</i>               | 105 |
| <i>10mg/valsartan 160mg tab</i>                                      |    | <i>5mg/olmesartan medoxomil 20mg tab</i>  |    | <i>500mg/clarithromycin</i>      |     |
| <i>amlodipine</i>  | 38 | <i>amlodipine</i>                         | 39 | <i>500mg/lansoprazole</i>        |     |
| <i>10mg/valsartan 320mg tab</i>                                      |    | <i>5mg/olmesartan medoxomil 40mg tab</i>  |    | <i>30mg pack</i>                 |     |
| <i>amlodipine 2.5mg tab</i>  | 61 | <i>amlodipine</i>                         | 39 | <i>amoxicillin</i>               | 97  |
| <i>amlodipine 2.5mg/atorvastatin 10mg tab</i>                        | 63 | <i>5mg/valsartan 160mg tab</i>            |    | <i>500mg/clavulanate</i>         |     |
| <i>amlodipine 2.5mg/atorvastatin 20mg tab</i>                        | 63 | <i>amlodipine</i>                         | 39 | <i>125mg tab</i>                 |     |
| <i>amlodipine 2.5mg/atorvastatin 40mg tab</i>                        | 63 | <i>5mg/valsartan 320mg tab</i>            |    | <i>amoxicillin 50mg/ml susp</i>  | 96  |
| <i>amlodipine 2.5mg/benazepril 10mg cap</i>                          |    | <i>ammonium lactate 12% cream</i>         | 74 | <i>amoxicillin 80mg/ml susp</i>  | 96  |
| <i>amlodipine 5mg tab</i>  | 61 | <i>ammonium lactate 12%</i>               | 74 | <i>amoxicillin 875mg tab</i>     | 97  |
| <i>amlodipine 5mg/atorvastatin 10mg tab</i>                          | 63 | <i>lotion</i>                             |    | <i>amoxicillin</i>               | 97  |
| <i>amlodipine 5mg/atorvastatin 20mg tab</i>                          | 63 | <i>annesteem 10mg cap</i>                 | 70 | <i>875mg/clavulanate</i>         |     |
| <i>amlodipine 5mg/benazepril 10mg cap</i>                            |    | <i>annesteem 20mg cap</i>                 | 70 | <i>125mg tab</i>                 |     |
| <i>amlodipine 5mg/atorvastatin 40mg tab</i>                          | 61 | <i>annesteem 40mg cap</i>                 | 70 | <i>amoxicillin/k clavulanate</i> | 97  |
| <i>amlodipine 5mg/atorvastatin 10mg tab</i>                          | 63 | <i>AMOXAPINE 100MG TAB</i>                | 28 | <i>200-28.5mg/5ml susp</i>       |     |
| <i>amlodipine 5mg/atorvastatin 20mg tab</i>                          | 63 | <i>AMOXAPINE 150MG TAB</i>                | 28 | <i>amoxicillin/k clavulanate</i> | 97  |
| <i>amlodipine 5mg/atorvastatin 40mg tab</i>                          | 63 | <i>AMOXAPINE 25MG TAB</i>                 | 28 | <i>250-62.5mg/5ml susp</i>       |     |
| <i>amlodipine 5mg/atorvastatin 10mg tab</i>                          | 63 | <i>AMOXAPINE 50MG TAB</i>                 | 28 | <i>amoxicillin/k clavulanate</i> | 97  |
| <i>amlodipine 5mg/atorvastatin 20mg tab</i>                          | 63 | <i>AMOXICILLIN</i>                        | 97 | <i>400-57mg/5ml susp</i>         |     |
| <i>amlodipine 5mg/atorvastatin 40mg tab</i>                          | 63 | <i>1000MG/CLAVULANATE E 62.5MG ER TAB</i> |    | <i>amoxicillin/k clavulanate</i> | 97  |
| <i>amlodipine 5mg/benazepril 10mg cap</i>                            | 38 | <i>AMOXICILLIN 125MG CHEW TAB</i>         | 96 | <i>600-42.9mg/5ml susp</i>       |     |
| <i>amlodipine 5mg/benazepril 10mg cap</i>                            | 38 | <i>AMOXICILLIN</i>                        | 97 | <i>amphetamine-dextroamp</i>     | 8   |
| <i>amlodipine 5mg/benazepril 80mg tab</i>                            | 63 | <i>200MG/CLAVULANATE 28.5MG CHEW TAB</i>  |    | <i>hetamine 10mg ER cap</i>      |     |
| <i>amlodipine 5mg/benazepril 80mg tab</i>                            | 63 | <i>amoxicillin 250mg cap</i>              | 96 | <i>amphetamine-dextroamp</i>     | 8   |
| <i>amlodipine 5mg/benazepril 10mg cap</i>                            | 38 | <i>AMOXICILLIN 250MG CHEW TAB</i>         | 96 | <i>hetamine 10mg tab</i>         |     |
| <i>amlodipine 5mg/benazepril 10mg cap</i>                            | 38 | <i>amoxicillin</i>                        | 97 | <i>amphetamine-dextroamp</i>     | 8   |
| <i>amlodipine 5mg/benazepril 20mg cap</i>                            |    | <i>250mg/clavulanate</i>                  |    | <i>hetamine 12.5mg tab</i>       |     |
| <i>amlodipine 5mg/benazepril 40mg cap</i>                            | 39 | <i>125mg tab</i>                          |    | <i>amphetamine-dextroamp</i>     | 8   |
| <i>amlodipine 5mg/benazepril 40mg cap</i>                            | 39 | <i>amoxicillin 25mg/ml susp</i>           | 96 | <i>hetamine 15mg ER cap</i>      |     |
| <i>amlodipine 5mg/hydrochlorothiazide 12.5mg/valsartan 160mg tab</i> |    | <i>AMOXICILLIN</i>                        | 97 | <i>amphetamine-dextroamp</i>     | 8   |
| <i>amlodipine 5mg/hydrochlorothiazide 12.5mg/valsartan 160mg tab</i> |    | <i>400MG/CLAVULANATE 57MG CHEW TAB</i>    |    | <i>hetamine 20mg ER cap</i>      |     |
| <i>amlodipine 5mg/hydrochlorothiazide 25mg/valsartan 160mg tab</i>   | 39 | <i>amoxicillin 40mg/ml susp</i>           | 96 | <i>amphetamine-dextroamp</i>     | 8   |
| <i>amlodipine 5mg/hydrochlorothiazide 25mg/valsartan 160mg tab</i>   | 39 | <i>amoxicillin 500mg cap</i>              | 96 | <i>hetamine 30mg ER cap</i>      |     |
| <i>amlodipine 5mg/hydrochlorothiazide 25mg/valsartan 160mg tab</i>   | 39 | <i>amoxicillin 500mg tab</i>              | 96 | <i>amphetamine-dextroamp</i>     | 8   |
| <i>amlodipine 5mg/hydrochlorothiazide 25mg/valsartan 160mg tab</i>   |    |   |    | <i>hetamine 5mg ER cap</i>       |     |
| <i>amlodipine 5mg/hydrochlorothiazide 25mg/valsartan 160mg tab</i>   |    |   |    | <i>amphetamine-dextroamp</i>     | 8   |
| <i>amlodipine 5mg/hydrochlorothiazide 25mg/valsartan 160mg tab</i>   |    |   |    | <i>hetamine 5mg tab</i>          |     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                               |     |                                 |    |                              |
|--------------------------------------|-----|---------------------------------|----|------------------------------|
| <i>amphetamine-dextroamp</i>         | 8   | ARANESP 100MCG/ML               | 84 | ARISTADA 1064MG/3.9ML        |
| <i>hetamine 7.5mg tab</i>            |     | INJ                             |    | 55                           |
| AMPHOTERICIN B                       | 34  | ARANESP                         | 84 | SYRINGE                      |
| 50MG INJ                             |     | 10MCG/0.4ML SYRINGE             |    | 55                           |
| <i>ampicillin 1000mg inj</i>         | 97  | ARANESP                         | 84 | ARISTADA 441MG/1.6ML SYRINGE |
| <i>ampicillin</i>                    | 97  | 150MCG/0.3ML                    |    | 55                           |
| <i>1000mg/sulbactam</i>              |     | SYRINGE                         |    | 662MG/2.4ML SYRINGE          |
| <i>500mg inj</i>                     |     | ARANESP                         | 84 | ARISTADA 675MG/2.4ML SYRINGE |
| <i>ampicillin 100mg/ml inj</i>       | 97  | 200MCG/0.4ML                    |    | 55                           |
| <i>ampicillin</i>                    | 97  | SYRINGE                         |    | ARISTADA 675MG/2.4ML SYRINGE |
| <i>1000mg/ml/sulbactam</i>           |     | ARANESP 200MCG/ML               | 84 | 882MG/3.2ML SYRINGE          |
| <i>50mg/ml inj</i>                   |     | INJ                             |    | armodafinil 150mg tab 8      |
| AMPICILLIN 125MG INJ                 | 97  | ARANESP                         | 84 | armodafinil 200mg tab 8      |
| <i>ampicillin</i>                    | 97  | 25MCG/0.42ML                    |    | armodafinil 250mg tab 8      |
| <i>2000mg/sulbactam</i>              |     | SYRINGE                         |    | armodafinil 50mg tab 9       |
| <i>1000mg inj</i>                    |     | ARANESP 25MCG/ML                | 84 | ARNUITY 100MCG 19            |
| AMPICILLIN 500MG CAP                 | 97  | INJ                             |    | INHALER                      |
| <i>anagrelide 0.5mg cap</i>          | 83  | ARANESP                         | 84 | ARNUITY 200MCG 19            |
| <i>anagrelide 1mg cap</i>            | 83  | 300MCG/0.6ML                    |    | INHALER                      |
| <i>anastrozole 1mg tab</i>           | 44  | SYRINGE                         |    | ARNUITY 50MCG 19             |
| ANDRODERM                            | 15  | ARANESP 300MCG/ML               | 84 | INHALER                      |
| 2MG/24HR PATCH                       |     | INJ                             |    | asenapine 10mg sl tab 53     |
| ANDRODERM                            | 15  | ARANESP                         | 84 | asenapine 2.5mg sl tab 53    |
| 4MG/24HR PATCH                       |     | 40MCG/0.4ML SYRINGE             |    | asenapine 5mg sl tab 53      |
| ANORO ELLIPTA                        | 20  | ARANESP 40MCG/ML                | 84 | ashlyna 91 day pack 66       |
| 62.5-25MCG INHALER                   |     | INJ                             |    | ASMANEX 100MCG 19            |
| <i>apraclonidine 0.5% ophth soln</i> | 93  | ARANESP 500MCG/ML               | 84 | INHALER                      |
| <i>aprepitant 125mg cap</i>          | 33  | SYRINGE                         |    | ASMANEX 110MCG/INH 19        |
| <i>aprepitant</i>                    | 33  | ARANESP                         | 84 | INHALER                      |
| <i>125mg/aprepitant 80mg pack</i>    |     | 60MCG/0.3ML SYRINGE             |    | ASMANEX 200MCG 19            |
| <i>aprepitant 40mg cap</i>           | 33  | ARANESP 60MCG/ML                | 84 | INHALER                      |
| <i>aprepitant 80mg cap</i>           | 33  | INJ                             |    | ASMANEX 220MCG 19            |
| <i>apri 28 day pack</i>              | 65  | ARCALYST 220MG INJ              | 11 | (120ACT) INHALER             |
| APTIOM 200MG TAB                     | 23  | ARIKAYCE                        | 9  | ASMANEX 220MCG 19            |
| APTIOM 400MG TAB                     | 23  | 590MG/8.4ML INH SUSP            |    | (30ACT) INHALER              |
| APTIOM 600MG TAB                     | 23  | <i>ariPIPRAZOLE 10mg odt</i>    | 55 | ASMANEX 220MCG 19            |
| APTIOM 800MG TAB                     | 23  | <i>ariPIPRAZOLE 10mg tab</i>    | 55 | (60ACT) INHALER              |
| APTIOM 800MG TAB                     | 23  | <i>ariPIPRAZOLE 15mg odt</i>    | 55 | ASMANEX 50MCG 19             |
| APTIOM 800MG TAB                     | 23  | <i>ariPIPRAZOLE 15mg tab</i>    | 55 | INHALER                      |
| APTIVUS 250MG CAP                    | 56  | <i>ariPIPRAZOLE 1mg/ml oral</i> | 55 | aspirin 84                   |
| ARALAST 1000MG INJ                   | 100 | <i>soln</i>                     |    | 25mg/dipyridamole            |
| <i>aranelle 28 pack</i>              | 66  | <i>ariPIPRAZOLE 20mg tab</i>    | 55 | 200mg er cap                 |
| ARANESP                              | 84  | <i>ariPIPRAZOLE 2mg tab</i>     | 55 | ASTAGRAF 0.5MG ER 90         |
| 100MCG/0.5ML SYRINGE                 |     | <i>ariPIPRAZOLE 30mg tab</i>    | 55 | CAP                          |
|                                      |     | <i>ariPIPRAZOLE 5mg tab</i>     | 55 | ASTAGRAF 1MG ER CAI 90       |
|                                      |     |                                 |    | ASTAGRAF 5MG ER CAI 90       |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |    |   |    |                                      |     |
|--|----|---|----|--------------------------------------|-----|
| atazanavir 150mg cap   | 56 | AUSTEDO 12MG TAB                                    | 99 | baclofen 10mg tab                    | 91  |
| atazanavir 200mg cap   | 56 | AUSTEDO 6MG TAB                                     | 99 | baclofen 20mg tab                    | 91  |
| atazanavir 300mg cap   | 56 | AUSTEDO 9MG TAB                                     | 99 | balsalazide disodium                 | 81  |
| atenolol 100mg tab   | 59 | aviane 28 pack                                      | 66 | 750mg cap                            |     |
| atenolol   | 39 | avita 0.025% cream                                  | 70 | BALVERSA 3MG TAB                     | 46  |
| 100mg/chlorthalidone   |    | avita 0.025% gel                                    | 70 | BALVERSA 4MG TAB                     | 46  |
| 25mg tab   |    | AVONEX 30MCG/0.5ML                                  | 99 | BALVERSA 5MG TAB                     | 46  |
| atenolol 25mg tab  | 59 | AUTO-INJECTOR                                       |    | balziva 28 day pack                  | 66  |
| atenolol 50mg tab  | 59 | AVONEX 30MCG/0.5ML                                  | 99 | BAQSIMI 3MG/DOSE                     | 30  |
| atenolol   | 39 | SYRINGE   |    | NASAL POWDER                         |     |
| 50mg/chlorthalidone  |    | AVYCAZ 500-2000MG                                   | 64 | BAXDELA 450MG TAB                    | 80  |
| 25mg tab   |    | INJ   |    | BCG LIVE TICE STRAIN                 | 105 |
| atomoxetine 100mg cap  | 8  | AYVAKIT 100MG TAB                                   | 45 | 50MG INJ                             |     |
| atomoxetine 10mg cap   | 8  | AYVAKIT 200MG TAB                                   | 45 | benazepril 10mg tab                  | 36  |
| atomoxetine 18mg cap   | 8  | AYVAKIT 300MG TAB                                   | 45 | benazepril                           | 39  |
| atomoxetine 25mg cap   | 8  | AZASITE 1% OPHTH                                    | 93 | 10mg/hydrochlorothiazide 12.5mg tab  |     |
| atomoxetine 40mg cap   | 8  | SOLN  |    | benazepril 20mg tab                  | 36  |
| atomoxetine 60mg cap   | 8  | azathioprine 50mg tab                               | 90 | benazepril                           | 39  |
| atomoxetine 80mg cap   | 8  | azelaic acid 15% gel                                | 75 | benazepril                           |     |
| atorvastatin 10mg tab  | 35 | azelastine 0.05% ophth                              | 95 | 20mg/hydrochlorothiazide 12.5mg tab  |     |
| atorvastatin 20mg tab  | 35 | soln  |    | benazepril                           | 39  |
| atorvastatin 40mg tab  | 35 | azelastine 0.15%                                    | 92 | benazepril                           |     |
| atorvastatin 80mg tab  | 35 | (206mcg/act) nasal                                  |    | 20mg/hydrochlorothiazide 25mg tab    |     |
| atovaquone 150mg/ml susp                                     | 41 | inhaler   |    | benazepril 40mg tab                  | 36  |
| atovaquone   | 42 | azelastine 1%                                       | 92 | benazepril 5mg tab                   | 36  |
| 250mg/proguanil 100mg tab                                    |    | (137mcg/act) nasal                                  |    | benazepril                           | 39  |
| atovaquone   | 42 | inhaler   |    | 5mg/hydrochlorothiazide 6.25mg tab   |     |
| 62.5mg/proguanil 25mg tab                                    |    | azithromycin 20mg/ml                                | 86 | BENLYSTA 200MG/ML AUTO-INJECTOR      | 91  |
| ATROPINE SULFATE 0.005MG/ML/DIPHENOXYLATE 0.5MG/ML ORAL SOLN | 32 | susp  |    | BENLYSTA 200MG/ML SYRINGE            | 91  |
| atropine sulfate 0.025mg/diphenoxylate 2.5mg tab             | 32 | azithromycin 250mg pack                             | 86 | BENZNIDAZOLE 100MG TAB               | 16  |
| ATROPINE SULFATE 1% OPHTH SOLN                               | 93 | azithromycin 250mg tab                              | 86 | BENZNIDAZOLE 12.5MG TAB              |     |
| ATROVENT 17MCG INHALER                                       | 19 | azithromycin 40mg/ml                                | 86 | benztropine mesylate 0.5mg tab       | 49  |
| AUBAGIO 14MG TAB   | 99 | susp  |    | benztropine mesylate 1mg tab         | 49  |
| AUBAGIO 7MG TAB  | 99 | azithromycin 500mg inj                              | 86 | benztropine mesylate 2mg tab         | 50  |
| aubra 28 day pack  | 66 | azithromycin 500mg pack                             | 86 | bepotastine besilate 1.5% ophth soln | 95  |
| AURYXIA 210MG TAB  | 82 | azithromycin 500mg tab                              | 86 | BERINERT 500UNIT INJ                 | 83  |
| <b>B</b>   |    |   |    |                                      |     |
|  |    | BACITRACIN 500UNIT/GM OPHTH OINTMENT                | 93 |                                      |     |
|  |    | bacitracin/polymyxin B 0.5-10unit/mg ophth ointment | 93 |                                      |     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                          |     |   |     |  |
|---------------------------------|-----|---|-----|--|
| <i>betamethasone 0.05%</i>      | 73  | BICILLIN<br>450000-150000UNIT/ML            | 97  | BREO ELLIPTA<br>100-25MCG INHALER                      |
| <i>aug cream</i>                |     | SYRINGE                                     |     | 20   |
| <i>betamethasone 0.05%</i>      | 73  | BICILLIN L-A                                | 97  | BREO ELLIPTA<br>200-25MCG INHALER                      |
| <i>aug lotion</i>               |     | 1200000UNIT/2ML                             |     | 20   |
| <i>betamethasone 0.05%</i>      | 73  | SYRINGE                                     |     | BREZTRI AEROSPHERE                                     |
| <i>aug ointment</i>             |     | BICILLIN L-A                                | 97  | 160-9-4.8MCG/ACT                                       |
| <i>betamethasone 0.05%</i>      | 73  | 2400000UNIT/4ML                             |     | INHALER  |
| <b>BETAMETHASONE</b>            | 73  | SYRINGE                                     |     | <i>briellyn 28 day pack</i>                            |
| <i>0.05% GEL</i>                |     | BICILLIN L-A                                | 97  | 84   |
| <i>betamethasone 0.05%</i>      | 73  | 600000UNIT/ML                               |     | BRILINTA 60MG TAB                                      |
| <i>lotion</i>                   |     | SYRINGE                                     |     | 84   |
| <i>betamethasone 0.05%</i>      | 73  | BIDIL 37.5-20MG TAB                         | 63  | <i>brimonidine tartrate</i>                            |
| <i>ointment</i>                 |     | BIKTARVY                                    | 56  | 93   |
| <i>betamethasone 0.1%</i>       | 73  | 50-200-25MG TAB                             |     | <i>0.15% ophth soln</i>                                |
| <i>cream</i>                    |     | <i>bimatoprost 0.03% ophth</i>              | 95  | <i>brimonidine tartrate</i>                            |
| <i>betamethasone 0.1%</i>       | 73  | <i>soln</i>                                 |     | 93   |
| <i>lotion</i>                   |     | <i>bisoprolol fumarate 10mg</i>             | 59  | <i>0.2% ophth soln</i>                                 |
| <i>betamethasone 0.1%</i>       | 73  | <i>tab</i>                                  |     | <i>brinzolamide 1% ophth</i>                           |
| <i>ointment</i>                 |     | <i>bisoprolol fumarate</i>                  | 39  | <i>susp</i>  |
| <i>betaxolol 0.5% ophth</i>     | 93  | <i>10mg/hydrochlorothiazide 6.25mg tab</i>  |     | BRIVIACT 100MG TAB                                     |
| <i>soln</i>                     |     | <i>bisoprolol fumarate</i>                  | 39  | BRIVIACT 10MG TAB                                      |
| <i>betaxolol 10mg tab</i>       | 59  | <i>2.5mg/hydrochlorothiazide 6.25mg tab</i> |     | BRIVIACT 10MG/ML                                       |
| <i>betaxolol 20mg tab</i>       | 59  | <i>bisoprolol fumarate</i>                  | 39  | ORAL SOLN  |
| <i>bethanechol chloride</i>     | 105 | <i>5mg/hydrochlorothiazide 6.25mg tab</i>   |     | BRIVIACT 25MG TAB                                      |
| <i>10mg tab</i>                 |     | <i>bisoprolol fumarate 5mg tab</i>          | 59  | BRIVIACT 50MG TAB                                      |
| <i>bethanechol chloride</i>     | 105 | <i>bisoprolol fumarate</i>                  | 39  | BRIVIACT 75MG TAB                                      |
| <i>25mg tab</i>                 |     | <i>5mg/hydrochlorothiazide 6.25mg tab</i>   |     | <i>bromfenac 0.09% ophth</i>                           |
| <i>bethanechol chloride</i>     | 105 | <i>bisoprolol fumarate 5mg tab</i>          |     | <i>soln</i>  |
| <i>50mg tab</i>                 |     | <i>bisoprolol fumarate 5mg tab</i>          | 59  | <i>bromocriptine 2.5mg tab</i>                         |
| <i>bethanechol chloride 5mg</i> | 105 | <i>BIVIGAM 5GM/50ML INJ</i>                 | 96  | <i>bromocriptine 5mg cap</i>                           |
| <i>tab</i>                      |     | <i>BLEPHAMIDE 0.2-10% OPHTH SUSP</i>        | 94  | BRUKINSA 80MG CAP                                      |
| <i>BETIMOL 0.25% OPHTH</i>      | 93  | <i>blisovi 21 fe 1.5/30 28 day pack</i>     | 66  | <i>budesonide 0.125mg/ml inh susp</i>                  |
| <i>SOLN</i>                     |     | <i>blisovi 24 fe 1/20 28 day pack</i>       | 66  | <i>budesonide 0.25mg/ml inh susp</i>                   |
| <i>BETIMOL 0.5% OPHTH</i>       | 93  | <i>BOOSTRIX INJ</i>                         | 103 | <i>budesonide 0.5mg/ml inh susp</i>                    |
| <i>SOLN</i>                     |     | <i>BOOSTRIX SYRINGE</i>                     | 103 | <i>budesonide 3mg dr cap</i>                           |
| <i>BETOPTIC S 0.25%</i>         | 93  | <i>bosentan 125mg tab</i>                   | 63  | <i>budesonide 9mg er tab</i>                           |
| <i>OPHTH SUSP</i>               |     | <i>bosentan 62.5mg tab</i>                  | 63  | <i>bumetanide 0.25mg/ml inj</i>                        |
| <i>bexarotene 75mg cap</i>      | 49  | <i>BOSULIF 100MG TAB</i>                    | 46  | <i>bumetanide 0.5mg tab</i>                            |
| <i>BEXSERO SYRINGE</i>          | 105 | <i>BOSULIF 400MG TAB</i>                    | 46  | <i>bumetanide 1mg tab</i>                              |
| <i>bicalutamide 50mg tab</i>    | 44  | <i>BOSULIF 500MG TAB</i>                    | 46  | <i>bumetanide 2mg tab</i>                              |
| <i>BICILLIN</i>                 | 97  | <i>BRAFTOVI 75MG CAP</i>                    | 46  | <i>buprenorphine 12mg/naloxone 3mg sublingual film</i> |
| <i>300000-300000UNIT/ML</i>     |     |   |     | <i>buprenorphine 2mg sl tab</i>                        |
| <i>SYRINGE</i>                  |     |   |     | 15   |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                         |     |                            |    |                        |
|--------------------------------|-----|----------------------------|----|------------------------|
| buprenorphine                  | 15  | CABOMETYX 40MG             | 46 | carbamazepine 200mg er |
| 2mg/naloxone 0.5mg sl          |     | TAB                        |    | cap                    |
| tab                            |     | CABOMETYX 60MG             | 46 | carbamazepine 200mg er |
| buprenorphine                  | 15  | TAB                        |    | tab                    |
| 2mg/naloxone 0.5mg             |     | calcipotriene 0.005%       | 72 | carbamazepine 200mg    |
| sublingual film                |     | cream                      |    | tab                    |
| buprenorphine                  | 15  | calcipotriene 0.005%       | 72 | carbamazepine 20mg/ml  |
| 4mg/naloxone 1mg               |     | ointment                   |    | susp                   |
| sublingual film                |     | calcipotriene 0.005%       | 72 | carbamazepine 300mg er |
| buprenorphine 8mg sl tab       | 15  | topical soln               |    | cap                    |
| buprenorphine                  | 15  | calcitriol 0.00025mg cap   | 78 | carbamazepine 400mg er |
| 8mg/naloxone 2mg sl tab        |     | calcitriol 0.0005mg cap    | 78 | tab                    |
| buprenorphine                  | 15  | calcitriol 0.001mg/ml oral | 78 | carbidopa              |
| 8mg/naloxone 2mg               |     | soln                       |    | 10mg/levodopa 100mg    |
| sublingual film                |     | calcium acetate 667mg      | 82 | odt                    |
| bupropion 100mg er tab         | 26  | cap                        |    | carbidopa              |
| bupropion 100mg tab            | 26  | calcium acetate 667mg      | 82 | 10mg/levodopa 100mg    |
| bupropion 150mg sr (12 hr) tab | 26  | tab                        |    | tab                    |
| bupropion 150mg sr tab         | 100 | CALQUENCE 100MG            | 46 | CARBIDOPA              |
| bupropion 150mg xl (24 hr) tab | 26  | CAP                        |    | 12.5MG/ENTACAPONE      |
| bupropion 200mg er tab         | 26  | camila 28 day 0.35mg       | 69 | 200MG/LEVODOPA         |
| bupropion 300mg er tab         | 26  | pack                       |    | 50MG TAB               |
| bupropion 75mg tab             | 26  | camreselo 91 day pack      | 66 | CARBIDOPA              |
| buspirone 10mg tab             | 17  | candesartan cilexetil      | 37 | 18.75MG/ENTACAPONE     |
| buspirone 15mg tab             | 17  | 16mg tab                   |    | 200MG/LEVODOPA         |
| buspirone 30mg tab             | 17  | candesartan cilexetil      | 37 | 75MG TAB               |
| buspirone 5mg tab              | 17  | 32mg tab                   |    | carbidopa 25mg tab     |
| buspirone 7.5mg tab            | 17  | candesartan cilexetil 4mg  | 37 | CARBIDOPA              |
| butorphanol tartrate           | 15  | tab                        |    | 25MG/ENTACAPONE        |
| 1mg/act nasal inhaler          |     | candesartan cilexetil 8mg  | 37 | 200MG/LEVODOPA         |
| BYDUREON                       | 30  | tab                        |    | 100MG TAB              |
| 2MG/0.85ML                     |     | CAPLYTA 42MG CAP           | 52 | carbidopa              |
| AUTO-INJECTOR                  |     | CAPRELSA 100MG TAB         | 46 | 25mg/levodopa 100mg er |
| BYSTOLIC 10MG TAB              | 59  | CAPRELSA 300MG TAB         | 46 | tab                    |
| BYSTOLIC 2.5MG TAB             | 59  | captopril 100mg tab        | 36 | carbidopa              |
| BYSTOLIC 20MG TAB              | 59  | captopril 12.5mg tab       | 36 | 25mg/levodopa 100mg    |
| BYSTOLIC 5MG TAB               | 59  | captopril 25mg tab         | 36 | odt                    |
| <b>C</b>                       |     | captopril 50mg tab         | 36 | carbidopa              |
| cabergoline 0.5mg tab          | 79  | CARBAGLU 200MG TAB         | 78 | 25mg/levodopa 100mg    |
| CABLIVI 11MG INJ               | 84  | FOR ORAL SUSP              |    | tab                    |
| CABOMETYX 20MG TAB             | 46  | carbamazepine 100mg        | 23 | carbidopa              |
|                                |     | chew tab                   |    | 25mg/levodopa 250mg    |
|                                |     | carbamazepine 100mg er     | 23 | odt                    |
|                                |     | cap                        |    | carbidopa              |
|                                |     | carbamazepine 100mg er     | 23 | 25mg/levodopa 250mg    |
|                                |     | tab                        |    | tab                    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                          |    |                                 |    |                                |
|---------------------------------|----|---------------------------------|----|--------------------------------|
| CARBIDOPA                       | 50 | <i>cefepime 1000mg inj</i>      | 65 | CETRAXAL 0.2% OTIC             |
| 31.25MG/ENTACAPONE              |    | <i>cefepime 2000mg inj</i>      | 65 | SOLN                           |
| 200MG/LEVODOPA                  |    | <i>cefixime 20mg/ml susp</i>    | 65 | <i>cevimeline 30mg cap</i>     |
| 125MG TAB                       |    | <i>cefixime 400mg cap</i>       | 65 | CHANTIX 0.5MG TAB              |
| CARBIDOPA                       | 50 | <i>cefixime 40mg/ml susp</i>    | 65 | CHANTIX 1MG                    |
| 37.5MG/ENTACAPONE               |    | <i>cefotetan 1000mg inj</i>     | 64 | CONTINUING MONTH               |
| 200MG/LEVODOPA                  |    | <i>cefotetan 2000mg inj</i>     | 64 | THERAPY PACK                   |
| 150MG TAB                       |    | <i>cefoxitin 1000mg inj</i>     | 64 | CHANTIX 1MG TAB                |
| CARBIDOPA                       | 50 | <i>cefoxitin 2000mg inj</i>     | 64 | CHANTIX FIRST MONT             |
| 50MG/ENTACAPONE                 |    | <i>cefoxitin 200mg/ml inj</i>   | 64 | THERAPY PACK                   |
| 200MG/LEVODOPA                  |    | <i>cefpodoxime 100mg tab</i>    | 65 | CHEMET 100MG CAP               |
| 200MG TAB                       |    | <i>cefpodoxime 10mg/ml</i>      | 65 | CHENODAL 250MG TAB             |
| <i>carbidopa</i>                | 50 | <i>susp</i>                     |    | <i>chlordiazepoxide 10mg</i>   |
| <i>50mg/levodopa 200mg er</i>   |    | <i>cefpodoxime 200mg tab</i>    | 65 | <i>cap</i>                     |
| <i>tab</i>                      |    | <i>cefpodoxime 20mg/ml</i>      | 65 | <i>chlordiazepoxide 25mg</i>   |
| <i>carisoprodol 350mg tab</i>   | 91 | <i>susp</i>                     |    | <i>cap</i>                     |
| CARTEOLOL 1% OPHTH              | 93 | <i>cefprozil 250mg tab</i>      | 65 | <i>chlordiazepoxide 5mg</i>    |
| SOLN                            |    | <i>cefprozil 25mg/ml susp</i>   | 65 | <i>cap</i>                     |
| <i>cartia 120mg er cap</i>      | 61 | <i>cefprozil 500mg tab</i>      | 65 | <i>chlorhexidine gluconate</i> |
| <i>cartia 180mg er cap</i>      | 61 | <i>cefprozil 50mg/ml susp</i>   | 65 | <i>0.12% mouthwash</i>         |
| <i>cartia 240mg er cap</i>      | 61 | <i>ceftazidime 1000mg inj</i>   | 65 | <i>chloroquine phosphate</i>   |
| <i>cartia 300mg er cap</i>      | 61 | <i>ceftazidime 2000mg inj</i>   | 65 | <i>250mg tab</i>               |
| <i>carvedilol 12.5mg tab</i>    | 59 | <i>ceftazidime 200mg/ml inj</i> | 65 | CHLOROQUINE                    |
| <i>carvedilol 25mg tab</i>      | 59 | <i>ceftriaxone 1000mg inj</i>   | 65 | PHOSPHATE 500MG                |
| <i>carvedilol 3.125mg tab</i>   | 59 | <i>ceftriaxone 100mg/ml inj</i> | 65 | TAB                            |
| <i>carvedilol 6.25mg tab</i>    | 59 | <i>ceftriaxone 2000mg inj</i>   | 65 | <i>chlorpromazine 100mg</i>    |
| <i>caspofungin acetate 50mg</i> | 33 | <i>ceftriaxone 250mg inj</i>    | 65 | <i>tab</i>                     |
| <i>inj</i>                      |    | <i>ceftriaxone 500mg inj</i>    | 65 | <i>chlorpromazine 10mg tab</i> |
| <i>caspofungin acetate 70mg</i> | 33 | <i>cefuroxime 1500mg inj</i>    | 65 | <i>chlorpromazine 200mg</i>    |
| <i>inj</i>                      |    | <i>cefuroxime 250mg tab</i>     | 65 | <i>tab</i>                     |
| CAYSTON 75MG INH                | 42 | <i>cefuroxime 500mg tab</i>     | 65 | <i>chlorpromazine 25mg tab</i> |
| SOLN                            |    | <i>cefuroxime 750mg inj</i>     | 65 | <i>chlorpromazine 50mg tab</i> |
| <i>caziant 28 day pack</i>      | 66 | <i>cefuroxime 95mg/ml inj</i>   | 65 | <i>chlorthalidone 25mg tab</i> |
| CEFACLOR 250MG CAP              | 64 | <i>celecoxib 100mg cap</i>      | 11 | <i>chlorthalidone 50mg tab</i> |
| CEFACLOR 500MG CAP              | 64 | <i>celecoxib 200mg cap</i>      | 11 | <i>chlorzoxazone 500mg tab</i> |
| CEFADROXIL 1000MG               | 64 | <i>celecoxib 400mg cap</i>      | 11 | CHOLBAM 250MG CAP              |
| TAB                             |    | <i>celecoxib 50mg cap</i>       | 11 | CHOLBAM 50MG CAP               |
| <i>cefadroxil 100mg/ml susp</i> | 64 | CELONTIN 300MG CAP              | 25 | <i>cholestyramine resin</i>    |
| <i>cefadroxil 500mg cap</i>     | 64 | <i>cephalexin 250mg cap</i>     | 64 | (sugar-free) 4000mg            |
| <i>cefadroxil 50mg/ml susp</i>  | 64 | <i>cephalexin 25mg/ml susp</i>  | 64 | powder for oral susp           |
| <i>cefazinol 1000mg inj</i>     | 64 | <i>cephalexin 500mg cap</i>     | 64 | <i>cholestyramine resin</i>    |
| <i>cefazinol 200mg/ml inj</i>   | 64 | <i>cephalexin 50mg/ml susp</i>  | 64 | 4000mg powder for oral         |
| <i>cefazinol 500mg inj</i>      | 64 | CERDELGA 84MG CAP               | 84 | susp                           |
| <i>cefdinir 25mg/ml susp</i>    | 65 | <i>cetirizine 1mg/ml oral</i>   | 34 | <i>ciclopirox 0.77% cream</i>  |
| <i>cefdinir 300mg cap</i>       | 65 | <i>soln</i>                     |    | <i>ciclopirox 0.77% gel</i>    |
| <i>cefdinir 50mg/ml susp</i>    | 65 |                                 |    | <i>ciclopirox 0.77% lotion</i> |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                     |     |                          |     |                         |    |
|----------------------------|-----|--------------------------|-----|-------------------------|----|
| ciclopirox 1% shampoo      | 72  | CLARITHROMYCIN           | 86  | clobazam 20mg tab       | 22 |
| ciclopirox 8% topical soln | 72  | 25MG/ML SUSP             |     | clobetasol propionate   | 73 |
| CILASTATIN                 | 41  | clarithromycin 500mg er  | 86  | 0.05% cream             |    |
| 250MG/IMIPENEM             |     | tab                      |     | clobetasol propionate   | 73 |
| 250MG INJ                  |     | clarithromycin 500mg tab | 86  | 0.05% e cream           |    |
| cilastatin                 | 41  | CLARITHROMYCIN           | 86  | clobetasol propionate   | 73 |
| 500mg/imipenem 500mg       |     | 50MG/ML SUSP             |     | 0.05% foam              |    |
| inj                        |     | CLENPIQ                  | 86  | clobetasol propionate   | 73 |
| cilostazol 100mg tab       | 84  | 75-21.9-0.0625MG/ML      |     | 0.05% gel               |    |
| cilostazol 50mg tab        | 84  | ORAL SOLN                |     | clobetasol propionate   | 73 |
| CIMDUO 300-300MG           | 56  | clindacin 1% pad         | 71  | 0.05% lotion            |    |
| TAB                        |     | clindamycin 1% gel       | 71  | clobetasol propionate   | 73 |
| cimetidine 200mg tab       | 104 | clindamycin 1% lotion    | 71  | 0.05% ointment          |    |
| cimetidine 300mg tab       | 104 | clindamycin 1% pad       | 71  | clobetasol propionate   | 73 |
| cimetidine 400mg tab       | 104 | clindamycin 1% topical   | 71  | 0.05% shampoo           |    |
| cimetidine 60mg/ml oral    | 104 | soln                     |     | clobetasol propionate   | 73 |
| soln                       |     | clindamycin 12mg/ml inj  | 41  | 0.05% spray             |    |
| cimetidine 800mg tab       | 104 | clindamycin 150mg cap    | 41  | clobetasol propionate   | 73 |
| CIMZIA 200MG INJ           | 81  | clindamycin 150mg/ml     | 41  | 0.05% topical soln      |    |
| CIMZIA 200MG/ML            | 81  | (2ml) inj                |     | clodan 0.05% shampoo    | 73 |
| SYRINGE                    |     | clindamycin 150mg/ml     | 41  | clomipramine 25mg cap   | 28 |
| cinacalcet 30mg tab        | 78  | (4ml) inj                |     | clomipramine 50mg cap   | 28 |
| cinacalcet 60mg tab        | 78  | clindamycin 150mg/ml     | 41  | clomipramine 75mg cap   | 28 |
| cinacalcet 90mg tab        | 78  | (6ml) inj                |     | clonazepam 0.125mg odt  | 22 |
| CINRYZE 500UNIT INJ        | 83  | clindamycin 15mg/ml oral | 41  | clonazepam 0.25mg odt   | 22 |
| CIPROFLOXACIN 0.2%         | 95  | soln                     |     | clonazepam 0.5mg odt    | 22 |
| OTIC SOLN                  |     | clindamycin 18mg/ml inj  | 41  | clonazepam 0.5mg tab    | 22 |
| ciprofloxacin 0.3% ophth   | 93  | clindamycin 2% vaginal   | 106 | clonazepam 1mg odt      | 22 |
| soln                       |     | cream                    |     | clonazepam 1mg tab      | 22 |
| ciprofloxacin 250mg tab    | 80  | clindamycin 300mg cap    | 41  | clonazepam 2mg odt      | 22 |
| ciprofloxacin 2mg/ml inj   | 80  | clindamycin 6mg/ml inj   | 41  | clonazepam 2mg tab      | 22 |
| ciprofloxacin 500mg tab    | 80  | clindamycin 75mg cap     | 42  | clonidine 0.00417mg/hr  | 38 |
| ciprofloxacin 750mg tab    | 80  | clindamycin/benzoyl      | 71  | weekly patch            |    |
| ciprofloxacin/dexamethas   | 96  | peroxide 1-5% gel        |     | clonidine 0.00833mg/hr  | 38 |
| one 0.3-0.1% otic susp     |     | CLINIMIX 4.25/10 INJ     | 92  | weekly patch            |    |
| citalopram 10mg tab        | 26  | CLINIMIX 4.25/5 INJ      | 92  | clonidine 0.0125mg/hr   | 38 |
| citalopram 20mg tab        | 26  | CLINIMIX 5/15 INJ        | 92  | weekly patch            |    |
| citalopram 2mg/ml oral     | 26  | CLINIMIX 5/20 INJ        | 92  | clonidine 0.1mg er tab  | 8  |
| soln                       |     | CLINIMIX E 2.75/5 INJ    | 92  | clonidine 0.1mg tab     | 38 |
| citalopram 40mg tab        | 26  | CLINIMIX E 4.25/10 INJ   | 92  | clonidine 0.2mg tab     | 38 |
| claravis 10mg cap          | 71  | CLINIMIX E 4.25/5 INJ    | 92  | clonidine 0.3mg tab     | 38 |
| claravis 20mg cap          | 71  | CLINIMIX E 5/15 INJ      | 92  | clopidogrel 75mg tab    | 84 |
| claravis 30mg cap          | 71  | CLINIMIX E 5/20 INJ      | 92  | clorazepate dipotassium | 17 |
| claravis 40mg cap          | 71  | clenisol 15 inj          | 92  | 15mg tab                |    |
| clarithromycin 250mg tab   | 86  | clobazam 10mg tab        | 22  | clorazepate dipotassium | 18 |
|                            |     | clobazam 2.5mg/ml susp   | 22  | 3.75mg tab              |    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Índice

|  |    |                                 |     |   |     |
|--|----|---------------------------------|-----|---|-----|
| <i>clorazepate dipotassium 7.5mg tab</i>         | 18 | COMBIPATCH 0.00208-0.00583MG/HR | 79  | CRINONE 8% VAGINAL GEL                          | 106 |
| <i>clotrimazole 1% cream</i>                     | 72 | PATCH                           |     | <i>cromolyn sodium 20mg/ml oral soln</i>        | 81  |
| <i>clotrimazole 1% topical soln</i>              | 72 | COMBIPATCH 0.00208-0.0104MG/HR  | 79  | <i>cromolyn sodium 4% ophth soln</i>            | 95  |
| <i>clotrimazole 10mg lozenge</i>                 | 91 | PATCH                           |     | <i>cryselle 28 pack</i>                         | 66  |
| <i>clotrimazole/betamethasone 1-0.05% cream</i>  | 72 | COMBIVENT 20-100MCG/ACT INH     | 20  | <i>cyclafem 1/35 28 day pack</i>                | 66  |
| <i>clotrimazole/betamethasone 1-0.05% lotion</i> | 72 | COMETRIQ CAP 100MG              | 46  | <i>cyclafem 7/7/7 28 day pack</i>               | 66  |
| <i>clovique 250mg cap</i>                        | 89 | DAILY DOSE CARTON               |     | <i>cyclobenzaprine 10mg tab</i>                 | 91  |
| <i>clozapine 100mg odt</i>                       | 53 | PACK                            |     | <i>cyclobenzaprine 5mg tab</i>                  | 91  |
| <i>clozapine 100mg tab</i>                       | 53 | COMETRIQ CAP 140MG              | 46  | CYCLOPHOSPHAMIDE 25MG CAP                       | 43  |
| <i>CLOZAPINE 12.5MG ODT</i>                      | 53 | DAILY DOSE CARTON               |     | CYCLOPHOSPHAMIDE 25MG TAB                       | 43  |
| <i>CLOZAPINE 150MG ODT</i>                       | 53 | PACK                            |     | CYCLOPHOSPHAMIDE 200-25-300MG TAB               | 43  |
| <i>CLOZAPINE 200MG ODT</i>                       | 53 | COMPLERA                        | 56  | <i>compro 25mg rectal supp</i>                  | 54  |
| <i>clozapine 200mg tab</i>                       | 53 | 200-25-300MG TAB                |     | <i>constulose 10gm/15ml</i>                     | 86  |
| <i>clozapine 25mg odt</i>                        | 53 | <i>constulose 10gm/15ml</i>     |     | <i>cyclosporine 50mg cap</i>                    | 90  |
| <i>clozapine 25mg tab</i>                        | 53 | COPIKTRA 15MG CAP               | 46  | <i>cyclosporine 25mg cap</i>                    | 90  |
| <i>clozapine 50mg tab</i>                        | 53 | COPIKTRA 25MG CAP               | 46  | <i>cyclosporine modified 100mg cap</i>          | 90  |
| <i>COARTEM 20-120MG TAB</i>                      | 42 | CORLANOR 5MG TAB                | 64  | <i>cyclosporine modified 100mg/ml oral soln</i> | 90  |
| <i>CODEINE SULFATE 15MG TAB</i>                  | 12 | CORLANOR 5MG/5ML                | 64  | <i>cyclosporine modified 25mg cap</i>           | 90  |
| <i>CODEINE SULFATE 30MG TAB</i>                  | 13 | ORAL SOLN                       |     | <i>cyclosporine modified 50mg cap</i>           | 90  |
| <i>CODEINE SULFATE 60MG TAB</i>                  | 13 | COTELLIC 20MG TAB               | 64  | <i>cyclosporine modified 50mg cap</i>           | 90  |
| <i>colchicine 0.5mg/probenecid 500mg tab</i>     | 83 | CREON                           | 75  | <i>cyclosporine modified 50mg cap</i>           | 90  |
| <i>colchicine 0.6mg tab</i>                      | 83 | 120000-24000-76000UNI           |     | <i>cyclosporine modified 50mg cap</i>           | 90  |
| <i>colesevelam 3750mg powder for oral susp</i>   | 35 | T DR CAP                        |     | <i>cyclosporine modified 50mg cap</i>           | 90  |
| <i>colesevelam 625mg tab</i>                     | 35 | CREON                           | 75  | <i>ciproheptadine 0.4mg/ml oral soln</i>        | 35  |
| <i>colestipol 1000mg tab</i>                     | 35 | 180000-36000-114000U            |     | <i>ciproheptadine 4mg tab</i>                   | 35  |
| <i>colestipol 5000mg granules for oral susp</i>  | 35 | NIT DR CAP                      |     | <i>cyred 28 day pack</i>                        | 66  |
| <i>colistin 75mg/ml inj</i>                      | 42 | CREON                           | 75  | <i>CYSTADROPS 0.37%</i>                         | 95  |
| <i>COMBIGAN 2-5MG/ML OPHTH SOLN</i>              | 93 | 30000-6000-19000UNIT            |     | <i>OPHTH SOLN</i>                               |     |
|  |    | DR CAP                          |     | <i>CYSTAGON 150MG CAP</i>                       | 82  |
|  |    | CREON                           | 75  | <i>CYSTAGON 50MG CAP</i>                        | 82  |
|  |    | 60000-12000-38000UNIT           |     | <i>CYSTARAN 0.44%</i>                           | 95  |
|  |    | DR CAP                          |     | <i>OPHTH SOLN</i>                               |     |
|  |    | CRINONE 4% VAGINAL GEL          | 106 | <b>D</b>  |     |
|  |    |                                 |     | <i>dalfampridine 10mg er tab</i>                | 99  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                              |     |                                       |    |   |    |
|-------------------------------------|-----|---------------------------------------|----|---|----|
| DALIRESP 250MCG TAB                 | 19  | desipramine 150mg tab                 | 28 | dexamethasone/neomycin /polymyxin b 0.1% ophth ointment | 94 |
| DALIRESP 500MCG TAB                 | 19  | desipramine 25mg tab                  | 28 |   |    |
| DALVANCE 500MG INJ                  | 41  | desipramine 50mg tab                  | 28 |   |    |
| danazol 100mg cap                   | 15  | desipramine 75mg tab                  | 28 | dexamethasone/tobramycin 0.3-0.1% ophth susp            | 94 |
| danazol 200mg cap                   | 15  | desloratadine 5mg tab                 | 34 |   |    |
| danazol 50mg cap                    | 15  | desmopressin acetate                  | 79 | dexamethylphenidate                                     | 9  |
| dantrolene sodium 100mg cap         | 92  | 0.01% (0.01mg/act) nasal spray        |    | 10mg er cap   |    |
| dantrolene sodium 25mg cap          | 92  | desmopressin acetate 0.1mg tab        | 79 | dexamethylphenidate                                     | 9  |
| dantrolene sodium 50mg cap          | 92  | desmopressin acetate 0.2mg tab        | 79 | 15mg er cap   |    |
| dapsone 100mg tab                   | 41  | desogestrel                           | 66 | dexamethylphenidate                                     | 9  |
| dapsone 25mg tab                    | 41  | 0.15mg/ethinyl estradiol              |    | 2.5mg tab   |    |
| DAPTACEL INJ                        | 103 | 0.01mg/ethinyl estradiol              |    | dexamethylphenidate                                     | 9  |
| daptomycin 500mg inj                | 41  | 0.02mg 28 day pack                    |    | 20mg er cap   |    |
| DAURISMO 100MG TAB                  | 44  | desogestrel/ethinyl estradiol/inert   | 66 | dexamethylphenidate                                     | 9  |
| DAURISMO 25MG TAB                   | 44  | ingredients                           |    | 25mg er cap   |    |
| deblitane 28 day 0.35mg pack        | 69  | 0.15mg-0.03mg-1mg pack                |    | dexamethylphenidate                                     | 9  |
| deferasirox 125mg tab for oral susp | 32  | desonide 0.05% ointment               | 73 | 35mg er cap   |    |
| deferasirox 180mg granules          | 32  | desoximetasone 0.25% cream            | 73 | dexamethylphenidate                                     | 9  |
| deferasirox 180mg tab               | 32  | desoximetasone 0.25% ointment         | 73 | 40mg er cap   |    |
| deferasirox 250mg tab for oral susp | 32  | desvenlafaxine succinate 100mg er tab | 27 | dexamethylphenidate 5mg er cap                          | 9  |
| deferasirox 360mg granules          | 32  | desvenlafaxine succinate 25mg er tab  | 27 | dextroamphetamine sulfate 10mg er cap                   | 8  |
| deferasirox 360mg tab               | 32  | desvenlafaxine succinate 50mg er tab  | 27 | dextroamphetamine sulfate 10mg tab                      | 8  |
| deferasirox 500mg tab for oral susp | 32  | dexamethasone 0.1mg/ml oral soln      | 69 | dextroamphetamine sulfate 15mg er cap                   | 8  |
| deferasirox 90mg granules           | 32  | dexamethasone 0.5mg tab               | 69 | dextroamphetamine sulfate 5mg er cap                    | 8  |
| deferasirox 90mg tab                | 32  | dexamethasone 0.75mg tab              | 69 | dextroamphetamine sulfate 5mg tab                       | 8  |
| deferiprone 500mg tab               | 32  | tab                                   |    | DIACOMIT 250MG CAP                                      | 23 |
| DELSTRIGO 100-300-300MG TAB         | 56  | dexamethasone 1.5mg tab               | 69 | DIACOMIT 250MG  | 23 |
| demeclocycline 150mg tab            | 101 | DEXAMETHASONE 1MG TAB                 | 69 | POWDER FOR ORAL SUSP                                    |    |
| demeclocycline 300mg tab            | 101 | DEXAMETHASONE 2MG TAB                 | 69 | DIACOMIT 500MG CAP                                      | 23 |
| DESCOVY 200-25MG TAB                | 56  | dexamethasone 4mg tab                 | 69 | DIACOMIT 500MG  | 23 |
| desipramine 100mg tab               | 28  | dexamethasone 6mg tab                 | 70 | POWDER FOR ORAL SUSP                                    |    |
| desipramine 10mg tab                | 28  | DEXAMETHASONE PHOSPHATE 0.1%          |    | DIACOMIT 500MG  |    |
|                                     |     | OPHTH SOLN                            |    |   |    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice  |     |  |     |   |
|---|-----|--|-----|---|
| DIASTAT 10MG RECTAL GEL                         | 22  | dicyclomine 20mg tab<br>dicyclomine 2mg/ml oral<br>soln          | 104 | DIPENTUM 250MG CAP<br>DIPHThERIA/TETANUS TOXOID INJ                     |
| DIASTAT 2.5MG RECTAL GEL                        | 22  | disflunisal 500mg tab  | 12  | dipyridamole 25mg tab<br>dipyridamole 50mg tab<br>dipyridamole 75mg tab |
| DIASTAT 20MG RECTAL GEL                         | 22  | digitek 0.125mg tab<br>digitek 0.25mg tab                        | 62  | dipyridamole 100mg cap<br>dipyridamole 150mg cap                        |
| diazepam 10mg tab                               | 18  | digox 125mcg tab   | 62  | disopyramide 250mg tab<br>disulfiram 500mg tab                          |
| DIAZEPAM 10MG/2ML RECTAL GEL                    | 22  | digox 250mcg tab<br>DIGOXIN 0.05MG/ML                            | 62  | disulfiram 50mg tab<br>DIURIL 250MG/5ML                                 |
| diazepam 1mg/ml oral                            | 18  | ORAL SOLN  | 62  | SUSP  |
| soln  |     | digoxin 0.125mg tab  | 62  | divalproex sodium 125mg dr cap  |
| DIAZEPAM 2.5MG/0.5ML RECTAL GEL                 | 22  | digoxin 0.25mg tab<br>dihydroergotamine mesylate 0.5mg/act nasal | 62  | divalproex sodium 125mg dr tab  |
| DIAZEPAM 20MG/4ML RECTAL GEL                    | 22  | inhaler  | 87  | divalproex sodium 250mg dr tab  |
| diazepam 2mg tab                                | 18  | DILANTIN 30MG ER   | 25  | divalproex sodium 250mg er tab  |
| diazepam 5mg tab                                | 18  | CAP  | 61  | divalproex sodium 500mg dr tab  |
| diazepam 5mg/ml oral                            | 18  | dilt 120mg er cap  | 61  | divalproex sodium 500mg er tab  |
| soln  |     | dilt 180mg er cap  | 61  | dofetilide 0.125mg cap  |
| diazoxide 50mg/ml susp                          | 30  | dilt 240mg er cap  | 61  | dofetilide 0.25mg cap   |
| diclofenac potassium 50mg tab                   | 11  | diltiazem 120mg er (12 hr) cap                                   | 61  | dofetilide 0.5mg cap  |
| diclofenac sodium 0.1% ophth soln               | 95  | diltiazem 120mg er (24 hr) cap                                   | 61  | dolishale 28 day pack   |
| diclofenac sodium 1% gel                        | 72  | diltiazem 120mg tab  | 61  | donepezil 10mg odt  |
| diclofenac sodium 1.5% topical soln             | 72  | diltiazem 180mg er cap   | 61  | donepezil 10mg tab  |
| diclofenac sodium 100mg er tab                  | 11  | diltiazem 180mg er tab   | 61  | donepezil 23mg tab  |
| diclofenac sodium 25mg dr tab                   | 11  | diltiazem 240mg er cap   | 61  | donepezil 5mg odt   |
| diclofenac sodium 3% gel                        | 72  | diltiazem 240mg er tab   | 61  | donepezil 5mg tab   |
| diclofenac sodium 50mg dr tab                   | 11  | diltiazem 300mg er cap   | 61  | DOPTELET 20MG TAB   |
| diclofenac sodium 50mg/misoprostol 0.2mg dr tab | 11  | diltiazem 300mg er tab   | 61  | DOPTELET TAB 40MG   |
| diclofenac sodium 75mg dr tab                   | 11  | diltiazem 30mg tab   | 61  | DAILY DOSE PACK   |
| diclofenac sodium 75mg/misoprostol 0.2mg dr tab | 11  | diltiazem 360mg er cap   | 61  | DOPTELET TAB 60MG   |
| dicloxacillin 250mg cap                         | 98  | diltiazem 360mg er tab   | 61  | DAILY DOSE PACK   |
| dicloxacillin 500mg cap                         | 98  | diltiazem 420mg er cap   | 61  | dorzolamide 2% ophth soln   |
| dicyclomine 10mg cap                            | 104 | diltiazem 60mg er cap  | 61  | dorzolamide/timolol 22.3-6.8mg/ml ophth soln                            |
|   |     | diltiazem 60mg tab   | 61  | dorzolamide/timolol maleate 2%-0.5% ophth soln (preservative-free)      |
|   |     | diltiazem 90mg er cap  | 61  | dotti 0.025mg/24hr patch  |
|   |     | diltiazem 90mg tab   | 61  |   |
|   |     | dimethyl fumarate 120mg  | 99  |   |
|   |     | dr cap   | 99  |   |
|   |     | dimethyl fumarate  | 99  |   |
|   |     | 120mg/dimethyl fumarate  | 99  |   |
|   |     | 240mg pack   | 99  |   |
|   |     | dimethyl fumarate 240mg  | 99  |   |
|   |     | dr cap   | 99  |   |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice  |     |   |     |   |  |
|---|-----|---|-----|---|--|
| <i>dotti 0.0375mg/24hr patch</i>                        | 80  | DRIZALMA 20MG DR CAP  | 27  | E | <i>econazole nitrate 1% cream</i>                |
| <i>dotti 0.05mg/24hr patch</i>                          | 80  | DRIZALMA 30MG DR CAP  | 27  |   | EDURANT 25MG TAB                                 |
| <i>dotti 0.075mg/24hr patch</i>                         | 80  | CAP   |     |   | <i>efavirenz 200mg cap</i>                       |
| <i>dotti 0.1mg/24hr patch</i>                           | 80  | DRIZALMA 40MG DR CAP  | 27  |   | <i>efavirenz</i>                                 |
| DOVATO 50-300MG TAB                                     | 56  | CAP   |     |   | 56   |
| <i>doxazosin 1mg tab</i>                                | 38  | DRIZALMA 60MG DR CAP  | 28  |   | <i>400mg/lamivudine</i>                          |
| <i>doxazosin 2mg tab</i>                                | 38  | CAP   |     |   | <i>300mg/tenofovir</i>                           |
| <i>doxazosin 4mg tab</i>                                | 38  | <i>dronabinol 10mg cap</i>  | 33  |   | <i>disoproxil fumarate</i>                       |
| <i>doxazosin 8mg tab</i>                                | 38  | <i>dronabinol 2.5mg cap</i>   | 33  |   | <i>300mg tab</i>                                 |
| <i>doxepin 100mg cap</i>                                | 28  | <i>dronabinol 5mg cap</i>   | 33  |   | <i>efavirenz 50mg cap</i>                        |
| <i>doxepin 10mg cap</i>                                 | 28  | <i>drospirenone 3mg/ethinyl estradiol 0.02mg/inert ingredients 1mg pack</i> | 66  |   | <i>efavirenz 600mg tab</i>                       |
| <i>doxepin 10mg/ml oral soln</i>                        | 28  | <i>drospirenone 3mg/ethinyl estradiol 0.03mg/inert ingredients 1mg pack</i> | 66  |   | <i>efavirenz</i>                                 |
| DOXE PIN 150MG CAP                                      | 28  | <i>drospirenone 3mg/ethinyl estradiol 300mg tab</i>                         | 66  |   | 56   |
| <i>doxepin 25mg cap</i>                                 | 28  | DROXIA 200MG CAP  | 84  |   | <i>200mg/tenofovir</i>                           |
| <i>doxepin 50mg cap</i>                                 | 28  | DROXIA 300MG CAP  | 84  |   | <i>disoproxil fumarate</i>                       |
| <i>doxepin 75mg cap</i>                                 | 29  | DROXIA 400MG CAP  | 84  |   | <i>300mg tab</i>                                 |
| <i>doxercalciferol 0.0005mg cap</i>                     | 78  | <i>droxidopa 100mg cap</i>  | 107 |   | <i>efavirenz</i>                                 |
| <i>doxercalciferol 0.001mg cap</i>                      | 78  | <i>droxidopa 200mg cap</i>  | 107 |   | <i>600mg/lamivudine</i>                          |
| <i>doxercalciferol 0.0025mg cap</i>                     | 78  | <i>droxidopa 300mg cap</i>  | 107 |   | <i>300mg/tenofovir</i>                           |
| <i>doxy 100mg inj</i>                                   | 101 | DULERA 100-5MCG INHALER   | 20  |   | <i>disoproxil fumarate</i>                       |
| <i>doxycycline hyclate 100mg cap</i>                    | 101 | DULERA 200-5MCG INHALER   | 20  |   | <i>300mg tab</i>                                 |
| <i>doxycycline hyclate 100mg tab</i>                    | 101 | DULERA 50-5MCG INHALER  | 20  |   | <i>eletriptan 20mg tab</i>                       |
| <i>doxycycline hyclate 20mg tab</i>                     | 101 | <i>duloxetine 20mg dr cap</i>   | 28  |   | <i>eletriptan 40mg tab</i>                       |
| <i>doxycycline hyclate 50mg cap</i>                     | 101 | <i>duloxetine 30mg dr cap</i>   | 28  |   | 87   |
| <i>doxycycline monohydrate 100mg cap</i>                | 101 | <i>duloxetine 60mg dr cap</i>   | 28  |   | 87   |
| <i>doxycycline monohydrate 100mg tab</i>                | 101 | DUPIXENT DUPIXENT   | 74  |   | <i>ELIGARD 22.5MG SYRINGE</i>                    |
| <i>doxycycline monohydrate 50mg cap</i>                 | 101 | 200MG/1.14ML SYRINGE  |     |   | <i>ELIGARD 30MG SYRINGE</i>                      |
| <i>doxycycline monohydrate 50mg tab</i>                 | 101 | DUPIXENT 300MG/2ML AUTO-INJECTOR  | 74  |   | <i>ELIGARD 45MG SYRINGE</i>                      |
| <i>doxycycline monohydrate 50mg susp</i>                | 101 | DUPIXENT 300MG/2ML SUSP   | 74  |   | <i>ELIQUIS 2.5MG TAB STARTER PACK 5MG</i>        |
| <i>doxycycline monohydrate 5mg/ml susp</i>              | 101 | DUREZOL 0.05% OPHTH vaginal system  | 94  |   | <i>ELIQUIS 5MG TAB ELMIRON 100MG CAP</i>         |
| <i>doxylamine succinate 10mg/pyridoxine 10mg dr tab</i> | 33  | <i>dutasteride 0.5mg cap</i>  | 83  |   | <i>eluryng 0.120-0.015mg/24hr vaginal system</i> |
|   |     | <i>dutasteride</i>  | 83  |   | <i>EMCYT 140MG CAP EMGALITY 100MG/ML SYRINGE</i> |
|   |     | <i>0.5mg/tamsulosin 0.4mg cap</i>   |     |   | <i>EMGALITY 120MG/ML AUTO-INJECTOR</i>           |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |    |   |     |   |
|--|----|---|-----|---|
| EMGALITY 120MG/ML SYRINGE  | 87 | ENBREL 25MG/0.5ML SYRINGE                         | 12  | ENVARSUS 0.75MG ER TAB                          |
| <i>emoquette pack</i>  | 66 | ENBREL 50MG/ML                                    | 12  | ENVARSUS 1MG ER TAF                             |
| EMSAM 12MG/24HR PATCH  | 26 | AUTO-INJECTOR                                     |     | ENVARSUS 4MG ER TAF                             |
| EMSAM 6MG/24HR PATCH   | 26 | ENBREL 50MG/ML                                    | 12  | EPIDIOLEX 100MG/ML                              |
| EMSAM 9MG/24HR PATCH   | 26 | CARTRIDGE   |     | ORAL SOLN                                       |
| <i>emtricitabine 100mg/tenofovir disoproxil fumarate 150mg tab</i> | 56 | ENBREL 50MG/ML SYRINGE                            | 12  | EPIDUO 0.3-2.5% GEL                             |
| <i>emtricitabine 133mg/tenofovir disoproxil fumarate 200mg tab</i> | 56 | ENDARI 5GM POWDER FOR ORAL SOLN                   | 84  | <i>epinastine 0.05% ophth soln</i>              |
| <i>emtricitabine 167mg/tenofovir disoproxil fumarate 250mg tab</i> | 56 | <i>endocet 325-10mg tab</i>                       | 15  | <i>epinephrine 0.5mg/ml auto-injector</i>       |
| <i>emtricitabine 200mg cap</i>                                     | 56 | <i>endocet 325-5mg tab</i>                        | 15  | <i>epinephrine 1mg/ml auto-injector</i>         |
| <i>emtricitabine 200mg/tenofovir disoproxil fumarate 300mg tab</i> | 57 | <i>endocet 325-7.5mg tab</i>                      | 15  | <i>epitol 200mg tab</i>                         |
| EMTRIVA 10MG/ML ORAL SOLN  | 57 | ENGERIX-B 10MCG/0.5ML SYRINGE                     | 106 | EPIVIR HBV 5MG/ML                               |
| <i>enalapril maleate 10mg tab</i>                                  | 36 | ENGERIX-B 20MCG/ML SYRINGE                        | 106 | ORAL SOLN                                       |
| <i>enalapril maleate 10mg/hydrochlorothiazide 25mg tab</i>         | 39 | <i>enoxaparin sodium 100mg/ml (0.3ml) syringe</i> | 21  | <i>eplerenone 25mg tab</i>                      |
| <i>enalapril maleate 2.5mg tab</i>                                 | 36 | <i>enoxaparin sodium 100mg/ml (0.4ml) syringe</i> | 21  | <i>eplerenone 50mg tab</i>                      |
| <i>enalapril maleate 20mg tab</i>                                  | 36 | <i>enoxaparin sodium 100mg/ml (0.6ml) syringe</i> | 21  | ERAXIS 100MG INJ                                |
| <i>enalapril maleate 5mg tab</i>                                   | 36 | <i>enoxaparin sodium 100mg/ml (0.8ml) syringe</i> | 21  | ERAXIS 50MG INJ                                 |
| <i>enalapril maleate 5mg/hydrochlorothiazide 12.5mg tab</i>        | 39 | <i>enoxaparin sodium 100mg/ml (1ml) syringe</i>   | 21  | ERGOLOID MESYLATES                              |
| ENBREL 25MG INJ  | 12 | <i>enpresse 28 day pack</i>                       | 66  | USP 1MG TAB                                     |
| ENBREL 25MG/0.5ML INJ  | 12 | <i>enskyce 28 day pack</i>                        | 66  | ERIVEDGE 150MG CAP                              |
|  |    | ENSPRYNG 120MG/ML SYRINGE                         | 90  | ERLEADA 60MG TAB                                |
|  |    | ENTRESTO 24-26MG                                  | 63  | <i>erlotinib 100mg tab</i>                      |
|  |    | TAB   | 50  | <i>erlotinib 150mg tab</i>                      |
|  |    | ENTRESTO 49-51MG                                  | 58  | <i>erlotinib 25mg tab</i>                       |
|  |    | TAB   | 58  | <i>errin 28 day 0.35mg pack</i>                 |
|  |    | <i>enulose 10gm/15ml oral soln</i>                | 63  | <i>ertapenem 1000mg inj</i>                     |
|  |    |   | 63  | ERY 2% PAD                                      |
|  |    |   |     | ERYTHROCIN 500MG INJ                            |
|  |    |   |     | <i>erythromycin 0.5% ophth ointment</i>         |
|  |    |   |     | <i>erythromycin 2% gel</i>                      |
|  |    |   |     | <i>erythromycin 2% topical soln</i>             |
|  |    |   |     | ERYTHROMYCIN 250MG DR CAP                       |
|  |    |   |     | <i>erythromycin 250mg tab</i>                   |
|  |    |   |     | <i>erythromycin 500mg tab</i>                   |
|  |    |   |     | <i>erythromycin ethylsuccinate 40mg/ml susp</i> |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |     |  |     |  |    |
|--|-----|--|-----|--|----|
| <i>erythromycin</i>                              | 87  | <i>estradiol</i>                                 | 79  | <i>ethinyl estradiol</i>   | 66 |
| <i>ethylsuccinate 80mg/ml susp</i>               |     | <i>0.5mg/norethindrone acetate 0.1mg pack</i>    |     | <i>0.02mg/ferrous fumarate 75mg/norethindrone</i>                                |    |
| <i>erythromycin/benzoyl peroxide 5-3% gel</i>    | 71  | <i>estradiol 1mg tab</i>                         | 80  | <i>acetate 1mg 21 day pack</i>   |    |
| <i>ESBRIET 267MG CAP</i>                         | 101 | <i>estradiol</i>                                 | 79  | <i>ethinyl estradiol</i>   | 66 |
| <i>ESBRIET 267MG TAB</i>                         | 101 | <i>1mg/norethindrone acetate 0.5mg pack</i>      |     | <i>0.02mg/inert ingredients 1mg/levonorgestrel</i>                               |    |
| <i>ESBRIET 801MG TAB</i>                         | 101 | <i>estradiol 2mg tab</i>                         | 80  | <i>0.1mg pack</i>  |    |
| <i>escitalopram 10mg tab</i>                     | 26  | <i>estradiol valerate</i>                        | 80  | <i>ethinyl estradiol</i>   | 66 |
| <i>escitalopram 1mg/ml oral soln</i>             | 26  | <i>20mg/ml inj</i>                               |     | <i>0.02mg/norethindrone acetate 1mg pack</i>                                     |    |
| <i>escitalopram 20mg tab</i>                     | 26  | <i>estradiol valerate</i>                        | 80  | <i>ethinyl estradiol</i>   | 66 |
| <i>escitalopram 5mg tab</i>                      | 27  | <i>40mg/ml inj</i>                               |     | <i>0.035mg/ethynodiol</i>  |    |
| <i>esomeprazole 20mg dr cap</i>                  | 104 | <i>ESTRING 2MG (7.5 MCG/24HR) VAGINAL SYSTEM</i> | 106 | <i>diacetate 1mg/inert ingredients 1mg pack</i>                                  |    |
| <i>esomeprazole 40mg dr cap</i>                  | 104 | <i>eszopiclone 1mg tab</i>                       | 85  | <i>ethinyl estradiol</i>   | 67 |
| <i>estarrylla 28 day pack</i>                    | 66  | <i>eszopiclone 2mg tab</i>                       | 85  | <i>0.035mg/ferrous fumarate</i>  |    |
| <i>estazolam 1mg tab</i>                         | 85  | <i>eszopiclone 3mg tab</i>                       | 85  | <i>75mg/norethindrone</i>  |    |
| <i>estazolam 2mg tab</i>                         | 85  | <i>ethacrynic acid 25mg tab</i>                  | 76  | <i>0.4mg pack</i>  |    |
| <i>estradiol 0.00104mg/hr twice weekly patch</i> | 80  | <i>ethambutol 100mg tab</i>                      | 42  | <i>ethinyl estradiol</i>   | 67 |
| <i>estradiol 0.00104mg/hr weekly patch</i>       | 80  | <i>ethambutol 400mg tab</i>                      | 42  | <i>0.035mg/inert ingredients 1mg/norgestimate 0.25mg pack</i>                    |    |
| <i>estradiol 0.00156mg/hr twice weekly patch</i> | 80  | <i>ethinyl estradiol</i>                         | 79  | <i>ethinyl estradiol</i>   | 67 |
| <i>estradiol 0.00156mg/hr weekly patch</i>       | 80  | <i>0.0025mg/norethindrone acetate 0.5mg pack</i> |     | <i>0.035mg/inert/norgestimate</i>  |    |
| <i>estradiol 0.00208mg/hr twice weekly patch</i> | 80  | <i>ethinyl estradiol</i>                         | 79  | <i>0.215mg/0.25mg pack</i>   |    |
| <i>estradiol 0.00208mg/hr weekly patch</i>       | 80  | <i>0.005mg/norethindrone acetate 1mg pack</i>    |     | <i>ethinyl estradiol</i>   | 67 |
| <i>estradiol 0.0025mg/hr weekly patch</i>        | 80  | <i>ethinyl estradiol</i>                         | 66  | <i>0.18mg/0.215mg/0.25mg pack</i>  |    |
| <i>estradiol 0.00312mg/hr weekly patch</i>       | 80  | <i>0.01mg/ethinyl estradiol</i>                  |     | <i>ethinyl estradiol</i>   | 67 |
| <i>estradiol 0.00313mg/hr twice weekly patch</i> | 80  | <i>0.02mg/levonorgestrel</i>                     |     | <i>0.03mg/inert ingredients 1mg/levonorgestrel</i>                               |    |
| <i>estradiol 0.00417mg/hr twice weekly patch</i> | 80  | <i>0.1mg 91 day pack</i>                         |     | <i>0.15mg pack</i>   |    |
| <i>estradiol 0.00417mg/hr weekly patch</i>       | 80  | <i>ethinyl estradiol</i>                         | 66  | <i>ethinyl estradiol</i>   | 67 |
| <i>estradiol 0.01% vaginal cream</i>             | 106 | <i>0.01mg/ethinyl estradiol</i>                  |     | <i>0.05mg/ethynodiol diacetate 1mg/inert ingredients 1mg pack</i>                |    |
| <i>estradiol 0.5mg tab</i>                       | 80  | <i>0.03mg/levonorgestrel</i>                     |     | <i>ethinyl</i>   | 69 |
|  |     | <i>0.15mg 91 day pack</i>                        |     | <i>estradiol/etonogestrel 0.120-0.015 mg/24hr vaginal system</i>                 |    |
|  |     | <i>ethinyl estradiol</i>                         | 66  | <i>ethinyl estradiol/inert ingredients/levonorgestrel 0.03-1-0.15mg pack(84)</i> |    |
|  |     | <i>0.025mg/inert/norgestimate te</i>             |     |  |    |
|  |     | <i>0.18mg/0.215mg/0.25mg pack</i>                |     |  |    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice  |     |  |                |   |
|---|-----|--|----------------|---|
| <i>ethinyl estradiol/levonorgestrel 91 day pack</i> | 67  | FANAPT 10MG TAB<br>FANAPT 12MG TAB<br>FANAPT 1MG TAB | 52<br>52<br>52 | <i>fentanyl 0.025mg/hr patch</i><br><i>fentanyl 0.05mg/hr patch</i><br><i>fentanyl 0.075mg/hr patch</i> |
| <i>ethosuximide 250mg cap</i>                       | 26  | FANAPT 2MG TAB                                       | 52             | <i>fentanyl 0.075mg/hr patch</i>  |
| <i>ethosuximide 50mg/ml oral soln</i>               | 26  | FANAPT 4MG TAB<br>FANAPT 6MG TAB                     | 52<br>52       | <i>fentanyl 0.075mg/hr patch</i><br><i>FENTANYL 0.1MG</i>   |
| <i>etodolac 200mg cap</i>                           | 11  | FANAPT 8MG TAB                                       | 52             | <i>BUCCAL TAB</i>   |
| <i>etodolac 300mg cap</i>                           | 11  | FANAPT TITRATION                                     | 52             | <i>fentanyl 0.1mg/hr patch</i>  |
| <i>etodolac 400mg er tab</i>                        | 11  | PACK   |                | <i>FENTANYL 0.2MG</i>   |
| <i>etodolac 400mg tab</i>                           | 11  | FARXIGA 10MG TAB                                     | 32             | <i>BUCCAL TAB</i>   |
| <i>etodolac 500mg er tab</i>                        | 11  | FARXIGA 5MG TAB                                      | 32             | <i>FENTANYL 0.4MG</i>   |
| <i>etodolac 500mg tab</i>                           | 11  | FARYDAK 10MG CAP                                     | 46             | <i>BUCCAL TAB</i>   |
| <i>etodolac 600mg er tab</i>                        | 11  | FARYDAK 15MG CAP                                     | 46             | <i>FENTANYL 0.6MG</i>   |
| <i>euthyrox 100mcg tab</i>                          | 102 | FARYDAK 20MG CAP                                     | 46             | <i>BUCCAL TAB</i>   |
| <i>euthyrox 112mcg tab</i>                          | 102 | FASENRA 30MG/ML                                      | 19             | <i>FENTANYL 0.8MG</i>   |
| <i>euthyrox 125mcg tab</i>                          | 102 | AUTO-INJECTOR  |                | <i>BUCCAL TAB</i>   |
| <i>euthyrox 137mcg tab</i>                          | 102 | FASENRA 30MG/ML                                      | 19             | <i>fentanyl 1200mcg lozenge</i>   |
| <i>euthyrox 150mcg tab</i>                          | 102 | SYRINGE  |                | <i>fentanyl 1600mcg lozenge</i>   |
| <i>euthyrox 175mcg tab</i>                          | 102 | <i>fayosim 91 day pack</i>                           | 67             | <i>fentanyl 200mcg lozenge</i>  |
| <i>euthyrox 200mcg tab</i>                          | 102 | <i>febuxostat 40mg tab</i>                           | 83             | <i>fentanyl 400mcg lozenge</i>  |
| <i>euthyrox 25mcg tab</i>                           | 102 | <i>febuxostat 80mg tab</i>                           | 83             | <i>fentanyl 600mcg lozenge</i>  |
| <i>euthyrox 50mcg tab</i>                           | 102 | <i>felbamate 120mg/ml susp</i>                       | 25             | <i>fentanyl 800mcg lozenge</i>  |
| <i>euthyrox 75mcg tab</i>                           | 102 | <i>felbamate 400mg tab</i>                           | 25             | <i>FENTORA 100MCG</i>   |
| <i>euthyrox 88mcg tab</i>                           | 102 | <i>felbamate 600mg tab</i>                           | 25             | <i>BUCCAL TAB</i>   |
| <i>everolimus 0.25mg tab</i>                        | 90  | <i>felodipine 10mg er tab</i>                        | 61             | <i>FENTORA 200MCG</i>   |
| <i>everolimus 0.5mg tab</i>                         | 90  | <i>felodipine 2.5mg er tab</i>                       | 61             | <i>BUCCAL TAB</i>   |
| <i>everolimus 0.75mg tab</i>                        | 90  | <i>felodipine 5mg er tab</i>                         | 61             | <i>FENTORA 400MCG</i>   |
| <i>everolimus 2.5mg tab</i>                         | 46  | <i>femynor 28 day pack</i>                           | 67             | <i>BUCCAL TAB</i>   |
| <i>everolimus 5mg tab</i>                           | 46  | <i>fenofibrate 134mg cap</i>                         | 35             | <i>FENTORA 600MCG</i>   |
| <i>everolimus 7.5mg tab</i>                         | 46  | <i>fenofibrate 145mg tab</i>                         | 35             | <i>BUCCAL TAB</i>   |
| <i>EVOTAZ 300-150MG TAB</i>                         | 57  | <i>FENOFIBRATE 150MG CAP</i>                         | 35             | <i>FENTORA 800MCG</i>   |
| <i>EVRYSDI 0.75MG/ML ORAL SOLN</i>                  | 92  | <i>fenofibrate 160mg tab</i>                         | 35             | <i>BUCCAL TAB</i>   |
| <i>exemestane 25mg tab</i>                          | 44  | <i>fenofibrate 200mg cap</i>                         | 35             | <i>FERRIPROX 1000MG</i>   |
| <i>EXTAVIA 0.3MG INJ</i>                            | 99  | <i>fenofibrate 48mg tab</i>                          | 35             | <i>TAB</i>  |
| <i>ezetimibe 10mg tab</i>                           | 36  | <i>FENOFIBRATE 50MG CAP</i>                          | 35             | <i>FERRIPROX 100MG/ML</i>   |
| <b>F</b>  |     | <i>fenofibrate 54mg tab</i>                          | 35             | <i>ORAL SOLN</i>  |
| <i>falmina 28 day pack</i>                          | 67  | <i>fenofibrate 67mg cap</i>                          | 35             | <i>FETZIMA 120MG ER</i>   |
| <i>famciclovir 125mg tab</i>                        | 59  | <i>fenofibric acid 135mg dr cap</i>                  | 35             | <i>CAP</i>  |
| <i>famciclovir 250mg tab</i>                        | 59  | <i>fenofibric acid 45mg dr cap</i>                   | 35             | <i>FETZIMA 20MG ER CAP</i>  |
| <i>famciclovir 500mg tab</i>                        | 59  | <i>fentanyl 0.012mg/hr patch</i>                     | 13             | <i>FETZIMA 40MG ER CAP</i>  |
| <i>famotidine 20mg tab</i>                          | 104 |  |                | <i>FETZIMA 80MG ER CAP</i>  |
| <i>famotidine 40mg tab</i>                          | 104 |  |                | <i>FETZIMA PACK</i>   |
| <i>famotidine 8mg/ml susp</i>                       | 104 |  |                | <i>FIASP 100UNIT/ML</i>   |
|   |     |  |                | <i>CARTRIDGE</i>  |
|   |     |  |                | <i>FIASP 100UNIT/ML INJ</i>   |
|   |     |  |                | 31  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                |     |  |          |  |          |
|---------------------------------------|-----|--|----------|--|----------|
| FIASP 100UNIT/ML PEN INJ              | 31  | <i>flucytosine 500mg cap</i><br><i>fludrocortisone acetate</i>           | 34<br>70 | <i>fluphenazine 5mg tab</i><br><b>FLUPHENAZINE</b>           | 55<br>55 |
| FINACEA 15% FOAM                      | 75  | <i>0.1mg tab</i>   |          | <b>5MG/ML ORAL SOLN</b>                                      |          |
| <i>finasteride 5mg tab</i>            | 83  | <b>FLUNISOLIDE</b>   | 92       | <i>fluphenazine decanoate</i>                                | 55       |
| FINTEPLA 2.2MG/ML ORAL SOLN           | 23  | 0.025MG/ACT NASAL INHALER  |          | <i>25mg/ml inj</i>   |          |
| FIRMAGON 120MG/VIAL INJ               | 44  | <i>fluocinolone acetonide</i><br><i>0.01% cream</i>                      | 73       | <b>FLURAZEPAM 15MG CAP</b>                                   | 85       |
| FIRMAGON 80MG INJ                     | 44  | <i>fluocinolone acetonide</i>  | 73       | <b>FLURAZEPAM 30MG CAP</b>                                   | 85       |
| FIRVANQ 25MG/ML ORAL SOLN             | 41  | <i>0.01% oil</i><br><i>fluocinolone acetonide</i>                        | 96       | <i>flurbiprofen 100mg tab</i>                                | 11       |
| FIRVANQ 50MG/ML ORAL SOLN             | 41  | <i>0.01% otic soln</i><br><i>fluocinolone acetonide</i>                  | 73       | <b>FLURBIPROFEN SODIUM 0.03% OPHTH SOLN</b>                  | 95       |
| <i>flac 0.01% otic soln</i>           | 96  | <i>0.01% topical soln</i>  |          | <b>FLUTAMIDE 125MG CAP</b>                                   | 44       |
| <i>flavoxate 100mg tab</i>            | 105 | <i>fluocinolone acetonide</i>  | 74       | <i>fluticasone propionate 0.005% ointment</i>                | 74       |
| FLEBOGAMMA 5GM/50ML INJ               | 96  | <i>0.025% cream</i><br><i>fluocinolone acetonide</i>                     | 74       | <i>fluticasone propionate 0.05% cream</i>                    | 74       |
| <i>flecainide acetate 100mg tab</i>   | 18  | <i>0.025% ointment</i><br><i>fluocinonide 0.05% cream</i>                | 74       | <i>fluticasone propionate 50mcg/act nasal inhaler</i>        | 92       |
| <i>flecainide acetate 150mg tab</i>   | 18  | <i>fluocinonide 0.05% e cream</i>  | 74       | <i>fluvastatin 20mg cap</i>                                  | 35       |
| <i>flecainide acetate 50mg tab</i>    | 18  | <i>fluocinonide 0.05% gel</i><br><i>fluocinonide 0.05%</i>               | 74       | <i>fluvastatin 40mg cap</i>                                  | 35       |
| FLOVENT 100MCG INHALER                | 19  | <i>ointment</i>  |          | <i>fluvastatin 80mg er tab</i>                               | 35       |
| DISKUS                                |     | <i>fluocinonide 0.05%</i>  | 74       | <i>fluvoxamine maleate 100mg tab</i>                         | 27       |
| FLOVENT 110MCG HFA INHALER            | 19  | <i>topical soln</i>  |          | <i>fluvoxamine maleate 25mg tab</i>                          | 27       |
| FLOVENT 220MCG HFA INHALER            | 19  | <i>fluocinonide 0.1% cream</i><br><i>fluorometholone 0.1% ophth susp</i> | 74<br>94 | <i>fluvoxamine maleate 50mg tab</i>                          | 27       |
| FLOVENT 250MCG DISKUS                 | 20  | <i>FLUOROURACIL 2% TOPICAL SOLN</i>                                      | 72       | <i>fondaparinux sodium 12.5mg/ml (0.4ml) syringe</i>         | 21       |
| FLOVENT 44MCG HFA INHALER             | 20  | <i>fluorouracil 5% cream</i>   | 72       | <i>fondaparinux sodium 12.5mg/ml (0.6ml) syringe</i>         | 21       |
| FLOVENT 50MCG DISKUS                  | 20  | <i>FLUOROURACIL 5% TOPICAL SOLN</i>                                      | 72       | <i>fondaparinux sodium 12.5mg/ml (0.8ml) syringe</i>         | 21       |
| <i>fluconazole 100mg tab</i>          | 34  | <i>fluoxetine 10mg cap</i>   | 27       | <i>fondaparinux sodium 5mg/ml syringe</i>                    | 22       |
| <i>fluconazole 10mg/ml susp</i>       | 34  | <i>fluoxetine 20mg cap</i>   | 27       | <i>FORTEO 600MCG/2.4ML PEN INJ</i>                           | 77       |
| <i>fluconazole 150mg tab</i>          | 34  | <i>fluoxetine 40mg cap</i>   | 27       | <i>fosamprenavir 700mg tab</i>                               | 57       |
| <i>fluconazole 200mg tab</i>          | 34  | <i>fluoxetine 4mg/ml oral soln</i>                                       | 27       | <i>fosinopril sodium 10mg tab</i>                            | 36       |
| <i>fluconazole 2mg/ml (100ml) inj</i> | 34  | <b>FLUPHENAZINE 0.5MG/ML ORAL SOLN</b>                                   | 54       | <i>fosinopril sodium 12.5mg tab</i>                          |          |
| <i>fluconazole 2mg/ml (200ml) inj</i> | 34  | <i>fluphenazine 10mg tab</i>   | 55       | <i>fosinopril sodium 10mg/hydrochlorothiazide 12.5mg tab</i> | 39       |
| <i>fluconazole 40mg/ml susp</i>       | 34  | <i>fluphenazine 1mg tab</i>  | 55       |  |          |
| <i>fluconazole 50mg tab</i>           | 34  | <i>fluphenazine 2.5mg tab</i>  | 55       |  |          |
| <i>flucytosine 250mg cap</i>          | 34  | <b>FLUPHENAZINE 2.5MG/ML INJ</b>   | 55       |  |          |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |    |  |          |  |
|--|----|--|----------|--|
| <i>fosinopril sodium 20mg tab</i>                            | 36 | FUROSEMIDE 8MG/ML ORAL SOLN                        | 76       | GAMMAPLEX 10GM/100ML INJ               |
| <i>fosinopril sodium 20mg/hydrochlorothiazide 12.5mg tab</i> | 39 | FUZEON 90MG INJ<br><i>fyavolv 0.0025-0.5mg tab</i> | 57<br>79 | GAMMAPLEX 10GM/200ML INJ               |
| <i>fosinopril sodium 40mg tab</i>                            | 37 | <i>fyavolv 0.005-1mg tab</i>                       | 79       | GAMMAPLEX 20GM/200ML INJ               |
| <i>FOSRENOL 1000MG ORAL POWDER</i>                           | 82 | FYCOMPA 0.5MG/ML SUSP                              | 22       | GAMMAPLEX 5GM/50ML INJ                 |
| <i>FOSRENOL 750MG ORAL POWDER</i>                            | 82 | FYCOMPA 10MG TAB                                   | 22       | GAMUNEX 1GM/10ML INJ                   |
| <i>FOTIVDA 0.89MG CAP</i>                                    | 46 | FYCOMPA 12MG TAB                                   | 22       | GARDASIL 9 INJ                         |
| <i>FOTIVDA 1.34MG CAP</i>                                    | 47 | FYCOMPA 2MG TAB                                    | 22       | GARDASIL 9 SYRINGE                     |
| <i>FRAGMIN 10000UNIT/ML SYRINGE</i>                          | 22 | FYCOMPA 4MG TAB                                    | 22       | <i>gatifloxacin 0.5% ophth soln</i>    |
| <i>FRAGMIN 12500UNIT/0.5ML SYRINGE</i>                       | 22 | FYCOMPA 6MG TAB                                    | 22       | GATTEX 5MG INJ                         |
| <i>FRAGMIN 15000UNIT/0.6ML SYRINGE</i>                       | 22 | FYCOMPA 8MG TAB                                    | 22       | GAUZE PADS & DRESSINGS - PADS 2 X 2    |
| <i>FRAGMIN 18000UNT/0.72ML SYRINGE</i>                       | 22 | <b>G</b>   |          | GAVILYTE-C POWDER FOR ORAL SOLN        |
| <i>FRAGMIN 2500UNIT/0.2ML SYRINGE</i>                        | 22 | <i>gabapentin 100mg cap</i>                        | 23       | <i>gavilyte-g powder for oral soln</i> |
| <i>FRAGMIN 5000UNIT/0.2ML SYRINGE</i>                        | 22 | <i>gabapentin 300mg cap</i>                        | 23       | <i>gavilyte-n powder for oral soln</i> |
| <i>FRAGMIN 7500UNIT/0.3ML SYRINGE</i>                        | 22 | <i>gabapentin 400mg cap</i>                        | 23       | GAVRETO 100MG CAP                      |
| <i>FULPHILA 6MG/0.6ML SYRINGE</i>                            | 84 | <i>gabapentin 50mg/ml oral soln</i>                | 23       | <i>gemfibrozil 600mg tab</i>           |
| <i>furosemide 10mg/ml inj</i>                                | 76 | <i>gabapentin 600mg tab</i>                        | 23       | <i>generlac 10gm/15ml oral soln</i>    |
| <i>furosemide 10mg/ml oral soln</i>                          | 76 | <i>galantamine 12mg tab</i>                        | 98       | <i>gengraf 100mg cap</i>               |
| <i>furosemide 10mg/ml syringe</i>                            | 76 | <i>galantamine 4mg tab</i>                         | 98       | <i>gengraf 100mg/ml oral soln</i>      |
| <i>furosemide 20mg tab</i>                                   | 76 | <i>galantamine 8mg tab</i>                         | 98       | <i>gengraf 25mg cap</i>                |
| <i>furosemide 40mg tab</i>                                   | 76 | <i>galantamine hydrobromide 16mg er cap</i>        | 98       | GENOTROPIN 0.2MG SYRINGE               |
| <i>furosemide 80mg tab</i>                                   | 76 | <i>galantamine hydrobromide 24mg er cap</i>        | 98       | GENOTROPIN 0.4MG SYRINGE               |
|  |    | GALANTAMINE HYDROBROMIDE 4MG/ML ORAL SOLN          | 98       | GENOTROPIN 0.6MG SYRINGE               |
|  |    | <i>galantamine hydrobromide 8mg er cap</i>         | 98       | GENOTROPIN 0.8MG SYRINGE               |
|  |    | GAMMAGARD 10GM INJ                                 | 96       | GENOTROPIN 1.2MG SYRINGE               |
|  |    | GAMMAGARD 2.5GM/25ML INJ                           | 96       | GENOTROPIN 1.4MG SYRINGE               |
|  |    | GAMMAGARD 5GM INJ                                  | 96       | GENOTROPIN 1.6MG SYRINGE               |
|  |    | GAMMAKED 1GM/10ML INJ                              | 96       |  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Índice

|   |     |   |    |                                      |     |
|---|-----|---|----|--------------------------------------|-----|
| GENOTROPIN 1.8MG SYRINGE                  | 78  | <i>glipizide</i><br>2.5mg/metformin 250mg | 29 | <i>glucose</i><br>50mg/ml/potassium  | 88  |
| GENOTROPIN 12MG CARTRIDGE                 | 78  | <i>tab</i>                                | 29 | <i>chloride</i><br>0.02meq/ml/sodium |     |
| GENOTROPIN 1MG SYRINGE                    | 78  | <i>glipizide</i><br>2.5mg/metformin 500mg | 29 | <i>chloride 9mg/ml inj</i>           |     |
| GENOTROPIN 2MG SYRINGE                    | 78  | <i>tab</i>                                | 32 | <i>glucose</i>                       | 88  |
| GENOTROPIN 5MG CARTRIDGE                  | 78  | <i>glipizide 5mg er tab</i>               | 32 | <i>50mg/ml/potassium</i>             |     |
| GENTAK 0.3% OPHTH OINTMENT                | 93  | <i>glipizide 5mg tab</i>                  | 32 | <i>chloride</i>                      |     |
| <i>gentamicin 0.1% cream</i>              | 71  | <i>glipizide 5mg/metformin</i>            | 29 | <i>0.03meq/ml/sodium</i>             |     |
| <i>gentamicin 0.1% ointment</i>           | 71  | <i>500mg tab</i>                          | 29 | <i>chloride 4.5mg/ml inj</i>         |     |
| <i>gentamicin 0.3% ophth soln</i>         | 94  | <i>GLUCAGEN 1MG INJ</i>                   | 30 | <i>glucose</i>                       | 88  |
| GENTAMICIN 0.8MG/ML INJ                   | 10  | <i>GLUCAGON (RDNA)</i>                    | 30 | <i>50mg/ml/potassium</i>             |     |
| <i>gentamicin 1.2mg/ml inj</i>            | 10  | <i>1MG INJ</i>                            | 30 | <i>chloride</i>                      |     |
| GENTAMICIN 1.6MG/ML INJ                   | 10  | <i>glucose 100mg/ml inj</i>               | 92 | <i>0.04meq/ml/sodium</i>             |     |
| GENTAMICIN 1MG/ML INJ                     | 10  | <i>GLUCOSE</i>                            | 88 | <i>chloride 4.5mg/ml inj</i>         |     |
| <i>gentamicin 40mg/ml inj</i>             | 10  | <i>CHLORIDE 2MG/ML INJ</i>                | 88 | <i>GLUCOSE</i>                       | 88  |
| GENVOYA 150-150-200-10MG TAB              | 57  | <i>GLUCOSE</i>                            | 88 | <i>50MG/ML/POTASSIUM</i>             |     |
| GILENYA 0.5MG CAP                         | 99  | <i>CHLORIDE 4.5MG/ML INJ</i>              | 88 | <i>CHLORIDE</i>                      |     |
| GILOTrif 20MG TAB                         | 44  | <i>INJ</i>                                | 88 | <i>0.04MEQ/ML/SODIUM</i>             |     |
| GILOTrif 30MG TAB                         | 44  | <i>glucose 50mg/ml inj</i>                | 92 | <i>CHLORIDE 9MG/ML INJ</i>           |     |
| GILOTrif 40MG TAB                         | 44  | <i>glucose</i>                            | 88 | <i>glucose 50mg/ml/sodium</i>        | 88  |
| GLASSIA 1000MG/50ML INJ                   | 100 | <i>50mg/ml/potassium</i>                  | 88 | <i>chloride 2mg/ml inj</i>           |     |
| <i>glatiramer acetate 20mg/ml syringe</i> | 99  | <i>chloride</i>                           | 88 | <i>glucose 50mg/ml/sodium</i>        | 88  |
| <i>glatiramer acetate 40mg/ml syringe</i> | 99  | <i>0.01meq/ml/sodium</i>                  | 88 | <i>chloride 4.5mg/ml inj</i>         |     |
| <i>glatopa 20mg/ml syringe</i>            | 99  | <i>chloride 4.5mg/ml inj</i>              | 92 | <i>glucose 50mg/ml/sodium</i>        |     |
| <i>glatopa 40mg/ml syringe</i>            | 100 | <i>glucose</i>                            | 88 | <i>chloride 9mg/ml inj</i>           |     |
| glimepiride 1mg tab                       | 32  | <i>50mg/ml/potassium</i>                  | 88 | <i>glyburide 1.25mg tab</i>          | 32  |
| glimepiride 2mg tab                       | 32  | <i>chloride</i>                           | 88 | <i>glyburide</i>                     | 29  |
| glimepiride 4mg tab                       | 32  | <i>0.02meq/ml/sodium</i>                  | 88 | <i>1.25mg/metformin 250mg</i>        |     |
| glipizide 10mg er tab                     | 32  | <i>chloride 2.25mg/ml inj</i>             | 88 | <i>tab</i>                           |     |
| glipizide 10mg tab                        | 32  | <i>glucose</i>                            | 88 | <i>glyburide 1.5mg tab</i>           | 32  |
| glipizide 2.5mg er tab                    | 32  | <i>50mg/ml/potassium</i>                  | 88 | <i>glyburide 2.5mg tab</i>           | 32  |
|   |     | <i>chloride</i>                           | 88 | <i>glyburide</i>                     | 29  |
|   |     | <i>0.02meq/ml/sodium</i>                  | 88 | <i>2.5mg/metformin 500mg</i>         |     |
|   |     | <i>chloride 4.5mg/ml inj</i>              | 88 | <i>tab</i>                           |     |
|   |     |   | 88 | <i>glyburide 3mg tab</i>             | 32  |
|   |     |   | 88 | <i>glyburide 5mg tab</i>             | 32  |
|   |     |   | 88 | <i>glyburide 5mg/metformin</i>       | 29  |
|   |     |   | 88 | <i>500mg tab</i>                     |     |
|   |     |   | 88 | <i>glyburide 6mg tab</i>             | 32  |
|   |     |   | 88 | <i>glycopyrrrolate 1mg tab</i>       | 104 |
|   |     |   | 88 | <i>glycopyrrrolate 2mg tab</i>       | 104 |
|   |     |   | 88 | <i>GLYXAMBI 10-5MG TAB</i>           | 29  |
|   |     |   | 88 | <i>GLYXAMBI 25-5MG TAB</i>           | 29  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                 |    |                               |     |  |
|--|----|-------------------------------|-----|--|
| <i>granisetron 1mg tab</i>             | 33 | <i>haloperidol decanoate</i>  | 53  | HUMIRA PEN -   |
| <i>griseofulvin 125mg tab</i>          | 34 | <i>50mg/ml inj</i>            |     | PEDIATRIC UC STARTEI   |
| <i>griseofulvin 250mg tab</i>          | 34 | HAVRIX 1440ELU/ML             | 106 | PACK 80MG/0.8ML INJ  |
| <i>griseofulvin 25mg/ml susp</i>       | 34 | SYRINGE                       |     | HUMIRA PEN -   |
| <i>griseofulvin 500mg tab</i>          | 34 | HAVRIX 720ELU/0.5ML           | 106 | PSORIASIS STARTER  |
| <i>guanfacine 1mg er tab</i>           | 8  | SYRINGE                       |     | PACK 40MG/0.8ML  |
| <i>guanfacine 1mg tab</i>              | 38 | <i>heparin sodium porcine</i> | 22  | HUMIRA PEN   |
| <i>guanfacine 2mg er tab</i>           | 8  | <i>10000unit/ml inj</i>       |     | 80MG/0.8ML AND   |
| <i>guanfacine 2mg tab</i>              | 38 | <i>heparin sodium porcine</i> | 22  | 40MG/0.4ML -   |
| <i>guanfacine 3mg er tab</i>           | 8  | <i>1000unit/ml inj</i>        |     | PSORIASIS/UVEITIS  |
| <i>guanfacine 4mg er tab</i>           | 8  | <i>heparin sodium porcine</i> | 22  | STARTER PACK   |
| <i>GVOKE 0.5MG/0.1ML AUTO-INJECTOR</i> | 30 | <i>20000unit/ml inj</i>       |     | HUMIRA PREFILLED   |
| <i>GVOKE 0.5MG/0.1ML SYRINGE</i>       | 30 | <i>heparin sodium porcine</i> | 22  | SYRINGE 80MG/0.8ML   |
| <i>GVOKE 1MG/0.2ML AUTO-INJECTOR</i>   | 30 | <i>5000unit/ml inj</i>        |     | STARTER PACK -   |
| <i>GVOKE 1MG/0.2ML SYRINGE</i>         | 30 | HEPATAMINE 8 INJ              | 92  | PEDIATRIC CROHN'S  |
|  |    | HETLIOZ 20MG CAP              | 86  | DISEASE  |
|  |    | HETLIOZ 4MG/ML SUSP           | 86  | HUMULIN R  |
|  |    | HIBERIX 10MCG INJ             | 105 | 500UNIT/ML INJ   |
|  |    | HUMALOG 100UNIT/ML            | 31  | HUMULIN R  |
|  |    | INJ                           |     | 500UNIT/ML PEN INJ   |
|  |    | HUMIRA 10MG/0.1ML             | 10  | <i>hydralazine 100mg tab</i>                                   |
|  |    | SYRINGE                       |     | <i>hydralazine 10mg tab</i>                                    |
|  |    | HUMIRA 20MG/0.2ML             | 10  | <i>hydralazine 25mg tab</i>                                    |
|  |    | SYRINGE                       |     | <i>hydralazine 50mg tab</i>                                    |
|  |    | HUMIRA 40MG/0.4ML             | 10  | <i>hydrochlorothiazide 12.5mg cap</i>                          |
|  |    | AUTO-INJECTOR                 |     | <i>hydrochlorothiazide 12.5mg tab</i>                          |
|  |    | HUMIRA 40MG/0.4ML             | 10  | <i>hydrochlorothiazide 12.5mg/irbesartan 150mg tab</i>         |
|  |    | SYRINGE                       |     | <i>hydrochlorothiazide 12.5mg/irbesartan 300mg tab</i>         |
|  |    | HUMIRA 40MG/0.8ML             | 10  | <i>hydrochlorothiazide 12.5mg/lisinopril 10mg tab</i>          |
|  |    | AUTO-INJECTOR                 |     | <i>hydrochlorothiazide 12.5mg/lisinopril 20mg tab</i>          |
|  |    | HUMIRA 40MG/0.8ML             | 10  | <i>hydrochlorothiazide 12.5mg/losartan potassium 100mg tab</i> |
|  |    | SYRINGE                       |     | <i>hydrochlorothiazide 12.5mg/losartan potassium 50mg tab</i>  |
|  |    | HUMIRA PEDIATRIC              |     |  |
|  |    | CROHN'S STARTER               |     |  |
|  |    | PACK SYRINGE (2)              |     |  |
|  |    | 40MG/0.4ML,                   |     |  |
|  |    | 80MG/0.8ML                    |     |  |
|  |    | HUMIRA PEN -                  | 10  |  |
|  |    | CROHN'S STARTER               |     |  |
|  |    | PACK 40MG/0.8ML INJ           |     |  |
|  |    | HUMIRA PEN -                  | 10  |  |
|  |    | CROHN'S STARTER               |     |  |
|  |    | PACK 80MG/0.8ML INJ           |     |  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |    |  |    |  |    |
|--|----|--|----|--|----|
| hydrochlorothiazide<br>12.5mg/olmesartan<br>medoxomil 20mg tab | 39 | hydrochlorothiazide<br>25mg/triamterene 37.5mg<br>tab              | 76 | hydrocortisone 2.5%<br>ointment                          | 74 |
| hydrochlorothiazide<br>12.5mg/olmesartan<br>medoxomil 40mg tab | 39 | hydrochlorothiazide<br>25mg/valsartan 160mg<br>tab                 | 40 | hydrocortisone 5mg tab                                   | 70 |
| hydrochlorothiazide<br>12.5mg/quinapril 10mg<br>tab            | 39 | hydrochlorothiazide<br>25mg/valsartan 320mg<br>tab                 | 40 | hydrocortisone<br>acetate/pramoxine 1-1%<br>rectal cream | 16 |
| hydrochlorothiazide<br>12.5mg/quinapril 20mg<br>tab            | 39 | hydrochlorothiazide<br>50mg tab                                    | 76 | hydrocortisone/acetic<br>acid 1-2% otic soln             | 96 |
| hydrochlorothiazide<br>12.5mg/valsartan 160mg<br>tab           | 40 | HYDROCHLOROTHIAZIDE<br>DE<br>50MG/METOPROLOL<br>TARTRATE 100MG TAB | 40 | hydromorphone 1mg/ml<br>oral soln                        | 13 |
| hydrochlorothiazide<br>12.5mg/valsartan 320mg<br>tab           | 40 | hydrochlorothiazide<br>50mg/triamterene 75mg<br>tab                | 76 | hydromorphone 2mg tab                                    | 13 |
| hydrochlorothiazide<br>12.5mg/valsartan 80mg<br>tab            | 40 | hydrocodone bitartrate<br>10mg er cap                              | 13 | hydromorphone 4mg tab                                    | 13 |
| hydrochlorothiazide<br>25mg tab                                | 76 | hydrocodone bitartrate<br>10mg/ibuprofen 200mg<br>tab              | 15 | hydromorphone 8mg tab                                    | 13 |
| hydrochlorothiazide<br>25mg/lisinopril 20mg tab                | 40 | hydrocodone bitartrate<br>15mg er cap                              | 13 | hydroxychloroquine                                       | 42 |
| hydrochlorothiazide<br>25mg/losartan potassium<br>100mg tab    | 40 | hydrocodone bitartrate<br>20mg er cap                              | 13 | sulfate 200mg tab  |    |
| hydrochlorothiazide<br>25mg/metoprolol tartrate<br>100mg tab   | 40 | hydrocodone bitartrate<br>30mg er cap                              | 13 | hydroxyurea 500mg cap                                    | 49 |
| hydrochlorothiazide<br>25mg/metoprolol tartrate<br>50mg tab    | 40 | hydrocodone bitartrate<br>40mg er cap                              | 13 | hydroxyzine 10mg tab                                     | 17 |
| hydrochlorothiazide<br>25mg/olmesartan<br>medoxomil 40mg tab   | 40 | hydrocodone bitartrate<br>50mg er cap                              | 13 | hydroxyzine 25mg tab                                     | 17 |
| hydrochlorothiazide<br>25mg/quinapril 20mg tab                 | 76 | hydrocodone bitartrate<br>5mg/ibuprofen 200mg tab                  | 15 | hydroxyzine 2mg/ml oral<br>soln                          | 17 |
| hydrochlorothiazide<br>25mg/spironolactone<br>25mg tab         | 76 | hydrocodone bitartrate<br>7.5mg/ibuprofen 200mg<br>tab             | 15 | hydroxyzine 50mg tab                                     | 17 |
| hydrochlorothiazide<br>25mg/triamterene 37.5mg<br>cap          | 76 | hydrocortisone 1% cream  | 74 | HYDROXYZINE  | 17 |
|  |    | hydrocortisone   | 16 | PAMOATE 100MG CAP  |    |
|  |    | 1.67mg/ml enema  |    | hydroxyzine pamoate                                      | 17 |
|  |    | hydrocortisone 10mg tab  | 70 | 25mg cap   |    |
|  |    | hydrocortisone 2.5%<br>cream                                       | 16 | hydroxyzine pamoate                                      | 17 |
|  |    | hydrocortisone 2.5%<br>lotion                                      | 74 | 50mg cap   |    |
| <b>I</b>   |    |  |    |  |    |
|  |    | ibandronic acid 150mg<br>tab                                       |    | ibandronic acid 150mg<br>tab                             | 77 |
|  |    | IBRANCE 100MG CAP  |    | IBRANCE 100MG CAP  | 47 |
|  |    | IBRANCE 100MG TAB  |    | IBRANCE 100MG TAB  | 47 |
|  |    | IBRANCE 125MG CAP  |    | IBRANCE 125MG CAP  | 47 |
|  |    | IBRANCE 125MG TAB  |    | IBRANCE 125MG TAB  | 47 |
|  |    | IBRANCE 75MG CAP   |    | IBRANCE 75MG CAP   | 47 |
|  |    | IBRANCE 75MG TAB   |    | IBRANCE 75MG TAB   | 47 |
|  |    | ibu 600mg tab  |    | ibu 600mg tab  | 47 |
|  |    | ibu 800mg tab  |    | ibu 800mg tab  | 47 |
|  |    | ibuprofen 20mg/ml susp   |    | ibuprofen 20mg/ml susp                                   | 11 |
|  |    | ibuprofen 400mg tab  |    | ibuprofen 400mg tab                                      | 11 |
|  |    | ibuprofen 600mg tab  |    | ibuprofen 600mg tab                                      | 11 |
|  |    | ibuprofen 800mg tab  |    | ibuprofen 800mg tab                                      | 11 |
|  |    | icatibant 10mg/ml syringe  |    | icatibant 10mg/ml syringe                                | 83 |
|  |    | iclevia 91 day pack  |    | iclevia 91 day pack                                      | 67 |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                             |     |                              |    |  |
|------------------------------------|-----|------------------------------|----|--|
| ICLUSIG 10MG TAB                   | 47  | INNOPRAN 120MG ER            | 60 | INVIRASE 500MG TAB                         |
| ICLUSIG 15MG TAB                   | 47  | CAP                          |    | IOPIDINE 1% OPHTH                          |
| ICLUSIG 30MG TAB                   | 47  | INNOPRAN 80MG ER             | 60 | SOLN                                       |
| ICLUSIG 45MG TAB                   | 47  | CAP                          |    | IPOL INJ                                   |
| IDHIFA 100MG TAB                   | 47  | INQOVI 5 TABLET PACK         | 45 | <i>ipratropium bromide</i>                 |
| IDHIFA 50MG TAB                    | 47  | INREBIC 100MG CAP            | 47 | <i>0.03% (0.021mg/act)</i>                 |
| ILEVRO 0.3% OPHTH                  | 95  | INSULIN PEN NEEDLE           | 87 | <i>nasal inhaler</i>                       |
| SUSP                               |     | INSULIN SYRINGE              | 87 | <i>ipratropium bromide</i>                 |
| <i>imatinib 100mg tab</i>          | 47  | (DISP) U-100 0.3ML           |    | <i>0.06% (0.042mg/act)</i>                 |
| <i>imatinib 400mg tab</i>          | 47  | INSULIN SYRINGE              | 87 | <i>nasal inhaler</i>                       |
| IMBRUVICA 140MG                    | 47  | (DISP) U-100 1/2ML           |    | <i>ipratropium bromide</i>                 |
| CAP                                |     | INSULIN SYRINGE              | 87 | <i>0.2mg/ml inh soln</i>                   |
| IMBRUVICA 140MG TAE                | 47  | (DISP) U-100 1ML             |    | <i>ipratropium/albuterol</i>               |
| IMBRUVICA 280MG TAE                | 47  | INTELENCE 100MG TAB          | 57 | <i>0.5-2.5mg/3ml inh soln</i>              |
| IMBRUVICA 420MG TAE                | 47  | INTELENCE 200MG TAB          | 57 | <i>irbesartan 150mg tab</i>                |
| IMBRUVICA 560MG TAE                | 47  | INTELENCE 25MG TAB           | 57 | <i>irbesartan 300mg tab</i>                |
| IMBRUVICA 70MG CAP                 | 47  | INTRALIPID                   | 92 | <i>irbesartan 75mg tab</i>                 |
| <i>imipramine 10mg tab</i>         | 29  | 20GM/100ML INJ               |    | IRESSA 250MG TAB                           |
| <i>imipramine 25mg tab</i>         | 29  | INTRON A 10MU INJ            | 49 | ISENTRESS 100MG                            |
| <i>imipramine 50mg tab</i>         | 29  | INTRON A 10MU/ML INJ         | 49 | CHEW TAB                                   |
| <i>imiquimod 5% cream</i>          | 74  | INTRON A 18MU INJ            | 49 | ISENTRESS 100MG                            |
| IMOVAZ 2.5UNIT/ML                  | 106 | INTRON A 50MU INJ            | 49 | GRANULES FOR ORAL                          |
| INJ                                |     | INTRON A                     | 49 | SUSP                                       |
| IMPAVIDO 50MG CAP                  | 40  | 6000000UNIT/ML INJ           |    | ISENTRESS 25MG                             |
| <i>incassia 28 day 0.35mg pack</i> | 69  | <i>introvale 91 day pack</i> | 67 | CHEW TAB                                   |
| INCRELEX 40MG/4ML                  | 78  | INVEGA 117MG/0.75ML          | 52 | ISENTRESS 400MG TAB                        |
| INJ                                |     | SYRINGE                      |    | ISENTRESS 600MG TAB                        |
| INCRUSE 62.5MCG/INH                | 19  | INVEGA 156MG/ML              | 52 | <i>isibloom 28 day pack</i>                |
| INHALER                            |     | SYRINGE                      |    | ISOLYTE P INJ                              |
| <i>indapamide 1.25mg tab</i>       | 76  | INVEGA 234MG/1.5ML           | 52 | ISOLYTE S INJ                              |
| <i>indapamide 2.5mg tab</i>        | 76  | SYRINGE                      |    | ISONIAZID 100MG TAB                        |
| INDERAL 120MG ER                   | 60  | INVEGA                       | 52 | ISONIAZID 10MG/ML                          |
| CAP                                |     | 273MG/0.875ML                |    | ORAL SOLN                                  |
| INDOCIN 50MG RECTAL                | 11  | SYRINGE                      |    | <i>isoniazid 300mg tab</i>                 |
| SUPP                               |     | INVEGA 39MG/0.25ML           | 52 | <i>isosorbide dinitrate 10mg tab</i>       |
| <i>indomethacin 25mg cap</i>       | 11  | SYRINGE                      |    | <i>isosorbide dinitrate 20mg tab</i>       |
| <i>indomethacin 50mg cap</i>       | 12  | INVEGA                       | 52 | <i>isosorbide dinitrate 30mg tab</i>       |
| <i>indomethacin 75mg er cap</i>    | 12  | 410MG/1.315ML                |    | <i>isosorbide dinitrate 5mg tab</i>        |
| INFANRIX SYRINGE                   | 103 | SYRINGE                      |    | <i>isosorbide mononitrate 10mg tab</i>     |
| INGREZZA 40MG CAP                  | 99  | INVEGA 78MG/0.5ML            | 52 | <i>isosorbide mononitrate 120mg er tab</i> |
| INGREZZA 80MG CAP                  | 99  | SYRINGE                      |    |  |
| INLYTA 1MG TAB                     | 43  | INVEGA                       | 52 |  |
| INLYTA 5MG TAB                     | 43  | 819MG/2.625ML                |    |  |
|                                    |     | SYRINGE                      |    |  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                    |     |                                     |    |   |     |
|---|-----|-------------------------------------|----|---|-----|
| <i>isosorbide mononitrate 20mg tab</i>    | 16  | JANUVIA 25MG TAB                    | 30 | KALETRA 200-50MG TAB                          | 57  |
| <i>isosorbide mononitrate 30mg er tab</i> | 16  | JARDIANCE 10MG TAB                  | 32 | KALYDECO 150MG TAB                            | 100 |
| <i>isosorbide mononitrate 60mg er tab</i> | 17  | JARDIANCE 25MG TAB                  | 32 | KALYDECO 25MG                                 | 100 |
| <i>isotretinoin 10mg cap</i>              | 71  | <i>jasmiel 28 day pack</i>          | 67 | GRANULES                                      |     |
| <i>isotretinoin 20mg cap</i>              | 71  | JENTADUETO                          | 29 | KALYDECO 50MG                                 | 100 |
| <i>isotretinoin 30mg cap</i>              | 71  | 2.5-1000MG ER TAB                   |    | GRANULES                                      |     |
| <i>isotretinoin 40mg cap</i>              | 71  | JENTADUETO                          | 29 | GRANULES                                      |     |
| <i>isradipine 2.5mg cap</i>               | 61  | 2.5-500MG TAB                       |    | <i>kariva 28 day pack</i>                     | 67  |
| <i>isradipine 5mg cap</i>                 | 61  | JENTADUETO                          | 29 | KCL/D5W/LR INJ 0.15%                          | 88  |
| ISTURISA 10MG TAB                         | 77  | 2.5-850MG TAB                       |    | <i>kelnor 1/35 28 day pack</i>                | 67  |
| ISTURISA 1MG TAB                          | 77  | JENTADUETO                          | 29 | <i>kelnor 1/50 28 day pack</i>                | 67  |
| ISTURISA 5MG TAB                          | 77  | 5-1000MG ER TAB                     |    | KESIMPTA 20MG/0.4ML                           | 100 |
| <i>itraconazole 100mg cap</i>             | 34  | <i>jinteli 0.005-1mg tab</i>        | 79 | PEN INJ                                       |     |
| <i>ivermectin 3mg tab</i>                 | 16  | <i>juleber 28 day pack</i>          | 67 | <i>ketoconazole 2% cream</i>                  | 72  |
| IXIARO 0.012MG/ML SYRINGE                 | 106 | JULUCA 50-25MG TAB                  | 57 | <i>ketoconazole 2%</i>                        | 72  |
| <b>J</b>                                  |     |                                     |    |   |     |
| JAKAFI 10MG TAB                           | 47  | <i>junel 1.5/30 21 day pack</i>     | 67 | <i>shampoo</i>                                |     |
| JAKAFI 15MG TAB                           | 47  | <i>junel 1/20 21 day pack</i>       | 67 | <i>ketoconazole 200mg tab</i>                 | 34  |
| JAKAFI 20MG TAB                           | 47  | <i>junel fe 1.5/30 28 day pack</i>  | 67 | <i>ketorolac tromethamine 0.4% ophth soln</i> | 95  |
| JAKAFI 25MG TAB                           | 47  | <i>junel fe 1/20 28 day pack</i>    | 67 | <i>ketorolac tromethamine 0.5% ophth soln</i> | 95  |
| JAKAFI 5MG TAB                            | 47  | <i>junel fe 24 1/20 28 day pack</i> | 67 | <i>ketorolac tromethamine 10mg tab</i>        | 12  |
| <i>jantoven 10mg tab</i>                  | 21  | JUXTAPID 10MG CAP                   | 36 | KEVZARA                                       | 11  |
| <i>jantoven 1mg tab</i>                   | 21  | JUXTAPID 20MG CAP                   | 36 | 150MG/1.14ML                                  |     |
| <i>jantoven 2.5mg tab</i>                 | 21  | JUXTAPID 30MG CAP                   | 36 | AUTO-INJECTOR                                 |     |
| <i>jantoven 2mg tab</i>                   | 21  | JUXTAPID 5MG CAP                    | 36 | KEVZARA                                       | 11  |
| <i>jantoven 3mg tab</i>                   | 21  | JYNARQUE 15MG TAB                   | 79 | 150MG/1.14ML                                  |     |
| <i>jantoven 4mg tab</i>                   | 21  | JYNARQUE 30MG TAB                   | 79 | SYRINGE                                       |     |
| <i>jantoven 5mg tab</i>                   | 21  | JYNARQUE TAB 15/15                  | 79 | KEVZARA                                       | 11  |
| <i>jantoven 6mg tab</i>                   | 21  | CARTON 15MG PACK                    |    | 200MG/1.14ML                                  |     |
| <i>jantoven 7.5mg tab</i>                 | 21  | JYNARQUE TAB 30/15                  | 79 | AUTO-INJECTOR                                 |     |
| JANUMET 1000-100MG ER TAB                 | 29  | CARTON PACK                         |    | KEVZARA                                       | 11  |
| JANUMET 1000-50MG ER TAB                  | 29  | JYNARQUE TAB 45/15                  | 79 | 200MG/1.14ML                                  |     |
| JANUMET 1000-50MG TAB                     | 29  | CARTON PACK                         |    | SYRINGE                                       |     |
| JANUMET 500-50MG ER TAB                   | 29  | JYNARQUE TAB 60/30                  | 79 | KINRIX INJ                                    | 104 |
| JANUMET 500-50MG TAB                      | 29  | CARTON PACK                         |    | KINRIX SYRINGE                                | 104 |
| JANUVIA 100MG TAB                         | 30  | JYNARQUE TAB 90/30                  | 79 | KISQALI 200MG DAILY                           | 47  |
| <b>K</b>                                  |     |                                     |    |   |     |
| <i>kaitlib fe 28 day pack</i>             | 67  | CARTON PACK                         |    | DOSE PACK                                     |     |
|   |     | KALETRA 100-25MG TAB                | 57 | KISQALI 400MG DAILY                           | 47  |
|   |     |                                     |    | DOSE PACK                                     |     |
|   |     |                                     |    | KISQALI 600MG DAILY                           | 47  |
|   |     |                                     |    | DOSE PACK                                     |     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                     |    |                                  |     |   |
|--|----|----------------------------------|-----|---|
| KISQALI FEMARA CO-PACK 200 PACK            | 45 | <i>lamivudine 300mg tab</i>      | 57  | <i>leflunomide 20mg tab</i>               |
|  |    | <i>lamotrigine 100mg er tab</i>  | 23  | LENVIMA 10 10MG                           |
| KISQALI FEMARA CO-PACK 400 PACK            | 45 | <i>lamotrigine 100mg odt</i>     | 23  | PACK                                      |
|  |    | <i>lamotrigine 100mg tab</i>     | 23  | LENVIMA 12 4MG PACK                       |
| KISQALI FEMARA CO-PACK 600 PACK            | 46 | <i>lamotrigine 150mg tab</i>     | 23  | LENVIMA 14 PACK                           |
|  |    | <i>lamotrigine 200mg er tab</i>  | 23  | LENVIMA 18 PACK                           |
| <i>klor-con 10meq er tab</i>               | 89 | <i>lamotrigine 200mg odt</i>     | 24  | LENVIMA 20 10MG                           |
| <i>klor-con 10meq micro er tab</i>         | 89 | <i>lamotrigine 200mg tab</i>     | 24  | PACK                                      |
|  |    | <i>lamotrigine 250mg er tab</i>  | 24  | LENVIMA 24 PACK                           |
| KLOR-CON 15MEQ MICRO ER TAB                | 89 | <i>lamotrigine 25mg chew tab</i> | 24  | LENVIMA 4 4MG PACK                        |
| <i>klor-con 20meq micro er tab</i>         | 89 | <i>lamotrigine 25mg er tab</i>   | 24  | LENVIMA 8 4MG PACK                        |
|  |    | <i>lamotrigine 25mg odt</i>      | 24  | <i>lessina 28 day pack</i>                |
| <i>klor-con 20meq powder for oral soln</i> | 89 | <i>lamotrigine 25mg tab</i>      | 24  | <i>letrozole 2.5mg tab</i>                |
|  |    | <i>lamotrigine 300mg er tab</i>  | 24  | <i>leucovorin 10mg tab</i>                |
| <i>klor-con 8meq er tab</i>                | 89 | <i>lamotrigine 50mg er tab</i>   | 24  | <i>leucovorin 15mg tab</i>                |
| KORLYM 300MG TAB                           | 30 | <i>lamotrigine 50mg odt</i>      | 24  | <i>leucovorin 5mg tab</i>                 |
| KOSELUGO 10MG CAP                          | 47 | <i>lamotrigine 5mg chew tab</i>  | 24  | LEUKERAN 2MG TAB                          |
| KOSELUGO 25MG CAP                          | 47 | <i>lansoprazole 15mg dr cap</i>  | 104 | <i>leuprolide acetate 5mg/ml inj</i>      |
| KRINTAFEL 150MG TAB                        | 42 | <i>lansoprazole 30mg dr cap</i>  | 104 | <i>levalbuterol 0.21mg/ml inh soln</i>    |
| K-TAB 8MEQ ER TAB                          | 89 | <i>lanthanum carbonate</i>       | 82  | LEVALBUTEROL 45MCG INHALER                |
| <i>kurvelo pack</i>                        | 67 | <i>1000mg chew tab</i>           | 82  | <i>levalbuterol neb soln 0.31mg/3ml</i>   |
| KYNMOBI 10MG SUBLINGUAL FILM               | 50 | <i>lanthanum carbonate</i>       | 82  | <i>levalbuterol neb soln 1.25mg/0.5ml</i> |
| KYNMOBI 15MG SUBLINGUAL FILM               | 50 | <i>lanthanum carbonate</i>       | 82  | <i>levalbuterol neb soln 1.25mg/3ml</i>   |
| KYNMOBI 20MG SUBLINGUAL FILM               | 50 | LANTUS 100UNIT/ML                | 31  | LEVEMIR 100UNIT/ML                        |
| KYNMOBI 25MG SUBLINGUAL FILM               | 50 | INJ                              | 31  | INJ                                       |
| KYNMOBI 30MG SUBLINGUAL FILM               | 50 | LANTUS 100UNIT/ML                | 31  | LEVEMIR 100UNIT/ML                        |
| <b>L</b>                                   |    | PEN INJ                          | 31  | PEN INJ                                   |
| <i>labetalol 100mg tab</i>                 | 59 | <i>lapatinib 250mg tab</i>       | 47  | <i>levetiracetam 1000mg tab</i>           |
| <i>labetalol 200mg tab</i>                 | 59 | <i>larin 1.5/30 pack</i>         | 67  | <i>levetiracetam 100mg/ml oral soln</i>   |
| <i>labetalol 300mg tab</i>                 | 59 | <i>larin 1/20 pack</i>           | 67  | <i>levetiracetam 250mg tab</i>            |
| <i>lactulose 667mg/ml oral soln</i>        | 86 | <i>larin fe 1.5/30 pack</i>      | 67  | <i>levetiracetam 500mg er tab</i>         |
| <i>lamivudine 100mg tab</i>                | 58 | <i>larin fe 1/20 pack</i>        | 67  | <i>levetiracetam 500mg tab</i>            |
| <i>lamivudine 10mg/ml oral soln</i>        | 57 | <i>larissia 28 day pack</i>      | 67  | <i>levetiracetam 750mg er tab</i>         |
| <i>lamivudine 150mg tab</i>                | 57 | <i>latanoprost 0.005%</i>        | 95  | <i>levetiracetam 750mg tab</i>            |
| <i>lamivudine</i>                          | 57 | <i>ophth soln</i>                | 67  | LEVOBUNOLOL 0.5%                          |
| <i>150mg/zidovudine 300mg tab</i>          |    | LATUDA 120MG TAB                 | 52  | OPHTH SOLN                                |
|  |    | LATUDA 20MG TAB                  | 52  |   |
|  |    | LATUDA 40MG TAB                  | 52  |   |
|  |    | LATUDA 60MG TAB                  | 52  |   |
|  |    | LATUDA 80MG TAB                  | 52  |   |
|  |    | <i>layolis fe 28 pack</i>        | 67  |   |
|  |    | <i>leena 28 day pack</i>         | 67  |   |
|  |    | <i>leflunomide 10mg tab</i>      | 12  |   |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |     |   |     |  |    |
|--|-----|---|-----|--|----|
| <i>levocarnitine 100mg/ml oral soln</i>                                      | 78  | <i>levothyroxine sodium 0.112mg tab</i> | 102 | <i>lisinopril 2.5mg tab</i>              | 37 |
| <i>levocarnitine 330mg tab</i>   | 78  | <i>levothyroxine sodium 0.125mg tab</i> | 102 | <i>lisinopril 20mg tab</i>               | 37 |
| <i>levocetirizine 0.5mg/ml oral soln</i>                                     | 34  | <i>levothyroxine sodium 0.137mg tab</i> | 102 | <i>lisinopril 30mg tab</i>               | 37 |
| <i>levocetirizine 5mg tab</i>  | 34  | <i>levothyroxine sodium 0.15mg tab</i>  | 102 | <i>lisinopril 40mg tab</i>               | 37 |
| <i>levofloxacin 0.5% ophth soln</i>  | 94  | <i>levothyroxine sodium 0.175mg tab</i> | 102 | <i>lisinopril 5mg tab</i>                | 37 |
| <i>levofloxacin 250mg tab</i>  | 80  | <i>levothyroxine sodium 0.2mg tab</i>   | 102 | <i>lithium carbonate 150mg cap</i>       | 51 |
| <i>levofloxacin 25mg/ml inj</i>  | 81  | <i>levothyroxine sodium 0.3mg tab</i>   | 102 | <i>lithium carbonate 300mg cap</i>       | 51 |
| <i>levofloxacin 25mg/ml oral soln</i>  | 81  | <i>levothyroxine sodium 0.4mg tab</i>   | 102 | <i>lithium carbonate 300mg er tab</i>    | 51 |
| <i>levofloxacin 500mg tab</i>  | 81  | <i>levothyroxine sodium 0.5mg tab</i>   | 102 | <i>lithium carbonate 300mg tab</i>       | 51 |
| <i>levofloxacin 5mg/ml (100ml) inj</i>                                       | 81  | <i>levothyroxine sodium 0.6mg tab</i>   | 102 | <i>lithium carbonate 450mg er tab</i>    | 51 |
| <i>levofloxacin 5mg/ml (150ml) inj</i>                                       | 81  | <i>levoxyl 100mcg tab</i>               | 102 | <i>LITHIUM CARBONATE 600MG CAP</i>       | 51 |
| <i>levofloxacin 750mg tab</i>  | 81  | <i>levoxyl 112mcg tab</i>               | 102 | <i>LITHIUM CITRATE</i>                   | 51 |
| <i>levonest 28 day pack</i>  | 67  | <i>levoxyl 125mcg tab</i>               | 102 | <i>60MG/ML ORAL SOLN</i>                 |    |
| <i>levonorgestrel-ethinyl estradiol 0.05-30/0.075-40/0.125-30mg-mcg pack</i> | 67  | <i>levoxyl 137mcg tab</i>               | 102 | <i>LITHOSTAT 250MG TAB</i>               | 83 |
| <i>levora 0.15/30 28 day pack</i>  | 68  | <i>levoxyl 150mcg tab</i>               | 103 | <i>loestrin fe 1/20 28 day pack</i>      | 68 |
| <i>levo-t 100mcg tab</i>   | 102 | <i>levoxyl 175mcg tab</i>               | 103 | <i>LOKELMA 10GM POWDER FOR ORAL SUSP</i> | 91 |
| <i>levo-t 112mcg tab</i>   | 102 | <i>levoxyl 200mcg tab</i>               | 103 | <i>LOKELMA 5GM POWDER FOR ORAL SUSP</i>  | 91 |
| <i>levo-t 125mcg tab</i>   | 102 | <i>levoxyl 25mcg tab</i>                | 103 | <i>LEXIVA 50MG/ML SUSP</i>               | 57 |
| <i>levo-t 137mcg tab</i>   | 102 | <i>levoxyl 50mcg tab</i>                | 103 | <i>lidocaine 4% topical soln</i>         | 75 |
| <i>levo-t 150mcg tab</i>   | 102 | <i>levoxyl 75mcg tab</i>                | 103 | <i>LONHALA 25MCG/ML INH SOLN</i>         | 19 |
| <i>levo-t 175mcg tab</i>   | 102 | <i>levoxyl 88mcg tab</i>                | 103 | <i>lidocaine 5% ointment</i>             | 75 |
| <i>levo-t 200mcg tab</i>   | 102 | <i>LEXIVA 50MG/ML SUSP</i>              | 57  | <i>lidocaine 5% patch</i>                | 75 |
| <i>levo-t 25mcg tab</i>  | 102 | <i>lidocaine viscous 2%</i>             | 91  | <i>LONSURF 6.14-15MG TAB</i>             | 46 |
| <i>levo-t 300mcg tab</i>   | 102 | <i>lidocaine/prilocaine</i>             | 75  | <i>lidocaine 2.5-2.5% cream</i>          | 46 |
| <i>levo-t 50mcg tab</i>  | 102 | <i>LINDANE 1% SHAMPOO</i>               | 75  | <i>loperamide 2mg cap</i>                | 32 |
| <i>levo-t 75mcg tab</i>  | 102 | <i>linezolid 20mg/ml susp</i>           | 42  | <i>lopinavir 80mg/ml/ritonavir</i>       | 57 |
| <i>levo-t 88mcg tab</i>  | 102 | <i>linezolid 2mg/ml inj</i>             | 42  | <i>linezolid 600mg tab</i>               | 42 |
| <i>levothyroxine sodium 0.025mg tab</i>                                      | 102 | <i>linezolid 600mg tab</i>              | 42  | <i>lorazepam 0.5mg tab</i>               | 18 |
| <i>levothyroxine sodium 0.05mg tab</i>                                       | 102 | <i>liothyronine sodium 0.005mg tab</i>  | 103 | <i>lorazepam 1mg tab</i>                 | 18 |
| <i>levothyroxine sodium 0.075mg tab</i>                                      | 102 | <i>liothyronine sodium 0.025mg tab</i>  | 103 | <i>lorazepam 2mg tab</i>                 | 18 |
| <i>levothyroxine sodium 0.088mg tab</i>                                      | 102 | <i>liothyronine sodium 0.05mg tab</i>   | 103 | <i>lorazepam 2mg/ml oral soln</i>        | 18 |
|  |     | <i>lisinopril 10mg tab</i>              | 37  | <i>LORBRENA 100MG TAB</i>                | 47 |
|  |     |   |     | <i>LORBRENA 25MG TAB</i>                 | 47 |
|  |     |   |     | <i>loryna 28 day pack</i>                | 68 |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                       |    |   |     |  |     |
|--|----|---|-----|--|-----|
| <i>losartan potassium 100mg tab</i>          | 37 | <i>lyllana 0.05mg/24hr patch</i>                    | 80  | <i>megestrol acetate 125mg/ml susp</i> | 98  |
| <i>losartan potassium 25mg tab</i>           | 37 | <i>lyllana 0.075mg/24hr patch</i>                   | 80  | <i>megestrol acetate 20mg tab</i>      | 45  |
| <i>losartan potassium 50mg tab</i>           | 37 | <i>lyllana 0.1mg/24hr patch</i>                     | 80  | <i>megestrol acetate 40mg tab</i>      | 45  |
| LOTEMAX 0.5% OPHTH OINTMENT                  | 94 | LYNPARZA 100MG TAB                                  | 47  | <i>megestrol acetate 40mg/ml susp</i>  | 45  |
| <i>loteprednol etabonate 0.5% ophth gel</i>  | 94 | LYNPARZA 150MG TAB                                  | 47  | <i>MEKINIST 0.5MG TAB</i>              | 47  |
| <i>loteprednol etabonate 0.5% ophth susp</i> | 94 | LYSODREN 500MG TAB                                  | 45  | <i>MEKINIST 2MG TAB</i>                | 47  |
| <i>lovastatin 10mg tab</i>                   | 35 | <i>lyza 0.35mg pack</i>                             | 69  | <i>MEKTOVI 15MG TAB</i>                | 47  |
| <i>lovastatin 20mg tab</i>                   | 35 | <b>M</b>  |     | <i>meloxicam 15mg tab</i>              | 12  |
| <i>lovastatin 40mg tab</i>                   | 35 | <i>magnesium sulfate 500mg/ml inj</i>               | 89  | <i>meloxicam 7.5mg tab</i>             | 12  |
| <i>low-ogestrel 28 day pack</i>              | 68 | <i>magnesium sulfate 500mg/ml syringe</i>           | 89  | <i>memantine 10mg tab</i>              | 98  |
| <i>loxapine 10mg cap</i>                     | 54 | <i>malathion 0.5% lotion</i>                        | 75  | <i>memantine</i>                       | 99  |
| <i>loxapine 25mg cap</i>                     | 54 | <i>marlissa 28 day pack</i>                         | 68  | <i>10mg/memantine 5mg pack</i>         |     |
| <i>loxapine 50mg cap</i>                     | 54 | MARPLAN 10MG TAB                                    | 26  | <i>memantine 14mg er cap</i>           | 99  |
| <i>loxapine 5mg cap</i>                      | 54 | MATULANE 50MG CAP                                   | 49  | <i>memantine 21mg er cap</i>           | 99  |
| LUMIGAN 0.01% OPHTH SOLN                     | 95 | <i>matzim 180mg er tab</i>                          | 61  | <i>memantine 28mg er cap</i>           | 99  |
| LUPANETA 1-MONTH PACK                        | 78 | <i>matzim 240mg er tab</i>                          | 61  | <i>memantine 2mg/ml oral soln</i>      | 99  |
| LUPANETA 3-MONTH PACK                        | 78 | <i>matzim 300mg er tab</i>                          | 61  | <i>memantine 5mg tab</i>               | 99  |
| LUPKYNIS 7.9MG CAP                           | 90 | <i>matzim 360mg er tab</i>                          | 61  | <i>memantine 7mg er cap</i>            | 99  |
| LUPRON 11.25MG SYRINGE                       | 44 | MAVYRET 100-40MG TAB                                | 58  | <i>MENACTRA INJ</i>                    | 105 |
| LUPRON 22.5MG SYRINGE                        | 44 | MAXIDEX 0.1% OPHTH SUSP                             | 94  | <i>MENQUADFI INJ</i>                   | 105 |
| LUPRON 3.75MG SYRINGE                        | 44 | MAYZENT 0.25MG TAB                                  | 100 | <i>MENVEO INJ</i>                      | 105 |
| LUPRON 30MG SYRINGE                          | 44 | MAYZENT 2MG TAB                                     | 100 | <i>mercaptopurine 50mg tab</i>         | 43  |
| LUPRON 45MG SYRINGE                          | 45 | <i>meclizine 12.5mg tab</i>                         | 33  | <i>meropenem 1000mg inj</i>            | 41  |
| LUPRON 7.5MG SYRINGE                         | 45 | <i>meclizine 25mg tab</i>                           | 33  | <i>meropenem 500mg inj</i>             | 41  |
| <i>lulera 28 day pack</i>                    | 68 | MEDROL 2MG TAB                                      | 70  | <i>mesalamine 1000mg rectal supp</i>   | 81  |
| <i>lyeq 28 day 0.35mg pack</i>               | 69 | <i>medroxyprogesterone acetate 10mg tab</i>         | 98  | <i>mesalamine 1200mg dr tab</i>        | 81  |
| <i>lyllana 0.025mg/24hr patch</i>            | 80 | <i>medroxyprogesterone acetate 150mg/ml inj</i>     | 69  | <i>mesalamine 375mg er cap</i>         | 81  |
| <i>lyllana 0.0375mg/24hr patch</i>           | 80 | <i>medroxyprogesterone acetate 150mg/ml syringe</i> | 69  | <i>mesalamine 400mg dr cap</i>         | 81  |
|  |    | <i>medroxyprogesterone acetate 2.5mg tab</i>        | 98  | <i>mesalamine 66.7mg/ml enema</i>      | 81  |
|  |    | <i>medroxyprogesterone acetate 5mg tab</i>          | 98  | <i>mesalamine 800mg dr tab</i>         | 81  |
|  |    | MEFLOQUINE 250MG TAB                                | 42  | <i>MESNEX 400MG TAB</i>                | 49  |
|  |    |   |     | <i>metaxalone 800mg tab</i>            | 91  |
|  |    |   |     | <i>metformin 1000mg tab</i>            | 30  |
|  |    |   |     | <i>metformin 500mg er tab</i>          | 30  |
|  |    |   |     | <i>metformin 500mg tab</i>             | 30  |
|  |    |   |     | <i>metformin 750mg er tab</i>          | 30  |
|  |    |   |     | <i>metformin 850mg tab</i>             | 30  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                   |     |  |    |  |     |
|--|-----|--|----|--|-----|
| <i>methadone 10mg tab</i>                | 13  | <i>methylphenidate 27mg er tab</i>       | 9  | <i>metoprolol succinate 200mg er tab</i> | 60  |
| <i>methadone 5mg tab</i>                 | 13  | <i>methylphenidate 27mg sr tab</i>       | 9  | <i>metoprolol succinate 25mg er tab</i>  | 60  |
| <i>methazolamide 25mg tab</i>            | 75  | <i>methylphenidate 2mg/ml oral soln</i>  | 9  | <i>metoprolol succinate 50mg er tab</i>  | 60  |
| <i>methazolamide 50mg tab</i>            | 75  | <i>methylphenidate 30mg cr cap</i>       | 9  | <i>metoprolol tartrate 100mg tab</i>     | 60  |
| <i>methenamine hippurate 1000mg tab</i>  | 42  | <i>methylphenidate 30mg la cap</i>       | 9  | <i>metoprolol tartrate 25mg tab</i>      | 60  |
| <i>methimazole 10mg tab</i>              | 102 | <i>methylphenidate 36mg er tab</i>       | 9  | <i>metoprolol tartrate 50mg tab</i>      | 60  |
| <i>methimazole 5mg tab</i>               | 102 | <i>methylphenidate 36mg sr tab</i>       | 9  | <i>metronidazole 0.75% cream</i>         | 75  |
| <i>methocarbamol 500mg tab</i>           | 91  | <i>methylphenidate 40mg cr cap</i>       | 9  | <i>metronidazole 0.75% gel</i>           | 75  |
| <i>methocarbamol 750mg tab</i>           | 91  | <i>methylphenidate 40mg la cap</i>       | 9  | <i>metronidazole 0.75% lotion</i>        | 75  |
| <i>methotrexate 2.5mg tab</i>            | 43  | <i>methylphenidate 50mg cr cap</i>       | 9  | <i>metronidazole 0.75% vaginal gel</i>   | 106 |
| <i>methotrexate 25mg/ml (2ml) inj</i>    | 43  | <i>methylphenidate 54mg er tab</i>       | 9  | <i>metronidazole 1% gel</i>              | 75  |
| <i>methotrexate 25mg/ml inj</i>          | 43  | <i>methylphenidate 54mg sr tab</i>       | 9  | <i>metronidazole 250mg tab</i>           | 40  |
| <i>methoxsalen 10mg cap</i>              | 72  | <i>methylphenidate 60mg cr cap</i>       | 9  | <i>metronidazole 500mg tab</i>           | 40  |
| <i>methscopolamine bromide 2.5mg tab</i> | 104 | <i>methylphenidate 60mg la cap</i>       | 9  | <i>metronidazole 5mg/ml inj</i>          | 40  |
| <i>methscopolamine bromide 5mg tab</i>   | 104 | <i>methylphenidate 50mg cr cap</i>       | 9  | <i>metyrosine 250mg cap</i>              | 37  |
| <i>methyldopa 250mg tab</i>              | 38  | <i>methylphenidate 50mg la tab</i>       | 9  | <i>mexiletine 150mg cap</i>              | 18  |
| <i>methyldopa 500mg tab</i>              | 38  | <i>methylphenidate 54mg cr tab</i>       | 9  | <i>mexiletine 200mg cap</i>              | 18  |
| <i>methylphenidate 10mg cr cap</i>       | 9   | <i>methylphenidate 54mg la tab</i>       | 9  | <i>mexiletine 250mg cap</i>              | 18  |
| <i>methylphenidate 10mg er tab</i>       | 9   | <i>methylprednisolone 16mg cr cap</i>    | 70 | <i>micafungin sodium 100mg inj</i>       | 33  |
| <i>methylphenidate 10mg la cap</i>       | 9   | <i>methylprednisolone 32mg cr tab</i>    | 70 | <i>micafungin sodium 50mg inj</i>        | 33  |
| <i>methylphenidate 10mg tab</i>          | 9   | <i>methylprednisolone 4mg pack</i>       | 70 | <i>microgestin 1.5/30 21 day pack</i>    | 68  |
| <i>methylphenidate 18mg er tab</i>       | 9   | <i>methylprednisolone 4mg tab</i>        | 70 | <i>microgestin 1/20 21 day pack</i>      | 68  |
| <b>METHYLPHENIDATE 18MG ER TAB</b>       | 9   | <i>methylprednisolone 8mg tab</i>        | 70 | <i>microgestin fe 1.5/30 28 day pack</i> | 68  |
| <i>methylphenidate 1mg/ml oral soln</i>  | 9   | <i>metoclopramide 10mg tab</i>           | 81 | <i>microgestin fe 1/20 28 day pack</i>   | 68  |
| <i>methylphenidate 20mg cr cap</i>       | 9   | <i>metoclopramide 1mg/ml oral soln</i>   | 81 | <i>midodrine 10mg tab</i>                | 107 |
| <i>methylphenidate 20mg er tab</i>       | 9   | <i>metoclopramide 5mg tab</i>            | 81 | <i>midodrine 2.5mg tab</i>               | 107 |
| <i>methylphenidate 20mg la cap</i>       | 9   | <i>metolazone 10mg tab</i>               | 76 | <i>midodrine 5mg tab</i>                 | 107 |
| <i>methylphenidate 20mg tab</i>          | 9   | <i>metolazone 2.5mg tab</i>              | 76 | <i>miglitol 100mg tab</i>                | 29  |
|  |     | <i>metolazone 5mg tab</i>                | 76 | <i>miglitol 25mg tab</i>                 | 29  |
|  |     | <i>metoprolol succinate 100mg er tab</i> | 59 | <i>miglitol 50mg tab</i>                 | 29  |
|  |     |  |    | <i>miglustat 100mg cap</i>               | 84  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Índice

|   |     |  |     |                              |     |
|---|-----|--|-----|------------------------------|-----|
| <i>mili 28 day pack</i>                 | 68  | <i>morphine sulfate 100mg er tab</i>       | 13  | <b>MYRBETRIQ 50MG ER TAB</b> | 105 |
| <i>mimvey pack</i>                      | 79  | <i>morphine sulfate 15mg er tab</i>        | 13  |                              |     |
| <i>minitran 0.1mg/hr patch</i>          | 17  | <i>morphine sulfate 15mg er tab</i>        | 13  |                              |     |
| <i>minitran 0.2mg/hr patch</i>          | 17  | <b>MORPHINE SULFATE</b>                    | 13  |                              |     |
| <i>minitran 0.4mg/hr patch</i>          | 17  | <b>15MG TAB</b>                            | 13  |                              |     |
| <i>minitran 0.6mg/hr patch</i>          | 17  | <i>morphine sulfate 200mg er tab</i>       | 13  |                              |     |
| <i>minocycline 100mg cap</i>            | 101 | <i>morphine sulfate 20mg/ml oral soln</i>  | 13  |                              |     |
| <i>minocycline 100mg tab</i>            | 101 | <i>morphine sulfate 20mg/ml oral soln</i>  | 13  |                              |     |
| <i>minocycline 50mg cap</i>             | 101 | <i>morphine sulfate 20mg/ml oral soln</i>  | 13  |                              |     |
| <i>minocycline 50mg tab</i>             | 101 | <i>morphine sulfate 20mg/ml oral soln</i>  | 13  |                              |     |
| <i>minocycline 75mg cap</i>             | 101 | <i>morphine sulfate 20mg/ml oral soln</i>  | 13  |                              |     |
| <i>minocycline 75mg tab</i>             | 101 | <i>morphine sulfate 30mg er tab</i>        | 13  |                              |     |
| <i>minoxidil 10mg tab</i>               | 40  | <b>MORPHINE SULFATE</b>                    | 13  |                              |     |
| <i>minoxidil 2.5mg tab</i>              | 40  | <b>30MG TAB</b>                            | 13  |                              |     |
| <i>mirtazapine 15mg odt</i>             | 26  | <i>morphine sulfate 4mg/ml oral soln</i>   | 14  |                              |     |
| <i>mirtazapine 15mg tab</i>             | 26  | <i>morphine sulfate 60mg er tab</i>        | 14  |                              |     |
| <i>mirtazapine 30mg odt</i>             | 26  | <b>MOVANTIK 12.5MG TAE</b>                 | 82  |                              |     |
| <i>mirtazapine 30mg tab</i>             | 26  | <b>MOVANTIK 25MG TAB</b>                   | 82  |                              |     |
| <i>mirtazapine 45mg odt</i>             | 26  | <i>moxifloxacin 0.5% ophth soln</i>        | 94  |                              |     |
| <i>mirtazapine 45mg tab</i>             | 26  | <b>MOXIFLOXACIN 1.6MG/ML INJ</b>           | 81  |                              |     |
| <i>mirtazapine 7.5mg tab</i>            | 26  | <i>moxifloxacin 400mg tab</i>              | 81  |                              |     |
| <i>moexipril 15mg tab</i>               | 37  | <b>MULTAQ 400MG TAB</b>                    | 18  |                              |     |
| <i>moexipril 7.5mg tab</i>              | 37  | <i>mupirocin 2% ointment</i>               | 71  |                              |     |
| <i>MOLINDONE 10MG TAB</i>               | 54  | <i>mycophenolate mofetil 200mg/ml susp</i> | 90  |                              |     |
| <i>MOLINDONE 25MG TAB</i>               | 54  | <i>mycophenolate mofetil 250mg cap</i>     | 90  |                              |     |
| <i>MOLINDONE 5MG TAB</i>                | 54  | <i>mycophenolate mofetil 500mg tab</i>     | 90  |                              |     |
| <i>mometasone furoate 0.1% cream</i>    | 74  | <i>mycophenolic acid 180mg dr tab</i>      | 90  |                              |     |
| <i>mometasone furoate 0.1% lotion</i>   | 74  | <i>mycophenolic acid 360mg dr tab</i>      | 90  |                              |     |
| <i>mometasone furoate 0.1% ointment</i> | 74  | <i>myorisan 10mg cap</i>                   | 71  |                              |     |
| <i>mondoxyne 100mg cap</i>              | 101 | <i>myorisan 20mg cap</i>                   | 71  |                              |     |
| <i>montelukast 10mg tab</i>             | 19  | <i>myorisan 30mg cap</i>                   | 71  |                              |     |
| <i>montelukast 4mg chew tab</i>         | 19  | <i>myorisan 40mg cap</i>                   | 71  |                              |     |
| <i>montelukast 4mg granules</i>         | 19  | <b>MYRBETRIQ 25MG ER TAB</b>               | 105 |                              |     |
| <i>montelukast 5mg chew tab</i>         | 19  |  |     |                              |     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |    |                            |     |                              |    |
|--|----|----------------------------|-----|------------------------------|----|
| NAYZILAM 5MG/0.1ML<br>NASAL SPRAY                | 22 | NEUPRO 2MG/24HR<br>PATCH   | 50  | NISOLDIPINE 25.5MG<br>ER TAB | 62 |
| necon 0.5/35 28 day pack                         | 68 | NEUPRO 3MG/24HR<br>PATCH   | 50  | NISOLDIPINE 30MG ER<br>TAB   | 62 |
| NEEDLES INSULIN                                  | 87 | NEUPRO 4MG/24HR<br>PATCH   | 50  | nisoldipine 34mg er tab      | 62 |
| DISP. SAFETY                                     |    | NEUPRO 6MG/24HR<br>PATCH   | 50  | NISOLDIPINE 40MG ER<br>TAB   | 62 |
| NEFAZODONE 100MG<br>TAB                          | 27 | NEUPRO 8MG/24HR<br>PATCH   | 51  | nisoldipine 8.5mg er tab     | 62 |
| NEFAZODONE 150MG<br>TAB                          | 27 | NEUPRO 100MG ER<br>PATCH   | 51  | nitazoxanide 500mg tab       | 41 |
| NEFAZODONE 200MG<br>TAB                          | 27 | NEVANAC 0.1% OPHTH<br>SUSP | 95  | nitisinone 10mg cap          | 78 |
| NEFAZODONE 250MG<br>TAB                          | 27 | NEVIRAPINE 100MG ER<br>TAB | 57  | nitisinone 2mg cap           | 78 |
| NEFAZODONE 50MG<br>TAB                           | 27 | nevrapine 10mg/ml susp     | 57  | nitisinone 5mg cap           | 78 |
| neomycin sulfate 500mg<br>tab                    | 10 | nevrapine 200mg tab        | 57  | NITRO-BID 2%                 | 17 |
| neomycin/bacitracin/poly<br>myxin ophth ointment | 94 | nevrapine 400mg er tab     | 57  | OINTMENT                     |    |
| 5(3.5)mg-400unit-10000u<br>nit                   |    | NEXAVAR 200MG TAB          | 47  | NITRO-DUR 0.3MG/HR           | 17 |
| NEOMYCIN/POLYMYXI<br>N B/GRAMICIDIN              | 94 | niacin 1000mg er tab       | 36  | PATCH                        |    |
| 1.75-10000-0.025MG-UN                            |    | niacin 500mg er tab        | 36  | NITRO-DUR 0.8MG/HR           | 17 |
| T-MG/ML OPHTH SOLN                               |    | niacin 750mg er tab        | 36  | PATCH                        |    |
| neomycin/polymyxin/bacit<br>racin/hydrocortisone | 94 | nicardipine 20mg cap       | 61  | nitrofurantoin macro         | 42 |
| ophth 1% ointment                                |    | nicardipine 30mg cap       | 61  | macrocrystals 100mg cap      |    |
| neomycin/polymyxin/dexa<br>methasone 0.1% ophth  | 94 | NICOTROL 10MG INH<br>SOLN  | 100 | nitrofurantoin               | 42 |
| susp   |    | NICOTROL 10MG/ML           | 100 | macrocrystals 50mg cap       |    |
| neomycin/polymyxin/hydr<br>ocortisone            | 96 | NASAL INHALER              |     | nitroglycerin 0.1mg/hr       | 17 |
| 3.5-10000unit-1% otic                            |    | nifedipine 30mg er tab     | 61  | patch                        |    |
| soln   |    | nifedipine 30mg osmotic    | 61  | nitroglycerin 0.2mg/hr       | 17 |
| neomycin/polymyxin/hydr<br>ocortisone            | 96 | er tab                     |     | patch                        |    |
| 3.5-10000unit-1% otic                            |    | nifedipine 60mg er tab     | 61  | nitroglycerin 0.3mg sl tab   | 17 |
| susp   |    | nifedipine 60mg osmotic    | 61  | nitroglycerin 0.4mg sl tab   | 17 |
| neomycin/polymyxin/hydr<br>ocortisone            | 96 | er tab                     |     | nitroglycerin 0.4mg/act      | 17 |
| nikki 28 day pack                                |    | nifedipine 90mg er tab     | 61  | spray                        |    |
| 3.5-10000unit-1% otic                            |    | nifedipine 90mg osmotic    | 62  | nitroglycerin 0.4mg/hr       | 17 |
| susp   |    | er tab                     |     | patch                        |    |
| NEOMYCIN/POLYMYXI<br>N/HYDROCORTISONE            | 95 | nimodipine 30mg cap        | 62  | nitroglycerin 0.6mg sl tab   | 17 |
| 3.5-10000UNIT-10MG/M<br>L OPHTH SUSP             |    | NINLARO 2.3MG CAP          | 48  | nitroglycerin 0.6mg/hr       | 17 |
| NERLYNX 40MG TAB                                 | 47 | NINLARO 3MG CAP            | 48  | patch                        |    |
| NEUPRO 1MG/24HR<br>PATCH                         | 50 | NINLARO 4MG CAP            | 48  | NIVESTYM                     | 84 |
|  |    | nisoldipine 17mg er tab    | 62  | 300MCG/0.5ML                 |    |
|  |    | NISOLDIPINE 20MG ER        | 62  | SYRINGE                      |    |
|  |    | TAB                        |     | NIVESTYM 300MCG/ML           | 85 |
|  |    |                            |     | INJ                          |    |
|  |    |                            |     | NIVESTYM                     | 85 |
|  |    |                            |     | 480MCG/0.8ML                 |    |
|  |    |                            |     | SYRINGE                      |    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Índice

|                                  |     |                                |     |                                  |     |
|----------------------------------|-----|--------------------------------|-----|----------------------------------|-----|
| NIVESTYM                         | 85  | NOVOLOG 100UNIT/ML             | 31  | <i>nystatin 500000unit tab</i>   | 34  |
| 480MCG/1.6ML INJ                 |     | INJ                            |     | <i>nystop 100000unit/gm</i>      | 72  |
| NIZATIDINE 150MG CAF             | 104 | NOVOLOG 100UNIT/ML             | 31  | <i>topical powder</i>            |     |
| NIZATIDINE 300MG CAF             | 104 | PEN INJ                        |     | <b>O</b>                         |     |
| <i>nora-be 28 day 0.35mg</i>     | 69  | NOVOLOG MIX                    | 31  | OCALIVA 10MG TAB                 | 81  |
| <i>pack</i>                      |     | 70-30UNIT/ML INJ               |     | OCALIVA 5MG TAB                  | 81  |
| <i>norethindrone 0.35mg</i>      | 69  | NOVOLOG MIX                    | 31  | <i>ocella 28 day pack</i>        | 68  |
| <i>pack</i>                      |     | 70-30UNIT/ML PEN INJ           |     | OCTAGAM 1GM/20ML                 | 96  |
| <i>norethindrone acetate</i>     | 98  | NOXAFIL 40MG/ML                | 34  | INJ                              |     |
| <i>5mg tab</i>                   |     | SUSP                           |     | OCTAGAM 2GM/20ML                 | 96  |
| NORPACE 100MG ER                 | 18  | NUBEQA 300MG TAB               | 45  | INJ                              |     |
| CAP                              |     | NUCALA 100MG INJ               | 19  | <i>octreotide 0.05mg/ml inj</i>  | 79  |
| NORPACE 150MG ER                 | 18  | NUCALA 100MG/ML                | 19  | <i>octreotide 0.1mg/ml inj</i>   | 79  |
| CAP                              |     | AUTO-INJECTOR                  |     | <i>octreotide 0.2mg/ml inj</i>   | 79  |
| <i>nortrel 0.5/35 28 day</i>     | 68  | NUCALA 100MG/ML                | 19  | <i>octreotide 0.5mg/ml inj</i>   | 79  |
| <i>pack</i>                      |     | SYRINGE                        |     | <i>octreotide 1mg/ml inj</i>     | 79  |
| <i>nortrel 1/35 21 day pack</i>  | 68  | NUCYNTA 100MG ER               | 14  | ODEFSEY 200-25-25MG              | 57  |
| <i>nortrel 1/35 28 day pack</i>  | 68  | TAB                            |     | TAB                              |     |
| <i>nortrel 7/7/7 28 day pack</i> | 68  | NUCYNTA 150MG ER               | 14  | ODOMZO 200MG CAP                 | 44  |
| <i>nortriptyline 10mg cap</i>    | 29  | TAB                            |     | OFEV 100MG CAP                   | 101 |
| <i>nortriptyline 25mg cap</i>    | 29  | NUCYNTA 200MG ER               | 14  | OFEV 150MG CAP                   | 101 |
| NORTRIPTYLINE                    | 29  | TAB                            |     | <i>ofloxacin 0.3% ophth soln</i> | 94  |
| 2MG/ML ORAL SOLN                 |     | NUCYNTA 250MG ER               | 14  | <i>ofloxacin 0.3% otic soln</i>  | 95  |
| <i>nortriptyline 50mg cap</i>    | 29  | TAB                            |     | <i>ofloxacin 400mg tab</i>       | 81  |
| <i>nortriptyline 75mg cap</i>    | 29  | NUCYNTA 50MG ER                | 14  | <i>olanzapine 10mg inj</i>       | 54  |
| NORVIR 100MG ORAL                | 57  | TAB                            |     | <i>olanzapine 10mg odt</i>       | 54  |
| POWDER                           |     | NUEDEXTA 20-10MG               | 100 | <i>olanzapine 10mg tab</i>       | 54  |
| NORVIR 80MG/ML                   | 57  | CAP                            |     | <i>olanzapine 15mg odt</i>       | 54  |
| ORAL SOLN                        |     | NUPLAZID 10MG TAB              | 52  | <i>olanzapine 15mg tab</i>       | 54  |
| NOURIANZ 20MG TAB                | 49  | NUPLAZID 34MG CAP              | 52  | <i>olanzapine 2.5mg tab</i>      | 54  |
| NOURIANZ 40MG TAB                | 49  | NURTEC 75MG ODT                | 87  | <i>olanzapine 20mg odt</i>       | 54  |
| NOVOLIN                          | 31  | NUTRILIPID                     | 92  | <i>olanzapine 20mg tab</i>       | 54  |
| 70-30UNIT/ML INJ                 |     | 20GM/100ML INJ                 |     | <i>olanzapine 5mg odt</i>        | 54  |
| NOVOLIN                          | 31  | NUZYRA 150MG TAB               | 101 | <i>olanzapine 5mg tab</i>        | 54  |
| 70-30UNIT/ML PEN INJ             |     | <i>nyamyc 100000unit/gm</i>    | 72  | <i>olanzapine 7.5mg tab</i>      | 54  |
| NOVOLIN N                        | 31  | <i>topical powder</i>          |     | <i>olmesartan medoxomil</i>      | 37  |
| 100UNIT/ML INJ                   |     | <i>nylia 7/7/7 28 day pack</i> | 68  | <i>20mg tab</i>                  |     |
| NOVOLIN N                        | 31  | <i>nymyo 28 day pack</i>       | 68  | <i>olmesartan medoxomil</i>      | 37  |
| 100UNIT/ML PEN INJ               |     | <i>nystatin 100000 unit/gm</i> | 72  | <i>40mg tab</i>                  |     |
| NOVOLIN R                        | 31  | <i>ointment</i>                |     | <i>olmesartan medoxomil</i>      | 37  |
| 100UNIT/ML INJ                   |     | <i>nystatin 100000unit/gm</i>  | 72  | <i>5mg tab</i>                   |     |
| NOVOLIN R                        | 31  | <i>topical powder</i>          |     | <i>olopatadine 0.1% ophth</i>    | 95  |
| 100UNIT/ML PEN INJ               |     | <i>nystatin 100000unit/ml</i>  | 72  | <i>soln</i>                      |     |
| NOVOLOG 100UNIT/ML               | 31  | <i>cream</i>                   |     | <i>olopatadine 0.2% ophth</i>    | 95  |
| CARTRIDGE                        |     | <i>nystatin 100000unit/ml</i>  | 91  | <i>soln</i>                      |     |
|                                  |     | <i>susp</i>                    |     |                                  |     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice  |     |  |           |  |                            |
|---|-----|--|-----------|--|----------------------------|
| <i>olopatadine 0.6% (0.665mg/act) nasal inhaler</i> | 92  | ORILISSA 200MG TAB<br>ORKAMBI 125-100MG GRANULES | 77<br>100 | <i>oxybutynin chloride 5mg tab</i><br><i>oxycodone 10mg tab</i><br><i>oxycodone 15mg tab</i><br><i>oxycodone 1mg/ml oral soln</i>              | 105<br>14<br>14<br>14      |
| OLUMIANT 1MG TAB                                    | 10  | ORKAMBI 125-100MG TAB                            | 100       | <i>oxycodone 1mg/ml oral soln</i>  | 14                         |
| OLUMIANT 2MG TAB                                    | 10  | ORKAMBI 125-200MG TAB                            | 100       | <i>oxycodone 20mg tab</i><br><i>oxycodone 20mg/ml oral soln</i>  | 14<br>14                   |
| <i>omega-3 acid ethyl esters (usp) 1000mg cap</i>   | 35  | ORKAMBI 188-150MG GRANULES                       | 101       | <i>oxycodone 30mg tab</i><br><i>oxycodone 5mg cap</i><br><i>oxycodone 5mg tab</i><br><i>oxymorphone 10mg tab</i><br><i>oxymorphone 5mg tab</i> | 14<br>14<br>14<br>14<br>14 |
| <i>omeprazole 10mg dr cap</i>                       | 104 | <i>orphenadrine citrate 100mg er tab</i>         | 91        | <i>OZEMPIC 2MG/1.5ML PEN INJ</i><br><i>OZEMPIC 2MG/1.5ML PEN INJ (1MG DOSE)</i><br><i>OZEMPIC 4MG/3ML PEN INJ</i>                              | 30<br>30<br>30             |
| <i>omeprazole 20mg dr cap</i>                       | 104 | <i>oseltamivir 30mg cap</i>                      | 59        |  |                            |
| <i>omeprazole 40mg dr cap</i>                       | 104 | <i>oseltamivir 45mg cap</i>                      | 59        |  |                            |
| <i>ondansetron 0.8mg/ml oral soln</i>               | 33  | <i>oseltamivir 6mg/ml susp</i>                   | 59        |  |                            |
| ONDANSETRON 24MG TAB                                | 33  | <i>oseltamivir 75mg cap</i>                      | 59        |  |                            |
| <i>ondansetron 4mg odt</i>                          | 33  | OSPHENA 60MG TAB                                 | 78        |  |                            |
| <i>ondansetron 4mg tab</i>                          | 33  | OTEZLA 28-DAY STARTER PACK                       | 12        |  |                            |
| <i>ondansetron 8mg odt</i>                          | 33  | OTEZLA 30MG TAB                                  | 12        |  |                            |
| <i>ondansetron 8mg tab</i>                          | 33  | <i>oxacillin 1000mg inj</i>                      | 98        |  |                            |
| ONUREG 200MG TAB                                    | 43  | <i>oxacillin 100mg/ml inj</i>                    | 98        |  |                            |
| ONUREG 300MG TAB                                    | 43  | <i>oxacillin 2000mg inj</i>                      | 98        |  |                            |
| OPSUMIT 10MG TAB                                    | 63  | OXACILLIN 20MG/ML INJ                            | 98        |  |                            |
| ORENCIA 125MG/ML AUTO-INJECTOR                      | 12  | OXACILLIN 40MG/ML INJ                            | 98        |  |                            |
| ORENCIA 125MG/ML SYRINGE                            | 12  | <i>oxandrolone 10mg tab</i>                      | 15        |  |                            |
| ORENCIA 50MG/0.4ML SYRINGE                          | 12  | <i>oxandrolone 2.5mg tab</i>                     | 15        |  |                            |
| ORENCIA 87.5MG/0.7ML SYRINGE                        | 12  | <i>oxaprozin 600mg tab</i>                       | 12        |  |                            |
| ORENITRAM 0.125MG ER TAB                            | 63  | OXBRYTA 500MG TAB                                | 84        |  |                            |
| ORENITRAM 0.25MG ER TAB                             | 63  | <i>oxcarbazepine 150mg tab</i>                   | 24        |  |                            |
| ORENITRAM 1MG ER TAB                                | 63  | <i>oxcarbazepine 300mg tab</i>                   | 24        |  |                            |
| ORENITRAM 2.5MG ER TAB                              | 63  | <i>oxcarbazepine 600mg tab</i>                   | 24        |  |                            |
| ORENITRAM 5MG ER TAB                                | 63  | <i>oxcarbazepine 60mg/ml susp</i>                | 24        |  |                            |
| ORFADIN 20MG CAP SUSP                               | 78  | OXERVATE 0.002%                                  | 94        |  |                            |
| ORGOVYX 120MG TAB PACK                              | 45  | OPHTH SOLN                                       | 105       |  |                            |
| ORIAHNN 28 DAY KIT                                  | 79  | <i>oxybutynin chloride 10mg er tab</i>           | 105       |  |                            |
| ORILISSA 150MG TAB                                  | 77  | <i>oxybutynin chloride 15mg er tab</i>           | 105       |  |                            |
|   |     | <i>oxybutynin chloride 5mg er tab</i>            | 105       |  |                            |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |     |   |    |   |
|--|-----|---|----|---|
| PANZYGA 5GM/50ML INJ   | 96  | PENICILLIN G SODIUM 100000UNIT/ML INJ           | 97 | <i>phenoxybenzamine 10mg cap</i>        |
| <i>paricalcitol 0.001mg cap</i>                                      | 78  | <i>penicillin v potassium 250mg tab</i>         | 97 | <i>phenytoin 25mg/ml susp</i>           |
| <i>paricalcitol 0.002mg cap</i>                                      | 78  | PENICILLIN V                                    | 97 | <i>phenytoin 50mg chew tab</i>          |
| <i>paricalcitol 0.004mg cap</i>                                      | 78  | POTASSIUM 25MG/ML                               |    | <i>phenytoin sodium 100mg er cap</i>    |
| <i>paromomycin 250mg cap</i>   | 10  | ORAL SOLN                                       |    | <i>phenytoin sodium 200mg er cap</i>    |
| <i>paroxetine 10mg tab</i>   | 27  | <i>penicillin v potassium 500mg tab</i>         | 97 | <i>phenytoin sodium 300mg er cap</i>    |
| <i>paroxetine 12.5mg er tab</i>                                      | 27  | PENICILLIN V                                    | 97 | PHOSLYRA 667MG/5ML                      |
| <i>paroxetine 20mg tab</i>   | 27  | POTASSIUM 50MG/ML                               |    | ORAL SOLN                               |
| <i>paroxetine 25mg er tab</i>  | 27  | ORAL SOLN                                       |    | PIFELTRO 100MG TAB                      |
| <i>paroxetine 30mg tab</i>   | 27  | <i>pentamidine isethionate 300mg inj</i>        | 40 | <i>pilocarpine 1% ophthalmic soln</i>   |
| <i>paroxetine 37.5mg er tab</i>                                      | 27  | <i>pentamidine isethionate 50mg/ml inh soln</i> | 40 | <i>pilocarpine 2% ophthalmic soln</i>   |
| <i>paroxetine 40mg tab</i>   | 27  | <i>pentoxifylline 400mg er tab</i>              | 83 | <i>pilocarpine 4% ophthalmic soln</i>   |
| PASER D/R 4GM GRANULES   | 43  | <i>perindopril erbumine 2mg tab</i>             | 37 | <i>pilocarpine 5mg tab</i>              |
| PAXIL 10MG/5ML SUSP  | 27  | <i>perindopril erbumine 4mg tab</i>             | 37 | <i>pilocarpine 7.5mg tab</i>            |
| PEDIARIX SYRINGE   | 104 | <i>perindopril erbumine 8mg tab</i>             | 37 | <i>pimecrolimus 1% cream</i>            |
| PEDVAXHIB  | 105 | <i>periogard 0.12% mouthwash</i>                | 91 | PIMOZIDE 1MG TAB                        |
| 7.5MCG/0.5ML INJ   |     | <i>permethrin 5% cream</i>                      | 75 | PIMOZIDE 2MG TAB                        |
| peg 3350/electrolyte oral soln                                       | 86  | <i>perphenazine 16mg tab</i>                    | 55 | <i>pimtrea pack</i>                     |
| peg 3350/kcl/sodium bicarbonate/sodium chloride powder for oral soln | 86  | <i>perphenazine 2mg tab</i>                     | 55 | <i>pindolol 10mg tab</i>                |
| PEGASYS 180MCG/0.5ML SYRINGE   | 58  | <i>perphenazine 4mg tab</i>                     | 55 | <i>pindolol 5mg tab</i>                 |
| PEGASYS 180MCG/ML INJ  | 58  | <i>perphenazine 8mg tab</i>                     | 55 | <i>pioglitazone 15mg tab</i>            |
| PEMAZYRE 13.5MG TAB  | 48  | PERSERIS 120MG                                  | 52 | <i>pioglitazone 30mg tab</i>            |
| PEMAZYRE 4.5MG TAB   | 48  | SYRINGE   |    | <i>pioglitazone 45mg tab</i>            |
| PEMAZYRE 9MG TAB   | 48  | PERSERIS 90MG                                   | 52 | <i>piperacillin 2000mg/tazobactam</i>   |
| <i>penicillamine 250mg tab</i>                                       | 89  | SYRINGE   |    | <i>250mg inj</i>                        |
| <i>penicillin g potassium 1000000unit/ml inj</i>                     | 97  | <i>phenelzine 15mg tab</i>                      | 26 | <i>piperacillin 200mg/ml/tazobactam</i> |
| PENICILLIN G POTASSIUM 40000UNIT/ML INJ                              | 97  | <i>phenobarbital 100mg tab</i>                  | 85 | <i>25mg/ml inj</i>                      |
| PENICILLIN G POTASSIUM 60000UNIT/ML INJ                              | 97  | <i>phenobarbital 15mg tab</i>                   | 85 | <i>piperacillin 3000mg/tazobactam</i>   |
| PENICILLIN G PROCAINE 60000UNIT/ML SYRINGE                           | 97  | <i>phenobarbital 16.2mg tab</i>                 | 85 | <i>375mg inj</i>                        |
|  |     | <i>phenobarbital 30mg tab</i>                   | 85 | <i>piperacillin 4000mg/tazobactam</i>   |
|  |     | <i>phenobarbital 32.4mg tab</i>                 | 85 | <i>500mg inj</i>                        |
|  |     | <i>phenobarbital 4mg/ml oral soln</i>           | 85 | PIQRAY 200MG DAILY                      |
|  |     | <i>phenobarbital 60mg tab</i>                   | 85 | DOSE PACK                               |
|  |     | <i>phenobarbital 64.8mg tab</i>                 | 85 | PIQRAY 250MG DAILY                      |
|  |     | <i>phenobarbital 97.2mg tab</i>                 | 85 | DOSE PACK                               |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice  |     |   |    |                                    |    |
|---|-----|---|----|------------------------------------|----|
| PIQRAY 300MG DAILY DOSE 150MG PACK                              | 48  | potassium chloride 10meq er cap               | 89 | pramipexole 3.75mg er tab          | 51 |
| <i>pirmella 1/35 28 day pack</i>                                | 68  | potassium chloride 10meq er tab               | 89 | pramipexole 3mg er tab             | 51 |
| <i>piroxicam 10mg cap</i>                                       | 12  | potassium chloride 10meq micro er tab         | 89 | pramipexole 4.5mg er tab           | 51 |
| <i>piroxicam 20mg cap</i>                                       | 12  | potassium chloride 2.67meq/ml oral soln       | 89 | prasugrel 10mg tab                 | 84 |
| PLASMA-LYTE 148 INJ   | 88  | potassium chloride 20meq er tab               | 89 | prasugrel 5mg tab                  | 84 |
| PLASMALYTE A INJ  | 88  | potassium chloride 20meq micro er tab         | 89 | pravastatin sodium 10mg tab        | 35 |
| PLEGRIDY 125MCG/0.5ML AUTO-INJECTOR                             | 100 | potassium chloride 20meq powder for oral soln | 89 | pravastatin sodium 20mg tab        | 35 |
| PLEGRIDY 125MCG/0.5ML SYRINGE                                   | 100 | potassium chloride 20meq micro er tab         | 89 | pravastatin sodium 40mg tab        | 35 |
| <i>plenamine 15% inj</i>  | 92  | potassium chloride 20meq powder for oral soln | 89 | pravastatin sodium 80mg tab        | 36 |
| <i>podofilox 0.5% topical soln</i>                              | 75  | potassium chloride 2meq/ml (20ml) inj         | 89 | prazosin 1mg cap                   | 38 |
| <i>polymyxin b 250000unit/ml inj</i>                            | 42  | potassium chloride 2meq/ml inj                | 89 | prazosin 2mg cap                   | 38 |
| <i>polymyxin b/trimethoprim 10000 Unit/ML-0.1% ophth soln</i>   | 94  | potassium chloride 8meq er cap                | 89 | prazosin 5mg cap                   | 38 |
| POMALYST 1MG CAP  | 45  | potassium chloride 8meq er tab                | 89 | PRED MILD 0.12%                    | 95 |
| POMALYST 2MG CAP  | 45  | potassium citrate 10meq er tab                | 82 | OPHTH SUSP                         |    |
| POMALYST 3MG CAP  | 45  | potassium citrate 15meq er tab                | 82 | PRED-G 0.3-1% OPHTH SUSP           | 95 |
| POMALYST 4MG CAP  | 45  | potassium citrate 5meq er tab                 | 82 | PREDNICARBATE 0.1% OINTMENT        | 74 |
| <i>portia 28 day pack</i>                                       | 68  | PRALUENT 150MG/ML AUTO-INJECTOR               | 36 | PREDNISOLONE 1% OPHTH SOLN         | 95 |
| <i>posaconazole 100mg dr tab</i>                                | 34  | PRALUENT 75MG/ML AUTO-INJECTOR                | 36 | prednisolone 10mg odt              | 70 |
| POTASSIUM CHLORIDE 0.02MEQ/ML/SODIUM CHLORIDE 4.5MG/ML INJ      | 88  | pramipexole 0.125mg tab                       | 51 | prednisolone 15mg odt              | 70 |
| <i>potassium chloride 0.02meq/ml/sodium chloride 9mg/ml inj</i> | 89  | pramipexole 0.25mg tab                        | 51 | prednisolone 1mg/ml oral soln      | 70 |
| POTASSIUM CHLORIDE 0.04MEQ/ML/SODIUM CHLORIDE 9MG/ML INJ        | 89  | pramipexole 0.375mg er tab                    | 51 | prednisolone 30mg odt              | 70 |
| POTASSIUM CHLORIDE 0.1MEQ/ML INJ                                | 89  | pramipexole 0.5mg tab                         | 51 | PREDNISOLONE                       | 70 |
| POTASSIUM CHLORIDE 0.2MEQ/ML INJ                                | 89  | pramipexole 0.75mg er tab                     | 51 | 3MG/ML ORAL SOLN                   | 95 |
| POTASSIUM CHLORIDE 0.4MEQ/ML INJ                                | 89  | pramipexole 0.75mg tab                        | 51 | PREDNISOLONE ACETATE 1% OPHTH SUSP | 70 |
| <i>potassium chloride 1.33meq/ml oral soln</i>                  | 89  | pramipexole 1.5mg tab                         | 51 | prednisone 10mg tab                | 70 |
|   |     | pramipexole 1.5mg tab                         | 51 | prednisone 1mg tab                 | 70 |
|   |     | pramipexole 1mg tab                           | 51 | PREDNISONE 1MG/ML ORAL SOLN        | 70 |
|   |     | pramipexole 2.25mg er tab                     | 51 | prednisone 2.5mg tab               | 70 |
|   |     |   |    | prednisone 20mg tab                | 70 |
|   |     |   |    | prednisone 50mg tab                | 70 |
|   |     |   |    | prednisone 5mg tab                 | 70 |
|   |     |   |    | PREDNISONE 5MG/ML ORAL SOLN        | 70 |
|   |     |   |    | pregabalin 100mg cap               | 24 |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

## Índice

|   |     |                                      |     |                                 |     |
|---|-----|--------------------------------------|-----|---------------------------------|-----|
| pregabalin 150mg cap                    | 24  | PRIMAQUINE                           | 42  | promethazine 12.5mg tab         | 34  |
| pregabalin 200mg cap                    | 24  | PHOSPHATE 26.3MG                     |     | promethazine 25mg rectal        | 34  |
| pregabalin 20mg/ml oral<br>soln         | 24  | TAB                                  |     | supp                            |     |
| pregabalin 225mg cap                    | 24  | primidone 250mg tab                  | 24  | promethazine 25mg tab           | 34  |
| pregabalin 25mg cap                     | 24  | primidone 50mg tab                   | 24  | promethazine 50mg tab           | 34  |
| pregabalin 300mg cap                    | 24  | PRIVIGEN 20GM/200ML                  | 96  | promethegan 25mg rectal         | 34  |
| pregabalin 50mg cap                     | 24  | INJ                                  |     | supp                            |     |
| pregabalin 75mg cap                     | 24  | probenecid 500mg tab                 | 83  | PROMETHEGAN 50MG                | 34  |
| PREMARIN 0.3MG TAB                      | 80  | PROCALAMINE 3% INJ                   | 93  | RECTAL SUPP                     |     |
| PREMARIN 0.45MG TAB                     | 80  | prochlorperazine 10mg<br>tab         | 55  | propafenone 150mg tab           | 18  |
| PREMARIN 0.625MG<br>TAB                 | 80  | prochlorperazine 25mg<br>rectal supp | 55  | propafenone 225mg er<br>cap     | 18  |
| PREMARIN<br>0.625MG/GM VAGINAL<br>CREAM | 106 | prochlorperazine 5mg tab             | 55  | propafenone 225mg tab           | 18  |
| PREMARIN 0.9MG TAB                      | 80  | procto-med 2.5% cream                | 16  | propafenone 300mg tab           | 18  |
| PREMARIN 1.25MG TAB                     | 80  | procto-pak 1% rectal<br>cream        | 16  | propafenone 325mg er<br>cap     | 18  |
| PREMASOL 10% INJ                        | 93  | proctosol 2.5% cream                 | 16  | propafenone 425mg er<br>cap     | 18  |
| PREMPHASE 28 DAY<br>PACK                | 79  | proctozone hc 2.5%<br>cream          | 16  | proparacaine 0.5% ophth<br>soln | 94  |
| PREMPRO 0.3/1.5MG 28<br>DAY PACK        | 79  | progesterone 100mg cap               | 98  | propranolol 10mg tab            | 60  |
| PREMPRO 0.45/1.5MG<br>28 DAY PACK       | 80  | progesterone 200mg cap               | 98  | propranolol 120mg er<br>cap     | 60  |
| PREMPRO 0.625/2.5MG<br>28 DAY PACK      | 80  | PROGRAF 0.2MG                        | 90  | propranolol 160mg er<br>cap     | 60  |
| PREMPRO 0.625/5MG<br>28 DAY PACK        | 80  | GRANULES FOR ORAL<br>SUSP            |     | propranolol 20mg tab            | 60  |
| PRETOMANID 200MG<br>TAB                 | 43  | PROGRAF 1MG                          | 90  | propranolol 40mg tab            | 60  |
| prevalite 4gm powder for<br>oral susp   | 35  | GRANULES FOR ORAL<br>SUSP            |     | PROPRANOLOL                     | 60  |
| previfem 28 day pack                    | 68  | PROLASTIN 1000MG INJ                 | 100 | 4MG/ML ORAL SOLN                |     |
| PREVYMIS 240MG TAB                      | 58  | PROLIA 60MG/ML                       | 77  | propranolol 60mg er cap         | 60  |
| PREVYMIS 480MG TAB                      | 58  | SYRINGE                              |     | propranolol 60mg tab            | 60  |
| PREZCOBIX 150-800MG<br>TAB              | 57  | PROMACTA 12.5MG                      | 85  | propranolol 80mg er cap         | 60  |
| PREZISTA 100MG/ML<br>SUSP               | 57  | POWDER FOR ORAL<br>SUSP              |     | propranolol 80mg tab            | 60  |
| PREZISTA 150MG TAB                      | 57  | PROMACTA 12.5MG TAB                  | 85  | PROPRANOLOL                     | 60  |
| PREZISTA 600MG TAB                      | 57  | PROMACTA 25MG TAB                    | 85  | 8MG/ML ORAL SOLN                |     |
| PREZISTA 75MG TAB                       | 57  | PROMACTA 75MG TAB                    | 85  | propylthiouracil 50mg<br>tab    | 102 |
| PREZISTA 800MG TAB                      | 57  | promethazine 1.25mg/ml<br>oral soln  | 34  | PROQUAD INJ                     | 106 |
| PRIFTIN 150MG TAB                       | 43  | promethazine 12.5mg<br>rectal supp   | 34  | PROSOL 20% INJ                  | 93  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                     |     |                                 |     |                            |    |
|--|-----|---------------------------------|-----|----------------------------|----|
| PYLERA                                     | 105 | <i>ramipril 2.5mg cap</i>       | 37  | REPATHA 420MG/3.5ML        | 36 |
| 140-125-125MG CAP                          |     | <i>ramipril 5mg cap</i>         | 37  | CARTRIDGE                  |    |
| PYRAZINAMIDE 500MG TAB                     | 43  | <i>ranolazine 1000mg er tab</i> | 16  | RESTASIS 0.05% OPHTH       | 94 |
| <i>pyridostigmine bromide 180mg er tab</i> | 42  | <i>ranolazine 500mg er tab</i>  | 16  | SUSP                       |    |
| <i>pyridostigmine bromide 60mg tab</i>     | 42  | <i>rasagiline 0.5mg tab</i>     | 51  | RETACRIT                   | 85 |
|  |     | <i>rasagiline 1mg tab</i>       | 51  | 10000UNIT/ML INJ           |    |
|  |     | RAVICTI 1.1GM/ML ORAL SOLN      | 78  | RETACRIT                   | 85 |
|  |     | REBIF 22MCG/0.5ML AUTO-INJECTOR | 100 | RETACRIT                   | 85 |
| QBRELIS 1MG/ML ORAL SOLN                   | 37  | REBIF 22MCG/0.5ML SYRINGE       | 100 | 20000UNIT/ML INJ           |    |
| QINLOCK 50MG TAB QUADRACEL INJ             | 48  | REBIF 44MCG/0.5ML AUTO-INJECTOR | 100 | RETACRIT 2000UNIT/ML       | 85 |
| <i>quetiapine 100mg tab</i>                | 54  | REBIF 44MCG/0.5ML SYRINGE       | 100 | INJ                        |    |
| <i>quetiapine 150mg er tab</i>             | 54  | REBIF REBIDOSE PACK             | 100 | RETACRIT 3000UNIT/ML       | 85 |
| <i>quetiapine 200mg er tab</i>             | 54  | REBIF TITRATION PACK            | 100 | INJ                        |    |
| <i>quetiapine 200mg tab</i>                | 54  | <i>reclipsen 28 day pack</i>    | 68  | RETEVMO 40MG CAP           | 48 |
| <i>quetiapine 25mg tab</i>                 | 54  | RECOMBIVAX                      | 106 | RETEVMO 80MG CAP           | 48 |
| <i>quetiapine 300mg er tab</i>             | 54  | 10MCG/ML INJ                    |     | REVLIMID 10MG CAP          | 89 |
| <i>quetiapine 300mg tab</i>                | 54  | RECOMBIVAX                      | 106 | REVLIMID 15MG CAP          | 89 |
| <i>quetiapine 400mg er tab</i>             | 54  | 10MCG/ML SYRINGE                |     | REVLIMID 2.5MG CAP         | 90 |
| <i>quetiapine 400mg tab</i>                | 54  | RECOMBIVAX                      | 106 | REVLIMID 20MG CAP          | 90 |
| <i>quetiapine 50mg er tab</i>              | 54  | 40MCG/ML INJ                    |     | REVLIMID 25MG CAP          | 90 |
| <i>quetiapine 50mg tab</i>                 | 54  | RECOMBIVAX                      | 106 | REVLIMID 5MG CAP           | 90 |
| <i>quinapril 10mg tab</i>                  | 37  | 5MCG/0.5ML SYRINGE              |     | REXULTI 0.25MG TAB         | 55 |
| <i>quinapril 20mg tab</i>                  | 37  | RECTIV 0.4% RECTAL              | 16  | REXULTI 0.5MG TAB          | 55 |
| <i>quinapril 40mg tab</i>                  | 37  | OINTMENT                        |     | REXULTI 1MG TAB            | 56 |
| <i>quinapril 5mg tab</i>                   | 37  | REGRANEX 0.01% GEL              | 75  | REXULTI 2MG TAB            | 56 |
| <i>quinidine gluconate 324mg er tab</i>    | 18  | RELENZA 5MG/BLISTER             | 59  | REXULTI 3MG TAB            | 56 |
| QUINIDINE SULFATE 200MG TAB                | 18  | INHALER                         |     | REXULTI 4MG TAB            | 56 |
| QUINIDINE SULFATE 300MG TAB                | 18  | RELISTOR 12MG/0.6ML INJ         | 82  | REYATAZ 50MG ORAL POWDER   | 57 |
| <i>quinine sulfate 324mg cap</i>           | 42  | RELISTOR 12MG/0.6ML SYRINGE     | 82  | REYVOW 100MG TAB           | 87 |
|  |     | RELISTOR 8MG/0.4ML SYRINGE      | 82  | REYVOW 50MG TAB            | 87 |
| R  |     |                                 |     | RHOPRESSA 0.02%            | 94 |
| RABAVERT 2.5UNIT/ML INJ                    | 106 | <i>repaglinide 0.5mg tab</i>    | 31  | OPHTH SOLN                 |    |
| <i>rabeprazole sodium 20mg dr tab</i>      | 104 | <i>repaglinide 1mg tab</i>      | 32  | <i>ribavirin 200mg cap</i> | 58 |
| <i>raloxifene 60mg tab</i>                 | 78  | <i>repaglinide 2mg tab</i>      | 32  | <i>ribavirin 200mg tab</i> | 58 |
| <i>ramelteon 8mg tab</i>                   | 86  | REPATHA 140MG/ML AUTO-INJECTOR  | 36  | RIDAURA 3MG CAP            | 11 |
| <i>ramipril 1.25mg cap</i>                 | 37  | REPATHA 140MG/ML SYRINGE        | 36  | <i>rifabutin 150mg cap</i> | 43 |
| <i>ramipril 10mg cap</i>                   | 37  |                                 |     | <i>rifampin 150mg cap</i>  | 43 |
|  |     |                                 |     | <i>rifampin 300mg cap</i>  | 43 |
|  |     |                                 |     | <i>rifampin 600mg inj</i>  | 43 |
|  |     |                                 |     | <i>riluzole 50mg tab</i>   | 92 |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                   |    |                                      |     |  |
|--|----|--------------------------------------|-----|--|
| RIMANTADINE 100MG TAB                    | 59 | <i>rizatriptan 10mg odt</i>          | 87  | RYBELSUS 3MG TAB                                 |
| RINVOQ 15MG ER TAB                       | 10 | <i>rizatriptan 10mg tab</i>          | 87  | RYBELSUS 7MG TAB                                 |
| <i>risedronate sodium 150mg tab</i>      | 77 | <i>rizatriptan 5mg odt</i>           | 87  | RYDAPT 25MG CAP                                  |
| <i>risedronate sodium 30mg tab</i>       | 77 | <i>rizatriptan 5mg tab</i>           | 87  | <b>S</b>   |
| <i>risedronate sodium 35mg (12) pack</i> | 77 | ROCKLATAN                            | 94  | <i>salmon calcitonin 200unit/act nasal spray</i> |
| <i>risedronate sodium 35mg (4) pack</i>  | 77 | 0.05-0.2MG/ML OPHTH SOLN             | 51  | SANDIMMUNE                                       |
| <i>risedronate sodium 35mg tab</i>       | 77 | <i>ropinirole 0.25mg tab</i>         | 51  | 100MG/ML ORAL SOLN                               |
| <i>risedronate sodium 5mg tab</i>        | 77 | <i>ropinirole 0.5mg tab</i>          | 51  | SANTYL 250UNIT/GM OINTMENT                       |
| <i>risedronate sodium 5mg tab</i>        | 77 | <i>ropinirole 12mg er tab</i>        | 51  | <i>sapropterin 100mg powder for oral soln</i>    |
| <i>risedronate sodium 5mg tab</i>        | 77 | <i>ropinirole 1mg tab</i>            | 51  | <i>sapropterin 100mg tab</i>                     |
| <i>risedronate sodium 5mg tab</i>        | 77 | <i>ropinirole 2mg er tab</i>         | 51  | <i>sapropterin 500mg powder for oral soln</i>    |
| <i>risedronate sodium 5mg tab</i>        | 77 | <i>ropinirole 2mg tab</i>            | 51  | SAVELLA 100MG TAB                                |
| <i>risedronate sodium 5mg tab</i>        | 77 | <i>ropinirole 3mg tab</i>            | 51  | SAVELLA 12.5MG TAB                               |
| <i>risedronate sodium 5mg tab</i>        | 77 | <i>ropinirole 4mg er tab</i>         | 51  | SAVELLA 25MG TAB                                 |
| RISPERDAL 12.5MG INJ                     | 53 | <i>ropinirole 4mg tab</i>            | 51  | SAVELLA 4-WEEK TITRATION PACK                    |
| RISPERDAL 25MG INJ                       | 53 | <i>ropinirole 5mg tab</i>            | 51  | SAVELLA 50MG TAB                                 |
| RISPERDAL 37.5MG INJ                     | 53 | <i>ropinirole 6mg er tab</i>         | 51  | scopolamine 0.0139mg/hr patch                    |
| RISPERDAL 50MG INJ                       | 53 | <i>ropinirole 8mg er tab</i>         | 51  | SECUADO 3.8MG/24HR PATCH                         |
| RISPERIDONE 0.25MG ODT                   | 53 | <i>rosuvastatin calcium 10mg tab</i> | 36  | SECUADO 5.7MG/24HR PATCH                         |
| <i>risperidone 0.25mg tab</i>            | 53 | <i>rosuvastatin calcium 20mg tab</i> | 36  | SECUADO 7.6MG/24HR PATCH                         |
| <i>risperidone 0.5mg odt</i>             | 53 | <i>rosuvastatin calcium 40mg tab</i> | 36  | SELEGILINE 5MG TAB                               |
| <i>risperidone 0.5mg tab</i>             | 53 | <i>rosuvastatin calcium 5mg tab</i>  | 36  | <i>selegiline 5mg cap</i>                        |
| <i>risperidone 1mg odt</i>               | 53 | ROTARIX SUSP                         | 106 | SELEGILINE 5MG TAB                               |
| <i>risperidone 1mg tab</i>               | 53 | ROTATEQ SUSP                         | 106 | <i>.selenium sulfide 2.5% shampoo</i>            |
| <i>risperidone 1mg/ml oral soln</i>      | 53 | <i>roweepra 500mg tab</i>            | 24  | SELZENTRY 150MG TAE                              |
| <i>risperidone 2mg odt</i>               | 53 | ROZLYTREK 100MG CAP                  | 48  | SELZENTRY 20MG/ML ORAL SOLN                      |
| <i>risperidone 2mg tab</i>               | 53 | ROZLYTREK 200MG CAP                  | 48  | SELZENTRY 25MG TAB                               |
| <i>risperidone 3mg odt</i>               | 53 | RUBRACA 200MG TAB                    | 48  | SELZENTRY 300MG TAE                              |
| <i>risperidone 3mg tab</i>               | 53 | RUBRACA 250MG TAB                    | 48  | SELZENTRY 75MG TAB                               |
| <i>risperidone 4mg odt</i>               | 53 | RUBRACA 300MG TAB                    | 48  | SEREVENT 50MCG/DOSE INHALER                      |
| <i>risperidone 4mg tab</i>               | 53 | RUCONEST 2100UNIT INJ                | 83  | <i>sertraline 100mg tab</i>                      |
| <i>ritonavir 100mg tab</i>               | 57 | <i>rufinamide 200mg tab</i>          | 24  | <i>sertraline 20mg/ml oral soln</i>              |
| <i>rivastigmine 0.192mg/hr patch</i>     | 99 | <i>rufinamide 400mg tab</i>          | 24  | <i>sertraline 25mg tab</i>                       |
| <i>rivastigmine 0.396mg/hr patch</i>     | 99 | <i>rufinamide 40mg/ml susp</i>       | 24  |  |
| <i>rivastigmine 0.554mg/hr patch</i>     | 99 | RUKOBIA 600MG ER TAB                 | 57  |  |
| <i>rivastigmine 1.5mg cap</i>            | 99 | RUZURGI 10MG TAB                     | 42  |  |
| <i>rivastigmine 3mg cap</i>              | 99 | RYBELSUS 14MG TAB                    | 31  |  |
| <i>rivastigmine 4.5mg cap</i>            | 99 |                                      |     |  |
| <i>rivastigmine 6mg cap</i>              | 99 |                                      |     |  |
| <i>rivelsa 91 day pack</i>               | 68 |                                      |     |  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                  |     |   |     |                                       |    |
|---|-----|---|-----|---------------------------------------|----|
| <i>sertraline 50mg tab</i>              | 27  | SIRTURO 20MG TAB                              | 43  | <i>sotalol 240mg tab</i>              | 60 |
| <i>setlakin 91 day pack</i>             | 68  | SIVEXTRO 200MG INJ                            | 42  | <i>sotalol 80mg tab</i>               | 60 |
| <i>sevelamer carbonate</i>              | 82  | SIVEXTRO 200MG TAB                            | 42  | <i>sotalol af 120mg tab</i>           | 60 |
| <i>2400mg powder for oral susp</i>      |     | SKYRIZI 150MG DOSE PACK 75MG/0.83ML           | 72  | <i>sotalol af 160mg tab</i>           | 60 |
| <i>sevelamer carbonate</i>              | 82  | SKYRIZI 150MG/ML AUTO-INJECTOR                | 72  | <i>sotalol af 80mg tab</i>            | 60 |
| <i>800mg powder for oral susp</i>       |     | SKYRIZI 150MG/ML                              | 72  | SPIRIVA RESPIMAT 1.25MCG/ACT INH      | 19 |
| <i>sevelamer carbonate</i>              | 82  | SYRINGE                                       |     | <i>spironolactone 100mg tab</i>       | 76 |
| <i>800mg tab</i>                        |     | SLYND 4MG PACK                                | 69  | <i>spironolactone 25mg tab</i>        | 76 |
| <i>sharobel 28 day 0.35mg pack</i>      | 69  | <i>sodium chloride 0.9% irrigation soln</i>   | 82  | <i>spironolactone 50mg tab</i>        | 76 |
| <i>SHINGRIX 50MCG/0.5ML INJ</i>         | 106 | <i>sodium chloride 30mg/ml inj</i>            | 89  | SPRITAM 1000MG TAB FOR ORAL SUSP      | 24 |
| <i>SIGNIFOR 0.3MG/ML INJ</i>            | 79  | <i>sodium chloride 4.5mg/ml inj</i>           | 89  | SPRITAM 250MG TAB FOR ORAL SUSP       | 24 |
| <i>SIGNIFOR 0.6MG/ML INJ</i>            | 79  | <i>sodium chloride 50mg/ml inj</i>            | 89  | SPRITAM 500MG TAB FOR ORAL SUSP       | 24 |
| <i>SIGNIFOR 0.9MG/ML INJ</i>            | 79  | <i>sodium chloride 9mg/ml inj</i>             | 89  | SPRITAM 750MG TAB FOR ORAL SUSP       | 24 |
| <i>sildenafil 20mg tab</i>              | 63  | <i>sodium phenylbutyrate</i>                  | 79  | SPRYCEL 100MG TAB                     | 48 |
| <i>silodosin 4mg cap</i>                | 83  | <i>3gm/tsp oral powder</i>                    |     | SPRYCEL 140MG TAB                     | 48 |
| <i>silodosin 8mg cap</i>                | 83  | <i>sodium polystyrene</i>                     | 91  | SPRYCEL 20MG TAB                      | 48 |
| <i>silver sulfadiazine 1% cream</i>     | 73  | <i>sulfonate 15000mg powder for oral susp</i> |     | SPRYCEL 50MG TAB                      | 48 |
| <i>SIMBRINZA 0.2-1% OPHTH SUSP</i>      | 93  | <i>SOFOSBUVIR 400MG/VELPATASVIR</i>           | 58  | SPRYCEL 70MG TAB                      | 48 |
| <i>SIMPONI 100MG/ML AUTO-INJECTOR</i>   | 11  | <i>100MG TAB solifenacin succinate</i>        | 105 | SPRYCEL 80MG TAB                      | 48 |
| <i>SIMPONI 100MG/ML SYRINGE</i>         | 11  | <i>10mg tab solifenacin succinate 5mg</i>     | 105 | SPS 15GM/60ML SUSP                    | 91 |
| <i>SIMPONI 50MG/0.5ML AUTO-INJECTOR</i> | 11  | <i>tab SOLIQUA PEN INJ</i>                    | 29  | <i>sonyx 28 day pack ssd 1% cream</i> | 68 |
| <i>SIMPONI 50MG/0.5ML SYRINGE</i>       | 11  | <i>SOLTAMOX 10MG/5ML ORAL SOLN</i>            | 45  | STALEVO                               | 51 |
| <i>simvastatin 10mg tab</i>             | 36  | <i>SOMAVER 10MG INJ</i>                       | 77  | 18.75-200-75MG TAB                    | 51 |
| <i>simvastatin 20mg tab</i>             | 36  | <i>SOMAVER 15MG INJ</i>                       | 77  | STALEVO                               | 51 |
| <i>simvastatin 40mg tab</i>             | 36  | <i>SOMAVER 20MG INJ</i>                       | 77  | 25-200-100MG TAB                      |    |
| <i>simvastatin 5mg tab</i>              | 36  | <i>SOMAVER 25MG INJ</i>                       | 77  | 31.25-200-125MG TAB                   |    |
| <i>simvastatin 80mg tab</i>             | 36  | <i>SOMAVER 30MG INJ</i>                       | 77  | STELARA 45MG/0.5ML                    | 72 |
| <i>sirolimus 0.5mg tab</i>              | 90  | <i>sorine 120mg tab</i>                       | 60  | INJ                                   |    |
| <i>sirolimus 1mg tab</i>                | 90  | <i>sorine 160mg tab</i>                       | 60  | STELARA 45MG/0.5ML                    | 72 |
| <i>sirolimus 1mg/ml oral soln</i>       | 90  | <i>sorine 240mg tab</i>                       | 60  | SYRINGE                               |    |
| <i>sirolimus 2mg tab</i>                | 90  | <i>sorine 80mg tab</i>                        | 60  | STELARA 90MG/ML                       | 72 |
| <i>SIRTURO 100MG TAB</i>                | 43  | <i>sotalol 120mg tab</i>                      | 60  | SYRINGE                               |    |
|   |     | <i>sotalol 160mg tab</i>                      | 60  | STIOLTO                               | 20 |
|   |     |   |     | 2.5-2.5MCG/ACT INH                    |    |
|   |     |   |     | STIVARGA 40MG TAB                     | 48 |
|   |     |   |     | STREPTOMYCIN                          | 10 |
|   |     |   |     | 1000MG INJ                            |    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice   |     |   |     |                                      |     |
|--|-----|---|-----|--------------------------------------|-----|
| STRIBILD<br>150-150-200-300MG                                | 58  | <i>sumatriptan 8mg/ml<br/>auto-injector</i> | 88  | SYNJARDY 5-1000MG                    | 30  |
| TAB  |     | <i>sumatriptan 8mg/ml<br/>cartridge</i>     | 88  | TAB                                  |     |
| SUCRAID 8500UNIT/ML  | 75  |   |     | SYNJARDY 5-500MG                     | 30  |
| ORAL SOLN  |     | SUNOSI 150MG TAB                            | 8   | TAB                                  |     |
| <i>sucralfate 1000mg tab</i>                                 | 104 | SUNOSI 75MG TAB                             | 8   | SYNRIBO 3.5MG INJ                    | 49  |
| <i>sucralfate 100mg/ml susp</i>                              | 104 | SUTENT 12.5MG CAP                           | 48  | SYNTROID 100MCG                      | 103 |
| <i>sulfacetamide sodium<br/>10% lotion</i>                   | 71  | SUTENT 25MG CAP                             | 48  | SYNTROID 112MCG                      | 103 |
| SULFACETAMIDE  | 94  | SUTENT 37.5MG CAP                           | 48  | TAB                                  |     |
| SODIUM 10% OPHTH<br>OINTMENT                                 |     | SUTENT 50MG CAP                             | 48  | SYNTROID 125MCG                      | 103 |
| <i>sulfacetamide sodium<br/>10% ophth soln</i>               | 94  | <i>syeda 28 day pack</i>                    | 68  | TAB                                  |     |
| SULFACETAMIDE/PRED   | 95  | SYMBICORT                                   | 20  | SYNTROID 137MCG                      | 103 |
| NISOLONE 10-0.25%  |     | 160-4.5MCG INHALER                          |     | TAB                                  |     |
| OPHTH SOLN   |     | SYMBICORT 80-4.5MCG                         | 20  | SYNTROID 150MCG                      | 103 |
| SULFADIAZINE 500MG   | 101 | INHALER                                     |     | TAB                                  |     |
| TAB  |     | SYMDEKO                                     | 101 | SYNTROID 175MCG                      | 103 |
| <i>sulfamethoxazole<br/>400mg/trimethoprim<br/>80mg tab</i>  | 41  | 50-75MG/75MG PACK                           |     | TAB                                  |     |
| <i>sulfamethoxazole<br/>800mg/trimethoprim<br/>160mg tab</i> | 41  | SYMDEKO TAB 4-WEEK                          | 101 | SYNTROID 200MCG                      | 103 |
| <i>sulfamethoxazole/trimeth<br/>oprim 200-40mg/5ml susp</i>  |     | PACK  |     | TAB                                  |     |
| SULFAMYLYON  | 73  | SYMDEKO 0.15MG/0.3ML                        | 107 | SYNTROID 25MCG                       | 103 |
| 85MG/GM CREAM  |     | SYRINGE                                     |     | TAB                                  |     |
| <i>sulfasalazine 500mg dr<br/>tab</i>                        | 81  | SYMDEKO 0.3MG/0.3ML                         | 107 | SYNTROID 300MCG                      | 103 |
| <i>sulfasalazine 500mg tab</i>                               | 81  | SYMPAZAN 10MG                               | 22  | TAB                                  |     |
| <i>sulindac 150mg tab</i>                                    | 12  | ORAL FILM                                   |     | SYNTROID 50MCG                       | 103 |
| <i>sulindac 200mg tab</i>                                    | 12  | SYMPAZAN 20MG                               | 22  | TAB                                  |     |
| <i>sumatriptan 100mg tab</i>                                 | 87  | ORAL FILM                                   |     | SYNTROID 75MCG                       | 103 |
| <i>sumatriptan 12mg/ml<br/>auto-injector</i>                 | 87  | SYMPAZAN 5MG ORAL                           | 23  | TAB                                  |     |
| <i>sumatriptan 12mg/ml<br/>cartridge</i>                     | 87  | FILM  |     | SYNTROID 88MCG                       | 103 |
| <i>sumatriptan 12mg/ml inj</i>                               | 87  | SYMPROIC 0.2MG TAB                          | 82  | TAB                                  |     |
| <i>sumatriptan 20mg/act<br/>nasal spray</i>                  | 87  | SYMTUZA                                     | 58  | <b>T</b>                             |     |
| <i>sumatriptan 25mg tab</i>                                  | 87  | 150-800-200-10MG TAB                        |     | TABLOID 40MG TAB                     | 43  |
| <i>sumatriptan 50mg tab</i>                                  | 88  | SYNAREL 2MG/ML                              | 78  | TABRECTA 150MG TAB                   | 48  |
| <i>sumatriptan 5mg/act<br/>nasal spray</i>                   | 88  | NASAL INHALER                               |     | TABRECTA 200MG TAB                   | 48  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | SYNJARDY 10-1000MG                          | 29  | <i>tacrolimus 0.03%<br/>ointment</i> | 74  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | ER TAB                                      |     | <i>tacrolimus 0.1% ointment</i>      | 75  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | SYNJARDY                                    | 30  | <i>tacrolimus 0.5mg cap</i>          | 90  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | 12.5-1000MG ER TAB                          |     | <i>tacrolimus 1mg cap</i>            | 91  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | SYNJARDY                                    | 30  | <i>tacrolimus 5mg cap</i>            | 91  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | 12.5-1000MG TAB                             |     | <i>tadalafil 20mg tab</i>            | 63  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | SYNJARDY 12.5-500MG                         | 30  | TAFINLAR 50MG CAP                    | 48  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | TAB   |     | TAFINLAR 75MG CAP                    | 48  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | SYNJARDY 25-1000MG                          | 30  | TAGRISSO 40MG TAB                    | 44  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | ER TAB                                      |     | TAGRISSO 80MG TAB                    | 44  |
| <i>sumatriptan 12.5-1000MG</i>                               |     | SYNJARDY 5-1000MG                           | 30  |                                      |     |
| <i>sumatriptan 12.5-1000MG</i>                               |     | ER TAB                                      |     |                                      |     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                               |     |  |     |   |     |
|--------------------------------------|-----|--|-----|---|-----|
| TAKHYRO 300MG/2ML INJ                | 83  | TENIVAC 4-10UNIT/ML SYRINGE                    | 104 | <i>tetracycline 500mg cap</i>           | 101 |
| TALTZ 80MG/ML AUTO-Injector          | 72  | <i>tenofovir disoproxil fumarate 300mg tab</i> | 58  | THALOMID 100MG CAP                      | 90  |
| TALTZ 80MG/ML SYRINGE                | 72  | TEPMETKO 225MG TAB                             | 48  | THALOMID 150MG CAP                      | 90  |
| TALZENNA 0.25MG CAP                  | 48  | <i>terazosin 10mg cap</i>                      | 38  | THALOMID 200MG CAP                      | 90  |
| TALZENNA 1MG CAP                     | 48  | <i>terazosin 1mg cap</i>                       | 38  | THALOMID 50MG CAP                       | 90  |
| <i>tamoxifen 10mg tab</i>            | 45  | <i>terazosin 2mg cap</i>                       | 38  | THEOPHYLLINE 300MG ER TAB               | 20  |
| <i>tamoxifen 20mg tab</i>            | 45  | <i>terazosin 5mg cap</i>                       | 38  | <i>theophylline 400mg er tab</i>        | 21  |
| <i>tamsulosin 0.4mg cap</i>          | 83  | <i>terbinafine 250mg tab</i>                   | 34  | <i>theophylline 5.33mg/ml oral soln</i> | 21  |
| TARGRETIN 1% GEL                     | 72  | <i>terbutaline sulfate 2.5mg tab</i>           | 20  | <i>theophylline 600mg er tab</i>        | 21  |
| <i>tarina 24 fe 1/20 28 day pack</i> | 68  | <i>terbutaline sulfate 5mg tab</i>             | 20  | THIOLA 100MG DR TAB                     | 83  |
| <i>tarina fe 1/20 28 day pack</i>    | 68  | <i>terconazole 0.4% vaginal cream</i>          | 106 | THIOLA 300MG DR TAB                     | 83  |
| TASIGNA 150MG CAP                    | 48  | <i>terconazole 0.8% vaginal cream</i>          | 106 | <i>thioridazine 100mg tab</i>           | 55  |
| TASIGNA 200MG CAP                    | 48  | <i>terconazole 80mg vaginal insert</i>         | 106 | <i>thioridazine 10mg tab</i>            | 55  |
| TASIGNA 50MG CAP                     | 48  | <i>testosterone 1%</i>                         | 15  | <i>thioridazine 25mg tab</i>            | 55  |
| TAVALISSE 100MG TAB                  | 83  | <i>(12.5mg/act) gel pump</i>                   | 15  | <i>thioridazine 50mg tab</i>            | 55  |
| TAVALISSE 150MG TAB                  | 83  | <i>tazarotene 0.1% cream</i>                   | 16  | <i>thiothixene 10mg cap</i>             | 56  |
| <i>tazicef 1gm inj</i>               | 65  | <i>testosterone 1% (25mg) gel packet</i>       | 16  | <i>thiothixene 1mg cap</i>              | 56  |
| <i>tazicef 2gm inj</i>               | 65  | <i>testosterone 1% (50mg) gel packet</i>       | 16  | <i>thiothixene 2mg cap</i>              | 56  |
| <i>tazicef 6gm inj</i>               | 65  | <i>tiadylt 120mg er cap</i>                    | 62  | <i>thiothixene 5mg cap</i>              | 56  |
| TAZORAC 0.05% CREAM                  | 73  | <i>testosterone 1% (50mg) gel packet</i>       | 16  | <i>tiadylt 180mg er cap</i>             | 62  |
| <i>taztia 120mg er cap</i>           | 62  | <i>tiadylt 240mg er cap</i>                    | 62  | <i>tiadylt 300mg er cap</i>             | 62  |
| <i>taztia 180mg er cap</i>           | 62  | <i>tiadylt 360mg er cap</i>                    | 62  | <i>tiadylt 420mg er cap</i>             | 62  |
| <i>taztia 240mg er cap</i>           | 62  | <i>tiagabine 12mg tab</i>                      | 25  | <i>tiagabine 16mg tab</i>               | 25  |
| <i>taztia 300mg er cap</i>           | 62  | <i>tiagabine 2mg tab</i>                       | 25  | <i>tiagabine 4mg tab</i>                | 25  |
| <i>taztia 360mg er cap</i>           | 62  | <i>timolol 0.25% ophth gel</i>                 | 93  | TIBSOVO 250MG TAB                       | 48  |
| TAZVERIK 200MG TAB                   | 48  | <i>tiagabine 16mg tab</i>                      | 25  | TIGECYCLINE 50MG INJ                    | 101 |
| TDVAX 4-4UNIT/ML INJ                 | 104 | <i>timolol 0.25% ophth soln</i>                | 93  | <i>tilia fe pack</i>                    | 68  |
| TEFLARO 400MG INJ                    | 65  | <i>timolol 0.5% 24hr ophth soln</i>            | 93  | <i>timolol 0.5% ophth gel</i>           | 93  |
| TEFLARO 600MG INJ                    | 65  | <i>TESTOSTERONE</i>                            | 16  | <i>timolol 0.5% ophth soln</i>          | 93  |
| TEGSEDI 284MG/1.5ML SYRINGE          | 100 | <i>ENANTHATE 200MG/ML INJ</i>                  | 16  | <i>timolol 10mg tab</i>                 | 60  |
| <i>telmisartan 20mg tab</i>          | 37  | <i>tetraabenazine 12.5mg tab</i>               | 99  | <i>timolol 20mg tab</i>                 | 60  |
| <i>telmisartan 40mg tab</i>          | 37  | <i>tetraabenazine 25mg tab</i>                 | 99  | <i>timolol 5mg tab</i>                  | 60  |
| <i>telmisartan 80mg tab</i>          | 38  | <i>tetracycline 250mg cap</i>                  | 101 | <i>tinidazole 250mg tab</i>             | 40  |
| <i>temazepam 15mg cap</i>            | 85  |  |     |   |     |
| <i>temazepam 30mg cap</i>            | 85  |  |     |   |     |
| TEMIXYS 300-300MG TAB                | 58  |  |     |   |     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                 |     |                                     |    |   |
|--|-----|-------------------------------------|----|---|
| <i>tinidazole 500mg tab</i>            | 41  | <i>tramadol 100mg er tab</i>        | 14 | TREMFYA 100MG/ML 73   |
| <i>tiopronin 100mg tab</i>             | 83  | <i>tramadol 100mg er tab</i>        | 14 | AUTO-INJECTOR   |
| TIVICAY 10MG TAB                       | 58  | (matrix delivery)                   |    | TREMFYA 100MG/ML 73   |
| TIVICAY 25MG TAB                       | 58  | <i>tramadol 200mg er tab</i>        | 14 | SYRINGE   |
| TIVICAY 50MG TAB                       | 58  | <i>tramadol 200mg er tab</i>        | 14 | TRESIBA 100UNIT/ML 31   |
| TIVICAY 5MG TAB FOR ORAL SUSP          | 58  | (matrix delivery)                   |    | INJ   |
| <i>tizanidine 2mg tab</i>              | 91  | <i>tramadol 300mg er tab</i>        | 14 | TRESIBA 100UNIT/ML 31   |
| <i>tizanidine 4mg tab</i>              | 91  | (matrix delivery)                   |    | PEN INJ   |
| TOBRADEX 0.1-0.3% OPHTH OINTMENT       | 95  | <i>tramadol 50mg tab</i>            | 14 | TRESIBA 200UNIT/ML 31   |
| <i>tobramycin 0.3% ophth soln</i>      | 94  | <i>trandolapril 1mg tab</i>         | 37 | PEN INJ   |
| TOBRAMYCIN 10MG/ML INJ                 | 10  | TRANDOLAPRIL 1MG/VERAPAMIL          | 40 | <i>tretinoin 0.01% gel</i> 71                                 |
| <i>tobramycin 40mg/ml inj</i>          | 10  | 240MG ER TAB                        |    | <i>tretinoin 0.025% cream</i> 71                              |
| <i>tobramycin 60mg/ml inh soln</i>     | 10  | <i>trandolapril 2mg tab</i>         | 37 | <i>tretinoin 0.025% gel</i> 71                                |
| <i>tolcapone 100mg tab</i>             | 50  | <i>trandolapril</i>                 | 40 | <i>tretinoin 0.04% gel</i> 71                                 |
| <i>tolterodine tartrate 1mg tab</i>    | 105 | <i>2mg/verapamil 240mg er tab</i>   |    | <i>tretinoin 0.05% cream</i> 71                               |
| <i>tolterodine tartrate 2mg er cap</i> | 105 | <i>trandolapril 4mg tab</i>         | 37 | <i>tretinoin 0.05% gel</i> 71                                 |
| <i>tolterodine tartrate 2mg tab</i>    | 105 | <i>trandolapril</i>                 | 40 | <i>tretinoin 0.1% cream</i> 71                                |
| <i>tolterodine tartrate 4mg er cap</i> | 105 | <i>4mg/verapamil 240mg er tab</i>   |    | <i>tretinoin 0.1% gel</i> 71                                  |
| <i>topiramate 100mg tab</i>            | 24  | <i>tranexamic acid 650mg tab</i>    | 85 | <i>tretinoin 10mg cap</i> 49                                  |
| <i>topiramate 15mg cap</i>             | 24  | <i>tranylcypromine 10mg tab</i>     | 26 | <i>triamicinolone acetonide 0.025% cream</i> 74               |
| <i>topiramate 200mg tab</i>            | 25  | TRAVASOL 10% INJ                    | 93 | <i>triamicinolone acetonide 0.025% lotion</i> 74              |
| <i>topiramate 25mg cap</i>             | 25  | <i>travoprost 0.004% ophth soln</i> | 95 | <i>triamicinolone acetonide 0.025% ointment</i> 74            |
| <i>topiramate 25mg tab</i>             | 25  | <i>trazodone 100mg tab</i>          | 27 | <i>triamicinolone acetonide 0.1% cream</i> 74                 |
| <i>topiramate 50mg tab</i>             | 25  | <i>trazodone 150mg tab</i>          | 27 | <i>triamicinolone acetonide 0.1% lotion</i> 74                |
| <i>toremifene 60mg tab</i>             | 45  | <i>trazodone 50mg tab</i>           | 27 | <i>triamicinolone acetonide 0.1% ointment</i> 74              |
| <i>torsemide 100mg tab</i>             | 76  | TRECATOR 250MG TAB                  | 43 | <i>triamicinolone acetonide 0.5% cream</i> 91                 |
| <i>torsemide 10mg tab</i>              | 76  | TRELEGY ELLIPTA                     | 20 | <i>triamicinolone acetonide 0.5% ointment</i> 74              |
| <i>torsemide 20mg tab</i>              | 76  | 100-62.5-25MCG                      |    | <i>triamicinolone acetonide 0.5% oral paste</i> 74            |
| <i>torsemide 5mg tab</i>               | 76  | INHALER                             |    | <i>triamicinolone acetonide 0.5% triamterene 100mg cap</i> 76 |
| TOUJE 300UNIT/ML PEN INJ               | 31  | TRELEGY ELLIPTA                     | 20 | <i>triamicinolone acetonide 0.5% triamterene 50mg cap</i> 76  |
| TOUJE MAX 300UNIT/ML PEN INJ (3ML)     | 31  | 200-62.5-25 MCG                     |    | <i>triamicinolone acetonide 0.125mg tab</i> 86                |
| TRACLEER 32MG TAB FOR ORAL SUSP        | 63  | INHALER                             |    | <i>triamicinolone acetonide 0.25mg tab</i> 86                 |
| TRADJENTA 5MG TAB                      | 30  | TRELSTAR 11.25MG INJ                | 45 | <i>triamicinolone acetonide 0.1% cream</i> 74                 |
|  |     | TRELSTAR 22.5MG INJ                 | 45 | <i>triamicinolone acetonide 0.5% cream</i> 74                 |
|  |     | TRELSTAR 3.75MG INJ                 | 45 | <i>trientine 250mg cap</i> 89                                 |
|  |     |                                     |    | <i>tri-estarrylla 28 day pack</i> 68                          |
|  |     |                                     |    | <i>trifluoperazine 10mg tab</i> 55                            |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                    |     |                                      |     |                                |     |
|---|-----|--------------------------------------|-----|--------------------------------|-----|
| <i>trifluoperazine 1mg tab</i>            | 55  | TROPHAMINE 10% INJ                   | 93  | <i>unithroid 50mcg tab</i>     | 103 |
| <i>trifluoperazine 2mg tab</i>            | 55  | <i>trospium chloride 20mg tab</i>    | 105 | <i>unithroid 75mcg tab</i>     | 103 |
| <i>trifluoperazine 5mg tab</i>            | 55  | <i>trospium chloride 60mg er cap</i> | 105 | <i>unithroid 88mcg tab</i>     | 103 |
| TRIFLURIDINE 1%                           | 94  | TRULANCE 3MG TAB                     | 81  | UPTRAVI 1000MCG TAB            | 63  |
| OPHTH SOLN                                |     | TRULICITY                            | 31  | UPTRAVI 1200MCG TAB            | 63  |
| <i>trihexyphenidyl 0.4mg/ml oral soln</i> | 50  | 0.75MG/0.5ML AUTO-INJECTOR           |     | UPTRAVI 1400MCG TAB            | 63  |
| <i>trihexyphenidyl 2mg tab</i>            | 50  | TRULICITY                            | 31  | UPTRAVI 1600MCG TAB            | 63  |
| <i>trihexyphenidyl 5mg tab</i>            | 50  | 1.5MG/0.5ML AUTO-INJECTOR            |     | UPTRAVI 200MCG TAB             | 63  |
| TRIJARDY 10-5-1000MG ER TAB               | 30  | TRULICITY 3MG/0.5ML AUTO-INJECTOR    | 31  | UPTRAVI 400MCG TAB             | 63  |
| TRIJARDY 12.5-2.5-1000MG ER TAB           |     | TRULICITY 4.5MG/0.5ML AUTO-INJECTOR  | 31  | UPTRAVI 600MCG TAB             | 63  |
| TRIJARDY 25-5-1000MG ER TAB               | 30  | TRUMENBA SYRINGE                     | 105 | UPTRAVI 800MCG TAB             | 64  |
| TRIKAFTA 100-50-75MG/150MG PACK           | 101 | TUKYSA 150MG TAB                     | 43  | UPTRAVI TITRATION PACK         | 64  |
| <i>tri-legest 28 day pack</i>             | 68  | TUKYSA 50MG TAB                      | 43  | <i>ursodiol 250mg tab</i>      | 81  |
| <i>tri-lo- estarrylla 28 day pack</i>     | 68  | TURALIO 200MG CAP                    | 48  | <i>ursodiol 300mg cap</i>      | 81  |
| <i>tri-lo-sprintec 28 day pack</i>        | 68  | TWINRIX SYRINGE                      | 106 | <i>ursodiol 500mg tab</i>      | 81  |
| <i>trilyte powder for oral soln</i>       | 86  | TYBOST 150MG TAB                     | 58  |                                |     |
| <i>trimethobenzamide 300mg cap</i>        | 33  | TYMLOS                               | 77  |                                |     |
| <i>trimethoprim 100mg tab</i>             | 41  | 3120MCG/1.56ML PEN INJ               |     |                                |     |
| <i>tri-mili 28 day pack</i>               | 68  | TYPHIM VI 25MCG/0.5ML INJ            | 105 |                                |     |
| <i>trimipramine 100mg cap</i>             | 29  | TYPHIM VI 25MCG/0.5ML SYRINGE        | 105 |                                |     |
| <i>trimipramine 25mg cap</i>              | 29  |                                      |     |                                |     |
| <i>trimipramine 50mg cap</i>              | 29  |                                      |     |                                |     |
| TRINTELLIX 10MG TAB                       | 27  | <b>U</b>                             |     |                                |     |
| TRINTELLIX 20MG TAB                       | 27  | UBRELVY 100MG TAB                    | 87  | VALTOCO 10MG DOSE              | 23  |
| TRINTELLIX 5MG TAB                        | 27  | UBRELVY 50MG TAB                     | 87  | KIT 10MG/0.1ML PACK            |     |
| <i>tri-nymyo 28 day pack</i>              | 68  | UCERIS 2MG/ACT RECTAL FOAM           | 16  | VALTOCO 15MG DOSE              | 23  |
| <i>tri-previfem 28 day pack</i>           | 68  | UKONIQ 200MG TAB                     | 48  | KIT 7.5MG/0.1ML PACK           |     |
| <i>tri-sprintec 28 day pack</i>           | 68  | <i>unithroid 100mcg tab</i>          | 103 | VALTOCO 20MG DOSE              | 23  |
| TRIUMEQ 600-50-300MG TAB                  | 58  | <i>unithroid 112mcg tab</i>          | 103 | KIT 10MG/0.1ML PACK            |     |
| <i>trivora 28 day pack</i>                | 69  | <i>unithroid 125mcg tab</i>          | 103 | VALTOCO 5MG DOSE               | 23  |
| <i>tri-vylitra 28 day pack</i>            | 69  | <i>unithroid 137mcg tab</i>          | 103 | KIT 5MG/0.1ML PACK             |     |
| <i>tri-vylitra lo 28 day pack</i>         | 69  | <i>unithroid 150mcg tab</i>          | 103 | <i>vancomycin 1000mg inj</i>   | 41  |
|   |     | <i>unithroid 175mcg tab</i>          | 103 | <i>vancomycin 100mg/ml inj</i> | 41  |
|   |     | <i>unithroid 200mcg tab</i>          | 103 | <i>vancomycin 125mg cap</i>    | 41  |
|   |     | <i>unithroid 25mcg tab</i>           | 103 | <i>vancomycin 250mg cap</i>    | 41  |
|   |     | <i>unithroid 300mcg tab</i>          | 103 | VANCOMYCIN 250MG INJ           | 41  |
|   |     |                                      |     | <i>vancomycin 500mg inj</i>    | 41  |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                |     |                                       |    |                                  |    |
|---------------------------------------|-----|---------------------------------------|----|----------------------------------|----|
| <i>vancomycin 750mg inj</i>           | 41  | VENTAVIS 20MCG/ML                     | 63 | VIMPAT 100MG TAB                 | 25 |
| <i>vandazole 0.75% vaginal gel</i>    | 106 | INH SOLN                              |    | VIMPAT 10MG/ML                   | 25 |
| VAQTA 25UNIT/0.5ML INJ                | 106 | VENTOLIN 108MCG                       | 20 | ORAL SOLN                        |    |
| VAQTA 25UNIT/0.5ML SYRINGE            | 106 | HFA INHALER                           |    | VIMPAT 150MG TAB                 | 25 |
| VAQTA 50UNIT/ML INJ                   | 106 | VERAPAMIL 100MG ER                    | 62 | VIMPAT 200MG TAB                 | 25 |
| VAQTA 50UNIT/ML SYRINGE               | 106 | CAP                                   |    | VIMPAT 50MG TAB                  | 25 |
| VARIVAX 1350PFU/0.5ML INJ             | 106 | <i>verapamil 120mg er cap</i>         | 62 | VIRACEPT 250MG TAB               | 58 |
| VARIZIG 125UNIT/1.2ML INJ             | 96  | <i>verapamil 120mg er tab</i>         | 62 | VIRACEPT 625MG TAB               | 58 |
| VARUBI 90MG TAB                       | 33  | <i>verapamil 120mg tab</i>            | 62 | VIREAD 150MG TAB                 | 58 |
| VASCEPA 0.5GM CAP                     | 35  | <i>verapamil 180mg er cap</i>         | 62 | VIREAD 200MG TAB                 | 58 |
| VASCEPA 1GM CAP                       | 35  | <i>verapamil 180mg er tab</i>         | 62 | VIREAD 250MG TAB                 | 58 |
| <i>velivet 28 day pack</i>            | 69  | VERAPAMIL 200MG ER                    | 62 | VIREAD 40MG/GM                   | 58 |
| VELTASSA 16.8GM POWDER FOR ORAL SUSP  | 91  | CAP                                   |    | ORAL POWDER                      |    |
| VELTASSA 25.2GM POWDER FOR ORAL SUSP  | 91  | <i>verapamil 240mg er cap</i>         | 62 | VITRAKVI 100MG CAP               | 49 |
| VELTASSA 8.4GM POWDER FOR ORAL SUSP   | 91  | <i>verapamil 240mg er tab</i>         | 62 | VITRAKVI 20MG/ML                 | 49 |
| VERQUVO 10MG TAB                      |     | VERAPAMIL 300MG ER                    | 62 | ORAL SOLN                        |    |
| VERQUVO 2.5MG TAB                     |     | CAP                                   |    | VITRAKVI 25MG CAP                | 49 |
| VERQUVO 5MG TAB                       |     | VERAPAMIL 360MG ER                    | 62 | VIVITROL 380MG INJ               | 33 |
| VERSACLOZ 50MG/ML SUSP                |     | CAP                                   |    | VIZIMPRO 15MG TAB                | 44 |
| VERZENIO 100MG TAB                    |     | <i>verapamil 40mg tab</i>             | 62 | VIZIMPRO 30MG TAB                | 44 |
| VERZENIO 150MG TAB                    |     | <i>verapamil 80mg tab</i>             | 62 | VIZIMPRO 45MG TAB                | 44 |
| VERZENIO 200MG TAB                    |     | VERQUVO 10MG TAB                      | 64 | <i>voriconazole 200mg inj</i>    | 34 |
| VERZENIO 50MG TAB                     |     | VERQUVO 2.5MG TAB                     | 64 | <i>voriconazole 200mg tab</i>    | 34 |
| VERZENIO 50MG TAB                     |     | VERQUVO 5MG TAB                       | 64 | <i>voriconazole 40mg/ml susp</i> | 34 |
| VERZENIO 50MG TAB                     |     | VERSACLOZ 50MG/ML SUSP                | 54 | <i>voriconazole 50mg tab</i>     | 34 |
| VERZENIO 100MG TAB                    |     | VERZENIO 100MG TAB                    | 49 | VOSEVI 400-100-100MG TAB         | 58 |
| VERZENIO 150MG TAB                    |     | VERZENIO 150MG TAB                    | 49 | VOTRIENT 200MG TAB               | 49 |
| VERZENIO 200MG TAB                    |     | VERZENIO 200MG TAB                    | 49 | VRAYLAR 1.5/3MG MIXED PACK       | 52 |
| VERZENIO 50MG TAB                     |     | VERZENIO 50MG TAB                     | 49 | VRAYLAR 1.5MG CAP                | 52 |
| VESTURA 3-0.02mg pack                 |     | VESTURA 3-0.02mg pack                 | 69 | VRAYLAR 3MG CAP                  | 52 |
| VIBERZI 100MG TAB                     |     | VIBERZI 100MG TAB                     | 82 | VRAYLAR 4.5MG CAP                | 52 |
| VIBERZI 75MG TAB                      |     | VIBERZI 75MG TAB                      | 82 | VRAYLAR 6MG CAP                  | 52 |
| VICTOZA 18MG/3ML PEN INJ              |     | VICTOZA 18MG/3ML PEN INJ              | 31 | <i>vyfemla 28 day pack</i>       | 69 |
| VIENNA 28 day pack                    |     | VIENNA 28 day pack                    | 69 | <i>vylibra 28 day pack</i>       | 69 |
| VIGABATRIN 500mg powder for oral soln |     | VIGABATRIN 500mg powder for oral soln | 25 | VYNDAMAX 61MG CAP                | 64 |
| VIGABATRIN 500mg tab                  |     | VIGABATRIN 500mg tab                  | 25 | VYNDAQEL 20MG CAP                | 64 |
| VIGADRONE 500mg powder for oral soln  |     | VIGADRONE 500mg powder for oral soln  | 25 | <b>W</b>                         |    |
| VIIBRYD 10/20MG STARTER PACK          |     | VIIBRYD 10/20MG STARTER PACK          | 27 | WAKIX 17.8MG TAB                 | 8  |
| VIIBRYD 10MG TAB                      | 63  | VIIBRYD 10MG TAB                      | 27 | WAKIX 4.45MG TAB                 | 8  |
| VIIBRYD 20MG TAB                      |     | VIIBRYD 20MG TAB                      | 27 | warfarin sodium 10mg tab         | 21 |
| VIIBRYD 40MG TAB                      |     | VIIBRYD 40MG TAB                      | 27 | warfarin sodium 1mg tab          | 21 |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                                       |    |                                 |    |                                    |     |
|--|----|---------------------------------|----|------------------------------------|-----|
| <i>warfarin sodium 2.5mg tab</i>             | 21 | XGEVA 120MG/1.7ML INJ           | 77 | XPOVIO 80 MG ONCE WEEKLY           | 45  |
| <i>warfarin sodium 2mg tab</i>               | 21 | XIFAXAN 200MG TAB               | 41 | XPOVIO 80 MG TWICE WEEKLY          | 45  |
| <i>warfarin sodium 3mg tab</i>               | 21 | XIFAXAN 550MG TAB               | 41 | WEEKLY                             |     |
| <i>warfarin sodium 4mg tab</i>               | 21 | XIGDUO 10-1000MG ER TAB         | 30 | XPOVIO 80MG ONCE                   | 45  |
| <i>warfarin sodium 5mg tab</i>               | 21 | XIGDUO 10-500MG ER TAB          | 30 | WEEKLY CARTON                      |     |
| <i>warfarin sodium 6mg tab</i>               | 21 | XIGDUO 2.5-1000MG ER TAB        | 30 | (8-PACK)                           |     |
| <i>warfarin sodium 7.5mg tab</i>             | 21 | XIGDUO 2.5-1000MG ER TAB        | 30 | XTAMPZA 13.5MG ER CAP              | 14  |
| <i>wymzya fe 28 day pack</i>                 | 69 | XIGDUO 5-1000MG ER TAB          | 30 | XTAMPZA 18MG ER CAP                | 14  |
| <b>X</b>                                     |    | XIGDUO 5-500MG ER TAB           | 30 | XTAMPZA 27MG ER CAP                | 14  |
| <i>XALKORI 200MG CAP</i>                     | 49 | XOFLUZA 20MG THERAPY PACK       | 59 | XTAMPZA 36MG ER CAP                | 14  |
| <i>XALKORI 250MG CAP</i>                     | 49 | XOFLUZA 40MG THERAPY PACK       | 59 | XTAMPZA 9MG ER CAP                 | 14  |
| <i>XARELTO 10MG TAB</i>                      | 21 | XOLAIR 150MG INJ                | 19 | XTANDI 40MG CAP                    | 45  |
| <i>XARELTO 15MG TAB</i>                      | 21 | XOLAIR 150MG/ML SYRINGE         | 19 | <i>xulane 150-35mcg/24hr patch</i> | 69  |
| <i>XARELTO 2.5MG TAB</i>                     | 21 | XOLAIR 75MG/0.5ML SYRINGE       | 19 | XULTOPHY 100UNIT-3.6MG/ML PEN INJ  | 30  |
| <i>XARELTO 20MG TAB</i>                      | 21 | XOSPATA 40MG TAB                | 49 | XYREM 500MG/ML ORAL SOLN           | 98  |
| <i>XARELTO KIT PACK</i>                      | 21 | XPOVIO 100 MG ONCE WEEKLY       | 45 | <b>Y</b>                           |     |
| <i>XATMEP 2.5MG/ML ORAL SOLN</i>             | 43 | XPOVIO 100MG ONCE WEEKLY CARTON | 45 | <i>YF-VAX INJ</i>                  | 106 |
| <i>XCOPRI 100MG TAB</i>                      | 25 | (8-PACK)                        | 45 | <b>Z</b>                           |     |
| <i>XCOPRI 12.5/25MG TITRATION PACK</i>       | 25 | XPOVIO 40MG ONCE WEEKLY CARTON  | 45 | <i>zafemy 150-35mcg/24hr patch</i> | 69  |
| <i>XCOPRI 150/200MG PACK TAB</i>             | 25 | (4-PACK)                        | 45 | <i>zafirlukast 10mg tab</i>        | 19  |
| <i>XCOPRI 150/200MG TITRATION PACK</i>       | 25 | XPOVIO 40MG ONCE WEEKLY PACK    | 45 | <i>zafirlukast 20mg tab</i>        | 19  |
| <i>XCOPRI 150MG TAB</i>                      | 25 | XPOVIO 40MG TWICE WEEKLY        | 45 | <i>zaleplon 10mg cap</i>           | 86  |
| <i>XCOPRI 200MG TAB</i>                      | 25 | WEEKLY CARTON                   | 45 | <i>zaleplon 5mg cap</i>            | 86  |
| <i>XCOPRI 50/100MG TITRATION PACK</i>        | 25 | (8-PACK)                        | 45 | <i>zarah pack</i>                  | 69  |
| <i>XCOPRI 50/200MG PACK TAB</i>              | 25 | XPOVIO 40MG TWICE WEEKLY        | 45 | ZARXIO 300MCG/0.5ML SYRINGE        | 85  |
| <i>XCOPRI 50MG TAB</i>                       | 25 | WEEKLY PACK                     | 45 | ZARXIO 480MCG/0.8ML SYRINGE        | 85  |
| <i>XCOPRI TAB 100/150MG MAINTENANCE PACK</i> | 25 | XPOVIO 60MG ONCE WEEKLY         | 45 | ZEJULA 100MG CAP                   | 49  |
| <i>XELJANZ 10MG TAB</i>                      | 10 | WEEKLY PACK                     | 45 | ZELBORAF 240MG TAB                 | 49  |
| <i>XELJANZ 11MG ER TAB</i>                   | 10 | XPOVIO 60 MG ONCE WEEKLY        | 45 | ZEMAIRA 1000MG INJ                 | 100 |
| <i>XELJANZ 1MG/ML ORAL SOLN</i>              | 10 | WEEKLY                          | 45 | <i>zenatane 10mg cap</i>           | 71  |
| <i>XELJANZ 22MG ER TAB</i>                   | 10 | XPOVIO 60MG ONCE WEEKLY         | 45 | <i>zenatane 20mg cap</i>           | 71  |
| <i>XELJANZ 5MG TAB</i>                       | 10 | WEEKLY CARTON                   | 45 | <i>zenatane 30mg cap</i>           | 71  |
| <i>XERMELO 250MG TAB</i>                     | 82 | (4-PACK)                        | 45 | <i>zenatane 40mg cap</i>           | 71  |
|  |    | XPOVIO 60MG TWICE WEEKLY        | 45 |                                    |     |
|  |    | WEEKLY PACK                     | 45 |                                    |     |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

| Índice                              |    |                                |    |
|-------------------------------------|----|--------------------------------|----|
| ZENPEP                              | 75 | ZOMIG 5MG NASAL SPRAY          | 88 |
| 105000-25000-79000UNI               |    | <i>zonisamide 100mg cap</i>    | 25 |
| T DR CAP                            |    | <i>zonisamide 25mg cap</i>     | 25 |
| ZENPEP                              | 75 | <i>zonisamide 50mg cap</i>     | 25 |
| 14000-3000-10000UNIT                |    | ZOSYN 2000-250MG INJ           | 97 |
| DR CAP                              |    | ZOSYN 3000-375MG INJ           | 98 |
| ZENPEP                              | 75 | <i>zovia 1/35e 28 day pack</i> | 69 |
| 24000-5000-17000UNIT                |    | ZUBSOLV 1.4-0.36MG             | 15 |
| DR CAP                              |    | SL TAB                         |    |
| ZENPEP                              | 75 | ZUBSOLV 11.4-2.9MG             | 15 |
| 40000-126000-168000U                |    | SL TAB                         |    |
| NIT DR CAP                          |    | ZUBSOLV 2.9-0.71MG             | 15 |
| ZENPEP                              | 75 | SL TAB                         |    |
| 42000-10000-32000UNIT               |    | ZUBSOLV 5.7-1.4MG SL           | 15 |
| DR CAP                              |    | TAB                            |    |
| ZENPEP                              | 75 | ZUBSOLV 8.6-2.1MG SL           | 15 |
| 63000-15000-47000UNIT               |    | TAB                            |    |
| DR CAP                              |    | ZYDELIG 100MG TAB              | 49 |
| ZENPEP                              | 75 | ZYDELIG 150MG TAB              | 49 |
| 84000-20000-63000UNIT               |    | ZYKADIA 150MG TAB              | 49 |
| DR CAP                              |    | ZYLET 0.5-0.3% OPHTH           | 95 |
| ZERBAXA 1000-500MG                  | 64 | SUSP                           |    |
| INJ                                 |    | ZYPREXA 210MG INJ              | 54 |
| <i>zidovudine 100mg cap</i>         | 58 |                                |    |
| <i>zidovudine 10mg/ml oral soln</i> | 58 |                                |    |
| <i>zidovudine 300mg tab</i>         | 58 |                                |    |
| ZIEXTENZO 6MG/0.6ML                 | 85 |                                |    |
| SYRINGE                             |    |                                |    |
| <i>ziprasidone 20mg cap</i>         | 52 |                                |    |
| <i>ziprasidone 20mg inj</i>         | 52 |                                |    |
| <i>ziprasidone 40mg cap</i>         | 52 |                                |    |
| <i>ziprasidone 60mg cap</i>         | 52 |                                |    |
| <i>ziprasidone 80mg cap</i>         | 52 |                                |    |
| ZIRGAN 0.15% OPHTH GEL              | 94 |                                |    |
| ZOLINZA 100MG CAP                   | 49 |                                |    |
| <i>zolmitriptan 2.5mg odt</i>       | 88 |                                |    |
| <i>zolmitriptan 2.5mg tab</i>       | 88 |                                |    |
| <i>zolmitriptan 5mg odt</i>         | 88 |                                |    |
| <i>zolmitriptan 5mg tab</i>         | 88 |                                |    |
| <i>zolpidem tartrate 10mg tab</i>   | 86 |                                |    |
| <i>zolpidem tartrate 5mg tab</i>    | 86 |                                |    |
| ZOMIG 2.5MG NASAL SPRAY             | 88 |                                |    |

Usted puede encontrar información sobre el significado de los símbolos y las abreviaciones encontrados en esta tabla consultando el principio de esta tabla.

# Community Health Choice (HMO D-SNP)

## Member Services

| Method         | Member Services – Contact Information  |
|----------------|--|
| <b>CALL</b>    | (833) 276-8306<br><br>Calls to this number are free. Community Health Choice HMO D-SNP is open October 1 to March 31, 8:00 am to 8:00 pm, 7 days a week and April 1 through September 30, Monday through Friday, 8:00 am to 8:00 pm. On certain holidays your call will be handled by our automated phone system.<br><br>Member Services also has free language interpreter services available for non-English speakers. |
| <b>TTY</b>     | 711<br><br>This number requires special telephone equipment and is only for people who have difficulties with hearing or speaking.<br>Calls to this number are free.<br><br>The National Relay is available 24 hours a day, 7 days a week.   |
| <b>FAX</b>     | (713) 295-7041   |
| <b>WRITE</b>   | P.O. Box 301413<br>Houston, TX 77230   |
| <b>WEBSITE</b> | <a href="http://www.communityhealthchoice.org/Medicare">www.communityhealthchoice.org/Medicare</a>   |

## Texas Health Information, Counseling and Advocacy Program (HICAP)

Health Information, Counseling and Advocacy Program (HICAP) is a state program that gets money from the Federal government to give free local health insurance counseling to people with Medicare.

| Method         | Contact Information   |
|----------------|---|
| <b>CALL</b>    | (800) 252-9240  |
| <b>TTY</b>     | 711   |
| <b>WRITE</b>   | Health Information, Counseling and Advocacy Program (HICAP)<br>P.O. Box 149104<br>Austin, TX 78714-9030               |
| <b>WEBSITE</b> | <a href="https://www.tdi.texas.gov/consumer/hicap/index.html">https://www.tdi.texas.gov/consumer/hicap/index.html</a> |

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