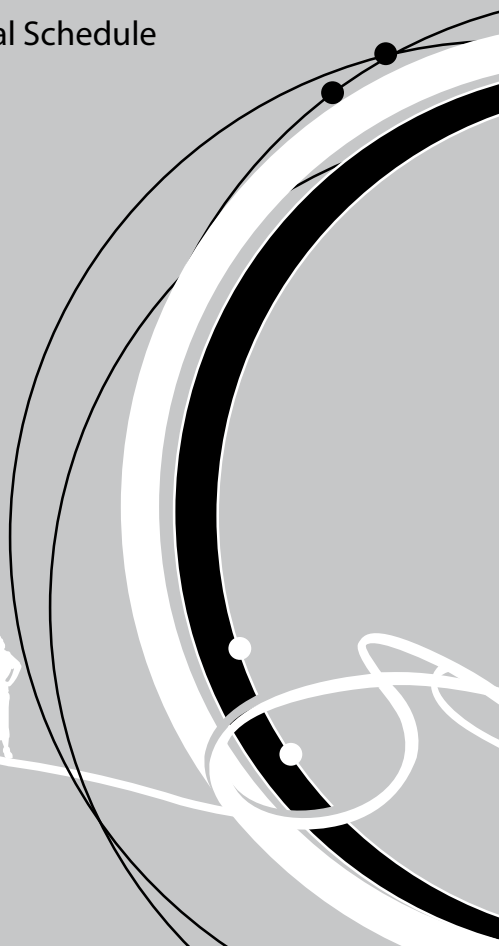


Pharmaceutical Management Agency

# Section H for Hospital Pharmaceuticals

Effective 1 March 2012

New Zealand Pharmaceutical Schedule



# Hospital Pharmaceuticals March 2012

## Editors

Rebecca Bloor & Donna Jennings  
email: [schedule@pharmac.govt.nz](mailto:schedule@pharmac.govt.nz)  
Telephone +64 4 460 4990  
Facsimile +64 4 460 4995  
Level 9, 40 Mercer Street  
PO Box 10 254 Wellington 6143

## Freephone Information Line

0800 66 00 50 (9am – 5pm weekdays)

## Circulation

Published each March, July and November. Changes to the contents are published in monthly updates. Annual subscription includes three Section H books. The Pharmaceutical Schedule is a separate publication.

The Schedule is distributed free of charge to over 1,000 health professionals, and is also available on an annual subscription.

## Production

Typeset automatically from XML and T<sub>E</sub>X.  
See [www.pharmac.govt.nz/schedule/archive/](http://www.pharmac.govt.nz/schedule/archive/) for the XML version of this Schedule.

## Programmers

Anrik Drenth & John Geering  
email: [texschedule@pharmac.govt.nz](mailto:texschedule@pharmac.govt.nz)

© Pharmaceutical Management Agency



ISSN 1179-3708 pdf  
ISSN 1172-9694 print

This work is licensed under the Creative Commons Attribution 3.0 New Zealand licence. In essence, you are free to copy, distribute and adapt it, as long as you attribute the work to PHARMAC and abide by the other licence terms. To view a copy of this licence, visit:

[creativecommons.org/licenses/by/3.0/nz/](http://creativecommons.org/licenses/by/3.0/nz/).

Attribution to PHARMAC should be in written form and not by reproduction of the PHARMAC logo. While care has been taken in compiling this Schedule, PHARMAC takes no responsibility for any errors or omissions, and shall not be liable for any consequences arising there from.

## Contents

Introducing PHARMAC .....	2
Members of the PHARMAC Board .....	2
Decision Criteria .....	2
<b>PHARMAC and Section H of the Pharmaceutical Schedule</b> .....	<b>3</b>
The PHARMAC Hospital Team .....	4
PHARMAC's clinical advisors .....	4
Pharmacology and Therapeutics Advisory Committee (PTAC) .....	4
Hospital Pharmaceuticals Subcommittee of PTAC .....	4
<b>Purpose of the Pharmaceutical Schedule</b> .....	<b>5</b>
Finding Information in the Pharmaceutical Schedule .....	5
Community Pharmaceuticals .....	5
Hospital Pharmaceuticals .....	5
Explaining Hospital Pharmaceutical Entries .....	6
Glossary .....	7
Treatment Costs .....	8
PHARMAC website .....	8
Named Patient Pharmaceutical Assessment (NPPA) .....	8
Unusual Clinical Circumstance (UCC) .....	8
Urgent Assessment (UA) .....	8
Hospital Pharmaceuticals in the Community (HPC) .....	9
<b>Part I – General Rules for Hospital Pharmaceuticals</b> .....	<b>10</b>
Introduction .....	10
1. Interpretation and Definitions .....	10
2. Current Hospital Pharmaceutical Contracts .....	12
3. National Contract Pharmaceutical Price .....	12
4. Hospital Supply Status (HSS) .....	12
5. Collection of rebates and payment of financial compensation .....	13
6. Price and Volume Data. ....	13
7. Discretionary Community Supply Pharmaceuticals .....	13
8. Pharmaceuticals Cancer Treatment .....	14
9. Practitioners Prescribing Unapproved Pharmaceuticals .....	14
<b>Part II – Pharmaceuticals Under National Contracts</b> .....	<b>16</b>
<b>Part III – Discretionary Community Supply Pharmaceuticals</b> .....	<b>66</b>
<b>Index</b> .....	<b>71</b>

## Introducing PHARMAC

PHARMAC, the Pharmaceutical Management Agency, is a Crown entity established pursuant to the New Zealand Public Health and Disability Act 2000 (The Act). The primary objective of PHARMAC is to secure for eligible people in need of pharmaceuticals, the best health outcomes that are reasonably achievable from pharmaceutical treatment and from within the amount of funding provided.

The PHARMAC Board consists of up to six members appointed by the Minister of Health. All decisions relating to PHARMAC's operation are made by or under the authority of the Board. In particular, Board members decide on the strategic direction of PHARMAC and may decide which community pharmaceuticals should be subsidised and at what levels, and determine national prices for some pharmaceuticals to be purchased by and used in DHB Hospitals, and whether or not special conditions are to be applied to such purchases.

### Members of the PHARMAC Board

Stuart McLauchlan  
Anne Kolbe

Kura Denness  
Jens Mueller

David Kerr

Decisions taken by the PHARMAC Board members, or made under the authority of the Board, incorporate a balanced view of the needs of prescribers and patients. The aim is to achieve long-term gains and efficient ways of making pharmaceuticals available to the community and for DHB Hospitals to purchase them.

The functions of PHARMAC are to perform the following, within the amount of funding provided to it in the Pharmaceutical Budget or to DHBs from their own budgets for the use of pharmaceuticals in their hospitals, as applicable, and in accordance with its annual plan and any directions given by the Minister (Section 103 of the Crown Entities Act):

- a) to maintain and manage a pharmaceutical schedule that applies consistently throughout New Zealand, including determining eligibility and criteria for the provision of subsidies;
- b) to manage incidental matters arising out of (a), including in exceptional circumstances providing for subsidies for the supply of pharmaceuticals not on the pharmaceutical schedule;
- c) to engage as it sees fit, but within its operational budget, in research to meet its objectives as set out in Section 47(a) of the Act;
- d) to promote the responsible use of pharmaceuticals;
- e) to manage the purchasing of any or all pharmaceuticals, whether used either in a hospital or outside it, on behalf of DHBs;
- f) any other functions given to PHARMAC by or under any enactment or authorised by the Minister.

The policies and criteria set out in the Pharmaceutical Schedule and PHARMAC's Operating Policies and Procedures arise out of, and are designed to help PHARMAC achieve and perform, PHARMAC's objective and functions under the Act.

However PHARMAC may, having regard to its public law obligations, depart from the strict application of those policies and criteria in certain exceptional cases where it considers this necessary or appropriate in the proper exercise of its statutory discretion and to give effect to its objective and functions, particularly with respect to:

- Determining eligibility and criteria for the provision of subsidies; and
- In exceptional circumstances providing for subsidies for the supply of pharmaceuticals not on the Pharmaceutical Schedule.

### Decision Criteria

PHARMAC updates the Pharmaceutical Schedule at regular intervals to notify prescribers, pharmacists, hospital managers and patients of changes to Community Pharmaceutical subsidies and the prices for Hospital Pharmaceuticals. In making decisions about amendments to the Pharmaceutical Schedule, PHARMAC is guided by its Operating Policies and Procedures, as amended or supplemented from time to time. PHARMAC takes into account the following criteria when considering proposed amendments to the Schedule:

- a) the health needs of all eligible people within New Zealand;
- b) the particular health needs of Māori and Pacific peoples;
- c) the availability and suitability of existing medicines, therapeutic medical devices and related products and related things;
- d) the clinical benefits and risks of pharmaceuticals;
- e) the cost-effectiveness of meeting health needs by funding pharmaceuticals rather than using other publicly funded health and disability support services;
- f) the budgetary impact (in terms of the pharmaceutical budget and the Government's overall health budget) of any changes to the Schedule;
- g) the direct cost to health service users;
- h) the Government's priorities for health funding, as set out in any objectives notified by the Crown to PHARMAC, or in PHARMAC's Funding Agreement, or elsewhere; and
- i) such other criteria as PHARMAC thinks fit. PHARMAC will carry out appropriate consultation when it intends to take any such "other criteria" into account.

The Operating Policies and Procedures, including any supplements, also describe the way in which PHARMAC determines the level of subsidy or purchase price payable for each Community Pharmaceutical or Hospital Pharmaceutical, respectively. Copies of PHARMAC's Operating Policies and Procedures and of any applicable supplements are available on the PHARMAC website ([www.pharmac.govt.nz](http://www.pharmac.govt.nz)), or on request.

## **PHARMAC and Section H of the Pharmaceutical Schedule:**

PHARMAC manages the national Pharmaceutical Schedule, which lists:

- Pharmaceuticals available in the community and subsidised by the Government with funding from the Pharmaceutical Budget; and
- some Pharmaceuticals purchased by DHBs for use in their hospitals, and includes those Hospital Pharmaceuticals for which national prices have been negotiated by PHARMAC.

In the community approximately 1848 Pharmaceuticals are subsidised by the Government. Most are available to all eligible people within New Zealand on prescription by a medical doctor. Some are listed with guidelines or conditions such as 'only if prescribed for a dialysis patient' or 'Special Authority - Retail Pharmacy', to ensure that Pharmaceuticals are used by those people who are most likely to benefit from them. Pharmaceuticals provided to patients for use while in DHB Hospitals are not covered by Sections A to G of the Pharmaceutical Schedule.

Section H of the Pharmaceutical Schedule is not a comprehensive list of pharmaceuticals that are used within DHB Hospitals.

Section H of the Pharmaceutical Schedule includes Pharmaceuticals that can be purchased at a national price by DHBs for use in their hospitals. These are referred to as National Contract Pharmaceuticals.

Section H of the Pharmaceutical Schedule also identifies Pharmaceutical Cancer Treatments that DHBs have been directed to fund for use in their hospitals and/or in association with services provided in their hospitals, as well as new Pharmaceuticals used in hospitals, which have been or are being assessed by PHARMAC, the results of that analysis being available to DHB Hospitals via PHARMAC's website.

A list of Discretionary Community Supply Pharmaceuticals, in Section H of the Pharmaceutical Schedule, identifies those products that currently are not subsidised from the Pharmaceutical Budget as Community Pharmaceuticals in Sections A to G of the Pharmaceutical Schedule but which DHBs can at their discretion fund for use in the community from their own budgets without specific Hospital Pharmaceuticals in the Community approval.

## The PHARMAC Hospital Team

Andrew Davies Acting Manager, Funding and Procurement  
Anne Glennie Panel Co-ordinator  
Katie Appleby Panel Co-ordinator

## PHARMAC's clinical advisors

### Pharmacology and Therapeutics Advisory Committee (PTAC)

PHARMAC works closely with the Pharmacology and Therapeutics Advisory Committee (PTAC), an expert medical committee which provides independent advice to PHARMAC on health needs and the clinical benefits of particular pharmaceuticals for use in the community and/or in DHB Hospitals.

The committee members are all senior, practising clinicians. The chair of PTAC sits with the PHARMAC Board in an advisory capacity.

PTAC helps decide which pharmaceuticals are to be subsidised from public monies by making recommendations to PHARMAC. Part of the role of PTAC is to review whether Pharmaceuticals already listed on the Schedule should continue to receive Government funds. The resources freed up can be used to subsidise other Pharmaceuticals with a greater therapeutic worth.

PHARMAC may obtain clinical advice from PTAC in relation to national purchasing strategies for Hospital Pharmaceuticals. There may be additional specialist hospital representatives on PTAC subcommittees, or additional PTAC subcommittees, where PHARMAC considers this necessary.

### PTAC members are:

Carl Burgess MBChB, MD, MRCP (UK), FRACP, FRCP, physician/clinical pharmacologist, Chair  
Howard Wilson BSc, PhD, MB, BS, Dip Obst, FRNZCGP, FRAGCP Deputy Chair  
Chris Cameron MBChB, FRACP, MCLin Pharm  
Melissa Copland PhD, BPharm(Hons), RegPharmNZ, FNZCP  
Stuart Dalziel MBChB, PhD, FRACP  
Ian Hosford MBChB, FRANZCP, psychiatrist  
Sisira Jayathissa MMedSc (Clin Epi), MMBS, MD, MRCP (UK), FRCP (Edin), FRACP, FAFPHM, Dip Clin Epi, Dip OHP, Dip HSM, MBS  
George Laking PhD, MD, FRACP  
Dee Mangin MBChB, DPH, RNZCGP  
Graham Mills MBChB, MTropHlth, MD, FRACP, infectious disease specialist and general physician  
Mark Weatherall BA, MBChB, MAppStats, FRACP

Contact PTAC C/-PTAC Secretary, Pharmaceutical Management Agency, PO Box 10 254, WELLINGTON 6143,  
Email: [PTAC@pharmac.govt.nz](mailto:PTAC@pharmac.govt.nz)

### Hospital Pharmaceuticals Subcommittee of PTAC

The Hospital Pharmaceuticals Subcommittee of PTAC is a subcommittee made up of representatives from DHB hospitals to provide PTAC and PHARMAC with advice in relation to our role in relation to hospital pharmaceuticals. The PHARMAC Board has appointed the following members to the Hospital Pharmaceuticals Subcommittee of PTAC:

Prof. Carl Burgess	Clinical Pharmacologist	Wellington
Assoc. Prof. Mark Weatherall	Physician	Wellington
Dr Matthew Dawes	Clinical Pharmacologist	Auckland
Dr Andrew Stanley	Respiratory Physician	Rotorua
Dr Andrew Herbert	Gastroenterologist	Palmerston North
Prof. Murray Barclay	Clinical Pharmacologist	Christchurch
Dr Paul Tomlinson	Paediatrician	Invercargill
Sarah Fitt	Pharmacist	Auckland
Marilyn Crawley	Pharmacist	Auckland
Jan Goddard	Pharmacist	Hamilton
Billy Allen	Pharmacist	Hastings
Chris Jay	Pharmacist	Wellington

# Purpose of the Pharmaceutical Schedule

The purpose of the Schedule is to list:

- the Community Pharmaceuticals that are subsidised by the Government and to show the amount of the subsidy paid to contractors, as well as the manufacturer's price and any access conditions that may apply; and
- some Hospital Pharmaceuticals that are purchased and used by DHB Hospitals, including those for which national prices have been negotiated by PHARMAC.

The purpose of the Schedule is not to show the final cost to Government of subsidising each Community Pharmaceutical or to DHBs in purchasing each Hospital Pharmaceutical since that will depend on any rebate and other arrangements PHARMAC has with the supplier and, for some Hospital Pharmaceuticals, on any logistics arrangements put in place by individual DHB Hospitals.

## Finding Information in the Pharmaceutical Schedule

### Community Pharmaceuticals

For Community Pharmaceuticals, the Schedule is organised in a way to help the reader find Community Pharmaceuticals, which may be used to treat similar conditions. To do this, Community Pharmaceuticals are first classified anatomically, originally based on the Anatomical Therapeutic Chemical (ATC) system, and then further classified under section headings structured for the New Zealand medical system.

- Section **A** lists the General Rules in relation to Community Pharmaceuticals and related products.
- Section **B** lists Community Pharmaceuticals and related products by anatomical classification, which are further divided into one or more therapeutic headings. Community Pharmaceuticals used to treat similar conditions are grouped together.
- Section **C** lists the rules in relation to Extemporaneously Compounded Products (ECPs) and Community Pharmaceuticals that will be subsidised when extemporaneously compounded.
- Section **D** lists the rules in relation to Special Foods and the Special Foods that are subsidised.
- Section **E** Part I lists the Community Pharmaceuticals that are subsidised on a Practitioner's Supply Order (PSO) and Wholesale Supply Order (WSO).
- Section **E** Part II lists rural areas for the purpose of PSOs.
- Section **F** lists the Community Pharmaceuticals dispensing period exemptions.
- Section **G** lists the Community Pharmaceuticals eligible for reimbursement of safety cap and related rules.

The listings are displayed alphabetically (where practical) within each level of the classification system. Each anatomical section contains a series of therapeutic headings, some of which may contain a further classification level. Where a Community Pharmaceutical is used in more than one therapeutic area, they may be cross-referenced.

The therapeutic headings in the Pharmaceutical Schedule do not necessarily correspond to the therapeutic groups and therapeutic subgroups, which PHARMAC establishes for the separate purpose of determining the level of subsidy to be paid for each Community Pharmaceutical.

The index located at the back of the book in which Sections A-G of the Pharmaceutical Schedule are published can be used to find page numbers for generic chemical entities, or product brand names.

### Hospital Pharmaceuticals

Section **H** lists Pharmaceuticals that DHBs fund from their own budgets. The Hospital Pharmaceuticals are grouped into the following Parts in Section H:

- Part I lists the rules in relation to Hospital Pharmaceuticals.
- Part II lists Hospital Pharmaceuticals for which national contracts exist (National Contract Pharmaceuticals). These are listed alphabetically by generic chemical entity name and line item, the relevant Price negotiated by PHARMAC and, if applicable, an indication of whether it has Hospital Supply Status (HSS) and any associated DV Limit.
- Part III lists Discretionary Community Supply Pharmaceuticals, which are not Community Pharmaceuticals, but which a DHB Hospital can, in its discretion, fund for use in the community from its own budget.

The index located at the back of the Section H can be used to find page numbers for generic chemical entities, or product brand names, for Hospital Pharmaceuticals.

### Explaining Hospital Pharmaceutical Entries

Section H of the Pharmaceutical Schedule lists National Contract Pharmaceuticals and Discretionary Community Supply Pharmaceuticals that are available to be purchased by DHBs. Where applicable, the listing of the Hospital Pharmaceutical may have an indication of whether it has HSS (if the brand name is in **bold**), its Price and any associated DV Limit.

#### Example

<b>Pharmaceuticals Under National Contracts</b>			
	Price (ex man. excl GST) \$	Per	Brand or Generic Manufacturer
Generic name listed alphabetically			
	10.00	100	Brand A Brand B
From 1 January 2010 to 30 June 2012, at least 99% of the total volume of this item purchased must be Brand C	<b>15.00</b>	50	<b>Brand C</b>
	18.00	250 ml	Brand D
Form and strength			
	<b>26.53</b>	100	Brand E

**Products with Hospital Supply Status (HSS) are in bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

In the case of presentation B, Brand C is the Pharmaceutical with HSS. While the price indicated applies from the date on which it was listed, it does not have HSS until the date indicated in the DV Limit. The 1% DV Limit means that at least 99% of the total volume of all brands of that presentation purchased by DHB Hospitals from the date HSS effective indicated must be the HSS brand. Subject to clause 4 of the General Rules for Hospital Pharmaceuticals, DHB Hospitals may only purchase up to the DV Limit of other brands.

The brand E of Presentation D, does not have HSS or any DV Limit. Accordingly, DHB Hospitals are able to buy that brand at the listed Price if they choose, but may also buy any other brand of the presentation in any quantity required, at whatever price the DHB Hospital negotiates with the relevant supplier.

# Glossary

## Units of Measure

gram .....	g	microgram.....	µg	millimole.....	mmol
kilogram .....	kg	milligram .....	mg	unit.....	u
international unit.....	iu	millilitre.....	ml		

## Abbreviations

Ampoule .....	Amp	Granules .....	Gran	Suppository .....	Supp
Capsule .....	Cap	Infusion .....	Inf	Tablet.....	Tab
Cream.....	Crn	Injection .....	Inj	Tincture.....	Tinc
Device.....	Dev	Linctus .....	Linc	Trans Dermal Delivery	
Dispersible.....	Disp	Liquid.....	Liq	System.....	TDDS
Effervescent.....	Eff	Long Acting.....	LA		
Emulsion.....	Emul	Ointment.....	Oint		
Enteric Coated.....	EC	Sachet .....	Sach		
Gelatinous .....	Gel	Solution.....	Soln		

**HSS** Hospital Supply Status, the status of being the brand of the relevant Hospital Pharmaceutical listed in Section H Part II as HSS, that DHBs are obliged to purchase subject to any DV Limit for that Hospital Pharmaceutical for the period of hospital supply, as awarded under an agreement between PHARMAC and the relevant pharmaceutical supplier.

**s29** This medicine is an unapproved medication supplied under Section 29 of the Medicines Act 1981. Practitioners prescribing this medication should:

- a) be aware of and comply with their obligations under Section 29 of the Medicines Act 1981 and otherwise under that Act and the Medicines Regulations 1984;
- b) be aware of and comply with their obligations under the Health and disability Commissioner's Code of Consumer Rights, including the requirement to obtain informed consent from the patient (PHARMAC recommends that Practitioners obtain written consent); and
- c) exercise their own skill, judgement, expertise and discretions, and make their own prescribing decisions with respect to the use of an unapproved Pharmaceutical or a Pharmaceutical for an indication for which it is not approved.

Note: Where medicines supplied under Section 29 that are used for emergency situations, patient details required under Section 29 of the Medicines Act may be retrospectively provided to the supplier.

## **Hospital Pharmaceutical and Pharmaceutical Cancer Treatment Costs**

The cost of purchasing Hospital Pharmaceuticals (for use in DHB hospitals and/or in association with Outpatient services provided in DHB hospitals) is met by the relevant DHB hospital from its own budget. Pharmaceutical Cancer Treatments (for use in DHB hospitals and/or in association with Outpatient services provided in DHB hospitals) are funded through the Pharmaceutical budget. As required by section 23(7) of the Act, in performing any of their functions in relation to the supply of Pharmaceuticals, including Pharmaceutical Cancer Treatments, DHBs must not act inconsistently with the Pharmaceutical Schedule.

### **PHARMAC website**

Information about PHARMAC is available on its website at <http://www.pharmac.govt.nz>. The website includes copies of the Annual Review, Annual Report and Annual Plan, as well as information such as the Pharmaceutical Schedule, Pharmaceutical Schedule Updates, other publications and recent press releases.

Copies of the February 2002 *National Hospital Pharmaceutical Strategy* can be found on the website.

Also, for details about hospital pharmaceuticals that have been assessed by PHARMAC and further information about assessments undertaken by DHB Hospitals, please refer to <http://www.pharmac.govt.nz/hpad>

## **Named Patient Pharmaceutical Assessment policy**

The Named Patient Pharmaceutical Assessment (NPPA) Policy is PHARMAC's process for considering applications about named patients seeking funding for treatments not listed on the Schedule, either at all or for the named patient's clinical circumstances.

For PHARMAC to perform its legislative function of maintaining and managing a Schedule that applies consistently throughout New Zealand, the NPPA Policy will, and must, operate in a way that does not undermine the Schedule decision making process. Together, the Schedule process and the NPPA Policy, ensure there is a pathway for consideration of an individual's clinical circumstances. If an individual has a set of clinical circumstances not covered by the NPPA Policy, the Schedule decision making process is available. It is not the purpose of the NPPA Policy to provide access to every treatment not listed on the Schedule. There are three main pathways by which named patients can be considered for funding under the NPPA Policy. PHARMAC will exercise its discretion to determine the most appropriate pathway for an application under the NPPA Policy based on the information that is provided.

PHARMAC will assess applications that meet the prerequisites described below according to its Decision Criteria before deciding whether to approve applications for funding. The Decision Criteria will be used to assess both the individual clinical circumstances of each NPPA applicant, and the implications of each NPPA funding decision on PHARMAC's ability to carry out its legislative functions.

For more information on NPPA, or to apply, visit the PHARMAC website at <http://www.pharmac.govt.nz/nppa>, or call the Panel Coordinators at (04) 9167553 or (04) 9167521.

### **Unusual Clinical Circumstance (UCC)**

The purpose of the Unusual Clinical Circumstances (UCC) pathway is to provide a process for consideration for funding for named patients whose clinical circumstances are so unusual that PHARMAC is unlikely, for administrative reasons, to consider listing treatments for these circumstances on the Schedule. The prerequisite requirements for UCC consideration are:

- The patient has reasonably tried and failed all alternative funded treatments (or alternative treatments have been contraindicated, or there are no other treatments available), or the patient has experienced such serious side effects with all other relevant funded treatments that treatment has been ceased or cannot reasonably be continued; and
- The patient is experiencing an indication or set of clinical circumstances that are so unusual that PHARMAC is unlikely to consider listing treatments for these on the Schedule; and
- Generally, PHARMAC has not already considered/is not considering, through the Schedule decision making process, the treatment for the patient's clinical circumstances, or has not considered the treatment at all.

### **Urgent Assessment (UA)**

The purpose of the Urgent Assessment (UA) pathway is to provide a process for PHARMAC to consider funding treatments for named patients where PHARMAC is also considering or is likely to consider the treatment for Schedule listing, but the patient's clinical circumstances justify urgent assessment, prior to a decision on Schedule listing. The prerequisite requirements for UA are:

- The patient has reasonably tried and failed all alternative funded treatments (or alternative treatments have been contraindicated, or there are no other treatments available), or the patient has experienced such serious side effects with all other relevant funded treatments that treatment has been ceased or cannot reasonably be continued; and
- The patient is experiencing an indication or set of clinical circumstances that may be experienced by a population group (either currently or over time); and
- The patient has serious clinical circumstances and not receiving the treatment within six to 12 months would lead to either a significant deterioration in a serious clinical condition or the patient would miss the opportunity for significant improvement in clinical outcome (length or quality of life); and
- The treatment has either not been prioritised by PHARMAC, or if it has, PHARMAC has funded the treatment under the NPPA Policy for the same clinical circumstances prior to prioritisation.
- PHARMAC has not declined to list, on the Schedule, this treatment for these clinical circumstances.

### **Hospital Pharmaceuticals in the Community (HPC)**

The purpose of the Hospital Pharmaceuticals in the Community (HPC) pathway is to allow District Health Board hospitals to fund a medicine for a patient in the community if it would be more affordable for the DHB than paying for the treatment that would otherwise need to be provided. PHARMAC's approval is required for any such funding, given DHBs' legislative obligation to act consistently with the Schedule. The prerequisite requirements for HPC are:

- The patient has reasonably tried and failed all alternative cheaper funded treatments (or these alternative treatments have been contraindicated) or the patient has experienced such serious side effects with all other cheaper relevant funded treatments that treatment has been ceased or cannot reasonably be continued; and
- The application is for a DHB hospital to fund a treatment for use in the community for a patient under the care of a DHB hospital clinician (in-patient or out-patient); and
- The treatment is not being used to treat a cancer; and
- The treatment costs less for the DHB than the most likely alternative intervention or outcome; and
- The treatment is being sought for a short-term episode of care (usually a maximum of three months) and is not generally for the treatment of a chronic condition.

### INTRODUCTION

Section H contains general rules that apply, and other information relating, to Hospital Pharmaceuticals.

The amounts payable by a DHB to the relevant pharmaceutical supplier are based on the contractual arrangements between PHARMAC and the relevant pharmaceutical supplier for a national price for that National Contract Pharmaceutical.

The Pharmaceutical Schedule shows the national price at which the National Contract Pharmaceutical can be purchased by DHBs, providers of logistics services, wholesalers or other such distributors, or Contract Manufacturers directly from the pharmaceutical supplier. As required by section 23(7) of the Act, in performing any of its functions in relation to the supply of Pharmaceuticals, DHBs must not act inconsistently with the Schedule.

#### 1 Interpretation and Definitions

1.1 In this Schedule, unless the context otherwise requires:

“**Act**” means the New Zealand Public Health and Disability Act 2000.

“**Community Pharmaceutical**” means a Pharmaceutical listed in Sections A to G of the Pharmaceutical Schedule that is subsidised by the Funder from the Pharmaceutical Budget for use in the community.

“**Contract Manufacturer**” means a manufacturer or a supplier that is a party to a contract with the relevant DHB Hospital to compound Hospital Pharmaceuticals, on request from that DHB Hospital.

“**Designated Delivery Point**” means at a DHB Hospital’s discretion:

- a) a delivery point agreed between a pharmaceutical supplier and the relevant DHB Hospital, to which delivery point that pharmaceutical supplier must supply the Pharmaceutical directly at the Price; and/or
- b) any delivery point designated by the relevant DHB Hospital or PHARMAC, such delivery point being within 30 km of the relevant pharmaceutical supplier’s national distribution centre.

“**DHB**” means an organisation established as a District Health Board by or under Section 19 of the Act.

“**DHB Hospital**” means a DHB, including its hospital or associated provider unit that the DHB purchases Hospital Pharmaceuticals for.

“**Discretionary Community Supply Pharmaceutical**” means the list of Pharmaceuticals set out in Section H Part III of the Schedule, which may be funded by a DHB Hospital from its own budget for use in the community.

“**DV Limit**” means, for a particular Hospital Pharmaceutical with HSS, the National DV Limit or the Individual DV Limit.

“**DV Pharmaceutical**” means a discretionary variance Pharmaceutical that does not have HSS but is used in place of one that does. Usually this means it is the same chemical entity, at the same strength, and in the same or a similar presentation or form, as the relevant Hospital Pharmaceutical with HSS. Where this is not the case, a note will be included with the listing of the HSS pharmaceutical.

“**Funder**” means the body or bodies responsible, pursuant to the Act, for the funding of Pharmaceuticals listed on the Schedule (which may be one or more DHBs and/or the Ministry of Health) and their successors.

“**GST**” means goods and services tax under the Goods and Services Tax Act 1985.

“**Hospital Pharmaceuticals**” means National Contract Pharmaceuticals, DV Pharmaceuticals and Discretionary Community Supply Pharmaceuticals.

“**Hospital Pharmaceuticals in the Community (HPC)**” means the pathway under the Named Patient Pharmaceutical Assessment policy to allow District Health Board hospitals to fund a medicine for a patient in the community if this is more affordable for the DHB than paying for the treatment that would otherwise need to be provided.

“**HSS**” means hospital supply status, the status of being the brand of the relevant Hospital Pharmaceutical listed in Section H Part II as HSS, that DHBs are obliged to purchase subject to any DV Limit for that Hospital Pharmaceutical for the period of hospital supply, as awarded under an agreement between PHARMAC and the relevant pharmaceutical supplier. Pharmaceuticals with HSS are listed in Section H Part II in bold text.

“**Individual DV Limit**” means, for a particular Hospital Pharmaceutical with HSS and a particular DHB Hospital, the discretionary variance limit, being the specified percentage of that DHB Hospital’s Total Market Volume up to which that DHB Hospital may purchase DV Pharmaceuticals of that Hospital Pharmaceutical.

“**Named Patient Pharmaceutical Assessment Advisory Panel**” means the panel of clinicians, appointed by the PHARMAC Board, that is responsible for advising, within its Terms of Reference, on Named Patient Pharmaceutical Assessment applications and Exceptional Circumstances renewal applications submitted after 1 March 2012 (EC renewal application form located at <http://www.pharmac.govt.nz/healthpros/EC/ECForms>)

“**National Contract Pharmaceutical**” means a Hospital Pharmaceutical for which PHARMAC has negotiated a national contract and the Price.

“**National DV Limit**” means, for a particular Hospital Pharmaceutical with HSS, the discretionary variance limit, being the

specified percentage of the Total Market Volume up to which all DHB Hospitals may collectively purchase DV Pharmaceuticals of that Hospital Pharmaceutical.

“**Outpatient**” in relation to a Community Pharmaceutical, means a person who, as part of treatment at a hospital or other institution under the control of a DHB, is prescribed the Community Pharmaceutical for consumption or use in the person’s home.

“**PHARMAC**” means the Pharmaceutical Management Agency established by Section 46 of the Act (PHARMAC).

“**Pharmacode**” means the six or seven digit identifier assigned to a Pharmaceutical and notified to a pharmaceutical supplier by the Pharmacy Guild.

“**Pharmaceutical**” means a medicine, therapeutic medical device, or related product or related thing listed in Sections B to H of the Schedule.

“**Pharmaceutical Budget**” means the pharmaceutical budget set for PHARMAC by the Crown for the subsidised supply of Community Pharmaceuticals and Pharmaceutical Cancer Treatments including for named patients in exceptional circumstances.

“**Pharmaceutical Cancer Treatments**” means Pharmaceuticals for the treatment of cancer, listed in Sections A to G of the Schedule and identified therein as a “PCT” or “PCT only” Pharmaceuticals that DHBs must provide access to for use in their hospitals, and/or in association with Outpatient services provided in their DHB Hospitals, in relation to the treatment of cancers.

“**Price**” means the standard national price, and, unless agreed otherwise between PHARMAC and the pharmaceutical supplier, includes any costs associated with the supply of a National Contract Pharmaceutical listed in Section H Part II of the Pharmaceutical Schedule to, at a DHB Hospital’s discretion, any Designated Delivery Point, or to a Contract Manufacturer (expressly for the purpose of compounding).

“**Schedule**” means this Pharmaceutical Schedule and all its sections and appendices.

“**Section B**” of this Pharmaceutical Schedule means the list of Community Pharmaceuticals eligible for Subsidies included in the Schedule.

“**Section C**” of this Pharmaceutical Schedule means the list of community extemporaneously compounded preparations and galenicals eligible for Subsidies included in the Schedule.

“**Section D**” of this Pharmaceutical Schedule means the list of community special foods eligible for Subsidies included in the Schedule.

“**Section E Part I**” of this Pharmaceutical Schedule means the list of Community Pharmaceuticals eligible for Subsidies and available on a Practitioner’s Supply Order or a Wholesale Supply Order included in the Schedule.

“**Section E Part II**” of this Pharmaceutical Schedule means the list of remote areas for the purpose of community Practitioner’s Supply Orders included in the Schedule.

“**Section F Part I**” of this Pharmaceutical Schedule means the part of Section F relating to the exemption from dispensing in Monthly Lots, and requirement to dispense in 90 Day Lots in respect of the Community Pharmaceuticals referred to in this part of Section F.

“**Section F Part II**” of this Pharmaceutical Schedule means the part of Section F relating to the exemption from dispensing in Monthly Lots in respect of the Community Pharmaceuticals referred to in this part of Section F.

“**Section G**” of this Pharmaceutical Schedule means the list of Community Pharmaceuticals eligible for reimbursement of safety cap.

“**Section H**” of this Pharmaceutical Schedule means the general rules for Hospital Pharmaceuticals and the lists of National Contract Pharmaceuticals and any associated DV Limits and Discretionary Community Supply Pharmaceuticals included in Section H of the Schedule.

“**Section H Part I**” of this Pharmaceutical Schedule means the general rules for Hospital Pharmaceuticals.

“**Section H Part II**” of this Pharmaceutical Schedule means the list of National Contract Pharmaceuticals, the relevant Price, an indication of whether the Pharmaceutical has HSS and any associated DV Limit.

“**Section H Part III**” of this Pharmaceutical Schedule means the list of Discretionary Community Supply Pharmaceuticals.

“**Total Market Volume**” means, for a particular Hospital Pharmaceutical with HSS in any given period, in accordance with the data available to PHARMAC, the sum of:

- a) the total number of Units of the relevant Hospital Pharmaceutical with HSS purchased by all DHB Hospitals, or by a particular DHB Hospital in the case of the Individual DV Limit; and
- b) the total number of Units of all the relevant DV Pharmaceuticals purchased by all DHB Hospitals, or by a particular DHB Hospital in the case of the Individual DV Limit.

“**Unapproved Indication**” means, for a Pharmaceutical, an indication for which it is not approved under the Medicines Act 1981. Practitioners prescribing Pharmaceuticals for Unapproved Indications should be aware of, and comply with, their

## Part I: General Rules for Hospital Pharmaceuticals

obligations under Section 25 and/or Section 29 of the Medicines Act 1981 and as set out in Part I: General Rules for Hospital Pharmaceuticals, rule 9.

“Unit” means an individual unit of a Pharmaceutical (e.g. tablet, 1 ml of an oral liquid, amp, syringe).

“Unusual Clinical Circumstances (UCC)” means the pathway under the Named Patient Pharmaceutical Assessment policy for funding consideration for named patients whose clinical circumstances are so unusual that PHARMAC is unlikely, for administrative reasons, to consider listing treatments for these circumstances on the Schedule.

“Urgent Assessment (UA)” means the pathway under the Named Patient Pharmaceutical Assessment policy for funding consideration for treatments for named patients where PHARMAC is also considering or is likely to consider the treatment for Schedule listing, but the patient’s clinical circumstances justify urgent assessment, prior to a decision on Schedule listing.

1.2 In addition to the above interpretations and definitions, unless the content requires otherwise, a reference in the Schedule to:

- a) the singular includes the plural; and
- b) any legislation includes a modification and re-enactment of, legislation enacted in substitution for, and a regulation, Order in Council, and other instrument from time to time issued or made under, that legislation, where that legislation, regulation, Order in Council or other instrument has an effect on the prescribing, dispensing or subsidising of Pharmaceuticals.

### 2 Current Hospital Pharmaceutical Contracts

2.1 A DHB Hospital may enter into a contract for the purchase of any Pharmaceutical that is not a National Contract Pharmaceutical, provided that such contract:

- a) does not oblige the relevant DHB Hospital to purchase a volume of that Pharmaceutical, if that Pharmaceutical is a DV Pharmaceutical, that is greater than the relevant DV Limit;
- b) enables PHARMAC to access and use future price and volume data in respect of that Pharmaceutical; and
- c) enables the relevant DHB Hospital to terminate the contract or relevant parts of the contract in order to give full effect to the national contract on 3 months’ written notice to the pharmaceutical supplier.

2.2 From the day after a DHB Hospital’s current supply contract for a chemical entity that is a National Contract Pharmaceutical expires, that DHB Hospital is to purchase the relevant National Contract Pharmaceutical listed in Section H Part II at the Price, and is to comply with the DV Limits for the National Contract Pharmaceutical where it has HSS.

2.3 Following written notification from PHARMAC that a Pharmaceutical is a National Contract Pharmaceutical, either through Section H updates or otherwise, DHB Hospitals are to take any steps available to them to terminate current contracts, and are not to enter into any new contracts or extend the period of any current contracts, for the supply of that National Contract Pharmaceutical listed in Section H Part II or the relevant chemical entity, unless PHARMAC expressly notifies otherwise.

### 3 National Contract Pharmaceutical Price

3.1 DHB Hospitals must take all necessary steps to enable any contracts between PHARMAC and a pharmaceutical supplier in relation to National Contract Pharmaceuticals to be given full effect.

3.2 National Contract Pharmaceuticals that can be purchased by DHBs at the relevant Price, as agreed between PHARMAC and the relevant pharmaceutical supplier, are hereby deemed to include every medicine, therapeutic medical device, or related product or related thing listed in Section H Part II of the Schedule except DV Pharmaceuticals.

3.3 A National Contract Pharmaceutical is to be made available by the relevant pharmaceutical supplier for purchase at the relevant Price by any or all of the following:

- a) DHB Hospitals at Designated Delivery Points; and/or
- b) Contract Manufacturers (expressly for the purpose of compounding).

### 4 Hospital Supply Status (HSS)

4.1 The DV Limit for any National Contract Pharmaceutical which has HSS is set out beside the listing of the relevant National Contract Pharmaceutical in Section H Part II of the Schedule and may be amended from time to time.

4.2 If a National Contract Pharmaceutical is listed in Section H Part II as having HSS, DHB Hospitals:

- a) are expected to use up any existing stocks of DV Pharmaceuticals during the First Transition Period;
- b) must not purchase DV Pharmaceuticals in volumes exceeding their usual requirements, or in volumes exceeding those which they reasonably expect to use, within the First Transition Period; and
- c) must purchase the Hospital Pharmaceutical with HSS except:
  - i) to the extent that the DHB Hospital may use its discretion to purchase a DV Pharmaceutical within the DV Limit, provided that (subject to subclause (iii) below) the DV Limit has not been exceeded nationally;
  - ii) if the pharmaceutical supplier fails to supply that Hospital Pharmaceutical, in which case the relevant

DHB Hospital does not have to comply with the DV Limit for that Hospital Pharmaceutical during that period of non-supply (and any such month(s) included in a period of non-supply will be excluded in any review of the DV Limit in accordance with clause 4.3 below);

- iii) that where the DV Limit has been exceeded nationally, the DHB Hospital may negotiate with the pharmaceutical supplier who supplies the National Contract Pharmaceutical with HSS for written permission to vary the application of that DHB Hospital's Individual DV Limit for any patient whose exceptional needs require a DV Pharmaceutical.

4.3 PHARMAC may, in its discretion, for any period or part period:

- a) review usage by DHB Hospitals of the National Contract Pharmaceutical and DV Pharmaceuticals to determine whether the DV Limit has been exceeded; and
- b) audit compliance by DHBs with the DV Limits and related requirements.

4.4 PHARMAC will address any issues of non-compliance by any individual DHB with a DV Limit by:

- a) obtaining the relevant DHB's assurance that it will comply with the DV Limit for that National Contract Pharmaceutical with HSS in the remainder of the applicable period and any subsequent periods; and
- b) informing the relevant supplier of the HSS Pharmaceutical of any individual DHB's non-compliance with the DV Limit for that HSS Pharmaceutical.

4.5 In addition to the steps taken by PHARMAC under clause 4.4 above to address any issues of non-compliance by any individual DHB with a DV Limit, the relevant pharmaceutical supplier may require, in its discretion, financial compensation from the relevant DHB:

- a) an amount representing its contribution towards exceeding the DV Limit (where PHARMAC is able to quantify this based on the information available to it); or
- b) the sum of \$1,000 or \$5,000 (depending on the terms of the applicable national contract applying to the HSS Pharmaceutical),

whichever is the greater as between sub-paragraphs (a) and (b) within the number of business days specified in the notice requiring such payment to be made.

### 5 Collection of rebates and payment of financial compensation

5.1 Following the receipt of any rebates from a pharmaceutical supplier in respect of a particular Hospital Pharmaceutical, PHARMAC will notify each relevant DHB and DHB Hospital of the amount of the rebate owing to it, being a portion of the total rebate determined by PHARMAC on the basis of that DHB Hospital's usage of that Hospital Pharmaceutical, where this is able to be determined. Where data to determine individual DHB Hospitals' usage is not available, PHARMAC will apportion rebates on the basis of an alternative method agreed between the relevant DHBs and PHARMAC.

5.2 PHARMAC will pay each DHB Hospital the rebate amounts (if any) owing to it, no less frequently than once each calendar quarter in respect of rebates received quarterly (or more often).

### 6 Price and Volume Data

6.1 DHB Hospitals are to provide to PHARMAC, on a monthly basis in accordance with PHARMAC's requirements, any volume data and, unless it would result in a breach of an existing contract, price data held by those DHB Hospitals in respect of any Hospital Pharmaceuticals listed in Section H of the Schedule.

6.2 All price and volume data provided to PHARMAC under clause 6.1 above should identify the relevant Hospital Pharmaceutical by using a Pharmacode or some other unique numerical identifier, and the date (month and year) on which the DHB Hospital incurred a cost for the purchase of that Pharmaceutical. Volume is to be measured in units (that being the smallest possible whole unit – e.g. a capsule, a vial, a millilitre etc).

### 7 Discretionary Community Supply Pharmaceuticals

7.1 Discretionary Community Supply Pharmaceuticals are deemed to include every medicine, therapeutic medical device, or related product or related thing listed in Section H Part III of the Schedule.

7.2 PHARMAC may, in its discretion, list any pharmaceutical that is not a Community Pharmaceutical as a Discretionary Community Supply Pharmaceutical, including a pharmaceutical that PHARMAC is made aware of by HPAC, the Named Patient Pharmaceutical Assessment Advisory Panel, a DHB Hospital or relevant hospital personnel.

7.3 A DHB Hospital may use its discretion to purchase Discretionary Community Supply Pharmaceuticals for use in the community, provided that, if the patient being treated with a Discretionary Community Supply Pharmaceutical usually resides in a district other than that within the jurisdiction of the DHB initiating the treatment, then the DHB initiating the treatment must either agree to fund any on-going treatment required once the patient has returned to his/her usual DHB, or obtain written consent from the DHB or DHBs in which the patient will reside following the commencement of treatment.

- 7.4 The funding of a Discretionary Community Supply Pharmaceutical for use in the community will be sourced from the relevant DHB's own budget. For the avoidance of doubt, the Discretionary Community Supply Pharmaceutical is not a Community Pharmaceutical and funding is not available for Discretionary Community Supply Pharmaceuticals from the Pharmaceutical Budget.
- 7.5 Subject to rule 7.6 and 7.7, DHB Hospitals must not fund for use in the community, any pharmaceuticals that are not Discretionary Community Supply Pharmaceuticals unless they have been approved under Hospital Pharmaceuticals in the community (HPC).
- 7.6 DHB Hospitals may fund from their own budgets, any Pharmaceutical that is listed in Sections A-G of the Pharmaceutical Schedule without Hospital Hospital Pharmaceuticals in the community (HPC) approval provided that:
- a)
    - i) up to 5 days treatment, or one original pack, (where inappropriate to provide less); or
    - ii) more than 5 days treatment, provided that the relevant DHB Hospital has a dispensing for discharge policy and the quantity supplied is in accordance with that policy; and
  - b) the Pharmaceutical is supplied consistent with any restrictions applying to that Pharmaceutical in Section A-G of the Pharmaceutical Schedule.
- Note dispensing for discharge as described in rule 7.6 is at the discretion of individual DHBs.
- 7.7 DHB Hospitals may fund from their own budgets any Pharmaceutical without Hospital Exceptional Circumstances approval provided that the Pharmaceutical is only being supplied to the patient for them to use in the 24 hours leading up to a procedure to be performed in a DHB Hospital.

### 8 Pharmaceutical Cancer Treatments

- 8.1 DHBs are obliged to provide access to Pharmaceutical Cancer Treatments in accordance with the September 2001 direction from the Minister of Health.
- 8.2 The list of Pharmaceutical Cancer Treatments may be amended from time to time. Additions and/or amendments to the list require the approval of the PHARMAC Board.
- 8.3 Pharmaceutical Cancer Treatments may be used in combination with each other, including where such combinations result in admixtures or dilutions that differ from those specified.
- 8.4 DHBs must not fund Pharmaceuticals for the treatment of cancer or Pharmaceutical Cancer Treatments for indications related to the treatment of cancer, if they are not listed in Sections A to G of the Pharmaceutical Schedule, unless the unlisted pharmaceutical:
- a) has Named Patient Pharmaceutical Assessment approval; or
  - b) is being used as part of a *bona fide* clinical trial which has Ethics Committee approval; or
  - c) is being used and funded as part of a paediatric oncology service; or
  - d) was being used to treat the patient in question prior to 1 July 2005.
- 8.5 Some indications for Pharmaceutical Cancer Treatments listed in the Schedule are Unapproved Indications. Some of these formed part of the October 2001 direction from the Minister of Health as to pharmaceuticals and indications for which DHBs must provide access. As far as reasonably practicable, these Unapproved Indications are marked in the Schedule. However, PHARMAC makes no representation and gives no guarantee as to the accuracy of this information. Practitioners prescribing Pharmaceutical Cancer Treatments for such Unapproved Indications should:
- a) be aware of and comply with their obligations under sections 25 and 29 of the Medicines Act 1981, as applicable, and otherwise under that Act and the Medicines Regulations 1984;
  - b) be aware of and comply with their obligations under the Health and Disability Commissioner's Code of Consumer Rights, including the requirement to obtain informed consent from the patient (PHARMAC recommends that Practitioners obtain written consent); and
  - c) exercise their own skill, judgment, expertise and discretion, and make their own prescribing decisions with respect to the use of an unapproved Pharmaceutical Cancer Treatment or a Pharmaceutical Cancer Treatment for an Unapproved Indication.
- 8.6 Applications to add pharmaceuticals, and add or amend indications for Pharmaceutical Cancer Treatments, may be made in writing by pharmaceutical suppliers and/or clinicians to PHARMAC. Applications should follow *PHARMAC's Guidelines for Submissions to PTAC for New Chemical Entity Pharmaceuticals and Recommended methods to derive clinical inputs for proposals to PHARMAC*, copies of which are available from PHARMAC or PHARMAC's website.
- 8.7 Applications made under clause 8.6 must be assessed by HPAC, PHARMAC, PTAC and/or relevant subcommittees of PTAC.

### 9 Practitioners prescribing unapproved Pharmaceuticals

Practitioners should, where possible, prescribe Pharmaceuticals that are approved under the Medicines Act 1981. However, the access criteria under which a Pharmaceutical is listed on the Pharmaceutical Schedule may:

- a) in some case, explicitly permit Government funded access to a Pharmaceutical that is not approved under the Medicines Act 1981 or for an Unapproved Indication; or
- b) not explicitly preclude Government funded access to a Pharmaceutical when it is used for an Unapproved Indication.

Accordingly, if Practitioners are planning on prescribing an unapproved Pharmaceutical or a Pharmaceutical for an Unapproved Indication, Practitioners should:

- a) be aware of and comply with their obligations under sections 25 and 29 of the Medicines Act 1981, as applicable, and otherwise under that Act and the Medicines Regulations 1984;
- b) be aware of and comply with their obligations under the Health and Disability Commissioner's Code of Consumer Rights, including the requirement to obtain informed consent from the patient (PHARMAC recommends that Practitioners obtain written consent); and
- c) exercise their own skill, judgment, expertise and discretion, and make their own prescribing decisions with respect to the use of an unapproved Pharmaceutical or a Pharmaceutical for an Unapproved Indication.

Practitioners should be aware that simply by listing a Pharmaceutical on the Pharmaceutical Schedule PHARMAC makes no representations about whether that Pharmaceutical has any form of approval or consent under, or whether the supply or use of the Pharmaceutical otherwise complies with, the Medicines Act 1981. Further, the Pharmaceutical Schedule does not constitute an advertisement, advertising material or a medical advertisement as defined in the Medicines Act or otherwise.

## Part II: Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>ABACAVIR SULPHATE</b>			
Tab 300 mg – 1% DV Jul-11 to 2014 .....	229.00	60	<b>Ziagen</b>
Oral liq 20 mg per ml – 1% DV Jul-11 to 2014 .....	50.00	240 ml	<b>Ziagen</b>
<b>ABACAVIR SULPHATE WITH LAMIVUDINE</b>			
Tab 600 mg with lamivudine 300 mg .....	630.00	30	Kivexa
<b>ABCIXIMAB</b>			
Inj 10 mg .....	579.53	1	ReoPro
<b>ACARBOSE</b>			
Tab 50 mg – 1% DV Jul-09 to 2012 .....	16.50	90	<b>Glucobay</b>
Tab 100 mg – 1% DV Jul-09 to 2012 .....	26.70	90	<b>Glucobay</b>
<b>ACETAZOLAMIDE</b>			
Tab 250 mg – 1% DV Nov-11 to 2014 .....	17.03	100	<b>Diamox</b>
<b>ACETYLCYSTEINE</b>			
Inj 200 mg per ml, 10 ml .....	219.75	10	Martindale Acetylcysteine
Inj 200 mg per ml, 30 ml .....	219.00	4	Acetadote
<b>ACICLOVIR</b>			
Tab dispersible 200 mg – 1% DV Dec-10 to 2013 .....	1.98	25	<b>Lovir</b>
Tab dispersible 400 mg – 1% DV Dec-10 to 2013 .....	6.64	56	<b>Lovir</b>
Tab dispersible 800 mg – 1% DV Dec-10 to 2013 .....	7.38	35	<b>Lovir</b>
Inj 250 mg – 1% DV Nov-09 to 2012 .....	25.50	5	<b>Pfizer</b>
<b>ACITRETIN</b>			
Cap 10 mg .....	38.66	60	Novatretin
	75.80	100	Neotigason
Cap 25 mg .....	83.11	60	Novatretin
	162.96	100	Neotigason
<b>ACTIVATED CHARCOAL</b>			
Oral liq 50 g per 250 ml .....	43.50	250 ml	Carbosorb-X
<b>ADALIMUMAB</b>			
Inj 40 mg per 0.8 ml prefilled pen .....	1,799.92	2	HumiraPen
Inj 40 mg per 0.8 ml prefilled syringe .....	1,799.92	2	Humira
<b>ADEFOVIR DIPIVOXIL</b>			
Tab 10 mg .....	670.00	30	Hepsera
<b>ADRENALINE</b>			
Inj 1 in 1,000, 1 ml .....	4.98	5	Aspen Adrenaline
	5.25		Mayne
Inj 1 in 10,000, 10 ml .....	27.00	5	Mayne
	49.00	10	Aspen Adrenaline
<b>ALENDRONATE SODIUM</b>			
Tab 40 mg .....	133.00	30	Fosamax
Tab 70 mg .....	22.90	4	Fosamax
<b>ALENDRONATE SODIUM WITH CHOLECALCIFEROL</b>			
Tab 70 mg with cholecalciferol 5,600 iu .....	22.90	4	Fosamax Plus
<b>ALFACALCIDOL</b>			
Cap 0.25 µg .....	26.32	100	One-Alpha
Cap 1 µg .....	87.98	100	One-Alpha

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>ALLOPURINOL</b>			
Tab 100 mg – 1% DV Dec-11 to 2014 .....	15.90	1,000	<b>Apo-Allopurinol</b>
Tab 300 mg – 1% DV Dec-11 to 2014 .....	16.75	500	<b>Apo-Allopurinol</b>
<b>ALPROSTADIL</b>			
Inj 0.5 mg per ml, 1 ml – 1% DV Sep-09 to 2012.....	1,417.50	5	<b>Prostin VR</b>
<b>AMANTADINE HYDROCHLORIDE</b>			
Cap 100 mg – 1% DV Sep-11 to 2014.....	38.24	60	<b>Symmetrel</b>
<b>AMBRISENTAN</b>			
Tab 5 mg .....	4,585.00	30	Volibris
Tab 10 mg .....	4,585.00	30	Volibris
<b>AMIKACIN SULPHATE</b>			
Inj 5 mg per ml, 5 ml .....	88.00	10	Biomed
<b>AMILORIDE</b>			
Oral liq 1 mg per ml .....	30.00	25 ml	Biomed
<b>AMINO ACID FORMULA</b>			
Powder (unflavoured) .....	6.00	48.5 g	Vivonex Paediatric
	56.00	400 g	Elecare
			Elecare LCP
Powder (vanilla) .....	56.00	400 g	Elecare
<b>AMINOPHYLLINE</b>			
Inj 25 mg per ml, 10 ml – 1% DV Nov-11 to 2014.....	53.75	5	<b>DBL Aminophylline</b>
<b>AMISULPRIDE</b>			
Tab 100 mg .....	22.52	30	Solian
Tab 200 mg .....	97.03	60	Solian
Tab 400 mg .....	185.44	60	Solian
Oral liq 100 mg per ml .....	55.44	60 ml	Solian
<b>AMITRIPTYLINE</b>			
Tab 10 mg .....	2.77	50	Amirol
Tab 25 mg – 1% DV Jun-11 to 2014.....	1.85	100	<b>Amitrip</b>
Tab 50 mg – 1% DV Jun-11 to 2014.....	3.60	100	<b>Amitrip</b>
<b>AMLODIPINE</b>			
Tab 2.5mg – 1% DV Mar-12 to 2014.....	2.45	100	<b>Apo-Amlodipine</b>
Tab 5 mg – 1% DV Oct-11 to 2014.....	2.65	100	<b>Apo-Amlodipine</b>
Tab 10 mg – 1% DV Oct-11 to 2014.....	4.15	100	<b>Apo-Amlodipine</b>
<b>AMOXYCILLIN</b>			
Cap 250 mg – 1% DV Dec-10 to 2013.....	16.18	500	<b>Alphamox</b>
Cap 500 mg – 1% DV Dec-10 to 2013.....	26.50	500	<b>Alphamox</b>
Drops 100 mg per ml .....	4.00	30 ml	Ospamox
Grans for oral liq 125 mg per 5 ml .....	1.55	100 ml	Ospamox
Grans for oral liq 250 mg per 5 ml – 1% DV Feb-10 to 2012.....	1.10	100 ml	<b>Ospamox</b>
Inj 250 mg – 1% DV Nov-11 to 2014 .....	12.96	10	<b>Ibiamox</b>
Inj 500 mg – 1% DV Nov-11 to 2014 .....	15.08	10	<b>Ibiamox</b>
Inj 1 g – 1% DV Nov-11 to 2014 .....	21.94	10	<b>Ibiamox</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>AMOXYCILLIN CLAVULANATE</b>			
Tab amoxicillin 500 mg with potassium clavulanate 125 mg .....	12.55	100	Curam Duo
	26.00		Synermox
Grans for oral liq 125 mg with potassium clavulanate 31.25 mg per 5 ml – <b>1% DV Jan-10 to 2012</b> .....	2.20	100 ml	<b>Curam</b>
Grans for oral liq 250 mg with potassium clavulanate 62.5 mg per 5 ml – <b>1% DV Jan-10 to 2012</b> .....	3.85	100 ml	<b>Curam</b>
Inj 600 mg – <b>1% DV Jan-10 to 2012</b> .....	12.67	10	<b>Curam</b>
Inj 1.2 g – <b>1% DV Jan-10 to 2012</b> .....	16.50	10	<b>Curam</b>
<b>AMPHOTERICIN B</b>			
Liposomal inj 50 mg vial – <b>1% DV Sep-09 to 2012</b> .....	3,450.00	10	<b>AmBisome</b>
Lozenges 10 mg .....	5.86	20	Fungilin
<b>ANASTROZOLE</b>			
Tab 1 mg .....	26.55	30	Aremed DP-Anastrozole
<b>ANTITHYMOCYTE GLOBULIN (EQUINE)</b>			
Inj 50 mg per ml, 5 ml .....	2,137.50	5	ATGAM
<b>APOMORPHINE HYDROCHLORIDE</b>			
Inj 10 mg per ml, 2 ml .....	110.00	5	Apomine
<b>APREPITANT</b>			
Cap 2 × 80 mg and 1 × 125 mg .....	116.00	3	Emend Tri-Pack
<b>AQUEOUS CREAM</b>			
Crn 100 g – <b>1% DV Sep-11 to 2014</b> .....	1.23	100 g	<b>AFT</b>
Note: DV Limit applies to pack sizes of 100 g or less.			
Crn 500 g – <b>1% DV Sep-11 to 2014</b> .....	1.96	500 g	<b>AFT</b>
Note: DV Limit applies to pack sizes of greater than 100 g.			
<b>ARIPIPRAZOLE</b>			
Tab 10 mg .....	123.54	30	Abilify
Tab 15 mg .....	175.28	30	Abilify
Tab 20 mg .....	213.42	30	Abilify
Tab 30 mg .....	260.07	30	Abilify
<b>ARSENIC TRIOXIDE</b>			
Inj 10 mg .....	4,817.00	10	AFT
<b>ASCORBIC ACID</b>			
Tab 100 mg – <b>1% DV Oct-10 to 2013</b> .....	13.80	500	<b>Vitala-C</b>
<b>ATAZANAVIR SULPHATE</b>			
Cap 150 mg .....	568.34	60	Reyataz
Cap 200 mg .....	757.79	60	Reyataz
<b>ATENOLOL</b>			
Note: HSS Status has been transferred to Atenolol Tablet USP tab 50 mg and 100 mg from Pacific Atenolol. Pacific Atenolol remains listed.			
Tab 50 mg – <b>1% DV May-10 to 2012</b> .....	6.18	500	Pacific Atenolol
	12.36	1,000	<b>Atenolol Tablet USP</b>
Tab 100 mg – <b>1% DV May-10 to 2012</b> .....	10.73	500	Pacific Atenolol
	21.46	1,000	<b>Atenolol Tablet USP</b>

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>ATOMOXETINE HYDROCHLORIDE</b>			
Cap 10 mg .....	107.03	28	Strattera
Cap 18 mg .....	107.03	28	Strattera
Cap 25 mg .....	107.03	28	Strattera
Cap 40 mg .....	107.03	28	Strattera
Cap 60 mg .....	107.03	28	Strattera
Cap 80 mg .....	139.11	28	Strattera
Cap 100 mg .....	139.11	28	Strattera
<b>ATORVASTATIN</b>			
Tab 10 mg .....	2.90	30	Dr Reddy's Atorvastatin
	18.32		Lipitor
Tab 20 mg .....	4.36	30	Dr Reddy's Atorvastatin
	26.70		Lipitor
Tab 40 mg .....	6.51	30	Dr Reddy's Atorvastatin
	37.02		Lipitor
Tab 80 mg .....	9.67	30	Dr Reddy's Atorvastatin
	110.50		Lipitor
<b>ATRACURIUM BESYLATE</b>			
Inj 10 mg per ml, 2.5 ml – <b>1% DV Sep-09 to 2012</b> .....	12.55	5	<b>Tracrium</b>
Inj 10 mg per ml, 5 ml – <b>1% DV Sep-09 to 2012</b> .....	26.04	5	<b>Tracrium</b>
<b>ATROPINE SULPHATE</b>			
Eye drops 1% .....	17.36	15 ml	Atropt
Inj 600 µg, 1 ml – <b>1% DV Dec-09 to 2012</b> .....	52.00	50	<b>AstraZeneca</b>
<b>AZATHIOPRINE</b>			
Tab 50 mg – <b>1% DV Oct-10 to 2013</b> .....	18.45	100	<b>Imuprine</b>
Inj 50 mg – <b>1% DV Oct-10 to 2013</b> .....	60.00	1	<b>Imuran</b>
<b>AZITHROMYCIN</b>			
Tab 500 mg – <b>1% DV Sep-09 to 2012</b> .....	5.95	2	<b>Arrow-Azithromycin</b>
<b>AZTREONAM</b>			
Inj 1 g – <b>1% DV Sep-11 to 2014</b> .....	131.00	5	<b>Azactam</b>
<b>BACILLUS CALMETTE-GUERIN (BCG) VACCINE</b>			
a) Note: Subsidised only for bladder cancer.			
b) Note: Any BCG injection containing equal to or greater than 500 million CFU is considered a DV Pharmaceutical.			
Inj 2-8 × 100 million CFU – <b>1% DV Jan-11 to 2013</b> .....	187.37	1	<b>OncoTICE</b>
<b>BACLOFEN</b>			
Tab 10 mg – <b>1% DV Dec-09 to 2012</b> .....	4.75	100	<b>Pacifen</b>
Inj 10 mg – <b>1% DV Nov-09 to 2012</b> .....	190.08	1	<b>Lioresal Intrathecal</b>
<b>BARIUM SULPHATE</b>			
Oral suspension 2.2%, 250 ml .....	175.00	24	CP Plus+
Oral suspension 2.2%, 450 ml .....	220.00	24	CT Plus+
<b>BASILIXIMAB</b>			
Inj 20 mg amp .....	3,200.00	1	Simulect
<b>BECLOMETHASONE DIPROPIONATE</b>			
Aerosol inhaler, 50 µg per dose CFC-free .....	8.54	200 dose	Beclazone 50
Metered aqueous nasal spray, 50 µg per dose .....	4.00	200 dose	Alanase
Aerosol inhaler, 100 µg per dose CFC-free .....	12.50	200 dose	Beclazone 100
Metered aqueous nasal spray, 100 µg per dose .....	4.81	200 dose	Alanase
Aerosol inhaler, 250 µg per dose CFC-free .....	22.67	200 dose	Beclazone 250

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>BENDROFLUAZIDE</b>			
Tab 2.5 mg – 1% DV Sep-11 to 2014 .....	6.48	500	<b>Arrow-Bendrofluazide</b>
Tab 5 mg – 1% DV Sep-11 to 2014 .....	9.95	500	<b>Arrow-Bendrofluazide</b>
<b>BENZATHINE BENZYL PENICILLIN</b>			
inj 1.2 mega u per 2.3 ml .....	315.00	10	Bicillin LA
<b>BENZTROPINE MESYLATE</b>			
Tab 2 mg .....	7.99	60	Benztrop
Inj 1 mg per ml, 2 ml .....	95.00	5	Cogentin
<b>BENZYL PENICILLIN SODIUM (PENICILLIN G)</b>			
Inj 600 mg – 1% DV Nov-11 to 2014 .....	11.50	10	<b>Sandoz</b>
<b>BERACTANT</b>			
Inj 25 mg per ml, 8 ml intratracheal .....	550.00	1	Survanta
<b>BETAHISTINE DIHYDROCHLORIDE</b>			
Tab 16 mg .....	10.00	84	Vergo 16
<b>BETAMETHASONE DIPROPIONATE WITH CALCIPOTRIOL</b>			
Oint 500 µg with calcipotriol 50 µg .....	26.12	30 g	Daivobet
Topical gel 500 µg with calcipotriol 50 µg .....	26.12	30 g	Daivobet
<b>BETAMETHASONE VALERATE</b>			
Scalp app 0.1% – 1% DV Dec-09 to 2012 .....	7.22	100 ml	<b>Beta Scalp</b>
<b>BEZAFIBRATE</b>			
Tab 200 mg .....	9.75	90	Fibalip
Tab long-acting 400 mg .....	5.70	30	Bezalip Retard
<b>BICALUTAMIDE</b>			
Tab 50 mg – 1% DV Nov-11 to 2014 .....	10.00	28	<b>Bicalaccord</b>
<b>BISACODYL</b>			
Tab 5 mg – 1% DV Sep-10 to 2013 .....	4.99	200	<b>Lax-Tabs</b>
Suppos 5 mg .....	3.00	6	Dulcolax
Suppos 10 mg .....	3.00	6	Dulcolax
<b>BLOOD GLUCOSE DIAGNOSTIC TEST METER</b>			
Meter .....	19.00	1	Accu-Chek Performa
	9.00		CareSens II
	6.00		CareSens POP
	9.00		FreeStyle Lite
			On Call Advanced
			Optium Xceed
<b>BLOOD GLUCOSE DIAGNOSTIC TEST STRIP</b>			
Blood glucose test strips .....	21.65	50 test	Accu-Chek Performa
			FreeStyle Lite
			Optium 5 second test
Blood glucose test strips × 50 and lancets × 5 .....	19.60	50 test	CareSens
	19.10		On Call Advanced
<b>BORTEZOMIB</b>			
Inj 1 mg .....	540.70	1	Velcade
Inj 3.5 mg .....	1,892.50	1	Velcade

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>BOSENTAN</b>			
Tab 62.5 mg .....	4,585.00	60	Tracleer
Tab 125 mg .....	4,585.00	60	Tracleer
<b>BRIMONIDINE TARTRATE</b>			
Eye drops 0.2% .....	7.93	5 ml	AFT
<b>BUDESONIDE</b>			
Metered aqueous nasal spray, 50 µg per dose .....	4.00	200 dose	Butacort Aqueous
Metered aqueous nasal spray, 100 µg per dose .....	4.81	200 dose	Butacort Aqueous
Powder for inhalation, 200 µg per dose .....	15.20	200 dose	Budenocort
Powder for inhalation, 400 µg per dose .....	25.60	200 dose	Budenocort
<b>BUMETANIDE</b>			
Tab 1 mg .....	16.36	100	Burinex
<b>BUPIVACAINE HYDROCHLORIDE</b>			
Inf 0.25%, 100 ml theatre pack .....	150.00	5	Marcaïn
Inj 0.5%, 4 ml .....	50.00	5	Marcaïn Isobaric
Inj 0.5%, 8% glucose, 4 ml .....	38.00	5	Marcaïn Heavy
Inj 0.25%, 20 ml – 1% DV Sep-09 to 2012 .....	35.00	5	<b>Marcaïn</b>
Inj 0.5%, 10 ml – 1% DV Sep-09 to 2012 .....	35.00	50	<b>Marcaïn</b>
Inj 0.5%, 10 ml theatre pack – 1% DV Sep-09 to 2012 .....	28.00	5	<b>Marcaïn</b>
Inj 0.5%, 20 ml theatre pack – 1% DV Sep-09 to 2012 .....	25.00	5	<b>Marcaïn</b>
<b>BUPIVACAINE HYDROCHLORIDE WITH ADRENALINE</b>			
Inj 0.25% with 1:400,000 adrenaline, 20 ml – 1% DV Nov-11 to 2014 .....	135.00	5	<b>Marcaïn with Adrenaline</b>
Inj 0.5% with 1:200,000 adrenaline, 20 ml – 1% DV Nov-11 to 2014 .....	115.00	5	<b>Marcaïn with Adrenaline</b>
<b>BUPIVACAINE HYDROCHLORIDE WITH FENTANYL</b>			
Inj 0.125% with 2 µg fentanyl per ml, 100 ml bag – 1% DV Nov-11 to 2014 .....	210.00	10	<b>Bupafen</b>
Inj 0.125% with 2 µg fentanyl per ml, 200 ml bag – 1% DV Nov-11 to 2014 .....	210.00	10	<b>Bupafen</b>
Inj 0.125% with 2 µg fentanyl per ml, 15 ml prefilled syringe – 1% DV Nov-11 to 2014 .....	72.00	10	<b>Biomed</b>
Inj 0.125% with 2 µg fentanyl per ml, 20 ml prefilled syringe – 1% DV Nov-11 to 2014 .....	92.00	10	<b>Biomed</b>
<b>BUPROPION HYDROCHLORIDE</b>			
Tab modified-release 150 mg .....	65.00	30	Zyban
<b>BUSPIRONE HYDROCHLORIDE</b>			
Tab 5 mg .....	28.00	100	Pacific Buspirone
Tab 10 mg .....	17.00	100	Pacific Buspirone
<b>BUSULPHAN</b>			
Tab 2 mg .....	59.50	100	Myleran
<b>CAFFEINE CITRATE</b>			
Oral liq 20 mg per ml (10 mg base per ml) .....	14.85	25 ml	Biomed
Inj 20 mg per ml (10 mg base per ml), 2.5 ml .....	55.75	5	Biomed

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>CALCIPOTRIOL</b>			
Crn 50 µg per g .....	16.00	30 g	Daivonex
	45.00	100 g	Daivonex
Oint 50 µg per g .....	20.20	30 g	Daivonex
	45.00	100 g	Daivonex
Soln 50 µg per ml .....	16.00	30 ml	Daivonex
	33.79	60 ml	Daivonex
<b>CALCITONIN</b>			
Inj 100 u per ml, 1 ml – 1% DV Sep-11 to 2014.....	110.00	5	<b>Miacalcic</b>
<b>CALCITRIOL</b>			
Cap 0.25 µg – 1% DV Feb-10 to 2012 .....	3.03	30	<b>Airflow</b>
Cap 0.5 µg – 1% DV Feb-10 to 2012 .....	5.62	30	<b>Airflow</b>
Oral liq 1 µg per ml .....	39.40	10 ml	Rocaltrol
<b>CALCIUM CARBONATE</b>			
Tab 1.25 g ( 500 mg elemental) – 1% DV Feb-12 to 2014 .....	6.38	250	<b>Arrow-Calcium</b>
Tab eff 1.75 g (1 g elemental) – 1% DV Nov-11 to 2014 .....	6.21	30	<b>Calsource</b>
<b>CALCIUM FOLINATE</b>			
Tab 15 mg – 1% DV Nov-11 to 2014 .....	82.45	10	<b>DBL Leucovorin</b>
			<b>Calcium</b>
Inj 50 mg – 1% DV Sep-08 to 2014 .....	24.50	5	<b>Calcium Folate</b>
			<b>Ebewe</b>
Inj 100 mg – 1% DV Sep-08 to 2014 .....	9.75	1	<b>Calcium Folate</b>
			<b>Ebewe</b>
Inj 300 mg – 1% DV Sep-08 to 2014 .....	30.00	1	<b>Calcium Folate</b>
			<b>Ebewe</b>
Inj 1 g – 1% DV Sep-08 to 2014 .....	90.00	1	<b>Calcium Folate</b>
			<b>Ebewe</b>
<b>CALCIUM GLUCONATE</b>			
Inj 10%, 10 ml .....	21.40	10	Mayne
Gel, 2.5%, 50 g .....	420.00	20	healthE
<b>CALCIUM POLYSTYRENE SULPHONATE</b>			
Powder .....	169.85	300 g	Calcium Resonium
<b>CANDESARTAN</b>			
Tab 4 mg .....	16.22	30	Atacand
	48.66	90	Candestar
Tab 8 mg .....	19.30	30	Atacand
	57.90	90	Candestar
Tab 16 mg .....	23.54	30	Atacand
	70.62	90	Candestar
Tab 32 mg .....	38.50	30	Atacand
	115.50	90	Candestar
<b>CAPECITABINE</b>			
Tab 150 mg .....	115.00	60	Xeloda
Tab 500 mg .....	705.00	120	Xeloda
<b>CAPSAICIN</b>			
Crn 0.075% .....	12.50	45 g	Zostrix HP

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>CAPTOPRIL</b>			
Tab 12.5 mg – 1% DV Jan-11 to 2013	2.00	100	<b>m-Captopril</b>
Tab 25 mg – 1% DV Jan-11 to 2013	2.40	100	<b>m-Captopril</b>
Tab 50 mg – 1% DV Jan-11 to 2013	3.50	100	<b>m-Captopril</b>
Oral liq 5 mg per ml – 1% DV Nov-10 to 2013	94.99	95 ml	<b>Capoten</b>
<b>CARBOPLATIN</b>			
Inj 10 mg per ml, 5 ml – 1% DV Dec-09 to 2012	20.00	1	<b>Carboplatin Ebewe</b>
Inj 10 mg per ml, 15 ml – 1% DV Dec-09 to 2012	22.50	1	<b>Carboplatin Ebewe</b>
Inj 10 mg per ml, 45 ml – 1% DV Dec-09 to 2012	50.00	1	<b>Carboplatin Ebewe</b>
Inj 10 mg per ml, 100 ml – 1% DV Dec-09 to 2012	105.00	1	<b>Carboplatin Ebewe</b>
<b>CARVEDILOL</b>			
Tab 6.25 mg	21.00	30	Dilatrend
Tab 12.5 mg	27.00	30	Dilatrend
Tab 25 mg	33.75	30	Dilatrend
<b>CASPOFUNGIN</b>			
Inj 50 mg – 1% DV Nov-09 to 2012	667.50	1	<b>Cancidas</b>
Inj 70 mg – 1% DV Nov-09 to 2012	862.50	1	<b>Cancidas</b>
<b>CEFACLOR MONOHYDRATE</b>			
Cap 250 mg	24.57	100	Cefaclor Sandoz
Grans for oral liq 125 mg per 5 ml – 1% DV Sep-10 to 2013	3.53	100 ml	<b>Ranbaxy-Cefaclor</b>
<b>CEFAZOLIN SODIUM</b>			
Inj 500 mg – 1% DV Mar-12 to 2014	3.99	5	<b>AFT</b>
Inj 1 g – 1% DV Mar-12 to 2014	3.99	5	<b>AFT</b>
<b>CEFEPIME HYDROCHLORIDE</b>			
Inj 1 g, 15 ml	19.55	1	Maxipime
Inj 2 g, 77 ml	39.10	1	Maxipime
<b>CEFOTAXIME</b>			
Inj 500 mg – 1% DV Oct-11 to 2014	1.90	1	<b>Cefotaxime Sandoz</b>
Inj 1 g – 1% DV Nov-11 to 2014	15.58	10	<b>DBL Cefotaxime</b>
Inj 2 g	2.60	1	Cefotaxime Sandoz
<b>CEFOXITIN SODIUM</b>			
Powder for inj 1 g	55.00	5	Mayne
<b>CEFTAZIDIME</b>			
Inj 500 mg – 1% DV Oct-11 to 2014	2.37	1	<b>Fortum</b>
Inj 1 g – 1% DV Oct-11 to 2014	3.25	1	<b>DBL Ceftazidime</b>
Inj 2 g – 1% DV Oct-11 to 2014	6.49	1	<b>DBL Ceftazidime</b>
<b>CEFTRIAXONE SODIUM</b>			
Inj 2 g – 1% DV Nov-10 to 2013	5.20	1	<b>Veracol</b>
Inj 500 mg – 1% DV Nov-10 to 2013	2.70	1	<b>Veracol</b>
Inj 1 g – 1% DV May-11 to 2013	10.49	5	<b>Aspen Ceftriaxone</b>
<b>CEFUROXIME AXETIL</b>			
Tab 250 mg	29.40	50	Zinnat
<b>CEFUROXIME SODIUM</b>			
Inj 750 mg – 1% DV Mar-12 to 2014	6.96	5	<b>m-Cefuroxime</b>
Inj 1.5 g – 1% DV Apr-12 to 2014	2.65	1	<b>Mylan</b>
	4.04		Zinacef

*(Zinacef Inj 1.5 g to be delisted 1 April 2012)*

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>CELIPROLOL</b>			
Tab 200 mg .....	19.00	180	Celol
<b>CEPHALEXIN MONOHYDRATE</b>			
Cap 500 mg .....	8.90	20	Cephalexin ABM
Grans for oral liq 125 mg per 5 ml – 1% DV Feb-10 to 2012 .....	8.50	100 ml	<b>Cefalexin Sandoz</b>
Grans for oral liq 250 mg per 5 ml – 1% DV Feb-10 to 2012 .....	11.50	100 ml	<b>Cefalexin Sandoz</b>
<b>CETIRIZINE HYDROCHLORIDE</b>			
Tab 10 mg – 1% DV Sep-11 to 2014 .....	1.59	100	<b>Zetop</b>
Oral liq 1 mg per ml – 1% DV Nov-11 to 2014 .....	3.52	200 ml	<b>Cetirizine - AFT</b>
<b>CETOMACROGOL</b>			
Crm BP 100 g .....	33.00	20	healthE
Crm BP 500 g .....	3.50	1	Pharmacy Health
<b>CHLORAMPHENICOL</b>			
Eye oint 1% – 1% DV Sep-09 to 2012 .....	2.37	4 g	<b>Chlorsig</b>
Eye drops 0.5% – 1% DV Dec-10 to 2012 .....	1.28	10 ml	<b>Chlorafast</b>
<b>CHLORHEXIDINE</b>			
Crm 1% obstetric – 1% DV Nov-09 to 2012 .....	1.36	50 g	<b>healthE</b>
Soln 0.02% for irrigation .....	2.92	100 ml	Baxter
Soln 0.05% for irrigation .....	3.02	100 ml	Baxter
	3.63	500 ml	Baxter
Soln 0.1% for irrigation .....	3.10	100 ml	Baxter
Soln 0.5% for irrigation .....	4.69	500 ml	Baxter
Foaming liquid 4%, 50 ml .....	37.20	20	healthE
Soln 5%, 500 ml .....	186.00	12	healthE
<b>CHLORHEXIDINE GLUCONATE</b>			
Obstetric lotion 1%, 200 ml .....	81.00	12	healthE
<b>CHLORHEXIDINE IN ALCOHOL</b>			
Soln 0.5% with 70% alcohol, 25 ml (tinted pink) .....	232.50	150	healthE
Soln 0.5% with 70% alcohol, 100 ml (tinted pink) .....	31.80	12	healthE
Soln 0.5% with 70% alcohol, 100 ml (tinted red) .....	34.80	12	healthE
Soln 0.5% with 70% alcohol, 500 ml (tinted pink) .....	65.40	12	healthE
Soln 0.5% with 70% alcohol, 500 ml (tinted red) .....	70.80	12	healthE
Soln 2% with 70% alcohol, 100 ml (tinted pink) .....	42.48	12	healthE
Soln 2% with 70% alcohol, 100 ml (tinted red) .....	46.32	12	healthE
Soln 2% with 70% alcohol, 500 ml (tinted red) .....	114.72	12	healthE
<b>CHLORHEXIDINE WITH CETRIMIDE</b>			
Soln 0.015% with 0.15% cetrimide for irrigation .....	3.21	100 ml	Baxter
	3.47	500 ml	Baxter
	4.17	1,000 ml	Baxter
Soln 0.05% with 0.5% cetrimide for irrigation .....	4.20	100 ml	Baxter
	3.87	500 ml	Baxter
Soln 0.1% with 1% cetrimide for irrigation .....	4.38	100 ml	Baxter
	5.81	500 ml	Baxter
<b>CHLOROTHIAZIDE</b>			
Oral liq 50 mg per ml .....	26.00	25 ml	Biomed
<b>CHLORTHALIDONE</b>			
Tab 25 mg .....	8.00	50	Hygroton

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>CHOLECALCIFEROL</b>			
Tab 50,000 iu .....	7.76	12	Cal-d-Forte
<b>CILAZAPRIL WITH HYDROCHLOROTHIAZIDE</b>			
Tab 5 mg with 12.5 mg .....	6.30	28	Inhibace Plus
<b>CIPROFLOXACIN</b>			
Tab 250 mg – 1% DV Dec-11 to 2014 .....	2.20	28	<b>Cipflox</b>
Tab 500 mg – 1% DV Dec-11 to 2014 .....	3.00	28	<b>Cipflox</b>
Tab 750 mg – 1% DV Dec-11 to 2014 .....	5.15	28	<b>Cipflox</b>
Inj 2 mg per ml, 100 ml – 1% DV Jun-10 to 2013 .....	41.00	10	<b>Aspen Ciprofloxacin</b>
<b>CISPLATIN</b>			
Inj 1 mg per ml, 50 ml – 1% DV Jul-10 to 2013 .....	15.00	1	<b>Cisplatin Ebewe</b>
Inj 1 mg per ml, 100 ml – 1% DV Jul-10 to 2013 .....	21.00	1	<b>Cisplatin Ebewe</b>
<b>CITALOPRAM HYDROBROMIDE</b>			
Tab 20 mg – 1% DV Sep-11 to 2014 .....	2.34	84	<b>Arrow-Citalopram</b>
<b>CLADRIBINE</b>			
Inj 2 mg per ml, 5 ml .....	873.00	1	Litak
Inj 1 mg per ml, 10 ml .....	5,249.72	7	Leustatin
<b>CLARITHROMYCIN</b>			
Tab 250 mg – 1% DV Jan-12 to 2014 .....	4.19	14	<b>Apo-Clarithromycin</b>
Tab 500mg – 1% DV Apr-12 to 2014 .....	10.95	14	<b>Apo-Clarithromycin</b>
Grans for oral liq 125 mg per 5 ml .....	23.12	70 ml	Klacid
Inj 500 mg – 1% DV Oct-11 to 2014 .....	30.00	1	<b>Klacid</b>
<b>CLINDAMYCIN</b>			
Cap 150 mg .....	11.39	16	Dalacin C
Cap hydrochloride 150 mg – 1% DV May-12 to 2013 .....	9.90	16	<b>Clindamycin ABM</b>
Inj phosphate 150 mg per ml, 4 ml – 1% DV Jul-10 to 2013 .....	160.00	10	<b>Dalacin C</b>
<i>(Dalacin C Cap 150 mg to be delisted 1 May 2012)</i>			
<b>CLOBETASOL PROPIONATE</b>			
Crm 0.05% – 1% DV Dec-09 to 2012 .....	3.48	30 g	<b>Dermol</b>
Oint 0.05% – 1% DV Dec-09 to 2012 .....	3.48	30 g	<b>Dermol</b>
Scalp app 0.05% – 1% DV Dec-09 to 2012 .....	6.36	30 ml	<b>Dermol</b>
<b>CLOMIPHENE CITRATE</b>			
Tab 50 mg .....	29.84	10	Serophene
<b>CLONAZEPAM</b>			
Tab 500 µg .....	6.68	100	Paxam
Tab 2 mg .....	12.75	100	Paxam
Inj 1 mg per ml, 1 ml .....	19.00	5	Rivotril
<b>CLONIDINE</b>			
TDDS 2.5 mg, 100 µg per day – 1% DV Dec-09 to 2012 .....	23.30	4	<b>Catapres-TTS-1</b>
TDDS 5 mg, 200 µg per day – 1% DV Dec-09 to 2012 .....	32.80	4	<b>Catapres-TTS-2</b>
TDDS 7.5 mg, 300 µg per day – 1% DV Dec-09 to 2012 .....	41.20	4	<b>Catapres-TTS-3</b>
<b>CLONIDINE HYDROCHLORIDE</b>			
Tab 25 µg – 1% DV Dec-09 to 2012 .....	19.25	100	<b>Dixarit</b>
Tab 150 µg – 1% DV Dec-09 to 2012 .....	33.00	100	<b>Catapres</b>
Inj 150 µg per ml, 1 ml – 1% DV Dec-09 to 2012 .....	15.45	5	<b>Catapres</b>
<b>CLOPIDOGREL</b>			
Tab 75 mg – 1% DV Nov-10 to 2013 .....	16.25	90	<b>Apo-Clopidogrel</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>CLOSTRIDUM BOTULINUM</b>			
Inj 100 u .....	467.50	1	Botox
Inj 500 u .....	1,295.00	2	Dysport
<b>CLOTRIMAZOLE</b>			
Crn 1% – <b>1% DV Nov-11 to 2014</b> .....	0.54	20 g	<b>Clomazol</b>
Vaginal crn 1% with applicators – <b>1% DV Sep-10 to 2013</b> .....	1.30	35 g	<b>Clomazol</b>
Vaginal crn 2% with applicators – <b>1% DV Sep-10 to 2013</b> .....	2.50	20 g	<b>Clomazol</b>
<b>CLOZAPINE</b>			
Tab 25 mg .....	13.37	50	Clozaril
	26.74	100	Clozaril
	6.69	50	Clopine
	13.37	100	Clopine
Tab 50 mg .....	8.67	50	Clopine
	17.33	100	Clopine
Tab 100 mg .....	34.65	50	Clozaril
	69.30	100	Clozaril
	17.33	50	Clopine
	34.65	100	Clopine
Tab 200 mg .....	34.65	50	Clopine
	69.30	100	Clopine
Oral liq 50 mg per ml .....	17.33	100 ml	Clopine
<b>CO-TRIMOXAZOLE</b>			
Oral liq 240 mg per 5 ml .....	2.15	100 ml	Deprim
<b>COCAINE</b>			
Soln 4%, 2 ml .....	25.46	1	Biomed
<b>CODEINE PHOSPHATE</b>			
Tab 15 mg .....	5.39	100	PSM
Tab 30 mg .....	8.25	100	PSM
Tab 60 mg .....	17.76	100	PSM
<b>COLASPASE (L-ASPARAGINASE)</b>			
Inj 10,000 iu .....	102.32	1	Leunase
<b>COLCHICINE</b>			
Tab 500 µg – <b>1% DV Sep-10 to 2013</b> .....	9.60	100	<b>Colgout</b>
<b>COLISTIN SULPHOMETHATE</b>			
Inj 150 mg .....	65.00	1	Colistin-Link
<b>CORD ORAL FEED 1.5KCAL/ML</b>			
Liquid (vanilla) .....	1.66	237 ml	Pulmocare
<b>CROTAMITON</b>			
Crn 10% – <b>1% DV May-10 to 2012</b> .....	3.79	20 g	<b>Itch-Soothe</b>
<b>CYCLIZINE HYDROCHLORIDE</b>			
Tab 50 mg – <b>1% DV Sep-09 to 2012</b> .....	1.59	10	<b>Nausicalm</b>
<b>CYCLIZINE LACTATE</b>			
Inj 50 mg per ml, 1 ml .....	14.95	5	Nausicalm
<b>CYCLOPHOSPHAMIDE</b>			
Tab 50 mg – <b>1% DV Sep-10 to 2013</b> .....	25.71	50	<b>Cycloblastin</b>
Inj 1 g – <b>1% DV Nov-11 to 2014</b> .....	26.70	1	<b>Endoxan</b>
Inj 2 g – <b>1% DV Nov-11 to 2014</b> .....	56.90	1	<b>Endoxan</b>

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>CYCLOSPORIN</b>			
Cap 25 mg .....	59.50	50	Neoral
Cap 50 mg .....	118.54	50	Neoral
Cap 100 mg .....	237.08	50	Neoral
Oral liq 100 mg per ml .....	264.17	50 ml	Neoral
Inf 50 mg per ml, 5 ml – 1% DV Sep-09 to 2012 .....	276.30	10	<b>Sandimmun</b>
<b>CYPROTERONE ACETATE</b>			
Tab 50 mg – 1% DV Sep-09 to 2012 .....	21.10	50	<b>Siterone</b>
Tab 100 mg – 1% DV Sep-09 to 2012 .....	41.50	50	<b>Siterone</b>
<b>CYTARABINE</b>			
Inj 100 mg – 1% DV Aug-10 to 2013 .....	76.00	5	<b>Pfizer</b>
Inj 500 mg – 1% DV Aug-10 to 2013 .....	18.15	1	<b>Pfizer</b>
Inj 1 g – 1% DV Aug-10 to 2013 .....	37.00	1	<b>Pfizer</b>
Inj 2 g – 1% DV Aug-10 to 2013 .....	31.00	1	<b>Pfizer</b>
<b>DABIGATRAN</b>			
Cap 75 mg .....	148.00	60	Pradaxa
Cap 110 mg .....	148.00	60	Pradaxa
Cap 150 mg .....	148.00	60	Pradaxa
<b>DACARBAZINE</b>			
Inj 200 mg – 1% DV Nov-10 to 2013 .....	48.00	1	<b>Hospira</b>
<b>DALTEPARIN SODIUM</b>			
Inj 2,500 iu per 0.2 ml prefilled syringe .....	49.00	10	Fragmin
Inj 5,000 iu per 0.2 ml prefilled syringe .....	52.30	10	Fragmin
Inj 7,500 iu per 0.75 ml graduated syringe .....	78.85	10	Fragmin
Inj 10,000 iu per 1 ml graduated syringe .....	105.12	10	Fragmin
Inj 12,500 iu per 0.5 ml prefilled syringe .....	169.00	10	Fragmin
Inj 15,000 iu per 0.6 ml prefilled syringe .....	210.00	10	Fragmin
Inj 18,000 iu per 0.72 ml prefilled syringe .....	250.00	10	Fragmin
<b>DANAZOL</b>			
Cap 100 mg .....	68.33	100	Azol
Cap 200 mg .....	97.83	100	Azol
<b>DANTHRON WITH POLAXAMER</b>			
Oral liq 25 mg with poloxamer 200 mg per 5 ml .....	9.50	300 ml	Pinorax
Oral liq 75 mg with poloxamer 1 g per 5 ml .....	13.95	300 ml	Pinorax Forte
<b>DANTROLENE SODIUM</b>			
Cap 25 mg .....	65.00	100	Dantrium
Cap 50 mg .....	77.00	100	Dantrium
Inj 1 mg per ml, 20 ml .....	800.00	6	Dantrium IV
<b>DANTROLENE SODIUM HEMIHEPTAHYDRATE</b>			
Inj 20 mg .....	800.00	6	Dantrium IV
<b>DARUNAVIR</b>			
Tab 400 mg .....	837.50	60	Prezista
Tab 600 mg .....	1,190.00	60	Prezista
<b>DASATINIB</b>			
Tab 20 mg .....	3,774.06	60	Sprycel
Tab 50 mg .....	6,214.20	60	Sprycel
Tab 70 mg .....	7,692.58	60	Sprycel
Tab 100 mg .....	6,214.20	30	Sprycel

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>DAUNORUBICIN</b>			
Inj 2 mg per ml, 10 ml .....	118.72	1	Pfizer
<b>DEFERIPRONE</b>			
Tab 500 mg .....	533.17	100	Ferriprox
Oral liq 100 mg per ml .....	266.59	250 ml	Ferriprox
<b>DESFERRIOXAMINE MESYLATE</b>			
Inj 500 mg .....	99.00	10	Mayne
<b>DESFLURANE</b>			
Liq 240 ml bottle – 1% DV Nov-09 to 2012.....	1,230.00	6	<b>Suprane</b>
<b>DESMOPRESSIN</b>			
Tab 100 µg .....	36.40	30	Minirin
Nasal spray 10 µg per dose – 1% DV Sep-11 to 2014 .....	27.48	6 ml	<b>Desmopressin-PH&amp;T</b>
<b>DEXAMETHASONE</b>			
Eye oint 0.1% – 1% DV Sep-11 to 2014 .....	5.86	3.5 g	<b>Maxidex</b>
Eye drops 0.1% – 1% DV Sep-10 to 2013 .....	4.50	5 ml	<b>Maxidex</b>
Oral liq 1 mg per ml .....	45.00	25 ml	Biomed
<b>DEXAMETHASONE SODIUM PHOSPHATE</b>			
Inj 4 mg per ml, 1 ml – 1% DV Aug-10 to 2013 .....	21.50	5	<b>Hospira</b>
Inj 4 mg per ml, 2 ml – 1% DV Aug-10 to 2013 .....	31.00	5	<b>Hospira</b>
<b>DEXAMPHETAMINE SULPHATE</b>			
Tab 5 mg .....	16.50	100	PSM
<b>DEXTRAN 70 WITH SODIUM CHLORIDE</b>			
Inf 6% with 0.9% sodium chloride .....	16.59	500 ml	Baxter
<b>DEXTROSE</b>			
Inj 50%, 10 ml – 1% DV Sep-11 to 2014 .....	19.50	5	<b>Biomed</b>
Inj 50%, 50 ml – 1% DV Sep-11 to 2014 .....	10.85	1	<b>Biomed</b>
Inj 50%, 90 ml – 1% DV Sep-11 to 2014 .....	11.25	1	<b>Biomed</b>
<b>DIABETIC ENTERAL FEED 1KCAL/ML</b>			
Liquid (vanilla) .....	7.50	1,000 ml	Glucerna Select RTH
<b>DIABETIC ORAL FEED 1KCAL/ML</b>			
Liquid (vanilla) .....	2.10	237 ml	Resource Diabetic
	1.88	250 ml	Glucerna Select
<b>DIAZEPAM</b>			
Tab 2 mg .....	11.44	500	Arrow-Diazepam
Tab 5 mg .....	13.71	500	Arrow-Diazepam
Inj 5 mg per ml, 2 ml .....	9.24	5	Mayne
Rectal tubes 5 mg .....	25.05	5	Stesolid
Rectal tubes 10 mg .....	30.50	5	Stesolid
<b>DICLOFENAC SODIUM</b>			
Tab long-acting 75 mg .....	3.10	30	Diclax
Eye drops 1 mg per ml – 1% DV Sep-11 to 2014 .....	13.80	5 ml	<b>Voltaren Ophtha</b>
Inj 25 mg per ml, 3 ml – 1% DV Sep-11 to 2014.....	12.00	5	<b>Voltaren</b>
Suppos 12.5 mg – 1% DV Sep-11 to 2014 .....	1.85	10	<b>Voltaren</b>
Suppos 25 mg – 1% DV Sep-11 to 2014 .....	2.22	10	<b>Voltaren</b>
Suppos 50 mg – 1% DV Sep-11 to 2014 .....	3.84	10	<b>Voltaren</b>
Suppos 100 mg – 1% DV Sep-11 to 2014 .....	6.36	10	<b>Voltaren</b>

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>DIHYDROCODEINE TARTRATE</b>			
Tab long-acting 60 mg – 1% DV Jun-10 to 2013 .....	27.27	60	<b>DHC Continus</b>
<b>DILTIAZEM HYDROCHLORIDE</b>			
Tab 30 mg .....	4.60	100	Dilzem
Tab 60 mg .....	8.50	100	Dilzem
Cap long-acting 120 mg .....	4.34	30	Cardizem CD
Cap long-acting 180 mg .....	6.50	30	Cardizem CD
Cap long-acting 240 mg .....	8.67	30	Cardizem CD
<b>DINOPROSTONE</b>			
Gel 1 mg, 2.5 ml .....	52.65	1	Prostin E2
Gel 2 mg, 2.5 ml .....	64.60	1	Prostin E2
<b>DIPYRIDAMOLE</b>			
Tab long-acting 150 mg – 1% DV Oct-11 to 2014 .....	11.52	60	<b>Pytazen SR</b>
<b>DISULFIRAM</b>			
Tab 200 mg .....	24.30	100	Antabuse
<b>DOCETAXEL</b>			
Inj 20 mg – 1% DV Sep-11 to 2014 .....	48.75	1	<b>Docetaxel Ebewe</b>
Inj 80 mg – 1% DV Sep-11 to 2014 .....	195.00	1	<b>Docetaxel Ebewe</b>
<b>DOCUSATE SODIUM</b>			
Cap 50 mg – 1% DV Sep-11 to 2014 .....	2.57	100	<b>Laxofast 50</b>
Cap 120 mg – 1% DV Sep-11 to 2014 .....	3.48	100	<b>Laxofast 120</b>
<b>DOCUSATE SODIUM WITH SENNOSIDES</b>			
Tab 50 mg with total sennosides 8 mg – 1% DV Jun-10 to 2013 .....	6.38	200	<b>Laxsol</b>
<b>DONEPEZIL HYDROCHLORIDE</b>			
Tab 5 mg – 1% DV Nov-10 to 2012 .....	7.71	90	<b>Donepezil-Rex</b>
Tab 10 mg – 1% DV Nov-10 to 2012 .....	14.06	90	<b>Donepezil-Rex</b>
<b>DOPAMINE HYDROCHLORIDE</b>			
Inj 40 mg per ml, 5 ml – 1% DV Feb-11 to 2012 .....	82.08	10	<b>Martindale</b>
<b>DORIPENEM</b>			
Vial for infusion 500 mg .....	454.50	10	Doribax
<b>DORZOLAMIDE HYDROCHLORIDE WITH TIMOLOL MALEATE</b>			
Eye drops 2% with timolol maleate 0.5% .....	15.50	5 ml	Cosopt
<b>DOTHIEPIN HYDROCHLORIDE</b>			
Tab 75 mg .....	10.50	100	Dopress
Cap 25 mg .....	6.17	100	Dopress
<b>DOXAZOSIN MESYLATE</b>			
Tab 2 mg – 1% DV Jun-11 to 2014 .....	8.23	500	<b>Apo-Doxazosin</b>
Tab 4 mg – 1% DV Jun-11 to 2014 .....	12.40	500	<b>Apo-Doxazosin</b>
<b>DOXORUBICIN</b>			
Inj 10 mg – 1% DV Feb-11 to 2012 .....	10.00	1	<b>Doxorubicin Ebewe</b>
Inj 50 mg – 1% DV Feb-11 to 2012 .....	40.00	1	DBL Doxorubicin <b>Doxorubicin Ebewe</b>
Inj 100 mg – 1% DV Feb-11 to 2012 .....	80.00	1	<b>Doxorubicin Ebewe</b>
Inj 200 mg – 1% DV Feb-11 to 2012 .....	150.00	1	Adriamycin <b>Doxorubicin Ebewe</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>DOXYCYCLINE HYDROCHLORIDE</b>			
Tab 100 mg – 1% DV Sep-11 to 2014 .....	7.95	250	<b>Doxine</b>
<b>EFAVIRENZ</b>			
Tab 50 mg .....	158.33	30	Stocrin
Tab 200 mg .....	474.99	90	Stocrin
Tab 600 mg .....	474.99	30	Stocrin
<b>EMTRICITABINE</b>			
Cap 200 mg .....	307.20	30	Emtriva
<b>EMULSIFYING OINTMENT</b>			
Oint BP 100 g – 1% DV Nov-11 to 2014 .....	1.95	100 g	<b>Jaychem</b>
Oint BP 500 g – 1% DV Sep-11 to 2014 .....	3.04	500 g	<b>AFT</b>
Note: DV Limit applies to pack sizes of greater than 100 g			
<b>ENALAPRIL</b>			
Tab 5 mg – 1% DV Aug-10 to 2012 .....	1.98	90	<b>Arrow-Enalapril</b>
Tab 10 mg – 1% DV Aug-10 to 2012 .....	2.44	90	<b>Arrow-Enalapril</b>
Tab 20 mg – 1% DV Aug-10 to 2012 .....	3.24	90	<b>Arrow-Enalapril</b>
<b>ENFUVRTIDE</b>			
Powder for inj 90 mg per ml × 60 .....	2,380.00	1	Fuzeon
<b>ENOXAPARIN SODIUM</b>			
Inj 20 mg – 1% DV Aug-09 to 2012 .....	39.20	10	<b>Clexane</b>
Inj 40 mg – 1% DV Aug-09 to 2012 .....	52.30	10	<b>Clexane</b>
Inj 60 mg – 1% DV Aug-09 to 2012 .....	78.85	10	<b>Clexane</b>
Inj 80 mg – 1% DV Aug-09 to 2012 .....	105.12	10	<b>Clexane</b>
Inj 100 mg – 1% DV Aug-09 to 2012 .....	135.20	10	<b>Clexane</b>
Inj 120 mg – 1% DV Aug-09 to 2012 .....	168.00	10	<b>Clexane</b>
Inj 150 mg – 1% DV Aug-09 to 2012 .....	192.00	10	<b>Clexane</b>
<b>ENTACAPONE</b>			
Tab 200 mg – 1% DV Jul-09 to 2012 .....	116.00	100	<b>Comtan</b>
<b>ENTECAVIR</b>			
Tab 0.5 mg .....	400.00	30	Baraclude
<b>ENTERAL FEED 1KCAL/ML</b>			
Liquid .....	1.24	250 ml	Osmolite
	2.65	500 ml	Osmolite
	5.29	1,000 ml	Osmolite RTH
<b>ENTERAL FEED WITH FIBRE 1.5KCAL/ML</b>			
Liquid .....	1.75	250 ml	Ensure Plus HN
	7.00	1,000 ml	Ensure Plus RTH
<b>ENTERAL FEED WITH FIBRE 1KCAL/ML</b>			
Liquid .....	1.32	237 ml	Jevity
	2.65	500 ml	Jevity RTH
	5.29	1,000 ml	Jevity RTH
<b>ENTERAL/ORAL ELEMENTAL FEED 1KCAL/ML</b>			
Powder .....	7.50	76 g	Alitraq
	4.40	79 g	Vital HN
<b>EPHEDRINE SULPHATE</b>			
Inj 30 mg per ml, 1 ml .....	44.00	5	Mayne

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>EPIRUBICIN</b>			
Inj 2 mg per ml, 5 ml – 1% DV Oct-09 to 2012 .....	25.00	1	<b>Epirubicin Ebewe</b>
Inj 2 mg per ml, 25 ml – 1% DV Oct-09 to 2012 .....	87.50	1	<b>Epirubicin Ebewe</b>
Inj 2 mg per ml, 50 ml – 1% DV Oct-09 to 2012 .....	125.00	1	<b>Epirubicin Ebewe</b>
Inj 2 mg per ml, 100 ml – 1% DV Oct-09 to 2012 .....	210.00	1	<b>Epirubicin Ebewe</b>
<b>EPTIFIBATIDE</b>			
Inj 2 mg per ml, 10 ml .....	111.00	1	Integrilin
Inj 0.75 mg per ml, 100 ml .....	324.00	1	Integrilin
<b>ERGOMETRINE MALEATE</b>			
Inj 500 µg per ml, 1 ml – 1% DV Nov-11 to 2014.....	31.00	5	<b>DBL Ergometrine</b>
<b>ERLOTINIB HYDROCHLORIDE</b>			
Tab 100 mg .....	3,100.00	30	Tarceva
Tab 150 mg .....	3,950.00	30	Tarceva
<b>ERTAPENEM SODIUM</b>			
Inj 1 g .....	70.00	1	Invanz
<b>ERYTHROMYCIN ETHYL SUCCINATE</b>			
Tab 400 mg – 1% DV Jul-09 to 2012 .....	16.95	100	<b>E-Mycin</b>
Grans for oral liq 200 mg per 5 ml .....	4.35	100 ml	E-Mycin
Grans for oral liq 400 mg per 5 ml .....	5.85	100 ml	E-Mycin
<b>ERYTHROMYCIN LACTOBIONATE</b>			
Inj 300 mg .....	70.97	5	Mayne
Inj 1 g .....	10.93	1	Erythrocin IV
<b>ERYTHROPOIETIN ALPHA</b>			
Inj human recombinant 1,000 iu, prefilled syringe .....	48.68	6	Eprex
Inj human recombinant 2,000 iu, prefilled syringe .....	120.18	6	Eprex
Inj human recombinant 3,000 iu, prefilled syringe .....	166.87	6	Eprex
Inj human recombinant 4,000 iu, prefilled syringe .....	193.13	6	Eprex
Inj human recombinant 5,000 iu, prefilled syringe .....	243.26	6	Eprex
Inj human recombinant 6,000 iu, prefilled syringe .....	291.92	6	Eprex
Inj human recombinant 10,000 iu, prefilled syringe .....	395.18	6	Eprex
<b>ERYTHROPOIETIN BETA</b>			
Inj 2,000 iu, prefilled syringe .....	120.18	6	NeoRecormon
Inj 3,000 iu, prefilled syringe .....	166.87	6	NeoRecormon
Inj 4,000 iu, prefilled syringe .....	193.13	6	NeoRecormon
Inj 5,000 iu, prefilled syringe .....	243.26	6	NeoRecormon
Inj 6,000 iu, prefilled syringe .....	291.92	6	NeoRecormon
Inj 10,000 iu, prefilled syringe .....	395.18	6	NeoRecormon
<b>ESCITALOPRAM</b>			
Tab 10 mg – 1% DV Feb-11 to 2013.....	2.65	28	<b>Loxalate</b>
Tab 20 mg – 1% DV Feb-11 to 2013.....	4.20	28	<b>Loxalate</b>
<b>ETANERCEPT</b>			
Inj 25 mg .....	949.96	4	Enbrel
Inj 50 mg autoinjector .....	1,899.92	4	Enbrel
<b>ETHAMBUTOL HYDROCHLORIDE</b>			
Tab 100 mg .....	48.01	56	Myambutol
Tab 400 mg .....	49.34	56	Myambutol

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>ETIDRONATE DISODIUM</b>			
Tab 200 mg – 1% DV Jan-10 to 2012 .....	23.95	100	<b>Arrow-Etidronate</b>
<b>ETOPOSIDE</b>			
Cap 50 mg .....	340.73	20	Vepesid
Cap 100 mg .....	340.73	10	Vepesid
Inj 20 mg per ml, 5 ml .....	25.00	1	Mayne
<b>ETOPOSIDE PHOSPHATE</b>			
Inj 100 mg (of etoposide base) – 1% DV Sep-11 to 2014 .....	40.00	1	<b>Etopophos</b>
<b>ETRAVIRINE</b>			
Tab 100 mg .....	770.00	120	Intelence
<b>EXEMESTANE</b>			
Tab 25 mg – 1% DV Jun-11 to 2014 .....	22.57	30	<b>Aromasin</b>
<b>FACTOR EIGHT INHIBITORS BYPASSING AGENT</b>			
Inj 500 U .....	1,640.00	1	FEIBA
Inj 1,000 U .....	3,280.00	1	FEIBA
<b>FAT FREE ARGININE SUPPLEMENT</b>			
Powder (orange) .....	2.15	9.2 g	Resource Arginaid
<b>FELODIPINE</b>			
Tab long-acting 5 mg – 1% DV Sep-09 to 2012 .....	10.73	90	<b>Felo 5 ER</b>
Tab long-acting 10 mg – 1% DV Sep-09 to 2012 .....	15.60	90	<b>Felo 10 ER</b>
<b>FENTANYL</b>			
Transdermal patch 12.5 µg per hour – 1% DV Aug-11 to 2013 .....	8.90	5	<b>Mylan Fentanyl Patch</b>
Transdermal patch 25 µg per hour – 1% DV Aug-11 to 2013 .....	9.15	5	<b>Mylan Fentanyl Patch</b>
Transdermal patch 50 µg per hour – 1% DV Aug-11 to 2013 .....	11.50	5	<b>Mylan Fentanyl Patch</b>
Transdermal patch 75 µg per hour – 1% DV Aug-11 to 2013 .....	13.60	5	<b>Mylan Fentanyl Patch</b>
Transdermal patch 100 µg per hour – 1% DV Aug-11 to 2013 .....	14.50	5	<b>Mylan Fentanyl Patch</b>
<b>FENTANYL CITRATE</b>			
Inf 10 µg per ml, 50 ml premixed bag – 1% DV Dec-11 to 2014 .....	210.00	10	<b>Biomed</b>
Inf 10 µg per ml, 100 ml premixed bag – 1% DV Dec-11 to 2014 .....	210.00	10	<b>Biomed</b>
Inj 10 µg per ml, 50 ml pre-filled syringe – 1% DV Dec-11 to 2014 .....	165.00	10	<b>Biomed</b>
Inj 20 µg per ml, 50 ml pre-filled syringe – 1% DV Dec-11 to 2014 .....	185.00	10	<b>Biomed</b>
Inj 50 µg per ml, 2 ml – 1% DV Jul-11 to 2012 .....	6.43	10	<b>Boucher and Muir</b>
Inj 50 µg per ml, 10 ml – 1% DV Jul-11 to 2012 .....	16.81	10	<b>Boucher and Muir</b>
<b>FERROUS FUMARATE</b>			
Tab 200 mg (65 mg elemental) .....	4.35	100	Ferro-tab
<b>FERROUS FUMARATE WITH FOLIC ACID</b>			
Tab 310 mg (100 mg elemental) with folic acid 350 µg .....	4.75	60	Ferro-F-Tabs
<b>FERROUS SULPHATE</b>			
Oral liq 30 mg per 1 ml (6 mg elemental per 1 ml) – 1% DV Sep-10 to 2013 .....	10.30	500 ml	<b>Ferodan</b>
<b>FILGRASTIM</b>			
Inj 300 µg per 0.5 ml pre-filled syringe .....	135.00	1	Neupogen
Inj 300 µg per 1 ml vial .....	650.00	5	Neupogen
Inj 480 µg per 0.5 ml pre-filled syringe .....	216.00	1	Neupogen
<b>FINASTERIDE</b>			
Tab 5 mg – 1% DV Nov-11 to 2014 .....	5.10	30	<b>Rex Medical</b>

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>FLECAINIDE ACETATE</b>			
Tab 50 mg .....	45.82	60	Tambocor
Tab 100 mg .....	80.92	60	Tambocor
Cap long-acting 100 mg .....	45.82	30	Tambocor CR
Cap long-acting 200 mg .....	80.92	30	Tambocor CR
Inj 10 mg per ml, 15 ml .....	52.45	5	Tambocor
<b>FLUCLOXACILLIN SODIUM</b>			
Cap 250 mg – 1% DV Mar-10 to 2012 .....	32.00	250	<b>AFT</b>
Cap 500 mg – 1% DV Mar-10 to 2012 .....	110.00	500	<b>AFT</b>
Grans for oral liq 125 mg per 5 ml – 1% DV Dec-09 to 2012 .....	3.12	100 ml	<b>AFT</b>
Grans for oral liq 250 mg per 5 ml – 1% DV Dec-09 to 2012 .....	3.55	100 ml	<b>AFT</b>
Inj 250 mg – 1% DV Nov-11 to 2014 .....	10.86	10	<b>Flucloxin</b>
Inj 500 mg – 1% DV Nov-11 to 2014 .....	11.32	10	<b>Flucloxin</b>
Inj 1 g – 1% DV Nov-11 to 2014 .....	14.28	10	<b>Flucloxin</b>
<b>FLUCONAZOLE</b>			
Cap 50 mg – 1% DV Jan-12 to 2014 .....	4.77	28	<b>Ozole</b>
Cap 150 mg – 1% DV Jan-12 to 2014 .....	0.91	1	<b>Ozole</b>
Cap 200 mg – 1% DV Jan-12 to 2014 .....	13.34	28	<b>Ozole</b>
Powder for oral suspension 10 mg per ml .....	34.56	35 ml	Diflucan
Inj 2 mg per ml, 50 ml – 1% DV Dec-10 to 2012 .....	5.68	1	<b>Fluconazole-Clarix</b>
<b>FLUDARABINE PHOSPHATE</b>			
Tab 10 mg .....	867.00	20	Fludara Oral
Inj 50 mg – 1% DV Sep-11 to 2014 .....	525.00	5	<b>Fludarabine Ebewe</b>
<b>FLUDROCORTISONE ACETATE</b>			
Tab 100 µg .....	14.32	100	Florinef
<b>FLUMAZENIL</b>			
Inj 0.5 mg per 5 ml amp .....	170.10	5	Anexate
<b>FLUOCORTOLONE CAPROATE WITH FLUOCORTOLONE PIVALATE AND CINCHOCAINE</b>			
Oint 950 µg, with fluocortolone pivalate 920 µg, and cinchocaine hydrochloride 5 mg per g .....	6.35	30 g	Ultraproct
Suppos 630 µg, with fluocortolone pivalate 610 µg, and cinchocaine hydrochloride 1 mg .....	2.66	12	Ultraproct
<b>FLUOROMETHOLONE</b>			
Eye drops 0.1% – 1% DV Sep-09 to 2012 .....	4.05	5 ml	<b>FML</b>
<b>FLUOROURACIL SODIUM</b>			
Crm 5% .....	26.49	20 g	Efudix
Inj 25 mg per ml, 20 ml .....	55.60	10	Mayne
Inj 25 mg per ml, 100 ml .....	13.55	1	Mayne
Inj 50 mg per ml, 10 ml – 1% DV Nov-10 to 2013 .....	26.25	5	<b>Fluorouracil Ebewe</b>
Inj 50 mg per ml, 20 ml – 1% DV Nov-10 to 2013 .....	7.50	1	<b>Fluorouracil Ebewe</b>
Inj 50 mg per ml, 50 ml – 1% DV Nov-10 to 2013 .....	18.00	1	<b>Fluorouracil Ebewe</b>
Inj 50 mg per ml, 100 ml – 1% DV Nov-10 to 2013 .....	34.50	1	<b>Fluorouracil Ebewe</b>
<b>FLUOXETINE HYDROCHLORIDE</b>			
Tab dispersible 20 mg, scored – 1% DV Sep-10 to 2013 .....	2.50	30	<b>Fluox</b>
Cap 20 mg – 1% DV Sep-10 to 2013 .....	2.70	84	<b>Fluox</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>FLUPENTHIXOL DECANOATE</b>			
Inj 20 mg per ml, 1 ml .....	13.14	5	Fluanxol
Inj 20 mg per ml, 2 ml .....	20.90	5	Fluanxol
Inj 100 mg per ml, 1 ml .....	40.87	5	Fluanxol
<b>FLUPHENAZINE DECANOATE</b>			
Inj 12.5 mg per 0.5 ml, 0.5 ml .....	17.60	5	Modecate
Inj 25 mg per ml, 1 ml .....	27.90	5	Modecate
Inj 100 mg per ml, 1 ml .....	154.50	5	Modecate
<b>FLUTAMIDE</b>			
Tab 250 mg – <b>1% DV Nov-10 to 2013</b> .....	55.00	100	<b>Flutamin</b>
<b>FLUTICASONE</b>			
Aerosol inhaler, 50 µg per dose CFC-free .....	7.50	120 dose	Flixotide
Powder for inhalation, 50 µg per dose .....	8.67	60 dose	Flixotide Accuhaler
Powder for inhalation, 100 µg per dose .....	13.87	60 dose	Flixotide Accuhaler
Aerosol inhaler, 125 µg per dose CFC-free .....	13.60	120 dose	Flixotide
Aerosol inhaler, 250 µg per dose CFC-free .....	27.20	120 dose	Flixotide
Powder for inhalation, 250 µg per dose .....	24.51	60 dose	Flixotide Accuhaler
<b>FLUTICASONE WITH SALMETEROL</b>			
Aerosol inhaler 50 µg with salmeterol 25 µg .....	37.48	120 dose	Seretide
Powder for inhalation 100 µg with salmeterol 50 µg .....	37.48	60 dose	Seretide Accuhaler
Aerosol inhaler 125 µg with salmeterol 25 µg .....	49.69	120 dose	Seretide
Powder for inhalation 250 µg with salmeterol 50 µg .....	49.69	60 dose	Seretide Accuhaler
<b>FOLIC ACID</b>			
Oral liq 50 µg per ml .....	24.00	25 ml	Biomed
<b>FUROSEMIDE</b>			
Tab 40 mg – <b>1% DV Jul-09 to 2012</b> .....	10.75	1,000	<b>Diurin 40</b>
Tab 500 mg .....	25.00	50	Urex Forte
Inj 10 mg per ml, 2 ml – <b>1% DV Nov-10 to 2013</b> .....	1.30	5	<b>Frosemide-Clarix</b>
<b>FUSIDIC ACID</b>			
Tab 250 mg .....	34.50	12	Fucidin
Crn 2% – <b>1% DV Sep-10 to 2013</b> .....	3.25	15 g	<b>Foban</b>
Eye drops 1% .....	4.50	5 g	Fucithalmic
Oint 2% – <b>1% DV Sep-10 to 2013</b> .....	3.25	15 g	<b>Foban</b>
<b>GABAPENTIN</b>			
Note: DV limit of 5% applies to gabapentin chemical rather than each individual line item.			
Cap 100 mg – <b>5% DV Aug-09 to 31 Jul 2012</b> .....	7.16	100	<b>Nupentin</b>
Cap 300 mg – <b>5% DV Aug-09 to 31 Jul 2012</b> .....	11.50	100	<b>Nupentin</b>
Cap 400 mg – <b>5% DV Aug-09 to 31 Jul 2012</b> .....	14.75	100	<b>Nupentin</b>
<b>GADOBENDATE DIMEGLUMINE</b>			
Inj 0.5 g per litre, 10 ml .....	324.74	10	Multihance
Inj 0.5 g per litre, 20 ml .....	636.28	10	Multihance
<b>GADOBUTROL</b>			
Inj 604.72 mg per ml (equivalent to 1 mmol per ml), 7.5 ml prefilled syringe .....	253.10	5	Gadovist

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST)	Per	Brand or Generic Manufacturer
	\$		
<b>GADODIAMIDE</b>			
Inj 287 mg per ml, 10 ml .....	180.00	10	Omniscan
Inj 287 mg per ml, 10 ml prefilled syringe .....	220.00	10	Omniscan
Inj 287 mg per ml, 15 ml .....	270.00	10	Omniscan
Inj 287 mg per ml, 15 ml prefilled syringe .....	330.00	10	Omniscan
Inj 287 mg per ml, 20 ml prefilled syringe .....	440.00	10	Omniscan
<b>GANCICLOVIR</b>			
Inj 500 mg vial .....	380.00	5	Cymevene
<b>GELATIN PLASMA REPLACER</b>			
Inf 3.5%, 500 ml bag .....	9.75	500 ml	Haemacel
Inf 4% per 500 ml bag .....	92.50	10	Gelafusal
	108.00		Gelofusine
<b>GEMCITABINE HYDROCHLORIDE</b>			
Inj 200 mg – 1% DV Sep-10 to 2013 .....	12.50	1	Gemcitabine Actavis 200 <b>Gemcitabine Ebewe</b>
Inj 1 g – 1% DV Sep-10 to 2013 .....	62.50	1	DBL Gemcitabine Gemcitabine Actavis 1000 <b>Gemcitabine Ebewe</b>
<b>GEMFIBROZIL</b>			
Tab 600 mg – 1% DV Feb-11 to 2013 .....	14.00	60	<b>Lipazil</b>
<b>GENTAMICIN SULPHATE</b>			
Eye drops 0.3% .....	11.40	5 ml	Genoptik
Inj 10 mg per ml, 1 ml .....	8.56	5	Mayne
Inj 40 mg per ml, 2 ml – 1% DV Dec-09 to 2012 .....	9.00	10	<b>Pfizer</b>
<b>GLICLAZIDE</b>			
Tab 80 mg – 1% DV Sep-11 to 2014 .....	17.60	500	<b>Apo-Gliclazide</b>
<b>GLIPIZIDE</b>			
Tab 5 mg .....	3.50	100	Minidiab
<b>GLUCOSE</b>			
Inf 5% .....	2.87	50 ml	Baxter
	2.84	100 ml	Baxter
	3.87	250 ml	Baxter
	1.77	500 ml	Baxter
	1.80	1,000 ml	Baxter
Inf 10% .....	3.70	500 ml	Baxter
	5.29	1,000 ml	Baxter
Inf 50% .....	6.84	500 ml	Baxter
<b>GLUCOSE WITH SODIUM, POTASSIUM, MAGNESIUM, CHLORIDE AND ACETATE</b>			
Inj 50 g with 40 mmol/L sodium, 13 mmol/L potassium, 1.5 mmol/L magnesium, 40 mmol/L chloride, and 16 mmol/L acetate .....	4.50	500 ml	Baxter
<b>GLUCOSE WITH SODIUM, POTASSIUM, MAGNESIUM, CHLORIDE, ACETATE AND GLUCONATE</b>			
Inj 50 g with 140 mmol/L sodium, 5 mmol/L potassium, 1.5 mmol/L magnesium, 98 mmol/L chloride, 27 mmol/L acetate and 23 mmol/L gluconate .....	7.00	1,000 ml	Baxter
<b>GLYCERIN WITH SODIUM SACCHARIN</b>			
Suspension .....	36.80	473 ml	Ora-Sweet SF

Products with Hospital Supply Status (HSS) are in **bold**  
Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>GLYCERIN WITH SUCROSE</b>			
Suspension .....	36.80	473 ml	Ora-Sweet
<b>GLYCEROL</b>			
Liquid .....	19.80	2,000 ml	ABM
Suppos 3.6 g .....	6.00	20	PSM
<b>GLYCERYL TRINITRATE</b>			
Tab 600 µg – 1% DV Sep-11 to 2014 .....	8.00	100	<b>Lycinate</b>
Inj 1 mg per ml, 5 ml – 1% DV Dec-09 to 2012 .....	22.70	10	<b>Nitronal</b>
Inj 1 mg per ml, 50 ml – 1% DV Dec-09 to 2012 .....	86.60	10	<b>Nitronal</b>
Inj 5 mg per ml, 10 ml .....	40.00	5	Mayne
Aerosol spray 400 µg per dose – 1% DV Mar-12 to 2014 .....	4.45	250 dose	<b>Glytrin</b>
TDDS 5 mg – 1% DV Sep-11 to 2014 .....	16.56	30	<b>Nitroderm TTS 5</b>
TDDS 10 mg – 1% DV Sep-11 to 2014 .....	19.50	30	<b>Nitroderm TTS 10</b>
<b>GLYCINE</b>			
Soln 1.5% for irrigation .....	11.38	2,000 ml	Baxter
	14.44	3,000 ml	Baxter
<b>GOSERELIN ACETATE</b>			
Inj 3.6 mg .....	166.20	1	Zoladex
Inj 10.8 mg .....	443.76	1	Zoladex
<b>HALOPERIDOL</b>			
Tab 500 µg – 1% DV Nov-10 to 2013 .....	5.42	100	<b>Serenace</b>
Tab 1.5 mg – 1% DV Nov-10 to 2013 .....	8.20	100	<b>Serenace</b>
Tab 5 mg – 1% DV Nov-10 to 2013 .....	25.84	100	<b>Serenace</b>
Oral liq 2 mg per ml – 1% DV Nov-10 to 2013 .....	19.87	100 ml	<b>Serenace</b>
Inj 5 mg per ml, 1 ml – 1% DV Nov-10 to 2013 .....	18.74	10	<b>Serenace</b>
<b>HALOPERIDOL DECANOATE</b>			
Inj 50 mg per ml, 1 ml .....	28.39	5	Haldol
Inj 100 mg per ml, 1 ml .....	55.90	5	Haldol Concentrate
<b>HEPARIN SODIUM</b>			
Inj 1,000 iu per ml, 1 ml .....	66.80	50	Mayne
Inj 1,000 iu per ml, 5 ml .....	11.44	10	Pfizer
	46.30	50	Pfizer
Inj 5,000 iu per ml, 1 ml .....	14.20	5	Mayne
Inj 5,000 iu per ml, 5 ml .....	118.50	50	Pfizer
<b>HEPARIN WITH SODIUM CHLORIDE</b>			
Inf 25,000 iu with 0.9% sodium chloride .....	7.25	250 ml	Baxter
	7.67	500 ml	Baxter
<b>HEPARINISED SALINE</b>			
Inj 10 iu per ml, 5 ml .....	32.50	50	Pfizer
<b>HYDRALAZINE</b>			
Inj 20 mg per ml, 1 ml .....	25.90	5	Apresoline

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>HYDROCORTISONE</b>			
Tab 5 mg – 1% DV Dec-09 to 2012 .....	8.35	100	<b>Douglas</b>
Tab 20 mg – 1% DV Dec-09 to 2012 .....	20.95	100	<b>Douglas</b>
Crn 1%, 14.2 g .....	2.48	14.2 g	AFT
Powder – 1% DV Nov-11 to 2014 .....	44.00	25 g	<b>ABM</b>
Crn 1%, 100 g .....	3.75	100 g	Pharmacy Health
Crn 1%, 500 g – 1% DV Nov-11 to 2014 .....	14.00	500 g	<b>Pharmacy Health</b>
Note: DV Limit applies to pack sizes of greater than 100 g.			
Inj 50 mg per ml, 2 ml – 1% DV Nov-10 to 2013 .....	3.99	1	<b>Solu-Cortef</b>
<b>HYDROCORTISONE ACETATE</b>			
Rectal foam 10%, CFC-Free (14 applications) – 1% DV Dec-09 to 2012 .....	23.00	21.1 g	<b>Colifoam</b>
<b>HYDROCORTISONE BUTYRATE</b>			
Lipocream 0.1% .....	2.30	30 g	Locoid Lipocream
	6.85	100 g	Locoid Lipocream
Oint 0.1% .....	6.85	100 g	Locoid
Milky emul 0.1% .....	6.85	100 ml	Locoid Crelo
Scalp lotn 0.1% .....	3.65	100 ml	Locoid
<b>HYDROCORTISONE WITH CINCHOCAINE</b>			
Oint 5 mg with cinchocaine hydrochloride 5 mg per g .....	15.00	30 g	Proctosedyl
Suppos 5 mg with cinchocaine hydrochloride 5 mg per g .....	9.90	12	Proctosedyl
<b>HYDROCORTISONE WITH MICONAZOLE</b>			
Crn 1% with miconazole nitrate 2% .....	2.20	15 g	Micreme H
<b>HYDROCORTISONE WITH NATAMYCIN AND NEOMYCIN</b>			
Crn 1% with natamycin 1% and neomycin sulphate 0.5% .....	2.79	15 g	Pimafucort
Oint 1% with natamycin 1% and neomycin sulphate 0.5% .....	2.79	15 g	Pimafucort
<b>HYDROGEN PEROXIDE</b>			
Crn 1% .....	8.56	10 g	Crystacide
<b>HYDROXOCOBALAMIN</b>			
Inj 1 mg per ml, 1 ml – 1% DV Apr-10 to 2012 .....	6.15	3	<b>ABM</b>
<b>HYDROXYCHLOROQUINE SULPHATE</b>			
Tab 200 mg – 1% DV Jul-09 to 2012 .....	22.50	100	<b>Plaquenil</b>
<b>HYDROXYETHYL STARCH 130/0.4</b>			
Inj 6% – 1% DV Nov-09 to 2012 .....	198.00	20	<b>Voluven</b>
<b>HYDROXYETHYL STARCH 200/0.5</b>			
Inj 6%, 500 ml bag – 1% DV Dec-09 to 2012 .....	296.00	16	<b>Starquin 200 6%</b>
Inj 10% .....	13.50	1	StarQuin 10%
<b>HYDROXYUREA</b>			
Cap 500 mg .....	31.76	100	Hydrea
<b>HYOSCINE (SCOPOLAMINE)</b>			
Patches 1.5 mg .....	11.95	2	Scopoderm TTS
<b>HYOSCINE HYDROBROMIDE</b>			
Inj 400 µg per ml, 1 ml .....	6.66	5	Mayne
<b>HYOSCINE N-BUTYLBROMIDE</b>			
Tab 10 mg – 1% DV Sep-11 to 2014 .....	1.48	20	<b>Gastrosoothe</b>
Inj 20 mg per ml, 1 ml – 1% DV Nov-11 to 2014 .....	9.57	5	<b>Buscopan</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>HYPROMELLOSE</b>			
Eye drops 0.5% .....	3.92	15 ml	Methopt
<b>IBUPROFEN</b>			
Tab long-acting 800 mg – 1% DV Oct-11 to 2014 .....	8.12	30	<b>Brufen SR</b>
Oral liq 100 mg per 5 ml – 1% DV Sep-10 to 2013 .....	2.69	200 ml	<b>Fenpaed</b>
<b>IDARUBICIN HYDROCHLORIDE</b>			
Cap 5 mg – 1% DV Jan-10 to 2012 .....	115.00	1	<b>Zavedos</b>
Cap 10 mg – 1% DV Jan-10 to 2012 .....	144.50	1	<b>Zavedos</b>
Inj 5 mg – 1% DV Jan-10 to 2012 .....	170.00	1	<b>Zavedos</b>
Inj 10 mg – 1% DV Jan-10 to 2012 .....	340.00	1	<b>Zavedos</b>
<b>IFOSFAMIDE</b>			
Inj 1 g .....	96.00	1	Holoxan
Inj 2 g .....	180.00	1	Holoxan
<b>ILOPROST</b>			
Inf 100 µg per ml, 0.5 ml .....	925.00	5	Ilomedin
Nebuliser soln 10 µg per ml, 2 ml .....	1,185.00	30	Ventavis
<b>IMATINIB MESYLATE</b>			
Tab 100 mg .....	2,400.00	60	Glivec
<b>IMIPENEM WITH CILASTATIN</b>			
Inj 500 mg with cilastatin 500 mg .....	18.37	1	Primaxin
<b>IMIPRAMINE HYDROCHLORIDE</b>			
Tab 10 mg .....	5.48	50	Tofranil
Tab 25 mg .....	8.80	50	Tofranil
<b>IMIQUIMOD</b>			
Crm 5%, sachet – 1% DV Nov-11 to 2014 .....	62.00	12	<b>Aldara</b>
<b>INDAPAMIDE</b>			
Tab 2.5 mg – 1% DV Oct-10 to 2013 .....	2.95	90	<b>Dapa-Tabs</b>
<b>INFLIXIMAB</b>			
Powder for inj 100 mg .....	1,227.00	1	Remicade
<b>INSULIN GLARGINE</b>			
Inj 100 u per ml, 3 ml .....	94.50	5	Lantus Lantus SoloStar
Inj 100 u per ml, 10 ml .....	63.00	1	Lantus
<b>INSULIN GLULISINE</b>			
Inj 100 iu per ml, 10 ml .....	27.03	1	Apidra
Inj 100 iu per ml, 3 ml .....	46.07	5	Apidra
Inj 100 iu per ml, 3 ml disposable pen .....	46.07	5	Apidra Solostar
<b>INSULIN LISPRO WITH INSULIN LISPRO PROTAMINE</b>			
Inj lispro 25% with insulin lispro protamine 75%, 100 u per ml, 3 ml .....	52.15	5	Humalog Mix 25
Inj lispro 50% with insulin lispro protamine 50%, 100 u per ml, 3 ml .....	52.15	5	Humalog Mix 50

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>INSULIN PEN NEEDLES</b>			
29 g × 12.7 mm .....	10.50	100	ABM
	11.75		B-D Micro-Fine
31 g × 5 mm .....	11.75	100	SC Profi-Fine
			B-D Micro-Fine
31 g × 6 mm .....	10.50	100	SC Profi-Fine
31 g × 8 mm .....	10.50	100	ABM
			B-D Micro-Fine
	11.75		SC Profi-Fine
32 g × 4 mm .....	10.50	100	B-D Micro-Fine
<b>INSULIN SYRINGES, DISPOSABLE WITH ATTACHED NEEDLE</b>			
Syringe 0.3 ml with 29 g × 12.7 mm needle .....	13.00	100	ABM
			B-D Ultra Fine
			DM Ject
Syringe 0.3 ml with 31 g × 8 mm needle .....	13.00	100	ABM
			B-D Ultra Fine II
			DM Ject
Syringe 0.5 ml with 29 g × 12.7 mm needle .....	13.00	100	ABM
			B-D Ultra Fine
			DM Ject
Syringe 0.5 ml with 31 g × 8 mm needle .....	13.00	100	ABM
			B-D Ultra Fine II
			DM Ject
Syringe 1 ml with 29 g × 12.7 mm needle .....	13.00	100	ABM
			B-D Ultra Fine
			DM Ject
Syringe 1 ml with 31 g × 8 mm needle .....	13.00	100	ABM
			B-D Ultra Fine II
			DM Ject
<b>IODINE WITH ALCOHOL</b>			
Soln 1% with 70% alcohol, 100 ml .....	111.60	12	healthE
<b>IODIXANOL</b>			
Inj 270 mg per ml (iodine equivalent), 50 ml – <b>5% DV Apr-10 to 2012</b> .....	223.50	10	<b>Visipaque</b>
Inj 270 mg per ml (iodine equivalent), 100 ml – <b>5% DV Apr-10 to 2012</b> .....	447.00	10	<b>Visipaque</b>
Inj 320 mg per ml (iodine equivalent), 50 ml – <b>5% DV Apr-10 to 2012</b> .....	223.50	10	<b>Visipaque</b>
Inj 320 mg per ml (iodine equivalent), 100 ml – <b>5% DV Apr-10 to 2012</b> .....	447.00	10	<b>Visipaque</b>
Inj 320 mg per ml (iodine equivalent), 150 ml – <b>5% DV Apr-10 to 2012</b> .....	670.50	10	<b>Visipaque</b>
Inj 320 mg per ml (iodine equivalent), 200 ml – <b>5% DV Apr-10 to 2012</b> .....	565.56	6	<b>Visipaque</b>
	894.00	10	<b>Visipaque</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>IOHEXOL</b>			
Note: Iomeron, Isovue, Optiray, Ultraject and Ultravist are DV Pharmaceuticals.			
Inj 240 mg per ml (iodine equivalent), 50 ml – 5% DV Apr-10 to 2012	77.80	10	<b>Omnipaque</b>
Inj 300 mg per ml (iodine equivalent), 20 ml – 5% DV Apr-10 to 2012	24.00	6	<b>Omnipaque</b>
Inj 300 mg per ml (iodine equivalent), 50 ml – 5% DV Apr-10 to 2012	77.80	10	<b>Omnipaque</b>
Inj 300 mg per ml (iodine equivalent), 100 ml – 5% DV Apr-10 to 2012	155.60	10	<b>Omnipaque</b>
Inj 300 mg per ml (iodine equivalent), 500 ml – 5% DV Apr-10 to 2012	468.00	6	<b>Omnipaque</b>
Inj 350 mg per ml (iodine equivalent), 20 ml – 5% DV Apr-10 to 2012	24.00	6	<b>Omnipaque</b>
Inj 350 mg per ml (iodine equivalent), 50 ml – 5% DV Apr-10 to 2012	77.80	10	<b>Omnipaque</b>
Inj 350 mg per ml (iodine equivalent), 75 ml – 5% DV Apr-10 to 2012	116.70	10	<b>Omnipaque</b>
Inj 350 mg per ml (iodine equivalent), 100 ml – 5% DV Apr-10 to 2012	155.60	10	<b>Omnipaque</b>
Inj 350 mg per ml (iodine equivalent), 200 ml – 5% DV Apr-10 to 2012	186.70	6	<b>Omnipaque</b>
Inj 350 mg per ml (iodine equivalent), 500 ml – 5% DV Apr-10 to 2012	780.00	10	<b>Omnipaque</b>
<b>IPRATROPIUM BROMIDE</b>			
Nebuliser soln, 250 µg per ml, 1 ml – 1% DV Oct-10 to 2013	3.79	20	<b>Univent</b>
Nebuliser soln, 250 µg per ml, 2 ml – 1% DV Oct-10 to 2013	4.06	20	<b>Univent</b>
<b>IRINOTECAN</b>			
Inj 20 mg per ml, 2 ml – 1% DV Aug-10 to 2012	41.00	1	<b>Irinotecan-Rex</b>
Inj 20 mg per ml, 5 ml – 1% DV Aug-10 to 2012	100.00	1	<b>Irinotecan-Rex</b>
<b>IRON POLYMALTOSE</b>			
Inj 50 mg per ml, 2 ml – 1% DV Oct-11 to 2014	19.90	5	<b>Ferrum H</b>
<b>IRON SUCROSE</b>			
Inj 20 mg per ml, 5 ml	100.00	5	Venofer
<b>ISOFLURANE</b>			
Liq 250 ml bottle – 1% DV Nov-09 to 2012	540.00	6	<b>Aerrane</b>
<b>ISONIAZID</b>			
Tab 100 mg	20.00	100	PSM
<b>ISOPROPYL ALCOHOL</b>			
Soln 70%, 500 ml	5.00	1	PSM
	67.80	12	healthE
<b>ISOSORBIDE MONONITRATE</b>			
Tab 20 mg – 1% DV Jun-11 to 2014	17.10	100	<b>Ismo-20</b>
Tab long-acting 40 mg – 1% DV Jun-11 to 2014	7.50	30	<b>Corangin</b>
Tab long-acting 60 mg	3.94	90	Duride
<b>ISOTRETINOIN</b>			
Cap 10 mg – 1% DV Nov-09 to 2012	48.48	180	<b>Oratane</b>
Cap 20 mg – 1% DV Nov-09 to 2012	69.70	180	<b>Oratane</b>
<b>ITRACONAZOLE</b>			
Cap 100 mg – 1% DV Feb-11 to 2013	4.25	15	<b>Itrazole</b>
<b>IVERMECTIN</b>			
Tab 3 mg	25.96	4	Stromectol
<b>KETOCONAZOLE</b>			
Shampoo 2% – 1% DV Sep-11 to 2014	3.08	100 ml	<b>Sebizole</b>
<b>KETONE BLOOD BETA-KETONE ELECTRODES</b>			
Test strips	7.07	10 strip	Optium Blood Ketone Test Strips

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>KETOPROFEN</b>			
Cap long-acting 100 mg .....	21.56	100	Oruvail SR
Cap long-acting 200 mg .....	43.12	100	Oruvail SR
<b>LABETALOL</b>			
Tab 50 mg .....	8.23	100	Hybloc
Tab 100 mg .....	10.06	100	Hybloc
Tab 200 mg .....	17.55	100	Hybloc
<b>LACOSAMIDE</b>			
Tab 50 mg .....	25.04	14	Vimpat
Tab 100 mg .....	50.06	14	Vimpat
	200.24	56	Vimpat
Tab 150 mg .....	75.10	14	Vimpat
	300.40	56	Vimpat
Tab 200 mg .....	400.55	56	Vimpat
<b>LACTULOSE</b>			
Oral liq 10 g per 15 ml – 1% DV Mar-11 to 2013 .....	7.68	1,000 ml	<b>Laevolac</b>
<b>LAMOTRIGINE</b>			
Tab dispersible 2 mg .....	6.74	30	Lamictal
Tab dispersible 5 mg .....	9.64	30	Lamictal
	15.00	56	Arrow-Lamotrigine
Tab dispersible 25 mg .....	20.40	56	Arrow-Lamotrigine
	29.09		Lamictal
	19.38		Logem
	20.40		Mogine
Tab dispersible 50 mg .....	34.70	56	Arrow-Lamotrigine
	47.89		Lamictal
	32.97		Logem
	34.70		Mogine
Tab dispersible 100 mg .....	59.90	56	Arrow-Lamotrigine
	79.16		Lamictal
	56.91		Logem
	59.90		Mogine
<b>LANSOPRAZOLE</b>			
Cap 15 mg .....	3.27	28	Lanzol Relief
	3.50		Solox
Cap 30 mg .....	4.34	28	Lanzol Relief
	4.65		Solox
<b>LEFLUNOMIDE</b>			
Tab 10 mg .....	55.00	30	AFT-Leflunomide
	79.27		Arava
Tab 20 mg .....	76.00	30	AFT-Leflunomide
	108.60		Arava
Tab 100 mg .....	54.44	3	Arava
<b>LETROZOLE</b>			
Tab 2.5 mg – 1% DV Apr-10 to 2012 .....	26.55	30	<b>Letara</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>LEUPRORELIN</b>			
Inj 3.75 mg	221.60	1	Lucrin Depot
Inj 3.75 mg prefilled syringe	221.60	1	Lucrin Depot PDS
Inj 7.5 mg	166.20	1	Eligard
Inj 11.25 mg	591.68	1	Lucrin Depot
Inj 11.25 mg prefilled syringe	591.68	1	Lucrin Depot PDS
Inj 22.5 mg	443.76	1	Eligard
Inj 30 mg	591.68	1	Eligard
Inj 30 mg prefilled syringe	1,109.40	1	Lucrin Depot PDS
Inj 45 mg	832.05	1	Eligard
<b>LEVETIRACETAM</b>			
Tab 250 mg	24.03	60	Levetiracetam-Rex
Tab 500 mg	28.71	60	Levetiracetam-Rex
Tab 750 mg	45.23	60	Levetiracetam-Rex
<b>LEVOBUNOLOL</b>			
Eye drops 0.25%	7.00	5 ml	Betagan
Eye drops 0.5%	7.00	5 ml	Betagan
<b>LEVODOPA WITH BENSERAZIDE</b>			
Tab dispersible 50 mg with benserazide 12.5 mg	10.00	100	Madopar Dispersible
Cap 50 mg with benserazide 12.5 mg	8.00	100	Madopar 62.5
Cap 100 mg with benserazide 25 mg	12.50	100	Madopar 125
Cap long-acting 100 mg with benserazide 25 mg	17.00	100	Madopar HBS
Cap 200 mg with benserazide 50 mg	25.00	100	Madopar 250
<b>LEVODOPA WITH CARBIDOPA</b>			
Tab 100 mg with carbidopa 25 mg	20.00	100	Sinemet
Tab long-acting 200 mg with carbidopa 50 mg	47.50	100	Sinemet CR
Tab 250 mg with carbidopa 25 mg	40.00	100	Sinemet
<b>LEVONORGESTREL</b>			
Subdermal implant (2 x 75 mg rods)	133.65	1	Jadelle
<b>LIGNOCAINE</b>			
Gel 2% – 1% DV Nov-09 to 2012	6.00	30 ml	<b>Xylocaine Jelly</b>
Gel 2%, 10 ml urethral syringe	43.26	10	Pfizer
<b>LIGNOCAINE HYDROCHLORIDE</b>			
Pump spray 10%, 50 ml CFC-free – 1% DV Nov-10 to 2013	75.00	50 ml	<b>Xylocaine</b>
Viscous soln 2% – 1% DV Sep-11 to 2014	55.00	200 ml	<b>Xylocaine Viscous</b>
Inj 1%, 2 ml – 1% DV Sep-09 to 2012	57.60	50	<b>Xylocaine</b>
Inj 1%, 5 ml – 1% DV Sep-09 to 2012	35.00	50	<b>Xylocaine</b>
Inj 1%, 20 ml – 1% DV Sep-09 to 2012	20.00	5	<b>Xylocaine</b>
Inj 2%, 2 ml – 1% DV Sep-09 to 2012	62.40	50	<b>Xylocaine</b>
Inj 2%, 5 ml – 1% DV Sep-09 to 2012	23.00	50	<b>Xylocaine</b>
Inj 2%, 20 ml – 1% DV Sep-09 to 2012	15.00	5	<b>Xylocaine</b>
<b>LIGNOCAINE HYDROCHLORIDE WITH ADRENALINE</b>			
Inj 1% with 1:100,000 of adrenaline 5 ml – 1% DV Nov-10 to 2013	27.00	10	<b>Xylocaine</b>
Inj 1% with 1:200,000 of adrenaline 20 ml – 1% DV Nov-10 to 2013	50.00	5	<b>Xylocaine</b>
Inj 2% with 1:200,000 of adrenaline 20 ml – 1% DV Nov-10 to 2013	60.00	5	<b>Xylocaine</b>
<b>LIGNOCAINE WITH CHLORHEXIDINE</b>			
Gel 2% with 0.05% chlorhexidine	43.26	10	Pfizer

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>LIGNOCAINE WITH PRILOCAINE</b>			
Crm 2.5% with prilocaine 2.5%, 30 g – 1% DV Nov-10 to 2013 .....	45.00	30 g	<b>EMLA</b>
Patch 2.5% with prilocaine 2.5% – 1% DV Nov-10 to 2013 .....	115.00	20	<b>EMLA</b>
Crm 2.5% with prilocaine 2.5%, 5 g – 1% DV Nov-10 to 2013 .....	45.00	5	<b>EMLA</b>
<b>LISINAPRIL</b>			
Tab 5 mg – 1% DV Sep-09 to 2012 .....	2.06	30	<b>Arrow-Lisinopril</b>
Tab 10 mg – 1% DV Sep-09 to 2012 .....	2.36	30	<b>Arrow-Lisinopril</b>
Tab 20 mg – 1% DV Sep-09 to 2012 .....	2.87	30	<b>Arrow-Lisinopril</b>
<b>LITHIUM CARBONATE</b>			
Cap 250mg – 1% DV Nov-11 to 2014 .....	9.42	100	<b>Douglas</b>
<b>LOMUSTINE</b>			
Cap 10 mg – 1% DV Sep-11 to 2014 .....	132.59	20	<b>Ceenu</b>
Cap 40 mg – 1% DV Sep-11 to 2014 .....	399.15	20	<b>Ceenu</b>
<b>LOPERAMIDE HYDROCHLORIDE</b>			
Cap 2 mg – 1% DV Dec-10 to 2013 .....	8.95	400	<b>Diamide Relief</b>
<b>LOPINAVIR WITH RITONAVIR</b>			
Tab 100 mg with ritonavir 25 mg .....	183.75	60	<b>Kaletra</b>
Tab 200 mg with ritonavir 50 mg .....	735.00	120	<b>Kaletra</b>
Oral liq 80 mg with ritonavir 20 mg per ml .....	735.00	300 ml	<b>Kaletra</b>
<b>LORATADINE</b>			
Tab 10 mg – 1% DV Sep-10 to 2013 .....	2.09	100	<b>Loraclear Hayfever Relief</b>
Oral liq 1 mg per ml – 1% DV Sep-10 to 2013 .....	3.10	100 ml	<b>Lorapad</b>
<b>LORAZEPAM</b>			
Tab 1 mg – 1% DV Dec-10 to 2013 .....	16.42	250	<b>Ativan</b>
Tab 2.5 mg – 1% DV Dec-10 to 2013 .....	11.17	100	<b>Ativan</b>
<b>LOSARTAN</b>			
Tab 12.5 mg – 1% DV Dec-11 to 2014 .....	2.88	90	<b>Lostaar</b>
Tab 25 mg – 1% DV Dec-11 to 2014 .....	3.20	90	<b>Lostaar</b>
Tab 50 mg – 1% DV Dec-11 to 2014 .....	5.22	90	<b>Lostaar</b>
Tab 50 mg with hydrochlorothiazide 12.5 mg – 1% DV Dec-11 to 2014 .....	4.89	30	<b>Arrow-Losartan &amp; Hydrochlorothiazide</b>
Tab 100 mg – 1% DV Dec-11 to 2014 .....	8.68	90	<b>Lostaar</b>
<b>MACROGOL 3350</b>			
Powder 13.125 g, sachets .....	18.14	30	<b>Movicol</b>
<b>MAGNESIUM SULPHATE</b>			
Inj 49.3%, 5 ml .....	26.60	10	<b>Mayne</b>
<b>MANNITOL</b>			
Inf 10% .....	14.21	1,000 ml	<b>Baxter</b>
Inf 15% .....	9.84	500 ml	<b>Baxter</b>
Inf 20% .....	10.80	500 ml	<b>Baxter</b>
<b>MASK FOR SPACER DEVICE</b>			
Size 2 .....	2.99	1	<b>EZ-fit Paediatric Mask</b>
<b>MEBENDAZOLE</b>			
Tab 100 mg – 1% DV Nov-11 to 2014 .....	24.19	24	<b>De-Worm</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>MEBEVERINE HYDROCHLORIDE</b>			
Tab 135 mg – 1% DV Sep-11 to 2014 .....	18.00	90	<b>Colofac</b>
<b>MEDROXYPROGESTERONE ACETATE</b>			
Tab 2.5 mg – 1% DV Jul-10 to 2013 .....	3.09	30	<b>Provera</b>
Tab 5 mg – 1% DV Jul-10 to 2013 .....	13.06	100	<b>Provera</b>
Tab 10 mg – 1% DV Jul-10 to 2013 .....	6.85	30	<b>Provera</b>
Tab 100 mg – 1% DV Jul-10 to 2013 .....	96.50	100	<b>Provera</b>
Tab 200 mg – 1% DV Jul-10 to 2013 .....	70.50	30	<b>Provera</b>
Inj 150 mg per ml, 1 ml syringe – 1% DV Jul-10 to 2013 .....	7.15	1	<b>Depo-Provera</b>
<b>MEGESTROL ACETATE</b>			
Tab 160 mg – 1% DV May-10 to 2012 .....	57.92	30	<b>Apo-Megestrol Megace</b>
<b>MEGLUMINE DIATRIZOATE WITH SODIUM AMIDOTRIZOATE</b>			
Oral soln 660 mg per ml with sodium amidotrizoate 100 mg per ml .....	21.00	100 ml	<b>Gastrografin</b>
Oral soln 660 mg per ml, with sodium amidotrizoate 100 mg per ml, 100 ml .....	210.00	10	<b>Gastrografin</b>
<b>MEGLUMINE GADOPENTETATE</b>			
Inj 469 mg per ml (equivalent to 0.5 mmol per ml), 10 ml prefilled sy- ringe .....	92.00	5	<b>Magnevist</b>
Inj 469 mg per ml (equivalent to 0.5 mmol per ml), 10 ml vial .....	184.00	10	<b>Magnevist</b>
<b>MERCAPTOPYRINE</b>			
Tab 50 mg – 1% DV Dec-10 to 2013 .....	47.06	25	<b>Purinethol</b>
<b>MEROPENEM</b>			
Inj 500 mg – 1% DV Mar-12 to 2014 .....	10.50	1	<b>Penembact</b>
Inj 1 g – 1% DV Mar-12 to 2014 .....	21.00	1	<b>Penembact</b>
<b>MESALAZINE</b>			
Tab 400 mg .....	49.50	100	<b>Asacol</b>
Tab EC 500 mg .....	49.50	100	<b>Asamax</b>
Tab long-acting 500 mg .....	59.05	100	<b>Pentasa</b>
Enema 1 g per 100 ml – 1% DV Sep-09 to 2012 .....	45.96	7	<b>Pentasa</b>
Suppos 500 mg – 1% DV Sep-11 to 2014 .....	22.80	20	<b>Asacol</b>
Suppos 1 g .....	50.96	28	<b>Pentasa</b>
<b>MESNA</b>			
Tab 400 mg – 1% DV Nov-10 to 2013 .....	210.65	50	<b>Uromitexan</b>
Tab 600 mg – 1% DV Nov-10 to 2013 .....	314.40	50	<b>Uromitexan</b>
Inj 100 mg per ml, 4 ml – 1% DV Nov-10 to 2013 .....	137.04	15	<b>Uromitexan</b>
Inj 100 mg per ml, 10 ml – 1% DV Nov-10 to 2013 .....	314.66	15	<b>Uromitexan</b>
<b>METFORMIN HYDROCHLORIDE</b>			
Tab immediate-release 500 mg – 1% DV Jan-10 to 2012 .....	8.09	500	<b>Apotex</b>
Tab immediate-release 850 mg – 1% DV Jan-10 to 2012 .....	6.67	250	<b>Apotex</b>
<b>METHADONE HYDROCHLORIDE</b>			
Tab 5 mg – 1% DV Oct-10 to 2013 .....	1.85	10	<b>Methatabs</b>
Oral liq 2 mg per ml – 1% DV Jul-09 to 2012 .....	5.95	200 ml	<b>Biodone</b>
Oral liq 5 mg per ml – 1% DV Jul-09 to 2012 .....	5.55	200 ml	<b>Biodone Forte</b>
Oral liq 10 mg per ml – 1% DV Jul-09 to 2012 .....	8.95	200 ml	<b>Biodone Extra Forte</b>
Inj 10 mg per ml, 1 ml .....	61.00	10	<b>AFT</b>

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>METHOTREXATE</b>			
Tab 2.5 mg – 1% DV Sep-09 to 2012 .....	5.22	30	<b>Methoblastin</b>
Tab 10 mg – 1% DV Sep-09 to 2012 .....	40.93	50	<b>Methoblastin</b>
Inj 25 mg per ml, 40 ml .....	25.00	1	DBL Methotrexate
Inj 25 mg per ml, 2 ml – 1% DV Nov-10 to 2013.....	48.00	5	<b>Hospira</b>
Inj 25 mg per ml, 20 ml – 1% DV Nov-10 to 2013.....	90.00	1	<b>Hospira</b>
Inj 100 mg per ml, 10 ml – 1% DV Nov-08 to 2014.....	25.00	1	<b>Methotrexate Ebewe</b>
Inj 100 mg per ml, 50 ml – 1% DV Nov-08 to 2014.....	125.00	1	<b>Methotrexate Ebewe</b>
<b>METHYLCELLULOSE</b>			
Powder .....	14.00	100 g	ABM
Suspension .....	36.80	473 ml	Ora-Plus
<b>METHYLCELLULOSE WITH GLYCERIN AND SODIUM SACCHARIN</b>			
Suspension .....	36.80	473 ml	Ora-Blend SF
<b>METHYLCELLULOSE WITH GLYCERIN AND SUCROSE</b>			
Suspension .....	36.80	473 ml	Ora-Blend
<b>METHYLDOPA</b>			
Tab 125 mg .....	14.25	100	Prodopa
Tab 250 mg .....	15.10	100	Prodopa
Tab 500 mg .....	23.15	100	Prodopa
<b>METHYLPHENIDATE HYDROCHLORIDE</b>			
Tab immediate-release 5 mg .....	3.20	30	Rubifen
Tab immediate-release 10 mg .....	3.00	30	Ritalin Rubifen
Tab immediate-release 20 mg .....	7.85	30	Rubifen
Tab sustained-release 20 mg .....	10.95	30	Rubifen SR
	50.00	100	Ritalin SR
<b>METHYLPHENIDATE HYDROCHLORIDE EXTENDED-RELEASE</b>			
Tab extended-release 18 mg .....	58.96	30	Concerta
Tab extended-release 27 mg .....	65.44	30	Concerta
Tab extended-release 36 mg .....	71.93	30	Concerta
Tab extended-release 54 mg .....	86.24	30	Concerta
Cap modified-release 10 mg .....	19.50	30	Ritalin LA
Cap modified-release 20 mg .....	25.50	30	Ritalin LA
Cap modified-release 30 mg .....	31.90	30	Ritalin LA
Cap modified-release 40 mg .....	38.25	30	Ritalin LA
<b>METHYLPREDNISOLONE</b>			
Tab 4 mg – 1% DV Sep-09 to 2012 .....	48.57	100	<b>Medrol</b>
Tab 100 mg – 1% DV Sep-09 to 2012 .....	166.52	20	<b>Medrol</b>
<b>METHYLPREDNISOLONE ACEPONATE</b>			
Crn 0.1% .....	4.95	15 g	Advantan
Oint 0.1% .....	4.95	15 g	Advantan
<b>METHYLPREDNISOLONE ACETATE</b>			
Inj 40 mg per ml, 1 ml .....	6.03	1	Depo-Medrol
<b>METHYLPREDNISOLONE ACETATE WITH LIGNOCAINE</b>			
Inj 40 mg per ml with lignocaine 10 mg per ml, 1 ml .....	6.03	1	Depo-Medrol with Lidocaine

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>METHYLPREDNISOLONE SODIUM SUCCINATE</b>			
Inj 40 mg per ml, 1 ml – 1% DV Dec-09 to 2012	6.06	1	<b>Solu-Medrol</b>
	151.40	25	<b>Solu-Medrol</b>
Inj 62.5 mg per ml, 2 ml – 1% DV Dec-09 to 2012	16.50	1	<b>Solu-Medrol</b>
	412.59	25	<b>Solu-Medrol</b>
Inj 500 mg – 1% DV Dec-09 to 2012	20.80	1	<b>Solu-Medrol</b>
Inj 1 g – 1% DV Dec-09 to 2012	42.57	1	<b>Solu-Medrol</b>
<b>METOCLOPRAMIDE HYDROCHLORIDE</b>			
Tab 10 mg – 1% DV Jun-11 to 2014	3.95	100	<b>Metamide</b>
Inj 5 mg per ml, 2 ml – 1% DV Sep-11 to 2014	4.50	10	<b>Pfizer</b>
<b>METOPROLOL SUCCINATE</b>			
Tab long-acting 23.75 mg	2.18	30	Betaloc CR Metoprolol - AFT CR Myloc CR
Tab long-acting 47.5 mg	2.74	30	Betaloc CR Metoprolol - AFT CR Myloc CR
Tab long-acting 95 mg	4.71	30	Betaloc CR Metoprolol - AFT CR Myloc CR
Tab long-acting 190 mg	8.51	30	Betaloc CR Metoprolol - AFT CR Myloc CR
<b>METOPROLOL TARTRATE</b>			
Tab long-acting 200 mg	18.40	28	Slow-Lopresor
Inj 1 mg per ml, 5 ml	24.00	5	Lopresor
<b>METRONIDAZOLE</b>			
Tab 200 mg	10.45	100	Trichazole
Tab 400 mg	18.15	100	Trichazole
Oral liq 200 mg per 5 ml	25.00	100 ml	Flagyl-S
Inj 500 mg, 100 ml	2.46	1	Baxter
	12.30	5	AFT
Suppos 500 mg	24.48	10	Flagyl
<b>MICONAZOLE NITRATE</b>			
Crn 2% – 1% DV Nov-11 to 2014	0.46	15 g	<b>Multichem</b>
Powder 2%	8.50	30 g	Daktarin
<b>MIDAZOLAM</b>			
Inj 1 mg per ml, 5 ml	10.75	10	Hypnovel
Inj 5 mg per ml, 3 ml	11.90	5	Hypnovel
<b>MIRTAZAPINE</b>			
Tab 30 mg	22.00	30	Avanza
Tab 45 mg	35.00	30	Avanza
<b>MITOMYCIN C</b>			
Inj 5 mg	72.75	1	Arrow
<b>MITOZANTRONE</b>			
Inj 2 mg per ml, 5 ml	110.00	1	Mitozantrone Ebewe
Inj 2 mg per ml, 10 ml – 1% DV Sep-10 to 2013	100.00	1	<b>Mitozantrone Ebewe</b>
Inj 2 mg per ml, 12.5 ml	407.50	1	Onkotrone

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>MIVACURIUM</b>			
Inj 10 mg per 5 ml .....	33.92	5	Mivacron
Inj 20 mg per 10 ml .....	67.17	5	Mivacron
<b>MOCLOBEMIDE</b>			
Tab 150 mg – 1% DV May-10 to 2012 .....	69.23	500	<b>Apo-Moclobemide</b>
Tab 300 mg – 1% DV May-10 to 2012 .....	31.33	100	<b>Apo-Moclobemide</b>
<b>MOMETASONE FUROATE</b>			
Crn 0.1% – 1% DV Jan-10 to 2012.....	2.38	15 g	<b>m-Mometasone</b>
	4.55	45 g	<b>m-Mometasone</b>
Oint 0.1% – 1% DV Jan-10 to 2012.....	2.38	15 g	<b>m-Mometasone</b>
	4.55	45 g	<b>m-Mometasone</b>
<b>MORPHINE HYDROCHLORIDE</b>			
Oral liq 1 mg per ml – 1% DV Dec-09 to 2012.....	8.84	200 ml	<b>RA-Morph</b>
Oral liq 2 mg per ml – 1% DV Dec-09 to 2012.....	11.62	200 ml	<b>RA-Morph</b>
Oral liq 5 mg per ml – 1% DV Dec-09 to 2012.....	14.65	200 ml	<b>RA-Morph</b>
Oral liq 10 mg per ml – 1% DV Dec-09 to 2012.....	21.55	200 ml	<b>RA-Morph</b>
<b>MORPHINE SULPHATE</b>			
Tab immediate-release 10 mg – 1% DV Dec-09 to 2012.....	2.80	10	<b>Sevredol</b>
Tab long-acting 10 mg – 1% DV Aug-11 to 2013.....	1.98	10	<b>Arrow-Morphine LA</b>
Tab immediate-release 20 mg – 1% DV Dec-09 to 2012.....	5.52	10	<b>Sevredol</b>
Tab long-acting 30 mg – 1% DV Aug-11 to 2013.....	3.15	10	<b>Arrow-Morphine LA</b>
Tab long-acting 60 mg – 1% DV Aug-11 to 2013.....	7.20	10	<b>Arrow-Morphine LA</b>
Tab long-acting 100 mg – 1% DV Aug-11 to 2013.....	7.85	10	<b>Arrow-Morphine LA</b>
Cap long-acting 10 mg – 1% DV Nov-10 to 2013.....	2.22	10	<b>m-Eslon</b>
Cap long-acting 30 mg – 1% DV Nov-10 to 2013.....	3.20	10	<b>m-Eslon</b>
Cap long-acting 60 mg – 1% DV Nov-10 to 2013.....	6.90	10	<b>m-Eslon</b>
Cap long-acting 100 mg – 1% DV Nov-10 to 2013.....	8.05	10	<b>m-Eslon</b>
Inf 1 mg per ml, 100 ml premixed bag – 1% DV Dec-11 to 2014.....	165.00	10	<b>Biomed</b>
Inj 1 mg per ml, 10 ml prefilled syringe – 1% DV Dec-11 to 2014.....	39.50	10	<b>Biomed</b>
Inj 1 mg per ml, 30 ml prefilled syringe .....	75.00	10	<b>Biomed</b>
Inj 1 mg per ml, 50 ml prefilled syringe – 1% DV Dec-11 to 2014.....	79.50	10	<b>Biomed</b>
Inj 2 mg per ml, 30 ml prefilled syringe – 1% DV Dec-11 to 2014.....	135.00	10	<b>Biomed</b>
Inj 5 mg per ml, 1 ml – 1% DV Nov-11 to 2014.....	5.51	5	<b>DBL Morphine Sulphate</b>
Inj 10 mg per ml, 1 ml – 1% DV Nov-11 to 2014.....	4.79	5	<b>DBL Morphine Sulphate</b>
Inj 15 mg per ml, 1 ml – 1% DV Nov-11 to 2014.....	5.01	5	<b>DBL Morphine Sulphate</b>
Inj 30 mg per ml, 1 ml – 1% DV Nov-11 to 2014.....	5.30	5	<b>DBL Morphine Sulphate</b>
<b>MORPHINE TARTRATE</b>			
Inj 80 mg per ml, 1.5 ml – 1% DV Nov-10 to 2013.....	30.00	5	<b>Hospira</b>
Inj 80 mg per ml, 5 ml – 1% DV Nov-10 to 2013.....	75.00	5	<b>Hospira</b>
<b>MOXIFLOXACIN</b>			
Tab 400 mg .....	52.00	5	<b>Avelox</b>
Soln for inf 1.6 mg per ml, 250 ml .....	70.00	1	<b>Avelox IV 400</b>
<b>MUCILAGINOUS LAXATIVES</b>			
Dry – 1% DV Nov-10 to 2013 .....	6.02	500 g	<b>Konsyl-D</b>

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>MYCOPHENOLATE MOFETIL</b>			
Tab 500 mg .....	70.00	50	CellCept
	60.00		Ceptolate
	85.00		Myaccord
Cap 250 mg .....	30.00	50	Ceptolate
	70.00	100	CellCept
	85.00		Myaccord
Pwd for oral liq 1 g per 5 ml .....	285.00	165 ml	CellCept
Inj 500 mg vial .....	133.33	4	CellCept
<b>NADOLOL</b>			
Tab 40 mg .....	14.97	100	Apo-Nadolol
Tab 80 mg .....	22.19	100	Apo-Nadolol
<b>NALOXONE HYDROCHLORIDE</b>			
Inj 400 µg per ml, 1 ml .....	33.00	5	Mayne
<b>NALTREXONE HYDROCHLORIDE</b>			
Tab 50 mg – 1% DV Jun-11 to 2013 .....	123.00	30	<b>Naltraccord</b>
<b>NAPHAZOLINE HYDROCHLORIDE</b>			
Eye drops 0.1 % – 1% DV Sep-11 to 2014 .....	4.15	15 ml	<b>Naphcon Forte</b>
<b>NAPROXEN</b>			
Tab 250 mg – 1% DV Dec-09 to 2012 .....	23.70	500	<b>Noflam 250</b>
Tab 500 mg – 1% DV Dec-09 to 2012 .....	24.88	250	<b>Noflam 500</b>
<b>NEOSTIGMINE METHYLSULPHATE</b>			
Inj 2.5 mg per ml, 1 ml – 1% DV Sep-11 to 2014 .....	140.00	50	<b>AstraZeneca</b>
<b>NEVIRAPINE</b>			
Tab 200 mg – 1% DV Oct-09 to 2012 .....	319.80	60	<b>Viramune</b>
Oral suspension 10 mg per ml – 1% DV Oct-09 to 2012 .....	134.55	240 ml	<b>Viramune Suspension</b>
<b>NICOTINE</b>			
Patch 7 mg – 5% DV Jul-11 to 2014 .....	18.13	28	<b>Habitrol</b>
Patch 14 mg – 5% DV Jul-11 to 2014 .....	18.81	28	<b>Habitrol</b>
Patch 21 mg – 5% DV Jul-11 to 2014 .....	19.14	28	<b>Habitrol</b>
Lozenge 1 mg – 5% DV Jul-11 to 2014 .....	19.94	216	<b>Habitrol</b>
Lozenge 2 mg – 5% DV Jul-11 to 2014 .....	24.27	216	<b>Habitrol</b>
Gum 2 mg (classic) – 5% DV Oct-11 to 2014 .....	36.47	384	<b>Habitrol</b>
Gum 2 mg (fruit) – 5% DV Oct-11 to 2014 .....	36.47	384	<b>Habitrol</b>
Gum 2 mg (mint) – 5% DV Oct-11 to 2014 .....	36.47	384	<b>Habitrol</b>
Gum 4 mg (classic) – 5% DV Oct-11 to 2014 .....	42.04	384	<b>Habitrol</b>
Gum 4 mg (fruit) – 5% DV Oct-11 to 2014 .....	42.04	384	<b>Habitrol</b>
Gum 4 mg (mint) – 5% DV Oct-11 to 2014 .....	42.04	384	<b>Habitrol</b>
<b>NIFEDIPINE</b>			
Tab long-acting 20 mg .....	7.30	100	Nyefax Retard
Tab long-acting 30 mg .....	8.56	30	Adefin XL Arrow-Nifedipine XR
Tab long-acting 60 mg .....	12.28	30	Adefin XL Arrow-Nifedipine XR
<b>NORADRENALINE ACID TARTRATE</b>			
Inj 1:1,000 per 2 ml .....	42.00	6	Levophed
<b>NORETHISTERONE</b>			
Tab 5 mg – 1% DV Nov-11 to 2014 .....	26.50	100	<b>Primolut N</b>

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>NORFLOXACIN</b>			
Tab 400 mg – 1% DV Sep-11 to 2014 .....	15.45	100	<b>Arrow-Norflexacin</b>
<b>NORTRIPTYLINE HYDROCHLORIDE</b>			
Tab 10 mg .....	6.69	100	Norpress
Tab 25 mg .....	14.77	180	Norpress
<b>NYSTATIN</b>			
Tab 500,000 u – 1% DV Nov-10 to 2013 .....	14.16	50	<b>Niostat</b>
Cap 500,000 u – 1% DV Nov-10 to 2013 .....	12.81	50	<b>Niostat</b>
Oral liq 100,000 u per ml – 1% DV Sep-11 to 2014 .....	3.19	24 ml	<b>Niostat</b>
<b>OCTREOTIDE</b>			
Inj LAR, 10 mg prefilled syringe .....	1,772.50	1	Sandostatin LAR
Inj LAR, 20 mg prefilled syringe .....	2,358.75	1	Sandostatin LAR
Inj LAR, 30 mg prefilled syringe .....	2,951.25	1	Sandostatin LAR
Inj 50 µg per ml, 1 ml – 1% DV May-12 to 2014 .....	25.65	5	Hospira
	19.24		<b>Octreotide MaxRx</b>
Inj 100 µg per ml, 1 ml – 1% DV May-12 to 2014 .....	48.50	5	Hospira
	36.38		<b>Octreotide MaxRx</b>
Inj 500 µg per ml, 1 ml – 1% DV May-12 to 2014 .....	175.00	5	Hospira
	131.25		<b>Octreotide MaxRx</b>
<i>(Hospira Inj 50 µg per ml, 1 ml to be delisted 1 May 2012)</i>			
<i>(Hospira Inj 100 µg per ml, 1 ml to be delisted 1 May 2012)</i>			
<b>OIL IN WATER EMULSION</b>			
Crm .....	2.80	500 g	healthE Fatty Cream
Crm 100 g .....	32.00	20	healthE
<b>OLANZAPINE</b>			
Orodispersible tab 5 mg – 5% DV Aug-11 to 2013 .....	6.36	28	<b>Olanzine-D</b>
Orodispersible tab 10 mg – 5% DV Aug-11 to 2013 .....	8.76	28	<b>Olanzine-D</b>
Tab 2.5 mg – 5% DV Aug-11 to 2013 .....	2.00	28	<b>Olanzine</b>
Tab 5 mg – 5% DV Aug-11 to 2013 .....	3.85	28	<b>Olanzine</b>
Tab 10 mg – 5% DV Aug-11 to 2013 .....	6.35	28	<b>Olanzine</b>
<b>OLANZAPINE PAMOATE MONOHYDRATE</b>			
Inj 210 mg .....	280.00	1	Zyprexa Relprev
Inj 300 mg .....	460.00	1	Zyprexa Relprev
Inj 405 mg .....	560.00	1	Zyprexa Relprev
<b>OMEPRAZOLE</b>			
Cap 10 mg – 1% DV Oct-11 to 2014 .....	2.91	90	<b>Omezol Relief</b>
Cap 20 mg – 1% DV Oct-11 to 2014 .....	3.78	90	<b>Omezol Relief</b>
Cap 40 mg – 1% DV Oct-11 to 2014 .....	5.57	90	<b>Omezol Relief</b>
Powder – 1% DV Sep-11 to 2014 .....	42.50	5 g	<b>Midwest</b>
Inf 40 mg – 1% DV Sep-11 to 2014 .....	19.00	5	<b>Dr Reddy's Omeprazole</b>
Inj 40 mg – 1% DV Sep-11 to 2014 .....	28.65	5	<b>Dr Reddy's Omeprazole</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>ONDANSETRON</b>			
Tab 4 mg – 1% DV Feb-11 to 2013.....	5.10	30	<b>Dr Reddy's</b> <b>Ondansetron</b>
Tab disp 4 mg – 5% DV May-11 to 2013.....	1.70	10	<b>Dr Reddy's</b> <b>Ondansetron</b>
Tab 8 mg – 1% DV Feb-11 to 2013.....	1.70	10	<b>Dr Reddy's</b> <b>Ondansetron</b>
Tab disp 8 mg – 5% DV May-11 to 2013.....	2.00	10	<b>Dr Reddy's</b> <b>Ondansetron</b>
Inj 2 mg per ml, 2 ml – 1% DV Nov-09 to 2012.....	14.40	5	<b>Zofran</b>
Inj 2 mg per ml, 4 ml – 1% DV Nov-09 to 2012.....	23.20	5	<b>Zofran</b>
<b>ORAL ELEMENTAL FEED 1KCAL/ML</b>			
Powder (unflavoured) .....	4.50	80.4 g	Vivonex TEN
Liquid (vanilla) .....	4.95	237 ml	Peptamen OS 1.0
<b>ORAL FEED 1.5KCAL/ML</b>			
Liquid (banana) .....	1.26	200 ml	Ensure Plus
Liquid (chocolate) .....	1.26	200 ml	Ensure Plus
	1.33	237 ml	Ensure Plus
Liquid (fruit of the forest) .....	1.26	200 ml	Ensure Plus
Liquid (strawberry) .....	1.33	237 ml	Ensure Plus
Liquid (vanilla) .....	1.26	200 ml	Ensure Plus
	1.33	237 ml	Ensure Plus
<b>ORAL FEED 2KCAL/ML</b>			
Liquid (vanilla) .....	2.25	237 ml	Two Cal HN
<b>ORNIDAZOLE</b>			
Tab 500 mg .....	16.50	10	Arrow-Ornidazole
<b>OXALIPLATIN</b>			
Inj 50 mg – 1% DV Jan-10 to 2012.....	55.00	1	<b>Oxaliplatin Ebewe</b>
Inj 100 mg – 1% DV Jan-10 to 2012.....	110.00	1	<b>Oxaliplatin Ebewe</b>
<b>OXYBUTYNIN</b>			
Tab 5 mg .....	44.79	500	Apo-Oxybutynin
Oral liq 5 mg per 5 ml .....	50.40	473 ml	Apo-Oxybutynin
<b>OXYCODONE HYDROCHLORIDE</b>			
Tab controlled-release 5 mg .....	7.51	20	OxyContin
Tab controlled-release 10 mg .....	11.14	20	OxyContin
Tab controlled-release 20 mg .....	18.93	20	OxyContin
Tab controlled-release 40 mg .....	33.29	20	OxyContin
Tab controlled-release 80 mg .....	58.03	20	OxyContin
Cap 5 mg .....	2.83	20	OxyNorm
Cap 10 mg .....	5.58	20	OxyNorm
Cap 20 mg .....	9.77	20	OxyNorm
Oral liq 5 mg per 5 ml .....	11.20	250 ml	OxyNorm
Inj 10 mg per ml, 1 ml .....	14.40	5	OxyNorm
Inj 10 mg per ml, 2 ml .....	28.80	5	OxyNorm
<b>OXYTOCIN</b>			
Inj 5 iu per ml, 1 ml – 1% DV Dec-09 to 2012.....	5.94	5	<b>Syntocinon</b>
Inj 10 iu per ml, 1 ml – 1% DV Dec-09 to 2012.....	7.48	5	<b>Syntocinon</b>

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>OXYTOCIN WITH ERGOMETRINE MALEATE</b>			
Inj 5 iu with ergometrine maleate 500 µg per ml, 1 ml – <b>1% DV Dec-09 to 2012</b> .....	10.12	5	<b>Syntometrine</b>
<b>PACLITAXEL</b>			
Inj 30 mg – <b>1% DV Oct-08 to 2014</b> .....	137.50	5	<b>Paclitaxel Ebewe</b>
Inj 100 mg – <b>1% DV Oct-08 to 2014</b> .....	91.67	1	Paclitaxel Actavis <b>Paclitaxel Ebewe</b>
Inj 150 mg – <b>1% DV Oct-08 to 2014</b> .....	137.50	1	Anzatax Paclitaxel Actavis <b>Paclitaxel Ebewe</b>
Inj 300 mg – <b>1% DV Oct-08 to 2014</b> .....	275.00	1	Anzatax Paclitaxel Actavis <b>Paclitaxel Ebewe</b>
Inj 600 mg – <b>1% DV Oct-08 to 2014</b> .....	550.00	1	<b>Paclitaxel Ebewe</b>
<b>PAEDIATRIC ENTERAL FEED 1KCAL/ML</b>			
Liquid .....	2.68	500 ml	Pediasure RTH
<b>PAEDIATRIC ORAL FEED 1KCAL/ML</b>			
Liquid (chocolate) .....	1.07	200 ml	Pediasure
Liquid (strawberry) .....	1.07	200 ml	Pediasure
Liquid (vanilla) .....	1.07	200 ml	Pediasure
	1.27	237 ml	Pediasure
<b>PAMIDRONATE DISODIUM</b>			
Inj 3 mg per ml, 5 ml .....	18.75	1	Pamisol
Inj 3 mg per ml, 10 ml .....	37.50	1	Pamisol
Inj 6 mg per ml, 10 ml .....	75.00	1	Pamisol
Inj 9 mg per ml, 10 ml .....	112.50	1	Pamisol
<b>PANCURONIUM BROMIDE</b>			
Inj 2 mg per ml, 2 ml – <b>1% DV Dec-09 to 2012</b> .....	128.00	50	<b>AstraZeneca</b>
<b>PANTOPRAZOLE</b>			
Tab 20 mg – <b>1% DV Sep-10 to 2013</b> .....	1.23	28	<b>Dr Reddy's</b> Pantoprazole
Tab 40 mg – <b>1% DV Sep-10 to 2013</b> .....	1.54	28	<b>Dr Reddy's</b> Pantoprazole
Inj 40 mg – <b>1% DV Sep-11 to 2014</b> .....	6.50	1	<b>Pantocid IV</b>
<b>PAPAPERINE HYDROCHLORIDE</b>			
Inj 12 mg per ml, 10 ml .....	73.12	5	Mayne
<b>PARACETAMOL</b>			
Oral liq 120 mg per 5 ml – <b>20% DV Dec-11 to 2014</b> .....	2.21	500 ml	<b>Ethics Paracetamol</b>
Oral liq 250 mg per 5 ml – <b>20% DV Sep-11 to 2014</b> .....	6.70	1,000 ml	<b>Paracare Double Strength</b>
Suppos 25 mg .....	56.35	20	Biomed
Suppos 50 mg .....	56.35	20	Biomed
Suppos 125 mg .....	7.49	20	Panadol
Suppos 250 mg .....	14.40	20	Panadol
Suppos 500 mg .....	20.50	50	Paracare

Products with Hospital Supply Status (HSS) are in **bold**  
Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>PARACETAMOL WITH CODEINE</b>			
Tab paracetamol 500 mg with codeine phosphate 8 mg – <b>1% DV Nov-11 to 2014</b> .....	2.70	100	<b>Paracetamol + Codeine (Relieve)</b>
<b>PARAFFIN</b>			
Yellow soft – <b>1% DV Oct-09 to 2012</b> .....	1.04	10 g	<b>API</b>
<b>PAROXETINE HYDROCHLORIDE</b>			
Tab 20 mg – <b>1% DV Sep-10 to 2013</b> .....	2.38	30	<b>Loxamine</b>
<b>PEAK FLOW METER</b>			
Low Range .....	11.44	1	Breath-Alert
Normal Range .....	11.44	1	Breath-Alert
<b>PEGFILGRASTIM</b>			
Inj 6 mg per 0.6 ml prefilled syringe .....	1,395.00	1	Neulastim
<b>PENICILLAMINE</b>			
Tab 125 mg .....	61.93	100	D-Penamime
Tab 250 mg .....	98.98	100	D-Penamime
<b>PERGOLIDE</b>			
Tab 0.25 mg – <b>1% DV Sep-11 to 2014</b> .....	48.00	100	<b>Permax</b>
Tab 1 mg – <b>1% DV Sep-11 to 2014</b> .....	170.00	100	<b>Permax</b>
<b>PERHEXILINE MALEATE</b>			
Tab 100 mg .....	62.90	100	Pexsig
<b>PERMETHRIN</b>			
Crm 5% – <b>1% DV Sep-11 to 2014</b> .....	4.20	30 g	<b>Lyderm</b>
Lotn 5% – <b>1% DV Sep-11 to 2014</b> .....	3.24	30 ml	<b>A-Scabies</b>
<b>PETHIDINE HYDROCHLORIDE</b>			
Tab 50 mg .....	3.20	10	PSM
Tab 100 mg .....	4.20	10	PSM
Inj 50 mg per ml, 1 ml – <b>1% DV Nov-11 to 2014</b> .....	5.51	5	<b>DBL Pethidine Hydrochloride</b>
Inj 50 mg per ml, 2 ml – <b>1% DV Nov-11 to 2014</b> .....	5.83	5	<b>DBL Pethidine Hydrochloride</b>
<b>PHENOBARBITONE</b>			
Tab 15 mg .....	25.00	500	PSM
Tab 30 mg .....	26.00	500	PSM
<b>PHENOXYMETHYLPENICILLIN (PENICILLIN V)</b>			
Cap potassium salt 250 mg – <b>1% DV Nov-10 to 2013</b> .....	9.71	50	<b>Cilicaine VK</b>
Cap potassium salt 500 mg – <b>1% DV Nov-10 to 2013</b> .....	11.70	50	<b>Cilicaine VK</b>
Grans for oral liq 125 mg per 5 ml – <b>1% DV Sep-10 to 2013</b> .....	1.68	100 ml	<b>AFT</b>
Grans for oral liq 250 mg per 5 ml – <b>1% DV Sep-10 to 2013</b> .....	1.78	100 ml	<b>AFT</b>
<b>PHENTOLAMINE MESYLATE</b>			
Inj 10 mg per ml, 1 ml .....	31.65	5	Regitine
<b>PHENYLEPHRINE HYDROCHLORIDE</b>			
Inj 1%, 1 ml .....	115.50	25	Neosynephrine HCL
<b>PHYTOMENADIONE</b>			
Inj 2 mg per 0.2 ml .....	8.00	5	Konaktion MM
Inj 10 mg per ml, 1 ml .....	9.21	5	Konaktion MM

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>PINDOLOL</b>			
Tab 5 mg – 1% DV Mar-10 to 2012.....	5.40	100	<b>Apo-Pindolol</b>
Tab 10 mg – 1% DV Mar-10 to 2012.....	9.19	100	<b>Apo-Pindolol</b>
Tab 15 mg – 1% DV Mar-10 to 2012.....	13.80	100	<b>Apo-Pindolol</b>
<b>PIOGLITAZONE</b>			
Tab 15 mg – 1% DV Dec-09 to 2012 .....	2.61	28	<b>Pizaccord</b>
Tab 30 mg – 1% DV Dec-09 to 2012 .....	5.23	28	<b>Pizaccord</b>
Tab 45 mg – 1% DV Dec-09 to 2012 .....	7.80	28	<b>Pizaccord</b>
<b>PIPERACILLIN SODIUM WITH TAZOBACTAM SODIUM</b>			
Inj 4 g with tazobactam sodium 500 mg – 1% DV Jun-10 to 2013 .....	12.00	1	<b>Tazocin EF</b>
<b>PIZOTIFEN</b>			
Tab 500 µg – 1% DV Apr-10 to 2012 .....	21.10	100	<b>Sandomigran</b>
<b>PODOPHYLLOTOXIN</b>			
Soln 0.5% .....	33.60	3.5 ml	Condyline
<b>POLOXAMER</b>			
Oral drops 10% – 1% DV Sep-11 to 2014 .....	3.78	30 ml	<b>Coloxyl</b>
<b>POLYETHYLENE GLYCOL WITH SODIUM SULPHATE</b>			
Powder, sachets .....	14.31	4	Klean Prep
<b>POLYVINYL ALCOHOL</b>			
Eye drops 1.4% .....	3.62	15 ml	Liquifilm Tears
	2.95		Vistil
Eye drops 3% .....	3.88	15 ml	Liquifilm Forte
	3.80		Vistil Forte
<b>PORACTANT ALFA</b>			
Inj 80 mg per ml, 1.5 ml .....	425.00	1	Curosurf
Inj 80 mg per ml, 3 ml .....	695.00	1	Curosurf
<b>POTASSIUM CHLORIDE</b>			
Tab long-acting 600 mg – 1% DV Dec-09 to 2012 .....	7.00	200	<b>Span-K</b>
<b>POTASSIUM CHLORIDE WITH GLUCOSE</b>			
Inf 20 mmol/L with 5% glucose .....	7.36	1,000 ml	Baxter
<b>POTASSIUM CHLORIDE WITH GLUCOSE AND SODIUM CHLORIDE</b>			
Inf 20 mmol/L with 2.5% glucose and 0.45% sodium chloride .....	4.95	500 ml	Baxter
Inf 20 mmol/L with 4% glucose and 0.18% sodium chloride .....	3.45	500 ml	Baxter
	4.30	1,000 ml	Baxter
Inf 30 mmol/L with 4% glucose and 0.18% sodium chloride .....	3.62	1,000 ml	Baxter
<b>POTASSIUM CHLORIDE WITH SODIUM CHLORIDE</b>			
Inf 20 mmol/L with 0.9% sodium chloride .....	3.85	1,000 ml	Baxter
Inf 30 mmol/L with 0.9% sodium chloride .....	2.59	1,000 ml	Baxter
Inf 40 mmol/L with 0.9% sodium chloride .....	6.62	1,000 ml	Baxter
<b>POTASSIUM CITRATE</b>			
Oral liq 3 mmol per ml .....	30.00	200 ml	Biomed

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>POVIDONE IODINE</b>			
Oint 10% .....	3.27	25 g	Betadine
Alcohol skin preparation 10% with 30% alcohol .....	10.00	500 ml	Betadine Skin Prep
Antiseptic soln 10% .....	2.95	100 ml	Riodine
	6.20	500 ml	Riodine
			Betadine
<b>PRAVASTATIN</b>			
Tab 20 mg – 1% DV Nov-11 to 2014 .....	5.44	30	<b>Cholvastin</b>
Tab 40 mg – 1% DV Nov-11 to 2014 .....	9.28	30	<b>Cholvastin</b>
<b>PRAZOSIN HYDROCHLORIDE</b>			
Tab 1 mg .....	5.53	100	Apo-Prazo
Tab 2 mg .....	7.00	100	Apo-Prazo
Tab 5 mg .....	11.70	100	Apo-Prazo
<b>PREDNISOLONE SODIUM PHOSPHATE</b>			
Oral liq 5 mg per ml – 1% DV Sep-09 to 2012 .....	9.95	30 ml	<b>Redipred</b>
<b>PREDNISONE</b>			
Tab 1 mg .....	10.68	500	Apo-Prednisone
Tab 2.5 mg .....	12.09	500	Apo-Prednisone
Tab 5 mg .....	11.09	500	Apo-Prednisone
Tab 20 mg .....	29.03	500	Apo-Prednisone
<b>PREGNANCY TEST – HCG URINE</b>			
Cassette – 1% DV May-10 to 2012 .....	22.80	40 test	<b>Innovacon hCG One Step Pregnancy Test</b>
<b>PRILOCAINE HYDROCHLORIDE</b>			
Inj 0.5%, 50 ml – 1% DV Nov-10 to 2013 .....	100.00	5	<b>Citanest</b>
Inj 2%, 5 ml – 1% DV Nov-10 to 2013 .....	55.00	10	<b>Citanest</b>
<b>PROCAINE PENICILLIN</b>			
Inj 1.5 mega u – 1% DV Nov-11 to 2014 .....	123.50	5	<b>Cilicaine</b>
<b>PROCARBAZINE HYDROCHLORIDE</b>			
Cap 50 mg .....	225.00	50	Natulan
<b>PROCHLORPERAZINE</b>			
Tab 5 mg .....	16.85	500	Antinaus
<b>PROMETHAZINE HYDROCHLORIDE</b>			
Tab 10 mg .....	2.72	50	Allersoothe
Tab 25 mg .....	4.44	50	Allersoothe
Oral liq 5 mg per 5 ml – 1% DV Apr-10 to 2012 .....	3.10	100 ml	<b>Promethazine Winthrop Elixir</b>
Inj 25 mg per ml, 2 ml .....	11.00	5	Mayne

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>PROPOFOL</b>			
Inj 1%, 20 ml .....	42.00	5	Diprivan
	7.60		Fresofol 1%
			Provive MCT-LCT 1%
Inj 1%, 50 ml .....	25.00	1	Diprivan
	4.00		Fresofol 1%
			Provive MCT-LCT 1%
Inj 1%, 50 ml pre-filled syringe .....	47.00	1	Diprivan
Inj 1%, 100 ml .....	30.00	1	Diprivan
	7.60		Fresofol 1%
			Provive MCT-LCT 1%
Inj 2%, 50 ml pre-filled syringe .....	60.00	1	Diprivan
<b>PROPRANOLOL</b>			
Cap long-acting 160 mg .....	16.06	100	Cardinol LA
<b>PROPYLENE GLYCOL</b>			
Liq .....	12.00	500 ml	ABM
<b>PROTEIN SUPPLEMENT</b>			
Powder .....	8.95	227 g	Resource Beneprotein
<b>PYRIDOSTIGMINE BROMIDE</b>			
Tab 60 mg – 1% DV Sep-11 to 2014 .....	38.90	100	<b>Mestinon</b>
<b>PYRIDOXINE HYDROCHLORIDE</b>			
Tab 25 mg – 1% DV Sep-11 to 2014 .....	2.20	90	<b>PyridoxADE</b>
Tab 50 mg – 1% DV Sep-11 to 2014 .....	12.16	500	<b>Apo-Pyridoxine</b>
<b>QUETIAPINE</b>			
Tab 25 mg .....	7.00	60	Dr Reddy's Quetiapine
	16.78	90	Seroquel
	14.00	60	Quetapel
Tab 100 mg .....	14.00	60	Dr Reddy's Quetiapine
	32.59	90	Seroquel
	24.00	60	Quetapel
Tab 200 mg .....	24.00	60	Dr Reddy's Quetiapine
	56.70	90	Seroquel
	40.00	60	Quetapel
Tab 300 mg .....	40.00	60	Dr Reddy's Quetiapine
	95.40	90	Seroquel
	95.40	90	Quetapel
<b>QUINAPRIL</b>			
Tab 5 mg .....	1.60	30	Accupril
Tab 10 mg .....	1.75	30	Accupril
Tab 20 mg .....	2.35	30	Accupril
<b>QUINAPRIL WITH HYDROCHLOROTHIAZIDE</b>			
Tab 10 mg with hydrochlorothiazide 12.5 mg .....	3.37	30	Accuretic 10
Tab 20 mg with hydrochlorothiazide 12.5 mg .....	4.57	30	Accuretic 20
<b>QUININE SULPHATE</b>			
Tab 300 mg – 1% DV Dec-09 to 2012 .....	54.06	500	<b>Q 300</b>
<b>RALOXIFENE HYDROCHLORIDE</b>			
Tab 60 mg .....	53.76	28	Evista

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>RALTEGRAVIR POTASSIUM</b>			
Tab 400 mg .....	1,090.00	60	Isentress
<b>RANITIDINE HYDROCHLORIDE</b>			
Tab 150 mg – 1% DV Sep-11 to 2014 .....	6.79	250	<b>Arrow-Ranitidine</b>
Tab 300 mg – 1% DV Sep-11 to 2014 .....	9.34	250	<b>Arrow-Ranitidine</b>
Oral liq 150 mg per 10 ml – 1% DV Sep-11 to 2014 .....	5.92	300 ml	<b>Peptisoothe</b>
Inj 25 mg per ml, 2 ml .....	8.75	5	Zantac
<b>RECOMBINANT FACTOR IX</b>			
Inj 250 IU .....	310.00	1	BeneFIX
Inj 500 IU .....	620.00	1	BeneFIX
Inj 1,000 IU .....	1,240.00	1	BeneFIX
Inj 2,000 IU .....	2,480.00	1	BeneFIX
<b>RECOMBINANT FACTOR VIII</b>			
Inj 250 IU .....	237.50	1	Advate
	250.00		Kogenate FS
	225.00		Xyntha
Inj 500 IU .....	475.00	1	Advate
	500.00		Kogenate FS
	450.00		Xyntha
Inj 1,000 IU .....	950.00	1	Advate
	1,000.00		Kogenate FS
	900.00		Xyntha
Inj 1,500 IU .....	1,425.00	1	Advate
Inj 2,000 IU .....	1,900.00	1	Advate
	2,000.00		Kogenate FS
	1,800.00		Xyntha
Inj 3,000 IU .....	2,850.00	1	Advate
<b>REMIFENTANIL HYDROCHLORIDE</b>			
Inj 1 mg vial – 1% DV Feb-12 to 2014 .....	27.95	5	<b>Remifentanil-AFT</b>
Inj 2 mg vial – 1% DV Feb-12 to 2014 .....	41.80	5	<b>Remifentanil-AFT</b>
<b>RENAL ORAL FEED 2KCAL/ML</b>			
Liquid (strawberry) .....	2.43	200 ml	Nepro
Liquid (vanilla) .....	2.43	200 ml	Nepro
	3.31	237 ml	Novasource Renal
<b>RETINOL PALMITATE</b>			
Oint 25 g .....	2.00	1	PSM
Oint 50 g .....	57.20	20	healthE
<b>RIFABUTIN</b>			
Cap 150 mg – 1% DV Sep-10 to 2013 .....	213.19	30	<b>Mycobutin</b>

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST)	Per	Brand or Generic Manufacturer
	\$		
<b>RISPERIDONE</b>			
Orally-disintegrating tab 0.5 mg .....	21.42	28	Risperdal Quicklet
Tab 0.5 mg .....	5.20	20	Risperdal
	3.51	60	Apo-Risperidone Dr Reddy's Risperidone Ridal
Orally-disintegrating tab 1 mg .....	42.84	28	Risperdal Quicklet
Tab 1 mg .....	6.00	60	Apo-Risperidone Dr Reddy's Risperidone Ridal
	30.77		Risperdal
Orally-disintegrating tab 2 mg .....	85.71	28	Risperdal Quicklet
Tab 2 mg .....	11.00	60	Apo-Risperidone Dr Reddy's Risperidone Ridal
	61.53		Risperdal
Tab 3 mg .....	15.00	60	Apo-Risperidone Dr Reddy's Risperidone Ridal
	92.32		Risperdal
Tab 4 mg .....	20.00	60	Apo-Risperidone Dr Reddy's Risperidone Ridal
	123.05		Risperdal
Oral liq 1 mg per ml .....	18.35	30 ml	Apo-Risperidone
	45.92		Risperdal
	18.35		Risperon
Inj 25 mg per 2 ml .....	175.00	1	Risperdal Consta
Inj 37.5 mg per 2 ml .....	230.00	1	Risperdal Consta
Inj 50 mg per 2 ml .....	280.00	1	Risperdal Consta
<b>RITONAVIR</b>			
Tab 100 mg .....	43.31	30	Norvir
<b>RITUXIMAB</b>			
Inj 100 mg per 10 ml vial .....	1,075.50	2	Mabthera
Inj 500 mg per 50 ml vial .....	2,688.30	1	Mabthera
<b>RIVAROXABAN</b>			
Tab 10 mg .....	153.00	15	Xarelto
	306.00	30	Xarelto
<b>RIZATRIPTAN</b>			
Tab orodispersible 10mg – 1% DV May-12 to 2014 .....	25.32	3	Maxalt Melt
	18.00	30	<b>Rizamelt</b>
<i>(Maxalt Melt Tab orodispersible 10mg to be delisted 1 May 2012)</i>			
<b>ROCURONIUM BROMIDE</b>			
Inj 10 mg per ml, 5 ml – 1% DV Mar-11 to 2012 .....	85.00	10	<b>Arrow-Rocuronium</b>
<b>ROPINIROLE HYDROCHLORIDE</b>			
Tab 0.25 mg – 1% DV Sep-10 to 2013 .....	6.20	84	<b>Ropin</b>
Tab 1 mg – 1% DV Sep-10 to 2013 .....	15.95	84	<b>Ropin</b>
Tab 2 mg – 1% DV Sep-10 to 2013 .....	24.95	84	<b>Ropin</b>
Tab 5 mg – 1% DV Sep-10 to 2013 .....	38.00	84	<b>Ropin</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>ROPIVACAINE HYDROCHLORIDE</b>			
Inj 2 mg per ml, 20 ml .....	75.00	5	Naropin
Inj 2 mg per ml, 100 ml .....	200.00	5	Naropin
Inj 2 mg per ml, 200 ml .....	265.00	5	Naropin
Inj 7.5 mg per ml, 10 ml .....	45.00	5	Naropin
Inj 7.5 mg per ml, 20 ml .....	84.00	5	Naropin
Inj 10 mg per ml, 10 ml .....	54.00	5	Naropin
<b>ROPIVACAINE HYDROCHLORIDE WITH FENTANYL</b>			
Inj 2 mg per ml with 2 µg of fentanyl per ml, 100 ml – <b>1% DV Nov-10 to 2013</b> .....	198.50	5	<b>Naropin</b>
Inj 2 mg per ml with 2 µg of fentanyl per ml, 200 ml – <b>1% DV Nov-10 to 2013</b> .....	270.00	5	<b>Naropin</b>
<b>ROXITHROMYCIN</b>			
Tab 150 mg – <b>1% DV Sep-09 to 2012</b> .....	8.98	50	<b>Arrow-Roxithromycin</b>
Tab 300 mg – <b>1% DV Sep-09 to 2012</b> .....	16.48	50	<b>Arrow-Roxithromycin</b>
<b>SALBUTAMOL</b>			
Oral liq 2 mg per 5 ml – <b>1% DV Sep-10 to 2013</b> .....	1.99	150 ml	<b>Salapin</b>
Aerosol inhaler 100 µg per dose, CFC-free .....	4.00	200 dose	Salamol
Inhaler 100 µg dose, 200 doses .....	6.00	200 dose	Ventolin
Nebuliser soln, 1 mg per ml, 2.5 ml – <b>1% DV Sep-09 to 2012</b> .....	3.52	20	<b>Asthalin</b>
Nebuliser soln, 2 mg per ml, 2.5 ml – <b>1% DV Sep-09 to 2012</b> .....	3.70	20	<b>Asthalin</b>
<b>SALBUTAMOL WITH IPRATROPIUM BROMIDE</b>			
Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg per vial, 2.5 ml – <b>1% DV Sep-09 to 2012</b> .....	4.29	20	<b>Duolin</b>
<b>SALMETEROL</b>			
Aerosol inhaler CFC-free, 25 µg per dose .....	26.46	120 dose	Serevent
Powder for inhalation, breath activated 50 µg per dose .....	26.46	60 dose	Serevent Accuhaler
<b>SERTRALINE</b>			
Tab 50 mg – <b>1% DV Feb-11 to 2013</b> .....	5.40	90	<b>Arrow-Sertraline</b>
Tab 100 mg – <b>1% DV Feb-11 to 2013</b> .....	9.60	90	<b>Arrow-Sertraline</b>
<b>SEVOFLURANE</b>			
Liq 250 ml bottle – <b>1% DV Nov-09 to 2012</b> .....	1,230.00	6	<b>Baxter</b>
<b>SILVER SULPHADIAZINE</b>			
Crn 1% .....	12.30	50 g	Flamazine
<b>SIMVASTATIN</b>			
Tab 10 mg – <b>1% DV Sep-11 to 2014</b> .....	1.40	90	<b>Arrow-Simva</b>
Tab 20 mg – <b>1% DV Sep-11 to 2014</b> .....	1.95	90	<b>Arrow-Simva</b>
Tab 40 mg – <b>1% DV Sep-11 to 2014</b> .....	3.18	90	<b>Arrow-Simva</b>
Tab 80 mg – <b>1% DV Sep-11 to 2014</b> .....	9.31	90	<b>Arrow-Simva</b>
<b>SIROLIMUS</b>			
Tab 1 mg .....	813.00	100	Rapamune
Tab 2 mg .....	1,626.00	100	Rapamune
Oral liq 1 mg per ml .....	487.80	60 ml	Rapamune
<b>SODIUM ACID PHOSPHATE</b>			
Enema 16% with sodium phosphate 8% .....	2.50	1	Fleet Phosphate Enema

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>SODIUM ALGINATE</b>			
Oral liq 500 mg with sodium bicarbonate 267 mg and calcium carbonate 160 mg per 10 ml .....	4.95	500 ml	Acidex
<b>SODIUM BICARBONATE</b>			
Cap 840 mg .....	8.52	100	Sodibic
Inf 5% .....	19.06	500 ml	Baxter
Inj 8.4%, 50 ml .....	19.95	1	Biomed
Inj 8.4%, 100 ml .....	20.50	1	Biomed
<b>SODIUM CHLORIDE</b>			
Soln 0.9% for irrigation .....	2.49	100 ml	Baxter
	2.88	500 ml	Baxter
	2.96	1,000 ml	Baxter
	10.00	2,000 ml	Baxter
	12.67	3,000 ml	Baxter
Soln 7% .....	23.50	90 ml	Biomed
Inf 0.45% .....	5.50	500 ml	Baxter
Inf 0.9% .....	3.01	50 ml	Baxter
	2.28	100 ml	Baxter
	3.60	250 ml	Baxter
	1.77	500 ml	Baxter
	1.80	1,000 ml	Baxter
	1.70	500 ml	Freeflex
	1.71	1,000 ml	Freeflex
Inf 3% .....	5.69	1,000 ml	Baxter
Soln 0.9% for irrigation, 30 ml – <b>1% DV Nov-11 to 2014</b> .....	19.50	30	<b>Pfizer</b>
Inj 0.9%, 5 ml .....	10.85	50	Multichem
	15.50		Pfizer
Inj 0.9%, 10 ml .....	11.50	50	Multichem
	15.50		Pfizer
Inj 0.9%, 20 ml .....	8.41	20	Multichem
Inj 23.4%, 20 ml – <b>1% DV Nov-10 to 2013</b> .....	31.25	5	<b>Biomed</b>
<b>SODIUM CHLORIDE WITH GLUCOSE</b>			
Inf 0.18% with glucose 4% .....	1.77	500 ml	Baxter
	1.80	1,000 ml	Baxter
Inf 0.45% with glucose 2.5% .....	4.95	500 ml	Baxter
Inf 0.45% with glucose 5% .....	9.87	500 ml	Baxter
	5.80	1,000 ml	Baxter
Inf 0.9%, with glucose 5% .....	4.54	1,000 ml	Baxter
<b>SODIUM CITRATE WITH SODIUM LAURYL SULPHOACETATE</b>			
Enema 90 mg with sodium lauryl sulphoacetate 9 mg per ml, 5 ml – <b>1% DV Oct-10 to 2013</b> .....	25.00	50	<b>Micolette</b>
<b>SODIUM CITRO-TARTRATE</b>			
Gran eff 4 g sachets .....	2.75	28	Ural
<b>SODIUM DIOTRIZOATE</b>			
Powder for oral soln 3.705 g, 10 ml sachet .....	156.12	50	Ioscan
<b>SODIUM FLUORESCEIN</b>			
Inj 100 mg per ml, 5 ml – <b>1% DV Nov-10 to 2013</b> .....	125.00	12	<b>Fluorescite</b>

Products with Hospital Supply Status (HSS) are in **bold**  
 Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>SODIUM HYALURONATE</b>			
Ophthalmic inj 14 mg per ml – 1% DV Oct-09 to 2012 .....	50.00	1	<b>Healon GV</b>
Ophthalmic solution 10 mg per ml, 0.85 ml – 1% DV Oct-09 to 2012 .....	35.00	1	<b>Healon</b>
Inj 10 ml per ml, 0.35 ml; and inj 30 mg per ml with chondroitin sulphate 40 mg per ml, 0.4 ml .....	64.00	1	Duovisc
Inj 10 ml per ml, 0.5 ml; and inj 30 mg per ml with chondroitin sulphate 40 mg per ml, 0.55 ml – 1% DV Sep-11 to 2014 .....	74.00	1	<b>Duovisc</b>
<b>SOFT WHITE PARAFFIN WITH PARAFFIN LIQUID</b>			
Oint 50% with 50% paraffin liquid, 100 g .....	62.00	20	healthE
<b>SOLIFENACIN SUCCINATE</b>			
Tab 5 mg .....	56.50	30	Vesicare
Tab 10 mg .....	56.50	30	Vesicare
<b>SORBOLENE WITH GLYCERIN</b>			
Crn with 10% glycerine, 100 g .....	2.10	1	Pharmacy Health
	2.00		Pharmacy Health
	64.00	20	healthE
Crn with 10% glycerine, 500 ml .....	4.50	1	Pharmacy Health
	87.60	12	healthE
Crn with 10% glycerine, 1,000 ml .....	6.50	1	Pharmacy Health
<b>SOTALOL</b>			
Tab 80 mg – 1% DV Sep-09 to 2012 .....	27.50	500	<b>Mylan</b>
Tab 160 mg – 1% DV Sep-09 to 2012 .....	10.50	100	<b>Mylan</b>
Inj 10 mg per ml, 4 ml .....	65.39	5	Sotacor
<b>SPACER DEVICE</b>			
800 ml .....	8.50	1	Volumatic
230 ml (single patient) .....	4.72	1	Space Chamber Plus
<b>SPIRONOLACTONE</b>			
Tab 25 mg – 1% DV Sep-10 to 2013 .....	4.60	100	<b>Spirotone</b>
Tab 100 mg – 1% DV Sep-10 to 2013 .....	15.15	100	<b>Spirotone</b>
Oral liq 5 mg per ml .....	30.00	25 ml	Biomed
<b>STANDARD SUPPLEMENT ORAL FEED 1.0KCAL/ML</b>			
Powder (chocolate) .....	9.50	900 g	Ensure
	10.22		Sustagen Hospital Formula
Powder (vanilla) .....	9.50	900 g	Ensure
	10.22		Sustagen Hospital Formula
<b>STANDARD SUPPLEMENT ORAL FEED 1.4KCAL/ML</b>			
Liquid (chocolate) .....	4.00	237 ml	Impact Advanced Recovery
Liquid (vanilla) .....	4.00	237 ml	Impact Advanced Recovery
<b>STREPTOKINASE</b>			
Inj 250,000 IU .....	117.70	1	Streptase
Inj 1,500,000 IU .....	188.10	1	Streptase

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>SULPHASALAZINE</b>			
Tab 500 mg .....	11.68	100	Salazopyrin
Tab EC 500 mg .....	12.89	100	Salazopyrin EN
<b>SUMATRIPTAN</b>			
Tab 50 mg – 1% DV Apr-10 to 2013 .....	38.83	100	<b>Arrow-Sumatriptan</b>
Tab 100 mg – 1% DV Apr-10 to 2013 .....	77.66	100	<b>Arrow-Sumatriptan</b>
Inj 12 mg per ml, 0.5 ml – 1% DV Jun-11 to 2013 .....	36.00	2	<b>Arrow-Sumatriptan</b>
<b>SUNITINIB</b>			
Cap 12.5 mg .....	2,315.38	28	Sutent
Cap 25 mg .....	4,630.77	28	Sutent
Cap 50 mg .....	9,261.54	28	Sutent
<b>SUNSCREENS, PROPRIETARY</b>			
Lotn .....	2.55	100 g	Marine Blue Lotion SPF 30+
	5.10	200 g	Marine Blue Lotion SPF 30+
<b>SUXAMETHONIUM CHLORIDE</b>			
Inj 50 mg per ml, 2 ml .....	130.00	50	AstraZeneca
<b>SYRUP (PHARMACEUTICAL GRADE)</b>			
Liq .....	21.75	2,000 ml	Midwest
<b>TACROLIMUS</b>			
Cap 0.5 mg .....	214.00	100	Prograf
Cap 1 mg .....	428.00	100	Prograf
Cap 5 mg .....	1,070.00	50	Prograf
<b>TAMOXIFEN CITRATE</b>			
Tab 10 mg .....	10.80	100	Genox
Tab 20 mg – 1% DV Jun-11 to 2014 .....	8.75	100	<b>Genox</b>
<b>TAMSULOSIN HYDROCHLORIDE</b>			
Cap 400 µg – 1% DV Oct-10 to 2013 .....	5.98	30	<b>Tamsulosin-Rex</b>
<b>TAR WITH TRIETHANOLAMINE LAURYL SULPHATE AND FLUORESCEIN</b>			
Soln 2.3% with triethanolamine lauryl sulphate and fluorescein sodium – 1% DV Nov-11 to 2014 .....	3.05	500 ml	<b>Pinetarsol</b>
	5.82	1,000 ml	<b>Pinetarsol</b>
<b>TEMAZEPAM</b>			
Tab 10 mg – 1% DV Nov-11 to 2014 .....	1.27	25	<b>Normison</b>
<b>TEMOZOLOMIDE</b>			
Cap 5 mg – 1% DV Mar-12 to 2014 .....	16.00	5	<b>Temaccord</b>
Cap 20 mg – 1% DV Mar-12 to 2014 .....	72.00	5	<b>Temaccord</b>
Cap 100 mg – 1% DV Mar-12 to 2014 .....	350.00	5	<b>Temaccord</b>
Cap 250 mg – 1% DV Mar-12 to 2014 .....	820.00	5	<b>Temaccord</b>
<b>TENOFOVIR DISOPROXIL FUMARATE</b>			
Tab 300 mg .....	531.00	30	Viread
<b>TENOXICAM</b>			
Inj 20 mg – 1% DV Jul-10 to 2013 .....	9.95	1	<b>AFT</b>
<b>TERBINAFINE</b>			
Tab 250 mg – 1% DV Nov-11 to 2014 .....	1.78	14	<b>Dr Reddy's Terbinafine</b>

Products with Hospital Supply Status (HSS) are in **bold**  
Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
TERIPARATIDE			
Inj 250 µg per ml, 2.4 ml .....	490.00	1	Forteo
TERLIPRESSIN			
Inj 1 mg .....	450.00	5	Glypressin
TESTOSTERONE			
Transdermal patch, 2.5 mg per day .....	80.00	60	Androderm
TESTOSTERONE CYPIONATE			
Inj long-acting 100 mg per ml, 10 ml – <b>1% DV Feb-12 to 2014</b> .....	76.50	1	<b>Depo-Testosterone</b>
TESTOSTERONE UNDECANOATE			
Cap 40 mg – <b>1% DV Jul-10 to 2012</b> .....	79.92	100	<b>Arrow-Testosterone</b>
TETRACOSACTRIN			
Inj 1 mg per ml, 1 ml – <b>1% DV Sep-11 to 2014</b> .....	29.56	1	<b>Synacthen Depot</b>
Inj 250 µg – <b>1% DV Sep-11 to 2014</b> .....	177.18	10	<b>Synacthen</b>
THALIDOMIDE			
Cap 50 mg .....	504.00	28	Thalomid
Cap 100 mg .....	1,008.00	28	Thalomid
TIAPROFENIC ACID			
Tab 300 mg .....	19.26	60	Surgam
TIMOLOL MALEATE			
Eye drops 0.25%, gel forming .....	3.30	2.5 ml	Timoptol XE
Eye drops 0.5%, gel forming .....	3.78	2.5 ml	Timoptol XE
TIOTROPIUM BROMIDE			
Powder for inhalation 18 µg per dose .....	70.00	30 dose	Spiriva
TIROFIBAN HYDROCHLORIDE			
Inj 0.25 mg per ml, 50 ml .....	370.00	1	Aggrastat
TOBRAMYCIN			
Eye oint 0.3% – <b>1% DV Sep-11 to 2014</b> .....	10.45	3.5 g	<b>Tobrex</b>
Eye drops 0.3% – <b>1% DV Sep-11 to 2014</b> .....	11.48	5 ml	<b>Tobrex</b>
Inj 40 mg per ml, 2 ml – <b>1% DV Sep-11 to 2014</b> .....	29.32	5	<b>DBL Tobramycin</b>
TOLCAPONE			
Tab 100 mg – <b>1% DV Sep-11 to 2014</b> .....	126.20	100	<b>Tasmar</b>
TOPIRAMATE			
Tab 25 mg .....	11.07	60	Arrow-Topiramate
	26.04		Topamax
Tab 50 mg .....	18.81	60	Arrow-Topiramate
	44.26		Topamax
Tab 100 mg .....	31.99	60	Arrow-Topiramate
	75.25		Topamax
Tab 200 mg .....	55.19	60	Arrow-Topiramate
	129.85		Topamax
Sprinkle cap 15 mg .....	20.84	60	Topamax
Sprinkle cap 25 mg .....	26.04	60	Topamax

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>TRAMADOL HYDROCHLORIDE</b>			
Tab sustained release 100mg .....	5.60	20	Tramal Retard
Tab sustained release 150 mg .....	8.40	20	Tramal Retard
Tab sustained release 200 mg .....	11.20	20	Tramal Retard
Cap 50 mg – 1% DV <b>Sep-11 to 2014</b> .....	4.95	100	<b>Arrow-Tramadol</b>
Inj 50 mg per ml, 1 ml .....	4.50	5	Tramal 50
Inj 50 mg per ml, 2 ml .....	4.50	5	Tramal 100
<b>TRANEXAMIC ACID</b>			
Tab 500 mg – 1% DV <b>Jun-10 to 2013</b> .....	32.92	100	<b>Cyklokapron</b>
Inj 100 mg per ml, 5 ml – 1% DV <b>Sep-09 to 2012</b> .....	124.73	10	<b>Cyklokapron</b>
<b>TRASTUZUMAB</b>			
Inj 150 mg vial .....	1,350.00	1	Herceptin
Inj 440 mg vial .....	3,875.00	1	Herceptin
<b>TRETINOIN</b>			
Cap 10 mg .....	435.90	100	Vesanoïd
<b>TRIAMCINOLONE ACETONIDE</b>			
0.1% in dental paste USP – 1% DV <b>Sep-11 to 2014</b> .....	4.34	5 g	<b>Oracort</b>
Crn 0.02% – 1% DV <b>Sep-11 to 2014</b> .....	6.63	100 g	<b>Aristocort</b>
Oint 0.02% – 1% DV <b>Sep-11 to 2014</b> .....	6.69	100 g	<b>Aristocort</b>
Inj 10 mg per ml, 1 ml .....	23.00	5	Kenacort-A
Inj 40 mg per ml, 1 ml .....	56.48	5	Kenacort-A40
<b>TRIAMCINOLONE ACETONIDE WITH GRAMICIDIN, NEOMYCIN AND NYSTATIN</b>			
Ear drops 1 mg with nystatin 100,000 u, neomycin sulphate 2.5 mg and gramicidin 250 µg per g .....	5.16	7.5 ml	Kenacomb
<b>TRIAMTERENE WITH HYDROCHLOROTHIAZIDE</b>			
Tab 50 mg with hydrochlorothiazide 25 mg .....	5.00	100	Triamizide
<b>TRICLOSAN</b>			
Soln 1% .....	4.50	500 ml	Pharmacy Health
<b>TRIMETHOPRIM</b>			
Tab 300 mg .....	8.94	50	TMP
<b>TROPICAMIDE</b>			
Eye drops 0.5% – 1% DV <b>Sep-11 to 2014</b> .....	7.15	15 ml	<b>Mydriacyl</b>
Eye drops 1% – 1% DV <b>Sep-11 to 2014</b> .....	8.66	15 ml	<b>Mydriacyl</b>
<b>TROPISETRON</b>			
Cap 5 mg – 1% DV <b>Mar-10 to 2012</b> .....	77.41	5	<b>Navoban</b>
Inj 1 mg per ml, 2 ml .....	19.20	1	Navoban
Inj 1 mg per ml, 5 ml .....	38.40	1	Navoban
<b>URSODEOXYCHOLIC ACID</b>			
Cap 250 mg .....	71.50	100	Ursosan
Cap 300 mg .....	179.00	100	Actigall
<b>VALACICLOVIR</b>			
Tab 500 mg .....	102.72	30	Valtrex
<b>VANCOMYCIN HYDROCHLORIDE</b>			
Inj 500 mg – 1% DV <b>Sep-11 to 2014</b> .....	3.58	1	<b>Mylan</b>

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

## Pharmaceuticals Under National Contracts

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>VARENICLINE TARTRATE</b>			
Tab 0.5 mg × 11 and 1 mg × 14 .....	60.48	25	Champix
Tab 1 mg .....	67.74	28	Champix
	135.48	56	Champix
<b>VENLAFAXINE</b>			
Cap 37.5 mg .....	18.64	28	Efexor XR
Tab 37.5 mg .....	18.64	28	Arrow-Venlafaxine XR
Cap 75 mg .....	37.27	28	Efexor XR
Tab 75 mg .....	37.27	28	Arrow-Venlafaxine XR
Cap 150 mg .....	45.68	28	Efexor XR
Tab 150 mg .....	45.68	28	Arrow-Venlafaxine XR
<b>VERAPAMIL HYDROCHLORIDE</b>			
Tab long-acting 120mg .....	15.20	250	Verpamil SR
Tab 40 mg – 1% DV Sep-11 to 2014 .....	7.01	100	<b>Isoptin</b>
Tab 80 mg – 1% DV Sep-11 to 2014 .....	11.74	100	<b>Isoptin</b>
Tab long-acting 240 mg .....	25.00	250	Verpamil SR
Inj 2.5 mg per ml, 2 ml .....	7.54	5	Isoptin
<b>VINBLASTINE SULPHATE</b>			
Inj 10 mg .....	137.50	5	Mayne
<b>VINCRIStINE SULPHATE</b>			
Inj 1 mg per ml, 1 ml – 1% DV Aug-10 to 2013 .....	108.00	5	<b>Hospira</b>
Inj 1 mg per ml, 2 ml – 1% DV Aug-10 to 2013 .....	116.00	5	<b>Hospira</b>
<b>VINOReLBINE</b>			
Inj 10 mg per ml, 1 ml – 1% DV Sep-09 to 2012 .....	24.00	1	<b>Navelbine</b>
Inj 10 mg per ml, 5 ml – 1% DV Sep-09 to 2012 .....	120.00	1	<b>Navelbine</b>
<b>WATER</b>			
Inf .....	4.50	1,000 ml	Baxter
Soln for irrigation .....	2.68	100 ml	Baxter
	2.61	500 ml	Baxter
	2.75	1,000 ml	Baxter
	9.71	2,000 ml	Baxter
	15.80	3,000 ml	Baxter
Purified for inj 5 ml .....	9.20	50	Multichem
Purified for inj 10 ml .....	10.20	50	Multichem
Purified for inj 20 ml .....	5.00	20	Multichem
<b>WATER WITH SODIUM, POTASSIUM, CALCIUM AND CHLORIDE</b>			
Inf 147 mmol/L sodium, 4 mmol/L potassium, 2.2 mmol/L calcium and 156 mmol/L chloride .....	5.13	1,000 ml	Baxter
<b>WATER WITH SODIUM, POTASSIUM, CALCIUM, BICARBONATE AND CHLORIDE</b>			
Inf 131 mmol/L sodium, 5 mmol/L potassium, 2 mmol/L calcium, 29 mmol/L bicarbonate and 111 mmol/L chloride .....	1.77	500 ml	Baxter
	1.80	1,000 ml	Baxter
<b>WATER WITH SODIUM, POTASSIUM, CALCIUM, BICARBONATE, CHLORIDE AND GLUCOSE</b>			
Inf 131 mmol/L sodium, 5 mmol/L potassium, 2 mmol/L calcium, 29 mmol/L bicarbonate, 111 mmol/L chloride and glucose 5% .....	5.38	1,000 ml	Baxter

Products with Hospital Supply Status (HSS) are in **bold**

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.

	Price (ex man. excl. GST) \$	Per	Brand or Generic Manufacturer
<b>WATER WITH SODIUM, POTASSIUM, MAGNESIUM, CHLORIDE, ACETATE AND GLUCONATE</b>			
Inf 140 mmol/L sodium, 5 mmol/L potassium, 1.5 mmol/L magnesium, 98 mmol/L chloride, 27 mmol/L acetate and 23 mmol/L gluconate .....	5.00	500 ml	Baxter
	3.10	1,000 ml	Baxter
<b>ZIDOVUDINE (AZT)</b>			
Cap 100 mg – <b>1% DV Jun-10 to 2013</b> .....	145.00	100	<b>Retrovir</b>
Oral liq 10 mg per ml – <b>1% DV Jun-10 to 2013</b> .....	29.00	200 ml	<b>Retrovir</b>
<b>ZINC AND CASTOR OIL</b>			
Ointment – <b>1% DV Apr-12 to 2014</b> .....	1.63	20 g	<b>Orion</b>
<b>ZINC SULPHATE</b>			
Cap 137.4 mg (50 mg elemental) – <b>1% DV Nov-11 to 2014</b> .....	11.00	100	<b>Zincaps</b>
<b>ZIPRASIDONE</b>			
Cap 20 mg .....	87.88	60	Zeldox
Cap 40 mg .....	164.78	60	Zeldox
Cap 60 mg .....	247.17	60	Zeldox
Cap 80 mg .....	329.56	60	Zeldox
<b>ZOLEDRONIC ACID</b>			
Soln for infusion 5 mg in 100 ml .....	600.00	100 ml	Aclasta
Soln for Inf 4 mg, 5 ml .....	550.00	1	Zometa
<b>ZOPICLONE</b>			
Tab 7.5 mg – <b>1% DV Jan-12 to 2014</b> .....	1.90	30	<b>Apo-Zopiclone</b>
<b>ZUCLOPENTHIXOL DECANOATE</b>			
Depot inj 200 mg per ml, 1 ml .....	19.80	5	Clopixol
<b>ZUCLOPENTHIXOL HYDROCHLORIDE</b>			
Tab 10 mg .....	31.45	100	Clopixol

## Part III: Discretionary Community Supply Pharmaceuticals

### ALBENDAZOLE

Tab 200 mg

Albenza  
Zentel

Indefinite supply to cover treatment of hydatid disease, strongyloidiasis, toxocariasis, ancylostomiasis, neurocysticercosis and schistosomiasis (where first line treatment has failed) until EC funding is approved (Section 29)

### AMIKACIN SULPHATE

Inj 250 mg per ml, 2 ml

For any indication approved by the hospital service, with review at 6 weeks

### AMOXYCILLIN CLAVULANATE

Inj 600 mg

Inj 1.2 g

For any indication approved by the hospital service, with review at 6 weeks

### AMPHOTERICIN B

Inj 50 mg

Oral liq 100 mg per ml (non-liposomal only)

Up to 6 weeks supply for any appropriate indication

### AZTREONAM

Inj 1 g

For any indication approved by the hospital service, with review at 6 weeks.

### BACLOFEN

Inj 10 mg

Lioresal  
Intrathecal

Indefinite supply for patients with severe chronic spasticity of cerebral origin or due to multiple sclerosis, spinal cord injury or spinal cord disease, where oral antispastic agents have failed or have caused unacceptable side effects.

### BENZATHINE PENICILLIN

Inj 1.2 mega u per 2 ml

For prophylaxis of endocarditis

### BENZYL PENICILLIN SODIUM (PENICILLIN G)

Inj 1 mega u

For any indication approved by the hospital service, with review at 8 weeks.

### CEFAMANDOLE NAFATE

Inj 500 mg

Inj 1 g

For any indication approved by the hospital service, with review at 8 weeks.

### CEFAZOLIN SODIUM

Inj 500 mg

Inj 1 g

For any indication approved by the hospital service, with review at 8 weeks.

### CEFEPIME HYDROCHLORIDE

Inj 1 g, 15 ml

Inj 2 g, 77 ml

For any indication approved by the hospital service, with review at 6 weeks.

### CEFOTAXIME SODIUM

Inj 500 mg

Inj 1 g

For any indication approved by the hospital service, with review at 6 weeks.

### CEFOXITIN SODIUM

Powder for injection 1 g

For any indication approved by the hospital service, with review at 6 weeks.

### CEFTAZIDIME

Inj 500 mg

Inj 1 g

Inj 2 g

For any indication approved by the hospital service, with review at 6 weeks.

### CEFTRIAOXONE SODIUM

Inj 1 g

For any indication approved by the hospital service, with review at 6 weeks.

### CEFUROXIME AXETIL

Tab 250 mg

Oral liq 125 mg per 5 ml

Up to 2 weeks supply for any appropriate indication

### CEFUROXIME SODIUM

Inj 250 mg

Inj 750 mg

Inj 1.5 g

For any indication approved by the hospital service, with review at 6 weeks.

### CHLORHEXIDINE

Eye drops 0.02%

For a period of 3 months for treatment of acanthamoeba keratitis.

### CIPROFLOXACIN

Oral liq 5%

Oral liq 10%

Up to 6 weeks supply for any appropriate indication

## CLOPIDOGREL

Tab 75 mg

Up to 4 weeks supply post stenting. Not to be funded for acute coronary syndrome or transient ischaemic attacks

## DALTEPARIN SODIUM

Inj 2,500 IU per 0.2 ml	Fragmin
Inj 5,000 IU per 0.2 ml	Fragmin
Inj 7,500 IU per 0.75 ml	Fragmin
Inj 10,000 IU per 0.4 ml	Fragmin
Inj 10,000 IU per 1 ml	Fragmin
Inj 12,500 IU per 0.5 ml	Fragmin
Inj 15,000 IU per 0.6 ml	Fragmin
Inj 18,000 IU per 0.72 ml	Fragmin

For the treatment of venous thromboembolism (VTE) for a maximum of 14 days or until a stabilised therapeutic INR is established.

For a maximum treatment period from the time of diagnosis to 8 weeks post partum for a confirmed thromboembolic event during pregnancy.

For prophylaxis of thromboembolism for patients considered high risk after consultation with a specialist from diagnosis of pregnancy to 8 weeks post partum.

For a maximum treatment period from diagnosis of pregnancy to 8 weeks post partum for women normally maintained on long-term oral anticoagulation who are at very high risk of thromboembolism.

For the treatment for a maximum of 7 days pre and post operatively for patients on oral anticoagulants requiring surgical intervention in a public hospital or until an appropriate therapeutic INR level is reached.

For a maximum of 14 days treatment in high-risk patients post pelvic, colo-rectal and major orthopaedic surgery.

For a maximum of 7 days treatment for patients with an acute coronary syndrome (ACS) awaiting further hospital intervention.

For a maximum of 14 days treatment post cardioversion in non anticoagulated patients with atrial fibrillation or until appropriate therapeutic INR level is reached.

For treatment of malignancy - associated venous thromboembolism.

## DEMECLOCYCLINE

Cap 150 mg Ledermycin

Indefinite supply for SIADH (syndrome of inappropriate anti diuretic hormone) (Section 29)

## DEXTROSE

Inj 5%, 10 ml

Where required for antibiotic treatment funded under DCS or HEC

## ENOXAPARIN SODIUM

Inj 20 mg per 0.2 ml	Clexane
Inj 40 mg per 0.4 ml	Clexane
Inj 60 mg per 0.6 ml	Clexane
Inj 80 mg per 0.8 ml	Clexane
Inj 100 mg per ml	Clexane
Inj 120 mg per 0.8 ml	Clexane
Inj 150 mg per ml	Clexane

For the treatment of venous thromboembolism (VTE) for a maximum of 14 days or until a stabilised therapeutic INR is established.

For a maximum treatment period from the time of diagnosis to 8 weeks post partum for a confirmed thromboembolic event during pregnancy.

For prophylaxis of thromboembolism for patients considered high risk after consultation with a specialist from diagnosis of pregnancy to 8 weeks post partum.

For a maximum treatment period from diagnosis of pregnancy to 8 weeks post partum for women normally maintained on long-term oral anticoagulation who are at very high risk of thromboembolism.

For the treatment for a maximum of 7 days pre and post operatively for patients on oral anticoagulants requiring surgical intervention in a public hospital or until an appropriate therapeutic INR level is reached.

For a maximum of 14 days treatment in high-risk patients post pelvic, colo-rectal and major orthopaedic surgery.

For a maximum of 7 days treatment for patients with an acute coronary syndrome (ACS) awaiting further hospital intervention.

For a maximum of 14 days treatment post cardioversion in non anticoagulated patients with atrial fibrillation or until appropriate therapeutic INR level is reached.

For treatment of malignancy - associated venous thromboembolism.

## ERTAPENEM SODIUM

Inj 1 g

For any indication approved by the hospital service, with review at 6 weeks.

## FILGRASTIM

Inj 300 µg per 0.5 ml prefilled syringe	Neupogen
Inj 300 µg per 1 ml vial	Neupogen
Inj 480 µg per 0.5 ml prefilled syringe	Neupogen

Indefinite supply for any appropriate indication for the management of patients with cancer.

### FLUCLOXACILLIN SODIUM

Inj 250 mg  
Inj 500 mg  
Inj 1 g

For any indication approved by the hospital service, with review at 8 weeks.

### FLUCONAZOLE

Inj 100 mg per 50 ml

For any indication approved by the hospital service, with review at 6 weeks.

### FORTIFIED EYE DROPS

Up to 4 weeks supply of proprietary eyedrops fortified with any appropriate anti-infective agent for the treatment of severe corneal or eye surface infections

### FOSCARNET

Inj 24 mg per ml IV soln

Indefinite supply for any appropriate indication

### GANCICLOVIR

Inj 500 mg Cymevene

For prophylaxis and treatment of CMV-associated disease in immunocompromised patients and following organ transplant.

### GENTAMICIN SULPHATE

Inj 40 mg per ml, 2 ml

Indefinite supply for any indication approved by the hospital service.

### HEPARINISED SALINE

Inj 10 iu per ml, 5 ml  
Inj 100 iu per ml, 5 ml

For the maintenance of IV lines

### HYDRALAZINE

Tab 25 mg **S29**

For patients with congestive heart failure:

- 1) who have not responded to treatment with ACE inhibitors and/or ARBs; or
- 2) in whom treatment with ACE inhibitors and/or ARBs is not tolerated due to renal impairment

### HYOSCINE (SCOPOLAMINE)

Patches 1.5 mg Scopoderm  
TTS

Up to 6 months supply for symptom control in terminally ill patients

### IMIPENEM WITH CILASTATIN

Inj 500 mg with cilastin 500 mg

For any indication approved by the hospital service, with review at 6 weeks.

### INDOMETHACIN

Cap 25 mg **S29**  
Cap 50 mg **S29**  
Cap long-acting 75 mg **S29**

For any indication approved by the hospital service

### ITRACONAZOLE

Oral liq 10 mg per ml

Up to 3 months supply for use in liver transplant patients

### IVERMECTIN

Tab 6 mg

Indefinite supply for the treatment of filaricides, cutaneous larva migrans (creeping eruption) and Strongyloidiasis (Section 29)

### LENOGRASTIM

Inj 13.4 million iu vial Granocyte  
Inj 33.6 million iu vial Granocyte

Indefinite supply for any appropriate indication for the management of patients with cancer.

### L-ORNITHINE L-ASPARTATE (LOLA) **S29**

Sach 5 mg

For patients with chronic hepatic encephalopathy who have not responded to treatment with lactulose

### MEROPENEM

Inj 500 mg  
Inj 1 g

For any indication approved by the hospital service, with review at 6 weeks.

### METHOXSALEN

Cap 10 mg Oxsofalen  
Tab 10 mg Methoxypsaralen

Indefinite supply for PUVA – psoralen plus ultraviolet a (UVA) therapy for severe, disabling psoriasis prephototherapy.

### METOLAZONE **S29**

Tab 5 mg

For patients with congestive heart failure:

- 1) who have not responded to treatment with ACE inhibitors and/or ARBs; or
- 2) in whom treatment with ACE inhibitors and/or ARBs is not tolerated due to renal impairment



### TEICoplanin

Inj 400 mg

For any indication approved by the hospital service, with review at 6 weeks.

### TICARcillin DISodium WITH CLAVULANIC ACID

Inj 3 g with clavulanic acid 0.1 g

For any indication approved by the hospital service, with review at 6 weeks.

### TINZAPARIN SODIUM

Inj 3,500 anti-Xa IU/0.35 ml Innohep

Inj 4,500 anti-Xa IU/0.45 ml Innohep

Inj 10,000 anti-Xa IU/0.5 ml Innohep

Inj 14,000 anti-Xa IU/0.7 ml Innohep

Inj 18,000 anti-Xa IU/0.9 ml Innohep

Inj 20,000 anti-Xa IU/ml, 2 ml Innohep

For the treatment of venous thromboembolism (VTE) for a maximum of 14 days or until a stabilised therapeutic INR is established.

For a maximum treatment period from the time of diagnosis to 8 weeks post partum for a confirmed thromboembolic event during pregnancy.

For prophylaxis of thromboembolism for patients considered high risk after consultation with a specialist from diagnosis of pregnancy to 8 weeks post partum.

For a maximum treatment period from diagnosis of pregnancy to 8 weeks post partum for women normally maintained on long-term oral anticoagulation who are at very high risk of thromboembolism.

For the treatment for a maximum of 7 days pre and post operatively for patients on oral anticoagulants requiring surgical intervention in a public hospital or until an appropriate therapeutic INR level is reached.

For a maximum of 14 days treatment in high-risk patients

post pelvic, colo-rectal and major orthopaedic surgery.

For a maximum of 7 days treatment for patients with an acute coronary syndrome (ACS) awaiting further hospital intervention.

For a maximum of 14 days treatment post cardioversion in non anticoagulated patients with atrial fibrillation or until appropriate therapeutic INR level is reached.

For treatment of malignancy - associated venous thromboembolism.

### TOBRAMYCIN

Inj 40 mg per ml, 2 ml

Indefinite supply for any indication approved by the hospital service.

### TRIMETHOPRIM

Tab 100 mg

Indefinite supply for any appropriate indication (Section 29)

### VALGANCICLOVIR

Tab 450 mg

Up to 14 weeks supply for cytomegalovirus (CMV) retinitis in immunocompromised patients and prophylaxis of CMV following solid organ transplant

### VANCOMYCIN HYDROCHLORIDE

Inj 500 mg

For any indication approved by the hospital service, with review at 6 weeks.

### WATER

Purified for inj

Where required for injection of antibiotic treatment funded under DCS or HEC

- A -

A-Scabies .....	52	Amino acid formula .....	17	Arrow-Bendrofluazide .....	20
Abacavir sulphate .....	16	Aminophylline .....	17	Arrow-Calcium .....	22
Abacavir sulphate with lamivudine .....	16	Amirol .....	17	Arrow-Citalopram .....	25
Abciximab .....	16	Amisulpride .....	17	Arrow-Diazepam .....	28
Abilify .....	18	Amitrip .....	17	Arrow-Enalapril .....	30
Acarbose .....	16	Amitriptyline .....	17	Arrow-Etidronate .....	32
Accu-Chek Performa .....	20	Amlodipine .....	17	Arrow-Lamotrigine .....	41
Accupril .....	55	Amoxycillin .....	17	Arrow-Lisinopril .....	43
Accuretic 10 .....	55	Amoxycillin clavulanate		Arrow-Losartan & Hydrochlorothiazide .....	43
Accuretic 20 .....	55	Contracted .....	18	Arrow-Morphine LA .....	47
Acetadote .....	16	DCS .....	66	Arrow-Nifedipine XR .....	48
Acetazolamide .....	16	Amphotericin B		Arrow-Norfloxacin .....	49
Acetylcysteine .....	16	Contracted .....	18	Arrow-Ornidazole .....	50
Aciclovir .....	16	DCS .....	66	Arrow-Ranitidine .....	56
Acidex .....	59	Anastrozole .....	18	Arrow-Rocuronium .....	57
Acitretin .....	16	Androderm .....	62	Arrow-Roxithromycin .....	58
Aclasta .....	65	Anexate .....	33	Arrow-Sertraline .....	58
Actigall .....	63	Antabuse .....	29	Arrow-Simva .....	58
Activated charcoal .....	16	Antinaus .....	54	Arrow-Sumatriptan .....	61
Adalimumab .....	16	Antithymocyte globulin (equine) .....	18	Arrow-Testosterone .....	62
Adefin XL .....	48	Anzatax .....	51	Arrow-Topiramate .....	62
Adefovir dipivoxil .....	16	Apidra .....	38	Arrow-Tramadol .....	63
Adrenaline .....	16	Apidra Solostar .....	38	Arrow-Venlafaxine XR .....	64
Adriamycin .....	29	Apo-Allopurinol .....	17	Arsenic trioxide .....	18
Advantan .....	45	Apo-Amlodipine .....	17	Asacol .....	44
Advate .....	56	Apo-Clarithromycin .....	25	Asamax .....	44
Aerrane .....	40	Apo-Clodogrel .....	25	Ascorbic acid .....	18
AFT-Leflunomide .....	41	Apo-Doxazosin .....	29	Aspen Adrenaline .....	16
Aggrastat .....	62	Apo-Gliclazide .....	35	Aspen Ceftriaxone .....	23
Alanase .....	19	Apo-Megestrol .....	44	Aspen Ciprofloxacin .....	25
Albendazole .....	66	Apo-Moclobemide .....	47	Asthalin .....	58
Albenza .....	66	Apo-Nadolol .....	48	Atacand .....	22
Aldara .....	38	Apo-Oxybutynin .....	50	Atazanavir sulphate .....	18
Alendronate sodium .....	16	Apo-Pindolol .....	53	Atenolol .....	18
Alendronate sodium with cholecalciferol .....	16	Apo-Prazo .....	54	Atenolol Tablet USP .....	18
Alfacalcidol .....	16	Apo-Prednisone .....	54	ATGAM .....	18
Alitraq .....	30	Apo-Pyridoxine .....	55	Ativan .....	43
Allersoothe .....	54	Apo-Risperidone .....	57	Atomoxetine hydrochloride .....	19
Allopurinol .....	17	Apo-Zopiclone .....	65	Atorvastatin .....	19
Alphamox .....	17	Apomine .....	18	Atracurium besylate .....	19
Alprostadiil .....	17	Apomorphine hydrochloride .....	18	Atropine sulphate .....	19
Amantadine hydrochloride .....	17	Aprepitant .....	18	Atropt .....	19
AmBisome .....	18	Apresoline .....	36	Avanza .....	46
Ambrisentan .....	17	Aqueous cream .....	18	Avelox .....	47
Amikacin sulphate		Arava .....	41	Avelox IV 400 .....	47
Contracted .....	17	Aremed .....	18	Azactam .....	19
DCS .....	66	Aripiprazole .....	18	Azathioprine .....	19
Amiloride .....	17	Aristocort .....	63	Azithromycin .....	19
		Aromasin .....	32	Azol .....	27
		Arrow-Azithromycin .....	19	Aztreonam .....	

**INDEX****Generic Chemicals and Brands**

Contracted .....	19	Botox .....	26	Catapres-TTS-2 .....	25
DCS .....	66	Breath-Alert .....	52	Catapres-TTS-3 .....	25
<b>- B -</b>					
B-D Micro-Fine .....	39	Brimonidine tartrate .....	21	Ceenu .....	43
B-D Ultra Fine .....	39	Brufen SR .....	38	Cefaclor monohydrate .....	23
B-D Ultra Fine II .....	39	Budenocort .....	21	Cefaclor Sandoz .....	23
Bacillus calmette-guerin (BCG) vaccine .....	19	Budesonide .....	21	Cefalexin Sandoz .....	24
Baclofen Contracted .....	19	Bumetanide .....	21	Cefamandole nafate .....	66
DCS .....	66	Bupafen .....	21	Cefazolin sodium Contracted .....	23
Baralude .....	30	Bupivacaine hydrochloride .....	21	DCS .....	66
Barium sulphate .....	19	Bupivacaine hydrochloride with adrenaline .....	21	Cefepime hydrochloride Contracted .....	23
Basiliximab .....	19	Bupivacaine hydrochloride with fentanyl .....	21	DCS .....	66
Beclazone 100 .....	19	Bupropion hydrochloride .....	21	Cefotaxime .....	23
Beclazone 250 .....	19	Burinex .....	21	Cefotaxime Sandoz .....	23
Beclazone 50 .....	19	Buscopan .....	37	Cefotaxime sodium .....	66
Beclomethasone dipropionate .....	19	Buspiron hydrochloride .....	21	Cefoxitin sodium Contracted .....	23
Bendrofluazide .....	20	Busulphan .....	21	DCS .....	66
BeneFIX .....	56	Butacort Aqueous .....	21	Ceftazidime Contracted .....	23
Benzathine benzylpenicillin .....	20	<b>- C -</b>			
Benzathine penicillin .....	66	Caffeine citrate .....	21	Contracted .....	23
Benztrop .....	20	Cal-d-Forte .....	25	DCS .....	66
Benztropine mesylate .....	20	Calcipotriol .....	22	Ceftriaxone sodium Contracted .....	23
Benzylpenicillin sodium (penicillin G) Contracted .....	20	Calcitonin .....	22	DCS .....	66
DCS .....	66	Calcitriol .....	22	Cefuroxime axetil Contracted .....	23
Beractant .....	20	Calcium carbonate .....	22	DCS .....	66
Beta Scalp .....	20	Calcium folinate .....	22	Cefuroxime sodium Contracted .....	23
Betadine .....	54	Calcium Folate Ebewe .....	22	DCS .....	66
Betadine Skin Prep .....	54	Calcium gluconate .....	22	Cefuroxime sodium Contracted .....	23
Betagan .....	42	Calcium polystyrene sulphonate .....	22	DCS .....	66
Betahistine dihydrochloride .....	20	Calcium Resonium .....	22	Celiprolol .....	24
Betaloc CR .....	46	Calsource .....	22	CellCept .....	48
Betamethasone dipropionate with calcipotriol .....	20	Cancidas .....	23	Celol .....	24
Betamethasone valerate .....	20	Candesartan .....	22	Cephalexin ABM .....	24
Bezafibrate .....	20	Candestar .....	22	Cephalexin monohydrate .....	24
Bezalip Retard .....	20	Capecitabine .....	22	Ceptolate .....	48
Bicalaccord .....	20	Capoten .....	23	Cetirizine - AFT .....	24
Bicalutamide .....	20	Capsaicin .....	22	Cetirizine hydrochloride .....	24
Bicillin LA .....	20	Captopril .....	23	Cetomacrogol .....	24
Biodone .....	44	Carboplatin .....	23	Champix .....	64
Biodone Extra Forte .....	44	Carboplatin Ebewe .....	23	Chlorafast .....	24
Biodone Forte .....	44	Carbosorb-X .....	16	Chloramphenicol .....	24
Bisacodyl .....	20	Cardinol LA .....	55	Chlorhexidine Contracted .....	24
Blood glucose diagnostic test meter .....	20	Cardizem CD .....	29	DCS .....	66
Blood glucose diagnostic test strip .....	20	CareSens .....	20	Chlorhexidine gluconate .....	24
Bortezomib .....	20	CareSens II .....	20	Chlorhexidine in alcohol .....	24
Bosentan .....	21	CareSens POP .....	20	Chlorhexidine with cetrimide .....	24
		Carvedilol .....	23	Chlorothiazide .....	24
		Caspofungin .....	23	Chlorsig .....	24
		Catapres .....	25	Chlorthalidone .....	24
		Catapres-TTS-1 .....	25	Cholecalciferol .....	25

Cholvastin .....	54	CP Plus+ .....	19	Deferiprone .....	28
Cilazapril with hydrochlorothiazide .....	25	Crotamiton .....	26	Demeclocycline .....	67
Cilicaine .....	54	Crystacide .....	37	Depo-Medrol .....	45
Cilicaine VK .....	52	CT Plus+ .....	19	Depo-Medrol with Lidocaine .....	45
Cipflox .....	25	Curam .....	18	Depo-Provera .....	44
Ciprofloxacin .....		Curam Duo .....	18	Depo-Testosterone .....	62
Contracted .....	25	Curosurf .....	53	Deprim .....	26
DCS .....	66	Cyclizine hydrochloride .....	26	Dermol .....	25
Cisplatin .....	25	Cyclizine lactate .....	26	Desferrioxamine mesylate .....	28
Cisplatin Ebewe .....	25	Cycloblastin .....	26	Desflurane .....	28
Citalopram hydrobromide .....	25	Cyclophosphamide .....	26	Desmopressin .....	28
Citanest .....	25	Cyclosporin .....	27	Desmopressin-PH&T .....	28
Cladribine .....	54	Cyklokapron .....	63	Dexamethasone .....	28
Clarithromycin .....	25	Cymevene .....		Dexamethasone sodium	
Clexane .....		Contracted .....	35	phosphate .....	28
Contracted .....	30	DCS .....	68	Dexamphetamine sulphate .....	28
DCS .....	67	Cyproterone acetate .....	27	Dextran 70 with sodium	
Clindamycin .....	25	Cysticide .....	69	chloride .....	28
Clindamycin ABM .....	25	Cytarabine .....	27	Dextrose .....	
Clobetasol propionate .....	25			Contracted .....	28
Clomazol .....	26	<b>- D -</b>		DCS .....	67
Clomiphene citrate .....	25	D-Penamine .....	52	DHC Continus .....	29
Clonazepam .....	25	Dabigatran .....	27	Diabetic enteral feed 1kcal/ml .....	28
Clonidine .....	25	Dacarbazine .....	27	Diabetic oral feed 1kcal/ml .....	28
Clonidine hydrochloride .....	25	Daivobet .....	20	Diamide Relief .....	43
Clopidogrel .....		Daivonex .....	22	Diamox .....	16
Contracted .....	25	Daktarin .....	46	Diazepam .....	28
DCS .....	67	Dalacin C .....	25	Diclat .....	28
Clopine .....	26	Dalteparin sodium .....		Diclofenac sodium .....	28
Clopixol .....	65	Contracted .....	27	Diffucan .....	33
Clostridium botulinum .....	26	DCS .....	67	Dihydrocodeine tartrate .....	29
Clotrimazole .....	26	Danazol .....	27	Dilatrend .....	23
Clozapine .....	26	Dantron with polaxamer .....	27	Diltiazem hydrochloride .....	29
Clozaril .....	26	Dantrium .....	27	Dilzem .....	29
Co-trimoxazole .....	26	Dantrium IV .....	27	Dinoprostone .....	29
Cocaine .....	26	Dantrolene sodium .....	27	Diprivan .....	55
Codeine phosphate .....	26	Dantrolene sodium .....		Dipyridamole .....	29
Cogentin .....	20	hemihydrate .....	27	Disulfiram .....	29
Colaspase (L-asparaginase) .....	26	Dapa-Tabs .....	38	Diurin 40 .....	34
Colchicine .....	26	Darunavir .....	27	Dixarit .....	25
Colgout .....	26	Dasatinib .....	27	DM Ject .....	39
Colifoam .....	37	Daunorubicin .....	28	Docetaxel .....	29
Colistin sulphomethate .....	26	DBL Aminophylline .....	17	Docetaxel Ebewe .....	29
Colistin-Link .....	26	DBL Cefotaxime .....	23	Docusate sodium .....	29
Colofac .....	44	DBL Ceftazidime .....	23	Docusate sodium with	
Coloxyl .....	53	DBL Doxorubicin .....	29	sennosides .....	29
Comtan .....	30	DBL Ergometrine .....	31	Donepezil hydrochloride .....	29
Concerta .....	45	DBL Gemcitabine .....	35	Donepezil-Rex .....	29
Condyline .....	53	DBL Leucovorin Calcium .....	22	Dopamine hydrochloride .....	29
Corangin .....	40	DBL Methotrexate .....	45	Dopress .....	29
Cord oral feed 1.5kcal/ml .....	26	DBL Morphine Sulphate .....	47	Doribax .....	29
Cosopt .....	29	DBL Pethidine Hydrochloride .....	52	Doripenem .....	29
		DBL Tobramycin .....	62	Dorzolamide hydrochloride with	
		De-Worm .....	43		

# INDEX

## Generic Chemicals and Brands

timolol maleate .....	29	Enteral feed with fibre		Contracted .....	32
Dothiepin hydrochloride .....	29	1kcal/ml .....	30	DCS .....	67
Doxazosin mesylate .....	29	Enteral/oral elemental feed		Finasteride .....	32
Doxine .....	30	1kcal/ml .....	30	Flagyl .....	46
Doxorubicin .....	29	Ephedrine sulphate .....	30	Flagyl-S .....	46
Doxorubicin Ebewe .....	29	Epirubicin .....	31	Flamazine .....	58
Doxycycline hydrochloride .....	30	Epirubicin Ebewe .....	31	Flecainide acetate .....	33
DP-Anastrozole .....	18	Epex .....	31	Fleet Phosphate Enema .....	58
Dr Reddy's Atorvastatin .....	19	Eptifibatide .....	31	Flixotide .....	34
Dr Reddy's Omeprazole .....	49	Ergometrine maleate .....	31	Flixotide Accuhaler .....	34
Dr Reddy's Ondansetron .....	50	Erlotinib hydrochloride .....	31	Florinef .....	33
Dr Reddy's Pantoprazole .....	51	Ertapenem sodium		Fluanxol .....	34
Dr Reddy's Quetiapine .....	55	Contracted .....	31	Flucloxacillin sodium	
Dr Reddy's Risperidone .....	57	DCS .....	67	Contracted .....	33
Dr Reddy's Terbinafine .....	61	Erythrocin IV .....	31	DCS .....	68
Dulcolax .....	20	Erythromycin ethyl succinate .....	31	Flucloxin .....	33
Duolin .....	58	Erythromycin lactobionate .....	31	Fluconazole	
Duovisc .....	60	Erythropoietin alpha .....	31	Contracted .....	33
Duride .....	40	Erythropoietin beta .....	31	DCS .....	68
Dysport .....	26	Escitalopram .....	31	Fluconazole-Claris .....	33
		Etanercept .....	31	Fludara Oral .....	33
<b>- E -</b>		Ethambutol hydrochloride .....	31	Fludarabine Ebewe .....	33
E-Mycin .....	31	Ethics Paracetamol .....	51	Fludarabine phosphate .....	33
Efavirenz .....	30	Etidronate disodium .....	32	Fludrocortisone acetate .....	33
Efexor XR .....	64	Etopophos .....	32	Flumazenil .....	33
Efudix .....	33	Etoposide .....	32	Fluocortolone caproate with	
Elecare .....	17	Etoposide phosphate .....	32	fluocortolone pivalate and	
Elecare LCP .....	17	Etravirine .....	32	cinchocaine .....	33
Eligard .....	42	Evista .....	55	Fluorescite .....	59
Emend Tri-Pack .....	18	Exemestane .....	32	Fluorometholone .....	33
EMLA .....	43	EZ-fit Paediatric Mask .....	43	Fluorouracil Ebewe .....	33
Emtricitabine .....	30			Fluorouracil sodium .....	33
Emtriva .....	30	<b>- F -</b>		Fluox .....	33
Emulsifying ointment .....	30	Factor eight inhibitors bypassing		Fluoxetine hydrochloride .....	33
Enalapril .....	30	agent .....	32	Flupenthixol decanoate .....	34
Enbrel .....	31	Fat free arginine supplement .....	32	Fluphenazine decanoate .....	34
Endoxan .....	26	FEIBA .....	32	Flutamide .....	34
Enfuvirtide .....	30	Felo 10 ER .....	32	Flutamin .....	34
Enoxaparin sodium		Felo 5 ER .....	32	Fluticasone .....	34
Contracted .....	30	Felodipine .....	32	Fluticasone with salmeterol .....	34
DCS .....	67	Fenpaed .....	38	FML .....	33
Ensure		Fentanyl .....	32	Foban .....	34
Contracted .....	60	Fentanyl citrate .....	32	Folic acid .....	34
DCS .....	69	Ferodan .....	32	Forteo .....	62
Ensure Plus		Feriprox .....	28	Fortified eye drops .....	68
Contracted .....	50	Ferro-F-Tabs .....	32	Fortisip .....	69
DCS .....	69	Ferro-tab .....	32	Fortisip Multi Fibre .....	69
Ensure Plus HN .....	30	Ferrous fumarate .....	32	Fortum .....	23
Ensure Plus RTH .....	30	Ferrous fumarate with folic		Fosamax .....	16
Entacapone .....	30	acid .....	32	Fosamax Plus .....	16
Entecavir .....	30	Ferrous sulphate .....	32	Foscarnet .....	68
Enteral feed 1kcal/ml .....	30	Ferrum H .....	40	Fragmin	
Enteral feed with fibre		Fibalip .....	20	Contracted .....	27
1.5kcal/ml .....	30	Filgrastim			

DCS .....	67	Glycine .....	36	Hyoscine n-butylbromide .....	37
Freeflex .....	59	Glypressin .....	62	Hypnovel .....	46
FreeStyle Lite .....	20	Glytrin .....	36	Hypromellose .....	38
Fresofol 1% .....	55	Goserelin acetate .....	36		
Frusemide-Clarix .....	34	Granocyte .....	68	<b>- I -</b>	
Fucidin .....	34			Ibiamox .....	17
Fucithalamic .....	34	<b>- H -</b>		Ibuprofen .....	38
Fungilin .....	18	Habitrol .....	48	Idarubicin hydrochloride .....	38
Furosemide .....	34	Haemaccel .....	35	Ifosfamide .....	38
Fusidic acid .....	34	Haldol .....	36	Ilomedin .....	38
Fuzeon .....	30	Haldol Concentrate .....	36	Iloprost .....	38
		Haloperidol .....	36	Imatinib mesylate .....	38
<b>- G -</b>		Haloperidol decanoate .....	36	Imipenem with cilastatin	
Gabapentin .....	34	Healon .....	60	Contracted .....	38
Gadobendate dimeglumine .....	34	Healon GV .....	60	DCS .....	38
Gadobutrol .....	34	healthE Fatty Cream .....	49	Imipramine hydrochloride .....	68
Gadodiamide .....	35	Heparin sodium .....	36	Imiquimod .....	38
Gadovist .....	34	Heparin with sodium chloride .....	36	Impact Advanced Recovery	
Ganciclovir		Heparinised saline		Contracted .....	60
Contracted .....	35	Contracted .....	36	DCS .....	69
DCS .....	68	DCS .....	68	Imuprine .....	19
Gastrografin .....	44	Hepsera .....	16	Imuran .....	19
Gastrosoothe .....	37	Herceptin .....	63	Indapamide .....	38
Gelafusal .....	35	Holoxan .....	38	Indomethacin .....	68
Gelatin plasma replacer .....	35	Humalog Mix 25 .....	38	Infliximab .....	38
Gelofusine .....	35	Humalog Mix 50 .....	38	Inhibace Plus .....	25
Gemcitabine Actavis 1000 .....	35	Humira .....	16	Innohep .....	70
Gemcitabine Actavis 200 .....	35	HumiraPen .....	16	Innovacon hCG One Step	
Gemcitabine Ebewe .....	35	Hybloc .....	41	Pregnancy Test .....	54
Gemcitabine hydrochloride .....	35	Hydralazine		Insulin glargine .....	38
Gemfibrozil .....	35	Contracted .....	36	Insulin glulisine .....	38
Genoptic .....	35	DCS .....	68	Insulin lispro with insulin lispro	
Genox .....	61	Hydrea .....	37	protamine .....	38
Gentamicin sulphate		Hydrocortisone .....	37	Insulin pen needles .....	39
Contracted .....	35	Hydrocortisone acetate .....	37	Insulin syringes, disposable with	
DCS .....	68	Hydrocortisone butyrate .....	37	attached needle .....	39
Gliclazide .....	35	Hydrocortisone with		Integriilin .....	31
Glipizide .....	35	cinchocaine .....	37	Intelence .....	32
Glivec .....	38	Hydrocortisone with		Invanz .....	31
Glucerna Select .....	28	miconazole .....	37	Iodine with alcohol .....	39
Glucerna Select RTH .....	28	Hydrocortisone with natamycin		Iodixanol .....	39
Glucobay .....	16	and neomycin .....	37	Iohexol .....	40
Glucose .....	35	Hydrogen peroxide .....	37	Ioscan .....	59
Glucose with sodium, potassium,		Hydroxocobalamin .....	37	Ipratropium bromide .....	40
magnesium, chloride and		Hydroxychloroquine sulphate .....	37	Irinotecan .....	40
acetate .....	35	Hydroxyethyl starch 130/0.4 .....	37	Irinotecan-Rex .....	40
Glucose with sodium, potassium,		Hydroxyethyl starch 200/0.5 .....	37	Iron polymaltose .....	40
magnesium, chloride, acetate		Hydroxyurea .....	37	Iron sucrose .....	40
and gluconate .....	35	Hygroton .....	24	Isentress .....	56
Glycerin with sodium		Hyoscine (scopolamine)		Ismo-20 .....	40
saccharin .....	35	Contracted .....	37	Isoflurane .....	40
Glycerin with sucrose .....	36	DCS .....	68	Isoniazid .....	40
Glycerol .....	36	Hyoscine hydrobromide .....	37	Isopropyl alcohol .....	40
Glyceryl trinitrate .....	36				



Methylropa .....	45	Myloc CR .....	46	Olanzapine pamoate monohydrate .....	49
Methylphenidate hydrochloride .....	45	<b>- N -</b>		Olanzine .....	49
Methylphenidate hydrochloride extended-release .....	45	Nadolol .....	48	Olanzine-D .....	49
Methylprednisolone .....	45	Naloxone hydrochloride .....	48	Omeprazole .....	49
Methylprednisolone aceponate .....	45	Naltraccord .....	48	Omezol Relief .....	49
Methylprednisolone acetate .....	45	Naltrexone hydrochloride .....	48	Omnipaque .....	40
Methylprednisolone acetate with lignocaine .....	45	Naphazoline Hydrochloride .....	48	Omniscan .....	35
Methylprednisolone sodium succinate .....	46	Naphcon Forte .....	48	On Call Advanced .....	20
Metoclopramide hydrochloride .....	46	Naproxen .....	48	OncoTICE .....	19
Metolazone S29 .....	68	Naropin .....	58	Ondansetron .....	50
Metoprolol - AFT CR .....	46	Natulan .....	54	One-Alpha .....	16
Metoprolol succinate .....	46	Nausicalm .....	26	Onkotrone .....	46
Metoprolol tartrate .....	46	Navelbine .....	64	Optium 5 second test .....	20
Metronidazole .....	46	Navoban .....	63	Optium Blood Ketone Test Strips .....	40
Miacalcic .....	22	Neoral .....	27	Optium Xceed .....	20
Micolette .....	59	NeoRecormon .....	31	Ora-Blend .....	45
Miconazole nitrate .....	46	Neostigmine methylsulphate .....	48	Ora-Blend SF .....	45
Micreme H .....	37	Neosyneprine HCL .....	52	Ora-Plus .....	45
Midazolam .....	46	Neotigason .....	16	Ora-Sweet .....	36
Minidiab .....	35	Nepro .....	56	Ora-Sweet SF .....	35
Minirin .....	28	Netilmicin .....	69	Oracort .....	63
Minoxidil .....	69	Neulastim .....	52	Oral elemental feed 1kcal/ml .....	50
Mirtazapine .....	46	Neupogen Contracted .....	32	Oral feed 1.5kcal/ml .....	50
Mitomycin C .....	46	DCS .....	67	Oral feed 2kcal/ml .....	50
Mitozantrone .....	46	Nevirapine .....	48	Oratane .....	40
Mitozantrone Ebewe .....	46	Nicotine .....	48	Ornidazole .....	50
Mivacron .....	47	Nifedipine .....	48	Oruvail SR .....	41
Mivacurium .....	47	Nilstat .....	49	Osmolite .....	30
Moclobemide .....	47	Nimodipine .....	69	Osmolite RTH .....	30
Moderate .....	34	Nitroderm TTS 10 .....	36	Ospamox .....	17
Mogine .....	41	Nitroderm TTS 5 .....	36	Oxaliplatin .....	50
Molgramostim .....	69	Nitronal .....	36	Oxaliplatin Ebewe .....	50
Mometasone furoate .....	47	Noflam 250 .....	48	Oxsoralen .....	68
Morphine hydrochloride .....	47	Noflam 500 .....	48	Oxybutynin .....	50
Morphine sulphate .....	47	Noradrenaline acid tartrate .....	48	Oxycodone hydrochloride .....	50
Morphine tartrate .....	47	Norethisterone .....	48	OxyContin .....	50
Movicol .....	43	Norfloracin .....	49	OxyNorm .....	50
Moxifloxacin .....	47	Normison .....	61	Oxytocin .....	50
Mucilaginous laxatives .....	47	Norpress .....	49	Oxytocin with ergometrine maleate .....	51
Multihance .....	34	Nortriptyline hydrochloride .....	49	Ozole .....	33
Myaccord .....	48	Norvir .....	57	<b>- P -</b>	
Myambutol .....	31	Novasource Renal .....	56	Pacifen .....	19
Mycobutin .....	56	Novatretin .....	16	Pacific Atenolol .....	18
Mycophenolate mofetil .....	48	Nupentin .....	34	Pacific Buspirone .....	21
Mydriacyl .....	63	Nyefax Retard .....	48	Paclitaxel .....	51
Mylan Fentanyl Patch .....	32	Nystatin .....	49	Paclitaxel Actavis .....	51
Myleran .....	21	<b>- O -</b>		Paclitaxel Ebewe .....	51
		Octreotide .....	49	Paediatric enteral feed 1kcal/ml .....	51
		Octreotide MaxRx .....	49	Paediatric oral feed 1kcal/ml .....	51
		Oil in water emulsion .....	49		
		Olanzapine .....	49		

# INDEX

## Generic Chemicals and Brands

Pamidronate disodium .....	51	Plaquenil .....	37	Pytazen SR .....	29
Pamisol .....	51	Podophyllotoxin .....	53	- Q -	
Panadol .....	51	Poloxamer .....	53	Q 300 .....	55
Pancuronium bromide .....	51	Polyethylene glycol with sodium sulphate .....	53	Quetapel .....	55
Pantocid IV .....	51	Polyhexamethylene biguanide .....	69	Quetiapine .....	55
Pantoprazole .....	51	Polyvinyl alcohol .....	53	Quinapril .....	55
Papaverine hydrochloride .....	51	Poractant alfa .....	53	Quinapril with hydrochlorothiazide .....	55
Paracare .....	51	Potassium chloride .....	53	Quinine sulphate .....	55
Paracare Double Strength .....	51	Potassium chloride with glucose .....	53	- R -	
Paracetamol .....	51	Potassium chloride with glucose and sodium chloride .....	53	RA-Morph .....	47
Paracetamol + Codeine (Relieve) .....	52	Potassium chloride with sodium chloride .....	53	Raloxifene hydrochloride .....	55
Paracetamol with codeine .....	52	Potassium citrate .....	53	Raltegravir potassium .....	56
Paraffin .....	52	Povidone iodine .....	54	Ranbaxy-Cefaclor .....	23
Paroxetine hydrochloride .....	52	Pradaxa .....	27	Ranitidine hydrochloride .....	56
Paxam .....	25	Pravastatin .....	54	Rapamune .....	58
Peak flow meter .....	52	Praziquantel .....	69	Recombinant factor IX .....	56
Pediasure .....	51	Prazosin hydrochloride .....	54	Recombinant factor VIII .....	56
Pediasure RTH .....	51	Prednisolone sodium phosphate .....	54	Redipred .....	54
Pegfilgrastim Contracted .....	52	Prednisone .....	54	Regitine .....	52
DCS .....	69	Pregnancy test – hCG Urine .....	54	Remicade .....	38
Penembact .....	44	Prezista .....	27	Remifentanil hydrochloride .....	56
Penicillamine .....	52	Prilocaine hydrochloride .....	54	Remifentanil-AFT .....	56
Pentamidine .....	69	Primaquine .....	69	Renal oral feed 2kcal/ml .....	56
Pentasa .....	44	Primaxin .....	38	ReoPro .....	16
Peptamen OS 1.0 .....	50	Primolut N .....	48	Resource Arginaid .....	32
Peptisothe .....	56	Procaine penicillin .....	54	Resource Beneprotein .....	55
Pergolide .....	52	Procarbazine hydrochloride .....	54	Resource Diabetic .....	28
Perhexiline maleate .....	52	Prochlorperazine .....	54	Retinol palmitate .....	56
Permax .....	52	Proctosedyl .....	37	Retrovir .....	65
Permethrin .....	52	Progopa .....	45	Reyataz .....	18
Pethidine hydrochloride .....	52	Prograf .....	61	Ridal .....	57
Pexsig .....	52	Promethazine hydrochloride .....	54	Rifabutin .....	56
Phenindione .....	69	Promethazine Winthrop Elixir .....	54	Rifodine .....	54
Phenobarbitone .....	52	Propofol .....	55	Risperdal .....	57
Phenoxyethylpenicillin (penicillin V) .....	52	Propranolol .....	55	Risperdal Consta .....	57
Phentolamine mesylate .....	52	Propylene glycol .....	55	Risperdal Quicklet .....	57
Phenylephrine hydrochloride .....	52	Prostin E2 .....	29	Risperidone .....	57
Phytomenadione .....	52	Prostin VR .....	17	Risperon .....	57
Pimafucort .....	37	Protein supplement .....	55	Ritalin .....	45
Pindolol .....	53	Provera .....	44	Ritalin LA .....	45
Pinetarsol .....	61	Provide MCT-LCT 1% .....	55	Ritalin SR .....	45
Pinorax .....	27	Pulmocare .....	26	Ritonavir .....	57
Pinorax Forte .....	27	Purinethol .....	44	Rituximab .....	57
Pioglitazone .....	53	Pyridostigmine bromide .....	55	Rivaroxaban .....	57
Piperacillin sodium .....	69	PyridoxADE .....	55	Rivotril .....	25
Piperacillin sodium with tazobactam sodium .....	53	Pyridoxine hydrochloride .....	55	Rizamelt .....	57
Piperacillin with tazobactam .....	69	Pyrimethamine .....	69	RizatRIPTAN .....	57
Pizaccord .....	53			Rocaltrol .....	22
Pizotifen .....	53			Rocuronium bromide .....	57
				Ropin .....	57
				Ropinirole hydrochloride .....	57

Ropivacaine hydrochloride .....	58	Sodium diotrizoate .....	59	grade) .....	61
Ropivacaine hydrochloride with fentanyl .....	58	Sodium fluorescein .....	59	<b>- T -</b>	
Roxithromycin .....	58	Sodium hyaluronate .....	60	Tacrolimus .....	61
Rubifen .....	45	Soft white paraffin with paraffin liquid .....	60	Tambocor .....	33
Rubifen SR .....	45	Solian .....	17	Tambocor CR .....	33
<b>- S -</b>		Solifenacin succinate .....	60	Tamoxifen citrate .....	61
Salamol .....	58	Solox .....	41	Tamsulosin hydrochloride .....	61
Salapin .....	58	Solu-Cortef .....	37	Tamsulosin-Rex .....	61
Salazopyrin .....	61	Solu-Medrol .....	46	Tar with triethanolamine lauryl sulphate and fluorescein .....	61
Salazopyrin EN .....	61	Sorbolene with glycerin .....	60	Tarceva .....	31
Salbutamol .....	58	Sotacor .....	60	Tasmar .....	62
Salbutamol with ipratropium bromide .....	58	Sotalol .....	60	Tazocin EF .....	53
Salmeterol .....	58	Space Chamber Plus .....	60	Teicoplanin .....	70
Sandimmun .....	27	Spacer device .....	60	Temaccord .....	61
Sandomigran .....	53	Span-K .....	53	Temazepam .....	61
Sandostatin LAR .....	49	Special food supplement .....	69	Temozolomide .....	61
SC Profi-Fine .....	39	Spiriva .....	62	Tenofvir disoproxil fumarate .....	61
Scopoderm TTS		Spirolactone .....	60	Tenoxicam .....	61
Contracted .....	37	Spirotono .....	60	Terbinafine .....	61
DCS .....	68	Sprycel .....	27	Teriparatide .....	62
Sebizole .....	40	Standard supplement oral feed 1.0kcal/ml .....	60	Terlipressin .....	62
Serenace .....	36	Standard supplement oral feed 1.4kcal/ml .....	60	Testosterone .....	62
Seretide .....	34	StarQuin 10% .....	37	Testosterone cypionate .....	62
Seretide Accuhaler .....	34	Starquin 200 6% .....	37	Testosterone undecanoate .....	62
Serevent .....	58	Stesolid .....	28	Tetracosactrin .....	62
Serevent Accuhaler .....	58	Stocrin .....	30	Thalidomide .....	62
Serophene .....	25	Strattera .....	19	Thalomid .....	62
Seroquel .....	55	Streptase .....	60	Tiaprofenic acid .....	62
Sertraline .....	58	Streptokinase .....	60	Ticarcillin disodium with clavulanic acid .....	70
Sevoflurane .....	58	Stromectol .....	40	Timolol maleate .....	62
Sevredol .....	47	Sulphadiazine .....	69	Timoptol XE .....	62
Silver sulphadiazine .....	58	Sulphasalazine .....	61	Tinzaparin sodium .....	70
Simulect .....	19	Sumatriptan .....	61	Tiotropium bromide .....	62
Simvastatin .....	58	Sunitinib .....	61	Tirofiban hydrochloride .....	62
Sinemet .....	42	Sunscreens, proprietary .....	61	TMP .....	63
Sinemet CR .....	42	Suprane .....	28	Tobramycin	
Sirolimus .....	58	Surgam .....	62	Contracted .....	62
Siterone .....	27	Survanta .....	20	DCS .....	70
Slow Sodium .....	69	Sustagen Hospital Formula		Tobrex .....	62
Slow-Lopresor .....	46	Contracted .....	60	Tofranil .....	38
Sodibic .....	59	DCS .....	69	Tolcapone .....	62
Sodium acid phosphate .....	58	Sutent .....	61	Topamax .....	62
Sodium alginate .....	59	Suxamethonium chloride .....	61	Topiramate .....	62
Sodium bicarbonate .....	59	Symmetrel .....	17	Tracleer .....	21
Sodium chloride		Synacthen .....	62	Tracrium .....	19
Contracted .....	59	Synacthen Depot .....	62	Tramadol hydrochloride .....	63
DCS .....	69	Synermox .....	18	Tramal 100 .....	63
Sodium chloride with glucose .....	59	Syntocinon .....	50	Tramal 50 .....	63
Sodium citrate with sodium lauryl sulphoacetate .....	59	Syntometrine .....	51	Tramal Retard .....	63
Sodium citro-tartrate .....	59	Syrup (pharmaceutical		Tranexamic acid .....	63



New Zealand  
Permit No. 478



**Pharmaceutical Management Agency**

Level 9, 40 Mercer Street, PO Box 10-254, Wellington 6143, New Zealand

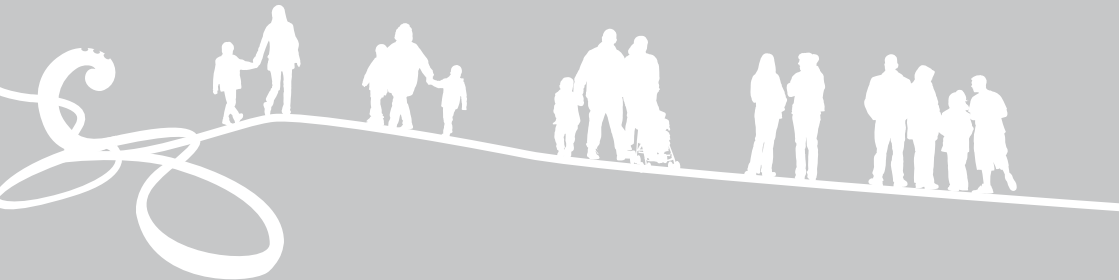
Phone: 64 4 460 4990 - Fax: 64 4 460 4995 - [www.pharmac.govt.nz](http://www.pharmac.govt.nz)

**Freephone Information line (9am-5pm weekdays) 0800 66 00 50**

**ISSN 1172-3694 (Print)**

**ISSN 1179-3708 (Online)**

While care has been taken in compiling this Update, Pharmaceutical Management Agency takes no responsibility for any errors or omissions and shall not be liable to any person for any damages or loss arising out of reliance by that person for any purpose on any of the contents of this Update. Errors and omissions brought to the attention of Pharmaceutical Management Agency will be corrected if necessary by an erratum or otherwise in the next edition of the Update.



New Zealand Government

**PHARMAC**  
Pharmaceutical Management Agency

If Undelivered, Return To: PO Box 10-254, Wellington 6143, New Zealand