

07

UPDATE

New Zealand Pharmaceutical Schedule

Effective 1 February 2007

Cumulative for January and February 2007
Section H cumulative for October, November, December 2006
and January, February 2007

Investing in Health

PHARMAC
Pharmaceutical Management Agency

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Summary of PHARMAC decisions

EFFECTIVE 1 FEBRUARY 2007

New listings (pages 18-20)

- Glucose blood diagnostic test meter (Optium Xceed) – subsidised for patients who begin insulin or sulphonylurea therapy after 1 March 2005. Only one meter per patient. No further prescription will be subsidised
- Dextrose (Biomed) inj 50%, 90 ml – available on a PSO
- Testosterone (Androderm) transdermal patch 2.5 mg per day
- Ethambutol hydrochloride (Myambutol) tab 400 mg – Retail pharmacy – specialist – No patient co-payment payable – listed under Section 29
- Citalopram hydrobromide (Celapram) tab 20 mg
- Lamotrigine (Arrow-Lamotrigine) tab chewable/dispersible 5 mg, 25 mg, 50 mg, 100 mg and 200 mg
- Lamotrigine (Mogine) tab chewable/dispersible 25 mg, 50 mg, 100 mg and 200 mg
- Clozapine (Clopine) tab 50 mg and 200 mg – Hospital pharmacy [HP4] – specialist prescription
- Pimozide (Orap Forte) tab 4 mg – Retail pharmacy – specialist – listed under Section 29
- Risperidone (Ridal) tab 0.5 mg, 1 mg, 2 mg, 3 mg and 4 mg – Retail pharmacy – specialist
- Aminoacid formula without phenylalanine (Easiphen Liquid) liquid (tropical) – Hospital pharmacy [HP3] – Special Authority

Changes to restriction (pages 21-22)

- Carvedilol (Dilatrend) tab 6.25 mg, 12.5 mg and 25 mg – removal of Special Authority criteria
- Cytarabine inj 100 mg per ml, 5 ml and 10 ml – amended presentation description
- Charcoal (Carbosorb-X) oral liq 50 g per 250 ml - removal of Section 29
- Glycerol liquid – restriction widened to include subsidy in extemporaneously compounded oral liquid preparations

Increased subsidy (pages 23-26)

- Hydrogen peroxide (PSM) soln 10 vol
- Thymol glycerin (PSM) compound, BPC
- Sodium fluoride (PSM) tab 1.1 mg
- Cetomacrogol (PSM) cream BP

Summary of PHARMAC decisions – effective 1 February 2007 (continued)

- Gamma benzene hexachloride (Benhex) crm 1%
- Coal tar (PSM) soln BP
- Salicylic acid (PSM) powder
- Metronidazole (Flagyl – S) oral liq benzoate 200 mg per 5 ml
- Penicillamine (D-Penammine) tab 125 mg and 250 mg
- Dothiepin hydrochloride (Dopress) cap 25 mg
- Interferon beta-1-beta (Betaferon) inj 8 million iu per 1 ml
- Naloxone hydrochloride (Mayne) inj 400 µg per ml, 1 ml
- Chloroform BP (PSM)
- Collodion flexible (PSM)
- Propylene glycol (PSM)

Decreased subsidy (pages 23-26)

- Calcitriol (Rocaltrol) cap 0.25 µg and 0.5 µg
- Simvastatin (Lipex) tab 10 mg, 20 mg, 40 mg and 80 mg
- Amoxicillin (Ospamox) grans for oral liq 125 mg per 5 ml and 250 mg per 5 ml
- Isoniazid (PSM) tab 100 mg
- Cyclizine hydrochloride (Marzine) tab 50 mg – decreased alternate subsidy
- Dexamphetamine sulphate (PSM) tab 5 mg
- Cisplatin (Mayne) inj 1 mg per ml, 50 ml and 100 ml
- Cytarabine (Mayne) inj 100 mg per ml, 5 ml, 10 ml and 20 ml
- Etoposide (Mayne) inj 20 mg per ml, 5 ml

Testosterone patches – new listing

Androderm testosterone patches will be listed fully subsidised on the Pharmaceutical Schedule from 1 February 2007. Androderm will be subsidised without the specialist restriction which is required for the other testosterone preparations listed in the Pharmaceutical Schedule.

Carvedilol – Special Authority no longer required

Special Authority approvals will no longer be required for carvedilol tablets (Dilatrend) from 1 February 2007. Removal of the Special Authority criteria will widen access for patients to carvedilol for indications including all stages of heart failure, thus increasing clinicians' treatment options.

Lamotrigine / Clozapine / Risperidone – new brands subsidised

New brands of lamotrigine, clozapine and risperidone will be subsidised on the Pharmaceutical Schedule from 1 February 2007.

Arrow-Lamotrigine and Mogine brands of lamotrigine chewable/dispersible tablets will be subsidised without Special Authority from 1 February 2007. See page 18 for details. Three months' supply may be dispensed at one time if the prescription is endorsed "certified exemption" by the prescriber. The Lamictal brand of lamotrigine will remain listed under Special Authority for subsidy for patients with epilepsy meeting the criteria.

The Clopine brand of clozapine tablets 50 mg and 200 mg will be subsidised from 1 February 2007 subject to the "Hospital pharmacy [HP4] – specialist prescription" restriction which currently applies to the prescribing and dispensing of clozapine. Douglas Pharmaceuticals Ltd will provide prescribers and relevant pharmacists with information on its clozapine-related services. The Clozaril brand of clozapine will continue to be listed fully subsidised under the same restrictions.

The Ridal brand of risperidone tablets will be subsidised from 1 February 2007 subject to a "Retail pharmacy – specialist" restriction. The Risperdal brand of risperidone tablets will continue to be listed fully subsidised under the same restriction as currently applies.

As of July 2006 Medsafe no longer specifies whether or not two (or more) different brands of a pharmaceutical have interchangeable multisource medicine (IMM) status. This is because the clinical safety and efficacy of generic medicines is usually established by Medsafe by the use of a biostudy against the innovator product or current market leader. Consequently, for most generic medicines, interchangeability

is established as part of the registration process. Douglas Pharmaceuticals (Mogine, Ridal and Clopine) and Arrow Pharmaceuticals (Arrow-Lamotrigine) were required to demonstrate bioequivalence to the innovator products (Lamictal, Risperdal and Clozaril) as part of the Medsafe registration process.

Glycerol & ECPs

Glycerol liquid will be subsidised for a wider range of extemporaneously compounded preparations (ECP) from 1 February 2007. Glycerol liquid will be subsidised when used in any extemporaneously compounded oral liquid preparation. Previously, glycerol liquid was only subsidised when used in a small range of oral liquid preparations.

Also from 1 February 2007 a range of dermatological galenicals and ECP ingredients will be fully subsidised. This is good news for patients as these products have not previously been fully subsidised. Please see pages 23 to 25 for details.

Optium Xceed – new listing

A new glucose blood diagnostic test meter will be subsidised from 1 February 2007. Optium Xceed will be subsidised under the same access criteria as other glucose blood diagnostic test meters and is to replace the Optium meter. The subsidised Optium blood/glucose test strips may be used in the Optium Xceed test meter.

The incumbent Optium glucose blood diagnostic test meter will not be subsidised from 1 February 2008.

Ethambutol hydrochloride (Myambutol) – changed pack size

Myambutol (ethambutol hydrochloride), tablets 400 mg will have a change in pack size from 100 to 56 tablets. The new pack size will be subsidised from 1 February 2007 under the same restriction as before: Retail pharmacy – specialist. Please note that this new pack size is not yet registered and will be supplied under Section 29 of the Medicines Act 1981. The 100 tablet pack will be delisted from 1 August 2007.

Pimozide – discontinuation of Orap 2 mg tablets

Janssen-Cilag Pty Ltd has discontinued pimozide (Orap) 2 mg tablets. This will be delisted from 1 August 2007. To assist with the withdrawal of patients from pimozide, Orap Forte 4 mg tablets will be subsidised from 1 February 2007 for a period of 12 months. As Orap Forte is not a registered medicine, it will be supplied under Section 29 of the Medicines Act 1981. The “Retail pharmacy – specialist” restriction applies to Orap Forte 4 mg tablets. Orap Forte 4 mg is a scored tablet which will facilitate smaller doses. Prescribers have been asked not to start any new patients on pimozide.

Calcium carbonate

Due to an out-of-stock on the Calci-Tab 600 and short supply of the Calci-Tab 500, Osteo~500 and Osteo~600 were listed fully subsidised on the Pharmaceutical Schedule from 21 December 2006. Osteo~500 and Osteo~600 were to be delisted on 28 February 2007, however the delist date has been extended until 31 March 2007.

Clarification of Stat status for Clonidine TDDS

A fax notification was sent to all pharmacies regarding the Stat status of clonidine TDDS patches. The “stat” rule was removed from the PHARMAC Pharmaceutical Schedule database in error. This means that dispensing software may show clonidine TDDS as a non-stat medicine when it should be stat. Clonidine TDDS is a stat medicine and will not be paid as monthly dispensings unless endorsed “close control” by the prescriber. The printed Pharmaceutical Schedule is correct.

Because this error has transferred into the HealthPAC payment system, HealthPAC have requested that pharmacies hold claiming the dispensings for clonidine TDDS until the first claim period for February (the one covering 1 – 15 February). Claims submitted before 1 February 2007 will not be paid if claimed as stat. If non payment occurs please reclaim in your 1-15 February claim. PHARMAC will have the stat rule reinstated in the February Pharmaceutical Schedule to ensure claims for payment via HealthPAC will be paid.

Tender News

Sole Subsidised Supply changes – effective 1 March 2007

Chemical Name	Presentation; Pack size	Sole Subsidised Supply brand (and supplier)
Calamine	Lotion BP; 2000 ml	ABM (ABM)
Naproxen	Tab 250 mg; 500 tab	Noflam 250 (Pacific)
Naproxen	Tab 500 mg; 250 tab	Noflam 500 (Pacific)
Nicotinic acid	Tab 500 mg; 100 tab	Apo-Nicotinic Acid (Apotex)
Triamcinolone acetonide with gramicidin, neomycin and nystatin	Ear drops 1 mg with nystatin 100,000 u, neomycin sulphate 2.5 mg and gramicidin 250 mcg per g; 7.5 ml OP	Kenacomb (Healthcare Logistics)
Vitamin B complex	Tab, strong, BPC; 500 tab	Apo-B-Complex (Apotex)

Looking Forward

This section is designed to alert both pharmacists and prescribers to possible future changes. It may assist pharmacists to manage stock levels and keep prescribers up-to-date with proposals to change the Pharmaceutical Schedule.

Possible decisions for implementation 1 March 2007

- Choline salicylate with cetalkonium chloride (Bonjela) adhesive gel 8.7% with cetalkonium chloride 0.01%, 15 g – price increase
- Gluten free flour (Gluten Free Health) 1,000 g OP – new listing
- Gluten free bread mix (Gluten Free Health) 1,000 g OP – new listing
- Interferon beta-1-beta (Betaferon) inj 8 million iu per 1 ml – amended access criteria
- Lansoprazole (Solox) cap 15 mg – new listing

Sole Subsidised Supply Products – cumulative to February 2007

Generic Name	Presentation	Brand Name	Expiry Date*
Acetazolamide	Tab 250 mg	Diamox	2008
Acipimox	Cap 250 mg	Olbetam	2008
Acitretin	Cap 10 mg & 25 mg	Neotigason	2008
Allopurinol	Tab 100 mg & 300 mg	Progout	2008
Amitriptyline	Tab 10 mg, 25 mg & 50 mg	Amitrip	2008
Amlodipine	Tab 5 mg & 10 mg	Calvasc	2008
Apomorphine hydrochloride	Inj 10 mg per ml, 1 ml	Mayne	2009
Amoxicillin	Inj 250 mg, 500 mg & 1 g Cap 250 mg & 500 mg	Ibiamox Apo-Amoxi	2008 2007
Applicator	Device	Ortho	2008
Aqueous cream	Cream	Multichem	2008
Ascorbic acid	Tab 100 mg	Apo-Ascorbic Acid	2009
Aspirin	Tab, dispersible 300 mg	Ethics Aspirin	2007
Atenolol	Tab 50 mg & 100 mg	Loten	2009
Atropine sulphate	Inj 600 µg, 1 ml	AstraZeneca	2009
	Inj 1200 µg, 1 ml Eye drops 1%	AstraZeneca Atropt	2008
Beclomethasone dipropionate	Metered aqueous nasal spray 50 µg	Alanase	2009
	Metered aqueous nasal spray 100 µg	Alanase	
Betamethasone valerate	Scalp app 0.1%	Beta Scalp	2009
	Crn 0.1%	Beta Cream	2008
	Oint 0.1%	Beta Ointment	
Betaxolol hydrochloride	Eye drops 0.5%	Betoptic	2007
	Eye drops 0.25%	Betoptic S	
Bezafibrate	Tab 200 mg	Fibalip	2008
Bisacodyl	Tab 5 mg	AFT, Lax-Tabs	2007
	Suppos 10 mg	Fleet	
Bromocriptine mesylate	Tab 2.5 mg & 10 mg	Alpha-Bromocriptine	2008
Bupivacaine hydrochloride	Inj 0.5%, 4 ml	Marcain Isobaric	2007
	Inj 0.5%, 8% glucose, 4 ml	Marcain Heavy	
Buspirone hydrochloride	Tab 5 mg & 10 mg	Pacific Buspirone	2007
Calamine	Crn, aqueous, BP	ABM	2009
Calcium carbonate	Tab dispersible 2.5 g	Calci-Tab Effervescent	2008
	Tab 1.25 g	Calci-Tab 500	
	Tab 1.5 g	Calci-Tab 600	
Calcium folinate	Inj 50 mg	Calcium Folate Ebewe	2008
Captopril	Tab 12.5 mg, 25 mg & 50 mg	Apo-Captopril	2007
Cefaclor monohydrate	Cap 250 mg	Ranbaxy-Cefaclor	2007
	Grans for oral liq 125 mg per 5 ml	Ranbaxy-Cefaclor	

*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated.

Sole Subsidised Supply Products – cumulative to February 2007

Generic Name	Presentation	Brand Name	Expiry Date*
Cefazolin sodium	Inj 500 mg & 1 g	m-Cefazolin	2008
Ceftriaxone sodium	Inj 500 mg & 1 g	AFT	2008
Celiprolol	Tab 200 mg	Celol	2007
Cetirizine hydrochloride	Oral liq 1 mg per ml Tab 10 mg	Allerid C Razene	2008
Chloramphenicol	Eye drops 0.5% Eye oint 1%	Chlorsig Chlorsig	2009
Chlorhexidine gluconate	Handrub 1% with ethanol 70% Mouthwash 0.2% Soln 4%	Orion Orion Orion	2009 2008
Chlorthalidone	Tab 25 mg	Hygroton	2009
Cholecalciferol	Tab 1.25 mg (50,000 iu)	Cal-d-Forte	2007
Ciprofloxacin	Tab 250 mg, 500 mg & 750 mg	Cipflox	2008
Clarithromycin	Tab 250 mg	Clarac	2007
Clindamycin	Cap hydrochloride 150 mg Inj phosphate 150 mg per ml, 4 ml	Dalacin C	2008
Clobetasol propionate	Crm 0.05% Scalp app 0.05% Oint 0.05%	Dermol Dermol Dermol	2009 2008
Clonazepam	Tab 500 µg & 2 mg	Paxam	2008
Clonidine	TDDS 2.5 mg, 100 µg per day TDDS 5 mg, 200 µg per day TDDS 7.5 mg, 300 µg per day	Catapres-TTS-1 Catapres-TTS-2 Catapres-TTS-3	2008
Clonidine hydrochloride	Tab 25 µg Tab 150 µg Inj 150 µg per ml, 1 ml	Dixarit Catapres Catapres	2008
Clotrimazole	Vaginal crm 1% with applicators Vaginal crm 2% with applicators Crm 1%	Clomazol Clotrimaderm 2% Clomazol	2007 2008
Codeine phosphate	Tab 15 mg, 30 mg & 60 mg	PSM	2007
Compound electrolytes	Powder for soln for oral use 5 g	Enerlyte	2007
Co-trimoxazole	Oral liq sugar-free trimethoprim 40 mg and sulphamethoxazole 200 mg per 5 ml Tab trimethoprim 80 mg and sulphamethoxazole 400 mg	Trisul	2008
Cyclizine lactate	Inj 50 mg per ml, 1 ml	Valoid (AFT)	2008
Cyproterone acetate	Tab 50 mg	Siterone	2009
Cyproterone acetate with ethinyloestradiol	2 mg with ethinyloestradiol 35 µg tab with 7 inert tablets	Estelle-35 ED	2007

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Sole Subsidised Supply Products – cumulative to February 2007

Generic Name	Presentation	Brand Name	Expiry Date*
Danthron with poloxamer	Oral liq 25 mg with poloxamer 200 mg per 5 ml	Codalax	2007
	Oral liq 75 mg with poloxamer 1 g per 5 ml	Codalax Forte	
Dantrolene sodium	Cap 25 mg & 50 mg	Dantrium	2009
Desferrioxamine mesylate	Inj 500 mg	Mayne	2007
Desmopressin	Nasal spray 10 µg per dose	Desmopressin-PH&T	2008
Dexamethasone sodium phosphate	Inj 4 mg per ml, 1 ml	Mayne	2009
	Inj 4 mg per ml, 2 ml		
Diaphragm	Range of sizes	Ortho All-flex & Ortho Coil	2008
Diclofenac sodium	Tab EC 25 mg & 50 mg	Apo-Diclo	2009
	Tab long-acting 75 mg & 100 mg	Apo-Diclo SR	
Didanosine (DDI)	Cap 125 mg, 200 mg, 250 mg & 400 mg	Videx EC	2009
Dihydrocodeine tartrate	Tab long-acting 60 mg	DHC Continus	2008
Diltiazem hydrochloride	Tab 30 mg & 60 mg	Dilzem	2007
Diphenoxylate hydrochloride with atropine sulphate	Tab 2.5 mg with atropine sulphate 25 µg	Diastop	2008
Dipyridamole	Tab long-acting 150 mg	Pytazen SR	2008
Docusate sodium	Tab 50 mg & 120 mg	Coloxyl	2008
Docusate sodium with sennosides	Tab 50 mg with total sennosides 8 mg	Laxsol	2007
Doxazosin mesylate	Tab 2 mg & 4 mg	Dosan	2007
Emulsifying ointment BP	Ointment	AFT	2008
Enalapril	Tab 5 mg, 10 mg & 20 mg	m-Enalapril	2009
Ergometrine maleate	Inj 500 µg per ml, 1 ml	Mayne	2009
Ergotamine tartrate with caffeine	Tab 1 mg with caffeine 100 mg	Cafergot	2009
Erythromycin ethyl succinate	Grans for oral liq 200 mg per 5 ml	E-Mycin	2008
	Grans for oral liq 400 mg per 5 ml	E-Mycin	
Ethambutol hydrochloride	Tab 400 mg	Myambutol	2008
Ethinylestradiol	Tab 10 µg	New Zealand Medical and Scientific	2009
Ethinylestradiol with norethisterone	Tab 35 µg with norethisterone 500 µg and 7 inert tab	Norimin	2008
Etoposide	Cap 50 mg & 100 mg	Vepesid	2009
Famotidine	Tab 20 mg & 40 mg	Famox	2007
Felodopine	Tab long-acting 5 mg	Felo 5 ER	2007
	Tab long-acting 10 mg	Felo 10 ER	

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Sole Subsidised Supply Products – cumulative to February 2007

Generic Name	Presentation	Brand Name	Expiry Date*
Ferrous fumarate	Tab 200 mg	Ferro-tab	2007
Ferrous sulphate	Oral liq 150 mg per 5 ml	Ferro-liquid	2007
Flucloxacillin sodium	Cap 250 mg & 500 mg Grans for oral liq 125 mg per 5 ml Grans for oral liq 250 mg per 5 ml	Staphlex AFT AFT	2009
Fluconazole	Cap 50 mg & 150 mg	Pacific	2008
Fluocortolone caproate with fluocortolone pivalate and cinchocaine	Oint 950 µg, with fluocortolone pivalate 920 µg and cinchocaine hydrochloride 5 mg per g Suppos 630 µg, with fluocortolone pivalate 610 µg, and cinchocaine hydrochloride 1 mg	Ultraproct Ultraproct	2007
Fluorometholone	Eye drops 0.1%	Flucon	2009
Fluoxetine hydrochloride	Cap 20 mg Tab disp 20 mg, scored	Fluox Fluox	2007
Fluphenazine decanoate	Inj 12.5 mg per 0.5 ml, 0.5 ml Inj 25 mg per ml, 1 ml Inj 100 mg per ml, 1 ml	Modecate Modecate Modecate	2008
Folic Acid	Tab 0.8 mg & 5 mg	Apo-Folic Acid	2009
Frusemide	Inj 10 mg per ml, 2 ml	Mayne	2007
Fusidic Acid	Crn 2% & Oint 2%	Foban	2007
Gentamicin sulphate	Inj 40 mg per ml, 2 ml	Pfizer	2009
Gliclazide	Tab 80 mg	Apo-Gliclazide	2008
Glipizide	Tab 5 mg	Minidiab	2008
Glycerol	Suppos 3.6 g	PSM	2007
Glyceryl trinitrate	TDDS 5 mg and 10 mg Oral pump spray 400 µg per dose	Nitroderm TTS Nitrolingual Pumpspray	2007
Haloperidol	Inj 5 mg per ml, 1 ml	Serenace	2009
Haloperidol decanoate	Inj 50 mg per ml, 1 ml Inj 100 mg per ml, 1 ml	Haldol Haldol Concentrate	2008
Heparinised saline	Inj 10 iu per ml, 5 ml	AstraZeneca	2009
Hydrocortisone	Tab 5 mg & 20 mg Powder 25 g	Douglas m-Hydrocortisone	2009 2008
Hydrocortisone acetate	Rectal foam 10%, CFC-Free	Colifoam	2009
Hydrocortisone with miconazole	Crn 1% with miconazole nitrate 2%	Micreme H	2007
Hydrocortisone with wool fat and mineral oil	Lotn 1% with wool fat hydrous 3% and mineral oil	DP Lotn HC	2008
Hyoscine N-butylbromide	Inj 20 mg	Buscopan	2008
Hypromellose	Eye drops 0.3% Eye drops 0.5%	Poly-Tears Methopt	2008

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Sole Subsidised Supply Products – cumulative to February 2007

Generic Name	Presentation	Brand Name	Expiry Date*
Ibuprofen	Tab 200 mg	I-Profen	2008
	Oral liq 100 mg per 5 ml	Fenpaed	2007
Imipramine hydrochloride	Tab 10 mg & 25 mg	Tofranil	2009
Indapamide	Tab 2.5 mg	Napamide	2009
Indomethacin	Cap 25 mg & 50 mg	Rheumacin	2008
Ipratropium bromide	Aerosol inhaler, 20 µg per dose CFC-free	Atrovent	2008
	Nebuliser soln 250 µg per 1 ml, 1 ml	Steri-Neb	2007
	Nebuliser soln 500 µg per 2 ml, 2 ml	Steri-Neb	
Isosorbide mononitrate	Tab long-acting 60 mg	Duride	2009
Isotretinoin	Cap 10 mg	Isotane 10	2009
	Cap 20 mg	Isotane 20	
Ketoconazole	Shampoo 2%	Ketopine	2008
	Tab 200 mg	Nizoral	2007
Lactulose	Oral liq 10 g per 15 ml	Laevolac	2007
Leuprorelin	Inj 3.75 mg & 11.25 mg	Lucrin Depot	2007
Levodopa with benserazide	Cap 50 mg with benserazide 12.5 mg	Madopar 62.5	2009
	Tab dispersible 50 mg with benserazide 12.5 mg	Madopar Dispersible	
	Cap 100 mg with benserazide 25 mg	Madopar 125	
	Cap long-acting 100 mg with benserazide 25 mg	Madopar HBS	
Lignocaine hydrochloride	Cap 200 mg with benserazide 50 mg	Madopar 250	2007
	Inj 0.5%, 5 ml	Xylocaine 0.5%	
	Inj 1%, 5 ml Inj 1%, 20 ml	Xylocaine 1.0% Xylocaine 1.0%	
Lignocaine with prilocaine hydrochloride	Crn 2.5% with prilocaine hydrochloride 2.5% 5g	Emla	2007
	Crn 2.5% with prilocaine hydrochloride 2.5% 30g	Emla	
Loperamide hydrochloride	Tab 2 mg	Nodia	2007
Loratadine	Oral liq 1 mg per ml	Lorapaed	2007
	Tab 10 mg	Apo-Loratadine	
Lorazepam	Tab 1 mg & 2.5 mg	Ativan	2009
Magnesium hydroxide	Paste	PSM	2007
Magnesium sulphate	Inj 49.3%	Mayne	2009
Malathion	Liq 0.5%	AFT	2007
Maldison	Shampoo 1%	A-Lices	2007
Maprotiline hydrochloride	Tab 25 mg & 75 mg	Ludiomil	2009
Medroxyprogesterone acetate	Inj 150 mg per ml, 1 ml syringe	Depo-Provera	2007
Mesalazine	Enema 1 g per 100 ml	Pentasa	2009

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Sole Subsidised Supply Products – cumulative to February 2007

Generic Name	Presentation	Brand Name	Expiry Date*
Methadone hydrochloride	Powder 1 g	AFT	2009
	Tab 5 mg	Pallidone	2007
Methotrexate	Tab 2.5 mg & 10 mg	Methoblastin	2009
	Inj 100 mg per ml, 5 ml	Methotrexate Ebewe	2008
	Inj 100 mg per ml, 10 ml	Methotrexate Ebewe	
	Inj 100 mg per ml, 50 ml	Methotrexate Ebewe	
Methylidopa	Tab 125 mg, 250 mg & 500 mg	Prodopa	2008
Methylphenidate hydrochloride	Tab 5 mg & 20 mg Tab 10 mg	Rubifen Rubifen	2009
Methylprednisolone	Tab 4 mg & 100 mg	Medrol	2009
Methylprednisolone aceponate	Crn 0.1% and oint 0.1%	Advantan	2009
Methylprednisolone acetate	Inj 40 mg per ml, 1 ml	Depo-Medrol	2008
Methylprednisolone acetate with lignocaine	Inj 40 mg per ml with lignocaine 1 ml	Depo-Medrol with Lidocaine	2008
Methylprednisolone sodium succinate	Inj 40 mg per ml, 1 ml	Solu-Medrol	2009
	Inj 62.5 mg per ml, 1 ml	Solu-Medrol	
	Inj 500 mg & 1 g	Solu-Medrol	
Metoclopramide hydrochloride	Inj 5 mg per ml, 2 ml	Pfizer	2008
	Tab 10 mg	Metamide	2007
Metoprolol tartrate	Tab long-acting 200 mg	Slow-Lopressor	2009
Metronidazole	Tab 200 mg & 400 mg	Trichozole	2007
Metyrapone	Cap 250 mg	Metopirone	2009
Mexiletine hydrochloride	Cap 50 mg & 200 mg	Mexitil	2008
Miconazole	Oral gel 20 mg per g	Daktarin	2007
Miconazole nitrate	Crn 2%	Multichem	2008
Midodrine	Tab 2.5 mg & 5 mg	Gutron	2009
Misoprostol	Tab 200 µg	Cytotec	2009
Moclobemide	Tab 150 mg & 300 mg	Apo-Moclobemide	2009
Morphine hydrochloride	Oral liq 1 mg per ml	RA-Morph	2009
	Oral liq 2 mg per ml	RA-Morph	
	Oral liq 5 mg per ml	RA-Morph	
	Oral liq 10 mg per ml	RA-Morph	
Morphine sulphate	Inj 5 mg per ml, 1 ml	Mayne	2009
	Inj 15 mg per ml, 1 ml	Mayne	
	Cap long-acting 10 mg, 30 mg, 60 mg, 100 mg & 200 mg	m-Eslon	
	Tab immediate release 10 mg & 20 mg	Sevredol	
Morphine tartrate	Inj 80 mg per ml, 1.5 ml & 5 ml	Mayne	2009
Nadolol	Tab 40 mg & 80 mg	Apo-Nadolol	2007
Naphazoline hydrochloride	Eye drops 0.1%	Naphcon Forte	2008

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Sole Subsidised Supply Products – cumulative to February 2007

Generic Name	Presentation	Brand Name	Expiry Date*
Naproxen	Tab long-acting 750 mg	Naprosyn SR 750	2008
	Tab long-acting 1000 mg	Naprosyn SR 1000	
Neostigmine	Inj 2.5 mg per ml, 1 ml	AstraZeneca	2007
Nevirapine	Oral suspension 10 mg per ml	Viramune Suspension	2009
Nicotinic acid	Tab 50 mg	Apo-Nicotinic Acid	2009
Nifedipine	Tab long-acting 20 mg	Nyefax Retard	2009
Nonoxynol-9	Jelly 2%	Gynol II	2008
Norethisterone	Tab 350 µg	Noriday 28	2009
	Tab 5 mg	Primolut-N	2008
Norfloxacin	Tab 400 mg	Arrow-Norfloxacin	2008
Nortriptyline	Tab 10 mg & 25 mg	Norpress	2008
Nystatin	Vaginal crm 100,000 u per 5 g with applicators	Nilstat	2009
	Oral liq 100,000 u per ml	Nilstat	2008
	Cap 500,000 u	Nilstat	2007
	Tab 500,000 u	Nilstat	
Oxybutynin	Oral liq 5 mg per 5 ml	Apo-Oxybutynin	2007
	Tab 5 mg	Apo-Oxybutynin	
Pamidronate disodium	Inj 3 mg per ml, 5 ml	Pamisol	2008
	Inj 3 mg per ml, 10 ml	Pamisol	
	Inj 6 mg per ml, 10 ml	Pamisol	
Paracetamol	Tab 500 mg	Panadol	2008
	Suppos 125 mg & 250 mg	Panadol	
	Oral liq 120 mg per 5 ml	Junior Parapaed	
	Oral liq 250 mg per 5 ml	Six Plus Parapaed	
	Suppos 500 mg	Paracare	
Paracetamol with codeine	Tab 500 mg with 8 mg codeine	Codalgin	2008
Pergolide	Tab 0.25 mg & 1 mg	Permax	2008
Perhexiline maleate	Tab 100 mg	Pexsig	2009
Permethrin	Crn 5%	Lyderm	2007
Pethidine hydrochloride	Tab 50 mg & 100 mg	PSM	2007
Phenoxymethylpenicillin (Penicillin V)	Oral liq benzathine 125 mg per 5 ml	AFT	2007
	Oral liq benzathine 250 mg per 5 ml	AFT	
Pilocarpine	Eye drops 0.5%, 1%, 2%, 3%, 4% & 6%	Pilopt	2008
Pindolol	Tab 5 mg, 10 mg & 15 mg	Pindol	2007
Poloxamer	Oral drops 10%	Coloxyl	2008
Potassium chloride	Tab long-acting 600 mg	Span-K	2009
	Inj 75 mg per ml, 10 ml	AstraZeneca	2008
	Inj 150 mg per ml, 10 ml		

*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated.

Sole Subsidised Supply Products – cumulative to February 2007

Generic Name	Presentation	Brand Name	Expiry Date*
Prazosin hydrochloride	Tab 1 mg, 2 mg & 5 mg	Hyprosin	2007
Prednisone	Tab 1 mg, 2.5 mg, 5 mg & 20 mg	Apo-Prednisone	2008
Prednisolone sodium phosphate	Oral liq 5 mg per ml	Redipred	2007
Pregnancy tests - HCG urine	Cassette	MDS Quick Card	2009
Procaine penicillin	Inj 1.5 mega u	Cilicaine	2008
Prochlorperazine	Tab 5 mg	Antinaus	2007
Propranolol	Tab 10 mg & 40 mg Cap long-acting 160 mg	Cardinol Cardinol LA	2007
Pyridoxine hydrochloride	Tab 50 mg	Apo-Pyridoxine	2009
Quinapril	Tab 5 mg, 10 mg & 20 mg	Accupril	2008
Quinapril with hydrochlorothiazide	Tab 10 mg with hydrochlorothiazide 12.5 mg Tab 20 mg with hydrochlorothiazide 12.5 mg	Accuretic 10 Accuretic 20	2008
Quinine sulphate	Tab 200 mg Tab 300 mg	Q 200 Q 300	2009
Ranitidine hydrochloride	Tab 150 mg & 300 mg	Arrow Ranitidine	2008
Salbutamol	Oral liq 2 mg per 5 ml	Salapin	2007
Salbutamol with ipratropium bromide	Nebuliser soln, 2.5 mg with ipratropium bromide 0.5 mg	Duolin	2009
Selegiline hydrochloride	Tab 5 mg	Apo-Selegiline	2009
Silver sulphadiazine	Crn 1% with chlorhexidine digluconate 0.2%	Silvazine	2007
Sodium chloride	Inj 0.9%, 5 ml & 10 ml	AstraZeneca	2009
Sodium citro-tartrate	Grans effervescent 4 g sachets	Ural	2007
Sodium cromoglycate	Eye drops 2%	Cromolux	2008
Sulphasalazine	Tab 500 mg Tab EC 500 mg	Salazopyrin Salazopyrin EN	2009
Tar with triethanolamine lauryl sulphate and fluorescein	Soln 2.3% with triethanolamine lauryl sulphate and fluorescein sodium	Pinetarsol	2008
Temazepam	Tab 10 mg	Normison	2008
Terbinafine	Tab 250 mg	Apo-Terbinafine	2008
Timolol maleate	Tab 10 mg Eye Drops 0.25% & 0.5%	Apo-Timol Apo-Timop	2009 2007
Thiamine hydrochloride	Tab 50 mg	Apo-Thiamine	2009
Tranexamic acid	Tab 500 mg	Cyklokapron	2007
Triamcinolone acetonide	Crn & Oint 0.02% Dental Paste USP 0.1%	Aristocort Oracort	2008

**Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated.*

Sole Subsidised Supply Products – cumulative to February 2007

Generic Name	Presentation	Brand Name	Expiry Date*
Triamcinolone acetonide with gramicidin, neomycin and nystatin	Oint 1 mg with nystatin 100,000 u, neomycin sulphate 2.5 mg and gramicidin 250 µg per g	Kenacomb	2008
Triazolam	Tab 125 µg Tab 250 µg	Hypam Hypam	2008
Trimethoprim	Tab 300 mg	TMP	2008
Trimipramine maleate	Cap 25 mg & 50 mg	Tripres	2008
Tropisetron	Cap 5 mg	Navoban	2007
Urea	Crn 10%	Nutraplus	2008
Ursodeoxycholic acid	Cap 300 mg	Actigall	2008
Vancomycin hydrochloride	Inj 50 mg per ml, 10 ml	Pacific	2008
Verapamil hydrochloride	Tab long-acting 120 mg	Verpamil SR	2008
Vincristine sulphate	Inj 1 mg per ml, 1 ml Inj 1 mg per ml, 2 ml	Mayne	2009
Vitamins	Tab (BPC cap strength)	Healtheries	2009
Water	Purified for injection 5 ml & 10 ml	AstraZeneca	2007
Zinc and castor oil	Oint BP	Multichem	2008
Zinc sulphate	Cap 220 mg	Zincaps	2008
Zopiclone	Tab 7.5 mg	Apo-Zopiclone	2008

February changes are in bold type

*Expiry date of the Sole Subsidised Supply period is 30 June of the year indicated.

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

New Listings

Effective 1 February 2007

34	GLUCOSE BLOOD DIAGNOSTIC TEST METER - Subsidy by endorsement Meter 9.00	1	✓ Optium Xceed
	A diagnostic blood glucose test meter is subsidised for patients who begin insulin or sulphonylurea therapy after 1 March 2005. Only one meter per patient. No further prescriptions will be subsidised. The prescription must be endorsed accordingly.		
45	DEXTROSE - Available on a PSO * Inj 50%, 90 ml..... 11.25	1	✓ Biomed
81	TESTOSTERONE Transdermal patch 2.5 mg per day 80.00	60	✓ Androderm
96	ETHAMBUTOL HYDROCHLORIDE - Retail pharmacy-specialist – No patient co-payment payable * Tab 400 mg 10.98	56	✓ Myambutol S29
113	CITALOPRAM HYDROBROMIDE * Tab 20 mg 3.50	28	✓ Celapram
115	LAMOTRIGINE ▲ Tab chewable/dispersible 5 mg..... 15.00 ▲ Tab chewable/dispersible 25 mg..... 25.50 ▲ Tab chewable/dispersible 50 mg..... 43.40 ▲ Tab chewable/dispersible 100 mg..... 74.90 ▲ Tab chewable/dispersible 200 mg..... 127.30	56 56 56 56 56	✓ Arrow-Lamotrigine ✓ Arrow-Lamotrigine ✓ Mogine ✓ Arrow-Lamotrigine ✓ Mogine ✓ Arrow-Lamotrigine ✓ Mogine ✓ Arrow-Lamotrigine ✓ Mogine
120	CLOZAPINE - Hospital pharmacy [HP4]-specialist prescription Tab 50 mg 28.50 Tab 200 mg 91.20	50 50	✓ Clopine ✓ Clopine
121	PIMOZIDE - Retail pharmacy-specialist Tab 4 mg 11.78	20	✓ Orap Forte S29
121	RISPERIDONE - Retail pharmacy-specialist Tab 0.5 mg 5.20 Tab 1 mg 30.77 Tab 2 mg 61.53 Tab 3 mg 92.32 Tab 4 mg 123.05	20 60 60 60 60	✓ Ridal ✓ Ridal ✓ Ridal ✓ Ridal ✓ Ridal
186	AMINOACID FORMULA WITHOUT PHENYLALANINE - Hospital Pharmacy [HP3] - Special Authority Liquid (tropical) 22.50	250 ml OP	✓ Easiphen Liquid
	Special Authority for Subsidy – Form: SA0733		

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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New Listings - effective 1 January 2007

40	CALCIUM CARBONATE * Tab 1.25 g 4.50 * Tab 1.5 g 3.55 Note: Osteo~500 and Osteo~600 were subsidised from 21 December 2006.	100 60	✓ Osteo~500 ✓ Osteo~600
40	FERROUS FUMARATE WITH FOLIC ACID Tab 310 mg with folic acid 350 µg 3.95	60	✓ Ferro-F-Tabs
45	DEXTROSE * Inj 50%, 10 ml - Available on a PSO 27.50 * Inj 50%, 90 ml 135.00	5 12	✓ Biomed ✓ Biomed
45	SODIUM BICARBONATE – Not in combination Inj 8.4%, 50 ml - Available on a PSO 19.95 Inj 8.4%, 100 ml - Available on a PSO 20.50	1 1	✓ Biomed ✓ Biomed
46	WATER a) On a prescription or Practitioner's Supply Order only when on the same form as an injection listed in the Pharmaceutical Schedule requiring a solvent or diluent, or b) On a bulk supply order, or c) When used in the extemporaneous compounding of eye drops. Purified for inj 20 ml 5.04	20	✓ Multichem
83	OESTRADIOL WITH LEVONORGESTREL * Tab 2 mg with 75 µg levonorgestrel (36) and 2 mg oestradiol tab (48) 16.20	84	✓ Nuvelle
98	ACICLOVIR * Tab 200 mg 7.92	100	✓ Apo-Acyclovir
99	ACICLOVIR * Tab 400 mg 11.86	100	✓ Apo-Acyclovir
101	ABACAVIR SULPHATE WITH LAMIVUDINE - Special Authority - Hospital pharmacy [HP1] Tab 600 mg with lamivudine 300 mg 630.00 Special Authority for Subsidy - Form: SA0779 Note: Kivexa counts as two anti-retroviral medications for the purposes of the anti-retroviral Special Authority.	30	✓ Kivexa
110	FENTANYL - Only on a controlled drug form - Special Authority - Retail pharmacy – No patient co-payment payable Transdermal patch, matrix 25 µg per hour 55.23 Transdermal patch, matrix 50 µg per hour 100.52 Transdermal patch, matrix 75 µg per hour 139.18 Transdermal patch, matrix 100 µg per hour 171.22 Special Authority for Subsidy - Form: SA0743	5 5 5 5	✓ Durogesic ✓ Durogesic ✓ Durogesic ✓ Durogesic
128	CARBOPLATIN – PCT only - specialist Inj 10 mg per ml, 100 ml 135.65	1	✓ Carboplatin Ebewe
128	CISPLATIN – PCT only – specialist Inj 1 mg per ml, 50 ml 50.00 Inj 1 mg per ml, 100 ml 100.00	1 1	✓ Cisplatin Ebewe ✓ Cisplatin Ebewe

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

New Listings - effective 1 January 2007 (continued)

130	FLUOROURACIL SODIUM				
	Inj 50 mg per ml, 10 ml – PCT only – specialist	5.50	1	✓	Fluorouracil Ebewe
	Inj 50 mg per ml, 20 ml – PCT only – specialist	10.15	1	✓	Fluorouracil Ebewe
	Inj 50 mg per ml, 50 ml – PCT only – specialist	26.00	1	✓	Fluorouracil Ebewe
	Inj 50 mg per ml, 100 ml – PCT only – specialist	50.00	1	✓	Fluorouracil Ebewe
149	SALMETEROL				
	Aerosol inhaler CFC-free, 25 µg per dose	26.46	120 dose OP	✓	Serevent
153	SODIUM CROMOGLYCAT				
	Nasal spray, 4%	13.50	22 ml OP	✓	Rex
158	POLYVINYL ALCOHOL				
	* Eye drops 1.4%	2.95	15 ml OP	✓	Vistil
	* Eye drops 3%	3.80	15 ml OP	✓	Vistil Forte
171	ORAL SUPPLEMENT 1KCAL/ML - Hospital Pharmacy [HP3] - Special Authority				
	Powder (vanilla)	11.50	900 g OP	✓	Fortisip Powder
	Special Authority for Subsidy – Form: SA0583				

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per
Brand or
Generic Mnfr
✓ **fully subsidised**

Changes to Restrictions

Effective 1 February 2007

60	CARVEDILOL –Special Authority–Retail pharmacy			
	Tab 6.25 mg	21.00	30	✓ Dilatrend
	Tab 12.5 mg	27.00	30	✓ Dilatrend
	Tab 25 mg	33.75	30	✓ Dilatrend

Special Authority for Subsidy – Form: SA0633

Initial application only from a general practitioner or relevant specialist. Approvals valid without further renewal unless notified for applications meeting the following criteria:

Both:

1 Patient is already on an ACE inhibitor or Angiotensin II Antagonist; and

2 Any of the following:

2.1 Both:

2.1.1 Symptomatic heart failure NYHA functional class II-III; and

2.1.2 Patient has been treated with metoprolol and is intolerant to metoprolol or has demonstrated a sub-optimal response to metoprolol; or

2.2 Symptomatic heart failure NYHA functional class II-IV; or

2.3 Patient has left ventricular systolic dysfunction with an ejection fraction of less than 35%.

Note:

Where possible treatment should be initiated by or on the recommendation of a specialist.

129	CYTARABINE			
	Inj 100 mg per ml, 5 ml 500 mg			
	- Retail pharmacy-specialist – PCT	95.36	5	✓ Mayne
	Inj 100 mg per ml, 10 ml 1+g			
	- Retail pharmacy-specialist – PCT	42.65	1	✓ Mayne

159	CHARCOAL			
	* Oral liq 50 g per 250 ml – Only on a PSO	37.75	250 ml OP	✓ Carbosorb-X S29

Note: Because activated charcoal is used in acute poisonings, patient details required under Section 29 of the Medicines Act may be retrospectively provided to the supplier.

165	GLYCEROL - Only in combination			
	* Liquid	24.75	2,000 ml	✓ MidWest ✓ PSM

(Only in extemporaneously compounded **oral liquid preparations** methadone mixture, codeine linctus diabetic, codeine linctus paediatric or phenobarbitone oral liquid)

Effective 1 January 2007

69	POVIDONE IODINE			
	Alcohol skin preparation 10%	8.13 (17.39)	500 ml	✓ Betadine Skin Prep Orion
	Skin preparation, povidone iodine 10% with 30% alcohol	8.13	500 ml	✓ Betadine Skin Prep
	Skin preparation, povidone iodine 10% with 70% alcohol	8.13 (17.39)	500 ml	Orion

Note: this is a description change only.

95	NYSTATIN			
	Tab 500,000 u	9.60	50	✓ Nilstat S29

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ **fully subsidised**

Changes to Restrictions - effective 1 January 2007 (continued)

98	ACICLOVIR			
	* Tab dispersible 200 mg	48.75	90	✓ Zovirax S29
	Zovirax tab dispersible 200 mg now has Ministerial consent for distribution, so Section 29 criteria no longer applies.			
122	TRIFLUOPERAZINE HYDROCHLORIDE			
	Tab 1 mg	9.83	100	
		(10.22)		Stelazine S29

continued...

Patients pay a manufacturer's surcharge when
the Manufacturer's Price is greater than the Subsidy

S29 Unapproved medicine supplied under Section 29
‡ safety cap reimbursed **Sole Subsidised Supply**

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ **fully subsidised**

Changes to Subsidy and Manufacturer's Price

Effective 1 February 2007

38	HYDROGEN PEROXIDE (↑ subsidy) * Soln 10 vol.....	1.28	100 ml	✓ PSM
	a) maximum 200 ml per prescription			
38	THYMOL GLYCERIN (↑ subsidy) * Compound, BPC.....	9.15	500 ml	✓ PSM
39	CALCITRIOL - Retail pharmacy-specialist (↓ subsidy) * Cap 0.25 µg.....	13.45 (52.63)	100	Rocaltrol
	* Cap 0.5 µg.....	24.95 (87.98)	100	Rocaltrol
40	SODIUM FLUORIDE (↑ subsidy) Tab 1.1 mg	4.00	100	✓ PSM
48	SIMVASTATIN - See Prescribing Guideline (↓ subsidy) * Tab 10 mg	8.33	30	✓ Lipex
	* Tab 20 mg	10.13	30	✓ Lipex
	* Tab 40 mg	18.00	30	✓ Lipex
	* Tab 80 mg	21.00	30	✓ Lipex
65	MENTHOL - Only in combination (↓ price) Crystals.....	7.40	25 g	✓ PSM
	a) Only in combination with aqueous cream, 10% urea cream, wool fat with mineral oil lotion, 1% hydrocortisone with wool fat and mineral oil lotion, and glycerol, paraffin and cetyl alcohol lotion.			
68	CETOMACROGOL (↑ subsidy) * Cream BP.....	4.35	500 g	✓ PSM
69	GAMMA BENZENE HEXACHLORIDE (↑ subsidy) Crm 1%	3.50	50 g OP	✓ Benhex
70	COAL TAR - Only in combination (↑ subsidy) Soln BP.....	36.48	500 ml	✓ PSM
	a) Up to 10%;			
	b) Only in combination with a dermatological base or proprietary Topical Corticosteroid - Plain; (refer page 160)			
	c) With or without other dermatological galenicals.			
70	SALICYLIC ACID - Only in combination (↑ subsidy) Powder	18.88	250 g	✓ PSM
	a) Only in combination with a dermatological base or proprietary Topical Corticosteroid - Plain or collodian flexible; (refer page 160)			
	b) With or without other dermatological galenicals.			
	c) Maximum 20 g or 20 ml per prescription when prescribed with white soft paraffin or collodian flexible.			
92	AMOXYCILLIN (↓ subsidy) Grans for oral liq 125 mg per 5 ml - Available on a PSO	1.00 (1.08)	100 ml	Ospamox
	Grans for oral liq 250 mg per 5 ml - Available on a PSO	1.27 (1.38)	100 ml	Ospamox

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Changes to Subsidy and Manufacturer's Price - effective 1 February 2007 (continued)

95	METRONIDAZOLE (↑ subsidy) Oral liq benzoate 200 mg per 5 ml	25.00	100 ml	✓ Flagyl - S
96	ISONIAZID - Retail pharmacy-specialist – No patient co-payment payable (↓ subsidy) * Tab 100 mg	20.50	100	✓ PSM
106	PENICILLAMINE - Retail pharmacy-specialist (↑ subsidy) Tab 125 mg	61.93	100	✓ D-Penamime
	Tab 250 mg	98.98	100	✓ D-Penamime
112	DOTHIEPIN HYDROCHLORIDE (↑ subsidy) Cap 25 mg	4.75	100	✓ Dopress
117	CYCLIZINE HYDROCHLORIDE - Special Authority available - Retail pharmacy (↓ alternate subsidy) Tab 50 mg	1.26 (4.20)	10	Marzine
	Special Authority for Manufacturers Price - Form: SA0178 Note: The alternate subsidy by Special Authority for Marzine tab 50 mg will be \$1.99 per 10 tablets.			
126	DEXAMPHETAMINE SULPHATE (↓ subsidy) a) Special Authority - Retail pharmacy b) Controlled Drug Form Tab 5 mg	18.00	100	✓ PSM
	Special Authority for Subsidy - Form: SA0696			
128	CISPLATIN – PCT only – specialist (↓ subsidy) Inj 1 mg per ml, 50 ml	19.00	1	✓ Mayne
	Inj 1 mg per ml, 100 ml	38.00	1	✓ Mayne
129	CYTARABINE (↓ subsidy) Inj 100 mg per ml, 5 ml - Retail pharmacy-specialist – PCT	95.36	5	✓ Mayne
	Inj 100 mg per ml, 10 ml - Retail pharmacy-specialist – PCT	42.65	1	✓ Mayne
	Inj 100 mg per ml, 20 ml - PCT only – specialist	34.47	1	✓ Mayne
132	ETOPOSIDE (↓ subsidy) Inj 20 mg per ml, 5 ml - Hospital pharmacy [HP1] - specialist – PCT	25.00	1	✓ Mayne
142	INTERFERON BETA-1-BETA - Access by application (↑ subsidy) Inj 8 million iu per 1 ml	1,364.09	15	✓ Betaferon
159	NALOXONE HYDROCHLORIDE - Only on a PSO (↑ subsidy) * Inj 400 µg per ml, 1 ml	33.00	5	✓ Mayne
165	CHLOROFORM - Only in combination (↑ subsidy) Chloroform BP	25.50	500 ml	✓ PSM
	(Only in aspirin and chloroform application)			
165	COLLODION FLEXIBLE (↑ subsidy)	19.30	100 ml	✓ PSM

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Changes to Subsidy and Manufacturer's Price - effective 1 February 2007 (continued)

165	GLYCEROL - Only in combination (↓ price) * Liquid.....24.75	2,000 ml	✓ PSM
	(Only in extemporaneously compounded oral liquid preparations)		
165	PROPYLENE GLYCOL (↑ subsidy).....17.70	500 ml	✓ PSM
	(Only in extemporaneously compounded methylhydroxybenzoate 10% solution)		

Effective 1 January 2007

31	INSULIN ASPART (↓ subsidy) ▲ Inj 100 u per ml, 3 ml53.57	5	✓ NovoRapid Penfill
	▲ Inj 100 u per ml, 10 ml31.43	1	✓ NovoRapid
36	MUCILAGINOUS LAXATIVES WITH STIMULANTS (↑ price) * Dry.....4.40	250 g OP	Granocol
	(12.00)		
45	DEXTROSE (↑ subsidy) * Inj 50% 10 ml - Available on a PSO.....8.25	5	✓ Mayne
66	BETAMETHASONE DIPROPIONATE (↑ price) Crm 0.05%2.96	15 g OP	Diprosone
	(6.91)		
	Crm 0.05% in propylene glycol base4.33	30 g OP	Diprosone OV
	(13.83)		
	Oint 0.05% in propylene glycol base4.33	30 g OP	Diprosone OV
	(13.83)		
71	PODOPHYLOTOXIN (↑ price) Soln 0.5%32.00	3.5 ml OP	Condyline
	(38.00)		
	a) Only on a prescription; b) Maximum 3.5 ml per prescription.		
76	OXYTOCIN - Available on a PSO (↑ subsidy) Inj 5 iu per ml, 1 ml9.88	5	✓ Syntocinon
	Inj 10 iu per ml, 1 ml12.36	5	✓ Syntocinon
82	OESTRADIOL (↑ price) * TDDS 3.9 mg per day (releases 50 µg of oestradiol per day).....4.12	4	Climara 50
	(14.50)		
	a) Only on a prescription; b) No more than 1 patch per week; c) Higher subsidy of \$13.18 per 4 with Special Authority.		
82	OESTRADIOL (↑ price) * TDDS 7.8 mg per day (releases 100 µg of oestradiol per day)....7.05	4	Climara 100
	(17.75)		
	a) Only on a prescription; b) No more than 1 patch per week; c) Higher subsidy of \$16.14 per 4 with Special Authority.		

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Changes to Subsidy and Manufacturer's Price - effective 1 January 2007 (continued)

104	DICLOFENAC SODIUM - Special Authority available - Retail pharmacy (↑ price) * Tab 50 mg dispersible	1.50 (8.00)	20		Voltaren D
117	CYCLIZINE HYDROCHLORIDE - Special Authority available - Retail pharmacy (↑ price) Tab 50 mg	1.26 (4.20)	10		Marzine
126	METHYLPHENIDATE HYDROCHLORIDE (↓ subsidy) a) Special Authority - Retail pharmacy b) Controlled Drug Form Tab long-acting 20 mg	36.50	100	✓	Ritalin SR
	Special Authority for Subsidy - Form: SA0696				
128	CISPLATIN – PCT only – specialist (↓ subsidy) Inj 1 mg for ECP	1.24	1 mg	✓	Baxter
159	CHARCOAL (↑ subsidy) * Oral liq 50 g per 250 ml – Only on a PSO	37.75	250 ml OP	✓	Carbosorb-X S29

Changes to Brand Name

Effective 1 February 2007

95	COLISTIN SULPHOMETHATE a) Hospital pharmacy [HP3]-specialist b) Subsidy by endorsement Only if prescribed for a dialysis or cystic fibrosis patient and the prescription is endorsed accordingly. Inj 150 mg	49.54	1	✓ Colistin-Link Colymycin-M
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Changes to Sole Subsidised Supply

Effective 1 February 2007

For the list of new Sole Subsidised Supply products effective 1 February 2007 refer to the bold entries in the cumulative Sole Subsidised Supply table pages 9-17.

Changes to PSO

Effective 1 February 2007

191	Blood and Blood Forming Organs Dextrose	Inj 50%, 90 ml	5
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Effective 1 January 2007

191	Blood and Blood Forming Organs Sodium bicarbonate	Inj 8.4%, 50 ml Inj 8.4%, 100 ml	5 5
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▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details
Schedule page ref

Subsidy
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\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Delisted Items

Effective 1 February 2007

26	POLYSILOXANE * Tab aluminium hydroxide 250 mg with magnesium trisil 120 mg, magnesium hydroxide 120 mg and polysiloxane 10 mg.....	15.00 (18.70)	500		Gastrogel
30	INSULIN ISOPHANE ▲ Inj human 100 u per ml, 3 ml..... ▲ Inj human 100 u per ml	29.86 17.68	5 10 ml OP	✓ ✓	Humulin N Humulin N
30	INSULIN ISOPHANE WITH INSULIN NEUTRAL ▲ Inj human with neutral insulin 100 u per ml, 3 ml ▲ Inj human with neutral insulin 100 u per ml	42.66 25.26	5 10 ml OP	✓ ✓	Humulin 70/30 Humulin 70/30
36	DANTHRON WITH POLOXAMER - Only on a prescription Note: Danthron with poloxamer is only approved for the prevention or treatment of constipation in the terminally ill. Studies in rats have associated use of danthron with tumours. Oral liq 25 mg with poloxamer 200 mg per 5 ml..... Oral liq 75 mg with poloxamer 1g per 5 ml.....	4.00 8.30	300 ml 300 ml	✓ ✓	Codalax Codalax Forte
38	ASCORBIC ACID a) No more than 100 mg per dose b) Only on a prescription * Tab 100 mg	13.00 (17.25) 2.60 (3.45)	500 100		Alpha Ascorbic Acid Apo-Ascorbic Acid
48	SIMVASTATIN - See Prescribing Guideline * Tab 5 mg	9.30	30	✓	Zocor
65	CALAMINE a) Not in combination; and b) Only on a prescription. Crm, aqueous, BP	15.10 (21.75)	500 g		PSM
95	TINIDAZOLE Tab 500 mg	41.67	40	✓	Dyzole
122	FLUPHENAZINE DECANOATE - Retail pharmacy-specialist Inj 25 mg per ml, 2 ml - Available on a PSO	97.50	5	✓	Mayne
157	DIPIVEFRIN HYDROCHLORIDE - Retail pharmacy-specialist ▲ Eye drops 0.1%	5.50	10 ml OP	✓	Propine

Effective 1 January 2007

28	DICYCLOMINE HYDROCHLORIDE * Tab 10 mg - Available on a PSO	4.95	100	✓	Merbentyl
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Patients pay a manufacturer's surcharge when the Manufacturer's Price is greater than the Subsidy

S29 Unapproved medicine supplied under Section 29
‡ safety cap reimbursed **Sole Subsidised Supply**

Check your Schedule for full details Schedule page ref	Subsidy (Mnfr's price) \$	Per	Brand or Generic Mnfr ✓ fully subsidised
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Delisted Items - effective 1 January 2007 (continued)

34	INSULIN SYRINGES, disposable with attached needle Maximum of 100 dev per prescription. * Syringe 0.3 ml with 30 g x 8 mm needle	15.92 1.59 (1.99)	100 10	✓ B-D Ultra Fine II
	* Syringe 0.5 ml with 30 g x 8 mm needle	15.92 1.59 (1.99)	100 10	B-D Ultra Fine II ✓ B-D Ultra Fine II
	* Syringe 1 ml with 30 g x 8 mm needle	15.92 1.59 (1.99)	100 10	B-D Ultra Fine II ✓ B-D Ultra Fine II B-D Ultra Fine II
40	CALCIUM LACTATE-GLUCONATE * Tab 1 g	7.47 2.49 (3.51)	30 10	✓ Calcium-Sandoz 1000 Calcium-Sandoz 1000
75	ETHINYLOESTRADIOL WITH NORETHISTERONE * Tab ethinyloestradiol 35 µg with norethisterone 500 µg (7) and tab ethinyloestradiol 35 µg with norethisterone 1 mg (9) and tab ethinyloestradiol 35 µg with norethisterone 500 µg (5) and 7 inert tab	6.62 (13.80)	84	Synphasic 28
	a) Available on a PSO b) Higher subsidy of \$13.80 per 84 with Special Authority			
81	CYPROTERONE ACETATE - Hospital pharmacy [HP3]-specialist Tab 50 mg	23.50	50	✓ Pacific Cyproterone
91	CEFTRIAXONE SODIUM a) Hospital pharmacy [HP3] b) Subsidy by endorsement c) Available on a PSO Subsidised only if prescribed for a dialysis or cystic fibrosis patient, or the treatment of confirmed ciprofloxacin-resistant gonorrhoea, or the treatment of suspected meningitis in patients who have a known allergy to penicillin and the prescription or PSO is endorsed accordingly.	3.99 (7.00) 5.40 (9.00)	1 1	Rocephin Rocephin
92	AMOXYCILLIN Drops 125 mg per 1.25 ml	4.75	30 ml OP	✓ Ospamox Paediatric Drops
129	CALCIUM FOLINATE Inj 15 mg - Hospital pharmacy [HP1] - specialist – PCT	57.20	5	✓ Leucovorin Calcium
132	DOXORUBICIN - PCT only – specialist Inj 50 mg	49.95	1	✓ Mayne

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Delisted Items - effective 1 January 2007 (continued)

132	EPIRUBICIN - PCT only – specialist			
	Inj 2 mg per ml, 5 ml	29.00	1	✓ Pharmorubicin
	Inj 2 mg per ml, 25 ml	136.50	1	✓ Pharmorubicin
147	PROMETHAZINE HYDROCHLORIDE			
	* Inj 25 mg per ml, 1 ml - Available on a PSO	12.68 (20.24)	10	Phenergan
157	CARBACHOL - Retail pharmacy-specialist			
	* Eye drops 1.5%	6.82	15 ml OP	✓ Isopto Carbachol
157	HOMATROPINE HYDROBROMIDE			
	* Eye drops 5%	8.73	15 ml OP	✓ Isopto Homatropine
158	HYPROMELOSE			
	* Eye drops 1%	1.91	15 ml OP	✓ Methopt Forte
169	FAT SUPPLEMENT - Hospital Pharmacy [HP3] - Special Authority			
	Emulsion (neutral)	61.50	1,000 ml OP	✓ Calogen
	Special Authority for Subsidy – Form: SA0580			

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$

Per

Brand or
Generic Mnfr
✓ **fully subsidised**

Items to be Delisted

Effective 1 April 2007

40	CALCIUM CARBONATE			
	* Tab 1.25 g	4.50	100	✓ Osteo~500
	* Tab 1.5 g	3.55	60	✓ Osteo~600
126	METHYLPHENIDATE HYDROCHLORIDE			
	a) Special Authority - Retail pharmacy			
	b) Controlled Drug Form			
	Tab long-acting 20 mg	36.50	100	✓ Ritalin SR
	Special Authority for Subsidy - Form: SA0696			

Effective 1 May 2007

39	CALCITRIOL - Retail pharmacy-specialist (↓ subsidy)			
	* Cap 0.25 µg	13.45	100	
		(52.63)		Rocaltrol
	* Cap 0.5 µg	24.95	100	
		(87.98)		Rocaltrol
92	AMOXICILLIN (↓ subsidy)			
	Grans for oral liq 125 mg per 5 ml - Available on a PSO	1.00	100 ml	
		(1.08)		Ospamox
	Grans for oral liq 250 mg per 5 ml - Available on a PSO	1.27	100 ml	
		(1.38)		Ospamox
117	CYCLIZINE HYDROCHLORIDE - Special Authority available - Retail pharmacy			
	Tab 50 mg	1.26	10	
		(4.05)		Marzine
	Special Authority for Manufacturers Price - Form: SA0178			

Effective 1 July 2007

83	OESTRADIOL WITH LEVONORGESTREL – See prescribing guideline			
	* Tab 2 mg with 75 µg levonorgestrel (12) and			
	2 mg oestradiol tab (16)	5.40	28	✓ Nuvelle
110	FENTANYL - Only on a controlled drug form - Special Authority - Retail pharmacy – No patient co-payment payable			
	Transdermal patch 2.5 mg, 25 µg per hour	55.23	5	✓ Durogesic
	Transdermal patch 5 mg, 50 µg per hour	100.52	5	✓ Durogesic
	Transdermal patch 7.5 mg, 75 µg per hour	139.18	5	✓ Durogesic
	Transdermal patch 10 mg, 100 µg per hour	171.22	5	✓ Durogesic
	Special Authority for Subsidy - Form: SA0743			
122	TRIFLUOPERAZINE HYDROCHLORIDE			
	Tab 1 mg	9.83	112	
		(10.22)		Stelazine Section 29
				S29
157	CARBACHOL - Retail pharmacy-specialist			
	* Eye drops 3%	6.99	15 ml OP	✓ Isopto Carbachol

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

* Three months or six months, as applicable, dispensed all-at-once

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$ Per

Brand or
Generic Mnfr
✓ fully subsidised

Items to be Delisted - effective 1 July 2007 (continued)

158	PHENYLEPHRINE HYDROCHLORIDE * Eye drops 0.12%	3.25	15 ml OP	✓ Isopto Frin
158	POLYVINYL ALCOHOL WITH POVIDONE * Eye drops 1.4% with povidone 0.6%	3.62	15 ml OP	✓ Tears Plus
171	ORAL SUPPLEMENT 1KCAL/ML - Hospital Pharmacy [HP3] - Special Authority Powder (vanilla)	11.50	900 g OP	✓ Nutridrink
	Special Authority for Subsidy – Form: SA0583			

Effective 1 August 2007

28	OILY PHENOL * Inj 5%, 5 ml.....	71.71	5	✓ Mayne
45	DEXTROSE * Inj 50%, 90 ml.....	135.00	12	✓ Biomed
45	SODIUM BICARBONATE – Not in combination Inj 8.4%, 10 ml.....	111.20	10	✓ Pharmalab S29
71	SUNSCREENS, PROPRIETARY - Retail pharmacy-specialist Oint.....	5.00 (15.00)	14 g OP	R V Paque
91	CEPHRADINE - Hospital pharmacy [HP3] Cap 250 mg	14.50	24	✓ Velosef
	Cap 500 mg	19.85	24	✓ Velosef
	Inj 500 mg - Subsidy by endorsement	16.78	5	✓ Velosef
	Only if prescribed for a dialysis or cystic fibrosis patient and the prescription is endorsed accordingly.			
	Inj 1 g - Subsidy by endorsement	31.59	5	✓ Velosef
	Only if prescribed for a dialysis or cystic fibrosis patient and the prescription is endorsed accordingly.			
96	ETHAMBUTOL - Retail pharmacy-specialist – No patient co-payment payable * Tab 400 mg	19.60	100	✓ Myambutol
	Note – the 100 tab pack is being replaced by a 56 tab pack			
121	PIMOZIDE - Retail pharmacy-specialist Tab 2 mg	14.72	50	✓ Orap
186	AMINOACID FORMULA WITHOUT PHENYLALANINE - Hospital Pharmacy [HP3] - Special Authority Liquid (grapefruit)	22.50	250 ml OP	✓ Easiphen Liquid
	Special Authority for Subsidy – Form: SA0733			

Effective 1 October 2007

149	SALMETEROL - See Prescribing Guideline Aerosol inhaler, 25 µg per dose	26.46	120 dose OP	✓ Serevent
	Note: this product has been replaced by Serevent aerosol inhaler CFC-free			

Check your Schedule for full details
Schedule page ref

Subsidy
(Mnfr's price)
\$

Per

Brand or
Generic Mnfr
✓ **fully subsidised**

Items to be Delisted - effective 1 February 2008

- 34 GLUCOSE BLOOD DIAGNOSTIC TEST METER - Subsidy by endorsement
 Meter 9.00 1 ✓ **Optium**
 A diagnostic blood glucose test meter is subsidised for patients who begin insulin or sulphonylurea therapy after
 1 March 2005.
 Only one meter per patient. No further prescriptions will be subsidised.
 The prescription must be endorsed accordingly.

▲ Three months supply may be dispensed at one time if endorsed "certified exemption" by the prescriber.

* Three months or six months, as applicable, dispensed all-at-once

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II

Effective 1 February 2007

CEFTAZIDIME SODIUM (amended description)

Inj 500 mg.....	Fortum	7.11	1
Inj 1 g.....	Fortum	14.08	1
Inj 2 g.....	Fortum	28.13	1

CEPHRADINE

Cap 250 mg.....	Velosef	14.50	24
Cap 500 mg.....	Velosef	19.85	24
Inj 500 mg.....	Velosef	16.78	5
Inj 1 g.....	Velosef	31.59	5

Note – Velosef capsules and injections to be delisted from 1 February 2007.

CISPLATIN (↓ price)

Inj 1 mg per ml, 50 ml.....	Mayne	19.00	1
Inj 1 mg per ml, 100 ml.....	Mayne	38.00	1

CITALOPRAM HYDROBROMIDE (↓ price)

Tab 20 mg.....	Celapram	3.50	28
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CLOZAPINE

Tab 25 mg.....	Clopine	22.00	50
Tab 50 mg.....	Clopine	28.50	50
Tab 100 mg.....	Clopine	57.00	50
Tab 200 mg.....	Clopine	91.20	50

CYTARABINE (↓ price)

Inj 100 mg per ml, 5 ml.....	Mayne	95.36	5
Inj 100 mg per ml, 10 ml.....	Mayne	42.65	1
Inj 100 mg per ml, 20 ml.....	Mayne	34.47	1

DEXAMPHETAMINE SULPHATE

Tab 5 mg.....	PSM	18.00	100
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DEXTROSE

Inj 50%, 90 ml.....	Biomed	135.00	12	1%	Dec-06	(B)
	Biomed	11.25	1	1%	Dec-06	(B)

DOTHIEPIN HYDROCHLORIDE

Cap 25 mg.....	Dopress	4.75	100
Tab 75 mg.....	Dopress	8.75	100

EPTIFIBATIDE

Inj 2 mg per ml, 10 ml.....	Integrilin	111.00	1
Inj 0.75 mg per ml, 100 ml.....	Integrilin	324.00	1

ETOPOSIDE (↓ price)

Inj 20 mg per ml, 5 ml.....	Mayne	25.00	1
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Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 February 2007 (continued)

INFLIXIMAB						
Powder for inj 100 mg.....	Remicade	1,227.00	1			
ISONIAZID						
Tab 100 mg.....	PSM	20.50	100			
LAMOTRIGINE						
Tab chewable/dispersible 5 mg.....	Arrow-Lamotrigine	15.00	56			
Tab chewable/dispersible 25 mg.....	Arrow-Lamotrigine	25.50	56			
	Mogine	25.50	56			
Tab chewable/dispersible 50mg.....	Arrow-Lamotrigine	43.40	56			
	Mogine	43.40	56			
Tab chewable/dispersible 100mg ...	Arrow-Lamotrigine	74.90	56			
	Mogine	74.90	56			
Tab chewable/dispersible 200 mg...	Arrow-Lamotrigine	127.30	56			
	Mogine	127.30	56			
MOMETASONE FUROATE						
Crm 0.1%.....	Elocon	3.96	15 g			
Crm 0.1%.....	Elocon	10.82	45 g			
Oint 0.1%.....	Elocon	3.96	15 g			
Oint 0.1%.....	Elocon	10.82	45 g			
Lotn 0.1%.....	Elocon	4.80	30 ml			
NALOXONE HYDROCHLORIDE († price)						
Inj 400 mcg per ml, 1 ml	Mayne	33.00	5			
PENICILLAMINE						
Tab 125 mg.....	D-Penammine	61.93	100			
Tab 250 mg.....	D-Penammine	98.98	100			
POLYETHYLENE GLYCOL WITH SODIUM SULPHATE († price)						
Powder, sachets.....	Klean-Prep	13.80	4			
RISPERIDONE						
Tab 0.5 mg.....	Ridal	5.20	20			
Tab 1 mg.....	Ridal	30.77	60			
Tab 2 mg.....	Ridal	61.53	60			
Tab 3 mg.....	Ridal	92.32	60			
Tab 4 mg.....	Ridal	123.05	60			

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 February 2007 (continued)

SODIUM BICARBONATE

Inj 8.4%, 50 ml	Biomed	239.40	12
	Biomed	19.95	1
Inj 8.4%, 100 ml	Biomed	246.00	12
	Biomed	20.50	1
	Mayne	11.12	1

TESTOSTERONE

Transdermal patch, 2.5 mg per day	Androderm	80.00	60
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Section H changes to Part II - effective 1 January 2007

ABACAVIR SULPHATE WITH LAMIVUDINE

Tab 600 mg with lamivudine 300 mg	Kivexa	630.00	30
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ACTIVATED CHARCOAL

Oral liq 50 g per 250 ml	Carbosorb-X	37.75	250 ml
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CARBOPLATIN

Inj 10 mg per ml, 100 ml	Carboplatin Ebewe	135.65	1
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CISPLATIN

Inj 1 mg per ml, 50 ml	Cisplatin Ebewe	50.00	1
Inj 1 mg per ml, 100 ml	Cisplatin Ebewe	100.00	1

DEXTROSE

Inj 50%, 10 ml	Biomed	27.50	5
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FENTANYL

Transdermal patch 2.5 mg, 25 µg per hour	Durogesic	55.23	5
Transdermal patch 5 mg, 50 µg per hour	Durogesic	100.52	5
Transdermal patch 7.5 mg, 75 µg per hour	Durogesic	139.18	5
Transdermal patch 10 mg, 100 µg per hour	Durogesic	171.22	5

Note – Durogesic transdermal patch to be delisted from 1 January 2007. Please note that Durogesic patches, matrix are available, although not listed in Section H of the Pharmaceutical Schedule.

FERROUS FUMARATE WITH FOLIC ACID

Tab 310 mg with folic acid 350 µg	Ferro-F-Tabs	3.95	60
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Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 January 2007 (continued)

FLUOROURACIL SODIUM

Inj 50 mg per ml, 10 ml	Fluorouracil Ebewe	5.50	1			
Inj 50 mg per ml, 20 ml	Fluorouracil Ebewe	10.15	1			
Inj 50 mg per ml, 50 ml	Fluorouracil Ebewe	26.00	1			
Inj 50 mg per ml, 100 ml	Fluorouracil Ebewe	50.00	1			

GADOBENDATE DIMEGLUMINE

Inj 0.5 g per litre, 10 ml	Multihance	324.74	10			
Inj 0.5 g per litre, 20 ml	Multihance	636.28	10			

IODIXANOL

Inj 270 mg per ml (iodine equivalent), 50 ml	Visipaque	235.60	10	5%	Mar-07	(B)
Inj 270 mg per ml (iodine equivalent), 100 ml	Visipaque	471.30	10	5%	Mar-07	(B)
Inj 320 mg per ml (iodine equivalent), 50 ml	Visipaque	235.60	10	5%	Mar-07	(B)
Inj 320 mg per ml (iodine equivalent), 100 ml	Visipaque	471.30	10	5%	Mar-07	(B)
Inj 320 mg per ml (iodine equivalent), 200 ml	Visipaque	565.56	6	5%	Mar-07	(B)

IOHEXOL

Inj 240 mg per ml (iodine equivalent), 50 ml	Omnipaque	88.00	10	5%	Mar-07	Iomeron Isovue 50 ml & 100 ml Optiray Ultravist
Inj 300 mg per ml (iodine equivalent), 20 ml	Omnipaque	35.40	6	5%	Mar-07	Iomeron Isovue Optiray 20 ml & 30 ml Ultravist
Inj 300 mg per ml (iodine equivalent), 50 ml	Omnipaque	88.00	10	5%	Mar-07	Iomeron Isovue Optiray Ultraject 50 ml & 75 ml Ultravist

continued...

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 January 2007 (continued)

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Inj 300 mg per ml (iodine equivalent), 100 ml	Omnipaque	176.00	10	5%	Mar-07	Iomeron Isovue Optiray 100 ml, 150 ml & 200 ml Ultraject 125 ml Ultravist
Inj 300 mg per ml (iodine equivalent), 500 ml	Omnipaque	527.88	6	5%	Mar-07	(B)
Inj 350 mg per ml (iodine equivalent), 20 ml	Omnipaque	35.40	6	5%	Mar-07	Iomeron Isovue Optiray 20 ml & 30 ml Ultraject 30 ml Ultravist 30 ml
Inj 350 mg per ml (iodine equivalent), 50 ml	Omnipaque	88.00	10	5%	Mar-07	Iomeron Isovue Optiray Ultraject Ultravist
Inj 350 mg per ml (iodine equivalent), 75 ml	Omnipaque	132.00	10	5%	Mar-07	Iomeron Optiray Ultraject
Inj 350 mg per ml (iodine equivalent), 100 ml	Omnipaque	176.00	10	5%	Mar-07	Iomeron Isovue Optiray Ultraject 100 ml & 125 ml Ultravist
Inj 350 mg per ml (iodine equivalent), 200 ml	Omnipaque	211.20	6	5%	Mar-07	Iomeron Isovue Optiray Ultravist
Inj 350 mg per ml (iodine equivalent), 500 ml	Omnipaque	879.80	10	5%	Mar-07	(B)
MANGAFODIPIR						
Inf 0.01 mmol per ml, 50 ml	Teslascan	250.00	1			
MEGLUMINE DIATRIZOATE WITH SODIUM AMIDOTRIZOATE						
Oral soln 660 mg per ml with sodium amidotrizoate 100 mg per ml, 100 ml	Gastrografin	190.00	10	5%	Mar-07	Gastroview 120 ml

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 January 2007 (continued)

MEGLUMINE GADOPENTETATE

Inj 469 mg per ml (equivalent to 0.5 mmol per ml), 10 ml pre filled syringe	Magnevist	84.64	5	5%	Mar-07	Dotarem Omniscan 5 ml & 10 ml
Inj 469 mg per ml (equivalent to 0.5 mmol per ml), 20 ml	Magnevist	33.85	1	5%	Mar-07	Dotarem 15 ml & 20 ml Omniscan 15 ml & 20 ml

POLYVINYL ALCOHOL

Eye drops 1.4%	Vistil	2.95	15 ml			
Eye drops 3%	Vistil Forte	3.80	15 ml			

PROPOFOL

Inj 2%, 50 ml	Diprivan	25.50	1			
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Note – Diprivan inj 2%, 50 ml delisted 1 January 2007.

SALMETEROL

Aerosol inhaler CFC-free 25 µg per dose	Serevent	26.46	120 dose			
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SODIUM BICARBONATE

Inj 8.4%, 50 ml	Biomed	239.40	12			
Inj 8.4%, 100 ml	Biomed	246.00	12			

SODIUM DIOTRIZOATE

Powder for oral soln 3.705 g, 10 ml sachet	Ioscan	149.50	50			
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WATER

Purified for inj 20 ml	Multichem	5.04	20	1%	Mar-07	Pharmacia
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Effective 1 December 2006

ACICLOVIR (HSS implementation delayed)

Tab dispersible 200 mg	Lovir	1.98	25	1%	Mar-07 Dec-06	Acicvir Alpha-Aciclovir Global Aciclovir Zovirax
Tab dispersible 400 mg	Lovir	6.64	56	1%	Mar-07 Dec-06	Acicvir Alpha-Aciclovir Global Aciclovir Zovirax
Tab dispersible 800 mg	Lovir	7.38	35	1%	Mar-07 Dec-06	Acicvir Alpha-Aciclovir Global Aciclovir Zovirax

Note – Acicvir 200 mg, 400 mg and 800 mg to be delisted 1 ~~March 2007~~ December 2006

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 December 2006 (continued)

BETAHISTINE DIHYDROCHLORIDE

Tab 16 mg.....Vergo 16 7.56 84

Note – Vergo 16 tab 16 mg, 100 tablet pack will be delisted 1 June 2007.

CALCITRIOL

Cap 0.25 µg**Calcitriol-AFT** 13.45 100 1% Feb-07 Rocaltrol

Cap 0.5 µg**Calcitriol-AFT** 24.95 100 1% Feb-07 Rocaltrol

CYCLIZINE HYDROCHLORIDE

Tab 50 mg.....**Nausicalm** 1.99 10 1% Feb-07 Marzine

FLUCONAZOLE

Inj 2 mg per ml, 50 ml**m-Fluconazole** 7.10 1 1% Feb-07 Diflucan IV

GABAPENTIN

Tab 600 mg.....Neurontin 150.00 100

METOCLOPRAMIDE HYDROCHLORIDE

Inj 10 ml per 2 ml polyampAstraZeneca ~~26.50~~ 50

TRIAMCINOLONE ACETONIDE WITH GRAMICIDIN, NEOMYCIN AND NYSTATIN

Ear drops 1 mg with nystatin
100,000 u, neomycin sulphate
2.5 mg and gramicidin 250 µg
per g.....**Kenacomb** 3.35 7.5 ml 1% Feb-07 (B)

WATER (↓ price & addition of HSS)

Purified for inj 5 ml**Multichem** 9.31 50 1% Feb-07 AstraZeneca
Pharmacia

Purified for inj 10 ml**Multichem** 10.38 50 1% Feb-07 AstraZeneca
Pharmacia

Note: AstraZeneca water purified for injection 5 ml and 10 ml to be delisted 1 February 2007

Effective 1 November 2006

ATAZANAVIR SULPHATE

Cap 150 mgReyataz 568.34 60

Cap 200 mgReyataz 757.79 60

BERACTANT (↓ price & change in description)

Inj **25 mg per ml, 200 mg per**
8 ml **intratracheal suspension** ...Survanta 550.00 1

CARBOPLATIN

Inj 10 mg per ml, 5 ml**Carboplatin** 12.00 1 1% Jan-07 (B)

Ebewe

Inj 10 mg per ml, 15 ml**Carboplatin** 18.70 1 1% Jan-07 Mayne

Ebewe

Inj 10 mg per ml, 45 ml**Carboplatin** 55.50 1 1% Jan-07 Mayne

Ebewe

Note – Mayne inj 10 mg per ml, 15 ml and 45 ml to be delisted 1 January 2007.

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 November 2006 (continued)

CHLORAMPHENICOL (amended DV Pharmaceutical) Eye drops 0.5%	Chlorsig	1.40	10 ml	1%	Dec-06	(B) Ispoto-Fenicol
CHLORHEXIDINE (amended brand name for DV Pharmaceutical) Crm 1% obstetric.....	Orion	1.70	50 g	1%	Sept-06	PSM HMG
CODEINE PHOSPHATE (amended brand name) Tab 15 mg.....	PSM HMG	7.00	100	1%	Oct-04	Douglas Alpha Codeine
Tab 30 mg.....	PSM HMG	10.00	100	1%	Oct-04	Douglas Alpha Codeine
Tab 60 mg.....	PSM HMG	20.00	100	1%	Oct-04	Douglas Alpha Codeine
DICLOFENAC SODIUM (↑ price) Tab long-acting 75 mg.....	Diclax	3.10	30			
ERTAPENEM SODIUM Inj 1 g.....	Invanz	70.00	1			
ERYTHROMYCIN ETHYL SUCCINATE Tab 400 mg.....	E-Mycin	18.95	100			
GEMCITABINE HYDROCHLORIDE (↑ price) Inj 1 g.....	Gemzar	349.20	1			
ISOFLURANE (change of brand name & addition of HSS) Liq 250 ml bottle	Abbott Forane	99.00	250 ml	1%	Jan-07	Aerrane Rhodia
METFORMIN HYDROCHLORIDE (↑ price) Tab 500 mg.....	Metomin	12.50	500			
Tab 850 mg.....	Metomin	9.00	250			
METHYLPHENIDATE HYDROCHLORIDE Tab 5 mg.....	Rubifen	3.20	30	1%	Jan-07	(B)
Tab 20 mg.....	Rubifen	7.85	30	1%	Jan-07	(B)
Tab long-acting 20 mg.....	Rubifen SR	10.95	30	1%	Jan-07	Ritalin SR
METRONIDAZOLE (amended brand name) Inj 500 mg, 100 ml.....	AFT Metris	14.95	5	1%	Dec-06	Baxter Pfizer
SEVOFLURANE (↓ price, change of brand name & addition of HSS) Liq 250 ml bottle	Abbott Sevorane	325.88	250 ml	1%	Jan-07	Baxter

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 November 2006 (continued)

VINORELBINE

Inj 10 mg per ml, 1 ml	Vinorelbine Ebewe	42.00	1	1%	Jan-07	Mayne Navelbine
Inj 10 mg per ml, 5 ml	Vinorelbine Ebewe	210.00	1	1%	Jan-07	Mayne Navelbine

Note – Navelbine inj 10 mg per ml, 1 ml and 5 ml to be delisted 1 January 2007.

ZINC AND CASTOR OIL (amended brand name for DV Pharmaceutical)

Ointment	Orion	1.20	20 g	1%	Sept-06	Douglas PSM HMG M&C Care and Health Midwest Multichem Sigma
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Note - Pack sizes larger than 30 g are not considered DV Pharmaceuticals.

Effective 1 October 2006

ACICLOVIR

Tab dispersible 200 mg	Lovir	1.98	25	1%	Dec-06	Acicvir Alpha-Aciclovir Global Aciclovir Zovirax
Tab dispersible 400 mg	Lovir	6.64	56	1%	Dec-06	Acicvir Alpha-Aciclovir Global Aciclovir Zovirax
Tab dispersible 800 mg	Lovir	7.38	35	1%	Dec-06	Acicvir Alpha-Aciclovir Global Aciclovir Zovirax

Note – Acicvir 200 mg, 400 mg and 800 mg to be delisted 1 December 2006

ALENDRONATE **SODIUM** (↓ price)

Tab 70 mg.....	Fosamax	35.91	4			
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ALPROSTADIL

Inj 0.5 mg per ml, 1 ml	Prostin VR	1,417.50	5	1%	Dec-06	(B)
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ATROPINE SULPHATE (↑ price and addition of HSS)

Inj 0.6 mg, per 1 ml polyamp 600 µg, 1 ml	AstraZeneca	26.00	50	1%	Dec-06	Pfizer
Inj 1.2 mg, per 1 ml polyamp 1200 µg, 1 ml	AstraZeneca	32.00	50	1%	Dec-06	(B)

ATROPINE SULPHATE (change in description)

Inj 0.4 mg per 1 ml polyamp 400 µg, 1 ml	AstraZeneca	29.95	50			
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Note – to be delisted 1 April 2007

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 October 2006 (continued)

BECLOMETHASONE DIPROPIONATE († price and addition of HSS)

Metered aqueous nasal spray,

50 µg per dose **Alanase** 2.35 200 doses 1% Dec-06 Aldecin
Atomase
Beconase

Metered aqueous nasal spray,

100 µg per dose **Alanase** 2.46 200 doses 1% Dec-06 Atomase
Beconase

BETAMETHASONE VALERATE

Scalp app 0.1% **Beta Scalp** 5.25 100 ml 1% Dec-06 (B)

BUPIVACAINE HYDROCHLORIDE († price)

Inf 0.125%, per 100 ml ~~polybag~~ TP

theatre pack Marcaïn 111.62 5

Inf 0.125%, per 200 ml ~~polybag~~ TP

theatre pack Marcaïn 149.22 5

Inf 0.25%, per 100 ml ~~polybag~~ TP

theatre pack Marcaïn 135.12 5

Inj 0.375%, per 20 ml ~~polyamp~~ TP

theatre pack Marcaïn 57.35 5

Inj 0.5%, per 4 ml ~~amp~~ TP

theatre pack Marcaïn **Isobaric** 29.95 5

BUPIVACAINE HYDROCHLORIDE

Inj 0.5%, 8% glucose, 4 ml Marcaïn Heavy 25.00 5

BUPIVACAINE HYDROCHLORIDE WITH ADRENALINE († price)

Inj 0.25% with 1:400,000 of

adrenaline, 10 ml ~~vial~~ Marcaïn 45.00 5

Inj 0.5% with 1:200,000 ~~with of~~

adrenaline, 10 ml ~~vial~~ Marcaïn 48.00 5

Inj 0.5% with 1:200,000 of

adrenaline, 20 ml ~~vial~~ Marcaïn 75.00 5

CHLORAMPHENICOL († price and addition of HSS)

Eye drops 0.5% **Chlorsig** 1.40 10 ml 1% Dec-06 Ispoto Fenicol

Eye oint 1% **Chlorsig** 2.48 4 g 1% Dec-06 (B)

CLOBETASOL PROPIONATE († price and addition of HSS)

Crn 0.05% **Dermol** 2.35 30 g 1% Dec-06 Dermovate

CLOPIDOGREL

Tab 75 mg Plavix 168.17 28

DEXTROSE

Inj 50%, 90 ml **Biomed** 135.00 12 1% Dec-06 (B)

DIPIVEFRIN HYDROCHLORIDE

Eye drops 0.1% Propine 5.50 10 ml

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 October 2006 (continued)

FENTANYL

Inj 50 µg per ml, 2 ml.....	AstraZeneca	7.60	10			
Inj 50 µg per ml, 10 ml.....	AstraZeneca	10.60	10			

GELATIN PLASMA REPLACER (new pack size listing)

Inj 4% per 500 ml bag.....	Gelofusine	108.00	10	1%	Nov-05	(B)
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Note – Gelofusine 1 pack delisted 1 October 2006.

HYDROCORTISONE (addition of HSS)

Tab 5 mg.....	Douglas	7.95	100	1%	Dec-06	(B)
Tab 20 mg († price).....	Douglas	19.95	100	1%	Dec-06	(B)

HYDROCORTISONE ACETATE

Rectal foam 10%, CFC-Free.....	Colifoam	21.10	21.1 g	1%	Dec-06	(B)
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IMIPRAMINE HYDROCHLORIDE

Tab 10 mg.....	Tofranil	5.48	50	1%	Dec-06	(B)
Tab 25 mg.....	Tofranil	8.80	50	1%	Dec-06	(B)

INDAPAMIDE († price and addition of HSS)

Tab 2.5 mg.....	Napamide	4.00	100	1%	Dec-06	Naplin
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LIGNOCAINE († price and addition of HSS)

Gel 2%.....	Orion	6.10	20 g	1%	Dec-06	Xylocaine
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LIGNOCAINE HYDROCHLORIDE († price)

Pump spray 10%, 50 ml CFC-free... Xylocaine		65.80	1			
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LIGNOCAINE HYDROCHLORIDE WITH ADRENALINE (new pack size listing)

Inj 1% with 1:100,000 of adrenaline, 5 ml amp.....	Xylocaine	20.00	10			
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Note: Xylocaine inj 1% with 1:100,000 adrenaline, 5 ml, 50 pack is delisted effective 1 October 2006.

LIGNOCAINE HYDROCHLORIDE WITH ADRENALINE († price)

Inj 1% with 1:200,000 of adrenaline, 20 ml amp.....	Xylocaine	47.00	5			
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Inj 2% with 1:200,000 of adrenaline, 20 ml vial.....	Xylocaine	52.87	5			
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LIGNOCAINE HYDROCHLORIDE WITH PRILOCAINE HYDROCHLORIDE († price)

Patch 5% 2.5% with 2.5% prilocaine hydrochloride	EMLA	10.40	2			
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Patch 5% 2.5% with 2.5% prilocaine hydrochloride	EMLA	104.00	20			
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LIGNOCAINE HYDROCHLORIDE WITH PRILOCAINE HYDROCHLORIDE (change in description only)

Crm 5% 2.5% with 2.5% prilocaine hydrochloride , per 5 g with 10 dressings.....	EMLA	45.00	5			
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Crm 5% 2.5% with 2.5% prilocaine hydrochloride , per 30 g.....	EMLA	44.50	1			
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Products with Hospital Supply Status (HSS) are in **bold**.

(B) – Subject only to part (b) of the definition of “DV Pharmaceutical”

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 October 2006 (continued)

LORAZEPAM (↑ price and addition of HSS)						
Tab 1 mg.....	Ativan	6.28	250	1%	Dec-06	Lorapam Lorzem
Tab 2.5 mg.....	Ativan	4.12	100	1%	Dec-06	Lorapam Lorzem
METRONIDAZOLE						
Inj 500 mg, 100 ml.....	Metris	14.95	5	1%	Dec-06	Baxter Pfizer
NEOSTIGMINE METHYLSULPATE (change in description only)						
Inj 2.5 mg per ml, 1 ml polyamp.....	AstraZeneca	22.50	50			
PERHEXILINE MALEATE (↑ price and addition of HSS)						
Tab 100 mg.....	Pexsig	62.90	100	1%	Dec-06	Pexcid
POTASSIUM CHLORIDE (change in description only)						
Inj 750 µg 75 mg per ml, per 10 ml polyamp.....	AstraZeneca	26.00	50			
Inj 1.5 g 150 mg per ml, 10 ml polyamp.....	AstraZeneca	26.00	50			
POTASSIUM CHLORIDE (↑ price and addition of HSS)						
Tab long-acting 600 mg.....	Span-K	5.20	200	1%	Dec-06	Slow-K K-SR
PRILOCAINE HYDROCHLORIDE (change in description and delist)						
Inj 0.5%, per 50 ml vial.....	Citanest	155.00	10			
Inj 1% per 5 ml polyamp.....	Citanest	27.00	10			
PRILOCAINE HYDROCHLORIDE (new pack size listing)						
Inj 0.5%, 50 ml.....	Citanest	18.20	1			
PRILOCAINE HYDROCHLORIDE (↑ price)						
Inj 2%, per 5 ml polyamp.....	Citanest	34.07	10			
PROPOFOL +/- EDTA (↓ price and addition of HSS)						
Inj 1%, per 20 ml vial.....	Diprivan	25.00	5	1%	Dec-06	InterMed Fresenius Mayne Recofol
Inj 1%, per 100 ml vial.....	Diprivan	19.00	1	1%	Dec-06	InterMed Fresenius Mayne Recofol
Inj 1%, per 50 ml pre-filled syringe.....	Diprivan	25.00	1	1%	Dec-06	(B)
Inj 2%, per 50 ml pre-filled syringe.....	Diprivan	30.00	1	1%	Dec-06	(B)

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

(B) – Subject only to part (b) of the definition of “DV Pharmaceutical”

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part II - effective 1 October 2006 (continued)

PROPOFOL +/-EDTA (addition of HSS)						
Inj 1%, per 50 ml vial	Diprivan	15.00	1	1%	Dec-06	InterMed Fresenius Mayne Recofol
PROPOFOL +/-EDTA (change in description only)						
Inj 2%, per 50 ml vial	Diprivan	25.50	1			
ROPIVACAINE HYDROCHLORIDE († price)						
Inj 2 mg per ml, 10 ml polyamp	Naropin	21.75	5			
Inj 2 mg per ml, 20 ml polyamp	Naropin	36.42	5			
Inj Inf 2 mg per ml, 100 ml polybag	Naropin	112.20	5			
Inj Inf 2 mg per ml, 200 ml polybag	Naropin	197.40	5			
Inj 7.5 mg per ml, 10 ml polyamp	Naropin	38.77	5			
Inj 7.5 mg per ml, 20 ml polyamp	Naropin	68.15	5			
Inj 10 mg per ml, 10 ml polyamp	Naropin	44.65	5			
Inj 10 mg per ml, 20 ml polyamp	Naropin	80.80	5			
ROPIVACAINE HYDROCHLORIDE WITH FENTANYL († price)						
Inj Inf 2 mg per ml with 2 µg of fentanyl	per ml, 100 ml polybag	155.10	5			
Inj Inf 2 mg per ml with 2 µg of fentanyl	per ml, 200 ml polybag	292.50	5			
SODIUM CHLORIDE						
Inj 23.4%, 20 ml	Biomed	26.50	5	1%	Dec-06	(B)
SUXAMETHONIUM CHLORIDE († price)						
Inj 100 mg per 2 ml polyamp	AstraZeneca	100.00	50			
WATER						
Purified for inj 5 ml	Multichem	12.50	50			
Purified for inj 10 ml	Multichem	13.95	50			

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part IV

Effective 1 February 2007

CEFTAZIDIME SODIUM (amended description)

Inj 500 mg

Inj 1 g

Inj 2 g

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

GEPHRADINE

Inj 500 mg

Inj 1 g

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

Note – Velosef inj to be delisted 1 February 2007

Effective 1 November 2006

ERTAPENEM SODIUM

Inj 1 g

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

Effective 1 October 2006

AMIKACIN SULPHATE

Inj 500 mg per 2 ml **250 mg per ml, 2 ml**

Up to 2 weeks supply for any appropriate indication (extension for up to 6 weeks supply for endocarditis should be applied for under Hospital EG) **For any indication approved by the hospital service, with review at 6 weeks.**

AMOXCILLIN WITH CLAVULANIC ACID

Inj 600 mg, 500 mg with 100 mg clavulanic acid

Inj 1.2 g, 1000 mg with 200 mg clavulanic acid

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

AZTREONAM

Inj 1 g

Up to 4 weeks supply for any appropriate indication **For any indication approved by the hospital service, with review at 6 weeks.**

BENZYPENICILLIN SODIUM (PENICILLIN G)

Inj 1 mega u

Up to 8 weeks supply for any appropriate indication: **For any indication approved by the hospital service, with review at 8 weeks.**

CEFAMANDOLE SODIUM NAFATE

Inj 250 mg

Inj 500 mg

Inj 1 g

Up to 8 weeks supply for any appropriate indication: **For any indication approved by the hospital service, with review at 8 weeks.**

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part IV - effective 1 October 2006 (continued)

CEFAZOLIN **SODIUM**

Inj 500 mg

Inj 1 g

Up to 8 weeks supply for any appropriate indication including penicillin allergy. **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 0.5 g **500 mg**

Inj 1 g

Up to 2 weeks supply for any appropriate indication. **For any indication approved by the hospital service, with review at 6 weeks.**

CEFOXITIN **SODIUM**

Inj **Powder for injection** 1g

Up to 2 weeks supply for any appropriate indication **For any indication approved by the hospital service, with review at 6 weeks.**

CEFTAZIDIME **SODIUM**

Inj 500 mg

Inj 1 g

Inj 2 g

Up to 4 weeks for cystic fibrosis only. **For any indication approved by the hospital service, with review at 6 weeks.**

CEFTRIAXONE **SODIUM**

Inj 1 g

Up to 2 weeks supply for any appropriate indication. **For any indication approved by the hospital service, with review at 6 weeks.**

CEFUROXIME **SODIUM**

Inj 250 mg

Inj 750 mg

Inj 1.5 g

Up to 6 weeks supply for any appropriate indication. **For any indication approved by the hospital service, with review at 6 weeks.**

CEPHRADINE

Inj 500 mg

Inj 1 g

Up to 6 weeks supply for any appropriate indication **For any indication approved by the hospital service, with review at 6 weeks.**

FLUCLOXACILLIN **SODIUM**

Inj 250 mg

Inj 500 mg

Inj 1 g

Up to 8 weeks supply for any appropriate indication. **For any indication approved by the hospital service, with review at 8 weeks.**

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

(B) – Subject only to part (b) of the definition of “DV Pharmaceutical”

Contracted Pharmaceutical Description	Brand	Price (\$) (ex man. excl. GST)	Per	DV Limit	DV Limit applies from	DV Pharmaceutical
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Section H changes to Part IV - effective 1 October 2006 (continued)

FLUCONAZOLE

Inj 100 mg per 50 ml

Up to 6 weeks supply for any appropriate indication **For any indication approved by the hospital service, with review at 6 weeks.**

GENTAMICIN SULPHATE

Inj **40 mg per ml, 2 ml 80 mg per 2 ml,**

Up to 2 weeks supply for any appropriate indication (extension for up to 6 weeks supply for endocarditis should be applied for under Hospital-EG) **Indefinite supply for any indication approved by the hospital service.**

IMIPENEM WITH CILASTATIN

Inj 500 mg with cilastatin 500 mg

Up to 4 weeks supply for any appropriate indication **For any indication approved by the hospital service, with review at 6 weeks.**

MEROPENEM

Inj 500 mg

Inj 1 g

Up to 4 weeks supply for any appropriate indication **For any indication approved by the hospital service, with review at 6 weeks.**

PIPERACILLIN SODIUM

Inj 2 g

Inj 4 g

Up to 4 weeks supply for any appropriate indication **For any indication approved by the hospital service, with review at 6 weeks.**

PIPERACILLIN WITH TAZOBACTAM

Inj **4 g with tazobactam 500 mg 4.5 g**

Up to 4 weeks supply for any appropriate indication **For any indication approved by the hospital service, with review at 6 weeks.**

TEICOPLANIN

Inj 400 mg

Up to 6 weeks for gram positive infections, MRSA and bone sepsis **For any indication approved by the hospital service, with review at 6 weeks.**

TICARCILLIN DISODIUM WITH CLAVULANIC ACID (TIMENTIN)

Inj **3 g with clavulanic acid 0.1 g** Inj 3.1 g

Up to 4 weeks supply for any appropriate indication **For any indication approved by the hospital service, with review at 6 weeks.**

TOBRAMYCIN

Inj **40 mg per ml, 2 ml 80 mg per 2 ml,**

Up to 2 weeks supply for any appropriate indication (extension for up to 6 weeks supply for endocarditis should be applied for under Hospital-EG) **Indefinite supply for any indication approved by the hospital service.**

VANCOMYCIN HYDROCHLORIDE

Inj **50 mg per ml, 10 ml 500 mg**

Up to 6 weeks supply for any appropriate indication **For any indication approved by the hospital service, with review at 6 weeks.**

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