Section H Update
for Hospital Pharmaceuticals
September 2019
Cumulative for August and September 2019
Contents

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Summary of decisions
EFFECTIVE 1 SEPTEMBER 2019

• Adalimumab inj 20 mg per 0.4 ml syringe and inj 40 mg per ml 0.8 ml syringe (Humira) and inj 40 mg per 0.8 ml pen (HumiraPen) – amended restriction criteria

• Adenosine (Adenocor) inj 3 mg per ml, 2 ml vial – new listing and addition of HSS

• Amiodarone hydrochloride (Max Health) inj 50 mg per ml, 3 ml ampoule – new listing and addition of HSS

• Amiodarone hydrochloride (Cordarone-X and Lodi) inj 50 mg per ml, 3 ml ampoule – to be delisted 1 February 2020

• Amisulpride (Solian) oral liq 100 mg per ml, 60 ml – to be delisted 1 July 2020

• Aspirin (Ethics Aspirin EC) tab 100 mg – price increase

• Calcium carbonate tab eff 1.75 g (1 g elemental) – new listing

• Carbachol inj 150 mcg vial – new listing

• Carmustine (Bicnu Heritage) inj 100 mg vial – new listing

• Cetomacrogol with glycerol (healthE) crm 90% with glycerol 10%, 100 g – price decrease, addition of HSS and note

• Chlortalidone [chlorthalidone] (Hygrton) tab 25 mg – price decrease and addition of HSS

• Cilazapril (Zapril) tab 2.5 mg and 5 mg – new listing and addition of HSS

• Cilazapril (Apo-Cilazapril) tab 2.5 mg and 5 mg – to be delisted 1 February 2020

• Clarithromycin (Klacid) grans for oral liq 50 mg per ml – price increase

• Dexrazoxane (e.g. Cardioxane) inj 500 mg – new listing

• Erythromycin (as lactobionate) (Erythrocin IV) inj 1 g vial – price decrease and addition of HSS

• Flecainide acetate (Flecainide BNM) tab 50 mg – new listing and addition of HSS

• Flecainide acetate (Tambocor) tab 50 mg – to be delisted 1 February 2020

• Infliximab (Remicade) inj 100 mg – amended restriction criteria

• Ketamine (Biomed) inj 1 mg per ml, 100 ml bag, 10 pack and inj 10 mg per ml, 10 ml syringe, 5 pack – new pack size listing and addition of HSS

• Ketamine (Biomed) inj 1 mg per ml, 100 ml bag, 1 pack and inj 10 mg per ml, 10 ml syringe, 1 pack – single pack to be delisted 1 February 2020

• Lysine acetylsalicylate [lysine aspirin] (e.g. Aspegic) inj 500 mg – amended chemical name
Summary of decisions – effective 1 September 2019 (continued)

- Medroxyprogesterone acetate (Depo-Provera) inj 150 mg per ml, 1 ml syringe – price increase and addition of HSS
- Nicorandil (Ikorel) tab 10 mg and 20 mg – price decrease and addition of HSS
- Noradrenaline inj 0.1 mg per ml, 50 ml syringe – new listing
- Oxaliplatin (Oxaliplatin Accord) inj 5 mg per ml, 20 ml vial – new listing
- Oxaliplatin (Oxalicord) inj 5 mg per ml, 20 ml vial – to be delisted 1 February 2020
- Povidone iodine (Riodine) soln 10%, 100 ml – price decrease and addition of HSS
- Propofol (Fresofol 1% MCT/LCT) inj 10 mg per ml, 20 ml ampoule – amended presentation description
- Raltegravir potassium (Isentress HD) tab 600 mg – new listing
- Sildenafil tab 25 mg, 50 mg and 100 mg (Vedafil) and inj 0.8 mg per ml, 12.5 ml vial – amended restriction criteria
- Sucrose (Biomed) oral liq 25%, 25 ml – new listing and addition of HSS
- Sulfasalazine (Salazopyrin EN) tab EC 500 mg – price increase and addition of HSS
- Sumatriptan (Clustran) inj 12 mg per ml, 0.5 ml prefilled pen – price increase
- Tacrolimus (Tacrolimus Sandoz) cap 0.75 mg – new listing
- Tacrolimus (Tacrolimus Sandoz) cap 0.5 mg 1 mg and 5 mg – price decrease
- Water (Fresenius Kabi) inj 20 ml ampoule – new listing
- Zinc sulphate (Zincaps) cap 137.4 mg (50 mg elemental) – addition of HSS
### Section H changes to Part II

*Effective 1 September 2019*

#### ALIMENTARY TRACT AND METABOLISM

<table>
<thead>
<tr>
<th>Product</th>
<th>Price</th>
<th>Brand or</th>
<th>Expiry Date</th>
<th>HSS Period</th>
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#### BLOOD AND BLOOD FORMING ORGANS

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<tr>
<td>ASPIRIN (t price)</td>
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<td>Ethics Aspirin EC</td>
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<tr>
<td>LYSINE ACETYSALICYLATE [LYSINE ASPIRIN] (amended chemical name) e.g. Aspegic</td>
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#### CARDIOVASCULAR SYSTEM

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<tr>
<td>FLECAINIDE ACETATE (brand change)</td>
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<td>Flecainide BNM</td>
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<tr>
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<td>NORADRENALINE (new listing)</td>
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Products with Hospital Supply Status (HSS) are in **bold**.

Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.
Changes to Section H Part II – effective 1 September 2019 (continued)

47  NICORANDIL (↑ price and addition of HSS)
    Tab 10 mg – 1% DV Dec-19 to 2022 ................................. 25.57  60  Ikorel
    Tab 20 mg – 1% DV Dec-19 to 2022 ................................. 32.28  60  Ikorel

49  SILDENAFIL (amended restriction – affected criteria shown only)
    ➜ Tab 25 mg – 1% DV Sep-18 to 2021 ............................... 0.64  4  Vedafl
    ➜ Tab 50 mg – 1% DV Sep-18 to 2021 ............................... 0.64  4  Vedafl
    ➜ Tab 100 mg – 1% DV Sep-18 to 2021 .............................. 6.60  12  Vedafl
    ➜ Inj 0.8 mg per ml, 12.5 ml vial
      Restricted
      Initiation – tablets other conditions
      Any of the following:
      1 For use in weaning patients from inhaled nitric oxide; or
      2 For perioperative use in cardiac surgery patients; or
      3 For use in intensive care as an alternative to nitric oxide; or
      4 For use in the treatment of erectile dysfunction secondary to spinal cord injury in patients being treated
         in a spinal unit.

DERMATOLOGICALS

53  CETOMACROGOL WITH GLYCEROL (↑ price, addition of HSS and note)
    Crm 90% with glycerol 10% – 1% DV Dec-19 to 2022 .......... 1.65  100 g  healthE
    Note: DV limit applies to the pack sizes of 100 g or less.

GENITO-URINARY SYSTEM

58  MEDROXYPROGESTERONE ACETATE (↑ price and addition of HSS)
    Inj 150 mg per ml, 1 ml syringe – 1% DV Dec-19 to 2022 ....... 7.98  1  Depo-Provera

INFECTIONS

75  CLARITHROMYCIN (↑ price)
    ➜ Grans for oral liq 50 mg per ml......................................... 192.00  50 ml  Klacid

75  ERYTHROMYCIN (AS LACTOBIONATE) (↑ price and addition of HSS)
    Inj 1 g vial – 1% DV Dec-19 to 2022 ................................. 10.00  1  Erythrocin IV

88  RALTEGRAVIR POTASSIUM (new listing)
    ➜ Tab 600 mg................................................................. 1,090.00  60  Isentress HD

NERVOUS SYSTEM

104  KETAMINE (pack size change)
    Inj 1 mg per ml, 100 ml bag – 1% DV Feb-20 to 2022 .......... 270.00  10  Biomed
    Inj 10 mg per ml, 10 ml syringe – 1% DV Feb-20 to 2022 ..... 70.00  5  Biomed
    Note – Biomed inj 1 mg per ml, 100 ml bag; 1 pack and inj 10 mg per ml, 10 ml syringe; 1 pack to be delisted
    from 1 February 2020.
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<thead>
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<td>SUCROSE</td>
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<tr>
<td>SUMATRIPTAN</td>
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<td>AMISULPRIDE</td>
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<tr>
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**ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS**

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<td>248.20</td>
<td>50</td>
<td>Tacrolimus Sandoz</td>
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Products with Hospital Supply Status (HSS) are in **bold**. Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.
Changes to Section H Part II – effective 1 September 2019 (continued)

151 ADALIMUMAB (amended restriction – new criteria shown only)
    Inj 20 mg per 0.4 ml syringe ............................................. 1,599.96 2 Humira
    Inj 40 mg per 0.8 ml pen................................................... 1,599.96 2 HumiraPen
    Inj 40 mg per 0.8 ml syringe ............................................. 1,599.96 2 Humira

Restricted
Initiation – severe ocular inflammation
Re-assessment required after 4 months
Either
1 Both:
   1.1 The patient has had an initial Special Authority approval for infliximab for severe ocular inflammation; and
   1.2 Either:
      1.2.1 The patient has experienced intolerable side effects from infliximab; or
      1.2.2 The patient has received insufficient benefit from infliximab to meet the renewal criteria for
          infliximab for severe ocular inflammation; or

2 Both:
   2.1 Patient has severe, vision-threatening ocular inflammation requiring rapid control; and
   2.2 Any of the following:
      2.2.1 Treatment with high-dose steroids (intravenous methylprednisolone) followed by high dose
          oral steroids has proven ineffective at controlling symptoms; or
      2.2.2 Patient developed new inflammatory symptoms while receiving high dose steroids; or
      2.2.3 Patient is aged under 8 years and treatment with high dose oral steroids and other
          immunosuppressants has proven ineffective at controlling symptoms.

Continuation – severe ocular inflammation
Re-assessment required after 12 months
Both
1 Any of the following:
   1.1 The patient has had a good clinical response following 3 initial doses; or
   1.2 Following each 12-month treatment period, the patient has had a sustained reduction in inflammation
       (Standardisation of Uveitis Nomenclature (SUN) criteria < ½+ anterior chamber or vitreous cells,
       absence of active vitreous or retinal lesions, or resolution of uveitic cystoid macular oedema); or
   1.3 Following each 12-month treatment period, the patient has a sustained steroid sparing effect,
       allowing reduction in prednisone to < 10mg daily, or steroid drops less than twice daily if under 18
       years old; and

2 Adalimumab to be administered at doses no greater than 40 mg every 14 days.
Note: A trial withdrawal should be considered after every 24 months of stability, unless the patient is
deemed to have extremely high risk of irreversible vision loss if adalimumab is withdrawn.

Initiation – chronic ocular inflammation
Re-assessment required after 4 months
Either
1 Both:
   1.1 The patient has had an initial Special Authority approval for infliximab for chronic ocular inflammation; and
   1.2 Either:
      1.2.1 The patient has experienced intolerable side effects from infliximab; or
      1.2.2 The patient has received insufficient benefit from infliximab to meet the renewal criteria for
          infliximab for chronic ocular inflammation; or

2 Both:
   2.1 Patient has severe uveitis uncontrolled with treatment of steroids and other immunosuppressants
       with a severe risk of vision loss; and

continued...
Changes to Section H Part II – effective 1 September 2019 (continued)

2.2 Any of the following:

2.2.1 Patient is 18 years or older and treatment with at least two other immunomodulatory agents has proven ineffective; or

2.2.2 Patient is under 18 years and treatment with methotrexate has proven ineffective or is not tolerated at a therapeutic dose; or

2.2.3 Patient is under 8 years and treatment with steroids or methotrexate has proven ineffective or is not tolerated at a therapeutic dose; or disease requires control to prevent irreversible vision loss prior to achieving a therapeutic dose of methotrexate.

Continuation – chronic ocular inflammation
Re-assessment required after 12 months
Both

1 Any of the following:

1.1 The patient has had a good clinical response following 12 weeks’ initial treatment; or

1.2 Following each 12-month treatment period, the patient has had a sustained reduction in inflammation (Standardisation of Uveitis Nomenclature (SUN) criteria <½+ anterior chamber or vitreous cells, absence of active vitreous or retinal lesions, or resolution of uveitic cystoid macular oedema); or

1.3 Following each 12-month treatment period, the patient has a sustained steroid sparing effect, allowing reduction in prednisone to <10mg daily, or steroid drops less than twice daily if under 18 years old; and

2 Adalimumab to be administered at doses no greater than 40 mg every 14 days.

Note: A trial withdrawal should be considered after every 24 months of stability, unless the patient is deemed to have extremely high risk of irreversible vision loss if adalimumab is withdrawn.

160 INFLIXIMAB (amended restriction criteria – affected criteria shown only)

⇒ Inj 100 mg – 10% DV Mar-15 to 29 Feb 2020.....................806.00 1 Remicade

Initiation – severe ocular inflammation
Re-assessment required after 3 doses
Either

1 Both:

1.1 The patient has had an initial Special Authority approval for adalimumab for severe ocular inflammation; and

1.2 Either:

1.2.1 The patient has experienced intolerable side effects from adalimumab; or

1.2.2 The patient has received insufficient benefit from adalimumab to meet the renewal criteria for adalimumab for severe ocular inflammation; or

2 Either Both:

2.1 Patient has severe, vision-threatening ocular inflammation requiring rapid control; and

2.2 Either Any of the following:

2.2.1 Treatment with high-dose steroids (intravenous methylprednisolone) followed by high dose oral steroids has proven ineffective at controlling symptoms; or

2.2.2 Patient developed new inflammatory symptoms while receiving high dose steroids; or

2.2.3 Patient is aged under 8 years and treatment with high dose oral steroids and other immunosuppressants has proven ineffective at controlling symptoms.

Continuation – severe ocular inflammation
Re-assessment required after 12 months
Any of the following:

1 The patient has had a good clinical response following 3 initial doses; or

2 Following each 12-month treatment period, the patient has had a sustained reduction in inflammation (Standardisation of Uveitis Nomenclature (SUN) criteria <½+ anterior chamber or vitreous cells, absence of active vitreous or retinal lesions, or resolution of uveitic cystoid macular oedema); or

continued...
3 Following each 12-month treatment period, the patient has a sustained steroid sparing effect, allowing reduction in prednisone to < 10mg daily, or steroid drops less than twice daily if under 18 years old. Note: A trial withdrawal should be considered after every 24 months of stability, unless the patient is deemed to have extremely high risk of irreversible vision loss if infliximab is withdrawn.

Initiation – chronic ocular inflammation
Re-assessment required after 3 doses

Both Either
1 Both:
   1.1 The patient has had an initial Special Authority approval for adalimumab for chronic ocular inflammation; and
   1.2 Either:
      1.2.1 The patient has experienced intolerable side effects from adalimumab; or
      1.2.2 The patient has received insufficient benefit from adalimumab to meet the renewal criteria for adalimumab for chronic ocular inflammation; or

2 Either Both:
   2.1 Patient has severe uveitis uncontrolled with treatment of steroids and other immunosuppressants with a severe risk of vision loss; and
   2.2 Either Any of the following:
      2.2.1 Patient is 18 years or older and treatment with at least two other immunomodulatory agents has proven ineffective; or
      2.2.2 Patient is under 18 years and treatment with methotrexate has proven ineffective or is not tolerated at a therapeutic dose; or
      2.2.3 Patient is under 8 years and treatment with steroids or methotrexate has proven ineffective or is not tolerated at a therapeutic dose; or disease requires control to prevent irreversible vision loss prior to achieving a therapeutic dose of methotrexate.

Continuation – chronic ocular inflammation
Re-assessment required after 12 months
Any of the following:
1 The patient has had a good clinical response following 3 initial doses; or
2 Following each 12-month treatment period, the patient has had a sustained reduction in inflammation (Standardisation of Uveitis Nomenclature (SUN) criteria < ½+ anterior chamber or vitreous cells, absence of active vitreous or retinal lesions, or resolution of uveitic cystoid macular oedema); or
3 Following each 12-month treatment period, the patient has a sustained steroid sparing effect, allowing reduction in prednisone to < 10mg daily, or steroid drops less than twice daily if under 18 years old. Note: A trial withdrawal should be considered after every 24 months of stability, unless the patient is deemed to have extremely high risk of irreversible vision loss if infliximab is withdrawn.

SENSORY ORGANS

200 CARBACHOL (new listing)
   Inj 150 mcg vial

VARIABLES

205 POVIDONE-IODINE (↓ price and addition of HSS)
   Soln 10% – 1% DV Nov-19 to 2021 ........................................2.55  100 ml  Riodine
Changes to Section H Part II – effective 1 August 2019

ALIMENTARY TRACT AND METABOLISM

6  HYDROCORTISONE ACETATE WITH PRAMOXINE HYDROCHLORIDE (new listing)
   Topical aerosol foam, 1% with pramoxine hydrochloride 1%

7  RANITIDINE († price)
   Inj 25 mg per ml, 2 ml ampoule ......................... 13.40 5 Zantac

12  LACTULOSE († price and addition of HSS)
    Oral liq 10 g per 15 ml – 1% DV Nov-19 to 2022 .................. 3.33  500 ml Laevolac

12  SODIUM CITRATE WITH SODIUM LAURYL SULPHOACETATE († price and addition of HSS)
    Enema 90 mg with sodium lauryl sulphoacetate
    9 mg per ml, 5 ml – 1% DV Nov-19 to 2022 ................. 29.98  50 Micolette

18  FERROUS SULPHATE SULFATE (amended chemical name, † price and addition of HSS)
    Oral liq 30 mg (6 mg elemental) per ml
    – 1% DV Nov-19 to 2022 ......................................... 12.08  500 ml Ferodan

18  IRON POLYMALTOSE (new listing)
    Inj 50 mg per ml, 2 ml ampoule ......................... 15.22  5 Ferrum H

19  HYALURONIC ACID WITH LIDOCAINE [LIGNOCAINE] (new listing)
    Inj 20 mg per ml

21  PYRIDOXINE HYDROCHLORIDE (new listing)
    Inj 100 mg per ml, 2 ml vial

31  LYSINE ACETYLSALICYLATE (new listing)
    Inj 500 mg  
    e.g. Aspegic

Restricted
Initiation
Both:
1  For use when an immediate antiplatelet effect is required prior to an urgent interventional neuro-radiology or interventional cardiology procedure; and
2  Administration of oral aspirin would delay the procedure.

BLOOD AND BLOOD FORMING ORGANS

29  DALTEPARIN (delisting)
    Inj 2,500 iu in 0.2 ml syringe ......................... 19.97  10 Fragmin
    Inj 5,000 iu in 0.2 ml syringe ......................... 39.94  10 Fragmin
    Inj 7,500 iu in 0.75 ml syringe ......................... 60.03  10 Fragmin
    Inj 10,000 iu in 1 ml syringe ......................... 77.55  10 Fragmin

Note – Fragmin inj 2,500 iu in 0.2 ml syringe, 5,000 iu in 0.2 ml syringe, 7,500 iu in 0.75 ml syringe and 10,000 iu in 1 ml syringe to be delisted from 1 April 2020.
Changes to Section H Part II – effective 1 August 2019 (continued)

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<td>DALTEPARIN (delisting)</td>
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</tr>
<tr>
<td></td>
<td>Inj 12,500 iu in 0.5 ml syringe</td>
<td>Fragmin</td>
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<td>Inj 15,000 iu in 0.6 ml syringe</td>
<td>Fragmin</td>
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<td>Inj 18,000 iu in 0.72 ml syringe</td>
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<td>Note – Fragmin inj 12,500 iu in 0.5 ml syringe, 15,000 iu in 0.6 ml syringe and 18,000 iu in 0.72 ml syringe to be delisted from 1 January 2020.</td>
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<td>Tab 1 mg</td>
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<td>ASPIRIN († price and addition of HSS)</td>
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**CARdiovascular System**

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<tbody>
<tr>
<td>38</td>
<td>PHENOXYBENZAMINE HYDROCHLORIDE (new listing)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Inj 50 mg per ml, 1 ml ampoule</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>39</td>
<td>DIGOXIN († price and addition of HSS)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Tab 62.5 mcg – 1% DV Nov-19 to 2022</td>
<td>Lanoxin PG</td>
<td>7.00</td>
<td>240</td>
</tr>
<tr>
<td></td>
<td>Tab 250 mcg – 1% DV Nov-19 to 2022</td>
<td>Lanoxin</td>
<td>15.20</td>
<td>240</td>
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<tr>
<td>41</td>
<td>LABELTALOL (delisted)</td>
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</tr>
<tr>
<td></td>
<td>Tab 400 mg</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Note – labetalol tab 400 mg delisted 1 August 2019.</td>
<td></td>
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</tr>
<tr>
<td>43</td>
<td>FUROSEMIDE [FRUSEMIDE] (brand change)</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Tab 40 mg – 1% DV Dec-19 to 2022</td>
<td>Apo-Furosemide</td>
<td>7.24</td>
<td>1,000</td>
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<tr>
<td></td>
<td>Note – Diurin 40 tab 40 mg to be delisted from 1 December 2019.</td>
<td></td>
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<tr>
<td>43</td>
<td>FUROSEMIDE [FRUSEMIDE] (new listing)</td>
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<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Oral liq 10 mg per ml – 1% DV Jan-20 to 2022</td>
<td>Lasix</td>
<td>11.20</td>
<td>30 ml</td>
</tr>
<tr>
<td></td>
<td>Inj 10 mg per ml, 25 ml ampoule – 1% DV Jan-20 to 2022</td>
<td>Lasix</td>
<td>60.65</td>
<td>6</td>
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<td>44</td>
<td>SPIRONOLACTONE († price and addition of HSS)</td>
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<tr>
<td></td>
<td>Oral liq 5 mg per ml – 1% DV Nov-19 to 2022</td>
<td>Biomed</td>
<td>30.60</td>
<td>25 ml</td>
</tr>
<tr>
<td>50</td>
<td>ILOPROST (brand change)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Inj 50 mcg in 0.5 ml ampoule – 1% DV Jan-20 to 2022</td>
<td>Clinect</td>
<td>305.00</td>
<td>5</td>
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<tr>
<td></td>
<td>Note – llomedin inj 50 mcg in 0.5 ml ampoule to be delisted from 1 January 2020.</td>
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**DERMATOLOGICALS**

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<tr>
<th></th>
<th>Product Description</th>
<th>Brand or Generic</th>
<th>Price (ex man. Excl. GST)</th>
<th>Per Manufacturer</th>
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<tr>
<td>54</td>
<td>CLOBETASOL PROPIONATE († price and addition of HSS)</td>
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<tr>
<td></td>
<td>Crm 0.05% – 1% DV Nov-19 to 2022</td>
<td>Dermol</td>
<td>2.18</td>
<td>30 g</td>
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<tr>
<td></td>
<td>Oint 0.05% – 1% DV Nov-19 to 2022</td>
<td>Dermol</td>
<td>2.12</td>
<td>30 g</td>
</tr>
<tr>
<td>Code</td>
<td>Product Description</td>
<td>Details</td>
<td>Price</td>
<td>Brand or Manufacturer</td>
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<tr>
<td>55</td>
<td>CLOBETASOL PROPIONATE (price and addition of HSS)</td>
<td>Scalp app 0.05% – 1% DV Nov-19 to 2022</td>
<td>$5.69</td>
<td>Dermol</td>
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</table>

**GENITO-URINARY SYSTEM**

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<tr>
<th>Code</th>
<th>Product Description</th>
<th>Details</th>
<th>Price</th>
<th>Brand or Manufacturer</th>
</tr>
</thead>
<tbody>
<tr>
<td>58</td>
<td>INTRA-UTERINE DEVICE (price and addition of HSS)</td>
<td>IUD 29.1 mm length × 23.2 mm width – 1% DV Nov-19 to 2022</td>
<td>$18.45</td>
<td>Choice TT380 Short</td>
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<tr>
<td></td>
<td></td>
<td>IUD 33.6 mm length × 29.9 mm width – 1% DV Nov-19 to 2022</td>
<td>$18.45</td>
<td>Choice TT380 Standard</td>
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<tr>
<td></td>
<td></td>
<td>IUD 35.5 mm length × 19.6 mm width – 1% DV Nov-19 to 2022</td>
<td>$15.50</td>
<td>Choice Load 375</td>
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</table>

**INFECTIONS**

<table>
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<tr>
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<th>Details</th>
<th>Price</th>
<th>Brand or Manufacturer</th>
</tr>
</thead>
<tbody>
<tr>
<td>73</td>
<td>CEFALEXIN (price and addition of HSS)</td>
<td>Cap 250 mg – 1% DV Nov-19 to 2022</td>
<td>$3.33</td>
<td>Cephalexin ABM</td>
</tr>
<tr>
<td>73</td>
<td>CEFUROXIME (price and addition of HSS)</td>
<td>Tab 250 mg – 1% DV Feb-20 to 2022</td>
<td>$45.93</td>
<td>Zinnat</td>
</tr>
<tr>
<td>73</td>
<td>CEFTRIAXONE (brand change)</td>
<td>Inj 500 mg vial – 1% DV Jan-20 to 2022</td>
<td>$0.89</td>
<td>Ceftriaxone-AFT</td>
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<tr>
<td></td>
<td></td>
<td>Inj 1 g vial – 1% DV Jan-20 to 2022</td>
<td>$3.99</td>
<td>Ceftriaxone-AFT</td>
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<tr>
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<td>Note – DEVA inj 500 mg and 1 g vial to be delisted from 1 January 2020.</td>
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<tr>
<td>73</td>
<td>CEFTRIAXONE (price and addition of HSS)</td>
<td>Inj 2 g vial – 1% DV Jan-20 to 2022</td>
<td>$1.98</td>
<td>Ceftriaxone-AFT</td>
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<td>75</td>
<td>ROXITHROMYCIN (price)</td>
<td>Tab dispersible 50 mg</td>
<td>$8.29</td>
<td>Rulide D</td>
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<td>80</td>
<td>ITRACONAZOLE (price and addition of HSS)</td>
<td>Cap 100 mg – 1% DV Nov-19 to 2022</td>
<td>$4.27</td>
<td>Itrazole</td>
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<tr>
<td>84</td>
<td>PENTAMIDINE ISETHIONATE (price and addition of HSS)</td>
<td>Inj 300 mg vial – 1% DV Nov-19 to 2022</td>
<td>$216.00</td>
<td>Pentacarinat</td>
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**MUSCULOSKELETAL SYSTEM**

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<tr>
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<th>Product Description</th>
<th>Details</th>
<th>Price</th>
<th>Brand or Manufacturer</th>
</tr>
</thead>
<tbody>
<tr>
<td>94</td>
<td>PYRIDOSTIGMINE BROMIDE (price and addition of HSS)</td>
<td>Tab 60 mg – 1% DV Nov-19 to 2022</td>
<td>$45.79</td>
<td>Mestinon</td>
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</table>
Changes to Section H Part II – effective 1 August 2019 (continued)

NERVOUS SYSTEM

104 KETAMINE (new listing)
   Inj 100 mg per ml, 2 ml vial .............................................. 155.60 5 Ketamine-Claris

105 BUPIVACAINE HYDROCHLORIDE WITH FENTANYL († price and addition of HSS)
   Inj 1.25 mg with fentanyl 2 mcg per ml,
   100 ml bag – 1% DV Nov-19 to 2022 ...................................... 225.00 10 Bupafen
   Inj 1.25 mg with fentanyl 2 mcg per ml,
   200 ml bag – 1% DV Nov-19 to 2022 ...................................... 235.00 10 Bupafen

106 LIDOCAINE [LIGNOCAINE] HYDROCHLORIDE († price and addition of HSS)
   Inj 2%, 5 ml ampoule – 1% DV Nov-19 to 2022 ....................... 8.25 25 Lidocaine-Claris

106 LIDOCAINE [LIGNOCAINE] HYDROCHLORIDE WITH ADRENALINE († price and addition of HSS)
   Inj 1% with adrenaline 1:100,000, 5 ml ampoule
   – 1% DV Nov-19 to 2022 .................................................. 29.00 10 Xylocaine

107 PARACETAMOL († price and addition of HSS)
   Suppos 25 mg – 1% DV Nov-19 to 2022 .................................. 58.50 20 Biomed
   Suppos 50 mg – 1% DV Nov-19 to 2022 .................................. 58.50 20 Biomed

108 FENTANYL († price and addition of HSS)
   Inj 10 mcg per ml, 100 ml bag – 1% DV Nov-19 to 2022 .............. 220.00 10 Biomed

112 ETHOSUXIMIDE (pack size change)
   Cap 250 mg ................................................................. 140.88 100 Zarontin

   Note – the 200 tab pack (Pharmacode 208876) to be delisted from 1 November 2019.

117 AMISULPIDE († price and addition of HSS)
   Tab 100 mg – 1% DV Nov-19 to 2022 ..................................... 5.15 30 Sulprix
   Tab 200 mg – 1% DV Nov-19 to 2022 ..................................... 14.96 60 Sulprix

117 CHLORPROMAZINE HYDROCHLORIDE (new listing)
   Tab 10 mg – 1% DV Jan-20 to 2022 ....................................... 14.83 100 Largactil
   Tab 25 mg – 1% DV Jan-20 to 2022 ....................................... 15.62 100 Largactil
   Tab 100 mg – 1% DV Jan-20 to 2022 ..................................... 36.73 100 Largactil
   Inj 25 mg per ml, 2 ml ampoule – 1% DV Jan-20 to 2022 ............... 30.79 10 Largactil

ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS

130 FLUDARABINE PHOSPHATE († price and addition of HSS)
   Inj 50 mg vial – 1% DV Nov-19 to 2022 .................................... 576.45 5 Fludarabine Ebewe

142 CALCIUM FOLINATE († price and addition of HSS)
   Inj 10 mg per ml, 10 ml vial – 1% DV Jan-20 to 2022 ............... 9.49 1 Calcium Folate
   Sandoz
   Inj 10 mg per ml, 35 ml vial – 1% DV Nov-19 to 2022 ............ 25.14 1 Calcium Folate
   Sandoz
### Changes to Section H Part II – effective 1 August 2019 (continued)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Price</th>
<th>Brand or Generic</th>
</tr>
</thead>
<tbody>
<tr>
<td>142</td>
<td>CALCIUM FOLINATE (delisting)</td>
<td>$7.33</td>
<td>Calcium Folinate Ebewe</td>
</tr>
<tr>
<td></td>
<td>Inj 10 mg per ml, 10 ml vial</td>
<td>1</td>
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</tr>
<tr>
<td></td>
<td><strong>Note</strong> – Calcium Folinate Ebewe inj 10 mg per ml, 10 ml vial to be delisted from 1 January 2020.</td>
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<td></td>
</tr>
<tr>
<td>142</td>
<td>MESNA († price and addition of HSS)</td>
<td>$314.00</td>
<td>Uromitexan</td>
</tr>
<tr>
<td></td>
<td>Tab 400 mg – 1% DV Nov-19 to 2022</td>
<td>50</td>
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<td></td>
<td>Tab 600 mg – 1% DV Nov-19 to 2022</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Inj 100 mg per ml, 4 ml ampoule – 1% DV Nov-19 to 2022</td>
<td>15</td>
<td>Uromitexan</td>
</tr>
<tr>
<td></td>
<td>Inj 100 mg per ml, 10 ml ampoule – 1% DV Nov-19 to 2022</td>
<td>15</td>
<td>Uromitexan</td>
</tr>
<tr>
<td>151</td>
<td>ADALIMUMAB (amended restriction criteria – new criteria shown only)</td>
<td>$1,599.96</td>
<td>Humira</td>
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<tr>
<td></td>
<td>➔ Inj 20 mg per 0.4 ml syringe</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td>➔ Inj 40 mg per 0.8 ml pen</td>
<td>2</td>
<td>HumiraPen</td>
</tr>
<tr>
<td></td>
<td>➔ Inj 40 mg per 0.8 ml syringe</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

**Restriction**
- Severe Behcet’s disease
- Any relevant practitioner

**Re-assessment required after 3 months**

- All of the following:
  1. The patient has severe Behcet’s disease that is significantly impacting the patient’s quality of life (see Notes); and
  2. Either:
    2.1 The patient has severe ocular, neurological, gastrointestinal, rheumatological, mucocutaneous and/or vasculitic symptoms and has not responded adequately to treatment with infliximab (see Notes); or
    2.2 The patient has severe ocular, neurological, gastrointestinal, rheumatological, mucocutaneous and/or vasculitic symptoms and has experienced intolerable side effects from treatment with infliximab; and
  3. The patient is experiencing significant loss of quality of life; and
  4. Adalimumab to be administered at doses no greater than 40 mg every 14 days.

**Notes:** Behcet’s disease diagnosed according to the International Study Group for Behcet’s disease. Lancet 1990;335(8697):1078-80. Quality of life measured using an appropriate quality of life scale such as that published in Gilworth et al, J Rheumatol. 2004;31:931-7

**Continuation – severe Behcet’s disease**
- Any relevant practitioner

**Re-assessment required after 6 months**

- Both:
  1. Patient has had a good clinical response to initial treatment with measurably improved quality of life; and
  2. Adalimumab to be administered at doses no greater than 40 mg every 14 days.
Changes to Section H Part II – effective 1 August 2019 (continued)

159 BEVACIZUMAB (amended restriction criteria)

- Inj 25 mg per ml, 4 ml vial
- Inj 25 mg per ml, 16 ml vial

Restricted

Initiation – Recurrent Respiratory Papillomatosis
Otolaryngologist

*Re-assessment required after 12 months*

All of the following:
1. Maximum of 6 doses; and
2. The patient has recurrent respiratory papillomatosis; and
3. The treatment is for intra-lesional administration

Continuation – Recurrent Respiratory Papillomatosis
Otolaryngologist

*Re-assessment required after 12 months*

All of the following:
1. Maximum of 6 doses; and
2. The treatment is for intra-lesional administration; and
3. There has been a reduction in surgical treatments or disease regrowth as a result of treatment.

Initiation – ocular conditions

Either:
1. Ocular neovascularisation; or
2. Exudative ocular angiopathy.

169 RITUXIMAB (amended restriction criteria – new criteria shown only)

- Inj 10 mg per ml, 10 ml vial.............................. 1,075.50 2 Mabthera
- Inj 10 mg per ml, 50 ml vial.............................. 2,688.30 1 Mabthera

Restricted

Initiation – Neuromyelitis Optica Spectrum Disorder (NMOSD)
Relevant specialist or medical practitioner on the recommendation of a relevant specialist.

*Re-assessment required after 6 months*

Both:
1. One of the following dose regimens is to be used: 2 doses of 1,000 mg rituximab administered fortnightly, or 4 doses of 375 mg/m² administered weekly for four weeks; and
2. Either:
   2.1 The patient has experienced a severe episode or attack of NMOSD (rapidly progressing symptoms and clinical investigations supportive of a severe attack of NMOSD); or
   2.2 All of the following:
      2.2.1 The patient has experienced a breakthrough attack of NMOSD; and
      2.2.2 The patient is receiving treatment with mycophenolate; and
      2.2.3 The patients is receiving treatment with corticosteroids.

Continuation – Neuromyelitis Optica Spectrum Disorder (NMOSD)
Relevant specialist or medical practitioner on the recommendation of a relevant specialist.

*Re-assessment required after 2 years*

All of the following:
1. One of the following dose regimens is to be used: 2 doses of 1,000 mg rituximab administered fortnightly, or 4 doses of 375 mg/m² administered weekly for four weeks; and
2. The patients has responded to the most recent course of rituximab; and
3. The patient has not received rituximab in the previous 6 months.

continued...
Initiation – Severe Refractory Myasthenia Gravis
Neurologist or medical practitioner on the recommendation of a neurologist.
Re-assessment required after 2 years
Both:
1 One of the following dose regimens is to be used: 375 mg/m² of body surface area per week for a total of four weeks, or 500 mg once weekly for four weeks, or two 1,000 mg doses given two weeks apart; and
2 Either:
   2.1 Treatment with corticosteroids and at least one other immunosuppressant for at least a period of 12 months has been ineffective; or
   2.2 Both:
      2.2.1 Treatment with at least one other immunosuppressant for a period of at least 12 months; and
      2.2.2 Corticosteroids have been trialed for at least 12 months and have been discontinued due to unacceptable side effects.

Continuation – Severe Refractory Myasthenia Gravis
Neurologist or medical practitioner on the recommendation of a neurologist.
Re-assessment required after 2 years
All of the following:
1 One of the following dose regimens is to be used: 375 mg/m² of body surface area per week for a total of four weeks, or 500 mg once weekly for four weeks, or two 1,000 mg doses given two weeks apart; and
2 An initial response lasting at least 12 months was demonstrated; and
3 Either:
   3.1 The patient has relapsed despite treatment with corticosteroids and at least one other immunosuppressant for a period of at least 12 months; or
   3.2 Both
      3.2.1 The patient’s myasthenia gravis has relapsed despite treatment with at least one immunosuppressant for a period of at least 12 months; and
      3.2.2 Corticosteroids have been trialed for at least 12 months and have been discontinued due to unacceptable side effects.

### RESPIRATORY SYSTEM AND ALLERGIES

<table>
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<tr>
<th>Code</th>
<th>Description</th>
<th>Price</th>
<th>Brand or Generic</th>
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<tbody>
<tr>
<td>186</td>
<td>AZATHIOPRINE (brand change)</td>
<td></td>
<td>Azamun</td>
</tr>
<tr>
<td></td>
<td>Tab 25 mg –  1% DV Jan-20 to 2022</td>
<td>7.35</td>
<td>60</td>
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<tr>
<td></td>
<td>Tab 50 mg – 1% DV Jan-20 to 2022</td>
<td>7.60</td>
<td>100</td>
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<tr>
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<td>Note – Imuran tab 25 mg and 50 mg to be delisted from 1 January 2020.</td>
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<table>
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<tr>
<th>Code</th>
<th>Description</th>
<th>Price</th>
<th>Brand or Generic</th>
</tr>
</thead>
<tbody>
<tr>
<td>186</td>
<td>AZATHIOPRINE († price and addition of HSS)</td>
<td></td>
<td>Imuran</td>
</tr>
<tr>
<td></td>
<td>Inj 50 mg vial – 1% DV Nov-19 to 2022</td>
<td>199.00</td>
<td>1</td>
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<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Price</th>
<th>Brand or Generic</th>
</tr>
</thead>
<tbody>
<tr>
<td>189</td>
<td>CETIRIZINE HYDROCHLORIDE († price and addition of HSS)</td>
<td></td>
<td>Zista</td>
</tr>
<tr>
<td></td>
<td>Tab 10 mg – 1% DV Nov-19 to 2022</td>
<td>1.12</td>
<td>100</td>
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<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Price</th>
<th>Brand or Generic</th>
</tr>
</thead>
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<tr>
<td>189</td>
<td>IPRATROPIUM BROMIDE († price and addition of HSS)</td>
<td></td>
<td>Univent</td>
</tr>
<tr>
<td></td>
<td>Nebuliser soln 250 mcg per ml, 2 ml ampoule</td>
<td>11.73</td>
<td>20</td>
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<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Price</th>
<th>Brand or Generic</th>
</tr>
</thead>
<tbody>
<tr>
<td>193</td>
<td>MONTELUKAST (brand change)</td>
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<td>Montelukast Mylan</td>
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<tr>
<td></td>
<td>Tab 4 mg – 1% DV Jan-20 to 2022</td>
<td>4.25</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>Tab 10 mg – 1% DV Jan-20 to 2022</td>
<td>3.95</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>Note – Apo-Montelukast tab 4 mg and 10 mg to be delisted from 1 January 2020.</td>
<td></td>
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</table>

Products with Hospital Supply Status (HSS) are in **bold**.
Expiry date of HSS period is 30 June of the year indicated unless otherwise stated.
Changes to Section H Part II – effective 1 August 2019 (continued)

194  CAFFEINE CITRATE († price and addition of HSS)
     Oral liq 20 mg per ml (caffeine 10 mg per ml)
     – 1% DV Nov-19 to 2022 ........................................... 15.10  25 ml  Biomed
     Inj 20 mg per ml (caffeine 10 mg per ml),
     2.5 ml ampoule – 1% DV Nov-19 to 2022 ..................... 63.25  5  Biomed

194  THEOPHYLLINE (new listing)
     Tab long-acting 250 mg – 1% DV Jan-20 to 2022 ............ 23.02  100  Nuelin-SR
     Oral liq 80 mg per 15 ml – 1% DV Jan-20 to 2022 ......... 16.60  500 ml  Nuelin

194  SODIUM CHLORIDE († price and addition of HSS)
     Nebuliser soln 7%, 90 ml bottle – 1% DV Nov-19 to 2022 .... 24.50  90 ml  Biomed

SENSORY ORGANS

196  CHLORAMPHENICOL (addition of HSS)
     Eye drops 0.5% – 1% DV Nov-19 to 2022 ................. 1.54  10 ml  Chlorafast

198  SODIUM CROMOGLICATE (new listing)
     Eye drops 2% – 1% DV Jan-20 to 2022 ....................... 1.79  5 ml  Rexacrom

200  TIMOLOL (delisting)
     Eye drops 0.25%, gel forming ...................................... 3.30  2.5 ml  Timoptol XE
     Note – Timoptol XE eye drops 0.25%, gel forming to be delisted from 1 January 2020.

EXTEMPORANEously COMPOUNDED PREPARATIONS

211  COAL TAR († price and addition of HSS)
     Soln BP – 1% DV Nov-19 to 2022 ............................... 36.25  200 ml  Midwest

212  MAGNESIUM HYDROXIDE (new listing)
     Suspension

212  SODIUM BICARBONATE (new listing)
     Powder BP – 1% DV Jan-20 to 2022 ............................ 10.05  500 g  Midwest

213  SYRUP (pack size change)
     Liq (pharmaceutical grade) – 1% DV Jan-20 to 2022 ....... 14.95  500 ml  Midwest
     Note – Midwest liq (pharmaceutical grade), 2,000 ml bottle pack to be delisted from 1 January 2020.
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>➤ Inj 270 mcg in 0.5 ml syringe – 0% DV Jun-17 to 2020 ..........................0.00 10 Gardasil 9</td>
</tr>
</tbody>
</table>

Restricted

Initiation – (Recurrent Respiratory Papillomatosis)

All of the following:

1. Either:
   1.1 Maximum of two doses for children aged 14 years and under; or
   1.2 Maximum of three doses for people aged 15 years and over.

2. The patient has recurrent respiratory papillomatosis; and

3. The patient has not previously had an HPV vaccine.
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ISSN 1172-3694 (Print)
ISSN 1179-3708 (Online)

Te Kāwanatanga o Aotearoa   New Zealand Government

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