



DEPARTMENT OF THE AIR FORCE  
HEADQUARTERS 375TH MEDICAL GROUP (AMC)

14 January 2010

Dear Health Care Provider,

This list contains the current medications stocked at Scott Air Force Base Pharmacy. This list can also be accessed online at [www.raolibrary.org](http://www.raolibrary.org). Our formulary system is designed to provide the most therapeutic and cost-effective medications that will treat the patients seen by Scott AFB providers. **Since all medications are dispensed generically, please prescribe allowing generic substitution.** This will save your patient's time, the Pharmacy's time, and most importantly, YOUR TIME. Medications listed that are in **bold** print indicate new additions to our formulary. Medications identified with \*\* indicate Basic Core Formulary medications that are available at all military treatment facilities, allowing continuity of care.

Our pharmacy's policy is to dispense up to a 3-month supply when the medication is used in treating a chronic disease. **However, the prescription must reflect that a 3-month supply is desired.** We do have a few quantity limits based on TRICARE restrictions and our disease state management protocols. These medications are identified by an asterisk (\*) in front of their name. Some prescriptions may be refilled for 1-year if indicated on the prescription. Medications used to treat acute problems should be prescribed for the minimum amount required. If your patient requires a drug not on our formulary, that medication will have to be purchased by the patient via TRICARE network pharmacies (\$3 generic/\$9 brand/\$22 non-formulary) for 30-day supply or, preferably, the TRICARE Mail Order Pharmacy (TMOP) where a 90-day supply can be received for single co pay (\$3 generic/\$9 brand/\$22 non-formulary). The TMOP can be reached at <http://www.express-scripts.com>, or **toll free at 1-866-DOD.TMOP (866-363-8667)**. If you have questions regarding medication availability, cost share/co pays and alternatives under the TRICARE pharmacy benefit, help is available at: <http://www.tricareformularysearch.org/>

Dear Patient,

Welcome to the Scott Air Force Base Pharmacy. All civilian prescriptions and all refills called in to the automated refill line are filled at our Satellite Pharmacy, which is located at 312 W. Winters St. It is very important that you review your written prescription before leaving your provider's office to ensure legibility and completeness to include name, date, signature, quantity, refills, and provider's DEA number (required for controlled medications and for providers not in our database). If you can't read it, chances are that we will not be able to either. **Altering a written prescription is illegal and has led to involvement with Security Forces.**

The Main Pharmacy will only fill prescriptions entered into the computer by 375th Medical Group providers in the hospital or at the Family Practice Clinic. Prescriptions are not automatically filled when the provider enters them into the computer. **YOU MUST TAKE A NUMBER AT THE PHARMACY WINDOW TO ACTIVATE YOUR PRESCRIPTION AND START THE FILLING PROCESS.** The modification is in conjunction with an Air Force-wide technology change and is an effort to better serve the patient that is present at the facility.

**REFILLS MUST BE CALLED IN USING OUR AUTOMATED REFILL LINE AT 256-7400.** When calling in your prescription, please listen carefully in order to determine when your refills will be available for pick-up. Generally, this is between 1 and 2 duty days. Holidays and down days do not count as duty days. Refills will be held for two weeks. You do not need to take a number for a refill pick-up. Additionally, the Satellite Pharmacy is pleased to offer drive-thru refill pickup service during normal duty hours. This service is available for the pickup of small to medium sized prescription orders. Prescriptions that are liquid or of excessive size cannot be put through the tube system and will require pickup inside the satellite pharmacy. Thank you for your cooperation. If you have a question, contact us at (618) 256-7371.

Sincerely,

K. WADE TILLER, Lt Col(s), USAF, BSC  
Pharmacy Flight Commander

**ALLERGY/ANTIHIST/DECONGESTANT**

ACTIFED TAB  
 ALLEGRA 30mg, 60mg, & 180mg TAB  
 ALLEGRA-D 12 HR & 24 HR SR TAB  
 ATARAX 10mg & 25mg TAB \*\*  
 ATARAX 10mg/5mL SYRUP \*\*  
 BENADRYL 12.5mg/5mL ELIXIR  
 BENADRYL 25mg & 50mg CAP  
 CHLOR-TRIMETON 2mg/5mL SYRUP  
 CHLOR-TRIMETON 4mg TAB  
 CHLOR-TRIMETON 8mg SR CAP  
 CLARITIN 10mg TAB & 1mg/mL SYRUP  
 DECONAMINE SR CAP  
 TWINJECT 0.15mg & 0.3mg AUTO-INJECTOR \*\*  
 PERIACFIN 4mg TAB \*\*  
 SUDAFED 30mg/5mL SYRUP  
 ZYRTEC 10mg TAB & 1mg/mL SYRUP  
 ZYRTEC-D TAB

**ANALGESICS AND ANTIPYRETICS**

ASPIRIN 325mg TAB  
 ASPIRIN EC 81mg & 325mg TAB  
 CELEBREX 100mg & 200mg & 400mg CAP  
 DISALCID 500mg & 750mg TAB \*\*  
 FELDENE 20mg CAP  
 FIORICET TAB \*\*  
 INDOCIN 25mg & 50mg CAP \*\*  
 MOBIC 7.5mg & 15mg TAB \*\*  
 MOTRIN 100mg/5mL SUSPENSION \*\*  
 MOTRIN 400mg, 600mg & 800mg TAB \*\*  
 NAPROSYN 250mg, 375mg & 500mg TAB \*\*  
 PYRIDIUM 100mg TAB \*\*  
 TYLENOL 325mg & 500mg TAB  
 TYLENOL 160mg/5mL ELIXIR  
 TYLENOL INFANT DROPS  
 \*ULTRAM 50mg TAB (720 tabs/90days) \*\*

**ANTIPARKINSONIAN AGENTS**

ARTANE 2mg TAB\*\*  
 COGENTIN 0.5mg & 1mg & 2mg TAB\*\*  
 ELDEPRYL 5mg TAB  
**REQUIP 0.25, 0.5, 0.75, 1mg, 2mg, 4mg, 5mg tab**  
 SINEMET TAB & CR TAB (all strengths) \*\*

**ANTIMUSCARINICS/ANTISPASMODICS**

BENTYL 10mg CAP & 20mg TAB \*\*  
 DONNATAL ELIXIR & TAB  
 LEVBIID 0.375mg SR TAB  
 LEVSIN 0.125mg TAB  
 PRO-BANTHINE 15mg TAB

**ANTICONSULSANTS**

CARBATROL 100mg, 200mg & 300mg CAP  
 DEPAKENE 250mg CAP & 250mg/5mL SYRUP  
 DEPAKOTE 125mg SPRINKLE CAP  
 DEPAKOTE 125mg, 250mg, & 500mg TAB \*\*  
 DEPAKOTE ER 250mg & 500mg TAB \*\*  
 DILANTIN 125mg/5mL SUSPENSION \*\*  
 DILANTIN 30mg & 100mg CAP \*\*  
 DILANTIN 50mg CHEWABLE TAB \*\*  
 FELBATOL 400mg & 600mg TAB  
 FELBATOL 600mg/5mL SUSP  
 MYSOLINE 50mg & 250mg TAB  
 NEURONTIN TABS & CAPS (all strengths) \*\*  
 TEGRETOL 100mg CHEWABLE & 200mg TAB \*\*  
 TEGRETOL 100mg/5mL SUSPENSION \*\*  
**TOPAMAX 25mg, 50mg, 100mg, 200mg TAB**

**ANTIDIABETIC AGENTS**

**ACTOS 15MG, 30MG & 45MG TAB**  
**ALCOHOL PADS FOR DIABETICS**  
 AMARYL 2mg & 4mg TAB  
 AVANDAMET TAB (all strengths) \*\*  
 AVANDIA 2mg, 4mg & 8mg TAB \*\*  
 GLYBURIDE 1.25mg, 2.5mg & 5mg TAB \*\*  
 GLYNASE 1.5, 3mg, 6mg PRESTAB \*\*  
 GLIPIZIDE 5mg & 10mg TAB \*\*  
 GLUCAGON 1mg INJECTION KIT  
 GLUCOTROL XL 2.5mg, 5mg & 10mg TAB  
 GLUCOPHAGE 500mg, 850mg, & 1000mg TAB \*\*  
 GLUCOVANCE TAB (all strengths)  
**JANUVIA 25MG, 50MG, & 100MG TAB**

**JANUMET 500MG/50MG; 1000MG/50MG TAB**

**ANTIDIABETIC AGENTS (con't)**  
 LANTUS (GLARGINE) INSULIN \*\*  
**LANCETS FOR DIABETIC TESTING**  
 NOVOLIN INSULIN (all types-vials only) \*\*  
 NOVOLOG & NOVOLOG MIX 70/30 INSULIN \*\*

**ANTI-INFECTIVE LIQUIDS**

AMOXIL 125mg/5mL, 250mg/5mL, 400mg/5mL \*\*  
 AUGMENTIN 200mg/5mL, 250mg/5mL & 400mg/5mL\*\*  
 AUGMENTIN ES 600mg/5mL SUSPENSION \*\*  
 BACTRIM SUSPENSION \*\*  
 CEFZIL 250mg/5mL SUSPENSION  
 CLEOCIN 75mg/5mL SUSPENSION  
 \*DIFLUCAN 10mg/mL & 40mg/mL (children only)  
 DURICEF 250mg/5mL & 500mg/5mL SUSP  
 E.E.S. 200mg/5mL SUSPENSION \*\*  
 FURADANTIN 25mg/5mL SUSPENSION  
 GANTRISIN 500mg/5mL SUSPENSION  
 GRIFULVIN 125mg/5mL SUSPENSION \*\*  
 KEFLEX 250mg/5mL SUSPENSION \*\*  
 NYSTATIN SUSPENSION \*\*  
 OMNICEF 125mg/5mL & 250mg/5mL SUSPENSION  
 PEDIAZOLE 200mg/600mg/5mL SUSPENSION \*\*  
 PENICILLIN VK 125mg/5mL & 250mg/5mL SUSP \*\*  
 ZITHROMAX 100mg/5mL\*\* & 200mg/5mL SUSP  
 ZITHROMAX 1g PACKET SUSPENSION \*\*

**ANTI-INFECTIVE TABLETS/CAPSULES**

AMOXIL 250mg\*\* & 500mg CAP\*\*, & 875mg TAB  
 AUGMENTIN 250mg, 500mg & 875mg TAB \*\*  
 BACTRIM & BACTRIM DS TAB \*\*  
 BLAXIN 250mg & 500mg TAB  
 CEFZIL 250mg & 500mg TAB  
 CLEOCIN 150mg CAP \*\*  
 CIPRO 250mg, 500mg, & 750mg TAB\*\*  
 DAPSONE 25mg TAB  
 DECLOMYCIN 150mg TAB  
 DICLOXACILLIN 250 mg, 500mg CAP\*\*  
**DIFLUCAN 100mg & 200mg TAB**  
**DIFLUCAN 150mg TAB \*\***  
 DYNAPEN 250mg CAP \*\*  
 E-MYCIN 250mg TAB \*\*  
 E.E.S. 400mg TAB \*\*  
 FLAGYL 250mg & 500mg TAB \*\*  
 GANTRISIN 500mg TAB  
 GRIS-PEG 125mg TAB \*\*  
 KEFLEX 250mg & 500mg CAP \*\*  
 LEVAQUIN 250mg & 500mg & 750mg TAB \*\*  
 MACROBID 100mg CAP  
 MACRODANTIN 25mg & 50mg\*\* & 100mg\*\* CAP  
 MINOCIN 50mg & 100mg CAP  
 MYCELEX 10mg TROCHES  
 NYSTATIN TABS 500,000 UNITS \*\*  
 PENICILLIN VK 250mg & 500mg TAB \*\*  
 TETRACYCLINE 250mg & 500mg CAP \*\*  
 VANTIN 100mg & 200mg TAB  
 VERMOX 100mg TAB \*\*  
 VIBRAMYCIN 100mg TAB & CAP \*\*  
 ZITHROMAX 250mg TAB \*\* (10 tabs/30 days)  
 ZITHROMAX 500mg TAB TRI-PAK

**ANTILIPEMIC AGENTS**

COLESTID GRANULES & 1g TAB \*\*  
**FENOGLIDE 40mg & 120mg TAB \*\***  
 LIPITOR 10mg, 20mg, 40mg, & 80mg TAB  
 LOPID 600mg TAB \*\*  
 NIACIN 50mg & 500mg TAB  
 NIASPAN 500mg, 750mg & 1000mg TAB\*\*  
 PRAVACHOL 10mg, 20mg, 40mg & 80mg TAB \*\*  
 QUESTRAN LIGHT 4g/scoop POWDER  
 ZETIA 10mg TAB  
 ZOCOR 5mg, 10mg, 20mg, 40mg & 80mg TAB \*\*  
 VYTORIN (all strengths) TAB \*\*

**ANTIMALARIAL AGENTS**

ARALEN 500mg TAB  
 LARIAM 250mg TAB  
 PLAQUENIL 200mg TAB  
 PRIMAQUINE 26.3mg TAB

**ANTINEOPLASTIC AGENTS**

**ANTINEOPLASTIC AGENTS (con't)**  
 HYDREA 500mg CAP  
 IMURAN 50mg TAB  
 MEGACE 40mg TAB & 40mg/mL SUSPENSION  
 METHOTREXATE 2.5mg TAB \*\*  
 TAMOXIFEN 10mg TAB \*\*  
 ZOLADEX 3.6mg & 10.8mg IMPLANTS\*\*

**ANTITUBERCULARS**

ETHAMBUTOL 400mg TAB \*\*  
 ISONIAZID 50mg/5mL SYRUP \*\*  
 ISONIAZID 100mg & 300mg TAB \*\*  
 PYRAZINAMIDE 500mg TAB \*\*  
 RIFAMPIN 150mg & 300mg CAP \*\*

**ANTITUSSIVE, EXPECTORANT & MUCOLYTIC**

ROBITUSSIN PLAIN or DM SYRUP  
 MUCINEX TABLETS  
 TESSALON PERLES 100MG

**ANTIVIRALS**

SYMMETREL 100mg CAP \*\*  
 ZOVIRAX 200mg CAP & 400mg, 800mg TAB \*\*  
 VALTREX 500mg & 1g TAB

**AUTONOMIC/ CHOLINERGIC DRUGS**

ARICEPT 5mg & 10mg TABS  
 MESTINON 60mg TAB & 180mg SR TAB  
 URECHOLINE 10mg & 25mg TAB

**BLOOD FORMATION/COAGULATION**

COUMADIN TAB (all strengths) \*\*  
 FER-IN-SOL SOLUTION  
 FERROUS SULFATE 325mg TAB \*\*  
 LOVENOX INJ (all strengths) \*\*  
 PLAVIX 75mg TAB \*\*  
 TRENTAL 400mg TAB

**CARDIAC DRUGS**

CORDARONE 200mg TAB \*\*  
 LANOXIN 0.125mg & 0.25mg TAB \*\*  
 LANOXIN 0.25mg/ml SOLUTION  
 TAMBOCOR 100mg TAB

**DENTAL AGENTS**

PERIDEX 0.12% ORAL RINSE \*\*  
 PERIOSTAT 20mg TAB  
 PREVIDENT 5000 PLUS & BRUSH-ON GEL  
 SODIUM FLUORIDE 1.1mg/ml DROPS, 1.1mg TAB  
 TRIAMCINOLONE DENTAL PASTE

**DEVICES**

EASIVENT HOLDING CHAMBER \*\*  
 EASIVENT MASK (SM, MED, LG) \*\*  
 \*INSULIN SYRINGE, LO or HIGH DOSE  
 (600 syringes/90 days) \*\*  
 OPTIHALER INHALER SPACER \*\*  
 PEAK FLOW METERS (LOW & HIGH RANGE)  
 \*PRECISION XTRA GLUCOSE TEST STRIPS  
 (612 strips/90 days) \*\*  
 PRECISION XTRA GLUCOSE MONITOR \*\*  
 PRECISION XTRA BLOOD β-KETONE STRIPS  
 TABLET SPLITTER

**DIURETICS**

ALDACTAZIDE 25mg/25mg TAB  
 ALDACTONE 25mg & 100mg TAB \*\*  
 BUMEX 0.5mg, 1mg & 2mg TAB  
 HYDROCHLOROTHIAZIDE 25mg & 50mg TAB \*\*  
 HYGROTON 25mg & 50mg TAB \*\*  
 LASIX 20mg, 40mg & 80mg TAB \*\*  
 MAXZIDE 37.5/25mg & 75/50mg TAB \*\*  
 ZAROXOLYN 2.5mg & 5mg TAB

**EAR AGENTS**

AURALGAN OTIC SOLUTION \*\*  
 COLYMCIN-S OTIC SUSPENSION  
 CORTISPORIN OTIC SOLUTION & SUSP \*\*  
 DOMEBORO OTIC SOLUTION  
 FLOXIN OTIC 0.3% SOLUTION

VOSOL & VOSOL HC OTIC DROPS

**EYE AGENTS**

ACULAR 0.5% OPH SOLUTION  
ALPHAGAN-P 0.1%, 0.15% OPH SOL \*\*  
ATROPINE 1% OPH SOLUTION  
BACITRACIN OPH OINTMENT  
BLEPHAMIDE OPH SUSPENSION  
CIOXAN OPH 0.3% SOLU  
**COMBIGAN OPH SOLUTION**  
CORTISPORIN OPH SUSPENSION  
COSOPT 2%/0.5% OPH SOLUTION  
CYCLOGYL 0.5% & 1% OPH SOLUTION  
DIAMOX 250mg TAB & 500mg SR CAP  
FLAREX 0.1% OPH SOLUTION  
GARAMYCIN OPH SOLUTION & OINTMENT \*\*  
ILOTYCIN OPH OINTMENT \*\*  
ISOPTO HOMATROPINE 2% & 5% OPH SOL  
LOTEMAX 0.5% OPH SUSPENSION  
**LUMIGAN OPH SOLUTION**  
MAXITROL OPH OINTMENT  
MURO-128 5% OPH SOLUTION & OINTMENT  
MYDRIACYL 1% OPH SOLUTION  
NAPHCON A OPH SOLUTION  
NEOSPORIN OPH OINTMENT & SOLUTION \*\*  
NEOSYNEPHRINE 2.5% & 10% OPH SOLUTION  
PATADAY 0.2% OPH SOLUTION  
PATANOL 0.1% OPH SOLUTION  
PILOCARPINE 1% , 2%, 4%OPH SOL \*\*  
PILOPINE HS 4% OPH GEL \*\*  
POLYSPORIN OPH OINTMENT  
POLYTRIM OPH SOLUTION \*\*  
PRED FORTE 1% OPH SUSPENSION \*\*  
PRED MILD 0.12% OPH SOLUTION  
SULAMYD 10% OPH OINTMENT & SUSP \*\*  
TIMOPTIC 0.25% & 0.5% OPH SOLUTION \*\*  
TIMOPTIC-XE 0.25 & 0.5% OPH SOLUTION \*\*  
TRUSOPT OPH SOLUTION  
VIGAMOX OPH SOLUTION  
VIROPTIC 1% OPH SOLUTION  
XALATAN 0.005% OPH SOLUTION \*\*  
ZYLET 0.5%/0.3% OPH SUSPENSION

**ELECTRO/CALORIC/WATER BALANCE**

**ALAKALINIZING AGENTS**

BICITRA  
UROCIT-K (all strengths)

**AMMONIA DETOXICANTS**

CEPHULAC 10gm/15mL SYRUP \*\*

**REPLACEMENT ION THERAPY**

K-PHOS NEUTRAL TAB  
POTASSIUM CHLORIDE 10 mEq TAB \*\*  
PHOSLO 667mg GelCap  
POTASSIUM CHLORIDE 10% ELIXIR \*\*

**URICOSURIC AGENTS**

BENEMID 500mg TAB \*\*  
COLCHICINE 0.6mg TAB

**GASTROINTESTINAL DRUGS**

ASACOL 400mg TAB  
AZULFIDINE 500mg TAB \*\*  
CARAFATE 1gm TAB  
CIMETIDINE 300mg, 400mg TB & 300mg/5mL SYR  
COMPAZINE 5mg & 10mg TAB & 25mg SUPP  
CYTOTEC 200mg TAB  
COLACE 100mg CAPSULE  
COLYTE SOLUTION  
DULCOLAX 5mg TABS & 10mg SUPP  
FLEETS ENEMA & PEDIATRIC ENEMA  
FLEETS PHOSPHO-SODA  
IMODIUM 2mg CAP \*\*  
METOCLOPRAMIDE 10mg TAB & 5mg/5mL\*\*  
MIRALAX 119g & 238g POWDER  
NEXIUM 20mg & 40mg SR CAP \*\*  
NuLYTELY SOLN  
PANCREASE (CREON) CAP  
PEPTO-BISMOL TAB  
PHENERGAN 25mg TAB \*\*  
PHENERGAN 12.5mg & 25mg SUPP \*\*

PRILOSEC 10mg & 20mg CAP \*\*

**GASTROINTESTINAL DRUGS (cont)**

RANITIDINE 150mg TAB & 15mg/mL LIQ \*\*  
TIGAN 300mg CAP  
TORECAN 10mg TAB  
TRILYTE SOLUTION  
TRANSDERM SCOP 1.5mg TDRM  
\*ZOFRAN 4mg & 8mg TAB (45 tabs/90 days)

**HORMONES/ REPLACEMENT ADRENALS**

CORTEF 5mg & 10mg TAB  
CORTONE ACETATE 25mg TAB  
DECADRON 0.5mg, 0.75mg & 4mg TAB  
FLORINEF 0.1mg TAB  
MEDROL DOSEPAK 4mg TAB  
ORAPRED 15mg/5mL \*\*  
PREDNISON 1mg, 5mg, 10mg & 20mg TAB \*\*  
PREDNISON 5mg/5mL SOLUTION  
PRELONE 15mg/5mL SYRUP

**ANDROGENS**

METHYLTESTOSTERONE 10mg CAP  
TESTOSTERONE TRANSDERM 2.5mg/d & 5mg/d

**ANTI-ANDROGEN**

EULEXIN 125mg CAP

**CONTRACEPTIVES**

ALESSE TAB \*\*  
DEMULEN 1-35 TAB  
**IMPLANON SYSTEM**  
LEVLIN 28 TAB  
LO-ESTRIN FE 1.5/30 & 1/20  
LO/OVRAL 28 TAB  
MICRONOR 28 TAB \*\*  
MIRENA IUD  
NORDETTE 28 TAB \*\*  
NORINYL 1-35 TAB \*\*  
NUVARING  
ORTHO-NOVUM 7/7/7 TAB  
ORTHO-CYLEN 28 TAB \*\*  
ORTHO-EVRA PATCH  
ORTHO-TRI-CYCLEN 28 TAB \*\*  
ORTHO-TRI-CYCLEN LO 28 TAB \*\*  
OVRAL TAB  
TRI-LEVLIN TAB  
YASMIN TAB \*\*  
YAZ TAB \*\*

**ESTROGENS**

ESTRACE 1mg & 2mg TAB  
ESTRADERM 0.05mg & 0.1mg TDRM  
ESTRATEST & ESTRATEST HS TAB  
EVISTA 60mg TAB  
FEMHRT 0.5/2.5mg & 1/5mg TAB  
PREMPRO TAB (all strengths) \*\*  
PREMARIN TAB (all strengths) \*\*  
PREMARIN VAGINAL CREAM \*\*

**PROGESTINS**

AYGESTIN 5mg TAB  
DEPO PROVERA 150mg/mL INJ  
PROVERA 2.5mg, 5mg, & 10mg TAB \*\*

**THYROID-RELATED AGENTS**

CYTOMEL 5mcg & 25mcg & 50mcg TAB  
PROPYLTHIOURACIL 50mg TAB \*\*  
SYNTHROID TABS (all strengths) \*\*

**HYPOTENSIVE AGENTS**

ADALAT CC 30mg, 60mg & 90mg TAB \*\*  
ALDOMET 250mg TAB  
APRESOLINE 10mg & 25mg & 50mg TAB \*\*  
BETAPACE 80mg, 120mg, & 160mg  
CAPOTEN 25mg & 50mg & 100mg TAB \*\*  
CARDURA 2mg, 4mg & 8mg TAB \*\*  
CATAPRES 0.1mg & 0.2mg TAB \*\*  
CATAPRES TTS-1, TTS-2 & TTS-3 TDRM  
COREG 3.125mg, 6.25mg, 12.5mg & 25mg TAB  
COZAAR 25mg, 50mg & 100mg TAB  
DILTIAZEM 60mg TAB

HYTRIN 1mg, 2mg, 5mg & 10mg CAP \*\*

**HYPOTENSIVE AGENTS (cont.)**

HYZAAR TAB (all strengths)  
INDERAL 10mg, 40mg & 80mg TAB  
INDERAL LA 60mg, 80mg, 120mg & 160mg CAP  
LONITEN 2.5mg & 10mg TAB  
LOPRESSOR 25mg & 50mg & 100mg TAB \*\*  
LOTREL CAPS (all strengths) \*\*  
MICARDIS 20mg, 40mg & 80mg TAB \*\*  
MICARDIS HCT (all strengths) TAB \*\*  
MONOPRIL 10mg, 20mg & 40mg TAB  
NIFEDIPINE 10mg CAP  
NORVASC 2.5mg, 5mg, & 10mg TAB\*\*  
PLENDIL 2.5mg, 5mg & 10mg TAB  
**TEKTURNA 150mg TAB**  
**TEKTURNA HTZ 150/12.5, 150/25, 300/12.5, 300/25mg TAB**  
**TENORETIC 50/25mg, 100/25 mg, TAB**  
TENORMIN 25mg, 50mg & 100mg TAB \*\*  
TIAZAC 120mg, 180mg, 240mg, 300mg & 360mg CAP \*\*  
TOPROL-XL 25mg, 50mg, 100mg & 200mg TAB  
TRANDATE 200mg TAB  
VERAPAMIL 80mg & 120mg TAB  
VERAPAMIL SR 120mg, 180mg & 240mg TAB \*\*  
ZESTRIL/PRINIVIL (all strengths) TAB \*\*  
ZESTORETIC/PRINZIDE (all strengths) TAB \*\*

**MIGRAINE AGENTS**

CAFERGOT TAB  
FIORICET TAB \*\*  
\*MAXALT MLT 5mg & 10mg (36 tabs/90 days)  
\*MAXALT 5mg & 10mg TAB (36 tabs/90 days)  
MIDRIN CAP  
\*IMITREX 6mg INJ (2 syr/box-max 12 boxes/90 days) \*\*  
\*ZOMIG 2.5mg & 5mg TAB (36 tabs/90 days) \*\*  
\*ZOMIG ZMT 2.5mg & 5mg TAB (36 tabs/90 days)

**MISCELLANEOUS AGENTS**

**ACTONEL 75mg 150mg TAB**  
**BONIVA 150Mg TAB\*\***  
CLOMID 50mg TAB  
CUPRIMINE 250mg CAP  
DIDRONEL 200mg TAB  
DDAVP 0.1mg/mL NASAL SPRAY  
EDEX 20mcg & 40mcg INJECTION KIT  
**FORTICAL NASAL SOLUTION**  
FOSAMAX 10mg, 35mg, & 70mg TAB \*\*  
KAYEXALATE 15gm/60mL SUSPENSION  
\*LEVITRA (all strengths) TAB (18 tabs/90 days)  
> age 50 requires Prior Authorization Form  
LUPRON DEPOT 3.75mg, 7.5mg, 11.25mg INJ KIT  
NEORAL (GENERIC) 25mg & 100mg CAP  
NEORAL 100mg/mL SOLUTION  
OXSORALEN 10mg CAP  
PARLODEL 2.5mg TAB  
PROSCAR 5mg TAB \*\*  
STRATTERA 10mg, 18mg, 25mg, 40mg, 60mg CAP  
UROXATRAL 10mg TAB \*\*  
ZYLOPRIM 100 & 300mg TAB \*\*

**NASAL (LOCAL ACTING) AGENTS**

AFRIN NASAL SPRAY  
\*ASTELIN NASAL SPRAY (4 inhalers/90 days) \*\*  
\*FLONASE NASAL SPRAY (3 inhalers/90 days) \*\*  
NASALCROM NASAL SPRAY  
\*NASONEX NASAL SPRAY (6 inhalers/90 days)

**PSYCHOTHERAPEUTICS**

AMITRIPTYLINE 10mg, 25mg & 50mg TAB \*\*  
BUSPAR 5mg, 10mg & 15mg TAB \*\*  
CELEXA 10mg, 20mg & 40mg TAB \*\*  
EFFEXOR 25mg, 37.5mg, 50mg, 75mg & 100mg TAB  
EFFEXOR XR 37.5mg, 75mg & 150mg CAP  
HALDOL 1mg & 5mg TAB  
LITHIUM CARBONATE 150mg & 300mg CAP \*\*  
NORPRAMIN 25mg & 50mg TAB  
PAMELOR 10mg & 25mg CAP \*\*  
PAXIL 10mg, 20mg, 30mg & 40mg TAB  
PROZAC 10mg & 20mg CAP \*\* (Preferred SSRI)  
RISPERDAL TAB (all strengths) & 1mg/mL SOL \*\*

SEROQUEL 25mg, 50mg, 100mg, 200mg & 300mg TAB  
SEROQUEL XR 50mg, 150mg, 200mg, 300mg, 400mg TAB  
**PSYCHOTHERAPEUTICS (con't)**  
SERZONE 100mg, 150mg, 200mg & 250mg TAB  
SINEQUAN 10mg & 25mg CAP \*\*  
THORAZINE 25mg, 50mg & 100mg TAB  
TOFRANIL 10mg & 25mg TAB \*\*  
TOFRANIL PM 75mg CAP \*\*  
TRAZODONE 50mg, 100mg & 150mg TAB \*\*  
WELLBUTRIN SR TABS (all strengths) \*\*  
ZOLOFT 50mg & 100mg TABS \*\*  
ZYPREXA 2.5mg, 5mg, 7.5mg, 10mg & 15mg TAB  
ZYPREXA ZYDIS 5mg, 10mg, 15mg & 20mg TAB

### **RESPIRATORY AGENTS**

\*ADVAIR DISKUS (all strengths) (3 disk/90days) \*\*  
\*ADVAIR HFA (6 inhalers/90days) \*\*  
\*ASMANEX TWISTHALER (6 inhalers/90days) \*\*  
\*ATROVENT HFA INHALER (6 inhalers/90days) \*\*  
\*ATROVENT INH SOL 0.02% (540 amps/90 days) \*\*  
BRETHINE 5mg TAB  
COMBIVENT INHALER \*\*  
\*FLOVENT HFA INH 44mcg, 110mcg & 220mcg (6 inhalers/90 days) \*\*  
FLOVENT DISKUS (6 inhalers/90days) \*\*  
\*INTAL INHALER (6 inhalers/90days)  
\*INTAL SOL FOR NEBULIZER (540 amps/90days)  
NORMAL SALINE 5mL BULLETS  
\*PROVENTIL 0.083% NEB SOLOLUTION (500 amps/90 days) \*\*  
\*PROVENTIL 0.5% NEB SOL (9 boxes/90 days) \*\*  
PROVENTIL 2mg TAB  
\*PROVENTIL HFA INHALER (6 inhalers/90days)  
PROVENTIL 2mg/5mL SYRUP  
\*PULMICORT RESPULES 0.25mg & 0.5mg (360 amps or 720 amps/90 days) \*\*  
\*SEREVENT DISKUS \*\* (3 diskus/90 days)  
SINGULAIR 5mg & 10mg TABS \*\*  
SINGULAIR 4mg CHEW TABS & GRANULES \*\*  
\*SPIRIVA 18mcg HANDIHALER (90 caps/90 days)  
SYMBICORT 80/45 mcg, 160/4.5 mcg INHALER  
THEOPHYLLINE 80mg/5mL LIQUID \*\*  
\*TILADE INHALER (9 inhalers/90 days)  
\*VENTOLIN HFA INHALER (6 inhalers/90days) \*\*

### **SCHEDULE II DRUGS (no refills allowed)**

ADDERALL 5mg, 10mg, 15mg, 20mg & 30mg TAB  
ADDERALL XR CAP (all strengths) \*\*  
CONCERTA 18mg, 27mg, 36mg & 54mg TAB \*\*  
CODEINE SULFATE 30mg TAB  
DEMEROL 50mg & 100mg TAB  
DEXEDRINE 5mg TAB  
DILAUDID 2mg & 4mg TAB  
METHADONE 5mg & 10mg TAB  
METHYLIN ER 10mg & 20mg TAB  
METHYLPHENIDATE 5mg, 10mg TAB, 20mg SR \*\*  
MORPHINE SULF (MSIR) 15mg & 30mg TAB \*\*  
MS CONTIN TAB (all strengths) \*\*  
OXYCONTIN 10mg, 20mg, 40mg & 80mg TAB  
PERCOCET 5/325mg TAB \*\*  
ROXICODONE 5mg TAB  
ROXANOL 20mg/mL SOLUTION

### **SCHEDULE III, IV & V**

(Up to a 90 day supply & refills for a total of 6 months from the date written)

AMBIEN 5mg & 10mg TAB \*\*  
ATIVAN 0.5mg, 1mg & 2mg TAB  
DARVOCET-N-100 TAB  
DARVON-N-100 TAB  
HALCION 0.125mg & 0.25mg TAB  
KLONOPIN 0.5mg, \*\* 1mg & 2mg TAB  
LIBRIUM 5mg, 10mg, & 25mg CAP  
LOMOTIL TAB  
METHYLTESTOSTERONE 10mg CAP  
MIDRIN CAP \*\*  
NOVAHISTINE EXPECORANT  
PHENOBARBITAL 15mg, 30mg & 100mg TAB \*\*  
PHENOBARBITAL 20mg/15ml ELIXIR \*\*  
RESTORIL 7.5mg, 15mg & 30mg CAP \*\*  
ROBITUSSIN AC SYRUP (120mL bottles)  
SERAX 10mg, 15mg, & 30mg CAP

### **TESTOSTERONE TRANSDERM SYSTEM**

2.5mg/day & 5mg/day  
**SCHEDULE III, IV & V (con't)**  
TYLENOL #3 TABS & 12/120mg/5mL ELIXIR \*\*  
VALIUM 2mg, 5mg & 10mg TAB \*\*  
VICODIN 5/500mg \*\* & 7.5/750mg TAB  
XANAX 0.25mg, 0.5mg, 1mg & 2mg TAB

### **SKELETAL MUSCLE RELAXANTS**

FLEXERIL 5mg & 10mg TAB \*\*  
LIORESAL 10mg & 20mg TAB  
NORFLEX 100mg TAB  
ROBAXIN 500mg & 750mg TAB \*\*

### **SMOOTH MUSCLE RELAXANTS**

DETROL LA 2mg & 4mg CAP \*\*  
DITROPAN 5mg TAB  
**DITROPAN XL 5mg, 10mg, 15mg TAB \*\***  
URISPAS 100mg TAB

### **SUPPOSITORIES/ENEMAS**

ANUSOL HC 25mg SUPP & 2.5% CREAM \*\*  
COMPAZINE 25mg SUPP  
CORTENEMA  
PHENERGAN 12.5mg & 25mg SUPP \*\*  
PRAMOSONE CREAM  
PROCTOFOAM HC FOAM  
ROWASA ENEMA

### **TOPICALS**

ALDARA 5% CREAM  
**AQUAPHOR OINT**  
BACITRACIN OINTMENT  
BACTROBAN OINTMENT \*\*  
BENZOYL PEROXIDE 10% GEL  
BENZACLIN 1%/5% GEL  
CAPITROL SHAMPOO  
CARAC 0.5% CREAM  
CARMOL 20% & 40% CREAM  
CLEOCIN 1% TOPICAL SOLUTION \*\*  
CORDRAN TAPE  
DERMA-SMOOTH/FS  
DESONIDE 0.05% CREAM & OINTMENT  
DIFFERIN 0.1%, 0.3% GEL  
\*DOVONEX CREAM, SOLN (900gm/90 days)  
DRYSOL 20% SOLUTION  
DUAC GEL

EFUDEX 2% SOL & 5% CREAM  
ELDOPAQUE FORTE 4% CREAM  
ELDOQUIN 2% CREAM  
ELIDEL 1% CREAM  
ELIMITE 5% CREAM \*\*  
ELOCON 0.1% CREAM  
ERYTHROMYCIN TOPICAL 2% SOLN & GEL\*\*  
HYDROCORTISONE 1% CREAM & OINTMENT  
KENALOG 0.1% CREAM \*\* & OINTMENT  
KENALOG SPRAY  
KLARON 10% LOTION  
LAC-HYDRIN 12% LOTION  
LIDEX 0.05% CREAM, GEL & OINTMENT \*\*  
LIDOCAINE VISCOUS 2% SOLUTION  
LIDOCAINE 2% JELLY  
LIDOCAINE 5% OINT  
LIDOCAINE 4% SOLN  
LOTRIMIN 1% CREAM & SOLUTION  
**LOTRISONE CREAM & LOTION**  
LUXIQ FOAM 0.12%  
MEDIPLAST 40%  
METROCREAM 0.75% CREAM  
METROGEL 1% GEL (replaces 0.75%)  
MYCOLOG II CREAM  
NIX 1% SOLN  
NITROBID 2% OINTMENT  
NIZORAL 2% CREAM & SHAMPOO  
NYSTATIN CREAM, OINTMENT & POWDER  
PRAMOSONE CREAM  
PROTOPIC 0.1% & 0.03% OINTMENT  
RETIN-A CREAM \*\*, GEL & MICRO GEL  
**Limited to patients up to and including age 35**  
SELSUN SHAMPOO \*\*  
SILVADENE 1% CREAM \*\*  
SYNALAR 0.01% SOLUTION

\*TAZORAC 0.1% & 0.5% GEL (300gm/90 days)  
\*TAZORAC 0.1% & 0.5% CREAM (180gm/90 days)  
TEMOVATE 0.05% CRM, OINTMENT, SOLN & GEL  
WESTCORT 0.2% CREAM  
**VAGINAL PREPARATIONS**  
CLEOCIN VAGINAL CREAM \*\*  
CLOTTRIMAZOLE VAGINAL CREAM  
METROGEL 0.75% VAGINAL GEL \*\*  
PREMARIN VAGINAL CREAM \*\*  
TERAZOL-7 VAGINAL CREAM

### **VASODILATING AGENTS**

IMDUR 30mg, 60mg & 120mg TAB \*\*  
ISORDIL 10mg & 20mg TAB & 40mg SR TAB \*\*  
NITROBID 6.5mg CAP  
NITRO-DUR 0.1mg, 0.2mg, 0.3mg, & 0.4mg TDRM \*\*  
NITROGLYCERIN 0.3mg & 0.4mg SL TAB \*\*  
NITROLINGUAL SPRAY \*\*  
PERSANTINE 25mg, 50mg & 75mg TAB

### **VITAMINS/MINERALS**

CYANOCOBALAMIN 1mg/mL INJ VIAL  
FOLIC ACID 1mg TAB \*\*  
LURIDE 2.2mg TAB  
MEPHYTON 5mg TAB  
MULTIVITAMIN WITH AND WITHOUT IRON  
MULTIVITAMIN SOL WITH FLUOR & IRON  
MULTIVITAMIN DROP  
**MULTIVITAMIN DROP WITH IRON**  
PRENATAL VIT W/FOLIC ACID 1mg TAB \*\*  
*limited to women up to and including age 45*  
NIACIN 50mg & 500mg TAB  
NIASPAN 500mg, 750mg & 1000mg TAB\*\*  
PYRIDOXINE 50mg TAB  
ROCALTROL 0.25mg, 0.5mg CAP  
THIAMINE 50mg TAB  
VITAMIN B-12 1000mcg/ml INJ  
**VITAMIN D 1000 IU TAB**  
VITAMIN D 50,000 UNIT CAP  
WELLCOVORIN 5mg TAB

### **ITEMS REMOVED**

AZMACORT INHALER per DoD 12May 120 days  
AEROBID INHALER per DoD 12May+ 120 days

### **ITEMS RECENTLY ADDED**

**AQUAPHOR OINT**  
**LOTRISONE CREAM & LOTION**  
**REQUIP 0.25, 0.5, 0.75, 1mg, 2mg, 4mg, 5mg tab**

ACTOS 15MG, 30MG & 45MG TAB  
ADVAIR HFA  
\*ASMANEX TWISTHALER (6 inhalers/90days) \*\*  
\*FLOVENT DISKUS (6 inhalers/90days) \*\*  
JANUVIA 25MG, 50MG, & 100MG TAB  
JANUMET 500MG/50MG; 1000MG/50MG TAB  
TENORETIC 50/25mg, 100/25 mg, TAB April 09  
TOPAMAX 25mg, 50mg, 100mg, 200mg TAB  
VITAMIN D 1000 IU TAB

**Updated January 2010**