



PHARMACEUTICAL BENEFITS

DECEMBER 1984

NOT FOR SALE

PHARMACEUTICAL BENEFITS

Explanatory Circular regarding the December 1984 edition of the Schedule of Pharmaceutical Benefits for Approved Chemists.

The reprint of the Schedule will take effect on 1 December 1984 and all previous editions of the Schedule are cancelled.

SUMMARY OF CHANGES

ADDITIONS

Section 2

New Items

- Benzoyl Metronidazole**, 6.4% (equivalent to 200mg metronidazole in 5mL), 100mL suspension (*Flagyl S*)
Bumetanide, 1mg tablet (*Burinex*)
Diclofenac Sodium, 50mg (enteric coated) tablet (*Voliaren 50*)
Ipratropium Bromide, 20 micrograms per dose (200 dose) inhalation metered aerosol spray (*Atrovent*); 0.025%, 20mL nebuliser solution (*Atrovent*)

New Forms and Strengths of Existing Items

- Choline Theophyllinate**, 50mg per 5mL, 500mL elixir (*Brondecon Elixir-PD*)
Clotrimazole, 2%, 20g vaginal cream (*Canesten 3*)

New Brands of Existing Items

- Choline Theophyllinate**, 200mg tablet (*Brondecon-PD*)
Dipyridamole, 100mg tablet (*Persantin 100*)
Metoclopramide Hydrochloride, 10mg tablet (*Pramin*)

Section 3

Preparations Available for Colostomy and Ileostomy Use

New Form of Existing Item

- Butyl Monoester Polymer with Isopropyl Alcohol**, 50 protective dressing wipes (*Skin-Prep*)

New Brand of Existing Item

- Deodorant Concentrate**, 15mL liquid (*Odortrol*)

Section 4

Drug Tariff

- Acid Lactic BP**
Clioquinol BP

DELETIONS

Section 2

Items

- Bethanidine**, 10mg and 25mg tablets (*Esbatal*) (Items discontinued by manufacturer)
Cyclizine, 50mg tablet (*Marzine*) (Item discontinued by manufacturer)
Nalorphine, 1mg in 1mL and 10mg in 1mL injections (*Leibidrone*)
Paraldehyde, 5mL injection
Pentazocine, 60mg in 2mL injection (*Fortral*)
Phenylbutazone, 100mg tablet (*Butacal*, *Butazone*, *Butalgin*); 100mg (enteric coated) tablet (*Butazolidin*); 600mg in 3mL injection (*Butazolidin*); 250mg suppositories, 20 (*Butazolidin*)

- Propylene Glycol**, propylene glycol 10%, glycerol 2% in normal saline, 200mL spray diluent (Item discontinued by manufacturer)

- Tacrine**, 10mg, 2mL and 30mg, 2mL injections (*T.H.A.*)

Forms and Strengths of Items

- Ampicillin**, 100mg (solvent required) injection (*Austrapen*) (Item discontinued by manufacturer)
Digoxin, 50 micrograms in 2mL injection for infants (*Lanoxin*) (Item discontinued by manufacturer)
Glycerol, 1g suppositories, 10 (Item discontinued by manufacturer)
Morphine with Tacrine, 30mg-30mg in 1.5mL injection (*Mortha*)
Phenobarbitone, 60mg tablet (Item discontinued by manufacturer)
Sulphamethoxazole, 500mg per 5mL, 50mL syrup (*Gantanol*) (Item discontinued by manufacturer)
Triprolidine, 1mg per 5mL, 100mL paediatric elixir (*Actidil*) (Item discontinued by manufacturer)

Preparations Which May Be Prescribed by Participating Dental Practitioners For Dental Treatment Only

- Ampicillin**, 100mg (solvent required) injection (*Austrapen*) (Item discontinued by manufacturer)

ALTERATIONS

Section 2

To be Unrestricted

- Diffunisal**, 250mg tablet (*Dolobid*)
Metoclopramide Hydrochloride, 5mg per 5mL, 100mL syrup (*Primperan*); 10mg tablet (*Maxolon*, *Metamide*, *Primperan*) (the differential listing of the 10mg tablet has been deleted)

Restriction changes

- Griseofulvin**, 125mg tablet (*Fulcin 125*, *Grisovin*); 330mg tablet (*Griseostatin*); 500mg tablet (*Fulcin 500*, *Grisovin 500*)

Maximum Quantities

	<i>From</i>	<i>To</i>
Metoclopramide Hydrochloride , 10mg tablet (<i>Maxolon</i> , <i>Metamide</i> , <i>Primperan</i>)	10	25
Sodium Aurothiomalate , 20mg injection (<i>Myocrisin</i>)	5	10

Number of Repeats		From	To		From	To
Glyceryl Trinitrate , 2%, 60g ointment (<i>Nitro-Bid</i>)		nil	2	Methdilazine , 4mg and 8mg tablets (<i>Dilosyn</i>)	AH	GL
Griseofulvin , 125mg tablet (<i>Fulcin 125</i> , <i>Grisovin</i>);		nil	2	Salbutamol , 4mg tablet (<i>Ventolin</i>); 2mg per 5mL, 300mL syrup (<i>Ventolin</i>); 200 micrograms capsule (oral inhalation) (<i>Ventolin Rotacaps</i>); 0.5%, 30mL inha- lation solution for use in RESPIR- ATOR (<i>Ventolin</i>); 100 micrograms per dose (200 dose) inhalation, metered aerosol spray (<i>Ventolin</i>)	AH	GL
330mg tablet (<i>Griseostatin</i>);		nil	2			
500mg tablet (<i>Fulcin 500</i> , <i>Grisovin</i> 500)		nil	2			
Sodium Aurothiomalate , 20mg injec- tion (<i>Myocrisin</i>)		nil	1	Surgical Cement , 240mL solvent (<i>Sacsol</i>); 250mL solvent (<i>Sacsol Non</i> <i>Flammable</i>)	LF	EG
Sodium Valproate , 200mg per 5mL, 200mL syrup (<i>Epilim</i>)		1	2			
Proprietary Name		From	To	Preparations Available for Colostomy and Ileostomy Use		
Erythromycin Ethylsuccinate , 200mg (base) tablet		EES	EES <i>Dulcet</i>		From LF	To EG
Manufacturers' Codes Section 2		From	To	Benzoin , 35%, 167mL benzoin com- pound tincture aerosol spray	LF	EG
Aluminium Hydroxide and Mag- nesium Carbonate Co-Dried Gel , 375mg tablet (<i>Almacarb</i>)		AH	GL	Deodorant Detergent Solution , lauryl- dimethylbenzyl ammonium chloride 12.5g, "TERIC" N8, 125g in 500mL solution (<i>TAGG</i>)	LF	EG
Beclomethasone Dipropionate , 100 micrograms capsule (oral inhalation) (<i>Becotide Rotacaps</i>); 50 micrograms per dose (200 dose) inhalation, metered aerosol spray (<i>Becotide</i>)		AH	GL	Dimethicone , 10%, 180mL aerosol spray solution (<i>Silicon Skin Spray</i>)	LF	EG
Ethinylloestradiol , 10 micrograms, 20 micrograms and 50 micrograms tablets (<i>Estigyn</i>)		AH	GL	Polyvinylpyrrolidone and Vinyl Acetate Copolymer , 6%, 121mL aerosol spray (<i>Spray-On Bande</i>)	LF	EG
Labetalol , 100mg and 200mg tablets (<i>Trandate</i>)		AH	GL	Preparations Available for Paraplegic and Quadriplegic Patients		
Meclozine , 25mg tablet (<i>Ancolan</i>)		AH	GL		From LF	To EG
				Deodorant Detergent Solution , lauryl- dimethylbenzyl ammonium chloride 12.5g, "TERIC" N8, 125g in 500mL solution (<i>TAGG</i>)		

All Previous Editions Cancelled



SCHEDULE OF
PHARMACEUTICAL BENEFITS
for
APPROVED CHEMISTS

OPERATIVE FROM 1 DECEMBER 1984

Commonwealth Department of Health,
CANBERRA, A.C.T.

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CONTENTS

SECTION 1 — LEMON PAGES

INTRODUCTION	Paragraphs
THE SCHEDULE	1- 14
CONDITIONS UNDER WHICH BENEFITS MAY BE PRESCRIBED AND DISPENSED	
A. PRESCRIBING OF BENEFITS — PROCEDURE BY DOCTORS AND DENTISTS	
Prescriptions	16- 19
Manner of Administration	20
Restrictions	21
Maximum Quantities and Repeats	22- 27
Authority to Prescribe	28
Regulation 24	29
Emergency Drug (Doctor's Bag)	
Supplies	30- 31
Urgent Cases	32- 33
B. SUPPLY OF BENEFITS—PROCEDURE BY APPROVED CHEMISTS	
Prescriptions	34- 41
Suspected Forgery	42
Procedure before Supply of Benefit	43
Procedure when an Authority is presented	44
Regulation 24	45
Deferred Supply	46
Repeat Authorisations	47- 50
Preparation of Repeat Authorisation Form (Form PB13) — Repeat Supply	51- 52
Repeat Authorisations for Injectibles and Solvents	53
Repeat Authorisations for De- ferred Supply	54- 55
Issue of Repeat Authorisations	56
Receipts	57- 58
Emergency Drug (Doctor's Bag)	
Supplies	59- 61
Urgent Cases	62
Prescription Identifying Numbers	63- 64
C. CHARGES TO PATIENTS	
Patient contribution	65- 68
Establishment of patient's entitlement to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate	69- 72
After Hours	73
Delivery	74
Responsibility	75- 76
Approval Conditions	77

CODING AND SUBMISSION OF PRESCRIPTIONS — PROCEDURE BY APPROVED CHEMISTS	Paragraphs
A. INTRODUCTION	78- 80
B. PROVISION OF CODED INFORMATION BY APPROVED CHEMISTS	
Entering of Information	81
Codes for Preparations which are Pre-priced	82
Codes for Extemporaneous Preparations which are not Pre- priced	83
Coding Stamp	84- 87
Coding of Ready Prepared Benefits	88
Coding of Extemporaneously Dispensed Benefits included in Standard Formulae List	89
Dropper Containers	90
Coding of Extemporaneously Dispensed Benefits which are not listed in the Standard Formulae List	91
Action to be taken when an Approved Chemist is to be paid on an Average Price Basis	92
Action to be taken when an Approved Chemist elects to price non-pre-priced Extempor- aneous Preparations	93
Coding of Repeat Authorisation Forms	94
Coding of Repeat Authorisation Forms used for Deferred Supply	95
Action by an Approved Chemist dispensing a Repeat Authorisation	96
Coding of Emergency Drug (Doctor's Bag) Order Forms	97
Serial Numbering of Prescriptions, Repeat Authorisations and Emergency Drug (Doctor's Bag) Order Forms	98-100
Repeat Authorisations for Auth- ority Forms	101
Repeat Authorisations for De- ferred Supply	102
C. SUBMISSION OF CLAIMS	
Documents to be submitted	103-104
Completion of Claim Form	105-108
Time for Lodgement of Claims	109
D. STATEMENT OF ACCOUNT	110-117

	Paragraphs	page
PROVISIONS GOVERNING PAYMENTS TO APPROVED CHEMISTS FOR N.H.S. DISPENSING		
A. READY PREPARED BENEFITS		
Price where Maximum Quantity Prescribed (R.P. items)	118	
Price where Broken Quantity Prescribed (R.P. items)	119	
Price for Unbranded Prescriptions	120	
Unbroken Packs to be Supplied	121	
Wastage Table Percentage for Ready Prepared Preparations	122-123	
B. EXTEMPORANEOUSLY PREPARED BENEFITS		
Prescribers' List Items	124	
Pricing Prescriptions Not Pre- priced	125-126	
Pricing of Ingredients	127	
Miscellaneous Pricing Rules	128	
Pricing Prescriptions where Ad- ditional Ingredients have been added to a Specified Formula	129-133	
Containers	134-136	
Special Provisions Governing Pay- ment for Extemporaneous Prescriptions Outside the Stan- dard Formulae List	137-143	
C. GENERAL		
Pricing Principles	144-146	
Fees and Containers	147	
Pricing Dates	148	
MISCELLANEOUS		
Premises	149	
Hours of Supply	150-151	
Approved Doctors, Friendly Societies	152	
Isolated Pharmacy Allowance	153-154	
Standards	155	
References	156	
Proper Stocks to be kept	157	
Statement of Stocks	158	
Retention of Documents	159	
Sale Copies	160-161	
Supplies of Stationery	162	
Enquiries	163	
	Page	
Addresses of Commonwealth De- partment of Health Regional Offices	23	
Index of Manufacturers' Codes	24-27	
Emergency Drug (Doctor's Bag) Supplies	28	
SECTION 2 — WHITE PAGES		
SCHEDULE OF BENEFITS		
General, Pensioner and Restricted Benefits	1-70	
Intravenous Infusions		71-72
Preparations which may be pre- scribed by Participating Dental Practitioners for Dental Treat- ment Only		73-76
SECTION 3 — WHITE PAGES		
SCHEDULE OF BENEFITS		
Preparations available for Colos- tomy and Ileostomy Use		1- 3
Preparations Available for Use by Paraplegic and Quadriplegic Patients		4
SECTION 4 — GREEN PAGES		
SCHEDULE OF BENEFITS		
Drug Tariff		2- 8
Container Prices for Extemporaneously Prepared Benefits		9
Standard Formulae Preparations		10-17
Table of Codes, Maximum Quantities and Number of Repeats for Extemporaneously Prepared Benefits		18
SECTION 5 — GREEN PAGES		
PRESCRIBERS' LIST		
PHARMACEUTICAL BENEFIT FORMULAE		
Creams		1- 2
Dusting Powder		2
Ear Drops		2
Inhalations		2
Linctus		3
Liniments		3
Lotions		3
Mixtures		3- 4
Nasal Instillations		4
Ointments		4- 5
Paints		5
Pastes		5
Powder		5
CHILDREN'S SECTION		
Mixtures		6
SECTION 6 — BLUE PAGES		
Container Prices and Fees for Ready Prepared Benefits		1
Standard Packs and Prices (in- cluding Mark-up, but no Fees) for items against the price of which an asterisk is shown in the Schedule of Benefits		2- 6
PROPRIETARY INDEX		
Part 1 — Proprietary Names Index		4-22
Part 2 — Trade Names Index		23

INTRODUCTION

These notes are designed for the use of approved chemists. They describe the procedures by doctors and dentists in prescribing benefits and the procedures by approved chemists in supplying benefits. They go on to outline the action on the part of approved chemists in coding prescriptions for processing by computer and the submission by them of claims for payment. Finally the notes explain the pricing arrangements in accordance with which approved chemists' claims are processed for payment.

THE SCHEDULE OF PHARMACEUTICAL BENEFITS

1. Pharmaceutical benefits which may be prescribed by doctors are listed in this book. The schedule also includes a list of pharmaceutical benefits which may be prescribed by participating dental practitioners for dental treatment only. These items are listed in section 2 after the Intravenous Infusions for Injection.

2. Ready prepared items are listed in sections 2 and 3 (white pages) of the Schedule and each form and strength is identified by a unique five-character code. (See also paragraph 82). Restrictions apply to the prescribing of certain items in section 2 and all of the items in section 3. All restricted items are printed in red. Further details may be found in these notes — paragraphs 18 (*f*) and 21.

3. The Schedule of ready prepared items includes the form, manner of administration and brand of these items which may be prescribed. Where the words 'solvent required' are included after the form, the item and a solvent may be prescribed as one benefit. In such cases, any determined brand of solvent may be ordered with the item. Medical practitioners and participating dental practitioners have been informed that such benefits should be written as one prescription, e.g., 'Ampicillin, Injection 1g with 2mL water for injections'.

4. The maximum quantity and maximum number of repeats allowable for each item are also shown in sections 2 and 3 of the Schedule. Further details may be found in these notes — paragraphs 22-27.

5. The drugs which may be used in extemporaneous preparations are listed in section 4 — Drug Tariff (Green Pages). Where a restriction applies to the use of a drug listed in this section it is indicated against the item. The following are also included in section 4:—

- (i) container prices;
- (ii) a list of Standard Formulae preparations and prices. The list is comprised of formulae taken from formularies in common use and is referred to in this book as the Standard Formulae List. Each preparation is identified with a unique five-character code; and
- (iii) table of codes, maximum quantities and number of repeats for extemporaneously prepared benefits.

6. Formulae in common use are listed in section 5 — Prescribers' List (Green Pages).

7. Container prices, fees, standard packs and prices for ready prepared preparations are listed in section 6 (Blue Pages).

8. A proprietary name index of ready prepared items is published after section 6 (Blue Pages).

9. A code index of ready prepared and extemporaneously prepared pharmaceutical benefits is published in a separate booklet.

10. Symbols used in the Schedule of Benefits are explained on page 1, section 2 (White Pages).

11. Price changes and other amendments are advised each month so that the information in the Schedule may be updated regularly.

12. To facilitate coding, a separate list of the more frequently used N.H.S. items and relevant codes for ready reference is provided with each reprint of the Schedule.

13. The following admixtures are not pharmaceutical benefits:—

- (a) the admixture of two or more ready prepared items listed in the Schedule of Benefits; or
- (b) the admixture of a ready prepared item and a drug or drugs listed in section 4 of the Schedule of Benefits; or
- (c) the admixture of two or more items which may be prescribed by participating dental practitioners for dental treatment only.

Definitions

14. All references in this book to 'concessional beneficiaries' shall include:—

- (i) persons who are issued with a valid Health Care Card and their dependants; or
- (ii) persons who are issued with a valid Pharmaceutical Benefits Concession Card and their dependants; and

all references to 'pensioners' shall include:—

- (i) persons who are issued with a valid Pensioner Health Benefits Card and their dependants; or
- (ii) persons who are issued with a valid Health Benefits Card and their dependants.

CONDITIONS UNDER WHICH BENEFITS MAY BE PRESCRIBED AND DISPENSED

15. CARE MUST BE TAKEN TO COMPLY WITH THE PROVISIONS OF STATE LAW, PARTICULARLY IN REGARD TO DRUGS LISTED AS NARCOTIC, SPECIFIED OR RESTRICTED UNDER STATE LEGISLATION.

A. PRESCRIBING OF BENEFITS — PROCEDURE BY DOCTORS AND DENTISTS

Prescriptions

16. A prescription ordering a pharmaceutical benefit may be written only for the medical or dental treatment of the person named on the prescription and requiring treatment with that pharmaceutical benefit. A prescription must not be written for any other purpose and is valid only when it is written by a registered practitioner or a participating dental practitioner.

17. Prescriptions for pharmaceutical benefits for more than one person may not be written on the one prescription form.

18. Medical practitioners and dental practitioners are required by legislation under the National Health Act to observe the following rules when writing prescriptions for pharmaceutical benefits:—

(a) Write the prescription in indelible form, i.e., ink or ball point pen in own handwriting (or with the approval of the Director-General otherwise record the prescription) either on the standard prescription form supplied by the Department or on paper as near as convenient to 18 cm × 12 cm. The standard prescription forms supplied by the Department to participating dentists have a blue margin to distinguish them from the forms supplied to medical practitioners. The name and address of the medical practitioner or dental practitioner must be shown and 'N.H.S.' endorsed at the top. Each dentist is also required to endorse each prescription with the D.P. number in the appropriate space. Doctors who have obtained the approval to record prescriptions in other than their own handwriting will endorse the prescriptions 'Regulation 19 (1) (a) approval obtained'.

(b) Write the prescription in duplicate marking the duplicate copy with the word 'Duplicate'. This is pre-printed on the standard prescription forms.

(c) Set out the name and address of the patient.

(d) The pharmaceutical benefit must be identified in the prescription by such particulars, including the name, form, strength and quantity, as are necessary for the complete identification of that benefit.

(e) If the benefit is a single drug, the manner of administration must be indicated.

(f) In the case of restricted pharmaceutical benefits they may only be prescribed by medical practitioners subject to any restrictions specified in the Schedule. The prescription requirements for these benefits are indicated under the item in this book. Further details may be found in these notes — paragraph 21.

(g) When directing that the maximum quantity and repeats of a pharmaceutical benefit be supplied at the one time, the prescription must be endorsed in the doctor's own handwriting with the words 'Regulation 24'. Further details are available in paragraphs 29 and 45.

(h) Where the words 'solvent required' are included after the form of a benefit, the doctor or dentist must specify the volume and number of ampoules of solvent to be supplied (see paragraph 118).

(i) Date and sign the prescription.

19. A prescription is not a valid pharmaceutical benefit prescription if:—

(a) the medical practitioner prescribes a pharmaceutical benefit for a person in respect of whom another prescription for the same benefit has been written on the same day by the same medical practitioner;

(b) the medical practitioner prescribes on the one form a benefit that is a drug of addiction and another benefit and directs that the supply of either benefit is to be repeated. If no repeats of either item are ordered, the prescription may be accepted;

(c) the medical practitioner prescribes a narcotic drug for the medical practitioner writing the prescription;

(d) the dental practitioner prescribes a pharmaceutical benefit for a person in respect of whom another prescription for the same benefit has been written on the same day by the same dental practitioner.

Manner of Administration

20. Where a particular manner of administration is indicated in the Schedule of Benefits, the item may not be supplied as a pharmaceutical benefit for administration in any other way, e.g. an ophthalmic preparation prescribed for topical use.

Restrictions

21.—

(a) Where a benefit is restricted to the treatment of a specified disease, condition or class of person, the medical practitioner is required to indicate that the benefit has been prescribed in accordance with the applicable restrictions by writing the words 'specified purpose'. Abbreviations such as 'Spec. Purp.' or 'S.P.' will be accepted.

(b) Where a prescription is written for an item available for use by colostomy and ileostomy patients or for an item available for use by paraplegic and quadriplegic patients, it is necessary that the prescription be endorsed 'specified purpose' by the medical practitioner.

(c) Where a benefit is subject to a restriction that the written authority of the Director of Health is required, the medical practitioner should seek approval from the Regional Director, Commonwealth Department of Health in the State concerned before prescribing the item as a benefit (see paragraph 28).

Maximum Quantities and Repeats

22. For ready prepared preparations, the allowable maximum quantity and number of repeats are shown in the third and fourth columns of sections 2 and 3. For extemporaneously prepared preparations, details are set out in the Table of Maximum Quantities and Repeats (Green Pages).

23. The maximum quantity of an item marked with a double dagger (‡) has been determined as a single pack. As explained on page 1, section 2 (White Pages), irrespective of the quantity prescribed, the standard pack must be supplied.

24. For other items, it is not necessary to prescribe the maximum quantity if the medical or dental practitioner considers a lesser quantity is sufficient for the patient's needs.

25. If a medical practitioner requires a prescription to be repeated he must show the quantity to be supplied and the number of repeats. It is not necessary for the maximum quantity to be ordered before the supply can be repeated. Repeats may be for any quantity up to the maximum, irrespective of whether the original supply is for an equal, greater or lesser quantity.

26. The relevant maximum quantity and number of repeats are not to be exceeded, unless the prescription is accompanied by a written authority (see paragraphs 27, 28).

27. Special provisions exist to assist chronically ill patients who require larger quantities of drugs and/or continuous treatment. In most cases under these provisions a medical practitioner may, if he considers it to be in his patient's interest, apply to the Regional Director, Commonwealth Department of Health in his State for authority to prescribe a quantity and/or number of repeats in excess of the listed maximum quantity and/or maximum number of repeats (see paragraph 28).

Authority to Prescribe

28.—

(a) The written authority of the Regional Director of Health to prescribe:—

- (i) restricted drugs (paragraph 21); or
- (ii) increased maximum quantities (paragraph 27); and/or
- (iii) increased number of repeats (paragraph 27),

will be forwarded to the doctor on an Authority to Prescribe (Form PB15) or to the doctor or the patient on an Authority Prescription (Form PB86).

(b) When the authority is given on form PB15 the doctor will write the prescription in the space provided on the form for this purpose.

Regulation 24

29. Generally, a pharmaceutical benefit may not be supplied to the same person more than once on any one day. However, a doctor may direct that the original supply and repeat supplies of a benefit ordered in a prescription be supplied at the one time, provided he is satisfied that:—

- (a) the maximum quantity specified for the benefit prescribed is insufficient for the medical treatment of the person for whom the prescription is written;

- (b) that person is suffering from a chronic illness or is resident in a place remote from the nearest approved chemist or approved medical practitioner; and
- (c) that person, without great hardship, could not obtain the pharmaceutical benefit on separate occasions.

The doctor must endorse the prescription 'Regulation 24', as certification that the above conditions have been satisfied.

Emergency Drug (Doctor's Bag) Supplies

30. Certain pharmaceutical benefits are provided free to doctors for emergency use. These emergency supplies are not available to ships' doctors. The patient is not required to make any payment when benefits are made available to him from these supplies. The items available as Emergency Drug (Doctor's Bag) Supplies are listed at the end of Section 1 (Lemon Pages) of the Schedule.

31. Supplies of these drugs may be obtained from an approved chemist upon the production of an official Emergency Drug (Doctor's Bag) Order Form (Form PB7) in duplicate, signed by the doctor personally. Doctors approved to supply pharmaceutical benefits under section 92 of the National Health Act are to use Form PB7A which must not be presented to an approved chemist for their supplies. Special instructions are issued to these doctors.

Urgent Cases

32. In cases of urgency, a doctor or dentist may communicate a prescription to an approved chemist by telephone or other means. In such cases the doctor or dentist must reduce the prescription to writing and forward it within 24 hours of such communication to the approved chemist who made the supply. For further details see paragraph 62.

33. The provision for communication of prescriptions in urgent cases applies also to those drugs for which the written authority of the Director of Health is necessary for supply as a pharmaceutical benefit (see paragraph 21). In such cases, the doctor must first obtain advice from the Regional Director in the particular State, by telephone or other means, that the authority will be issued and notify the approved chemist accordingly when communicating the prescriptions. The doctor must subsequently obtain the written authority and forward the completed form within 24 hours of its receipt to the approved chemist who supplied the benefit.

B. SUPPLY OF BENEFITS — PROCEDURE BY APPROVED CHEMISTS

Prescriptions

34. An approved chemist is authorised to supply a pharmaceutical benefit only upon the surrender of:—

- (a) a valid prescription, dated within six months before the date of its presentation; or
- (b) a benefit ordered on an Authority Prescription (Form PB86) or an Authority to Prescribe (Form PB15) which has been dated by the prescribing medical practitioner within six months before the date of its presentation; or
- (c) a repeat authorisation presented with a duplicate prescription within six months of the date of the prescription.

35. A pharmaceutical benefit may not be supplied to the same person more than once on any one day, except where a prescription is endorsed 'Regulation 24' (see paragraph 45).

36. Prescriptions for items deleted from the Schedule of Benefits may not be dispensed as benefits as from the date of effect of deletion.

37. Where restrictions are removed or applied with regard to the prescribing of a benefit, valid prescriptions written before the date of effect of the restriction changes may still be dispensed as benefits.

38. Where the maximum quantity and/or number of repeats of an item are altered, the quantities and repeats which have been prescribed on valid prescriptions written before the date of effect of the alterations may be dispensed.

39. Prescription forms on which are prescribed both pharmaceutical benefit items and non-pharmaceutical benefit items may be accepted. The non-benefit items will be supplied as private prescriptions and cancelled from the form.

40. A benefit shall not be supplied a number of times greater than the number specified in the prescription.

41. Where a brand of a benefit item is specified by the prescriber, the chemist is required to supply that brand. The only exceptions to this are:—

- (a) where prior to supply the prescriber has given approval for supply of a listed brand different from that specified in the prescription; or

(b) the approved chemist supplying the benefit can satisfy the Regional Director, Commonwealth Department of Health in his State that —

- (i) the chemist was unable, after a conscientious attempt, to contact the prescriber to obtain his approval to supply an alternative listed brand; and
- (ii) the supply of the benefit was required as a matter of urgency.

An appropriate certification setting out the relevant facts is to be made on such prescriptions by the chemist.

Suspected Forgery

42. The National Health Act requires that a prescription must be written by a registered medical practitioner or a participating dental practitioner. In the event that the chemist cannot recognise the doctor's or dentist's signature he should take all reasonable steps to satisfy himself that the prescription was written by a registered medical practitioner or a participating dental practitioner. If an approved chemist is not satisfied that the signature on a prescription form is that of a medical practitioner or dental practitioner, or suspects that the prescription has been forged or fraudulently obtained, he is entitled, before supplying the benefit, to obtain a statement from the person obtaining the benefit. However, in the case of Emergency Drug (Doctor's Bag) order forms particular requirements are set out in paragraph 59.

Procedure before Supply of Benefit

43. Before a benefit is supplied on presentation of a prescription the approved chemist is required to:—

- (i) endorse the prescription form and duplicate with the chemist's name and approval number;
- (ii) allot a prescription identifying number (see paragraphs 63, 64) which will identify the prescription item and mark that prescription identifying number on the form and duplicate;
- (iii) if more than one item has been written on the one form allot a separate prescription identifying number to each prescription item.

Procedure when an Authority is presented

44. When a benefit is ordered on an Authority Prescription (Form PB86) or an Authority to Prescribe (Form PB15) the doctor will have written

the prescription on the original (white) and duplicate copies of the authority form. The approved chemist will:—

- (a) enter in the designated places on the Authority form the information listed in paragraphs 88–93 except that the quantity (Q) and the number of repeats (R) should not exceed the quantity and number of repeats authorised.
- (b) where a solvent has been prescribed for an injectible a diagonal line should be drawn through the pre-printed coding box on the Form PB86 or Form PB15 and two code stamp imprints placed on the back of the form. One coding box should be used for the injectible item and the other for the solvent.

Regulation 24

45. Where a prescription is endorsed 'Regulation 24' (see paragraph 29), an approved chemist is authorised to supply the benefit and the repeats of that benefit at the one time. He should not complete a repeat authorisation form. An amount equivalent to one professional fee and where applicable, one dangerous drug fee is payable for the total supply. With regard to patient contribution for 'Regulation 24' supply, see paragraph 67.

Deferred Supply

46. When a patient presents a prescription form, in duplicate, ordering more than one benefit item, and does not require the supply of one or more of the benefit items at the same time as other benefit items prescribed on the form, a separate repeat authorisation (see paragraph 54) for each deferred item must be prepared in duplicate and the words 'Original Supply Deferred' must be stamped across the relevant item on the original and duplicate of the prescription form. The duplicate must be stamped in such a manner as to not render the duplicate illegible. DEFERRED ITEMS MUST NOT BE CODED ON THE ORIGINAL PRESCRIPTION FORM.

Repeat Authorisations

47. Where repeats are allowable a benefit may be supplied on a repeat authorisation only when it is presented with a duplicate prescription to which it is duly related and it is indicated that the pharmaceutical benefit to be supplied has not already been supplied the number of times directed in the prescription.

48. Repeat authorisations which relate to prescriptions for items deleted from the Schedule of Benefits may not be dispensed as benefits as from the date of effect of deletion.

49. However, where changes to restrictions, maximum quantities and/or number of repeats occur (as for original prescriptions, paragraphs 37, 38), repeat authorisations which relate to valid prescriptions written before the date of effect of the alterations, may be dispensed as benefits.

50. Before a benefit is supplied on presentation of a repeat authorisation, the approved chemist shall mark his name and approval number in the space provided on the repeat authorisation.

Preparation of Repeat Authorisation Form (Form PB13) — Repeat Supply

51. Before a benefit is supplied on presentation of a valid prescription, Authority Prescription (Form PB86) or Authority to Prescribe (Form PB15) which contains a direction to repeat the supply (when repeats are allowable) or on a repeat authorisation requiring further allowable repeats the approved chemist shall prepare a repeat authorisation form in duplicate, except when supply under the provisions of Regulation 24 is authorised (see paragraph 45).

52. The repeat authorisation form shall show:—

- (i) the category of benefit (either NHS General, NHS Concessional, NHS Pensioner or RPBS) — by placing a cross (X) in the relevant box;
- (ii) the patient's name and address;
- (iii) if the prescription is for a pensioner or concessional beneficiary (see paragraph 14), the entitlement number appearing on the prescription, or, in the case of a previous repeat authorisation, the entitlement number appearing on the front of the repeat authorisation form;
- (iv) in the case of repeats authorised on an Authority Prescription (Form PB86) or an Authority to Prescribe (Form PB15), the authority number;
- (v) the transcription of the original prescription stating the item, strength, quantity and directions;
- (vi) on the first occasion of supply of the benefit, his approval number, the date of the original prescription together with the prescription identifying number allotted by him to the prescription (see paragraph 63);

(vii) on subsequent occasions of supply, the approval number, the date of the original prescription and the prescription identifying number as shown on the previous repeat authorisation form (see also paragraph 63);

(viii) the number of times the benefit has been directed to be repeated and the number of times supply has been made; and

(ix) the name and NHS approval number of the chemist issuing the repeat authorisation.

Repeat Authorisations for Injectibles and Solvents

53. Separate repeat authorisations are to be prepared in respect of an injectible benefit which requires a solvent, and the solvent when a solvent is prescribed. The procedure to be followed in endorsing prescriptions and repeat forms is covered in 'CODING AND SUBMISSION OF PRESCRIPTIONS — PROCEDURE BY APPROVED CHEMISTS'.

Repeat Authorisations for Deferred Supply

54. The repeat authorisation (Form PB13) when it is used for a deferred supply of an original prescription item, is to be prepared and issued in the same manner as is required for the normal authorisation of repeats except that:—

- (i) '0' is to be inserted in the space for 'No. of times already dispensed';
- (ii) if no repeats are ordered, '0' is to be inserted in the space for 'No. of Repeats Authorised';
- (iii) where a repeat authorisation form is prepared to authorise the first supply of deferred original supply prescription items, the words 'Original Supply Deferred' should be stamped horizontally across the form just below the space provided for the 'Original Prescription Transcription' in such a manner that will not render illegible any of the other information entered on the form.

55. The supply of a benefit on a repeat authorisation form which has been prepared for deferred supply is to be regarded as the first occasion of supply. If repeats have been directed the normal procedure in regard to repeat authorisations will apply at the time of first supply.

Issue of Repeat Authorisations

56. At the time of supply of the benefit the completed repeat authorisation authorising any further allowable repeat(s) or deferred supply together with the duplicate of the prescription is to be issued to the person to whom the benefit is supplied.

Receipts

57. Upon the supply to a person of a benefit by an approved chemist, that person shall sign and date a receipt for that benefit on the prescription form or repeat authorisation, as the case may be. If the person taking delivery of the benefit is not the person for whose treatment the prescription was written, he shall in addition endorse the prescription form or repeat authorisation with his address. Not in any circumstances must a person give or an approved chemist demand a receipt until supply of the benefit has actually been made.

58. Where a benefit is supplied through the post, by rail, or other means of transport, and it is impracticable to obtain a receipt, the approved chemist must certify on the prescription or repeat authorisation, as the case may be, that the benefit has been supplied, the date on which the supply was made and particulars of the means of supply. Where a benefit is supplied prior to the presentation of a prescription (urgent cases see paragraphs 32, 33 and 62) or to a person who cannot read or write, or who is unable to write, the approved chemist should sign and date a statement on the prescription or repeat authorisation, certifying that the benefit has been supplied and indicating the reason why a receipt was not obtained.

Emergency Drug (Doctor's Bag) Supplies

59. Certain pharmaceutical benefit items may be supplied to medical practitioners on receipt of an Emergency Drug (Doctor's Bag) Order Form (Form PB7) in duplicate, signed by the doctor personally. These items are listed at the end of section 1 (Lemon Pages) of the Schedule. Each order form is valid during the month printed thereon and each doctor may obtain the benefits not more often than once per month. If the signature appearing on an Emergency Drug (Doctor's Bag) Order Form is that of a doctor unknown to the approved chemist the latter is required to obtain, from the person presenting the order, particulars of the full name and address and medical registration number of the doctor, and endorse these particulars on the back of the original copy of the order form.

60. The quantity of emergency drug items which may be supplied at the one time must not exceed those quantities specified in the list shown in section 1 (Lemon Pages).

61. A doctor may also specify on the order form a particular brand of a benefit. If it is not available, the doctor should be requested to specify in the order a permitted brand which is available, and to initial the alteration. On supply of the benefits ordered on the

order form, a receipt for the benefits must be signed by either the doctor himself or by a person authorised by him.

Urgent Cases

62. A pharmaceutical benefit may be supplied by an approved chemist before the prescription for that benefit has been surrendered to him, where in cases of urgency, the doctor or dentist communicates the prescription to the approved chemist by telephone or other means. This provision does not apply to prescriptions for supply by approved chemists where the law of the State in which that approved chemist's premises are situated requires the prescription to be in writing. This provision also applies to drugs for which the written authority of the Regional Director, Commonwealth Department of Health is necessary for supply as pharmaceutical benefits. (See paragraph 70.)

Prescription Identifying Numbers

63. In addition to a serial number (see paragraph 99), each pharmaceutical benefit prescription dispensed must be given an identifying number and/or letter which identifies it specifically. Any recognised series which will meet the purpose may be used, provided that the chemist's approval number is not a component of such numbers. Please note that the prescription identifying number is entered in the coding stamp imprint (see paragraphs 84-87)

64. Further, in cases where an approved chemist allots a prescription identifying number to a repeat authorisation different from the original prescription number allotted by the approved chemist issuing the repeat authorisation, he should enter this new identifying number in the appropriate space in the coding box pre-printed on the front of the form.

C. CHARGES TO PATIENTS

Patient Contribution

65. An approved chemist may in respect of each supply by him whether on a prescription or repeat authorisation, charge the person to whom the pharmaceutical benefit is supplied an amount of \$4 in respect of general patients or an amount of \$2 in respect of patients with a concessional entitlement. A charge is not to be made in respect of patients who are pensioners. Where a solvent may be prescribed as part of a benefit, only one prescribed charge may be made for each supply of the benefit.

66. Where a doctor has obtained an authority from the Regional Director, Commonwealth Department of Health to prescribe a quantity greater than the normal maximum quantity (see paragraph 28) the authorised prescribed charge should be made for each supply of the increased maximum quantity.

67. Where a doctor has endorsed a prescription 'Regulation 24' (see paragraphs 29 and 45) the approved chemist should make the relevant prescribed charge for the original and the same charge for each repeat that would normally be needed to make up the total supplies. For example, if the prescription ordered two repeats, a charge of \$12 should be made to a general patient, or \$6 to a patient with a concessional entitlement.

68. A prescription, other than a prescription for a pensioner, written for a benefit for which the dispensed price at the date of supply is equal to or less than \$4 in respect of general patients, or \$2 in respect of patients with a concessional entitlement, is not a prescription for a pharmaceutical benefit. This also applies to prescriptions endorsed 'Regulation 24' (see paragraphs 29 and 45), for which the price of the total quantity of the benefit supplied is equal to or less than the authorised charge specified in paragraph 67.

Establishment of patient's entitlement to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate

69. Any person may enter the relevant information to establish the patient's entitlement to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate, where space has been provided on prescription forms (front or back) supplied by the Department for the provision of entitlement information.

70. The person entering the entitlement information shall complete all the relevant details applicable to the patient's entitlement on the prescription. The information to be provided in the appropriate space is:—

- (i) the entitlement number appearing on the card, i.e., a ten-character alpha-numeric number (the entitlement number does not identify the type of card or the entitlement category);
- (ii) a cross (X) in the appropriate box indicating the type of entitlement card held by the patient. The type of card denotes the entitlement of the patient to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate.

Where a patient or agent is required to sign and date a receipt for the supply of a benefit on an original prescription form (see paragraphs 57–58), that person also accepts responsibility for the validity of the entitlement information shown on the prescription.

Where the chemist supplies a pharmaceutical benefit before the prescription is reduced to writing, he is authorised to obtain the patient's entitlement information so that this information can be entered on the prescription, if the prescription, when received from the doctor, does not include the relevant information.

71. Where prescriptions are written on forms which do not provide space (front or back) for the entry of entitlement information, the dispensing chemist, on request, shall place the declaration stamp imprint on the back of the original prescription form to enable the patient's entitlement information (see paragraph 70) to be provided. In these cases a signature and date is not required on the declaration format.

72. In those cases where the patient becomes a pensioner or concessional beneficiary after the original prescription has been supplied and wishes to establish entitlement for subsequent repeat or deferred supplies, the chemist shall place the declaration stamp imprint on the back of the repeat authorisation form to enable the relevant information to be provided.

After Hours

73. A charge not exceeding \$2 may be made when an approved chemist is required to return to his approved premises in order to supply a pharmaceutical benefit or pharmaceutical benefits at a time outside normal trading hours. Only one \$2 charge may be made on the one occasion, irrespective of the number of benefits supplied. The charge is recoverable from the patient concerned and not from the Department.

Delivery

74. A charge equal to the cost of delivering may be made if supply by delivery is made at or to a place other than the approved chemist's pharmacy.

Responsibility

75. It is the patient's responsibility to meet any charge lawfully demanded and an approved chemist may refuse to supply a pharmaceutical benefit if payment of a charge is not made.

76. An approved chemist or a doctor is not entitled to demand or receive a payment (other than a payment from the Department) or other valuable consideration in respect of the supply of a pharmaceutical benefit except as set out herein.

Approval Conditions

77. The approval of a chemist is subject to the conditions that:—

- (a) he will not, by advertisement, notice or otherwise, state or indicate that he is willing to supply all or any pharmaceutical benefits to all or any persons (except pensioners) without charge or for a charge of less than \$4 to general patients or for a charge of less than \$2 to patients with a concessional entitlement for each supply;
- (b) he will clearly indicate in any statement made by advertisement, notice or otherwise, that any offer to supply drugs or medicinal preparations without charge or at a reduced charge does not apply to the supply of pharmaceutical benefits;
- (c) he will not follow a practice of supplying all or any pharmaceutical benefits to all or any persons (except pensioners) without charge or for a charge that is less than \$4 in respect of general patients or for a charge that is less than \$2 in respect of patients with a concessional entitlement; and
- (d) he will not enter into an agreement or arrangement to pay rebates or refunds of the authorised prescription charges nor will he become a party to such agreements.

CODING AND SUBMISSION OF PRESCRIPTIONS PROCEDURE BY APPROVED CHEMISTS

A. INTRODUCTION

78. The pricing of valid prescriptions, repeat authorisations and Doctor's Bag order forms and the calculation of the total amount payable for each claim are carried out by means of an electronic computer which operates on coded information provided by the approved chemist in respect of each pharmaceutical benefit supplied under the National Health Act.

79. The system is designed to enable approved chemists to prepare claims correctly with a minimum of work but it is, however, essential that the instructions be followed carefully and without modification. The inclusion in claims of incorrectly coded or otherwise defective prescriptions can be expected to interrupt processing and delay payments.

80. The interest and co-operation of approved chemists in ensuring that claims are always correctly prepared is invited and would substantially assist this Department to maintain a programme of prompt and satisfactory payments.

B. PROVISION OF CODED INFORMATION BY AN APPROVED CHEMIST

Entering of Information

81. The approved chemist will enter relevant information on each document he submits in support of his claim. The information to be entered will depend upon the type of document, i.e., original or repeat supply, Emergency Drug (Doctor's Bag) order form, etc., and on the category of prescription, i.e., ready prepared or extemporaneously prepared.

Codes for Preparations which are Pre-priced

82. A unique five-character code (e.g. 1001Q) is shown for:—

- (i) each form and strength of every ready prepared benefit (sections 2 and 3, Schedule of Benefits);
- (ii) each standard formula preparation listed in the Standard Formulae List.

Pharmaceutical benefit items which may be prescribed by participating dental practitioners are listed in a group at the end of Section 2 and a separate series of codes has been allocated to them. Only those pharmaceutical benefit items prescribed by dental practitioners should be coded with the appropriate codes published in this section.

Codes for Extemporaneous Preparations which are not Pre-Priced

83. Three-character codes representing each type of extemporaneous preparation, e.g., mixtures, ointments, etc., are shown in the Table of Codes, section 4 (Green Pages) of the Schedule. These three-character codes are to be used by the approved chemist in coding those prescriptions where a doctor has either specified the individual ingredients of a preparation or ordered a combination of standard formulae or has varied in any way a preparation included in the Standard Formulae List, and the approved chemist has not elected to price out his prescriptions. Where the approved chemist has elected to price out such prescriptions then action as outlined in paragraph 91 should be taken.

Coding Stamp

84. One stamp is provided for coding both Ready Prepared Benefits and Extemporaneously Prepared Benefits. This stamp provides spaces for coded information on original prescription forms. Where a chemist chooses to type or machine print coding information directly on to the prescription form, the use of the stamp is unnecessary provided the requirements of paragraph 86 are observed. Repeat authorisation forms, Emergency Drug (Doctor's Bag) Order forms, Authority Prescription forms and Authority to Prescribe forms currently on issue have printed coding spaces.

85. Stamp imprints should be placed preferably on the extreme left of the front side of the prescription form. Many doctors as well as dentists use prescription forms which provide space suitable for this purpose, but when there is insufficient area on the front of the form the stamp should be placed on the left hand side on the back. It should be noted that coding stamps must be placed either all on the front or all on the back of an individual form. In no circumstances should the stamp imprint appear on both the back and front. Chemists are asked to avoid stamping or writing over the unique identifying number pre-printed above the letters 'N.H.S.' on the N.H.S. prescription forms supplied to medical practitioners or over the 'D.P. No.' box on N.H.S. dental prescription forms supplied to dental practitioners by the Commonwealth.

86. Where the coding stamp is not used (see paragraph 84) typed or machine printed coding information must conform to the following conditions:—

- (a) The information should be typed or printed in the same area on the prescription form as that designated for the coding stamp (see paragraph 85).
- (b) The information should be provided in the same order and position as that shown in the stamp and labelled in a similar manner i.e. 'S', 'C', 'Q', 'B', 'R' and 'No.'.

87. This stamp will be used for all pharmaceutical benefits—

S	
C	
Q	
B	R
No.	

Coding of Ready Prepared Benefits

88.—

'S'—Serial Number (see paragraphs 98–100).

'C'—Is the appropriate code. All codes are shown in the Schedule of Benefits for Approved Chemists beside the benefits to which they refer. These numbers range from 1001Q to 3395Q.

'Q'—Quantity. The number of units dispensed, e.g., capsules, tablets, tins, vials, tubes, etc., is to be entered in the stamp imprint. Only the appropriate number should be shown. The type of dispensing unit should not be specified.

For regulation 24 prescriptions, the quantity actually supplied should be entered; that is the total of the original quantity plus the quantities ordered as repeats. The letter 'X' should be entered on the stamp imprint immediately after the quantity.

The dispensed quantity of PACKS NOT TO BE BROKEN should never be expressed as a volume or weight but always in those terms in which the maximum quantity is expressed in column 3 of section 2 or section 3 of the Schedule; e.g., a prescription ordering 200mL of a pack not to be broken should be coded with a quantity of '1' and not '200'.

'B'—Brand Ordered. Where a doctor or dentist orders a particular brand either by proprietary name or brand, the code letters of the manufacturer whose brand is ordered should be entered beside the letter 'B'. Where a particular brand is not ordered THIS SPACE MUST BE LEFT BLANK.

'R'—Repeats. Where repeats (up to the allowable maximum) are ordered on an original prescription, the number so ordered should be entered in this space, including those cases where supply has been made under Regulation 24.

'No.'—Prescription identifying number (see paragraphs 63 and 64).

Coding of Extemporaneously Prepared Benefits included in the Standard Formulae List

89.—

'S'—Serial Number (see paragraphs 98–100).

'C'—Code obtained from the Standard Formulae List where one is shown. These codes range from 7001L to 9897X.

'Q'—Quantity. The number of millilitres or grammes should be entered.

Where the supply of a standard preparation is made under Regulation 24, the quantity actually supplied followed by the letter 'X' should be entered.

'B'—This space must be left blank when coding extemporaneously prepared prescriptions (except for provision made in paragraph 90).

'R'—Repeats. Where repeats (up to the allowable maximum) are ordered on an original prescription, the number so ordered should be entered in this space, including those cases where supply has been made under Regulation 24.

'No.'—Prescription identifying number (see paragraphs 63 and 64).

Dropper Containers

90. Dispensed prices for extemporaneously prepared eye drops, ear drops and nasal instillations include the cost of a polythene dropper container. Where a glass dropper container is specified by the prescriber or considered necessary by the approved chemist, the prescription should be endorsed accordingly and payment for same should be claimed by placing the letter 'g' in the brand space of the coding stamp.

Coding of Extemporaneously Prepared Benefits which are not listed in the Standard Formulae List

91. In the case of a formula for which a code is not shown claimants will receive an average 10g/mL rate for the type of preparation with provision to price exceptional prescriptions (see paragraph 143) or the claimants may elect to calculate the cost of ingredients, containers and professional fee manually (see paragraphs 137–142). These arrangements have been agreed between the Department and the Pharmacy Guild of Australia.

Action to be taken when an Approved Chemist is to be paid on an Average Price Basis

92.—

(a) Coding of prescriptions to be reimbursed on an average price basis.

- (i) Enter the serial number, number of repeats ordered (up to the allowable maximum), if any, and the prescription identifying number in the appropriate places on the stamp imprint.

- (ii) Enter the three-character code for the type of preparation in the code space (see the Table of Codes, section 4 [Green Pages] for these codes).

- (iii) Enter the number of millilitres or grammes.

- (iv) Where a supply is made under the provisions of Regulation 24, the letter 'X' should be entered after the quantity.

NOTE:—The space following the letter 'B' should be left blank (except for provision made in paragraph 90).

(b) Coding of Exceptional Prescriptions as defined in paragraph 143.

- (i) Enter the serial number, number of repeats ordered (up to the allowable maximum), if any, and the prescription identifying number in the appropriate places in the stamp imprint.

- (ii) Enter the three-character code for the type of preparation preceded by the letter 'V' (indicating that this prescription is priced) in the code space. (See the Table of Codes, section 4 [Green Pages] for these codes.)

- (iii) Enter the calculated price in the quantity space.

- (iv) Where the supply is made under the provisions of Regulation 24 the letter 'X' should be entered after the price.

NOTE:—The space following the letter 'B' should be left blank (except for provision made in paragraph 90).

Action to be taken when an Approved Chemist elects to price non-pre-priced Extemporaneous Preparations

93. When the approved chemist has advised the Department of his election to price out these prescriptions he should price all prescriptions in this category in accordance with the pricing principles set out in 'Provisions governing Payments to Approved Chemists for N.H.S. dispensing' (paragraphs 125–133) and:—

- (i) enter the serial number, number of repeats ordered (up to the allowable maximum),

if any, and the prescription identifying number in the appropriate sections of the stamp imprint;

- (ii) enter only the letter 'V' in the code space. This indicates that the prescription has been priced out;
- (iii) enter the price he has calculated in the quantity space;
- (iv) where a supply is made under the provisions of Regulation 24, the letter 'X' should be entered after the price.

NOTE:— No details of type or quantity of preparation are to be shown in the code stamp.

Coding of Repeat Authorisation Forms

94. The approved chemist originating a repeat will enter on the form the information set out in paragraph 52 together with the code, quantity and where applicable the brand of the benefit ordered.

Coding of Repeat Authorisation Forms Used for Deferred Supply

95. An approved chemist who has supplied a benefit on the presentation of a repeat authorisation form which has been prepared for deferred supply should code the form in the same manner as a normal repeat authorisation.

Action by Approved Chemist dispensing a Repeat Authorisation

96. It is the responsibility of the chemist dispensing a repeat supply to ensure the details of the coding on the repeat authorisation form are correct. It should be noted that:—

- (a) The serial number allotted by the approved chemist to the repeat supplied as a benefit is entered in the box at the top of the form.
- (b) The new prescription identifying number of the repeat authorisation is to be entered in the space marked 'No.' in the coding stamp box on the front of the form. (See paragraph 64.)
- (c) When the approved chemist issuing the authorisation has entered a code number (for the type of preparation) and quantity in the stamp and the dispensing approved chemist has elected to price such prescriptions instead of accepting the average price, the dispensing approved chemist should strike out the entries and replace them with 'V' and the claimed price or vice versa.

Coding of Emergency Drug (Doctor's Bag) Order Forms

97. For each item ordered, enter the serial number, code of the benefit, quantity supplied and the brand ordered, if any.

Serial numbering of Prescriptions, Repeat Authorisations and Emergency Drug (Doctor's Bag) Order Forms

98. Prescriptions, repeat authorisations, authority prescriptions, authority to prescribe forms and Emergency Drug (Doctor's Bag) Order forms submitted in each claim must bear consecutive serial numbers commencing at:—

- (a) D1 for Emergency Drug (Doctor's Bag) supplies;
- (b) 1 for general benefits;
- (c) C1 for concessional benefits; and
- (d) P1 for pensioner benefits.

Each serial number allotted should also be endorsed on the corresponding document retained by the chemist for record purposes. Each Doctor's Bag item should be given a serial number, e.g., if there are five items on the first form in the claim the first item on the second form in the claim will be D6.

Repeat authorisations for an injectible item and the related solvent must bear consecutive serial numbers and must be stapled together.

99. Each serial number allotted by an approved chemist to a prescription item or allowable repeat supplied as a pharmaceutical benefit should be entered in the appropriate space in the coding information imprint on the original prescription form (see paragraph 87) or in the box at the top of the repeat authorisation form (see paragraph 96), as the case may be.

100. Serial numbers allotted in respect of prescription items or allowable repeats supplied as concessional benefits must be prefixed with the letter 'C' and in respect of pensioner benefits with the letter 'P'.

Repeat Authorisation for Authority forms

101. Where a repeat authorisation is dispensed in respect of a benefit for which an authority form is required, the serial number allotted must be prefixed with the letter 'A' in the case of a general benefit, the letters 'AC' in the case of a concessional benefit, or the letters 'AP' in the case of a pensioner benefit.

Repeat Authorisations for Deferred Supply

102. Where a benefit is supplied on a repeat authorisation which has been prepared for deferred supply, the serial number allotted must be prefixed with the letter 'D' in the case of a general benefit, the letters 'DC' in the case of a concessional benefit, or the letters 'DP' in the case of a pensioner benefit.

C. SUBMISSION OF CLAIMS

Documents to be submitted

103. A claim for pharmaceutical benefits consists of:—

- (i) A completed claim form PB1.
- (ii) Where applicable a completed Form PB42—Isolated Pharmacy Allowance—claim for payment (see paragraphs 153–154).
- (iii) The original orders for Emergency Drug (Doctor's Bag) supplies in a separate bundle submitted in serial number order.
- (iv) The originals of all prescriptions, repeat authorisations and authority prescriptions for benefits supplied to the general public. These should be together in a separate bundle from the concessional and pensioner prescriptions and submitted in serial order.
- (v) The originals of all prescriptions, repeat authorisations and authority prescriptions for benefits supplied to concessional beneficiaries. These should be together in a separate bundle from the general and pensioner prescriptions and submitted in serial number order.
- (vi) The originals of all prescriptions, repeat authorisations and authority prescriptions for benefits supplied to pensioners. These should be together in a separate bundle from the general and concessional prescriptions and submitted in serial number order.

Prescriptions submitted for payment which are apparently in a wrong bundle will be returned for any necessary clarification and if appropriate, resubmission in the correct bundle of the next claim.

104. Generally, prescriptions in each bundle should be submitted in serial number order, with the first serial number at the top of the bundle. The exception to this is where an approved chemist has elected to price extemporaneously prepared prescriptions outside the Standard Formulac list (see paragraphs 91, 137), or is claiming exceptional prescriptions (see paragraphs 92, 143). These prescription forms should

be placed at the back of the relevant bundle irrespective of serial numbers and the fact that other prescriptions may appear on the same form.

Completion of Claim Form

105. Particulars of claimant's name, address of approved premises, approval number and chemist's reference month should be entered in the spaces provided on the claim form (PB1). It is important that these particulars agree entirely with the latest written information held by this Department, i.e., application for approval form or later letter. In the event of discrepancies, payment will necessarily be delayed pending clarification.

106. The numbers to be entered on the claim form are the first and last serial numbers given to items in the Emergency Drug (Doctor's Bag), General, Concessional and Pensioner Benefits bundles respectively (see paragraph 98). The last numbers should be the total numbers of these categories.

107. Please note that no entry of the amount of the claim is required—this will be calculated by computer after the prescriptions have been individually priced.

108. The declaration on the claim form must be signed by the approved chemist unless an authority for another chemist to do so has been sent by the approved chemist to the Regional Director, Commonwealth Department of Health in the State concerned.

Time for Lodgment of Claims

109. Claims for pharmaceutical benefits may be lodged at the office of the Commonwealth Department of Health in your capital city at any time during the month and should comprise approximately one month's dispensing. Claims for pharmaceutical benefits supplied more than six months prior to the date of claiming will not be accepted for computer processing, but will require manual pricing of prescriptions and preparation of tally sheets and claim forms by the chemist. Approved chemists desiring to submit such claims should contact the Pharmaceutical Branch in the relevant Regional Office (see page 23) for instructions regarding the preparation of the claims and the necessary forms.

D. STATEMENT OF ACCOUNT

110. A Statement of Account will be forwarded in respect of each claim passed for payment. This gives, in addition to the details of payment, the price paid for each benefit or the reason for non-payment. Prescriptions are identified on the Statement of Account by the serial numbers allotted by the claimant and the item code. In the case of non-priced extemporaneously prepared benefits the letter 'V' or the three-character code for the type of preparation replaces the item codes according to

whether the prescriptions have been paid on the average price or calculated price basis. Serial numbers of Emergency Drug (Doctor's Bag) items will be prefixed by the letter 'D', concessional benefit prescriptions by the letter 'C' and the pensioner benefit prescriptions by the letter 'P'.

111. The reason for non-payment of any item will be indicated by a code letter. An explanation of the code employed appears on the reverse side of the Statement of Account.

112. Prescriptions and repeat authorisations which are not acceptable for payment, with the exception of those for which the dispensed price is equal to or less than the applicable patient contribution, will be returned with the Statement of Account. Other prescriptions appearing on such forms will have been paid and appropriately cancelled before being returned to the approved chemist. Where prescriptions are resubmitted they must be allotted an entirely new serial number and included as a normal part of the next claim.

113. If prescriptions from previous claims are the subject of adjustment to current claims, full details will be shown on the Statement of Account.

114. Where a correctly coded prescription has not been given a serial number by the claimant, the serial number given to the preceding prescription will be used also as a means of reference to the second prescription, i.e., the serial number will appear twice on the Statement of Account with the appropriate prices or rejection codes relating to both prescriptions.

115. Should serial numbers be duplicated they will be shown on the Statement of Account as numbered by the claimant.

116. In the case of a serial number which has not been used or the relevant document not submitted the number will be printed on the Statement of Account together with a code signifying that the document has not been received.

117. The Statement of Account will include a statement reconciling the number of prescriptions claimed for by the approved chemist with the number of prescriptions for which payment has been made.

PROVISIONS GOVERNING PAYMENTS TO APPROVED CHEMISTS FOR N.H.S. DISPENSING

A. READY PREPARED BENEFITS

Price where Maximum Quantity Prescribed (Ready Prepared Items)

118. The price payable for a benefit is the amount shown in column 5 of the Schedule against the benefit subject to the following provision:—

Injectors with required solvent—Where the words 'solvent required' are included after the form of the benefit, the price payable is the sum of the listed prices for the item and the solvent less a professional fee (i.e., only one professional fee is payable). Prescribers must indicate volume and number of ampoules of solvent to be supplied.

Price where Broken Quantity Prescribed (R.P. Items)

119.—

(a) Packs not to be broken—Where items packed by the manufacturer under special conditions or for which the maximum quantity has been determined as a single pack are prescribed (see paragraph 121), the maximum quantity should be supplied and the price payable is that for the maximum quantity.

(b) Ready Prepared Items where Standard Pack coincides with Maximum Quantity—Where the standard pack coincides with the maximum quantity, the price payable for a broken quantity is ascertained as follows—

(i) an amount equivalent to the professional fee and where applicable the dangerous drug fee is deducted from the price shown in column 5 of the Schedule in relation to the benefit.

(ii) To the resultant amount is applied the appropriate wastage percentage ascertained from the Wastage Factor Table shown in paragraph 123.

(iii) The amount ascertained under (ii) is added to an amount equivalent to the professional fee, the dangerous drug fee, where applicable, and the appropriate container fee.

In no case shall the price payable for a broken quantity exceed the dispensed price shown in column 5 of the Schedule in relation to the maximum quantity of the benefit.

- (c) Ready Prepared Items where Standard Pack does not coincide with Maximum Quantity (i.e. where an asterisk is shown against the price) — In cases where the standard pack does not coincide with the maximum quantity an asterisk has been placed in column 5 of the Schedule beside the price shown for the benefit concerned. In such cases the standard pack rate is set out in the Table shown in section 6 (Blue Pages) of the Schedule. The price payable for the quantity supplied is ascertained as follows:—

- (i) To the standard rate is applied the appropriate wastage table percentage ascertained from the Wastage Factor Table shown in paragraph 123.
- (ii) The amount so ascertained is added to an amount equivalent to the professional fee, the dangerous drug fee, where applicable, and the appropriate container fee.

In no case shall the price payable for a broken quantity which is less than the maximum quantity of the item exceed the dispensed price for the maximum quantity of that item.

- (d) No container fee is payable where the quantity of benefit ordered and supplied is more than the quantity contained in the standard or non-standard packs.

Price for Unbranded Prescriptions

120. Where a standard pack price applies, the lowest price for the relevant State shown in column 5 of the Schedule in relation to that item is payable.

Unbroken Packs to be Supplied (‡)

121. The maximum quantity of certain forms of benefits such as eye drops and oral suspensions has been determined as a single pack corresponding to the manufacturer's pack. Where a prescription calls for a quantity less than the manufacturer's pack, the maximum quantity should be dispensed and claimed from the Department. These items are indicated by a double dagger (‡) in the Schedule.

Wastage Table Percentage for Ready Prepared Preparations

122. The wastage table shown below is used in ascertaining the price payable for quantities dispensed from the Standard Pack. (Refer paragraph 119 (b) and (c) above.)

123. The appropriate wastage table percentage is ascertained as follows:—

- (a) The percentage that the quantity supplied bears to the number contained in the standard pack is determined;
- (b) Where the percentage determined in subparagraph (a) coincides with a percentage listed in Column A of the Wastage Factor Table, the percentage used is the relative figure shown in Column B;
- (c) Where the percentage determined in subparagraph (a) does not coincide with a percentage in Column A, then the nearest upward percentage in Column A applies, and the percentage used is the relative figure shown in Column B.

For example, suppose that 24 tablets are supplied and that the number in the Standard Pack is 100. Thus 24% of the number contained in the Standard Pack is supplied. As this percentage does not appear in Column A the next higher (i.e. 25%) is used. Reading down from 25% to Column B, the wastage table percentage is found to be 38%.

Wastage factor table

Column A	5	10	15	20	25	30	35	40	45	50
Column B	10	18	26	32	38	44	50	54	58	62
Column A	55	60	65	70	75	80	85	90	95	100
Column B	66	70	74	78	82	86	90	94	98	100

B. EXTEMPORANEOUSLY PREPARED BENEFITS

Prescribers' List Items

124. The price payable for the supply of the maximum quantity of extemporaneous preparations included in the Prescribers' List is shown in the Standard Formulae List.

Pricing Prescriptions Not Pre-Priced

125. The following are the principles applied in determining the prices of all pre-priced extemporaneous formulae shown in the Standard Formulae List. They also apply where a chemist elects to price out extemporaneous prescriptions outside the Standard Formulae List.

126. The amount payable is ascertained as the sum of:—

- (a) the recovery price of each ingredient as shown in the Drug Tariff;
- (b) the price of the appropriate container as shown in section 4; and
- (c) a professional fee as shown in section 4.

Pricing of Ingredients

127. Where the quantity is not specified in the Drug Tariff, the recovery price may be ascertained as follows:—

- (a) determine the basic pricing unit relative to the quantity by reference to the following table:—

Quantity	Basic Pricing Unit
Up to 50mg (minimum price)	100mg price multiplied by 0.5
Over 50mg and up to and including 700mg	100mg price
Over 700mg and up to and including 1g	price as 1g
Over 1g and up to and including 7g	1g price
Over 7g and up to and including 10g	price as 10g
Over 10g and up to and including 80g	10g price
Over 80g and up to and including 90g	price as 80g
Over 90g	100g price

- (b) ascertain the recovery price of the basic pricing unit by the application of the following quantity divisors to the recovery price shown for the ingredient in the Drug Tariff —

100g price is 500g price divided by 5 or
1kg price divided by 10.

10g price is 100g price plus 12½%
divided by 10.

1g price is 10g price plus 25% divided
by 10.

100mg price is 1g price plus 25%
divided by 10.

- (c) ascertain the recovery price by multiplying the price of the basic pricing unit, as ascertained in (b), by the fraction that the quantity bears to the basic pricing unit.

- (d) for pricing purposes the quantity is to be taken to the next upward 50 milligrams or 0.05 millilitres.

Miscellaneous Pricing Rules

128.—

- (a) The minimum recovery price for any ingredient is one cent.
- (b) Where a fraction of a cent occurs in a price that price is to be taken to the nearest cent, a half cent being taken up to the next cent.
- (c) The amount payable for a quantity of an ingredient or preparation shall not exceed the amount which would be payable for a greater amount of that ingredient or preparation.

Pricing Prescriptions where Additional Ingredients have been added to a Specified Formula

129. The amount payable for a prescription which comprises a vehicle which is specified under a particular name, and an additional specified ingredient or ingredients shall be calculated in accordance with paragraphs 130–133.

130. Where the vehicle is a single liquid ingredient and one or more solid ingredients are added, displacement of the vehicle by solids shall be disregarded and the amount payable shall be calculated in accordance with paragraph 127.

131. Where the vehicle is a single liquid ingredient and one or more liquids are added, the amount payable for the ingredients shall be the sum of:—

- (a) the recovery price of the added ingredients, calculated in accordance with paragraph 127; and
- (b) the recovery price of the quantity of the vehicle calculated in accordance with paragraph 127.

132. Where the vehicle is compounded from two or more ingredients and one or more solid ingredients are added, displacement of the vehicle by the solid ingredients shall be disregarded and the amount payable for the ingredients shall be the sum of:—

- (a) the recovery price of the added ingredients, calculated in accordance with paragraph 127; and
- (b) the recovery price of each ingredient of the vehicle calculated in accordance with paragraph 127.

133. Where the vehicle is compounded from two or more ingredients and one or more liquid ingredients are added, the amount payable for the ingredients shall be the sum of:—

- (a) the recovery price of the added ingredients, calculated in accordance with paragraph 127; and
- (b) the recovery price of the quantity of vehicle, this amount being the sum of the recovery prices for each ingredient of the vehicle in such quantity as calculated in accordance with paragraph 127.

Containers

134. Separate container rates are payable in each State.

135. Where a quantity is ordered in excess of the published container sizes, payment for containers will be made as if that quantity had been supplied in more than one of the published containers.

136. A double size container is allowed for bulk powders.

Special Provisions Governing Payment for Extemporaneous Prescriptions Outside the Standard Formulae List

137. Where an approved chemist elects to price out these prescriptions formal advice is required by the Department. Once made, however, such an election cannot be varied for a period of three months and applies to all extemporaneously dispensed formulae for which there are no five-character codes in the Standard Formulae List.

138. Unless he so elects, the approved chemist will be paid at an average reimbursement rate for these prescriptions. Under this system, payment is made on the basis of an average 10g/mL rate applied to the category of preparation concerned, i.e., the price will be ascertained by multiplying the appropriate 10g/mL rate by the number of 10g/mL units supplied and adding container and professional fees. For example, an 80mL mixture would be priced at eight times the average 10mL rate for mixtures, plus container and professional fee. Notwithstanding that an approved chemist is accepting the average price for non-pre-priced prescriptions, he may price out 'exceptional' prescriptions and code for reimbursement at that price (see paragraph 143).

139. The average 10g/mL rate may vary from month to month but the rate for a particular prescription will be that applicable for the month in which it was supplied. The current month's average 10g/mL rates are printed on the last page of the Statement of Account (see paragraphs 110-117).

140. By agreement with the Pharmacy Guild of Australia the average 10g/mL rate is determined as in paragraph 141.

141. Each month the total number of 10g/mL units of each type of pre-priced extemporaneous preparation claimed for will be ascertained, together with the total values minus container and professional fees. From these figures an average 10g/mL rate will be calculated for each type of preparation. This rate will be used as the rate for calculating prices for the prescriptions supplied in the succeeding month. It should be noted that prescriptions ordering a combination of standard preparations also fall outside the scope of the Standard Formulae List and therefore are subject to this section.

142.—

- (a) Any variant to a formula included in the Standard Formulae List (addition and deletion of an ingredient or variation of dose up or down) takes the formula dispensed outside the Standard Formulae List and it becomes subject to this section, i.e., it cannot be identified with the code of the formula which it resembles.
- (b) Where an approved chemist is accepting the average price for non-pre-priced prescriptions, and where an ingredient is added to a standard formula and the recovery price for the standard formula plus additive under the average price system is less than that for the standard formula alone, the approved chemist may code that prescription as though it were a standard formula item.

143. An exceptional prescription is a prescription for an extemporaneously prepared pharmaceutical benefit which is not included in the Standard Formulae List and for which the price of the ingredients calculated in accordance with basic pricing rules (paragraphs 125-133) is twice or more than twice the recovery price of the ingredients calculated on an average price basis (paragraph 138).

C. GENERAL

Pricing Principles

144. The pricing principles are identical for prescriptions written for the general public, concessional beneficiaries and pensioners.

145. Where a prescription for a pharmaceutical benefit, a formulation of which is available as a ready prepared pharmaceutical benefit, does not specify a brand, payment is made on the basis of the lowest priced brand of the ready prepared benefit item which is listed. This also applies if the preparation is, or the ingredients are, available for use in dispensing extemporaneously prepared benefits (i.e. listed in Section 4).

146. Where, in a prescription for a pharmaceutical benefit which is not listed as a ready prepared pharmaceutical benefit, a monograph title of a formulation is stated but no formulary is specified, payment is made on the basis of the formula, if any, specified in the Prescribers' List (Section 5). Should there be no formula specified in the Prescribers' List, payment is made on the basis of the precedence of formularies accorded by State legislation.

Fees and Containers

147. The amounts payable by way of professional fee, dangerous drug fee and container charges for ready prepared preparations are set out in section 6 of the Schedule. The professional fee and container charges for extemporaneously prepared preparations are set out in section 4 of the Schedule.

Pricing Dates

148. For pricing purposes the operative dates are:—

- (a) for extemporaneously prepared benefits — the first day of January, May and September each year for benefits supplied as from the first day of the third succeeding month.
- (b) for ready prepared benefits — the first day of the month preceding the month during which the benefits are dispensed.
- (c) for containers:—
 - (i) for extemporaneously prepared benefits — the first day of April, August and December each year for benefits supplied as from the first day of the fourth succeeding month.
 - (ii) for ready prepared benefits — the first day of January each year for benefits supplied as from the first day of April in that year.

MISCELLANEOUS

Premises

149. Approval to supply pharmaceutical benefits is granted to a chemist in respect of particular premises. Benefits may be supplied from these premises only.

Hours of Supply

150. A person is entitled to be supplied with pharmaceutical benefits during normal trading hours established by or under the law of the State or Territory when he presents a valid prescription and pays any charge applicable. When the prescription is marked 'urgent' and initialled by the doctor or dentist who wrote the prescription, it is obligatory for the approved chemist to make supply at his pharmacy at any hour.

151. An approved chemist shall, at all times, keep prominently displayed, at each of the premises in respect of which he is approved, a notice setting out his normal trading hours for the supply of pharmaceutical benefits.

Approved Doctors, Friendly Societies

152. Doctors approved to supply pharmaceutical benefits should follow the procedures explained in these Notes unless otherwise indicated. Friendly Society Pharmacies should follow the procedures subject to additional instructions made available to them.

Isolated Pharmacy Allowance (IPA)

153. Approved chemists providing a pharmaceutical service in isolated areas may apply for IPA on the basis of economic need. Application forms may be obtained from the Pharmaceutical Operations Branch, Commonwealth Department of Health, P.O. Box 100, Woden, A.C.T., 2606.

154. Approved chemists eligible to receive IPA will be:—

- (i) those where the pharmacy is more than 25 kilometres from the nearest pharmacy and who are able to demonstrate the need for such allowance on the basis of economic need;
- (ii) those where the pharmacy can be demonstrated to be 'isolated' on a basis other than distance (e.g. on an island, intervening mountain range, no roads) and where economic need can be demonstrated.

Standards

155. An approved chemist should not supply as a pharmaceutical benefit a substance that does not conform to the standards of composition or purity prescribed, or that has as an ingredient a substance that does not conform to those standards. The standards which are applicable to pharmaceutical benefits are:—

- (a) in the case of drugs or medicinal preparations which are the subject of a monograph in the British Pharmacopoeia, the standards set out in that pharmacopoeia; and
- (b) in the case of drugs or medicinal preparations contained in editions of the British Pharmaceutical Codex or the Australian Pharmaceutical Formulary (and Handbook) or earlier editions of the British Pharmacopoeia, the standards specified in the particular edition in relation to the drug or medicinal preparation.

References

156. Monographs of the British Pharmacopoeia, the British Pharmaceutical Codex, the Australian Pharmaceutical Formulary (and Handbook) and items listed in the Prescribers' List are identified in the Schedule of Benefits and associated publications by the letters BP, BPC, APF or PL respectively. References to all editions of the BPC and to earlier editions of the BP and APF also include the year of publication.

Proper Stocks to be Kept

157. An approved chemist shall, as far as practicable keep in stock an adequate supply of all drugs and medicinal preparations that he may reasonably be expected to be called upon to supply as pharmaceutical benefits, or as ingredients of pharmaceutical benefits.

Statement of Stocks

158. An approved chemist may be required to furnish, within a specified time and in accordance with a form supplied to him, a signed statement

setting out particulars of stocks of drugs or medicinal preparations that are in his possession or under his control immediately before the date on which the statement is signed. This refers only to drugs and medicinal preparations that are pharmaceutical benefits or are capable of being used as ingredients in pharmaceutical benefits.

Retention of Documents

159. Without affecting the requirements of the law of a State in regard to drugs of addiction or restricted drugs, every approved chemist is required to retain in his possession for not less than one year from the date on which the pharmaceutical benefits were supplied:—

- (a) the duplicates of prescriptions which do not bear repeat instructions;
- (b) the duplicates of repeat authorisations;
- (c) in the case of an approved chemist making supply on the last occasion of supply, the duplicates of prescriptions that bear instructions to repeat; and
- (d) the duplicates of order forms presented in connection with Doctor's Bag Supplies.

Sale Copies

160. Copies of the National Health Act and the National Health (Pharmaceutical Benefits) Regulations are available from the Australian Government Publishing Service in each capital city.

161. Additional copies of this publication may be purchased from the Commonwealth Department of Health in each capital city. Price and order form will be furnished upon inquiry.

Supplies of Stationery

162. Claim Forms, Repeat Authorisations, etc., are available from the Pharmaceutical Branch in the relevant Regional Office (See page 23).

Enquiries

163. Enquiries regarding pharmaceutical benefits may be made to the Pharmaceutical Branch in the relevant Regional Office (See page 23).

ADDRESSES OF COMMONWEALTH DEPARTMENT OF HEALTH REGIONAL OFFICES

NEW SOUTH WALES

Commonwealth Department of Health,
Commonwealth Government Centre,
Chifley Square,
Corner Phillip and Hunter Streets,
Sydney, N.S.W. 2000
Telephone 239 3000

Director of Health—
Dr J. Y. Hancock
After hours: Telephone 272 0527
Assistant Director (Pharmaceutical)—
Mr M. G. Wallace
After hours: Telephone 339 3932

Assistant Director (Medical)—
Dr L. B. Lilley
After hours: Telephone 929 6164

VICTORIA

Commonwealth Department of Health,
Commonwealth Centre,
Corner Spring and Latrobe Streets,
Melbourne, Vic. 3000
Telephone 662 2999

WESTERN AUSTRALIA

Commonwealth Department of Health,
Victoria Centre,
2-6 St George's Terrace,
Perth, W.A. 6000
Telephone 323 5711

Assistant Director (Medical)—
Dr A. I. Mead
After hours: Telephone 347 0103
Assistant Director (Pharmaceutical)—
Mr B. G. Foster
After hours: Telephone 221 8195

Postal Address—
G.P.O. Box M970, Perth, W.A. 6001
Director of Health—
Dr D. J. Daly
After hours: Telephone 399 6075
Assistant Director (Pharmaceutical)—
Mr M. P. Humbert
After hours: Telephone 330 1575

QUEENSLAND

Commonwealth Department of Health,
Australian Government Offices,
Anzac Square,
Adelaide Street,
Brisbane, Qld 4000
Telephone 225 0122

TASMANIA

Commonwealth Department of Health,
Kirksway House,
6 Kirksway Place,
Hobart, Tas. 7000
Telephone 20 5011

Postal Address—
G.P.O. Box 567, Brisbane, Qld 4001
Director of Health—
Dr Peter E. R. Ulrich
Assistant Director (Medical)—
Dr J. R. Meyers
After hours: Telephone 399 5857
Assistant Director (Pharmaceutical)—
Mr A. A. Green
After hours: Telephone 263 2257

Postal Address—
G.P.O. Box 919J, Hobart, Tas. 7001
Director of Health—
Dr C. W. Phillips
After hours: Telephone 25 1536
Assistant Director (Pharmaceutical)—
Mr W. M. Murton
After hours: Telephone 29 6749

SOUTH AUSTRALIA

Commonwealth Department of Health,
I.M.F.C. House,
33-39 King William Street,
Adelaide, S.A. 5000
Telephone 216 3911

NORTHERN TERRITORY

Commonwealth Department of Health,
M.L.C. Building,
Smith Street,
Darwin, N.T. 5794
Telephone 80 2911

Postal Address—
G.P.O. Box 2219, Adelaide, S.A. 5001

Postal Address—
P.O. Box 147, Darwin, N.T. 5794
Director of Health—
Dr F. H. Stewart
After hours: Telephone 81 2036

INDEX OF MANUFACTURERS' CODES

<i>Code</i>	<i>Manufacturer</i>	<i>Code</i>	<i>Manufacturer</i>
AB	Abbott Laboratories Pty Ltd Captain Cook Drive, Kurnell, N.S.W. 2231	BT	The Boots Company (Aust.) Pty Ltd Loyalty Road, North Rocks, N.S.W. 2151
AF	Alphapharm Pty Ltd 72-76 Parramatta Road, Camperdown, N.S.W. 2050	BW	Wellcome Australia Ltd 53 Phillips Street, Cabarita, N.S.W. 2137
AG	Allergan Pharmaceuticals Pty Ltd 5 George Place, Artarmon, N.S.W. 2064	BY	Boehringer Ingelheim Pty Ltd 50 Broughton Road, Artarmon, N.S.W. 2064
AM	Ames Company Division of Miles Laboratories Australia Pty Ltd Wellington Road, Mulgrave, Vic. 3170	BZ	Boucher and Muir Pty Ltd 118-124 Willoughby Road, Crows Nest, N.S.W. 2065
AP	Astra Pharmaceuticals Pty Ltd 10-14 Khartoum Road, North Ryde, N.S.W. 2113	CG	Ciba-Geigy Australia Limited 14 Orion Road, Lane Cove, N.S.W. 2066
AQ	Alcon Laboratories (Australia) Pty Ltd 1a Winbourne Road, Brookvale, N.S.W. 2100	CS	Commonwealth Serum Laboratories 45 Poplar Road, Parkville, Vic. 3052
AY	Ayerst Laboratories Pty Ltd Gregory Place, Parramatta, N.S.W. 2150	DF	Difrex (Aust.) Laboratories 13-19 Glebe Street, Glebe, N.S.W. 2037
BC	Bristol Laboratories Pty Ltd 345 Pacific Highway, Crows Nest, N.S.W. 2065	DH	Drug Houses of Australia Pty Ltd 31 Henderson Street, Turrella, N.S.W. 2205
BF	Barnes-Hind Pty Ltd 7 Dickson Avenue, Artarmon, N.S.W. 2064	DL	Dista Products (Australia) & Company Waratah Street and Wharf Road, Ermington, N.S.W. 2115
BH	Biopharm Pty Ltd 109 Willis Street, Hampton, Vic. 3188	DT	Du Pont Pharmaceuticals Northside Gardens, 168 Walker Street, North Sydney, N.S.W. 2060
BL	David Bull Laboratories 11-15 Lexia Place, Mulgrave, Vic. 3170	DY	Denyer Brothers 250 Pitt Street, Sydney, N.S.W. 2000
BM	Bermudapharm 6th Floor, 80 Alfred Street, Milsons Point, N.S.W. 2061	EC	Erba Carlo, S.p.A., Italy Australian Distributor, Sigma Co. Ltd
BN	Bayer Pharmaceutical Company 46-67 Wilson Street, Botany, N.S.W. 2019	EG	Eagle Laboratory Pty Ltd 64 Rose Street, Chippendale, N.S.W. 2008
BO	Boehringer Mannheim Australia Pty Ltd 6-8 Byfield Street, North Ryde, N.S.W. 2113	ET	Ethnor Pty Ltd 1-5 Khartoum Road, North Ryde, N.S.W. 2113
BR	Beecham Research Laboratories 6 Winterton Road, Clayton, Vic. 3168	FA	F. H. Faulding & Co. Ltd 62 Dew Street, Thebarton, S.A. 5031

<i>Code</i>	<i>Manufacturer</i>	<i>Code</i>	<i>Manufacturer</i>
FC	Fisons Pty Ltd 6 Chilvers Road, Thornleigh, N.S.W. 2120	LF	Langly Laboraatories Pty Ltd 64 Rose Street, Chippendale, N.S.W. 2008
FL	Florafau Pty Ltd Suite 11, 16 Dellamarta Road, Wangara, W.A. 6065	LY	Eli Lilly (Aust.) and Company Wharf Road, West Ryde, N.S.W. 2114
FM	Fawns and McAllan Pty Ltd 432 Mt Dandenong Road, Croydon, Vic. 3136	MB	May & Baker Australia Pty Ltd Paramount Road, Footscray West, Vic. 3012
FR	Charles E. Frosst (Australia) Pty Ltd 54-68 Ferndell Street, South Granville, N.S.W. 2142	MG	J. McGloin Pty Ltd 20 Forrester Street, Kingsgrove, N.S.W. 2208
GB	Gist-Brocades nv, The Netherlands Australian Distributor, Astra Pharmaceuticals Pty Ltd	MJ	Mead Johnson 345 Pacific Highway, Crows Nest, N.S.W. 2065
GL	Glaxo 1061 Mountain Highway, Boronia, Vic. 3155	MK	Merck, Sharp and Dohme (Australia) Pty Ltd 54-68 Ferndell Street, South Granville, N.S.W. 2142
GP	G.P. Laboratories Wharf Road, West Ryde, N.S.W. 2114	ML	Merrell Dow Pharmaceuticals Australia Pty Ltd 37th Floor, Northpoint, 100 Miller Street, North Sydney, N.S.W. 2060
HA	Hamilton Laboratories Pty Ltd 217 Flinders Street, Adelaide, S.A. 5000	MN	Muir and Neil (Sales) Pty Ltd 21 Leeds Street, Rhodes, N.S.W. 2138
HO	Hollister Incorporated, U.S.A. Australian Distributor, Abbott Laboratories Pty Ltd	NE	Norgine Pty Ltd Suite 5, 532 Hampton Street, Hampton, Vic. 3188
HP	Hoechst Australia Ltd 606 St Kilda Road, Melbourne, Vic. 3000	NN	Nelson Laboratories (Sales) Pty Ltd 21-25 Derby Street, Silverwater, N.S.W. 2141
IC	ICI Australia Operations Pty Ltd ICI House, 1 Nicholson Street, Melbourne, Vic. 3000	NO	Novo Laboratories Pty Ltd 43 Hunter Street, Parramatta, N.S.W. 2150
IQ	The Ioquin Company 1a Winbourne Road, Brookvale, N.S.W. 2100	NR	Nordia, Denmark Australian Distributor, Ascot Pharmaceuticals Pty Ltd 33 Myrtle Street, North Sydney, N.S.W. 2060
JP	Janssen Pharmaceutica Pty Ltd 13 Rodborough Road, Frenchs Forest, N.S.W. 2086		
KN	Knoll, A. G., Germany Wood Street, Tempe, N.S.W. 2044		
LA	L.A. Chemicals Pty Ltd 16 Manchester Street, Mile End, S.A. 5031		
LE	Lederle Laboratories Division Cyanamid Australia Pty Ltd, 88 Christie Street, St Leonards, N.S.W. 2065		

<i>Code</i>	<i>Manufacturer</i>	<i>Code</i>	<i>Manufacturer</i>
NS	Nicholas Pty Ltd 699 Warrigal Road, Chadstone, Vic 3148	RN	Rona Laboratories Ltd, London, U.K. Australian Distributor Riker Laboratories Australia Pty Ltd
NT	Nestle Australia Ltd 60 Bathurst Street, Sydney, N.S.W. 2000	RO	Roche Products Pty Ltd Inman Road, Dee Why, N.S.W. 2099
NW	Norwich-Eaton Pty Ltd Lombard House, 781 Pacific Highway, Chatswood, N.S.W. 2067	RS	A. H. Robins Pty Ltd 4 Charles Street, Canterbury, N.S.W. 2193
OL	Owen Laboratories 1a Winbourne Road, Brookvale, N.S.W. 2100	RT	Rocke, Tomsitt and Co. Ltd 10 Griffiths Street, Richmond, Vic. 3121
OR	Organon (Aust.) Pty Ltd 31-33 Sirius Road, Lane Cove, N.S.W. 2066	SC	Schering, AG., Berlin Wood Street, Tempe, N.S.W. 2044
PD	Parke, Davis Pty Ltd 32 Cawarra Road, Caringbah, N.S.W. 2229	SD	Syntex Pharmaceuticals Ltd Funds of Australia Building, 10th Floor, 275 Alfred Street North, North Sydney, N.S.W. 2060
PF	Pfizer Pty Ltd Wharf Road, West Ryde, N.S.W. 2114	SE	Servier Laboratories (Aust.) Pty Ltd 2-8 Lynch Street, Hawthorn, Vic. 3122
PN	Pharmax Ltd, England Australian Distributor, Protea Pharmaceuticals Pty Ltd	SH	Schering Corporation, U.S.A. 11 Gibbon Road, Baulkham Hills, N.S.W. 2153
PR	Prosana Laboratories Pty Ltd 22 Daisy Street, Revesby, N.S.W. 2212	SI	Sigma Co. Ltd P.O. Box 144, Clayton, Vic. 3168
PS	Pharmacia (South Seas) Pty Ltd Cnr Khartoum and Talavera Roads, North Ryde, N.S.W. 2113	SJ	Sharpe Laboratories Pty Ltd 24 Punch Street, Artarmon, N.S.W. 2064
PT	Protea Pharmaceuticals 13-19 Glebe Street, Glebe, N.S.W. 2037	SK	Smith Kline and French Laboratories (Aust.) Ltd Warringah Road, French's Forest, N.S.W. 2086
QE	Queensland Ethicals Enterprise Street, Salisbury, Qld 4107	SL	Soul Pattinson Laboratories Pty Ltd 20 Forrester Street, Kingsgrove, N.S.W. 2208
RC	Reckitts Pty Ltd 44 Wharf Road, West Ryde, N.S.W. 2114	SN	Smith & Nephew (Aust.) Pty Ltd Wellington Road, Clayton, Vic. 3168
RD	Ross Laboratories Captain Cook Drive, Kurnell, N.S.W. 2231	SQ	E. R. Squibb and Sons Pty Ltd Princes Highway, Noble Park, Vic. 3174
RK	Riker Laboratories Australia Pty Ltd 9-15 Chilvers Road, Thornleigh, N.S.W. 2120		
RL	Roussel Pharmaceuticals Pty Ltd Gladstone Road, Castle Hill, N.S.W. 2154		

<i>Code</i>	<i>Manufacturer</i>	<i>Code</i>	<i>Manufacturer</i>
SR	Searle Laboratories 20 Clarke Street, Crows Nest, N.S.W. 2065	VF	Vifor, S.A., Geneva, Switzerland Australian Distributor, Boucher and Muir Pty Ltd
ST	A. E. Stansen and Co. Pty Ltd 121 Ricketts Road, Notting Hill, Vic. 3168	WH	H. W. Woods Pty Ltd 10 Clifford Street, Huntingdale, Vic. 3166
SU	Sauter Laboratories (Aust.) Pty Ltd 60 Campbell Avenue, Dee Why, N.S.W. 2099	WL	Winthrop Laboratories 75-89 Atkins Road, Ermington, N.S.W. 2115
SV	Stafford-Miller Limited 5-9 Enterprise Avenue, Padstow, N.S.W. 2211	WP	Weddel Pharmaceuticals 6 Chilvers Road, Thornleigh, N.S.W. 2120
SZ	Sandoz Australia Pty Ltd 54 Waterloo Road, North Ryde, N.S.W. 2113	WR	A. A. Wright Pty Ltd 84 The Esplanade, Frenchs Forest, N.S.W. 2086
TO	R. D. Toppin & Sons Pty Ltd 9-15 Chilvers Road, Thornleigh, N.S.W. 2120	WW	Wm. R. Warner 32 Cawarra Road, Caringbah, N.S.W. 2229
TV	Travenol Laboratories Pty Ltd Oakes Road, Old Toongabbie, N.S.W. 2146	WY	Wyeth Pharmaceuticals Pty Ltd Gregory Place, Parramatta, N.S.W. 2150
UP	Upjohn Pty Ltd 55-73 Kirby Street, Rydalmere, N.S.W. 2116	ZR	Zero Chemicals (Aust.) Pty Ltd 17 Carlyle Road, East Lindfield, N.S.W. 2070
US	USV Pharmaceuticals 172-178 Princes Highway, Arncliffe, N.S.W. 2205	ZY	Zyma Pharmaceuticals 14 Orion Road, Lane Cove, N.S.W. 2066
UW	United Works of Pharmaceutical and Dietetic Products, Hungary Australian Distributor, Boucher and Muir Pty Ltd		

EMERGENCY DRUG (DOCTOR'S BAG) SUPPLIES

<i>Code</i>	<i>Name of Pharmaceutical Benefit</i>	<i>Strength and Volume</i>	<i>Form</i>	<i>Maximum Quantity</i>
1016L	Adrenaline Injection BP	1mg in 1mL	Ampoule	5
1038P	Aminophylline injection I.V.	250mg in 10mL	Ampoule	5
1089H	Atropine sulphate injection	600 micrograms in 1mL	Ampoule	5
1195X	Chlorpromazine Injection BP	50mg in 2mL	Ampoule	10
2558P	Diazepam injection	10mg in 2mL	Ampoule	5
1321M	Digoxin Injection BP	500 micrograms in 2mL	Ampoule	5
1378M	Ergometrine maleate injection	250 micrograms in 1mL	Ampoule	5
1395K	Erythromycin ethylsuccinate injection	100mg (base) in 2mL	Ampoule	5
2413B	Frusemide injection	20mg in 2mL	Ampoule	5
3040B	Glucose injection	50%, 10mL	Ampoule	5
1467F	Heparin Sodium Injection BP	5 000 units in 1mL	Ampoule	1
or	or			
1468G	Heparin Sodium Injection BP	25 000 units in 5mL	Ampoule	1
1501B	Hydrocortisone sodium succinate injection	Equivalent to 100mg hydrocortisone and 2mL solvent	Injection Set	2 sets
or	or			
3096Y	Hydrocortisone sodium succinate injection	Equivalent to 250mg hydrocortisone and solvent	Injection Set	1 set
or	or			
2509C	Dexamethasone sodium phosphate injection	Equivalent to 4mg dexamethasone phosphate in 1mL	Ampoule	5
2875H	Lignocaine injection	100mg in 5mL	Ampoule	4
or	or			
2861N	Lignocaine injection I.M.	300mg in 3mL	Disposable syringe pack	1
1645N	Morphine sulphate injection	15mg in 1mL	Ampoule	5
or	or			
1647Q	Morphine sulphate injection	30mg in 1mL	Ampoule	5
1661K	Morphine sulphate with atropine sulphate injection	15mg-600 micrograms in 1mL	Ampoule	5
1829G	Pethidine Injection BP	100mg in 2mL	Ampoule	5
1794K	Procaine Penicillin Injection BP	1.5g	Disposable syringe pack	10
1206L	Metoclopramide hydrochloride injection	10mg in 2mL	Ampoule	10
or	or			
2369Q	Prochlorperazine injection	12.5mg in 1mL	Ampoule	10
or	or			
2368P	Thiethylperazine injection	6.5mg (base) in 1mL	Ampoule	10
1948M	Promethazine injection	50mg in 2mL	Ampoule	10
1239F	Terbutaline sulphate injection	100 micrograms in 1mL	Ampoule	5
or	or			
1034K	Terbutaline sulphate injection	500 micrograms in 1mL	Ampoule	5
2127Y	Tetanus vaccine, adsorbed	0.5mL	Ampoule	10
1060T	Verapamil Hydrochloride Injection BP	5mg in 2mL	Ampoule	5

NOTE: Only those brands of benefits listed in section 2 (white pages) may be ordered on a Doctor's Bag Order Form.

SCHEDULE OF BENEFITS

SECTION 2

RESTRICTED BENEFITS

All restricted items are printed in red.

A straight line is drawn between entries for different forms and strengths of an item to indicate clearly the different restrictions which apply to these various forms and strengths.

The maximum quantity and/or number of repeats in respect of an item shown in the Schedule may be varied by the Director of Health when issuing an authority prescription (Form PB86) or an authority to prescribe (Form PB15). The quantity and number of repeats shown on the authority shall be supplied. Payment will be made on the basis of the price shown for that item in the Schedule. (See paragraphs 27 and 66 of Section 1 - Explanatory Notes (lemon pages).)

SYMBOLS USED IN THE SCHEDULE

An asterisk (*) against the price of a benefit indicates that the manufacturer's pack does not coincide with the maximum quantity.

A double dagger (‡) in the maximum quantity column indicates an item for which the maximum quantity has been specially determined to correspond to the manufacturer's pack and the manufacturer's standard pack should be supplied.

A gauge sign (#) against the price of an item indicates that the product is not preconstituted and that a special professional fee of \$3.09 is included in the dispensed price.

Where a STATE is indicated after a manufacturer's code, that brand may be available only in the State indicated.
N.S.W. - (N); Vic. - (V); Qld. - (Q); S.A. - (S);
W.A. - (W); Tas. - (T).

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	ACETAZOLAMIDE			\$		
1004W	Tablet 250mg	50	6	8.16	Diamox	LE
2376C	Capsule 500mg (sustained release)	50	3	14.66	Diamox	LE
1005X	Injection 500mg (solvent required)	1	..	8.64	Diamox	LE
	ACETYLCYSTEINE					
	To be endorsed "S.P."					
2630K	Solution 20%, 10mL	5	3	27.86	Mucomyst	MJ
	ADRENALINE					
2434D	Eye Drops 0.5%, 7.5mL	≠1	6	5.54	Epinal Eppy/N	AQ BF
3031M	0.5%, 10mL	≠1	6	5.69	Epifrin	AG
1014J	1%, 7.5mL	≠1	6	5.89	Epinal Eppy/N	AQ BF
2955M	1%, 10mL	≠1	6	6.02	Epifrin Glaucan	AG AQ
1021R	2%, 7.5mL	≠1	6	7.36	Eppy/N	BF
1015K	2%, 10mL	≠1	6	9.32	Epifrin Glaucan	AG AQ
1016L	Injection BP 1mg in 1mL (1 in 1,000)	5	1	3.97	BL,SI	
	ALLOPURINOL					
2600W	Tablet 100mg	100	5	7.13 7.19	Alinol Progout Zyloprim	US PT BW
2604C	300mg	30	5	6.92 6.98	Alinol Progout Zyloprim	US PT BW
2601X	Capsule 100mg	100	5	7.13	Capurate-100	FM
2603B	300mg	30	5	6.92	Capurate-300	FM
	ALOXIPRIN					
2765M	Tablet 600mg	100	2	4.93	Palaprin Forte	NS
	ALPRENOLOL					
2991K	Tablet 100mg	100	2	9.92	Aptin Betacard	AP BR
	ALUMINIUM HYDROXIDE					
2153H	Mixture 320mg per 5mL, 500mL	≠1	4	4.81	Alusorb Amphojel Gelox	DH WY PR
	ALUMINIUM HYDROXIDE DRIED					
1026B	Tablet 300mg	100	2	4.46	Actal Amphotabs	WL WY

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
2552H	ALUMINIUM HYDROXIDE with KAOLIN Mixture 137mg-1g per 5mL, 375mL	≠1	2	\$ 4.39	Kaogel Kaomagma	FA WY
1029E	ALUMINIUM HYDROXIDE with MAGNESIUM HYDROXIDE Tablet 300mg-90mg	100	2	4.46	Aludrox	WY
2576N	200mg-200mg	100	2	4.46	Mylanta	PD
2155K	Mixture 300mg-100mg per 5mL, 500mL	≠1	4	4.81	Aludrox	WY
2156L	Suspension 215mg-80mg per 5mL, 500mL	≠1	4	4.81	Simeco	WY
2157M	200mg-200mg per 5mL, 500mL	≠1	4	4.81	Alucone Gelusil Mylanta Sodexol	DH WW PD SC
2158N	ALUMINIUM HYDROXIDE with MAGNESIUM HYDROXIDE and OXETHAZAINE Suspension 306mg-97.5mg-10mg per 5mL, 500mL	≠1	4	4.81	Mucaine	WY
1032H	ALUMINIUM HYDROXIDE with MAGNESIUM TRISILICATE and MAGNESIUM HYDROXIDE Tablet 250mg-120mg-120mg	100	2	4.46	Gastrogel	FM
2159P	Mixture 250mg-120mg-120mg per 5mL, 500mL	≠1	4	4.81	Gastrogel	FM
1033J	ALUMINIUM HYDROXIDE and MAGNESIUM CARBONATE CO-DRIED GEL Tablet 375mg	100	2	4.46	Almacarb Simeco	GL WY
2577P	ALUMINIUM SODIUM SILICATE Powder 100g	≠1	2	4.46	Neutralon	SC
3016R	AMANTADINE HYDROCHLORIDE To be endorsed "S.P."					
	Capsule 100mg	100	5	21.94 22.02	Antadine Symmetrel	DT CG
2934K	AMBENONIUM CHLORIDE Tablet 10mg	100	2	11.02	Mytelase	WL
3109P	AMILORIDE Tablet 5mg	50	2	5.14	Midamor	MK
1035L	AMINACRINE HYDROCHLORIDE Eye Drops 3mg in 15mL	≠1	2	4.33	Aminopt	SI
3073R	AMINO ACID FORMULA with VITAMINS and MINERALS without PHENYLALANINE To be endorsed "S.P."					
	Powder 200g	5	5	*143.18	Maxamaid XP	SJ

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	AMINO ACID FORMULA without PHENYLALANINE To be endorsed "S.P."			\$	
3071P	Powder 250g	2	5	*160.93	PK AID I SJ
3072Q	250g	2	5	*196.73	PK AID II SJ
1450H	Food Supplement Powder 500g	#1	5	125.41	Aminogran F.S. GL
	AMINOCAPROIC ACID To be endorsed "S.P."				
2486W	Oral Solution 250mg per mL, 20mL	10	..	19.21	Ekaprol DF
2483Q	Injection I.V. 250mg per mL, 10mL	10	..	11.02	Ekaprol DF
	AMINOPHYLLINE				
1039Q	Tablet 100mg	100	2	4.16	Cardophyllin HA
1040R	Oral Liquid 105mg per 5mL, 500mL	#1	4	4.93	Somophyllin FC
1038P	Injection I.V. 250mg in 10mL	5	..	5.28	BT,SI
1037N	I.M. 500mg in 2mL	5	..	4.99	AB
1152P	Suppositories 100mg, 12	#1	1	4.52	Cardophyllin HA
1041T	175mg, 12	#1	1	4.52	Cardophyllin HA
1042W	250mg, 12	#1	1	4.52	Cardophyllin HA
1043X	400mg, 12	#1	1	4.52	Cardophyllin HA
	AMIODARONE HYDROCHLORIDE To be accompanied by an authority from the Director of Health.				
2343H	Tablet 200mg	30	..	31.71	Cordarone X 200 RC
	AMITRIPTYLINE				
2417F	Tablet 10mg	50	2	3.61 3.67	Amitrip Laroxyl Tryptanol PT RO MK
2418G	25mg	50	2	4.26 4.32	Amitrip Laroxyl Saroten Tryptanol PT RO NS MK
	AMMONIUM CHLORIDE				
1044Y	Tablet 500mg	100	3	5.14	FM
	AMOXYCILLIN To be endorsed "S.P."				
1885F	Dispersible Tablet 3g	1	..	4.79	Amoxil Moxacin BR CS
	(continued)				

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	AMOXYCILLIN - cont.			\$		
1883D	Tablet 250mg	20	..	6.04	Amoxil	BR
1884E	Capsule 250mg	20	..	6.04	Amoxil Moxacin	BR CS
1886G	Powder for Syrup 125mg per 5mL, 100mL	#1	1	#6.74	Amoxil Moxacin	BR CS
	AMPHOTERICIN					
2930F	Tablet 100mg	50	..	9.44	Fungilin	SQ
2931G	Lozenge 10mg	20	1	4.33	Fungilin	SQ
2932H	Suspension 100mg per mL, 24mL	#1	1	5.14	Fungilin	SQ
1047D	Injection 50mg (solvent required)	1	..	6.84	Fungizone	SQ
2927C	Cream 3%, 15g	#1	1	4.59	Fungilin	SQ
2929E	Ointment 3%, 15g	#1	1	4.59	Fungilin	SQ
	AMPICILLIN					
1048E	Capsule 250mg	25	..	5.48 5.54	Ampicyn Austrapen Penbritin	PT CS BR
2671N	500mg	12	1	5.22 5.28	Ampicyn Austrapen Penbritin	PT CS BR
3061D	Powder for Syrup 125mg per 5mL, 100mL	#1	..	#5.59 #5.66	Ampicyn Austrapen Penbritin	PT CS BR
3123J	250mg per 5mL, 100mL	#1	..	#6.83 #6.89	Ampicyn Austrapen Forte Penbritin Forte	PT CS BR
2389R	Injection 250mg (solvent required)	5	1	6.59 6.66	Ampicyn Austrapen	PT CS
2390T	500mg (solvent required)	5	1	8.62 8.69	Ampicyn Austrapen	PT CS
2977Q	1g (solvent required)	5	1	12.72 12.79	Ampicyn Austrapen	PT CS
	AMYLOBARBITONE SODIUM					
1059R	Injection 500mg (solvent required)	2	..	*7.35	Amytal Sodium	LY
	ANTAZOLINE with NAPHAZOLINE					
1075N	Eye Drops 10mL	#1	2	4.26	Antistine-Privine	ZY
	ANTIVENOM - RED BACK SPIDER					
1980F	Injection 500 Units	2	..	*66.31	CS	
	ASCORBIC ACID					
1078R	Tablet 50mg	100	2	3.77	Ascorb "50" DH,FM	PT

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
1008C	ASPIRIN Tablet 300mg	100	2	\$ 3.92	SI
1010E	300mg (dispersible)	100	2	3.98	Solprin FM RC
3110Q	325mg (buffered)	100	2	4.42	Bufferin BC
1230R	650mg (enteric coated)	100	2	5.54	Ecotrin Rhusal SK GP
1231T	650mg (sustained release)	100	2	4.93	S.R.A. BT
2968F	650mg (includes 350mg sustained release)	100	2	4.67	Bi-Prin BT
	ATENOLOL To be endorsed "S.P."				
1081X	Tablet 50mg	30	2	9.98	Tenormin IC
1084C	ATROPINE METHONITRATE Tablet 1mg	50	2	5.96	Eumydrin WL
1083B	Oral Solution 0.6%, 15mL	≠1	..	5.22	Eumydrin WL
2704H	ATROPINE SULPHATE Tablet 600 micrograms	100	2	4.24	FM
1089H	Injection 600 micrograms in 1mL	5	1	3.92	BL,BT
1091K	1.2mg in 1mL	5	1	3.94 3.96	BT BL
1092L	Eye Drops 0.5%, 15mL	≠1	2	4.39	Atropt SI
1093M	1%, 15mL	≠1	2	4.46	Atropt SI
1094N	Eye Ointment 1%, 4g	≠1	..	5.89	PD
2021J	AUROTHIOGLUCOSE Injection 50mg per mL, 10mL	1	..	61.76	Gold-50 SH
1251W	AZATADINE MALEATE Tablet 1mg	50	2	4.46	Zadine SH
1252X	Syrup 500 micrograms per 5mL, 100mL	≠1	4	3.84	Zadine SH
	AZATHIOPRINE To be accompanied by an authority from the Director of Health.				
2687K	Tablet 50mg	100	..	56.31	Imuran BW
	BACLOFEN To be endorsed "S.P."				
2729P	Tablet 10mg	100	5	27.88	Lioresal CG
2730Q	25mg	100	5	51.24	Lioresal CG

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	BASSORIN with FRANGULA BARK To be endorsed "S.P."			\$	
1102B	Granules 47.3%-8.3%, 250g	≠1	2	6.39	Granocol SC
	BECLOMETHASONE DIPROPIONATE To be endorsed "S.P."				
1649T	Capsule 100 micrograms (Oral Inhalation)	100	2	11.58	Becotide Rotacaps GL
1650W	Inhalation, metered aerosol spray 50 micrograms per dose (200 dose)	≠1	2	9.92	Aldecin Becotide SH GL
	BELLADONNA ALKALOIDS Hyoscyamine Hydrobromide, Atropine Sulphate and Hyoscine Hydrobromide				
2705J	Tablet 101.1 micrograms-14.8 micrograms-10.7 micrograms	100	2	4.16	Atrobel FM
2706K	Tablet 151.6 micrograms-22.2 micrograms-16.0 micrograms	100	2	4.26	Atrobel FORTE FM
	Hyoscyamine Sulphate, Atropine Sulphate and Hyoscine Hydrobromide				
2916L	Tablet 103.7 micrograms-19.4 micrograms-6.5 micrograms	100	2	4.16	Donnatab RS
	BENDROFLUAZIDE				
1105E	Tablet 2.5mg	50	2	4.06 4.12	Benzide M PT Aprinox-M BT
1106F	5mg	50	2	4.93 4.99	Benzide PT Aprinox BT
	BENZALKONIUM CHLORIDE				
1108H	Solution 10%, 125mL	≠1	..	4.52	Zephiran Concentrated WL
	BENZATHINE PENICILLIN COMPOUND Benzathine Penicillin 450mg; Procaine Penicillin 300mg; Benzylpenicillin Potassium 187mg.				
1767B	Injection set containing 1 vial and 2mL water for injections	1	..	4.73	Bicillin All-Purpose WY
	BENZHEXOL				
1109J	Tablet 2mg	100	2	5.14 5.22	Anti-Spas PT Artane LE
1110K	5mg	100	2	6.47 6.49	Anti-Spas PT Artane LE
	BENZOCAINE with ADRENALINE				
1111L	Compound Ointment 50g	≠1	1	4.39	Rectinol GP
1112M	Compound Suppositories, 12	≠1	1	4.39	Rectinol GP

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1630T	BENZOYL METRONIDAZOLE Suspension 6.4% (equivalent to 200mg metronidazole in 5mL), 100mL	≠1	..	\$ 7.62	Flagyl S	MB
2362H	BENZTROPINE Tablet 2mg	30	2	*4.46	Cogentin	MK
3038X	Injection 2mg in 2mL	5	..	9.32	Cogentin	MK
1114P	BENZYL BENZOATE Application 25% w/v, 200mL	≠1	2	4.79 4.87	Benzemul Ascabiol	MG MB
1774J	BENZYL PENICILLIN Injection 300mg (solvent required)	5	1	5.62	CS	
1775K	600mg (solvent required)	5	1	5.76	Crystapen CS	GL
2647H	3g (solvent required)	10	..	*24.61	Crystapen CS	GL
2648J	6g (solvent required)	10	..	*32.93	CS	
1117T	BETAMETHASONE Tablet 500 micrograms	30	2	3.97	Celestone	SH
2694T	BETAMETHASONE ACETATE with BETAMETHASONE SODIUM PHOSPHATE To be endorsed "S.P." Injection 3mg-3.9mg (equivalent to 5.7mg betamethasone) in 1mL	5	..	12.04	Celestone Chronodose	SH
1115Q	BETAMETHASONE DIPROPIONATE Cream 0.05%, 15g	≠1	1	3.79	Diprosone	SH
1119X	Ointment 0.05%, 15g	≠1	1	3.79	Diprosone	SH
2812B	BETAMETHASONE VALERATE Cream 0.02%, 100g	≠1	..	4.73	Betnovate 1/5 Celestone-M	GL SH
2813C	0.05%, 15g	≠1	1	3.79	Betnovate 1/2 Celestone-V Half Strength	GL SH
2814D	Gel 0.05%, 15g	≠1	1	3.79	Betnovate 1/2	GL
2820K	Ointment 0.02%, 100g	≠1	..	4.73	Celestone-M	SH
2815E	0.05%, 15g	≠1	1	3.79	Betnovate 1/2 Celestone-V Half Strength	GL SH
1062X	BETHANECHOL Tablet 10mg	50	1	5.66	Urecholine Uro-Carb	MK HA
1071J	Injection 5mg in 1mL	2	..	*4.81	Urecholine	MK
2544X	BIPERIDEN Tablet 2mg (continued)	100	2	8.01	Akineton	KN

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
2543W	BIPERIDEN - cont. Injection 5mg in 1mL BISACODYL To be endorsed "S.P."	5	..	\$ 4.99	Akineton	KN
1259G	Tablet 5mg	100	2	4.61	Bisalax	PT
1260H	Suppositories 10mg, 10 BROMOCRIPTINE MESYLATE To be accompanied by an authority from the Director of Health.	≠1	..	4.94	Durolax	BY
1443Y	Tablet 2.5mg	60	..	31.11	Parlodel	SZ
1445C	Capsule 10mg	100	..	182.87	Parlodel	SZ
2516K	BROMPHENIRAMINE Tablet 4mg	50	2	4.16	Dimetane	RS
2602Y	Syrup 2mg per 5mL, 100mL	≠1	4	3.84	Dimetane	RS
1130L	BUMETANIDE Tablet 1mg	50	2	4.93	Burinex	AP
1128J	BUSULPHAN Tablet 2mg	100	..	24.53	Myleran	BW
2502Q	CALCITRIOL To be accompanied by an authority from the Director of Health. Capsule 0.25 micrograms	100	..	43.44	Rocaltrol	RO
3122H	CALCIUM To be accompanied by an authority from the Director of Health. Compound Effervescent Tablet equivalent to 1g (25mmol)Ca ²⁺ NOTE: Each 'Sandocal 1000' tablet also contains 18mmol Na ⁺	30	5	8.43	Sandocal 1000	SZ
2308L	CALCIUM FOLINATE To be accompanied by an authority from the Director of Health. Tablet 15mg	10	..	104.73	Leucovorin	LE
2309M	To be endorsed "S.P." Injection 3mg in 1mL	5	..	16.19	BL	
1146H	CALCIUM GLUCONATE Injection 10%, 10mL	5	1	7.19	Calcium-Sandoz	SZ
1151N	CAMPBOR COMPOUND Linctus 0.06% camphor, 100mL	≠1	2	3.84 3.87 3.91 3.98	MG Campholinct SI NN,TO PR,QE(NQ)	DH

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	CAPTOPRIL To be accompanied by an authority from the Director of Health.			\$	
1148K	Tablet 25mg	90	..	36.83	Capoten SQ
1149L	50mg	90	..	61.17	Capoten SQ
	CARBACHOL				
2534J	Eye Drops 0.75%, 15mL	≠1	6	4.81	AQ
2535K	1.5%, 15mL	≠1	6	4.87	AQ
2536L	3%, 15mL	≠1	6	4.99	AQ
	CARBAMAZEPINE				
2422L	Tablet 100mg	200	2	11.62	Tegretol CG
2419H	200mg	200	2	19.49 19.56	Convuline PT Tegretol CG
	CARBENICILLIN To be endorsed "S.P."				
2818H	Injection 1g (solvent required)	5	..	21.67	Carbapen CS
2819J	5g (solvent required)	6	..	104.64	Carbapen CS
	CARBIMAZOLE				
1153Q	Tablet 5mg	100	2	5.22	Neo-Mercazole NS
	CARINDACILLIN To be accompanied by an authority from the Director of Health.				
1057P	Tablet (equivalent to 382mg carbenicillin)	40	..	27.92	Geopen Oral PF
	CEPHALEXIN To be accompanied by an authority from the Director of Health.				
3058Y	Capsule 250mg	25	..	13.14	Keflex LY
3119E	500mg	12	..	12.74	Keflex LY
3094W	Granules for Syrup 125mg per 5mL, 100mL	≠1	..	#9.36	Keflex LY
3095X	250mg per 5mL, 100mL	≠1	..	#13.79	Keflex LY
	CEPHALOTHIN SODIUM To be endorsed "S.P."				
2964B	Injection 1g (solvent required)	5	..	*25.03	Ceporacin GL Keflin Neutral LY
1135R	2g (solvent required)	1	..	11.54	Keflin Neutral LY
1136T	4g (solvent required)	1	..	19.93	Keflin Neutral LY

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	CEPHAZOLIN SODIUM To be endorsed "S.P."			\$		
1256D	Injection 500mg (solvent required)	5	..	*23.03	Kefzol	LY
1257E	1g (solvent required)	5	..	*41.83	Kefzol	LY
	CEPHRADINE To be accompanied by an authority from the Director of Health.					
1653B	Capsule 250mg	25	..	13.16	Velosef	SQ
1654C	500mg	12	..	12.74	Velosef	SQ
1655D	Powder for Syrup 125mg per 5mL, 100mL	≠1	..	#9.36	Velosef	SQ
1656E	250mg per 5mL, 100mL	≠1	..	#13.79	Velosef	SQ
	To be endorsed "S.P."					
1895R	Injection 500mg (solvent required)	5	..	18.59	Velosef	SQ
1896T	1g (solvent required)	5	..	32.94	Velosef	SQ
	CHLORAL HYDRATE					
2935L	Capsule 500mg	50	..	4.46	Noctec	SQ
2869B	Mixture 250mg per 5mL, 500mL	≠1	4	4.52	Dormel	DH
2713T	1g per 10mL, 200mL	≠1	4	4.26	Chloralix Elix-Nocte Forte Noctec Syrup	RK NN SQ
	CHLORAMBUCIL To be accompanied by an authority from the Director of Health.					
1163F	Tablet 2mg	100	..	*49.37	Leukeran	BW
1164G	5mg	100	..	*59.65	Leukeran	BW
	CHLORAMPHENICOL To be endorsed "S.P."					
1174T	Capsule 250mg	16	..	5.28	Chloromycetin	PD
2693R	Paediatric Suspension 125mg per 5mL, 100mL	≠1	..	5.42	Chloromycetin Palmitate	PD
1167K	Injection 1g (solvent required)	3	..	*16.86	Chloromycetin Succinate	PD
	(continued)					

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1172Q	CHLORAMPHENICOL - cont. Ear Drops (aqueous) 0.5%, 5mL	≠1	2	\$ 4.33	Chloromycetin	PD
2360F	Eye Drops 0.5%, 10mL	≠1	2	4.33	Chlomin Chloromycetin Chloroptic Chlorsig	US PD AG SI
1171P	Eye Ointment 1%, 4g	≠1	..	4.06	Chlomin Chloromycetin Chlorsig	US PD SI
1181E	CHLORAMPHENICOL with POLYMYXIN B Eye Drops 5mg-5,000 Units per mL, 10mL	≠1	2	4.33	Chloromycin	PD
1177Y	Eye Ointment 1%-5,000 Units per g, 4g	≠1	..	4.06	Chloromycin	PD
1066D	CHLORHEXIDINE Solution 5%, 200mL	≠1	1	5.14	Hibitane Concentrate	IC
1410F	CHLORMETHIAZOLE To be accompanied by an authority from the Director of Health. Capsule 192mg	50	..	8.29	Hemineurin	AP
1409E	Solution 0.8% for I.V. Infusion, 500mL	1	..	14.08	Hemineurin	AP
1184H	CHLOROQUINE Tablet equivalent to 150mg (approx.) Chloroquine base	100	..	6.43 6.49	Chlorquin Nivaquine	PT MB
1185J	Injection 40mg per mL, 5mL	5	1	*7.18	Nivaquine	MB
1187L	CHLOROTHIAZIDE Tablet 500mg	50	2	5.14 5.23	Diuret Azide Chlotride Diurone	PT FM FR US
1190P	CHLORPHENIRAMINE Tablet 4mg	50	2	4.31 4.33	Allergex Chloramin Piriton	PT LF GL
1196Y	CHLORPROMAZINE To be endorsed "S.P." Tablet 10mg	100	1	4.17 4.18	Protran Largactil	PT MB
1197B	25mg	100	1	4.31 4.33	Protran Largactil	PT MB
1198C	50mg	100	1	5.28	Largactil Protran	MB PT
	(continued)					

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1199D	CHLORPROMAZINE - cont. Tablet 100mg	100	1	\$ 7.32	Largactil Protran	MB PT
1201F	Mixture 25mg per 5mL, 100mL	≠1	4	4.06	Largactil Promacid	MB US
1194W	Injection BP, 25mg in 1mL	10	..	5.54	Largactil	MB
1195X	50mg in 2mL	10	..	5.69	Largactil	MB
1200E	Suppositories 100mg, 5	≠1	1	4.33	Largactil	MB
1202G	CHLORPROPAMIDE Tablet 250mg	100	2	8.07 8.14	Promide Diabinese	PT PF
1072K	CHLORTETRACYCLINE Cream 3%, 15g	≠1	..	4.16	Aureomycin	LE
1055M	Ointment 3%, 15g	≠1	..	4.16	Aureomycin	LE
1585K	CHLORTHALIDONE Tablet 25mg	50	2	4.52 4.59	Urid Hygroton	PT CG
3021B	CHOLERA VACCINE Injection 1mL	2	..	*5.75	CS	
2967E	CHOLESTYRAMINE To be accompanied by an authority from the Director of Health. Powder, 9g sachet (equivalent to 4g cholestyramine), 50	2	..	*45.81	Questran	MJ
2788R	CHOLINE THEOPHYLLINATE Tablet 100mg	100	2	4.99	Choledyl	WW
2789T	200mg	100	2	5.39	Brondecon-PD Choledyl	PD WW
2786P	Elixir 50mg per 5mL, 500mL	≠1	4	4.67	Brondecon Elixir-PD	PD
2787Q	Syrup 50mg per 5mL, 500mL	≠1	4	4.67	Choledyl	WW
2866W	CHOLINE THEOPHYLLINATE with GUAIPHENESIN Tablet 200mg-100mg	100	2	5.54	Brondecon	WW
2867X	Elixir 50mg-25mg per 5mL, 500mL	≠1	4	4.81	Brondecon	WW
1157X	CIMETIDINE To be accompanied by an authority from the Director of Health. Tablet 200mg	120	..	40.67	Duractin Tagamet	CS SK
1158Y	400mg	60	..	40.67	Duractin Tagamet	CS SK

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	CLINDAMYCIN To be endorsed "S.P."			\$		
3137D	Capsule 75mg	25	..	6.33	Dalacin C	UP
3138E	150mg	25	..	9.44	Dalacin C	UP
3139F	Granules for Syrup 75mg per 5mL, 100mL	≠1	..	#8.66	Dalacin C	UP
3030L	CLIOQUINOL Cream 1%, 30g	≠1	..	4.12	Vioform	CG
	CLOFIBRATE To be accompanied by an authority from the Director of Health.					
2892F	Capsule 500mg	100	..	11.49 11.56	Arterioflexin Atromid-S	PT IC
	CLONAZEPAM					
1805B	Tablet 500 micrograms	200	2	9.57	Rivotril	RO
1806C	2mg	200	2	14.22	Rivotril	RO
1808E	Paediatric Drops 2.5mg in 1mL, 10mL	≠1	1	4.52	Rivotril	RO
1807D	Injection 1mg in 2mL (set containing solution 1mg in 1mL and 1mL diluent)	5	..	5.43	Rivotril	RO
	CLONIDINE					
3141H	Tablet 150 micrograms	100	2	10.06	Catapres	BY
3142J	Injection 150 micrograms in 1mL	5	..	5.89	Catapres	BY
	CLOPAMIDE					
2399G	Tablet 20mg	50	2	5.69	Brinaldix	SZ
	CLOREXOLONE					
2880N	Tablet 10mg	50	2	4.52	Nefrolan	MB
2297X	25mg	50	2	4.93	Nefrolan	MB
	CLOTRIMAZOLE					
1017M	Cream 1%, 20g	≠1	1	5.53 5.54	Lotremin Canesten	SH BN
1027C	Lotion 1%, 20mL	≠1	1	5.54	Canesten	BN
1018N	Pessaries 100mg, 6	≠1	..	6.27 6.29	Gyne-Lotremin Canesten	SH BN
1020Q	Pessary 500mg	1	..	6.29	Canesten 1	BN
1019P	Vaginal Cream 1%, 35g	≠1	..	6.23 6.24	Gyne-Lotremin Canesten	SH BN
1006Y	2%, 20g	≠1	..	6.24	Canesten 3	BN

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	CLOXACILLIN To be accompanied by an authority from the Director of Health.			\$	
2300C	Capsule 250mg	25	..	10.81	Austrastaph Orbenin CS BR
1120Y	500mg	12	..	10.51	Austrastaph Orbenin CS BR
2936M	Powder for Syrup 125mg per 5mL, 100mL	≠1	..	#9.09	Austrastaph Orbenin CS BR
	CLOXACILLIN				
2299B	Injection 250mg (solvent required)	5	..	9.32	Austrastaph Orbenin CS BR
2301D	500mg (solvent required)	5	..	13.34	Austrastaph Orbenin CS BR
1420R	1g (solvent required)	5	..	20.91	Austrastaph Orbenin CS BR
1214X	CODEINE PHOSPHATE Tablet 30mg	25	..	5.94	Codate DH,FA,FM US
1213W	Linctus 0.5%, 100mL	≠1	2	4.44 4.47 4.51 4.52	MG Codelix Codlin Actacode PR,QE(NQ) DH NN SI
	CODEINE PHOSPHATE with ASPIRIN To be accompanied by an authority from the Director of Health.				
1222H	Tablet 30mg-325mg	100	..	*9.85	Codral Forte BW
	CODEINE PHOSPHATE with ASPIRIN				
1218D	Tablet Soluble 8mg-300mg	50	2	4.06	Aspalgin FM
1219E	8mg-500mg	50	2	4.06	Solcode RC
1223J	CODEINE PHOSPHATE with PARACETAMOL Tablet 8mg-500mg	50	1	4.13	Codalgin Dymadon Co. Panamax Co. FM BW WL
	COLCHICINE				
1227N	Tablet 500 micrograms	100	2	5.26 5.32	Colgout DH,PR,RT PT Coluric NN
	COLESTIPOL HYDROCHLORIDE To be accompanied by an authority from the Director of Health.				
1224K	Sachets 5g, 120	≠1	..	36.83	Colestid UP

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	COLISTIN To be endorsed "S.P."			\$		
2621Y	Injection 150mg (solvent required)	5	..	*71.78	Coly-Mycin	WW
2756C	COLISTIN with NEOMYCIN Ear Drops 3mg-3.3mg per mL, 10mL	#1	2	4.18	Coly-Mycin	WW
1228P	COPPER SULPHATE Diagnostic Compound Tablets, 36	2	3	*4.95	Clinitest	AM
1246N	CORTISONE ACETATE Tablet 5mg	50	1	4.52	Cortate	PT
1247P	25mg	30	2	5.54	Cortate	PT
	CYANOCOBALAMIN To be endorsed "S.P."					
1258F	Injection 100 micrograms in 1mL	5	1	5.01	Cytamen 100	GL
1262K	1mg in 1mL	5	..	5.37	Cytamen 1000	GL
1264M	CYCLOPENTHIAZIDE Tablet 500 micrograms	50	2	4.99	Navidrex	CG
1269T	CYPROHEPTADINE Tablet 4mg	50	2	4.38	Periactin	FR
	CYPROHEPTADINE To be endorsed "S.P."					
1798P	Tablet 4mg	100	2	*6.63	Periactin	FR
2910E	CYTARABINE Injection set containing 100mg and 5mL solvent	10	1	*84.93	Cytosar-U	UP
	DANAZOL To be accompanied by an authority from the Director of Health.					
1287R	Capsule 200mg	100	..	125.68	Danocrine	WL
	DANTROLENE SODIUM To be accompanied by an authority from the Director of Health.					
1779P	Capsule 25mg	100	..	20.82	Dantrium	NW
1780Q	50mg	100	..	31.38	Dantrium	NW
1272Y	DAPSONE Tablet 100mg	100	2	5.14	Avlosulfon	IC
2740F	DEBRISOQUINE Tablet 10mg	100	2	7.11 7.17	Redu-Press M Declinax	PT RO
2741G	20mg	100	2	8.82 8.88	Redu-Press Declinax	PT RO

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	DEMECLOCYCLINE HYDROCHLORIDE To be accompanied by an authority from the Director of Health.			\$	
2854F	Capsule 150mg	100	..	20.13	Ledermycin LE
2972K	DESIPRAMINE Tablet 25mg	50	2	5.83	Pertofran CG
2129C	DESMOPRESSIN Nasal Solution 100 micrograms per mL, 2.5mL	5	2	*124.03	Minirin PT
2508B	DEXAMETHASONE To be endorsed "S.P." Injection 120mg in 5mL	1	..	34.16	Decadron Shock Pak MK
1292B	DEXAMETHASONE Tablet 500 micrograms	30	2	4.39 4.46	Dexamethsone PT Oradexon OR
2507Y	4mg	30	1	8.97	Dexamethsone PT
2509C	Injection 4mg in 1mL	5	..	10.33	Decadron MK
1290X	5mg in 1mL	5	..	13.06	Oradexon OR
1291Y	8mg in 2mL	5	..	15.79	Decadron MK
1288T	Eye Drops 0.1%, 5mL	≠1	2	5.08	Maxidex AQ
2781J	DEXAMETHASONE with FRAMYCETIN and GRAMICIDIN Ear Drops 500 micrograms 5mg- 50 micrograms per mL, 8mL	≠1	2	4.33	Sofradex RL
2759F	Ear Ointment 500 micrograms-5mg- 50 micrograms per g, 5g	≠1	2	4.18	Sofradex RL
1165H	DEXAMPHETAMINE To be accompanied by an authority from the Director of Health. Tablet 5mg	100	..	5.87	SI
1295E	DEXCHLORPHENIRAMINE Tablet 2mg	50	2	4.16	Polaramine SH
	DEXTRAN 40 See Intravenous Infusions				
	DEXTRAN 70 See Intravenous Infusions				

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	DEXTROMORAMIDE To be endorsed "S.P."			\$		
2702F	Tablet 5mg	20	..	5.87	Palfium	FA
2701E	Injection 5mg in 1mL	10	..	*10.76	Palfium	FA
1024X	Suppositories 10mg, 10	≠1	..	11.87	Palfium	FA
	DIAZEPAM					
3161J	Tablet 2mg	50	..	3.92	Ducene Pro-Pam Valium	SU PT RO
3162K	5mg	50	..	4.18 4.26	Ducene Pro-Pam Valium	SU PT RO
2559Q	Paediatric Syrup 2mg per 5mL, 100mL	≠1	..	4.46	Valium	RO
2558P	Injection 10mg in 2mL	5	..	5.06	Valium BL	RO
	DIAZOXIDE					
3068L	Injection 300mg in 20mL	1	..	16.57	Hyperstat I.V.	SH
	DICHLORPHENAMIDE					
1303N	Tablet 50mg	50	6	9.92	Daranide	MK
	DICLOFENAC SODIUM					
1300K	Tablet 50mg (enteric coated)	50	2	7.62	Voltaren 50	CG
	DIENOESTROL					
1310Y	Cream 0.01%, 85g	≠1	1	4.52	ET	
	DIFENOXIN HYDROCHLORIDE with ATROPINE SULPHATE					
2506X	Tablet 500 micrograms-25 micrograms	20	..	4.13	Lyspafen	PT
	DIFLUNISAL					
1319K	Tablet 250mg	50	2	7.62	Dolobid	MK
	DIGOXIN					
2605D	Tablet 62.5 micrograms	100	2	4.39	Lanoxin-PG	BW
1322N	250 micrograms	50	2	3.92	Lanoxin	BW
3164M	Oral Solution for Children 50 micrograms per mL, 100mL	≠1	2	8.13	Lanoxin	BW
1321M	Injection BP, 500 micrograms in 2mL	5	1	9.02	Lanoxin	BW
	DIHYDROCODEINE TARTRATE					
2937N	Linctus 0.19%, 100mL	≠1	2	3.71	Paracodin Rikodeine	KN RK
	DIHYDROERGOTAMINE					
1323P	Injection 1mg in 1mL	5	..	5.83	Dihydergot	SZ

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	DIHYDROTACHYSTEROL To be accompanied by an authority from the Director of Health.			\$	
1483C	Capsule 125 micrograms	100	..	22.48	A.T.10 WL
1331C	DI- IODOHYDROXYQUINOLINE Compound Pessaries 100mg, 25	≠1	1	4.71	Floraquin SR
1333E	DILOXANIDE FUROATE Tablet 500mg	30	..	*10.69	Furamide BT
1334F	DIMERCAPROL Injection 5%, 2mL	12	..	28.74	B.A.L. BT
	DIMETHICONE To be endorsed "S.P."				
2233M	Cream 10%, 50g	≠1	..	3.64	Dermabase-S HA
2618T	10%, 75g	≠1	..	3.98	Silcon FA
	Solution - See Colostomy and Ileostomy				
2517L	DIMETHINDENE Tablet 1mg	50	2	4.16	Fenostil ZY
	DIOCTYL SODIUM SULPHOSUCCINATE with BISACODYL To be endorsed "S.P."				
1125F	Suppositories 100mg-10mg, 5	2	..	*5.19	Coloxyl FM
1336H	DIPHENHYDRAMINE Capsule 50mg	50	2	4.18	Benadryl PD
2780H	Paediatric Elixir 12.5mg per 5mL, 100mL	≠1	4	3.84	Benadryl PD
2501P	DIPHENOXYLATE HYDROCHLORIDE with ATROPINE SULPHATE Tablet 2.5mg-25 micrograms	20	..	4.13	Lomotil SR
1340M	DIPHENYLPYRALINE Tablet 2.5mg	50	2	4.16	Histalert RK
2351R	Paediatric Syrup 2.5mg per 5mL, 100mL	≠1	4	3.84	Histalert RK
1344R	DIPHThERIA ANTITOXIN Injection 10,000 Units	2	1	*50.93	CS
	DIPHThERIA and TETANUS VACCINE, ADSORBED For immunisation of children up to the age of 8 years.				
1341N	Injection 0.5mL	3	..	*7.08	CS

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	DIPHTHERIA and TETANUS VACCINE, ADSORBED, DILUTED FOR ADULT USE For immunisation of adults and children over the age of 8 years.			\$	
3019X	Injection 0.5mL	3	..	*7.08	CS
1346W	DIPHTHERIA, TETANUS and PERTUSSIS VACCINE, ADSORBED Injection 0.5mL	3	..	*7.41	CS, PD
1348Y	DIPHTHERIA VACCINE, ADSORBED For immunisation of children up to the age of 8 years. Injection 0.5mL	2	1	*6.05	CS
3020Y	DIPHTHERIA VACCINE, ADSORBED, DILUTED FOR ADULT USE For immunisation of adults and children over the age of 8 years. Injection 0.5mL	2	..	*5.91	CS
1351D	DIPIVEFRINE HYDROCHLORIDE Eye Drops 0.1%, 10mL	≠1	6	9.07	Propine AG
3140G	DIPYRIDAMOLE To be accompanied by an authority from the Director of Health. Tablet 100mg	100	..	16.33 16.39	Dipramol PT Persantin 100 BY
2923W	DISOPYRAMIDE Capsule 100mg	100	2	17.43	Norpace SR Rythmodan RL
2924X	150mg	100	2	22.42	Norpace SR Rythmodan RL
1022T	DOXEPIN Tablet 10mg	50	2	4.18	Quitaxon RC
1023W	25mg	50	2	5.11	Quitaxon RC
1011F	Capsule 10mg	50	2	4.18	Sinequan PF
1013H	25mg	50	2	5.11	Sinequan PF
2711Q	DOXYCYCLINE To be endorsed "S.P." Tablet 50mg	25	5	7.52	Vibra-Tabs PF
2709N	DOXYCYCLINE Tablet 100mg	7	..	5.28	Vibramycin PF
2708M	Capsule 100mg	7	..	5.22 5.28	Cyclidox PT Doxin GP

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	DYDROGESTERONE To be accompanied by an authority from the Director of Health.			\$		
1350C	Tablet 10mg	50	..	21.26	Duphaston	ET
1364T	ECONAZOLE NITRATE Cream 1%, 20g	#1	1	5.54	Ecostatin Pevaryl	SQ SK
1365W	Lotion 1%, 20mL	#1	1	5.54	Ecostatin Pevaryl	SQ SK
1366X	Pessaries 150mg, 3	#1	..	6.29	Ecostatin Pevaryl	SQ SK
1367Y	Vaginal Cream 1.5%, 35g	#1	..	6.24	Ecostatin	SQ
	ECOTHIOFATE IODIDE Eye Drops					
1359M	0.03%, 1.5mg and 5mL solvent	#1	6	#8.28	Phospholine Iodide	AY
2405N	0.06%, 3mg and 5mL solvent	#1	6	#8.43	Phospholine Iodide	AY
1360N	0.125%, 6.25mg and 5mL solvent	#1	6	#8.55	Phospholine Iodide	AY
1361P	0.25%, 12.5mg and 5mL solvent	#1	6	#8.69	Phospholine Iodide	AY
	ELECTROLYTE REPLACEMENT (ORAL) Powder for Solution, 40g sachet, 6					
2992L	ELECTROLYTE REPLACEMENT SOLUTION See Intravenous Infusions	#1	..	5.19	Repalyte	DH
	EPICILLIN Capsule 250mg					
3069M		25	..	5.82	Dexacillin	SQ
3070N	500mg	12	1	5.52	Dexacillin	SQ
3086K	Powder for Syrup 250mg per 5mL, 100mL	#1	..	#7.03	Dexacillin	SQ
	ERGOCALCIFEROL To be endorsed "S.P."					
2498L	Tablet 250 micrograms	100	2	7.03	Ostelin	GL
2500N	Oral Solution 15mg (600,000 Units) in 1.5mL alcoholic solution	3	2	5.22	Sterogyl-15	RL
	ERGOMETRINE MALEATE Tablet 200 micrograms					
1380P		25	..	4.59	Ergotrate	LY
1378M	Injection 250 micrograms in 1mL	5	..	4.33	BL	
	ERGOTAMINE TARTRATE Tablet 1mg					
1384W		50	2	5.69	Lingraine	WL

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1385X	ERGOTAMINE TARTRATE with CAFFEINE Tablet 1mg-100mg	50	2	\$ 6.43	Cafergot	SZ
1387B	ERGOTAMINE TARTRATE with CAFFEINE and CYCLIZINE HYDROCHLORIDE Tablet 2mg-100mg-50mg	50	2	6.43	Migral	BW
1386Y	ERGOTAMINE TARTRATE with CAFFEINE, ITOBARBITONE and BELLADONNA ALKALOIDS Suppositories 2mg-100mg-100mg-250 micrograms, 6	≠1	2	5.42	Cafergot PB	SZ
1388C	ERGOTAMINE TARTRATE with CAFFEINE CITRATE and DIPHENHYDRAMINE HYDROCHLORIDE Capsule 1mg-100mg-25mg	50	2	6.43	Ergodryl	PD
1399P	ERYTHROMYCIN Tablet 250mg	25	..	5.87	EMU-V	UP
1402T	Capsule 125mg	25	..	4.87	Eryc	FA
1404X	250mg	25	..	5.87	Eryc Ilocap	FA LY
2499M	ERYTHROMYCIN ESTOLATE Paediatric Drops 100mg (base) per mL, 10mL	≠1	..	4.81	Ilosone	LY
2423M	Paediatric Suspension 125mg (base) per 5mL, 100mL	≠1	..	5.13	Eromycin Ilosone	DL LY
2749Q	ERYTHROMYCIN ETHYLSUCCINATE Tablet 200mg (base)	25	..	5.26	EES Dulcet	AB
2424N	Granules for Paediatric Suspension 200mg (base) per 5mL, 100mL	≠1	..	#6.89	EES 200	AB
1395K	Injection I.M. 100mg (base) in 2mL	5	..	9.18	Erythrocin	AB
1396L	ERYTHROMYCIN GLUCEPTATE Infusion I.V. 1g (base)	1	..	14.43	Ilotycin	LY
1398N	ERYTHROMYCIN LACTOBIONATE Infusion I.V. 300mg (base)	5	..	*23.38	Erythrocin	AB
1397M	1g (base)	1	..	14.43	Erythrocin	AB
1401R	ERYTHROMYCIN STEARATE Tablet 250mg (base)	25	..	5.87	Erythrocin	AB
1403W	Capsule 250mg (base)	25	..	5.83 5.87	E-Mycin Erythrocin	PT AB
2425P	Paediatric Suspension 125mg (base) per 5mL, 100mL	≠1	..	5.13	Erythrocin	AB
2610J	Suspension 250mg (base) per 5mL, 100mL	≠1	..	6.99	Erythrocin	AB

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	ETHACRYNIC ACID To be endorsed "S.P."			\$	
2511E	Tablet 50mg	50	2	7.88	Edecril MK
1271X	ETHANOLAMINE OLEATE Injection 5%, 2mL	5	1	8.22	Ethamolin GL
1405Y	ETHINYLOESTRADIOL Tablet 10 micrograms	100	1	4.29	Estigyn GL
1406B	20 micrograms	100	1	4.46	Estigyn GL Primogyn C SC
1407C	50 micrograms	100	1	5.22	Estigyn GL
1413J	ETHOSUXIMIDE Capsule 250mg	200	2	17.61	Zarontin PD
1414K	Paediatric Syrup 250mg per 5mL, 250mL	4	4	9.16	Zarontin PD
1419Q	ETHYLNORADRENALINE Injection 2mg in 1mL	5	..	5.54	Bronkephrine WL
	ETHYLOESTRENOL To be accompanied by an authority from the Director of Health.				
2370R	Tablet 2mg	100	1	14.36	Orabolin OR
	ETHYNODIOL DIACETATE with ETHINYLOESTRADIOL Tablet				
3166P	500 micrograms-50 micrograms, 21	2	2	*5.15	Ovulen 0.5/50 SR
3167Q	1mg-50 micrograms, 21	2	2	*5.15	Ovulen 1/50 SR
2447T	Pack containing 21 tablets 500 micrograms-50 micrograms and 7 inert tablets	2	2	*5.15	Ovulen 0.5/50-28 SR
3168R	Pack containing 21 tablets 1mg-50 micrograms and 7 inert tablets	2	2	*5.15	Ovulen 1/50-28 SR
	ETHYNODIOL DIACETATE with MESTRANOL Tablet				
3169T	500 micrograms-100 micrograms, 21	2	2	*5.15	Ovulen 0.5 SR
3170W	1mg-100 micrograms, 21	2	2	*5.15	Ovulen 1 SR
3171X	2mg-100 micrograms, 21	2	2	*5.15	Ovulen 2 SR
	ETRETINATE To be accompanied by an authority from the Director of Health.				
1421T	Capsule 10mg	100	..	83.07	Tigason RO
1422W	25mg	100	..	189.69	Tigason RO

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	FENOTEROL HYDROBROMIDE			\$		
1314E	Tablet 2.5mg	100	2	7.42	Berotec	BY
1315F	Elixir 2.5mg per 5mL, 300mL	≠1	4	5.37	Berotec	BY
1312C	Inhalation Solution for use in RESPIRATOR or NEBULISER 0.1%, 20mL	≠1	2	5.94	Berotec	BY
1313D	Inhalation, metered aerosol spray, 200 micrograms per dose (300 dose)	≠1	5	6.66	Berotec	BY
2465R	FERROUS AMINOACETOSULPHATE Paediatric Syrup 100mL	≠1	4	3.92	Plesmet	NN
1424Y	FERROUS GLUCONATE Tablet 300mg	100	2	3.92	Fergon	WL
2726L	Paediatric Elixir 6%, 100mL	≠1	4	3.92	Fergon	WL
1150M	FERROUS SULPHATE DRIED Tablet 320mg (delayed release)	30	2	3.92	Slow-Fe	CG
2689M	350mg (sustained release)	30	2	3.81 3.87	Feritard Ferro-Gradumets	PT AB
3100E	Capsule 320mg (delayed release)	30	2	3.92	Fespan	SK
3150T	FERROUS SULPHATE DRIED with FOLIC ACID Tablet 270mg-300 micrograms (delayed release)	30	2	3.92	Feritard Folic	PT
3160H	270mg-300 micrograms (sustained release)	30	2	3.98	F.G.F.	AB
3149R	Capsule 270mg-300 micrograms (delayed release)	30	2	3.98	Fefol	SK
1363R	FLUCLOROLONE ACETONIDE Cream 0.025%, 15g	≠1	1	3.79	Topilar	SD
	FLUCLOXACILLIN To be accompanied by an authority from the Director of Health.					
1526H	Capsule 250mg	25	..	10.81	Flophen Floxapen	CS BR
1527J	500mg	12	..	10.51	Flophen Floxapen	CS BR
1528K	Powder for Syrup 125mg per 5mL, 100mL	≠1	..	#9.09	Flophen Floxapen	CS BR
1523E	FLUCLOXACILLIN Injection 250mg (solvent required)	5	..	9.32	Flophen Floxapen	CS BR
	(continued)					

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
1524F	FLUCLOXACILLIN - cont. Injection 500mg (solvent required)	5	..	\$ 13.34	Flopen Floxapen CS BR
1525G	1g (solvent required)	5	..	20.91	Flopen Floxapen CS BR
	FLUCYTOSINE To be endorsed "S.P."				
1073L	Tablet 500mg	100	..	71.04	Ancotil RO
1433K	FLUDROCORTISONE ACETATE Tablet 100 micrograms	100	1	7.03	Florinef SQ
2823N	FLUMETHASONE with CLIOQUINOL Bar Drops 0.02%-1%, 7.5mL	#1	..	4.33	Locacorten Vioform CG
2677X	FLUOCORTOLONE ESTERS Cream 0.08%, 100g	#1	..	4.73	Topodil SC
1305Q	0.2%, 15g	#1	1	3.79	Ultralan-D SC
1306R	Ointment 0.2%, 15g	#1	1	3.79	Ultralan-D SC
1307T	Ointment (Anhydrous) 0.2%, 15g	#1	1	3.79	Ultralan-D Fatty SC
1204J	FLUOROMETHOLONE Eye Drops 0.1%, 5mL	#1	6	5.22	Flucon FML Liquifilm AQ AG
2521Q	FLUOROURACIL Injection 250mg per 10mL	10	..	27.86 27.92	BL RO
	FLUOXYMESTERONE To be accompanied by an authority from the Director of Health.				
1435M	Tablet 5mg	100	1	21.09	Halotestin UP
	FLUPHENAZINE To be endorsed "S.P."				
2659Y	Tablet 1mg	100	1	6.21	Anatensol SQ
2660B	2.5mg	100	1	7.94	Anatensol SQ
2661C	5mg	100	1	8.89	Anatensol SQ
2662D	Elixir 500 micrograms per mL, 60mL	#1	4	4.38	Anatensol SQ
	FLUPHENAZINE DECANOATE To be endorsed "S.P."				
1046C	Injection 12.5mg in 0.5mL	5	..	13.41	Modecate SQ
3098C	25mg in 1mL	5	..	23.04	Modecate SQ
1001Q	50mg in 2mL	5	..	30.96	Modecate SQ

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
				\$	
2958Q	FOLIC ACID Tablet 500 micrograms	100	..	3.81 3.82	DH,PT Folicid SI US
1437P	5mg	100	2	3.96 3.98	DH,PT Folasic Folicid FM,PR,RT,SI NN US
1436N	Injection 15mg in 1mL	10	..	*7.75	AB
	FOSFESTROL SODIUM To be endorsed "S.P."				
1353F	Tablet 120mg	100	2	28.01	Honvan BC
1352E	Injection 250mg in 5mL	10	..	18.18	Honvan BC
	FRAMYCETIN				
1439R	Eye Ointment 0.5%, 5g	≠1	..	3.98	Soframycin RL
1440T	Eye and Ear Drops 0.5%, 8mL	≠1	2	4.37	Soframycin RL
	FRUSEMIDE To be endorsed "S.P."				
2415D	Tablet 500mg	50	2	21.87 21.93	Urex-Forte Lasix FM HP
	FRUSEMIDE				
2414C	Tablet 20mg	50	2	4.59 4.66	Urex-M Lasix-M FM HP
2412Y	40mg	50	2	4.87 4.93	Urex Virifenemide Lasix FM WR HP Uremide PT
2411X	Oral Solution 10mg per mL, 30mL	≠1	2	6.72	Lasix HP
2413B	Injection 20mg in 2mL	5	..	6.04	Lasix HP
	FUSIDIC ACID To be accompanied by an authority from the Director of Health.				
2312Q	Tablet (Sodium salt) 250mg (enteric coated)	36	..	50.36	Fucidin SK
2311P	Suspension 50mg per mL, 90mL	≠1	..	23.31	Fucidin SK
	GAS GANGRENE ANTITOXIN - MIXED (POLYVALENT)				
2699C	Injection: 1 amp containing 10,000 Units Perfringens; 10,000 Units Novyi; 5,000 Units Septicum	2	1	*76.55	CS

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	GENTAMICIN SULPHATE			\$		
1067E	Injection 10mg (base) in 1mL	5	..	12.38	Garamycin	SH
1068F	40mg (base) in 1mL	5	..	15.46 15.96	Cidomycin Garamycin BL	RL SH
1168L	60mg (base) in 1.5mL	5	..	18.68 19.26	Cidomycin Garamycin BL	RL SH
2824P	80mg (base) in 2mL	5	..	21.92 22.58	Cidomycin Garamycin BL	RL SH
2939Q	GLIBENCLAMIDE Tablet 5mg	100	2	14.36	Daonil Euglucon	HP RC
2449X	GLICLAZIDE Tablet 80mg	100	2	14.36	Diamicron	SE
1447E	GLUCAGON HYDROCHLORIDE Injection 1 I.U. with diluent	1	1	9.28	Novo LY	NO
3040B	GLUCOSE Injection 50%, 10mL	5	..	5.84	BL	
	Injections 500mL and 1L See Intravenous Infusions					
2909D	GLUCOSE INDICATOR - BLOOD Reagent Strips 25	≠1	5	6.84	Ames-BG	AM
2912G	Reagent Strips 25	≠1	5	8.83	BM-Test-BG	BO
2908C	Reagent Strips 25	≠1	5	11.03	BM-Test-Glycemie 20-800	BO
1448F	GLUCOSE INDICATOR - URINE Test Dispenser 4m	≠1	2	5.62	Tes-Tape	LY
2352T	Reagent Strips 100	≠1	2	4.81	Clinistix	AM
3104J	Reagent Strips 100	≠1	2	4.91	Diastix	AM
3107M	GLUCOSE and KETONE INDICATOR - URINE Reagent Strips 100	≠1	2	5.36	Keto-Diastix	AM
2673Q	GLYCEROL 100mL	≠1	1	3.99	DH	
1453L	GLYCEROPHOSPHATE COMPOUND Syrup 1.5% Sodium Glycerophosphate, 100mL	≠1	4	3.77 3.87 3.92	MG Glyfosolix SI PR	DH

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
1459T	GLYCERYL TRINITRATE Tablets 600 micrograms, 100	#1	2	\$ 4.12	Anginine Stabilised BW
1452K	Ointment 2%, 60g	#1	2	10.21	Nitro-Bid PT
2594M	GLYCIDINE Tablet 500mg	100	2	8.29	Gondafon SC
1460W	GRISEOFULVIN To be endorsed "S.P." Tablet 125mg	100	2	9.64	Fulcin 125 Grisovin IC GL
2983B	330mg	28	2	8.71	Griseostatin SH
2982Y	500mg	28	2	9.38	Fulcin 500 Grisovin 500 IC GL
1461X	GUANETHIDINE Tablet 10mg	100	1	6.24 6.31	Antipres M Ismelin PT CG
1462Y	25mg	100	1	10.33 10.39	Antipres Ismelin PT CG
2767P	HALOPERIDOL To be endorsed "S.P." Tablet 1.5mg	100	1	5.97 6.03	Pacedol Serenace PT SR
2770T	5mg	50	1	6.97 7.03	Pacedol Serenace PT SR
2768Q	Injection 5mg in 1mL	10	..	11.69	Serenace SR
1234Y	HEPARIN CALCIUM Injection 5,000 Units in 0.2mL	5	5	9.64	Calciparine Caprin DF CS
1235B	5,000 Units in 0.5mL	5	5	9.64	Caprin CS
1053K	12,500 Units in 0.5mL	2	5	8.97 *9.01	Calciparine CS DF
1054L	25,000 Units in 1mL	2	5	11.02 *11.05	Calciparine CS DF
1466E	HEPARIN SODIUM Injection BP, 5,000 Units in 0.2mL	5	5	8.22	BL,CS,WP
1467F	5,000 Units in 1mL	5	5	8.22 8.28	BL,WP CS
1469H	20,000 Units in 20mL	12	5	47.01	BL
1468G	25,000 Units in 5mL	2	5	*11.05	CS,WP
1076P	35,000 Units in 35mL	12	5	*101.25	CS,WP

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
				\$		
2441L	HYDROCORTISONE - cont. Eye Ointment 1%, 5g	#1	..	4.46	Hycor	SI
2887Y	Cream 1%, 30g	#1	1	4.33	Adacor Cortef Dermacort Hydrosone Procort Sigmacort Squibb-HC	NN UP PD US PR SI SQ
2881P	1%, 50g	#1	1	4.93	Adacor Cortef Dermacort Hydrosone Procort Sigmacort Squibb-HC	NN UP PD US PR SI SQ
2888B	Topical Ointment 1%, 30g	#1	1	4.33	Adacor Cortef Dermacort "O" Procort Sigmacort Squibb-HC	NN UP PD PR SI SQ
2882Q	1%, 50g	#1	1	4.93	Adacor Cortef Dermacort "O" Procort Sigmacort Squibb-HC	NN UP PD PR SI SQ
2794C	HYDROCORTISONE with NEOMYCIN SULPHATE Ear Drops 1.5%-0.5%, 5mL	#1	..	4.26	Neo-Cortef	UP
2795D	Ear Ointment 1.5%-0.5%, 4g	#1	2	4.18	Neo-Cortef	UP
1498W	HYDROCORTISONE ACETATE To be endorsed "S.P." Injection 25mg in 1mL	5	..	6.11	Hysone-A	PT
1502C	Rectal Foam 10%, Aerosol 25g	2	1	*34.53	Colifoam	SV
3097B	HYDROCORTISONE SODIUM SUCCINATE To be endorsed "S.P." Injection set containing equivalent of 500mg hydrocortisone and solvent	1	..	14.84	Solu-Cortef	UP
1501B	HYDROCORTISONE SODIUM SUCCINATE Injection Set containing equivalent of 100mg hydrocortisone and 2mL solvent	2	..	*8.23 *8.31	Nordicort Efcortelan Solu-Cortef	NR GL UP
3096Y	containing equivalent of 250mg hydrocortisone and solvent	1	..	8.83	Solu-Cortef	UP

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1504E	HYDROGEN PEROXIDE SOLUTION, DILUTE (10 vol), 100mL	≠1	..	\$ 3.23	FA
1512N	HYDROXYCHLOROQUINE Tablet 200mg	100	..	12.48	Plaquenil WL
3093T	HYDROXYUREA Capsule 500mg	100	..	29.11	Hydrea SQ
3042D	HYOSCINE BUTYLBROMIDE Injection 20mg in 1mL	5	..	5.28	Buscopan BY
2956N	HYPROMELLOSE Eye Drops 0.5%, 15mL	≠1	6	4.18	Isopto Tears AQ Lacril AG Methopt SI
2952J	1%, 15mL	≠1	6	4.33	Methopt Forte SI
1509K	HYPROMELLOSE with DEXTRAN Eye Drops 0.3%-0.1%, 15mL	≠1	6	4.67	Tears Naturale AQ
3198H	IBUPROFEN Tablet 200mg	50	2	4.81 4.91	Inflam PT Brufen BT
3190X	400mg	50	2	5.62 5.69	Inflam PT Brufen BT
2442M	IDOXURIDINE To be endorsed "S.P." Eye Drops 0.1%, 15mL	≠1	2	6.11	Herplex AG Stoxil SK
2569F	Eye Ointment 0.5%, 5g	≠1	..	6.11	Stoxil SK
2567D	IDOXURIDINE Topical Ointment 0.5%, 5g	≠1	..	4.07	Stoxil SK
2420J	IMIPRAMINE Tablet 10mg	50	2	3.93	Imiprin PT Tofranil CG
2421K	25mg	50	2	4.73 4.76 4.83	Imiprin PT Melipramine UW(N) Tofranil CG
2719D	Injection I.M. 25mg in 2mL	10	..	7.59	Tofranil CG
2454E	INDOMETHACIN Capsule 25mg	50	2	5.63 5.69	Arthrexin AF Rheumacin PT Indocid MK
2757D	Suppository 100mg	20	2	9.93	Indocid MK

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	INFLUENZA VACCINE To be endorsed "S.P."			\$	
2852D	Injection (Trivalent) 0.5mL	1	..	6.61	Vaxigrip MB
2851C	1mL	1	..	6.61	CS
	INSECT ALLERGEN EXTRACT - BULL ANT Injection				
1141C	Set - strengths A,B,C each 5mL	1	..	43.23	CS
1139Y	Set - strengths A,B,C,D each 5mL	1	..	59.89	CS
1138X	Strength C, 5mL	1	..	17.61	CS
1142D	Strength D, 5mL	1	..	18.89	CS
	INSECT ALLERGEN EXTRACT - HONEY BEE VENOM Injection				
2886X	Set containing 550 micrograms	1	..	79.11	Albay Bee Venom BN
	INSECT ALLERGEN EXTRACT - JUMPER ANT Injection				
3022C	Set - strengths A,B,C each 5mL	1	..	43.23	CS
3034Q	Set - strengths A,B,C,D each 5mL	1	..	59.89	CS
3025F	Strength C, 5mL	1	..	17.61	CS
3023D	Strength D, 5mL	1	..	18.89	CS
	INSECT ALLERGEN EXTRACT - MOSQUITO Injection				
1473M	Set - strengths A,B,C each 5mL	1	..	43.23	CS
1474N	Set - strengths A,B,C,D each 5mL	1	..	59.89	CS
1471K	Strength C, 5mL	1	..	17.61	CS
1475P	Strength D, 5mL	1	..	18.89	CS
	INSECT ALLERGEN EXTRACT - WASP VENOM PROTEIN Injection				
2918N	Set containing 550 micrograms	1	..	85.52	Albay Wasp Venom BN
	INSULIN Injection (bovine)				
1710B	100 Units per mL, 10mL	5	2	*50.63	Insulin-2 CS Wellcome Insulin BW
1530M	300 Units per mL, 5mL	10	2	*128.53	CS
	INSULIN BIPHASIC Injection (mixed porcine/bovine)				
1723Q	100 Units per mL, 10mL	5	2	*50.63	Bitard-2 CS Rapitard M.C. Novo NO

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1711C	INSULIN ISOPHANE (N.P.H.) Injection (bovine) 100 Units per mL, 10mL	5	2	\$ *45.33 *50.63	Hypurin Isophane WP Isophane M.C. NO Isotard-2 CS Wellcome Isophane BW
1712D	Injection (porcine) 100 Units per mL, 10mL	5	2	*50.63	Insulatard Nordisk BW Isotard-2 PC CS Protaphane M.C. NO
1427D	INSULIN ISOPHANE (N.P.H.) - INSULIN NEUTRAL, (MIXED) Injection (porcine) 100 Units (70 Units-30 Units) per mL, 10mL	5	2	*50.63	Mixtard Nordisk BW
1713E	INSULIN NEUTRAL Injection (bovine) 100 Units per mL, 10mL	5	2	*45.33	Hypurin Neutral WP
1714F	Injection (porcine) 100 Units per mL, 10mL	5	2	*50.63	Actrapid M.C. Novo NO Nuralin-2 CS Velosulin Nordisk BW
1715G	INSULIN PROTAMINE ZINC Injection (bovine) 100 Units per mL, 10mL	5	2	*45.33	BW, CS
1716H	INSULIN ZINC SUSPENSION (Lente) Injection (bovine) 100 Units per mL, 10mL	5	2	*50.63	Lente-2 CS Wellcome Lente BW
1717J	Injection (porcine) 100 Units per mL, 10mL	5	2	*50.63	Lente-2 PC CS Monotard M.C. Novo NO
1430G	Injection (mixed porcine/bovine) 100 Units per mL, 10mL	5	2	*50.63	Lente M.C. Novo NO
1719L	INSULIN ZINC SUSPENSION (AMORPHOUS) (Semilente) Injection (bovine) 100 Units per mL, 10mL	5	2	*50.63	Semilente-2 CS Wellcome Semilente BW
1720M	Injection (porcine) 100 Units per mL, 10mL	5	2	*50.63	Semilente-2 PC CS Semilente M.C. NO Novo
1721N	INSULIN ZINC SUSPENSION (CRYSTALLINE) (Ultralente) Injection (bovine) 100 Units per mL, 10mL	5	2	*50.63	Ultralente-2 CS Ultralente M.C. NO Novo Wellcome Ultralente BW

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	INTRAVENOUS INFUSIONS 500mL and 1L - see separate listings immediately before 'dental' benefits at end of Section 2			\$		
1540C	IPRATROPIUM BROMIDE Inhalation, metered aerosol spray, 20 micrograms per dose (200 dose)	≠1	5	7.28	Atrovent	BY
1541D	Nebuliser Solution 0.025%, 20mL	≠1	2	6.26	Atrovent	BY
1298H	IRON DEXTRAN Injection 2mL	5	..	6.49	Imferon	FC
2764L	IRON POLYMALTOSE COMPLEX Tablet 40mg (Iron)	100	2	3.92	Ferrum H	SI
2593L	Injection 100mg (Iron) in 2mL	5	..	6.91	Ferrum H	SI
1552Q	IRON SORBITOL Injection I.M. Trivalent Iron 2mL	5	..	6.91	Jectofer	AP
1550N	ISOCONAZOLE NITRATE Cream 1%, 20g	≠1	1	5.54	Travogen	SC
1549M	Lotion 1%, 20mL	≠1	1	5.54	Travogen	SC
1551P	Pessaries 300mg, 2	≠1	..	6.29	Gyno-Travogen	SC
1553R	ISONIAZID Tablet 50mg	200	2	4.81	FM	
1554T	100mg	100	2	4.81	FM	
2744K	ISOPRENALINE HYDROCHLORIDE Tablet 30mg (sustained release)	100	2	11.02	Saventrine	PN
2587E	ISOSORBIDE DINITRATE Tablet 10mg	100	2	4.39	Isordil Isotrate	AY PD
2588F	Sublingual Tablet 5mg	100	2	4.26	Isordil Sublingual Isotrate Sublingual	AY PD
3101F	KANAMYCIN Injection 30mg in 1mL	5	1	9.57	Kanasig	SI
1562F	250mg in 2mL	5	..	13.41	Kanasig	SI
1563G	500mg in 2mL	5	..	14.51	Kanasig Kantrex	SI BC
1564H	1g in 3mL	5	..	16.76	Kanasig Kantrex	SI BC
2988G	KAOLIN with PECTIN Mixture 5.91g-132mg per 30mL, 375mL	≠1	2	4.39	Kaopectate	UP

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	LABETALOL To be endorsed "S.P."			\$		
1566K	Tablet 100mg	100	2	11.98	Trandate	GL
1567L	200mg	100	2	17.76	Trandate	GL
	LACTULOSE To be accompanied by an authority from the Director of Health.					
3064G	Mixture 3.34g per 5mL, 500mL	≠1	..	12.32	Duphalac	ET
	LEVODOPA					
3143K	Tablet 100mg	50	2	7.07	Larodopa	RO
3144L	250mg	100	2	13.81	Larodopa	RO
3014P	500mg	250	2	47.88	Larodopa	RO
	LEVODOPA with BENSERAZIDE					
2228G	Tablet 200mg-50mg	100	2	26.49	Madopar	RO
2227F	Capsule 50mg-12.5mg	100	2	11.86	Madopar Q	RO
2225D	100mg-25mg	100	2	17.53	Madopar-M	RO
2226E	200mg-50mg	100	2	26.49	Madopar	RO
	LEVODOPA with CARBIDOPA					
1244L	Tablet 100mg-10mg	100	2	17.53	Sinemet M	MK
1242J	100mg-25mg	100	2	29.83	Sinemet 100/25	MK
1245M	250mg-25mg	100	2	32.57	Sinemet	MK
	LEVONORGESTREL					
2913H	Tablet 30 micrograms, 28	2	2	*5.15	Microlut 28 Microval 28	SC WY
	LEVONORGESTREL with ETHINYLOESTRADIOL					
	Tablet					
1455N	125 micrograms-50 micrograms, 21	2	2	*5.15	Microgynon 50	SC
1393H	150 micrograms-30 micrograms, 21	2	2	*5.15	Microgynon 30 Nordette 21	SC WY
3186Q	250 micrograms-50 micrograms, 21	2	2	*5.15	Neogynon Nordiol 21	SC WY
1456P	Pack containing 21 tablets 125 micrograms-50 micrograms and 7 inert tablets	2	2	*5.15	Microgynon 50 ED	SC
1394J	Pack containing 21 tablets 150 micrograms-30 micrograms and 7 inert tablets	2	2	*5.15	Microgynon 30 ED Nordette 28	SC WY
3188T	Pack containing 21 tablets 250 micrograms-50 micrograms and 7 inert tablets	2	2	*5.15	Neogynon ED Nordiol 28	SC WY
	(continued)					

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
1457Q	LEVONORGESTREL with ETHINYLOESTRADIOL - cont. Pack containing 11 tablets 50 micrograms-50 micrograms and 10 tablets 125 micrograms- 50 micrograms	2	2	\$ *5.15	Biphasil 21 WY
1458R	Pack containing 11 tablets 50 micrograms-50 micrograms, 10 tablets 125 micrograms- 50 micrograms and 7 inert tablets	2	2	*5.15	Biphasil 28 WY Sequilar ED SC
1391F	Pack containing 6 tablets 50 micrograms-30 micrograms, 5 tablets 75 micrograms- 40 micrograms and 10 tablets 125 micrograms-30 micrograms	2	2	*5.15	Triphasil WY Triquilar SC
1392G	Pack containing 6 tablets 50 micrograms-30 micrograms, 5 tablets 75 micrograms- 40 micrograms, 10 tablets 125 micrograms-30 micrograms and 7 inert tablets	2	2	*5.15	Triphasil 28 WY Triquilar ED SC
2875H	LIGNOCAINE Injection 100mg in 5mL	≠2	..	5.48	Xylocard 100 AP
2861N	I.M. 300mg in 3mL	1	..	5.83	Xylocard 300 I.M. AP
2876J	Infusion 500mg in 5mL	5	..	7.52	Xylocard 500 AP
3084H	LINCOMYCIN To be endorsed "S.P." Injection 300mg in 1mL	5	..	8.42	Lincocin SS UP Paediatric
2530E	600mg in 2mL	5	..	10.31	Lincocin UP
1175W	LINDANE Cream 1%, 200g	≠1	2	6.02	Lorexane IC
1176X	Head Lotion 0.2%, 200mL	≠1	..	4.93	Lorexane IC
1178B	Lotion Concentrate 1%, 200mL	≠1	..	4.93	Lorexane IC Concentrate
2318B	LIOTHYRONINE Tablet 20 micrograms	100	1	4.98	Tertroxin GL
3059B	LITHIUM CARBONATE Tablet 250mg	100	2	5.28 5.34	Lithicarb PT Camcolit NE Carbolith DH
3060C	400mg (sustained release)	100	1	7.94	Priadel PT
1571Q	LOPERAMIDE HYDROCHLORIDE Capsule 2mg	12	..	4.13	Imodium JP

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
2401J	LYPRESSIN Nasal Spray 50 Units per mL, 5mL	10	2	\$ *53.73	Vasopressin	SZ
1577B	MAGNESIUM SULPHATE Paste 50g	#1	1	3.84	Magnoplasm	FA
1576Y	100g	#1	1	4.28	Magnoplasm	FA
1578C	MALDISON Lotion 0.5%, 100mL	#1	..	4.47	Cleensheen	FL
	MANNITOL See Intravenous Infusions					
1583H	MECLOZINE Tablet 25mg	50	2	4.18	Ancolan	GL
	MEDROXYPROGESTERONE To be endorsed "S.P."					
2320D	Tablet 2.5mg	25	..	5.89	Provera	UP
2321E	10mg	100	2	30.13	Provera	UP
2725K	100mg	100	2	73.86	Provera	UP
2319C	Injection 50mg in 1mL	1	..	6.24	Depo-Provera	UP
3118D	150mg in 1mL	1	..	11.23	Depo-Provera	UP
3197G	MEDRYSONE Eye Drops 1%, 5mL	#1	6	5.22	HMS Liquifilm	AG
1823Y	MEFRUSIDE Tablet 25mg	50	2	5.62	Baycaron	BN
2547C	MELPHALAN Tablet 2mg	100	..	*56.05	Alkeran	BW
2548D	5mg	100	..	*94.49	Alkeran	BW
1598D	MERCAPTOPURINE Tablet 50mg	50	1	*43.23	Purinethol	BW
	METFORMIN To be endorsed "S.P."					
2430X	Tablet 500mg	100	2	11.04	Glucophage	RN
1605L	500mg (sustained release)	100	2	11.06	Diabex S.R.	DF
2397E	METHACYCLINE Capsule 150mg	21	..	5.69	Randomycin	WW
2901Q	300mg	11	..	5.69	Randomycin	WW
	METHADONE To be endorsed "S.P."					
1608P	Tablet 5mg	20	..	5.47	Physeptone	BW
1609Q	10mg	20	..	6.53	Physeptone	BW
1606M	Injection 10mg in 1mL	5	..	9.99	Physeptone	BW

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	METHDILAZINE			\$		
1614Y	Tablet 4mg	50	2	4.06	Dilosyn	GL
1615B	8mg	50	2	4.19	Dilosyn	GL
	METHDILAZINE To be endorsed "S.P."					
1612W	Tablet 4mg	100	2	*5.99	Dilosyn	GL
1613X	8mg	100	2	*6.25	Dilosyn	GL
	METHENOLONE ACETATE To be accompanied by an authority from the Director of Health.					
1620G	Tablet 5mg	100	1	*15.85	Primobolan	SC
	METHICILLIN To be endorsed "S.P."					
2323G	Injection 1g (solvent required)	5	1	19.08	Metin	CS
	METHOTREXATE To be accompanied by an authority from the Director of Health.					
1622J	Tablet 2.5mg	100	..	20.57	LE	
2393Y	Injection 5mg (solvent required)	5	..	*23.38	LE	
2396D	5mg in 2mL	5	..	*23.38	LE	
2394B	50mg (solvent required)	5	..	*64.33	LE	
2395C	50mg in 2mL	5	..	60.53 *60.58	BL LE	
2398F	METHSUXIMIDE Capsule 300mg	200	2	17.61	Celontin	PD
1624L	METHYCLOTHIAZIDE Tablet 2.5mg	50	2	4.73	Enduron-M	AB
1625M	5mg	50	2	4.98 5.06	Urimor Enduron	PT AB
3194D	METHYLDOPA Tablet 125mg	100	2	7.73	Aldomet-M	MK
1629R	250mg	100	2	9.86 9.92	Dimal Methopa Aldomet	PT US MK
	METHYLPHENOBARBITONE To be endorsed "S.P."					
1633Y	Tablet 30mg	200	2	4.93	Prominal	WL
1634B	60mg	200	2	5.57	Prominal	WL
1635C	200mg	200	2	9.02	Prominal	WL

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1927K	METHYLPREDNISOLONE Eye Ointment 0.1%, 4g	≠1	..	\$ 4.46	Medrol	UP
1928L	METHYLPREDNISOLONE ACETATE To be endorsed "S.P." Injection 40mg in 1mL	5	..	16.48	Depo-Medrol	UP
2981X	METHYLPREDNISOLONE SODIUM SUCCINATE Injection 40mg (base) in 1mL	5	..	16.48	Solu-Medrol	UP
1641J	METHYL SALICYLATE Liniment APF, 100mL	≠1	1	3.87 3.89 3.92	Emsalin SI, TO MG NN, PR, QE(NQ)	DH
3151W	METHYLTESTOSTERONE To be endorsed "S.P." Tablet 5mg	100	2	5.26	Testomet	PT
2112E	25mg	100	2	8.89 8.97	Testomet ET	PT
2113F	50mg	100	2	12.93	Testomet	PT
2826R	METHYSERGIDE To be endorsed "S.P." Tablet 1mg	100	2	20.17	Deseril	SZ
1207M	METOCLOPRAMIDE HYDROCHLORIDE Tablet 10mg	25	..	4.94 5.06 5.07	Pramin Primperan Metamide Maxolon	AF US PT BR
1205K	Syrup 5mg per 5mL, 100mL	≠1	..	4.47	Primperan	US
1206L	Injection 10mg in 2mL	10	..	6.11	Maxolon Primperan	BR US
1203H	METOLAZONE Tablet 2.5mg	50	2	4.87	Diulo	SR
1324Q	METOPROLOL Tablet 50mg	100	2	10.33	Betaloc Lopresor	AP CG
1325R	100mg	30	2	7.36	Betaloc Lopresor	AP CG
1638F	METRONIDAZOLE To be accompanied by an authority from the Director of Health. Solution for intravenous infusion 500mg in 100mL (0.5%)	1	..	16.33	Flagyl BL	MB
(continued)						

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1636D	METRONIDAZOLE - cont. Tablet 200mg	21	1	\$ 4.87 4.93	Trichozole Flagyl	PT MB
1642K	Suppositories 500mg, 10	≠1	..	8.64	Flagyl Trichozole	MB PT
1643L	1g, 10	≠1	..	10.56	Flagyl	MB
	MEXILETINE HYDROCHLORIDE To be endorsed "S.P."					
1682M	Capsule 50mg	100	2	12.57	Mexitil	BY
1683N	200mg	100	2	26.77	Mexitil	BY
1694E	Injection 250mg in 10mL	5	..	15.82	Mexitil	BY
	MIANSERIN HYDROCHLORIDE To be accompanied by an authority from the Director of Health.					
1627P	Tablet 10mg	50	..	8.42	Tolvon	OR
	MICONAZOLE					
1274C	Oral Gel 2%, 20g	≠1	1	5.54	Daktarin	JP
1286Q	Tincture 2%, 20mL	≠1	1	5.54	Daktarin	JP
	MICONAZOLE NITRATE					
1276E	Cream 2%, 20g	≠1	1	5.54	Daktarin	JP
1282L	Lotion 2%, 20g	≠1	1	5.54	Daktarin	JP
1277F	Pessaries 100mg, 7	≠1	..	6.29	Gyno-Daktarin 7 Monistat 7	JP ET
1273B	Vaginal Cream 2%, 40g	≠1	..	6.24	Gyno-Daktarin 7 Monistat 7	JP ET
	MILK POWDER - LACTOSE MODIFIED To be accompanied by an authority from the Director of Health.					
1284N	Lactose-Predigested Powder 500g	2	20	*12.01	Digestelact	SJ
	MILK POWDER - LOW LACTOSE FORMULA To be endorsed "S.P."					
1283M	Lactose-Predigested Powder Infant Formula 500g	2	..	*12.01	De-Lact Infant	SJ
	MILK POWDER - SYNTHETIC To be accompanied by an authority from the Director of Health.					
3092R	Low Calcium Compound Powder 397g	2	20	*23.79	Locasol	MN
1637E	Low Lactose Compound Powder 454g	2	20	*25.15	Galactomin Formula 17	MN
2685H	Fructose Formula, Reduced Fat, Low Lactose Compound Powder 454g	2	20	*59.01	Galactomin Formula 19	MN

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	MINERAL MIXTURE (For use with Amino Acid Formula without Phenylalanine) To be endorsed "S.P."			\$		
1451J	Powder 250g	#1	5	20.56	Aminogran M.M.	GL
3037W	MINOCYCLINE Capsule 100mg	11	..	5.69	Minomycin	LE
	MINOXIDIL To be accompanied by an authority from the Director of Health.					
2313R	Tablet 10mg	100	..	38.11	Loniten	UP
2314T	25mg	100	..	82.96	Loniten	UP
	MITHRAMYCIN To be endorsed "S.P."					
1924G	Injection 2.5mg (solvent required)	5	..	*99.33	Mithracin	PF
	MORPHINE with TACRINE To be endorsed "S.P."					
1667R	Tablet 30mg-15mg	50	..	14.41	Mortha	WH
	MORPHINE SULPHATE					
1644M	Injection 10mg in 1mL	5	..	5.38	BL,BT,SI	
1645N	15mg in 1mL	5	..	5.47	BL,BT,SI	
1647Q	30mg in 1mL	5	..	5.81	BL	
	MORPHINE SULPHATE with ATROPINE SULPHATE					
1661K	Injection 15mg-600 micrograms in 1mL	5	..	5.61	BL	
	MUSTINE					
1668T	Injection 10mg (solvent required)	1	..	8.29	BT	
	NALIDIXIC ACID To be accompanied by an authority from the Director of Health.					
2451B	Tablet 500mg	56	..	12.84	Negram	WL
2645F	Oral Suspension 50mg per mL, 200mL	#1	..	8.44	Negram	WL
	NALOXONE HYDROCHLORIDE					
1670X	Injection 40 micrograms in 2mL	5	..	24.66	Narcan Neonatal	DT
	NANDROLONE DECANOATE To be accompanied by an authority from the Director of Health.					
1671Y	Injection 50mg in 1mL	1	1	11.77	Deca-Durabolin	OR

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	NANDROLONE PHENYLPROPIONATE To be accompanied by an authority from the Director of Health.			\$	
1672B	Injection 25mg in 1mL	3	1	11.77	Durabolin OR
1317H	NAPHAZOLINE HYDROCHLORIDE Eye Drops 0.1%, 15mL	≠1	2	4.33	Albalon Liquifilm AG
1674D	NAPROXEN Tablet 250mg	50	2	7.56	Naprosyn SD
1662L	Suppository 500mg	20	2	9.93	Naprosyn SD
2807R	NATAMYCIN Tablet 100mg	50	..	9.44	Pimafucin GB
2877K	Suspension 1%, 5mL	≠1	1	4.52	Pimafucin GB
2519N	Cream 20mg per g, 15g	≠1	1	4.59	Pimafucin GB
2520P	Pessaries 25mg, 20	≠1	..	6.37	Pimafucin GB
2325J	NEOMYCIN To be endorsed "S.P." Tablet 500mg	25	1	11.02	Neosulf ET PT
1673C	NEOMYCIN Eye Drops 0.5% (0.35% Neomycin Base), 10mL	≠1	2	4.33	Neopt SI
2296W	NEOMYCIN UNDECENOATE with BACITRACIN ZINC Ear Ointment 12mg (3.5mg base)- 400 Units per g, 10g	≠1	..	4.26	Nemdyn HA
1675E	NEOSTIGMINE Tablet 15mg	100	2	6.72	Prostigmin RO
1676F	Injection 500 micrograms in 1mL	5	3	4.34	Prostigmin RO
1677G	2.5mg in 1mL	5	3	4.79	Prostigmin RO
1680K	NICLOSAMIDE Tablet 500mg	4	..	4.67	Yomesan BN
1681L	NICLOSAMIDE To be endorsed "S.P." Tablet 500mg	16	..	*12.29	Yomesan BN
1684P	NICOTINIC ACID Tablet 25mg	100	2	3.84	Nikacid DH US
1685Q	50mg	100	2	3.92	Nikacid DH,RT,SI US
	(continued)				

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1686R	NICOTINIC ACID - cont. Tablet 100mg	100	2	\$ 4.06	Nikacid DH	US
1687T	250mg	100	2	4.18	DH	
	NIFEDIPINE To be accompanied by an authority from the Director of Health.					
1688W	Capsule 10mg	100	..	22.09	Adalat	BN
2723H	NITRAZEPAM Tablet 5mg	25	..	3.49 3.92	Alodorm Dormicum Mogadon	AF PT RO
	NITROFURANTOIN To be endorsed "S.P."					
1689X	Tablet 50mg	25	1	5.93	Furadantin	NW
1690Y	100mg	25	1	7.91	Furadantin	NW
1692C	Capsule 50mg	30	1	6.78	Macrochantin	NW
1693D	100mg	30	1	9.24	Macrochantin	NW
1691B	Paediatric Suspension 25mg per 5mL, 200mL	≠1	..	5.31	Furadantin	NW
	NORETHISTERONE To be endorsed "S.P."					
2993M	Tablet 5mg	30	5	6.31	Primolut N	SC
1967M	NORETHISTERONE Tablet 350 micrograms, 28	2	2	*5.15	Micronor Noriday	ET SD
	NORETHISTERONE with ETHINYLOESTRADIOL Tablet					
2772X	500 micrograms-35 micrograms, 21	2	2	*5.15	Brevinor Modicon	SD ET
2773Y	1mg-35 micrograms, 21	2	2	*5.15	Brevinor-1 Neocon	SD ET
2774B	Pack containing 21 tablets 500 micrograms-35 micrograms and 7 inert tablets	2	2	*5.15	Brevinor Modicon	SD ET
2775C	Pack containing 21 tablets 1mg- 35 micrograms and 7 inert tablets	2	2	*5.15	Brevinor-1 Neocon	SD ET
2776D	Pack containing 12 tablets 500 micrograms - 35 micrograms, 9 tablets 1mg - 35 micrograms and 7 inert tablets	2	2	*5.15	Synphasic	SD

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
3176E	NORETHISTERONE with MESTRANOL Tablet 1mg-50 micrograms, 21	2	2	\$ *5.15	Norinyl-1 SD Ortho-Novum 1/50 ET
3177F	1mg-80 micrograms, 21	2	2	*5.15	Ortho-Novum 1/80 ET
3178G	2mg-100 micrograms, 21	2	2	*5.15	Norinyl-2 SD
3179H	Pack containing 21 tablets 1mg- 50 micrograms and 7 inert tablets	2	2	*5.15	Norinyl-1/28 SD
	NORETHISTERONE ACETATE To be endorsed "S.P."				
1182F	Tablet 2.5mg	30	5	6.31	Primolut Nor SC
2865T	10mg	100	2	27.41	SH420 SC
	NORETHISTERONE ACETATE with ETHINYLOESTRADIOL				
3180J	Tablet 1mg-50 micrograms, 21	2	2	*5.15	Minovlar SC
3181K	3mg-50 micrograms, 21	2	2	*5.15	Gynovlar SC
3182L	4mg-50 micrograms, 21	2	2	*5.15	Anovlar SC
3183M	Pack containing 21 tablets 1mg- 50 micrograms and 7 inert tablets	2	2	*5.15	Minovlar ED SC Orlest PD
3184N	Pack containing 21 tablets 2.5mg- 50 micrograms and 7 inert tablets	2	2	*5.15	Norlestrin PD
	NORGESTREL with ETHINYLOESTRADIOL Tablet				
1442X	500 micrograms-50 micrograms, 20	2	2	*5.15	Duoluton SC
3187R	500 micrograms-50 micrograms, 21	2	2	*5.15	Eugynon SC Ovral WY
3189W	Pack containing 21 tablets 500 micrograms-50 micrograms and 7 inert tablets	2	2	*5.15	Eugynon ED SC
	NORTRIPTYLINE Tablet 10mg	50	2	3.89	Allegron DL Nortab SQ
2523T	25mg	50	2	4.76	Allegron DL Nortab SQ
2524W	Paediatric Elixir 10mg per 5mL, 100mL	≠1	4	3.84	Allegron DL
	NUTRAMIGEN To be accompanied by an authority from the Director of Health.				
2564Y	Powder 500g	2	20	*28.65	Glucose Nutramigen MJ

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	NYSTATIN			\$		
1696G	Tablet 500,000 Units	50	..	9.07	Diastatin Mycostatin Nilstat	GP SQ LE
1699K	Capsule 500,000 Units	50	..	9.07	Mycostatin	SQ
3032N	Lozenge 100,000 Units	20	1	4.33	Nilstat	LE
3033P	Mixture 100,000 Units per mL, 24mL	≠1	1	5.14	Mycostatin Nilstat	SQ LE
1698J	Cream 100,000 Units per g, 15g	≠1	1	4.46	Mycostatin Nilstat	SQ LE
1318J	Gel 100,000 Units per g, 15g	≠1	1	4.46	Mycostatin	SQ
1179C	Ointment 100,000 Units per g, 15g	≠1	1	4.46	Mycostatin Nilstat	SQ LE
1697H	Pessaries 100,000 Units, 15	≠1	1	4.71	Diastatin Mycostatin Nilstat	GP SQ LE
1660J	Cream Pessaries 100,000 Units, 15	≠1	1	4.86	Nilstat	LE
3163L	Vaginal Cream 100,000 Units per 4g, 60g (15 doses)	≠1	1	4.99	Mycostatin	SQ
3102G	100,000 Units per 5g, 75g (15 doses)	≠1	1	4.99	Nilstat	LE
1061W	OESTRADIOL VALERATE Injection 10mg in 1mL	3	..	10.96	Primogyn Depot	SC
1700L	OESTRONE Pessaries 1,000 Units, 12	≠1	1	5.48	Kolpon	OR
1701M	10,000 Units, 12	≠1	1	7.39	Kolpon	OR
2333T	ORCIPRENALINE Tablet 20mg	100	2	7.19	Alupent	BY
2828W	Syrup 10mg per 5mL, 300mL	≠1	4	5.42	Alupent	BY
2332R	Inhalation Solution for use in HAND NEBULISER 5%, 7.5mL	≠1	..	4.73	Alupent	BY
2783L	for use in RESPIRATOR or JET NEBULISER 2%, 75mL	≠1	..	9.86	Alupent	BY
2784M	Inhalation, metered aerosol spray replacement pack, 15mg per mL, 15mL (300 dose)	≠1	5	5.96	Alupent	BY
1725T	ORNIDAZOLE Tablet 500mg	3	..	5.51	Tiberal	RO
2627G	ORPHENADRINE HYDROCHLORIDE To be endorsed "S.P." Tablet 50mg	100	2	5.34 5.41	Orpadrex Disipal	PT RK

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
3132W	OXAZEPAM Tablet 15mg	50	..	\$ 3.89 3.94	Benzotran PT Murelax AY Serepax WY
3133X	30mg	50	..	4.33	Benzotran PT Murelax AY Serepax WY
2942W	OXPRENOLOL Tablet 20mg	100	2	6.71 6.77	Captol PT Trasicor CG
2961W	40mg	100	2	8.94 9.01	Captol PT Trasicor CG
2941T	Injection 2mg (solvent required)	5	..	7.19	Trasicor CG
2481N	OXYCODONE To be endorsed "S.P." Suppositories 30mg, 12	≠1	..	14.92	Proladone BT
2622B	OXYCODONE HYDROCHLORIDE To be endorsed "S.P." Tablet 5mg	20	..	5.87	Endone DT
2902R	OXYMETHOLONE To be accompanied by an authority from the Director of Health. Tablet 50mg	100	..	69.41	Anapolon SD
2903T	100mg	100	..	135.99	Adroyd PD
1724R	OXYTETRACYCLINE Capsule 250mg	25	..	4.81	Terramycin PF
1064B	Ointment 3%, 15g	≠1	..	4.16	Terramycin PF
1727X	OXYTOCIN Injection 2 Units in 2mL	5	..	5.34	Syntocinon SZ
1729B	5 Units in 1mL	5	..	5.48	Syntocinon SZ
1730C	10 Units in 1mL	5	..	5.62	Syntocinon SZ
2400H	OXYTOCIN with ERGOMETRINE Injection 5 Units and 500 micrograms in 1mL	5	..	5.89	Syntometrine SZ
1735H	PANCREATIN ENZYME To be endorsed "S.P." 4 times USNF.XIII strength Tablet 325mg	500	1	33.56	Viokase RS
1736J	Powder 250g	≠1	2	26.03	Viokase RS
1737K	5 times USNF.XIV strength Capsule 305mg	500	1	36.91	Viokase RS

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	PANCRELIPASE To be endorsed "S.P."			\$	
2496J	Capsule 234mg	250	1	54.99	Pancrease ET
2497K	300mg	250	1	33.56	Cotazym OR
	PAPAVERETUM To be endorsed "S.P."				
1740N	Tablet 10mg	20	..	5.87	Omnopon RO
	PAPAVERETUM				
1739M	Injection 20mg in 1mL	5	..	5.74	Omnopon RO
	PAPAVERETUM with HYOSCINE HYDROBROMIDE				
1741P	Injection 20mg-430 micrograms in 1mL	5	..	5.87	Omnopon- Scopolamine RO
	PARACETAMOL				
1746X	Tablet 500mg	50	1	3.76 3.84	Ceetamol PT Dymadon BW Panacete PR Panamax WL Paralgin FM Parasin NN Parmol US PCL DH
1747Y	Mixture 120mg per 5mL, 100mL	≠1	4	3.84	Dymadon BW Panamax WL Parmol US
	PENICILLAMINE To be accompanied by an authority from the Director of Health.				
2721F	Tablet 125mg	100	..	20.24	D-Penamine DL Perdolat KN
2838J	250mg	100	..	32.53	D-Penamine DL Perdolat KN
	PENICILLINASE				
1762R	Injection set containing 0.8megaU and 1mL solvent	1	..	23.37	Compenase CS
	PERHEXILINE MALEATE To be accompanied by an authority from the Director of Health.				
1822X	Tablet 100mg	100	..	19.97	Pexid ML
	PERICYAZINE To be endorsed "S.P."				
3052P	Tablet 2.5mg	100	1	4.73	Neulactil MB
3053Q	10mg	100	1	7.88	Neulactil MB
3055T	Mixture 2.5mg per 5mL, 100mL	≠1	4	4.33	Neulactil MB

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	PERITONEAL DIALYSIS SOLUTION			\$		
2410W	Injection with 1.36% Anhydrous Glucose, 1L	20	1	*57.13	Diasol	AB
3192B	with 3.86% Anhydrous Glucose, 1L	20	1	*57.13	Diasol	AB
1828F	PETHIDINE Injection BP, 50mg in 1mL	5	..	5.27	Pethoid BL,BT,SI	BW
1829G	100mg in 2mL	5	..	5.32	BL,BT,SI	
	PHENELZINE To be accompanied by an authority from the Director of Health. CAUTION: This drug is a monoamine oxidase inhibitor.					
2856H	Tablet 15mg	50	..	6.59	Nardil	WW
1839T	PHENETHICILLIN Tablet 125mg	25	1	4.18	Pensig	SI
1840W	250mg	25	1	4.62	Optipen Pensig	CS SI
1838R	Capsule 250mg	25	1	4.62	Optipen Pensig	CS SI
3088M	500mg	25	1	5.66	Optipen Pensig	CS SI
3120F	Powder for Syrup 125mg per 5mL, 100mL	#1	1	#5.34	Pensig 125	SI
3121G	250mg per 5mL, 100mL	#1	1	#6.00	Pensig 250	SI
	PHENETHICILLIN To be endorsed "S.P."					
1706T	Tablet 125mg	50	5	*6.23	Pensig	SI
1707W	250mg	50	5	*7.11	Optipen Pensig	CS SI
1709Y	Capsule 250mg	50	5	*7.11	Optipen Pensig	CS SI
1843B	PHENINDIONE Tablet 10mg	100	2	6.24	Dindevan	GL
1844C	50mg	100	2	7.88	Dindevan	GL
1846E	PHENIRAMINE Tablet 10mg	50	2	3.84	Fenamine-M	FM
1847F	50mg	50	2	4.16	Avil Fenamine	HP FM
1848G	Paediatric Syrup 15mg per 5mL, 100mL	#1	4	3.84	Fenamine	FM

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	PHENOBARBITONE To be endorsed "S.P."			\$	
1850J	Tablet 30mg	200	2	4.46	DH,FM,SI
1853M	PHENOBARBITONE SODIUM Injection 200mg in 1mL	5	..	4.86	BL,FM
1862B	PHENOXYBENZAMINE To be accompanied by an authority from the Director of Health. Capsule 10mg	100	..	8.03	Dibenyline SK
1786B	PHENOXYMETHYLPENICILLIN Tablet 125mg	25	1	4.18	Abbocillin-V AB LPV CS
1787C	250mg	25	1	4.51	Abbocillin-VK AB Cilicaine VK SI LPV CS PVK LY P.V.O. FM
3028J	500mg	25	1	5.48	Abbocillin-VK AB LPV CS PVK LY P.V.O. FM
1789E	Capsule 250mg	25	1	4.51	Abbocillin-VK AB Cilicaine VK SI Falcopen VK FA LPV CS PVK LY P.V.O. FM
2965C	500mg	25	1	5.48	Cilicaine VK SI Falcopen VK FA LPV CS P.V.O. FM
2356B	Paediatric Suspension 125mg per 5mL, 100mL	≠1	1	4.39	Abbocillin-V AB Cilicaine V SI Falcopen V FA LPV 125 CS
2354X	Suspension 250mg per 5mL, 100mL	≠1	1	4.99	Abbocillin-V AB Cilicaine V SI Falcopen V FA LPV 250 CS
1702N	PHENOXYMETHYLPENICILLIN To be endorsed "S.P." Tablet 125mg	50	5	*6.23	Abbocillin-V AB LPV CS
	(continued)				

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
1703P	PHENOXYMETHYLPENICILLIN - cont. Tablet 250mg	50	5	\$ *6.89	Abbocillin-VK AB Cilicaine VK SI LPV CS PVK LY P.V.O. FM
1705R	Capsule 250mg	50	5	*6.89	Abbocillin-VK AB Cilicaine VK SI Falcopen VK FA LPV CS PVK LY P.V.O. FM
1863C	PHENSUXIMIDE Capsule 500mg	200	2	17.61	Milontin PD
1865E	PHENYLALANINE LOW CONTENT FORMULA To be endorsed "S.P." Powder 2.5 lb	2	5	*109.13	Lofenalac MJ
2455F	PHENYLEPHRINE Compound Ointment 60g	≠1	1	4.39	Hemorex WL
1869J	Compound Suppositories, 12	≠1	1	4.39	Hemorex WL
2829X	Eye Drops 0.12%, 15mL	≠1	2	4.18	Isopto Frin AQ Prefrin AG
2649K	10%, 5mL	≠1	..	4.99	Neo-Synephrine WL
1249R	PHENYTOIN Tablet 50mg	200	2	7.67	Dilantin Infatabs PD
2692Q	Paediatric Suspension 30mg per 5mL, 500mL	≠1	3	6.31	Dilantin PD
1872M	PHENYTOIN SODIUM Tablet 100mg	200	2	6.37	FM
1873N	Capsule 30mg	200	2	7.53	Dilantin Sodium PD
1874P	100mg	200	2	7.81	Dilantin Sodium PD
3035R	Injection 100mg in 2mL	1	..	6.78	Dilantin Sodium PD
1871L	250mg in 5mL	1	..	8.01	Dilantin Sodium PD
2466T	PHOLCODINE Linctus 0.1%, 100mL	≠1	2	3.71	Actuss SI Adaphol NN Duro-Tuss RK Pectolin FA Pholcolin DH Pholcolin Red DH Pholtrate MG Sedlingtus RT Tussinol GP PR,RT

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1879X	PHYSOSTIGMINE SALICYLATE Eye Drops 0.25%, 15mL	≠1	6	\$ 5.94	IQ	
1880Y	0.5%, 15mL	≠1	6	6.33	IQ	
1881B	PHYTOMENADIONE Injection 1mg	5	..	4.99	Konaktion	RO
1882C	10mg	5	..	6.91	Konaktion	RO
	PILOCARPINE To be accompanied by an authority from the Director of Health.					
2777E	Eye Disc 5mg (releasing 20 micrograms per hour)	8	..	34.27	Ocusert Pilo 20	PT
2782K	Eye Disc 11mg (releasing 40 micrograms per hour)	8	..	34.27	Ocusert Pilo 40	PT
2778F	PILOCARPINE HYDROCHLORIDE Eye Drops 0.5%, 15mL	≠1	6	4.47	Isopto Carpine Pilopt P.V. Carpine IQ	AQ SI AG
2595N	1%, 15mL	≠1	6	4.54	Isopto Carpine Pilopt P.V. Carpine IQ	AQ SI AG
2596P	2%, 15mL	≠1	6	4.79	Isopto Carpine Pilopt P.V. Carpine IQ	AQ SI AG
2597Q	3%, 15mL	≠1	6	5.06	Isopto Carpine Pilopt P.V. Carpine IQ	AQ SI AG
2598R	4%, 15mL	≠1	6	5.31	Isopto Carpine Pilopt P.V. Carpine IQ	AQ SI AG
2779G	6%, 15mL	≠1	6	5.94	Isopto Carpine Pilopt P.V. Carpine	AQ SI AG
	PINDOLOL To be endorsed "S.P."					
3065H	Tablet 15mg	50	2	12.46	Visken	SZ
3062E	PINDOLOL Tablet 5mg	100	2	9.92	Visken	SZ
3063F	Injection 400 micrograms in 2mL	5	..	7.19	Visken	SZ

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	PIZOTIFEN MALATE To be endorsed "S.P."			\$	
3074T	Tablet 500 micrograms (base)	100	2	11.49	Sandomigran SZ
1901C	PLAGUE VACCINE Injection 1,500 million organisms in 0.5mL	2	..	*9.93	CS
1902D	PNEUMOCOCCAL VACCINE, POLYVALENT To be endorsed "S.P." Injection 0.5mL	1	..	14.22	Pneumovax CS
2584B	POLYESTRADIOL To be endorsed "S.P." Injection set containing 40mg and 2mL solvent	1	..	9.03	Estradurin AY
1904F	POLYMYXIN B SULPHATE Ear Drops (Propylene Glycol Base) 10,000 Units per mL, 10mL	≠1	2	4.33	Aerosporin BW
1908K	POLYMYXIN B SULPHATE with BACITRACIN and NEOMYCIN Ear Drops 10,000 Units-500 Units- 3.5mg (base) per mL, 15mL	≠1	..	4.33	Neotracin ET
1910M	Eye Ointment 5,000 Units-400 Units-5mg per g, 4g	≠1	..	4.06	Mycitracin UP Neosporin BW
1911N	POLYMYXIN B SULPHATE with NEOMYCIN and GRAMICIDIN Eye Drops 5,000 Units-2.5mg-25 micrograms per mL, 10mL	≠1	2	4.59	Neosporin BW
2790W	POLYMYXIN B SULPHATE with NEOMYCIN and HYDROCORTISONE Ear Drops 10,000 Units-3.5mg (base)- 10mg per mL, 7mL	≠1	2	4.33	Aerocortin BW
2682E	POLYVINYL ALCOHOL Eye Drops 1.4%, 15mL	≠1	6	4.67	Liquifilm Tears AG
2681D	3%, 15mL	≠1	6	4.84	Liquifilm Forte AG
2373X	POTASSIUM To be accompanied by an authority from the Director of Health. Effervescent Tablet 6.5mmol K ⁺	100	..	4.87	Potavescent PT
2642C	POTASSIUM CHLORIDE Tablet 600mg (sustained release)	100	2	4.46	K-San PR Slow-K CG Span-K PT
3012M	Effervescent Tablet 14mmol K ⁺ and 8mmol Cl ⁻	30	2	4.59	Chlorvescent PT
	(continued)				

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
2625E	POTASSIUM CHLORIDE - cont. Elixir 1.5g (20mmol K ⁺ and 20mmol Cl ⁻) per 15mL, 500mL Injection Standard Maintenance Fluids - See Intravenous Infusions	≠1	2	\$ 4.81	Kay Ciel	SC
2336Y	PRALIDOXIME IODIDE Injection 500mg	5	..	15.11	AB	
1479W	PRazosin HYDROCHLORIDE Tablet 1mg (base)	100	2	8.69	Minipress	PF
1480X	2mg (base)	100	2	11.69	Minipress	PF
1478T	5mg (base)	100	2	17.51	Minipress	PF
3152X	PREDNISOLONE Tablet 1mg	100	1	4.59	Panafcortelone	PT
1917X	5mg	30	2	3.76 3.77	Panafcortelone Adnisolone Delta-Cortef Deltasolone Solone PR	PT NN UP US FM
1916W	25mg	30	1	5.82 5.83	Panafcortelone Solone	PT FM
1918Y	Eye Ointment 0.5%, 4g	≠1	..	4.46	Delta-Cortef	UP
	PREDNISOLONE ACETATE To be endorsed "S.P."					
1919B	Injection 10mg in 1mL	5	..	*9.93	Scherisolon	SC
2684G	PREDNISOLONE ACETATE Eye Drops 0.5%, 5mL	≠1	6	4.99	Sterofrin	AQ
	PREDNISOLONE ACETATE with PHENYLEPHRINE To be endorsed "S.P."					
3112T	Eye Drops 1%-0.12%, 10mL	≠1	2	6.24	Prednefrin Forte	AG
	PREDNISOLONE SODIUM PHOSPHATE To be endorsed "S.P."					
1920C	Retention Enema 20mg in 100mL	28	1	*60.73	Predsol	GL
2554K	Suppositories equivalent to 5mg prednisolone, 10	3	1	*18.06	Predsol	GL
1922E	PREDNISOLONE SODIUM PHOSPHATE Eye/Ear Drops 0.5%, 5mL	≠1	6	5.08	Predsol	GL
3099D	PREDNISOLONE STEAROYLGLYCOLATE Tablet 6.65mg	30	2	3.84	Sintisone	EC

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	PREDNISONE			\$		
1934T	Tablet 1mg	100	1	4.59	Panafcort	PT
1935W	5mg	30	2	3.76	Panafcort	PT
				3.77	DH Adasone Deltasone Sone PR	NN US FM
1936X	25mg	30	1	5.82 5.83	Panafcort Sone	PT FM
1937Y	PRIMAQUINE Tablet equivalent to 7.5mg base	42	..	6.36	IC	
1939C	PRIMIDONE Tablet 250mg	200	2	8.94	Midone Mysoline	PT IC
1940D	PROBENECID Tablet 500mg	100	2	10.06 10.08	Procid Benemid	PT FR
2653P	PROCAINAMIDE Capsule 250mg	100	2	7.47	Pronestyl	SQ
1074M	375mg	100	2	8.97	Pronestyl	SQ
1941E	Injection 100mg per mL, 10mL	2	..	*7.75	Pronestyl	SQ
1793J	PROCAINE PENICILLIN Injection BP, 1g	5	..	13.58	Aquacillin Cilicaine	FA SI
1794K	1.5g	5	..	13.71	Aquacillin Cilicaine	FA SI
	PROCARBAZINE To be accompanied by an authority from the Director of Health.					
2635Q	Capsule 50mg	100	..	20.17	Natulan	RO
2893G	PROCHLORPERAZINE Tablet 5mg	25	..	*3.24 *3.25	Anti-Naus Compazine Stemetil	PT SK MB
2369Q	Injection 12.5mg in 1mL	10	..	6.11	Compazine Stemetil	SK MB
2894H	Suppositories 5mg, 5	#1	..	4.18	Stemetil	MB
2895J	25mg, 5	#1	..	4.59	Stemetil	MB
	PROCHLORPERAZINE To be accompanied by an authority from the Director of Health.					
2897L	Tablet 5mg	100	..	4.78 4.81	Anti-Naus Compazine Stemetil	PT SK MB

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1943G	PROCYCLIDINE Tablet 5mg	100	2	\$ 6.91	Kemadrin	BW
1947L	PROGUANIL Tablet 100mg	100	2	5.77	Paludrine	IC
1950P	PROMETHAZINE Tablet 10mg	50	2	3.92	Phenergan	MB
1951Q	25mg	50	2	4.14 4.16	Meth-Zine Phenergan	PT MB
1949N	Mixture 5mg per 5mL, 100mL	≠1	4	3.84	Progan Prothazine	NN US
1948M	Injection 50mg in 2mL	10	..	*5.39	BL	
3049L	PROMETHAZINE THEOCLATE Tablet 25mg	30	1	4.38	Avomine	MB
1953T	PROPANTHELINE BROMIDE To be accompanied by an authority from the Director of Health.	100	..	5.28	Pantheline	PT
2899N	PROPRANOLOL To be endorsed "S.P."	50	2	9.28 9.34 12.11	Cardinol Deralin 160 Prolol Inderal	PT AF US IC
2565B	PROPRANOLOL Tablet 10mg	100	2	5.43 5.49 5.89	Cardinol Deralin 10 Angilol Prolol Inderal	PT AF BM US IC
2566C	40mg	100	2	7.36 7.42 8.96	Cardinol Deralin 40 Angilol Prolol Inderal	PT AF BM US IC
2830Y	Injection 1mg in 1mL	5	..	*8.28	Inderal	IC
1955X	PROPYLTHIOURACIL Tablet 50mg	100	2	6.71	ET	
1957B	PROTAMINE SULPHATE Injection 1%, 10mL	6	..	19.51	BT	
3056W	PROTEIN HYDROLYSATE FORMULA without PHENYLALANINE To be endorsed "S.P."	10	5	*316.13	Albumaid XP	SJ

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	PROTRIPTYLINE			\$		
2747N	Tablet 5mg	50	2	4.87	Concordin	MK
2748P	10mg	50	2	5.69	Concordin	MK
	PYRIDOSTIGMINE					
2724J	Tablet 10mg	100	2	6.84	Mestinon	RO
1959D	60mg	100	2	17.51	Mestinon	RO
2608G	180mg (sustained release)	100	1	33.17	Mestinon	RO
1960E	Injection 1mg in 1mL	5	1	4.98	Mestinon	RO
	PYRIDOXINE HYDROCHLORIDE To be endorsed "S.P."					
1965K	Tablet 25mg	100	..	4.87	Pydox DH,FM	PT
	PYRIDOXINE HYDROCHLORIDE Injection 50mg in 1mL	5	1	4.87	BL,FM	
	PRIMETHAMINE					
1966L	Tablet 25mg	50	..	5.69	Daraprim	BW
	PRIMETHAMINE with DAPSONE To be endorsed "S.P."					
1962G	Tablet 12.5mg-100mg	10	..	5.54	Maloprim	BW
	PRIMETHAMINE with SULFADOXINE To be endorsed "S.P."					
1958C	Tablet 25mg-500mg	12	..	7.28	Fansidar	RO
	QUINETHAZONE					
2337B	Tablet 50mg	50	2	5.86	Aquamox	LE
	QUINIDINE BISULPHATE					
2623C	Tablet 250mg (sustained release)	100	2	16.13	Kinidin	AP
	QUINIDINE SULPHATE					
1971R	Tablet 200mg	100	2	15.24 15.39	DH,PT Cardoquin Quinidis Quinidoxin PR, QE(NQ),To	NN US BW
3080D	300mg (sustained release)	100	2	21.38	Quinidex LA	RS
	QUININE BISULPHATE					
1972T	Tablet 300mg	50	..	9.09 9.18	Bi-Chinine Quinbisul PT Biquin Bi-Quinate Myoquin Quinbisan SI	DH AF NN US FM PR

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1975Y	QUININE SULPHATE Tablet 300mg	50	..	\$ 9.09	Chinine Quinsul PT DH AF
				9.18	Adaquin Quinate Quinocet Quinsan SI,TO NN US FM PR
	RANITIDINE HYDROCHLORIDE To be accompanied by an authority from the Director of Health.				
1978D	Tablet 150mg (base)	60	..	45.79	Zantac GL
1985L	RIBOFLAVINE Tablet 5mg	100	2	4.18	FM
	RIFAMPICIN To be accompanied by an authority from the Director of Health.				
1982H	Capsule 150mg	100	..	39.63	Rimycin 150 AF
1983J	300mg	100	..	77.13	Rimycin 300 AF
1987N	ROLITETRACYCLINE I.V. Injection set containing 275mg and 10mL solvent	5	..	*19.63	Reverin HP
1990R	I.M. Injection set containing 350mg and 2mL solvent	5	..	*19.63	Reverin HP
1991T	SACCHARIN or SACCHARIN SODIUM Tablets 30mg, 500	≠1	1	3.74 4.08	DH FA
1098T	SALBUTAMOL Tablet 4mg	100	2	7.59	Respolin Ventolin RK GL
1103C	Syrup 2mg per 5mL, 300mL	≠1	4	5.36	Respolin Ventolin RK GL
1099W	Capsule 200 micrograms (Oral Inhalation)	100	5	7.99	Ventolin Rotacaps GL
2003K	Inhalation Solution For use in RESPIRATOR 0.5%, 30mL	≠1	2	7.33	Respolin Ventolin RK GL
3087L	Inhalation, metered aerosol spray, 100 micrograms per dose (200 dose)	≠1	5	5.83	Respolin Ventolin RK GL
1993X	SALICYLAMIDE Tablet 500mg	100	2	4.18	PT
1995B	SENEGA and AMMONIA Mixture APF, 200mL	≠1	4	3.77 3.84	Senamon MG,RT,SI,SL(NQVW) PR,QE(NQ),TO DH

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	SILVER SULPHADIAZINE with CHLORHEXIDINE GLUCONATE To be accompanied by an authority from the Director of Health.			\$	
1998E	Cream 1%-0.2%, 500g	#1	..	23.93	Silvazine SN
2945B	SODIUM ACID CITRATE Mixture 5.5g per 20mL, 500mL	#1	4	4.87	Citralka PD
2013Y	SODIUM AUROTHIOMALATE Injection 1mg	5	..	*13.39	Myocrisin MB
2015C	5mg	5	..	*15.93	Myocrisin MB
2016D	10mg	5	..	*18.90	Myocrisin MB
2017E	20mg	10	1	39.63	Myocrisin MB
2018F	50mg	10	1	68.32	Myocrisin MB
3015Q	SODIUM BICARBONATE Injection 8.4%, 100mL	5	..	*16.03	AB
	4.2%, 500mL - See Intravenous Infusions				
2023L	SODIUM CALCIUMEDETATE Tablet 500mg	100	2	17.22	Calcium Disodium Versenate RK
2024M	SODIUM CHLORIDE Injection 0.9%, 2mL	5	1	3.87	BL,BT
2025N	0.9%, 5mL	5	1	4.08	BL,BT
2026P	0.9%, 10mL	5	1	4.42	BL,BT
	1L size - See Intravenous Infusions				
	SODIUM CHLORIDE and GLUCOSE See Intravenous Infusions				
	SODIUM CHLORIDE COMPOUND See Intravenous Infusions				
2657W	SODIUM CITRO-TARTRATE Effervescent Granules 100g	#1	4	4.87	Citravescent Sachets PT Ural Sachets AB
2878L	SODIUM CROMOGLYCATE Capsule 20mg (Oral Inhalation)	100	5	18.18	Intal Spincaps FC
	SODIUM CROMOGLYCATE To be endorsed "S.P."				
1124E	Nebuliser Solution 20mg per 2mL, ampoule	48	2	19.92	Intal FC
	(continued)				

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	SODIUM CROMOGLYCAT - cont. To be accompanied by an authority from the Director of Health.			\$		
1127H	Eye Drops 2%, 10mL	¶1	..	7.94	Opticrom	FC
	SODIUM LACTATE See Intravenous Infusions					
	SODIUM LACTATE COMPOUND See Intravenous Infusions					
	SODIUM LACTATE COMPOUND and ANHYDROUS GLUCOSE See Intravenous Infusions					
1100X	SODIUM NITROPRUSSIDE Infusion 50mg	10	..	47.08	Nipride	RO
2035D	SODIUM SALICYLATE Tablet 300mg (enteric coated)	100	2	4.87	Rhumax	PR
2036E	500mg (enteric coated)	100	2	5.22	Rhumax	PR
2037F	600mg (enteric coated)	100	2	5.54	Ensalate Rhumax	RC PR
	SODIUM VALPROATE To be endorsed "S.P."					
1261J	Tablet 200mg	200	2	*40.41	Epilim	RC
2289L	200mg (enteric coated)	200	2	*40.41	Epilim EC	RC
2290M	500mg (enteric coated)	100	2	41.96	Epilim EC	RC
2291N	Syrup 200mg per 5mL, 200mL	¶1	2	12.04	Epilim	RC
	SOYA FORMULA To be accompanied by an authority from the Director of Health.					
2040J	Liquid 375mL	5	20	*7.83	ProSobee	MJ
2039H	384mL	5	20	*7.83	Isomil	RD
2042L	Powder 500g	¶1	20	7.78	Infasoy	WY
3090P	SPECTINOMYCIN Injection 2g with 3.2mL diluent	1	..	8.56	Trobicin	UP
3091Q	4g with 6.5mL diluent	1	..	13.06	Trobicin	UP
	SPIRONOLACTONE To be accompanied by an authority from the Director of Health.					
2339D	Tablet 25mg	100	..	11.22 11.28	Spirotone Aldactone	PT SR
	STANDARD MAINTENANCE FLUID See Intravenous Infusions					

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
2045P	STAPHYLOCOCCUS TOXOID (FORMALINISED) Injection Diluted 1 in 10 for use in initial injection 5mL	1	..	\$ 8.51	CS	
2046Q	Undiluted 5mL	1	..	9.28	CS	
2050X	STILBOESTROL Tablet 500 micrograms	100	2	3.79	HA	
2051Y	1mg	100	2	3.92	HA	
2052B	5mg	100	2	4.12	DH,HA	
2053C	10mg	100	2	4.98	HA	
3130R	STREPTOKINASE Injection 100,000 I.U. (solvent required)	2	..	*48.39	Kabikinase	PS
2906Y	250,000 I.U. (solvent required)	2	..	*78.91 *83.61	Streptase Kabikinase	HP PS
2962X	600,000 I.U. (solvent required)	5	..	*415.88	Kabikinase	PS
2907B	750,000 I.U. (solvent required)	5	..	*488.83	Streptase	HP
2054D	STREPTOMYCIN SULPHATE Injection 1g (solvent required)	5	3	6.91	GL	
2055E	SUCRALFATE To be accompanied by an authority from the Director of Health. Tablet 1g	120	1	29.14	Ulsanic	DT
2047R	SULINDAC To be endorsed "S.P." Tablet 100mg	50	2	6.89	Clinoril	FR
2063N	SULPHACETAMIDE SODIUM Eye Drops 10%, 15mL	≠1	2	4.33	Acetopt Bleph 10 IQ	SI AG
2513G	15%, 15mL	≠1	2	4.33	Isopto Cetamide	AQ
2064P	20%, 15mL	≠1	2	4.33	Acetopt	SI
2068W	SULPHADIAZINE Tablet 500mg	40	2	4.37	PT	
2074E	SULPHADIMIDINE Tablet 500mg	40	2	4.52	S-Dimidine	PT
2077H	SULPHAFURAZOLE Tablet 500mg	40	2	4.87	Gantrisin Sulfazole	RO PT
2078J	Eye Drops 4%, 10mL	≠1	2	4.33	Gantrisin	RO
2079K	Eye Ointment 4%, 5g	≠1	..	4.06	Gantrisin	RO

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
2083P	SULPHAMETHIZOLE Tablet 250mg	40	2	\$ 4.46	PT	
2084Q	500mg	40	2	5.48 5.62	PT Urolucosil	WW
2081M	1g	20	2	5.47	Urolucosil	WW
2862P	Paediatric Suspension 100mg per 5mL, 100mL	≠1	1	5.12	Urolucosil	WW
2561T	SULPHAMETHOXAZOLE Tablet 500mg	20	1	4.37	Gantanol	RO
2092D	SULPHAPYRIDINE Tablet 500mg	100	..	7.39	M&B 693	MB
2093E	SULPHASALAZINE To be endorsed "S.P." Tablet 500mg	200	5	*25.95	Salazopyrin	PS
2096H	500mg (enteric coated)	200	5	*25.95	Salazopyrin-EN	PS
2094F	SULPHINPYRAZONE To be accompanied by an authority from the Director of Health. Tablet 100mg	100	..	11.43	Anturan	CG
2099L	SULTHIAME Tablet 50mg	200	1	8.29	Ospolot	BN
2100M	200mg	200	1	15.11	Ospolot	BN
2238T	SURGICAL CEMENT To be endorsed "S.P." Skin Bond Adhesive 4fl oz	≠1	2	7.58	DY	
2473E	Solvent 200mL	≠1	..	5.28	Zoff	SN
2467W	227mL	≠1	2	6.17	Unisolve	DY
2469Y	240mL	≠1	2	5.76	Sacsol	EG
2472D	250mL	≠1	2	6.08	Sacsol Non Flammable	EG
2109B	TAMOXIFEN CITRATE To be accompanied by an authority from the Director of Health. Tablet 10mg (base)	30	..	22.56	Nolvadex	IC
2108Y	TEMAZEPAM Capsule 10mg	25	..	3.92	Euhypnos Normison	SI WY

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1028D	TERBUTALINE SULPHATE Tablet 5mg	100	2	\$ 7.59	Bricanyl	AP
1030F	Elixir 300 micrograms per mL, 300mL	≠1	4	5.42	Bricanyl	AP
1239F	Injection 100 micrograms in 1mL	5	..	5.83	Bricanyl	AP
1034K	500 micrograms in 1mL	5	..	5.96	Bricanyl	AP
1240G	Inhalation, metered aerosol spray, 250 micrograms per dose (400 dose)	≠1	5	8.01	Bricanyl	AP
1243K	Nebuliser Solution 1%, 50mL	≠1	2	10.61	Bricanyl	AP
	TESTOSTERONE ENANTHATE To be endorsed "S.P."					
2599T	Injection 100mg in 1mL	3	1	12.99	Primoteston Depot	SC
2114G	250mg in 1mL	3	1	27.06	Primoteston Depot	SC
	TESTOSTERONE ESTERS To be endorsed "S.P."					
2670M	Injection 100mg	3	1	13.58	Sustanon "100"	OR
2101N	250mg	3	1	26.56	Sustanon "250"	OR
	TESTOSTERONE PROPIONATE To be endorsed "S.P."					
2115H	Injection 25mg in 1mL	9	..	*8.85	Testoviron	SC
2116J	50mg in 1mL	9	..	*13.83	Testoviron	SC
	TETANUS VACCINE, ADSORBED					
2127Y	Injection 0.5mL	3	..	*6.45	CS	
	TETRABENAZINE To be accompanied by an authority from the Director of Health.					
1330B	Tablet 25mg	100	..	12.72	Nitoman	RO
	TETRACOSACTRIN To be accompanied by an authority from the Director of Health.					
3083G	Injection 500 micrograms in 1mL	5	..	15.04	Synacthen Depot	CG
2832C	1mg in 1mL	5	..	*21.88	Synacthen Depot	CG
	TETRACYCLINE					
2134H	Capsule 250mg	25	..	4.93	Achromycin Australmycin Panmycin P Tetramykoin	LE CS UP BZ(N)
	(continued)					

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
2135J	TETRACYCLINE - cont. To be endorsed "S.P." Capsule 250mg	50	5	\$ *7.73	Achromycin LE Australamycin CS Panmycin P UP Tetramykoin BZ(N)
2151F	TETRACYCLINE with NYSTATIN Capsule 250mg-250,000 Units	25	..	4.93	Achrostatin LE Comycin UP Mystecclin-V SQ Tetrex-F BC
2152G	TETRACYCLINE with NYSTATIN To be endorsed "S.P." Capsule 250mg-250,000 Units	50	5	*7.73	Achrostatin LE Comycin UP Mystecclin-V SQ Tetrex-F BC
2145X	TETRACYCLINE (BUFFERED) Capsule 250mg	25	..	4.93	Achromycin V LE Australamycin-V CS Hostacycline P HP Hydracycline FM Steclin-V SQ Tetrex BC
2146Y	TETRACYCLINE (BUFFERED) To be endorsed "S.P." Capsule 250mg	50	5	*7.73	Achromycin V LE Australamycin-V CS Hostacycline P HP Hydracycline FM Steclin-V SQ Tetrex BC
2611K	THEOPHYLLINE Tablet 50mg	100	2	4.46	Nuelin Paediatric RK
1143E	125mg	100	2	5.28	Nuelin RK
2615P	200mg	100	2	5.89	Nuelin RK
2632M	200mg (sustained release)	50	2	4.98	Theo-Dur AP
2634P	250mg (sustained release)	50	2	5.43	Nuelin-S.R. 250 RK
2633N	300mg (sustained release)	50	2	5.84	Theo-Dur AP
2612L	Capsule 200mg	100	2	5.89	Elixophyllin SC
2613M	Elixir 80mg per 15mL, 500mL	≠1	4	4.59	Elixophyllin SC
2614N	Syrup 80mg per 15mL, 500mL	≠1	4	4.59	Nuelin RK
2669L	THEOPHYLLINE with GUAIPHENESIN Capsule 150mg-90mg (continued)	100	2	5.48	Quibron MJ

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
2985D	THEOPHYLLINE with GUAIPHENESIN - cont. Elixir 150mg-90mg per 15mL, 500mL	#1	4	\$ 4.94	Quibron MJ
2976P	THEOPHYLLINE with POTASSIUM IODIDE Oral Liquid 80mg-130mg per 15mL, 500mL	#1	4	4.73	Elixophyllin-KI SC
2947D	THIABENDAZOLE Tablet 500mg	16	..	6.67	Mintezol MK
1069G	THIAMINE HYDROCHLORIDE Tablet 50mg	100	2	4.24 4.26	PT Betamin Betatabs-50 Invite-B DH, PR US FM NN
1070H	100mg	100	2	4.79 4.81	PT Betamin Betatabs-100 Invite-B Thiminone PR, QE(NQ) US FM NN LF
1065C	Injection 100mg in 1mL	5	1	4.67	Beta-Sol FM
2572J	THIETHYLPERAZINE Tablet 6.5mg (base)	50	..	4.56	Torecan SZ
2368P	Injection 6.5mg (base) in 1mL	10	..	*6.95	Torecan SZ
2573K	Suppositories 6.5mg (base), 6	#1	..	4.27	Torecan SZ
1233X	THIOGUANINE Tablet 40mg	25	1	52.46	Lanvis BW
3159G	THIOPROPAZATE To be endorsed "S.P." Tablet 5mg	100	1	7.82	Dartalan SR
2163W	THIORIDAZINE To be endorsed "S.P." Tablet 10mg	100	1	4.26	Melleril SZ
2359E	25mg	100	1	5.08	Melleril SZ
2164X	50mg	100	1	6.87	Melleril SZ
2165Y	100mg	100	1	10.94	Melleril SZ
2402K	Oral Solution 3% (30mg per mL), 30mL	#1	4	5.83	Melleril SZ
2847W	Injection 25mg per mL, 2mL	10	..	7.32	Melleril SZ
2345K	THIOTEPA Injection 15mg (solvent required)	2	1	*18.89	LE
2858K	Eye Drops Set containing 15mg vial, 2 x 10mL ampoules sterile water, syringe with needle and 15mL dropper bottle	#1	5	#17.29	LE

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
2174K	THYROXINE SODIUM (BP 1980) Tablet 50 micrograms	100	2	\$ 3.84	Oroxine Thyroxinal	BW FM
2175L	100 micrograms	100	2	3.98	Oroxine Thyroxinal	BW FM
2173J	200 micrograms	100	2	4.33	Oroxine Thyroxinal	BW FM
	TICARCILLIN To be accompanied by an authority from the Director of Health.					
2176M	Injection 3g (solvent required)	5	..	61.14 61.17	Ticillin Tarcil	CS BR
1281K	TIMOLOL Tablet 5mg	100	2	9.92	Blocadren	FR
1278G	Eye Drops 0.25%, 5mL	#1	6	8.97	Timoptol	FR
1279H	0.5%, 5mL	#1	6	9.98	Timoptol	FR
1465D	TINIDAZOLE Tablet 500mg	4	..	5.51	Fasigyn	PF
	TOBRAMYCIN SULPHATE To be accompanied by an authority from the Director of Health.					
1355H	Injection 40mg	5	..	*20.78	Nebcin	LY
1356J	80mg	5	..	*31.53	Nebcin	LY
2720E	TOLAZAMIDE Tablet 250mg	100	2	10.33	Tolinase	UP
2178P	TOLBUTAMIDE Tablet 500mg	100	2	5.22 5.28	Diatol Rastinon	PT HP
2607F	1g TRANEXAMIC ACID To be accompanied by an authority from the Director of Health.	100	2	8.22	Rastinon	HP
2180R	Tablet 500mg	100	..	37.39	Cyklokapron	PS
	TRANLYCYPROMINE To be accompanied by an authority from the Director of Health. CAUTION: This drug is a monoamine oxidase inhibitor.					
2444P	Tablet 10mg	50	..	6.59	Parnate	SK

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	TRIAMCINOLONE ACETONIDE To be endorsed "S.P."			\$		
2990J	Injection 10mg in 1mL	5	..	11.84	Kenacort-A10	SQ
2119M	TRIAMCINOLONE ACETONIDE Cream 0.02%, 45g	≠1	..	4.17	Kenalone 0.02%	SQ
2117K	0.02%, 100g	≠1	..	4.73	Aristocort 0.02% Kenalone 0.02%	LE SQ
2125W	0.05%, 15g	≠1	1	3.79	Aristocort 0.05% Kenalone	LE SQ
2120N	Ointment 0.02%, 45g	≠1	..	4.17	Kenalone 0.02%	SQ
2118L	0.02%, 100g	≠1	..	4.73	Aristocort 0.02% Kenalone 0.02%	LE SQ
2126X	0.05%, 15g	≠1	1	3.79	Aristocort 0.05% Kenalone	LE SQ
2971J	TRIAMCINOLONE ACETONIDE with NEOMYCIN SULPHATE, GRAMICIDIN and NYSTATIN Ear Drops 0.1%-0.25% (base)-0.025%- 100,000 Units per g, 7.5mL	≠1	2	4.33	Kenacomb Otic	SQ
2973L	Ear Cream 0.1%-0.25% (base)-0.025%- 500,000 Units in 5g	≠1	2	4.18	Kenacomb Otic	SQ
2974M	Ear Ointment 0.1%-0.25% (base)- 0.025%-500,000 Units in 5g	≠1	2	4.18	Kenacomb Otic	SQ
2342G	TRIAMTERENE Tablet 100mg	50	2	6.63	Dytac	SK
2185B	TRIFLUOPERAZINE To be endorsed "S.P." Tablet 1mg	100	1	5.63	Calmazine Stelazine	PT SK
2386N	2mg	100	1	6.99	Calmazine Stelazine	PT SK
2186C	5mg	100	1	7.51	Calmazine Stelazine	PT SK
2835F	Injection 1mg in 1mL	10	..	6.49	Stelazine	SK
2676W	TRIGLYCERIDES, MEDIUM CHAIN To be accompanied by an authority from the Director of Health. Lactalbumin Demineralised Powder 400g	2	..	*30.69	Alfaré	NT
2686J	Compound Powder 450g	2	..	*27.75	Portagen	MJ
2679B	Protein Hydrolysate Compound Powder 454g	2	..	*30.69	Pregestimil	MJ

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
2187D	TRIMEPRAZINE Tablet 10mg	50	2	\$ 4.33	Vallergan	MB
2189F	TRIMETAPHAN Injection set containing 250mg and 5mL water for injections	3	..	18.87	Arfonad	RO
2922T	TRIMETHOPRIM To be endorsed "S.P." Tablet 300mg	7	..	5.62	Methoprim Triprim	PT BW
2949F	TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	4.52	Bactrim Septrin Trib	RO BW PT
2951H	160mg-800mg	10	..	5.62	Bactrim DS Septrin Forte Trib DS	RO BW PT
3103H	Suspension 40mg-200mg per 5mL, 100mL	≠1	..	5.12	Bactrim Septrin Trib	RO BW PT
2969G	TRIMIPRAMINE To be accompanied by an authority from the Director of Health. Capsule 50mg	50	..	5.34	Surmontil	MB
2970H	TRIMIPRAMINE Tablet 25mg	50	2	4.83	Surmontil	MB
1570P	TRIOXYSALEN To be endorsed "S.P." Tablet 5mg	100	2	23.31	Trisoralen	PT
2203Y	TRI-POTASSIUM DI-CITRATO BISMUTHATE COMPLEX To be accompanied by an authority from the Director of Health. Tablet 107.7mg (Bi)	112	1	18.89	De-Nol	PD
2205C	Mixture 156mg (Bi) per 5mL, 500mL	≠1	1	13.17	Ulcaron	SH
2191H	TRIPROLIDINE Tablet 2.5mg	50	2	4.33	Actidil	BW
2800J	TYPHOID VACCINE Injection 0.5mL	2	..	*5.45	CS	
2195M	TYPHUS VACCINE Injection 1mL	2	..	*43.23	CS	

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
1293C	UREA Cream 10%, 100g	≠1	2	\$ 6.59	Aquacare H.P.	AG
	VANCOMYCIN To be endorsed "S.P."				Aquadrate	NW
					Calmurid	PS
					Nutraplus	OL
3131T	Injection 500mg (solvent required)	5	..	*81.33	Vancocin	LY
2197P	VASOPRESSIN TANNATE Oily Injection 5 Units in 1mL	10	1	*27.85	Pitressin Tannate	PD
	VERAPAMIL HYDROCHLORIDE To be endorsed "S.P."					
1248Q	Tablet 40mg	100	2	8.83 9.57	Verpamil	PT
					Cordilox	SC
					Isoptin	KN
1250T	80mg	100	2	12.81 13.82	Verpamil	PT
					Cordilox	SC
					Isoptin	KN
1060T	Injection 5mg in 2mL	5	..	6.02	Cordilox	SC
					Isoptin	KN
	VIDARABINE To be endorsed "S.P."					
2570G	Eye Ointment 3%, 3.5g	≠1	..	11.29	Vira A	PD
	VINBLASTINE Injection 10mg (solvent required)	2	..	*47.51	Velbe	LY
	VINCRISTINE Injection set containing 1mg and 10mL solvent	5	..	*101.83	Oncovin	LY
2371T						
2372W	5mg and 10mL solvent	1	..	87.43	Oncovin	LY
	VITAMIN SUPPLEMENT To be accompanied by an authority from the Director of Health.					
3156D	Tablet	100	..	5.48	Ketovite	ST
3157E	Liquid 100mL	≠1	..	4.07	Ketovite	ST
	WARFARIN Tablet 1mg	50	2	5.54	Coumadin	DT
					Marevan	GL
2209G	2mg	50	2	5.76	Coumadin	DT
2210H	2.5mg	50	2	5.89	Coumadin	DT
2844Q	3mg	50	2	5.69	Marevan	GL
2211J	5mg	50	2	5.96	Coumadin	DT
					Marevan	GL
(continued)						

Code	Name, Manner of Administration Restriction and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
2212K	WARFARIN - cont. Tablet 7.5mg	50	2	\$ 6.76	Coumadin DT
2213L	10mg	50	2	7.94	Coumadin DT
2216P	WATER FOR INJECTIONS Injection 2mL	5	3	3.79	BL,BT,BZ,SI
2217Q	5mL	5	3	3.94	BL,BT,BZ,SI
2218R	10mL	5	3	4.18	BL,BT,BZ,SI
2219T	WOOL ALCOHOLS Ointment 100g	≠1	1	3.92	Eucerin SN
2221X	WOOL FAT, HYDROUS 50g tube or jar	≠1	..	4.06	SI
3154B	ZINC with PHENYLEPHRINE Eye Drops 0.25%-0.12%, 15mL	≠1	2	4.18	Prefrin-Z Zincfrin AG AQ
2984C	ZINC OXIDE Compound Ointment 50g	≠1	1	4.39	Anusol WW
1122C	Compound Suppositories, 12	≠1	1	4.39	Anusol WW

INTRAVENTOUS INFUSIONS FOR INJECTION

70

Code	Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
2305H	DEXTRAN 40 10% with 5% anhydrous glucose, 500mL	12	..	\$ *169.89	Lomodex FC
2304G	10% with 5% glucose, 500mL	12	..	178.43	Rheomacrodex PS
2306J	10% with 0.9% sodium chloride, 500mL	12	..	178.43	Rheomacrodex PS
3081E	DEXTRAN 70 6% with 5% glucose, 500mL	12	..	114.32	Macrodex PS
3011L	6% with 0.9% sodium chloride, 500mL	12	..	114.32	Macrodex PS
3199J	ELECTROLYTE REPLACEMENT SOLUTION 1L	2	1	*9.59	Normosol R Plasma-Lyte 148 AB TV
2245E	GLUCOSE 5%, 1L	5	1	*17.53	AB,TV
2247G	10%, 1L	5	1	*19.88	AB,TV
2249J	20%, 1L	2	1	*9.59	AB,TV
2251L	25%, 1L	2	1	*9.59	AB,TV
2252M	50%, 500mL	2	1	*8.31	AB
2589G	MANNITOL 10%, 1L	1	1	6.14	AB
2590H	20%, 500mL	1	1	6.14	AB
3029K	SODIUM BICARBONATE 4.2%, 500mL	1	1	5.69	AB
2264E	SODIUM CHLORIDE 0.9%, 1L	5	1	*17.53	AB,TV,VF(N)
2260Y	3%, 1L	2	1	*9.59	AB,TV
2262C	5%, 1L	2	1	*9.59	TV
2266G	SODIUM CHLORIDE COMPOUND BPC 1959 1L	4	1	*16.45	AB,TV
2271M	SODIUM CHLORIDE and GLUCOSE 0.9%-5%, 1L	2	1	*9.59	AB,TV
2278X	0.45%-2.5%, 500mL	5	1	*17.53	AB,TV
2279Y	0.225%-3.75%, 500mL	5	1	*17.53	AB,TV
2281C	0.18%-4%, 1L	5	1	*17.53	AB,TV
2282D	0.18%-4.3%, 1L	5	1	*17.88	AB
2284F	SODIUM LACTATE (Solution 1/6 Molar) 1L	5	1	*20.43	VF
2286H	SODIUM LACTATE COMPOUND 1L	5	1	*17.53	AB,TV

INTRA VENOUS INFUSIONS FOR INJECTION

71

Code	Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	SODIUM LACTATE COMPOUND and ANHYDROUS GLUCOSE			\$	
2288K	5%, 1L	2	1	*9.59	AB,TV
2293Q	STANDARD MAINTENANCE FLUID 500mL	6	..	*18.39	AB

PREPARATIONS WHICH MAY BE PRESCRIBED BY PARTICIPATING DENTAL PRACTITIONERS
FOR DENTAL TREATMENT ONLY

72

Code	Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	AMOXYCILLIN			\$	
3303W	Tablet 250mg	20	..	6.04	Amoxil BR
3301R	Capsule 250mg	20	..	6.04	Amoxil BR Moxacin CS
3302T	Powder for Syrup 125mg per 5mL, 100mL	≠1	..	#6.74	Amoxil BR Moxacin CS
	AMPHOTERICIN				
3305Y	Tablet 100mg	50	..	9.44	Fungilin SQ
3306B	Lozenge 10mg	20	..	4.33	Fungilin SQ
3307C	Suspension 100mg per mL, 24mL	≠1	..	5.14	Fungilin SQ
3308D	Ointment 3%, 15g	≠1	..	4.59	Fungilin SQ
	AMPICILLIN				
3312H	Injection 250mg (solvent required)	5	..	6.59 6.66	Ampicyn PT Austrapen CS
3313J	500mg (solvent required)	5	..	8.62 8.69	Ampicyn PT Austrapen CS
3314K	1g (solvent required)	5	..	12.72 12.79	Ampicyn PT Austrapen CS
	ASPIRIN				
7001L	Mixture, APF - See Section 4, Standard Formulae Preparations				
7003N	Mixture for Children, APF - See Section 4, Standard Formulae Preparations				
	ASPIRIN with CODEINE				
7002M	Aspirin Mixture, APF with Codeine Phosphate 30mg per 10mL - See Section 4, Standard Formulae Preparations				
	DOXYCYCLINE				
3321T	Tablet 100mg	7	..	5.28	Vibramycin PF
3322W	Capsule 100mg	7	..	5.22 5.28	Cyclidox PT Doxin GP
	ERYTHROMYCIN				
3324Y	Tablet 250mg	25	..	5.87	EMU-V UP
3329F	Capsule 125mg	25	..	4.87	Eryc FA
3325B	250mg	25	..	5.87	Eryc FA Ilocap LY

PREPARATIONS WHICH MAY BE PRESCRIBED BY PARTICIPATING DENTAL PRACTITIONERS
FOR DENTAL TREATMENT ONLY

73

Code	Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
	ERYTHROMYCIN ESTOLATE			\$	
3331H	Paediatric Drops 100mg (base) per mL, 10mL	≠1	..	4.81	Ilosone LY
3335M	Paediatric Suspension 125mg (base) per 5mL, 100mL	≠1	..	5.13	Eromycin Ilosone DL LY
3327D	ERYTHROMYCIN ETHYLSUCCINATE Tablet 200mg (base)	25	..	5.26	EES Dulcet AB
3334L	Granules for Paediatric Suspension 200mg (base) per 5mL, 100mL	≠1	..	#6.89	EES 200 AB
3328E	ERYTHROMYCIN STEARATE Tablet 250mg (base)	25	..	5.87	Erythrocin AB
3330G	Capsule 250mg (base)	25	..	5.83 5.87	E-Mycin PT Erythrocin AB
3332J	Paediatric Suspension 125mg (base) per 5mL, 100mL	≠1	..	5.13	Erythrocin AB
3333K	Suspension 250mg (base) per 5mL, 100mL	≠1	..	6.99	Erythrocin AB
3339R	METRONIDAZOLE Tablet 200mg	21	..	4.87 4.93	Trichozole PT Flagyl MB
3342X	NYSTATIN Tablet 500,000 Units	25	..	*6.53	Diastatin GP Mycostatin SQ Nilstat LE
3343Y	Mixture 100,000 Units per mL, 24mL	≠1	..	5.14	Mycostatin SQ Nilstat LE
3348F	PARACETAMOL Mixture 120mg per 5mL, 100mL	≠1	..	3.84	Dymadon BW Panamax WL Parmol US
3350H	PHENETHICILLIN Tablet 125mg	25	..	4.18	Pensig SI
3351J	250mg	25	..	4.62	Optipen CS Pensig SI
3353L	Capsule 250mg	25	..	4.62	Optipen CS Pensig SI
3354M	500mg	25	..	5.66	Optipen CS Pensig SI
3355N	Powder for Syrup 125mg per 5mL, 100mL	≠1	..	#5.34	Pensig 125 SI
3356P	250mg per 5mL, 100mL	≠1	..	#6.00	Pensig 250 SI

PREPARATIONS WHICH MAY BE PRESCRIBED BY PARTICIPATING DENTAL PRACTITIONERS
FOR DENTAL TREATMENT ONLY

74

Code	Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer	
	PHENOXYMETHYLPENICILLIN			\$		
3359T	Tablet 125mg	25	..	4.18	Abbocillin-V LPV	AB CS
3360W	250mg	25	..	4.51	Abbocillin-VK Cilicaine VK LPV PVK P.V.O.	AB SI CS LY FM
3361X	500mg	25	..	5.48	Abbocillin-VK LPV PVK P.V.O.	AB CS LY FM
3363B	Capsule 250mg	25	..	4.51	Abbocillin-VK Cilicaine VK Falcopen VK LPV PVK P.V.O.	AB SI FA CS LY FM
3364C	500mg	25	..	5.48	Cilicaine VK Falcopen VK LPV P.V.O.	SI FA CS FM
3365D	Paediatric Suspension 125mg per 5mL, 100mL	#1	..	4.39	Abbocillin-V Cilicaine V Falcopen V LPV 125	AB SI FA CS
3366E	Suspension 250mg per 5mL, 100mL	#1	..	4.99	Abbocillin-V Cilicaine V Falcopen V LPV 250	AB SI FA CS
	PROCAINE PENICILLIN					
3370J	Injection BP, 1g	5	..	13.58	Aquacillin Cilicaine	FA SI
3371K	1.5g	5	..	13.71	Aquacillin Cilicaine	FA SI
	SULPHADIMIDINE					
3379W	Tablet 500mg	40	..	4.52	S-Dimidine	PT
	TETRACYCLINE					
3383C	Capsule 250mg	25	..	4.93	Achromycin Australmycin Panmycin P Tetramykoin	LE CS UP BZ(N)

PREPARATIONS WHICH MAY BE PRESCRIBED BY PARTICIPATING DENTAL PRACTITIONERS
FOR DENTAL TREATMENT ONLY

75

Code	Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
3386F	TETRACYCLINE (BUFFERED) Capsule 250mg	25	..	\$ 4.93	Achromycin V LE Australamycin-V CS Hostacycline P HP Hydracycline FM Stecclin-V SQ Tetrex BC
3389J	TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	4.52	Bactrim RO Septrin BW Trib PT
3390K	160mg-800mg	10	..	5.62	Bactrim DS RO Septrin Forte BW Trib DS PT
3391L	Suspension 40mg-200mg per 5mL, 100mL	≠1	..	5.12	Bactrim RO Septrin BW Trib PT
	WATER FOR INJECTIONS (For use only with an injectible benefit which requires a solvent)				
3394P	Injection 2mL	5	..	3.79	BL,BT,BZ,SI
3395Q	5mL	5	..	3.94	BL,BT,BZ,SI

SECTION 3 - SCHEDULE OF BENEFITS

**Preparations available for Colostomy
and Ileostomy use**

**Preparations available for use by Paraplegic
and Quadriplegic Patients**

PREPARATIONS AVAILABLE FOR COLOSTOMY AND ILEOSTOMY USE
(Prescriptions must be endorsed "S.P.")

2

Code	Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
2223B	ACRYLIC RESIN Solution 125g Aerosol Spray	#1	..	\$ 9.64	Nobecutane AP
2683F	BENZOIN Compound Tincture 35%, 167mL Aerosol Spray	#1	..	6.31	EG
2680C	BUTYL MONOESTER POLYMER with ETHANOL Paste 60g	#1	..	8.64	Stomahesive SQ
2503R	BUTYL MONOESTER POLYMER with ISOPROPYL ALCOHOL Protective Dressing Aerosol 120g	#1	..	11.26	Skin-Prep DY
2504T	Solution 59mL	#1	..	9.13	Skin-Prep DY
2510D	Wipes, 50	#1	..	12.76	Skin-Prep DY
2326K	CARMELLOSE SODIUM with PECTIN and GELATIN Paste 16.7%-16.7%-16.7%, 15g	#1	..	4.73	Orabase SQ
2327L	Powder 33.3%-33.3%-33.3%, 15g	#1	..	4.61	Orahesive SQ
2718C	CHARCOAL, ACTIVATED Tablet 300mg	500	1	15.04	Char-Bons QE(NQ),TO LF
2229H	CHLORAMINE Deodorant Tablet 120mg	500	..	6.59	Klortee PT
2230J	Powder 25g	#1	4	4.06	Klortee PT
3125L	DEODORANT CONCENTRATE Liquid 15mL	#1	..	4.68 4.69	Zerodor Odortrol ZR LA
3127N	0.5 fl oz	#1	..	4.69	Banish DY
2879M	DEODORANT DETERGENT SOLUTION Solution, Lauryldimethylbenzyl ammonium chloride 12.5g, "TERIC" N8, 125g in 500mL	#1	..	5.76	TAGG EG
2617R	DIMETHICONE Solution 10%, 180mL Aerosol Spray	#1	..	6.31	Silicon Skin Spray EG
2233M	Cream 10%, 50g				
2618T	10%, 75g See Section 2				
2505W	ISOPROPYL MONOESTER POLYMER with ISOPROPYL ALCOHOL Adhesive Protective Gel 28.35g	#1	..	6.11	Skin Gel HO

PREPARATIONS AVAILABLE FOR COLOSTOMY AND ILEOSTOMY USE
(Prescriptions must be endorsed "S.P.")

3

Code	Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
3146N	POLYISOBUTYLENE Compound Adhesive Wafers, 5	#1	5	\$ 12.03	Hollihesive Skin Barrier HO
3148Q	Compound Adhesive Wafers with Adhesive Discs, 5	#1	5	13.19 13.96	BH Stomahesive Set SQ
2950G	POLYVINYLPIRROLIDONE and VINYL ACETATE COPOLYMER Aerosol Spray 6%, 121mL	#1	..	6.54	Spray-On Bande EG
2258W	STERCULIA (Indian Tragacanth; Gum Karaya) Paste 127.6g	#1	..	8.89	Karaya Paste HO
2259X	Powder 71g	#1	..	7.73	DY
3147P	Discs, 12	#1	5	8.94	Coloplast BH,DY ST
2256R	Discs, Compound, 10	#1	5	11.39	Colly-seels DY
3158F	Squares, 6	#1	5	21.61	BH
2238T	SURGICAL CEMENT Skin Bond Adhesive 4fl oz				
2473E	Solvent 200mL				
2467W	227mL				
2469Y	240mL				
2472D	250mL				
	See Section 2				

PREPARATIONS AVAILABLE FOR USE BY PARAPLEGIC AND QUADRIPLEGIC PATIENTS
(Prescriptions must be endorsed "S.P.")

4

Code	Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Dispensed Price for Max. Qty	Proprietary Name and Manufacturer
2879M	DEODORANT DETERGENT SOLUTION Solution, Lauryldimethylbenzyl ammonium chloride 12.5g, "TERIC" N8, 125g in 500mL	#1	..	\$ 5.76	TAGG EG
1102B	BASSORIN with FRANGULA BARK Granules 47.3%-8.3%, 250g See Section 2				
1259G	BISACODYL Tablet 5mg				
1260H	Suppositories 10mg, 10 See Section 2				
2233M	DIMETHICONE Cream 10%, 50g				
2618T	10%, 75g See Section 2				
1125F	DIOCTYL SODIUM SULPHOSUCCINATE with BISACODYL Suppositories 100mg-10mg, 5 See Section 2				
2238T	SURGICAL CEMENT Skin Bond Adhesive 4fl oz				
2473E	Solvent 200mL				
2467W	227mL				
2469Y	240mL				
2472D	250mL See Section 2				

SECTION 4

SCHEDULE OF BENEFITS

DRUG TARIFF

CONTAINER PRICES FOR EXTEMPORANEOUSLY PREPARED BENEFITS

STANDARD FORMULAE PREPARATIONS

TABLE OF CODES, MAXIMUM QUANTITIES AND NUMBER OF REPEATS FOR EXTEMPORANEOUSLY PREPARED BENEFITS

DRUG TARIFF

Where liquids are purchased by weight, the recovery price includes the 'Specific Gravity Factor'.

Drugs marked (a) and (b) —

- (a) Where the quantity dispensed is greater than the quantity shown against items marked thus, the recovery price is:

$$\frac{\text{Quantity dispensed}}{\text{Quantity listed}} \times \text{price shown};$$

- (b) Items marked thus are packed sterile or are unstable. The recovery price is:

$$\left(\frac{\text{Quantity dispensed}}{\text{Quantity listed}} \right) \text{ taken to next whole number} \times \text{price shown}.$$

Special Note:

Purified Water BP is the minimum requirement for water in all N.H.S. extemporaneous preparations.

Drug	Standard	Recovery Price		
		1g/ml	10g/ml	Special
Acetone (use as additive only)	BP	\$ 0.02	\$ 0.15	\$ 1.37:100 mL
ACIDS				
Acetic (6%)	BP	0.06	0.49	4.38:100 mL
Acetic (33%)	BP	0.04	0.34	3.06:100 mL
Ascorbic (use as ingredient of Mixtures of Ferrous Sulphate APF and PL)	BP	0.18	1.47	0.02:100 mg
Benzoic	BP	0.10	0.82	0.01:100 mg
Boric Crystal (use as additive only)	BP	0.06	0.51	4.56:100 g
Boric Powder (use as additive only)	BP	0.02	0.18	1.63:100 g
Citric Monohydrate	BP	0.07	0.56	4.93:100 g
Hydrochloric	BP	0.04	0.32	2.87:100 mL
Hydrochloric Dilute	BP	0.04	0.28	2.47:100 mL
Lactic	BP	0.12	0.95	
Oleic	BP	0.05	0.38	3.40:100 mL
Salicylic	BP	0.06	0.46	4.04:100 g
Trichloroacetic	BP	0.63	5.06	
Acriflavine	BPC 63	1.37	..	0.17:100 mg
Adrenaline (b) (may only be prescribed in eye drops)	BP	17.13	..	
Alum	BP	0.01	0.11	0.96:100 g
Aminophylline	BP	0.30	2.36	
Ammoniated Mercury	BP 73	0.67	5.39	
Aspirin	BP	0.04	0.31	2.73:100 g
Atropine Sulphate	BP	3.06	..	0.38:100 mg
Beeswax White	BP	0.07	0.56	5.00:100 g
Bentonite BP, sterilised		0.05	0.42	3.72:100 g
Benzocaine	BP	0.39	3.10	
Borax (use as additive only)	BP	0.02	0.13	1.17:100 g
Calamine	BP	0.03	0.23	2.00:100 g
Calcium Hydroxide	BP	0.07	0.58	5.15:100 g
Cetomacrogol Emulsifying Wax	BP	0.11	0.86	7.66:100 g
Cetostearyl Alcohol	BP	0.07	0.55	4.89:100 g
Cetrimide	BP	0.26	2.09	
Chlorbutol	BP	0.34	2.74	
Chlorhexidine Acetate (use as additive only)	BP	1.54	12.28	0.19:100 mg
Chlorinated Lime	BP	0.02	0.19	1.73:100 g
Chlorocresol	BP	0.61	4.89	0.08:100 mg
Chloroform (use as additive only)	BP	0.03	0.21	1.86:100 mL
Clioquinol (a)	BP	..	..	5.88:3.5 g
Cocaine Hydrochloride	BP	21.60	..	2.70:100 mg
Codeine Phosphate	BP	2.84	..	0.36:100 mg
Collodion Flexible	BP	0.06	0.48	4.30:100 mL
CREAMS				
Aqueous	APF	0.02	0.15	1.37:100 g
Aqueous	BP	0.02	0.15	1.37:100 g
Calamine Oily	APF	0.04	0.35	3.13:100 g
Cetomacrogol Aqueous	APF	0.02	0.17	1.47:100 g
Cetomacrogol Aqueous	APF 74	0.02	0.17	1.47:100 g
Cetrimide	BP	0.03	0.23	2.00:100 g
Cetrimide Aqueous	APF	0.03	0.23	2.00:100 g
Cetrimide Aqueous	APF 74	0.03	0.23	2.00:100 g
Zinc	BP	0.03	0.20	1.74:100 g
Zinc Oily	APF	0.04	0.28	2.46:100 g

Drug	Standard	Recovery Price		
		1g/ml	10g/ml	Special
Crystal Violet	BP	\$ 1.06	\$ 8.49	\$
Dithranol	BP	3.27	26.19	0.41:100 mg
Emulsifying Wax	BP	0.07	0.59	5.24:100 g
Ephedrine Hydrochloride (may only be prescribed in nasal instillations)	BP	0.46	3.70	0.06:100 mg
Ethanol (90%) (use as additive only)	BP	0.01	0.05	0.41:100 mL
Ethanol (96%) (use as additive only)	BP	0.02	0.14	1.28:100 mL
Ether Solvent (use as additive only)	BP	0.03	0.21	1.87:100 mL
EXTRACTS				
Hyoscyamus Liquid	BPC 73	0.16	1.24	11.02:100 mL
Liquorice Liquid	BP	0.05	0.41	3.63:100 mL
Ferrous Sulphate	BP	0.09	0.68	6.07:100 g
Ferrous Sulphate Dried	BP	0.06	0.51	4.56:100 g
Glucose (use as additive only)	BP	0.03	0.21	1.90:100 g
GLYCERIN				
Ichthammol	BPC 73	0.11	0.86	7.61:100 mL
Glycerol	BP	0.02	0.13	1.16:100 mL
GUMS				
Acacia	BP	0.05	0.40	3.59:100 g
Tragacanth	BP	0.43	3.46	30.75:100 g
Homatropine Hydrobromide (b)	BP	..	..	3.15:250 mg
Ichthammol	BP	0.16	1.24	11.00:100 g
INFUSION				
Gentian Compound Concentrated 1 in 10	BP	0.06	0.44	3.87:100 mL
Iodine	BP	0.50	4.00	
Kaolin, Light or Kaolin, Light (Natural)	BP	0.02	0.14	1.24:100 g
Lactose	BP	0.01	0.07	0.65:100 g
Lignocaine Hydrochloride	BP	1.51	..	0.19:100 mg
LINIMENTS				
Methyl Salicylate	BP	0.03	0.21	1.85:100 mL
Methyl Salicylate Compound	APF	0.05	0.41	3.67:100 mL
Turpentine	BP	0.03	0.20	1.80:100 mL
LOTION				
Calamine	BP	0.01	0.11	0.94:100 mL
Magenta	BPC 73	1.02	8.15	0.13:100 mg
MAGNESIUM				
Carbonate Light	BP	0.03	0.21	1.85:100 g
Sulphate (may only be prescribed for other than oral use)	BP	0.01	0.03	0.30:100 g
Sulphate Dried (may only be prescribed for other than oral use)	BP	0.05	0.38	3.39:100 g
Trisilicate	BP	0.03	0.22	1.95:100 g
Menthol	BP	0.25	2.03	
Methyl Salicylate	BP	0.03	0.24	2.14:100 mL
Morphine Hydrochloride	BP	6.35	..	0.79:100 mg

Drug	Standard	Recovery Price		
		1g/ml	10g/ml	Special
		\$	\$	\$
MUCILAGES				
Acacia (by weight)	APF	0.02	0.18	1.56:100 g
Tragacanth	APF	0.01	0.08	0.72:100 mL
Tragacanth	BPC 73	0.01	0.08	0.72:100 mL
OILS				
Arachis (use as additive only)	BP	0.02	0.12	1.04:100 mL
Cade	BPC 73	0.37	2.94	
Castor (use as additive only)	BP	0.02	0.14	1.24:100 mL
Coconut	BP	0.03	0.20	1.78:100 g
Eucalyptus (use as additive only)	BP	0.04	0.34	3.02:100 mL
Lavender Spike	BPC 68	0.21	1.64	
Maize (use as additive only)	BP	0.01	0.08	0.75:100 mL
Olive (use as additive only)	BP 73	0.02	0.15	1.30:100 mL
Peppermint (use as additive only)	BP	0.22	1.76	
Pumilio Pine	BP	0.28	2.25	
Siberian Fir	BPC 49	0.24	1.95	
Turpentine (use as additive only)	BP	0.04	0.29	2.61:100 mL
OINTMENTS				
Ammoniated Mercury	BP 73	0.05	0.36	3.24:100 g
Benzoic Acid Compound	APF	0.03	0.26	2.35:100 g
Emulsifying	BP	0.03	0.25	2.25:100 g
Hydrous (white)	BP	0.04	0.31	2.77:100 g
Hydrous (yellow)	BP	0.04	0.31	2.77:100 g
Methyl Salicylate	BP	0.05	0.39	3.44:100 g
Methyl Salicylate Compound	APF 34	0.05	0.38	3.37:100 g
Paraffin (white)	BP	0.05	0.43	3.83:100 g
Paraffin (yellow)	BP 68	0.05	0.43	3.83:100 g
Salicylic Acid	APF	0.02	0.17	1.55:100 g
Salicylic Acid	BP	0.05	0.37	3.27:100 g
Simple (white)	BP	0.03	0.24	2.11:100 g
Simple (yellow)	BP	0.03	0.24	2.11:100 g
Sulphur	BP	0.09	0.75	6.65:100 g
Wool Alcohols (white)	BP	0.03	0.26	2.33:100 g
Wool Alcohols (yellow)	BP	0.03	0.26	2.33:100 g
Zinc	BP	0.03	0.27	2.39:100 g
Zinc and Castor Oil	BP	0.03	0.24	2.11:100 g
PAINT				
Magenta	APF	0.11	0.85	7.53:100 mL
Paraffin Hard	BP	0.01	0.08	0.74:100 g
Paraffin Liquid (may only be prescribed for other than oral use)	BP	0.01	0.09	0.81:100 mL
Paraffin Liquid Light	BPC 63	0.02	0.12	1.03:100 mL
Paraffin Soft White	BP	0.02	0.13	1.19:100 g
Paraffin Soft Yellow	BP	0.02	0.15	1.36:100 g
PASTES				
Zinc Compound	BP	0.04	0.30	2.63:100 g
Zinc and Salicylic Acid	BP	0.04	0.31	2.77:100 g
Phenobarbitone	BP	0.27	2.15	0.03:100 mg
Phenobarbitone Sodium	BP	0.39	3.10	0.05:100 mg
Phenol (not available for ear drops)	BP	0.26	2.09	18.60:100 g

Drug	Standard	Recovery Price		
		1g/ml	10g/ml	Special
Phenol Liquefied (not available for ear drops)	BP	\$ 0.11	\$ 0.84	\$ 7.51:100 mL
Phenoxyethanol	BP	0.17	1.38	
Pilocarpine Hydrochloride (a)	BP	13.04	..	
Pilocarpine Nitrate	BP	11.48	..	1.44:100 mg
Podophyllum Resin	BP	1.05	8.38	
POTASSIUM				
Citrate	BP	0.03	0.22	1.98:100 g
Iodide	BP	0.13	1.00	8.84:100 g
Permanganate	BP	0.05	0.42	3.75:100 g
POWDER				
Tragacanth Compound	BP	0.10	0.83	7.38:100 g
Propylene Glycol	BP	0.07	0.52	4.60:100 mL
Resorcinol	BP	0.40	3.21	
Silver Nitrate	BP	4.24	33.90	
SOAPS				
Ethereal	APF 55	0.04	0.31	2.71:100 mL
Soft	BP	0.03	0.22	1.94:100 g
SODIUM				
Acid Phosphate	BP	0.09	0.72	6.39:100 g
Bicarbonate	BP	0.01	0.06	0.50:100 g
Chloride	BP	0.01	0.10	0.90:100 g
Citrate	BP	0.03	0.27	2.37:100 g
Phosphate	BP	0.07	0.55	4.89:100 g
Thiosulphate (use as additive only)	BP	0.03	0.22	1.99:100 g
SOLUTIONS				
Aluminium Acetate	BPC 73	0.03	0.25	2.25:100 mL
Benzoic Acid	BP	0.06	0.44	
Calcium Hydroxide	BP	0.01	0.02	0.18:100 mL
Chlorhexidine Gluconate (use as additive only)	BP	0.11	0.85	7.57:100 mL
Coal Tar	BP	0.04	0.30	2.68:100 mL
Formaldehyde	BP	0.02	0.12	1.03:100 mL
Iodine Aqueous	BP	0.08	0.63	5.57:100 mL
Iodine Weak	BP	0.05	0.39	3.44:100 mL
Morphine Hydrochloride	BPC 73	0.13	1.05	9.33:100 mL
Sodium Chloride	BP	0.01	0.01	0.12:100 mL
SPIRITS				
Ammonia Aromatic	BP	0.04	0.31	2.72:100 mL
Camphor Compound	APF	0.04	0.34	3.06:100 mL
Chloroform	BP	0.05	0.42	3.72:100 mL
Lemon	BP	0.08	0.63	5.62:100 mL
Methylated Industrial (use as additive only)	BP	0.01	0.06	0.50:100 mL
Squill Elixir	BP	0.03	0.24	2.12:100 mL
Squill Oxymel	BP	0.02	0.19	1.71:100 mL
Starch	BP	0.02	0.13	1.13:100 g
Sulphur Precipitated	BP	0.02	0.15	1.37:100 g
Sulphurated Potash	BPC 73	0.15	1.21	10.77:100 g
SYRUPS				
Lemon	APF	0.01	0.09	0.79:100 mL
Orange	APF	0.03	0.26	2.29:100 mL
Orange	BP	0.03	0.26	2.29:100 mL
Pholcodine Citrate (use as additive only)	BPC 59	0.04	0.33	2.96:100 mL
Raspberry	BP	0.05	0.37	3.29:100 mL
Red	APF	0.04	0.30	2.68:100 mL
Syrup	BP	0.01	0.06	0.57:100 mL
Tolu	BP	0.03	0.26	2.29:100 mL

Drug	Standard	Recovery Price		
		1g/ml	10g/ml	Special
Talc Purified BP, sterilised		\$ 0.05	\$ 0.41	\$ 3.63:100 g
Tar Coal	BP	0.06	0.45	4.03:100 g
Tar Coal Prepared	BP 73	0.11	0.86	7.61:100 g
Theophylline	BP	0.31	2.50	
Thymol	BP	0.28	2.23	
Thymol Mouth Wash Compound	APF	0.02	0.16	1.42:100 mL
TINCTURES				
Belladonna	BP	0.05	0.42	3.69:100 mL
Benzoin Compound	BP	0.04	0.35	3.09:100 mL
Ipecacuanha	BP	0.08	0.63	5.62:100 mL
Lobelia Ethereal	BPC 73	0.10	0.83	7.40:100 mL
Opium	BP	0.20	1.58	14.00:100 mL
Orange	BP	0.04	0.31	2.75:100 mL
Stramonium	BP	0.05	0.42	3.72:100 mL
Titanium Dioxide	BP	0.10	0.78	6.92:100 g
Triethanolamine	BP	0.08	0.66	5.87:100 mL
WATERS				
Anise Concentrated 1 in 40 (use as additive only)	BP	0.06	0.47	4.20:100 mL
Chlorbutol	APF 55	0.01	0.03	0.28:100 mL
Chloroform Concentrated 1 in 40	APF	0.03	0.25	2.22:100 mL
For Injections (b) (extemporaneously prepared eye drops and eye lotions)	BP	..	..	2.29:100 mL
Peppermint Concentrated 1 in 40 (use as additive only)	APF	0.05	0.41	3.62:100 mL
Purified	BP	0.01	0.01	0.11:100 mL
Wool Alcohols	BP	0.12	0.99	
Wool Fat	BP	0.03	0.23	2.06:100 g
Wool Fat Hydrous	BP	0.03	0.27	2.41:100 g
ZINC				
Oxide	BP	0.02	0.19	1.65:100 g
Sulphate	BP	0.16	1.24	11.02:100 g

CONTAINER PRICES

Container Sizes	Prices					
	N.S.W.	Victoria	Queens- land	South Aust.	West Aust.	Tas- mania
Dispensing Bottles —	\$	\$	\$	\$	\$	\$
25mL	0.25	0.23	0.28	0.32	0.32	0.25
50mL	0.28	0.24	0.32	0.32	0.29	0.27
100mL	0.33	0.28	0.44	0.40	0.42	0.31
200mL	0.44	0.39	0.63	0.56	0.50	0.43
400mL/500mL	0.69	0.82	1.18	0.93	1.05	0.89
Poison Bottles —						
25mL	0.39	0.34	0.38	0.44	0.42	0.36
50mL	0.41	0.37	0.38	0.47	0.51	0.40
100mL	0.48	0.41	0.42	0.53	0.55	0.47
200mL	0.61	0.57	0.64	0.74	0.72	0.61
400mL/500mL	0.65	0.65	0.72	0.82	1.00	0.71
Screw Cap Jars —						
25g	0.23	0.27	0.32	0.38	0.30	0.25
50g	0.29	0.31	0.45	0.47	0.41	0.35
100g	0.35	0.38	0.57	0.54	0.45	0.43
200g	0.84	0.45	0.81	0.63	1.33	0.81
400g/500g	0.67	0.94	0.36	0.94	1.78	0.94
Dropper Containers —						
15mL polythene	0.23	0.24	0.40	0.25	0.22	0.25
15mL glass	0.45	0.38	0.56	0.50	1.09	0.37

Professional Fee for Extemporaneously Prepared Benefits \$3.09

STANDARD FORMULAE PREPARATIONS

The following list is provided for the purpose of facilitating coding in respect of the items shown. It is not intended to indicate in any way which particular formula an approved chemist should use in filling a prescription.

Where an approved chemist supplies a preparation that is outside this list, the appropriate three-character code as shown on page 15 (section 4) should be used, except where the chemist has elected to price such prescriptions.

It should also be noted that the use of codes that have been removed from this section will cause delays in payment of claims.

The prices shown in this section are for ingredients and professional fee only. The appropriate container price as shown on page 8 (section 4) is to be added to obtain the final recovery prices.

KEY TO REFERENCES

ACH	Adelaide Children's Hospital
APF	Australian Pharmaceutical Formulary
BP	British Pharmacopoeia
BPC	British Pharmaceutical Codex
PL	Prescribers' List
QHF	Queensland Hospital Formulary
RMH	Royal Melbourne Hospital

Code	Item	Reference	Max. Qty Price \$
	<u>CREAMS</u> MAXIMUM QUANTITY 100g, 1 Repeat		
7655X	Aluminium Acetate Oily	PL & APF	4.53
7913L	Aqueous	PL, APF & BP	4.46
7495L	Buffered	BP	4.22
7503X	Buffered Aqueous	PL & APF	4.31
7377G	Calamine Aqueous	PL, APF & BP	4.15
7659D	Calamine Oily	PL & APF	6.22
7497N	Cetomacrogol Aqueous	PL & APF	4.56
7498P	Cetomacrogol (Formula A)	BP	4.37
7660E	Cetrimide	BP	5.09
7661F	Cetrimide Aqueous	PL & APF	5.09
7490F	Chlorhexidine 1%	BP	5.95
7490F	Chlorhexidine Aqueous	PL & APF	5.95
7500R	Clioquinol	BP	9.41
7504Y	Clioquinol Aqueous	APF	9.56
7318E	Coal Tar and Zinc Oily	PL & APF	5.58
7499Q	Cold	PL & APF	4.56
7664J	Glycerol Oily	PL & APF	4.25
7666L	Ichthammol and Zinc Oily	PL & APF	6.48
9555X	Oily	PL & APF	4.24
7892J	Salicylic Acid and Resorcinol Aqueous	PL & APF	5.33
7501T	Salicylic Acid and Sulphur	BP	4.57
7501T	Salicylic Acid and Sulphur Aqueous	PL & APF	4.57
7897P	Zinc	BP	4.83
7376F	Zinc and Ichthammol	BP	5.93
7667M	Zinc Oily	PL & APF	5.55
7654W	Zinc Weak	PL	4.35
	<u>DUSTING POWDERS</u> MAXIMUM QUANTITY 100g, 1 Repeat		
7474J	Kaolin Compound	APF	5.97
7473H	Talc	APF & BP	6.50
9868J	Zinc and Salicylic Acid	BPC 68	4.75
7458M	Zinc, Starch and Talc	PL, APF & BPC 73	5.95
	<u>EAR DROPS</u> MAXIMUM QUANTITY 15mL, 2 Repeats		
7544C	Acetic Acid	APF	3.14
7642F	Aluminium Acetate	PL & APF	3.35
7487C	Chlorhexidine	PL & APF	3.21
7645J	Ichthammol	PL & APF	4.38
7315B	Salicylic Acid	PL & APF	3.18
7314Y	Sodium Bicarbonate	PL, APF & BP	3.20
7313X	Spirit	PL & APF	3.15
8204T		BPC 73	3.24
	<u>ELIXIR</u> MAXIMUM QUANTITY 100mL, 4 Repeats		
7949J	Rubrum	APF	5.77
- CONTAINER RATES TO BE ADDED -			

Code	Item	Reference	Max. Qty Price \$
	<u>EYE DROPS OF COCAINE</u> <u>MAXIMUM QUANTITY 15mL, No Repeats</u>		
7589K	Cocaine Strong	APF	27.08
7321H	Cocaine and Homatropine	BPC 73	19.88
7647L	Homatropine and Cocaine	APF	19.89
	<u>EYE DROPS OF PILOCARPINE</u> <u>MAXIMUM QUANTITY 15mL, 6 Repeats</u>		
8263X	Pilocarpine	APF 55	7.60
	<u>EYE DROPS, OTHER</u> <u>MAXIMUM QUANTITY 15mL, 2 Repeats</u>		
7396G	Homatropine	APF	11.80
7416H	Zinc Sulphate	APF	5.47
	<u>EYE LOTIONS</u> <u>MAXIMUM QUANTITY 200mL, 1 Repeat</u>		
8416Y	Boric Acid	ACH	7.80
7363M	Sodium Bicarbonate	APF	7.73
8418C	Sodium Chloride	BP	7.69
	<u>GARGLE</u> <u>MAXIMUM QUANTITY 200mL, 4 Repeats</u>		
7453G	Thymol Compound	APF	5.93
	<u>GLYCERIN</u> <u>MAXIMUM QUANTITY 100mL, 1 Repeat</u>		
8070R	Ichthammol	BPC 73	10.70
	<u>INHALATIONS</u> <u>MAXIMUM QUANTITY 50mL, 1 Repeat</u>		
7485Y	Benzoin	PL	4.84
8577K	Benzoin Compound	PL	5.60
7484X	Benzoin and Menthol	PL & APF	5.09
8579M	Menthol	APF	3.59
7310R	Menthol and Eucalyptus	PL & BP	3.70
7309Q	Menthol and Pine	PL & APF	4.28
	<u>INHALATION, SOLID</u> <u>MAXIMUM QUANTITY 4g, 1 Repeat</u>		
8072W	Menthol Crystals	BP	4.09
	<u>LINCTUS</u> <u>MAXIMUM QUANTITY 100mL, 2 Repeats</u>		
7536P	Menthol	APF 64	4.43
	<u>LINIMENTS</u> <u>MAXIMUM QUANTITY 100mL, 1 Repeat</u>		
7480Q	Methyl Salicylate Compound	PL & APF	6.76
7419L	Turpentine	BP	4.89
- CONTAINER RATES TO BE ADDED -			

Code	Item	Reference	Max. Qty Price \$
	LOTIONS MAXIMUM QUANTITY 200mL, 2 Repeats		
7709R	Aluminium Acetate Aqueous	APF	3.55
7629M	Calamine	PL, APF & BP	4.97
7630N	Calamine Oily	PL, APF & BP	4.65
7710T	Formaldehyde	APF	3.42
8793T	Resorcinol Compound	PL & APF	6.18
7706N	Salicylic Acid	APF & BP	5.90
7712X	Salicylic Acid and Coal Tar	APF	4.50
7632Q	Sodium Thiosulphate	APF	4.19
7633R	Sulphurated	PL & APF	6.14
	MIXTURES MAXIMUM QUANTITY 200 mL, 4 Repeats		
7905C	Aspirin	PL & APF	4.76
7908F	Ferrous Sulphate	PL & APF	4.28
7604F	Gentian Alkaline	PL, APF & BP	4.37
7605G	Hydrochloric Acid	APF 69	8.08
7492H	Ipecacuanha and Squill	PL & APF	5.48
7348R	Kaolin	BPC 68	4.78
7301G	Kaolin and Opium	PL & APF	5.73
7347Q	Lobelia and Stramonium Compound	BPC 68	5.71
7346P	Magnesium Carbonate	BPC 68	3.82
7342K	Magnesium Trisilicate	BPC 68	4.04
7343L	Magnesium Trisilicate and Belladonna	BPC 68	4.44
7911J	Potassium Citrate	PL & APF	5.02
7932L	Potassium Citrate and Sodium Bicarbonate	PL & APF	4.45
7618Y	Potassium Iodide and Stramonium Compound	PL & APF	6.03
7933M	Sodium Citrate	PL & APF	5.22
7333Y	Stramonium and Potassium Iodide	BPC 73	5.00
	MIXTURES FOR CHILDREN MAXIMUM QUANTITY 100mL, 4 Repeats		
7783P	Aspirin	PL & APF	4.29
7441P	Asthma	ACH	4.73
7785R	Belladonna	PL & APF	4.15
7789Y	Ferrous Sulphate	PL & APF	3.95
7330T	Ipecacuanha	BPC 73	3.95
7493J	Ipecacuanha and Squill	PL & APF	3.90
7437K	Phenobarbitone	ACH	3.43
7791C	Potassium Citrate	PL & APF	4.13
7586G	Potassium Iodide	PL & APF	3.84
7792D	Sodium Citrate	PL & APF	4.23
	MOUTH WASH MAXIMUM QUANTITY 200mL, 1 Repeat		
7457L	Thymol Compound	APF	5.93
	NASAL INSTILLATIONS MAXIMUM QUANTITY 15mL, 2 Repeats		
7574P	Ephedrine	PL & APF	3.31
7576R	Glucose and Glycerol	PL & APF	3.38
- CONTAINER RATES TO BE ADDED -			

Code	Item	Reference	Max. Qty Price \$
	OINTMENTS		
	MAXIMUM QUANTITY 100g, 1 Repeat		
9497W	Benzoic Acid Compound	PL, APF & BP	5.44
9519B	B.O.Z.	QHF	5.96
7915N	Calamine	BP	4.48
7916P	Cetomacrogol Emulsifying	BP	6.53
7917Q	Cetrimide Emulsifying	BP	6.22
7452F	Dithranol	APF	4.86
7452F	Dithranol 0.1%	BP	4.86
7451E	Dithranol 1%	BP	7.71
7451E	Dithranol Strong	APF 64	7.71
7918R	Emulsifying	PL, APF & BP	5.34
7938T	Hydrous (white)	BP	5.86
7939W	Hydrous (yellow)	BP	5.86
9557B	Hydrous Wool Fat	BPC 73	5.19
9559D	Ichthammol	BP	6.05
9576B	Methyl Salicylate	BP	6.53
9577C	Methyl Salicylate Compound	APF 34	6.46
7924C	Paraffin (white)	BP	6.92
7925D	Paraffin (yellow)	BP 68	6.92
9592W	Resorcinol and Sulphur Compound	PL & APF	5.99
7926E	Salicylic Acid	PL & APF	4.64
8022F		BP	6.36
7327P	Salicylic Acid and Sulphur	BPC 73	5.93
7927F	Simple (white)	PL, APF & BP	5.20
7930J	Simple (yellow)	BP	5.20
8060F	Sulphur	BP	9.74
7450D	Wool Alcohols	APF	4.78
7936Q	Wool Alcohols (white)	BP	5.42
7937R	Wool Alcohols (yellow)	BP	5.42
7896N	Zinc	PL, APF & BP	5.48
7899R	Zinc and Castor Oil	PL, APF & BP	5.20
7573N	Zinc and Coal Tar	APF	4.91
	PAINTS		
	MAXIMUM QUANTITY 25mL, 1 Repeat		
7780L	Cetrimide and Chlorhexidine	APF	3.31
7324L	Crystal Violet	BP	3.32
7842R	Formaldehyde and Salicylic Acid	APF	3.50
7562B	Ichthammol	PL & APF	5.24
7563C	Iodine	APF 64	4.01
7326N	Iodine Compound	BPC 68	3.78
7569J	Lactic and Salicylic Acid	APF	4.95
9770F	Magenta	PL & APF	5.22
7325M		BPC 73	4.36
7566F	Podophyllin	PL	5.28
7567G	Podophyllin Compound	PL, APF & BP	7.91
7568H	Salicylic Acid	PL & APF	4.44
	PASTES		
	MAXIMUM QUANTITY 100g, 1 Repeat		
7555P	Coal Tar and Zinc	PL & APF	5.75
9738M	Dithranol 0.1%	BP	6.27
9739N	Dithranol 1%	BP	9.10
9740P	Dithranol	PL & APF	6.27
7557R	Dithranol and Zinc Strong	APF 64	8.96
7323K	Resorcinol and Sulphur	BP	7.20
- CONTAINER RATES TO BE ADDED -			

Code	Item	Reference	Max. Qty Price \$
	<u>PASTES</u> - cont.		
9742R	Titanium Dioxide	PL & APF	5.69
9741Q	Zinc and Coal Tar	BP	5.09
7558T	Zinc Compound	PL, APF & BP	5.72
9767C	Zinc Oxide	RMH	5.00
7559W	Zinc and Salicylic Acid	PL & APF	5.75
9773J		BP	5.86
	<u>POWDER FOR INTERNAL USE</u> MAXIMUM QUANTITY 100g, 2 Repeats		
9825D	Magnesium Trisilicate	BP	5.04
	<u>POWDER, IRRIGATION</u> MAXIMUM QUANTITY 100g, 1 Repeat		
7546E	Alkaline Nasal Douche	APF	4.05
	<u>SOAPS</u> MAXIMUM QUANTITY 200mL, 1 Repeat		
9896W	Spirit	BP	6.43
9897X	Spirit (Industrial Methylated)	BP	6.61
	<u>SOLUTIONS</u> MAXIMUM QUANTITY 200mL, 2 Repeats		
7539T	Calcium Hypochlorite (Eusol)	APF	3.43
7922Y	Iodine Aqueous (Lugol's)	BP	14.23
7923B	Iodine Weak	BP	9.97
7540W	Soap Alcoholic	APF	5.85
	<u>SYRUP</u> MAXIMUM QUANTITY 100mL, 4 Repeats		
7375E	Codeine	APF	5.50
	<u>TINCTURES</u> MAXIMUM QUANTITY 25mL, 1 Repeat		
8073X	Belladonna	BP	4.14
8075B	Stramonium	BP	4.14

PREPARATIONS WHICH MAY BE PRESCRIBED BY PARTICIPATING DENTAL PRACTITIONERS
FOR DENTAL TREATMENT ONLY

	<u>MIXTURES</u> MAXIMUM QUANTITY 200mL, No Repeats		
7001L	Aspirin	APF	4.76
7002M	Aspirin APF with Codeine Phosphate 30mg per 10mL		6.92
	<u>MIXTURE FOR CHILDREN</u> MAXIMUM QUANTITY 100mL, No Repeats		
7003N	Aspirin	APF	4.29
- CONTAINER RATES TO BE ADDED -			

TABLE OF CODES, MAXIMUM QUANTITIES AND NUMBER OF
REPEATS FOR EXTEMPORANEOUSLY PREPARED BENEFITS

Code	Preparation	Maximum Quantity	No. of Repeats
13Q	Creams	100g	1
48M	Dusting Powders	100g	1
15T	Ear Drops	15mL	2
16W	Elixirs	100mL	4
19B	Eye Drops of Cocaine	15mL	..
21D	Eye Drops of Pilocarpine	15mL	6
22E	Other Eye Drops	15mL	2
23F	Eye Lotions	200mL	1
25H	Gargles	200mL	4
28L	Glycerins	100mL	1
29M	Inhalations	50mL	1
37Y	Inhalations, Solid	4g	1
34T	Linctuses	100mL	2
38B	Liniments	100mL	1
39C	Lotions	200mL	2
40D	Mixtures	200mL	4
41E	Mixtures for Children	100mL	4
30N	Mouth Washes	200mL	1
42F	Nasal Instillations	15mL	2
43G	Ointments, Waxes	100g	1
44H	Paints	25mL	1
63H	Pastes of Cocaine	25g	..
45J	Other Pastes	100g	1
49N	Powders for Internal Use	100g	2
61F	Powders, Irrigation	100g	1
51Q	Soaps	200mL	1
52R	Solutions	200mL	2
55X	Syrups	100mL	4
56Y	Tinctures	25mL	1

SECTION 5 — PRESCRIBERS' LIST

PRESCRIPTION

CREAMS

(Maximum Quantity 100g and 1 Repeat)

7655X ALUMINIUM ACETATE, OILY (APF)

Aluminium Acetate Solution	5	mL
Zinc Oxide	20	g
Wool Fat	25	g
Arachis Oil	25	mL
Purified Water, freshly boiled and cooled	27	mL

7913L AQUEOUS (APF, BP)

Emulsifying Ointment	30	g
Phenoxyethanol	1	g
Purified Water, freshly boiled and cooled to	100	g

7503X BUFFERED, AQUEOUS (APF)

Sodium Phosphate	2.5	g
Citric Acid Monohydrate	500	mg
Chlorocresol	100	mg
Glycerol	5	mL
Emulsifying Ointment	30	g
Purified Water, freshly boiled and cooled to	100	g

7377G CALAMINE, AQUEOUS (APF, BP)

Calamine	4	g
Zinc Oxide	3	g
Emulsifying Wax	6	g
Arachis Oil	30	g
Purified Water, freshly boiled and cooled to	100	g

7659D CALAMINE, OILY (APF)

Calamine	32	g
Oleic Acid	0.5	mL
Arachis Oil	21.5	mL
Wool Fat	17.5	g
Calcium Hydroxide Solution	30.5	mL

7497N^c CETOMACROGOL, AQUEOUS (APF)

Cetomacrogol Emulsifying Wax	15	g
Liquid Paraffin	10	g
White Soft Paraffin	10	g
Chlorocresol	100	mg
Propylene Glycol	5	mL
Purified Water, freshly boiled and cooled to	100	g

PRESCRIPTION

7661F CETRIMIDE, AQUEOUS (APF)

Cetrimide	500	mg
Chlorocresol	100	mg
Cetostearyl Alcohol	5	g
Liquid Paraffin	50	g
Purified Water, freshly boiled and cooled to	100	g

7490F CHLORHEXIDINE, AQUEOUS (APF)
(Chlorhexidine 1% BP)

Chlorhexidine Gluconate Solution	5	mL
Cetomacrogol Emulsifying Wax	25	g
Liquid Paraffin	10	g
Purified Water, freshly boiled and cooled to	100	g

7318E COAL TAR and ZINC, OILY (APF)

Coal Tar, BP	1	g
Castor Oil	1	g
Zinc Cream Oily APF	98	g

7499Q COLD (APF)

White Beeswax	17	g
Liquid Paraffin	45	g
Borax	1	g
Purified Water, freshly boiled and cooled	37	mL

7664J GLYCEROL, OILY (APF)

Glycerol	20	g
Calcium Hydroxide Solution	32	mL
Arachis Oil	22	g
Wool Fat	26	g

7666L ICHTHAMMOL and ZINC, OILY (APF)

Ichthammol	5	g
Wool Fat	15	g
Zinc Cream Oily APF	80	g

9555X OILY (APF)

Wool Alcohols Ointment, APF	50	g
Phenoxyethanol	1	g
Dried Magnesium Sulphate	500	mg
Purified Water, freshly boiled and cooled to	100	g

7892J SALICYLIC ACID and RESORCINOL, AQUEOUS (APF)

Salicylic Acid	2	g
Resorcinol	2	g
Aqueous Cream, APF to	100	g

PRESCRIPTION

CREAMS — *continued*

7501T SALICYLIC ACID and SULPHUR, AQUEOUS (APF)

(Salicylic Acid and Sulphur BP)

Salicylic Acid	....	....	....	2	g
Precipitated Sulphur	....	....	....	2	g
Aqueous Cream, to	....	....	....	100	g

7667M ZINC, OILY (APF)

Zinc Oxide	....	....	....	32	g
Oleic Acid	....	....	....	0.5	mL
Arachis Oil	....	....	....	21.5	mL
Wool Fat	....	....	....	17.5	g
Calcium Hydroxide Solution	....	....	....	30.5	mL

7654W ZINC, WEAK (PL)

Zinc Oxide	....	....	....	5	g
Oleic Acid	....	....	....	0.5	mL
Arachis Oil	....	....	....	38.5	mL
Wool Fat	....	....	....	25	g
Calcium Hydroxide Solution	....	....	....	34.5	mL

DUSTING POWDER

(Maximum Quantity 100g and 1 Repeat)

7458M ZINC, STARCH and TALC (APF)

Zinc Oxide	....	....	....	25	g
Starch	....	....	....	25	g
Purified Talc, sterilised	....	....	....	50	g

EAR DROPS

(Maximum Quantity 15mL and 2 Repeats)

7642F ALUMINIUM ACETATE (APF)

Aluminium Acetate Solution	....	....	....	9	mL
Purified Water, freshly boiled and cooled to	....	....	....	15	mL

7487C CHLORHEXIDINE (APF)

Chlorhexidine Acetate	....	....	....	7.5	mg
Purified Water, freshly boiled and cooled to	....	....	....	15	mL

7645J ICHTHAMMOL (APF)

Ichthammol	....	....	....	10	g
Glycerol	....	....	....	90	g

7315B SALICYLIC ACID (APF)

Salicylic Acid	....	....	....	300	mg
Ethanol (90 per cent)	....	....	....	7.5	mL
Purified Water, freshly boiled and cooled to	....	....	....	15	mL

PRESCRIPTION

7314Y SODIUM BICARBONATE (APF, BP)

Sodium Bicarbonate	....	....	....	750	mg
Glycerol	....	....	....	4.5	mL
Purified Water, freshly boiled and cooled to	....	....	....	15	mL

7313X SPIRIT (APF)

Ethanol (90 per cent)	....	....	....	7.5	mL
Purified Water, freshly boiled and cooled to	....	....	....	15	mL

INHALATIONS

(Maximum Quantity 50 mL and 1 Repeat)

7485Y BENZOIN (PL)

Benzoin Tincture, Compound				50	mL

8577K BENZOIN, COMPOUND (PL)

Menthol	....	....	....	1	g
Oil of Siberian Fir	....	....	....	2.5	mL
Benzoin Tincture, Compound to	....	....	....	50	mL

7484X BENZOIN and MENTHOL (PL, APF)

Menthol	....	....	....	1	g
Benzoin Tincture, Compound to	....	....	....	50	mL

7310R MENTHOL and EUCALYPTUS (BP)

Menthol	....	....	....	1	g
Eucalyptus Oil	....	....	....	5	mL
Light Magnesium Carbonate	....	....	....	3.5	g
Purified Water to	....	....	....	50	mL

7309Q MENTHOL and PINE (APF)

Menthol	....	....	....	1	g
Pumilio Pine Oil	....	....	....	2.5	mL
Ethanol (90 per cent) to	....	....	....	50	mL

LINIMENT

(Maximum Quantity 100 mL and 1 Repeat)

7480Q METHYL SALICYLATE, COMPOUND (APF)

Menthol	....	....	....	4	g
Eucalyptus Oil	....	....	....	10	mL
Methyl Salicylate	....	....	....	25	mL
Arachis Oil to	....	....	....	100	mL

PRESCRIPTION

LOTIONS

(Maximum Quantity 200 mL and 2 Repeats)

7629M CALAMINE (APF, BP)

Calamine	....	....	....	30	g
Zinc Oxide	....	....	....	10	g
Bentonite, sterilised	....	....	....	6	g
Sodium Citrate	....	....	....	1	g
Liquefied Phenol	....	....	....	1	mL
Glycerol	....	....	....	10	mL
Purified Water, freshly boiled and cooled to	....	....	....	200	mL

7630N CALAMINE, OILY (APF, BP)

Calamine	....	....	....	10	g
Wool Fat	....	....	....	2	g
Arachis Oil	....	....	....	100	mL
Oleic Acid	....	....	....	1	mL
Calcium Hydroxide Solution to	....	....	....	200	mL

8793T RESORCINOL, COMPOUND (APF)

Resorcinol	....	....	....	5	g
Solvent Ether	....	....	....	5	mL
Castor Oil	....	....	....	5	mL
Spike Lavender Oil	....	....	....	0.2	mL
Ethanol (90 per cent) to	....	....	....	200	mL

7633R SULPHURATED (APF)

Zinc Sulphate	....	....	....	10	g
Sulphurated Potash	....	....	....	10	g
Acetone	....	....	....	10	mL
Glycerol	....	....	....	10	mL
Spike Lavender Oil	....	....	....	0.4	mL
Purified Water, freshly boiled and cooled to	....	....	....	200	mL

MIXTURES

(Maximum Quantity 200 mL and 4 Repeats)

7905C ASPIRIN (APF)

Aspirin	....	....	....	500	mg
Compound Tragacanth Powder	....	....	....	250	mg
Orange Syrup, APF	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.25	mL
Purified Water to	....	....	....	10	mL

7908F FERROUS SULPHATE (APF)

Ferrous Sulphate	....	....	....	300	mg
Ascorbic Acid	....	....	....	10	mg
Orange Syrup, APF	....	....	....	0.5	mL
Concentrated Chloroform Water	....	....	....	0.25	mL
Purified Water to	....	....	....	10	mL

PRESCRIPTION

7604F GENTIAN, ALKALINE (APF, BP)

Concentrated Compound Gentian Infusion	....	....	....	1	mL
Sodium Bicarbonate	....	....	....	500	mg
Concentrated Chloroform Water	....	....	....	0.25	mL
Purified Water to	....	....	....	10	mL

7492H IPECACUANHA and SQUILL (APF)

Synonym: Cough Mixture

Ipecacuanha Tincture	....	....	....	0.25	mL
Compound Camphor Spirit	....	....	....	1	mL
Tolu Syrup	....	....	....	1	mL
Squill Oxymel	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.15	mL
Concentrated Anise Water	....	....	....	0.15	mL
Purified Water to	....	....	....	10	mL

7301G KAOLIN and OPIUM (APF)

Light Kaolin or Light Kaolin (Natural)	....	....	....	2.5	g
Alum	....	....	....	10	mg
Opium Tincture	....	....	....	0.5	mL
Concentrated Chloroform Water	....	....	....	0.25	mL
Purified Water to	....	....	....	10	mL

7911J POTASSIUM CITRATE (APF)

Potassium Citrate	....	....	....	2	g
Citric Acid Monohydrate	....	....	....	400	mg
Lemon Syrup, APF	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.2	mL
Purified Water to	....	....	....	10	mL

7932L POTASSIUM CITRATE and SODIUM BICARBONATE (APF)

Potassium Citrate	....	....	....	1	g
Sodium Bicarbonate	....	....	....	750	mg
Orange Syrup, APF	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.2	mL
Purified Water to	....	....	....	10	mL

7618Y POTASSIUM IODIDE and STRAMONIUM, COMPOUND (APF)

Synonym: Lobelia and Stramonium Mixture

Potassium Iodide	....	....	....	250	mg
Stramonium Tincture	....	....	....	0.5	mL
Lobelia Tincture, Ethereal	....	....	....	0.5	mL
Aromatic Ammonia Spirit	....	....	....	0.5	mL
Liquorice Liquid Extract	....	....	....	0.5	mL
Concentrated Chloroform Water	....	....	....	0.25	mL
Purified Water to	....	....	....	10	mL

PRESCRIPTION

7933M SODIUM CITRATE (APF)

Sodium Citrate	....	....	....	2	g
Citric Acid Monohydrate	....	....	....	400	mg
Lemon Syrup, APF	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.2	mL
Purified Water to	....	....	....	10	mL

NASAL INSTILLATIONS

(Maximum Quantity 15 mL and 2 Repeats)

7574P EPHEDRINE (APF)

Ephedrine Hydrochloride	....	....	....	150	mg
Chlorbutol	....	....	....	75	mg
Sodium Chloride	....	....	....	75	mg
Propylene Glycol	....	....	....	0.75	mL
Purified Water, freshly boiled and cooled to	....	....	....	15	mL

7576R GLUCOSE and GLYCEROL (APF)

Glucose	....	....	....	3	g
Glycerol to	....	....	....	15	mL

OINTMENTS

(Maximum Quantity 100 g and 1 Repeat)

9497W BENZOIC ACID, COMPOUND (APF, BP)

Benzoic Acid in fine powder	....	....	....	6	g
Salicylic Acid in fine powder	....	....	....	3	g
Emulsifying Ointment	....	....	....	91	g

7918R EMULSIFYING (APF, BP)

Emulsifying Wax	....	....	....	30	g
White Soft Paraffin	....	....	....	50	g
Liquid Paraffin	....	....	....	20	g

9592W RESORCINOL and SULPHUR, COMPOUND (APF)

Resorcinol	....	....	....	2	g
Precipitated Sulphur	....	....	....	3	g
Salicylic Acid	....	....	....	1	g
White Simple Ointment	....	....	....	94	g

7926E SALICYLIC ACID (APF)

Salicylic Acid	....	....	....	2	g
Wool Alcohols Ointment, APF	....	....	....	98	g

7927F SIMPLE (APF, BP)

(White Simple Ointment)

Wool Fat	....	....	....	5	g
Hard Paraffin	....	....	....	5	g
Cetostearyl Alcohol	....	....	....	5	g
White Soft Paraffin	....	....	....	85	g

PRESCRIPTION

OINTMENTS — *continued*

7899R ZINC and CASTOR OIL (APF, BP)

Zinc Oxide	....	....	....	7.5	g
Castor Oil	....	....	....	50	g
Cetostearyl Alcohol	....	....	....	2	g
White Beeswax	....	....	....	10	g
Arachis Oil	....	....	....	30.5	g

7896N ZINC OXIDE (APF)

(Zinc BP)

Zinc Oxide	....	....	....	15	g
White Simple Ointment	....	....	....	85	g

PAINTS

(Maximum Quantity 25 mL and 1 Repeat)

7562B ICHTHAMMOL (APF)

Ichthammol	....	....	....	10	g
Glycerol	....	....	....	90	g

9770F MAGENTA (APF)

Magenta	....	....	....	100	mg
Resorcinol	....	....	....	2	g
Phenol	....	....	....	1	g
Boric Acid	....	....	....	200	mg
Ethanol (90 per cent)	....	....	....	2.125	mL
Acetone	....	....	....	1	mL
Purified Water to	....	....	....	25	mL

7566F PODOPHYLLIN (PL)

Podophyllum Resin	....	....	....	1.25	g
Benzoin Tincture, Compound to	....	....	....	25	mL

7567G PODOPHYLLIN, COMPOUND (APF, BP)

Podophyllum Resin	....	....	....	3.75	g
Benzoin Tincture, Compound to	....	....	....	25	mL

7568H SALICYLIC ACID (APF)

Salicylic Acid	....	....	....	2.5	g
Flexible Collodion to	....	....	....	25	mL

PASTES

(Maximum Quantity 100 g and 1 Repeat)

7555P COAL TAR and ZINC (APF)

Coal Tar	....	....	....	1	g
Castor Oil	....	....	....	1	g
Compound Zinc Paste	....	....	....	98	g

PRESCRIPTION

PASTES — *continued*

9740P DITHRANOL (APF)

Dithranol	....	....	....	....	100	mg
Zinc and Salicylic Acid Paste					99.9	g

9742R TITANIUM DIOXIDE (APF)

Titanium Dioxide	....	....	....	....	20	g
Calamine	....	....	....	....	25	g
Light Kaolin or Light Kaolin (Natural)	....	....	....	....	10	g
Bentonite, sterilised	....	....	....	....	1	g
Chlorocresol	....	....	....	....	100	mg
Glycerol	....	....	....	....	15	g
Purified Water, freshly boiled and cooled to	....	....	....	....	100	g

PRESCRIPTION

7558T ZINC, COMPOUND (APF, BP)

Zinc Oxide	....	....	....	....	25	g
Starch	....	....	....	....	25	g
White Soft Paraffin	....	....	....	....	50	g

7559W ZINC and SALICYLIC ACID (APF)

Salicylic Acid	....	....	....	....	2	g
Liquid Paraffin	....	....	....	....	2	g
Compound Zinc Paste	....	....	....	....	96	g

SECTION 5 — PRESCRIBERS' LIST — CHILDREN'S SECTION

PRESCRIPTION

MIXTURES

(Maximum Quantity 100mL and 4 Repeats)

7783P ASPIRIN (APF)

Aspirin	....	....	....	150	mg
Compound Tragacanth Powder	....	....	....	100	mg
Raspberry Syrup	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.1	mL
Purified Water to	....	....	....	5	mL

7785R BELLADONNA (APF)

Belladonna Tincture	....	....	....	0.1	mL
Orange Syrup, APF	....	....	....	1	mL
Glycerol	....	....	....	1	mL
Benzoic Acid Solution	....	....	....	0.1	mL
Purified Water to	....	....	....	5	mL

7789Y FERROUS SULPHATE (APF)

Ferrous Sulphate	....	....	....	100	mg
Ascorbic Acid	....	....	....	5	mg
Orange Syrup, APF	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.1	mL
Purified Water to	....	....	....	5	mL

PRESCRIPTION

7493J IPECACUANHA and SQUILL (APF)

Ipecacuanha Tincture	....	....	....	0.1	mL
Compound Camphor Spirit	....	....	....	0.25	mL
Squill Oxymel	....	....	....	1	mL
Purified Water to	....	....	....	5	mL

7791C POTASSIUM CITRATE (APF)

Potassium Citrate	....	....	....	1	g
Citric Acid Monohydrate	....	....	....	200	mg
Lemon Syrup, APF	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.1	mL
Purified Water to	....	....	....	5	mL

7586G POTASSIUM IODIDE (APF)

Potassium Iodide	....	....	....	100	mg
Liquorice Liquid Extract	....	....	....	0.25	mL
Aromatic Ammonia Spirit	....	....	....	0.1	mL
Concentrated Chloroform Water	....	....	....	0.1	mL
Purified Water to	....	....	....	5	mL

7792D SODIUM CITRATE (APF)

Sodium Citrate	....	....	....	1	g
Citric Acid Monohydrate	....	....	....	200	mg
Lemon Syrup, APF	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.1	mL
Purified Water to	....	....	....	5	mL

SECTION 6 — CONTAINER PRICES, FEES, STANDARD PACKS AND PRICES, FOR READY PREPARED PREPARATIONS

CONTAINER PRICES FOR QUANTITIES OF READY PREPARED PREPARATIONS LESS THAN MAXIMUM

Injectibles	150 mL vial, 29c
Other items	25 mL vial, 10c
(The 25mL is the most commonly used size)	

Fees —

Ready prepared professional fee \$2·13

Dangerous drug fee \$1·35

NOTE:— Standard packs and prices (including mark up, but without professional fee and dangerous drug fee) are for items against the price of which an asterisk (*) is shown in the Schedule.

(Apply wastage factor in calculating broken quantity prices)

2

Code	Approved Name	Form/Strength	Pack and Price \$	Manufacturer
3073R	Amino Acid Formula with Vitamins and Minerals without Phenylalanine	200g	1 @ 28.21	SJ
3071P	Amino Acid Formula without Phenylalanine	250g	1 @ 79.40	SJ
3072Q		250g	1 @ 97.30	SJ
1059R	Amylobarbitone Sodium	500mg	1 @ 2.61	LY
1980F	Antivenom - Red Back Spider	500 Units	1 @ 32.09	CS
2362H	Benztropine	2mg	100 @ 5.06	MK
2647H	Benzylpenicillin	3g	5 @ 11.24	CS, GL
2648J		6g	1 @ 3.08	CS
1071J	Bethanechol	5mg in 1mL	1 @ 1.34	MK
2964B	Cephalothin Sodium	1g	1 @ 4.58	GL, LY
1256D	Cephazolin Sodium	500mg	1 @ 4.18	LY
1257E		1g	1 @ 7.94	LY
1163F	Chlorambucil	2mg	25 @ 11.81	BW
1164G		5mg	25 @ 14.38	BW
1167K	Chloramphenicol	1g	1 @ 4.91	PD
1185J	Chloroquine	5mL	10 @ 7.98	MB
3021B	Cholera Vaccine	1mL	1 @ 1.81	CS
2967E	Cholestyramine	9g sachet (equiv. to 4g cholestyramine)	1 @ 21.84	MJ
1222H	Codeine Phosphate with Aspirin	30mg-325mg	50 @ 3.86	BW
2621Y	Colistin	150mg	1 @ 13.93	WW
1228P	Copper Sulphate	Tablets	1 @ 1.41	AM
1798P	Cyproheptadine	4mg	50 @ 2.25	FR
2910E	Cytarabine	100mg set	1 @ 8.28	UP
2129C	Desmopressin	100mcg per mL, 2.5mL	1 @ 24.38	PT
2701E	Dextromoramide	5mg in 1mL	5 @ 3.64	FA
1333E	Diloxanide Furoate	500mg	15 @ 4.28	BT
1125F	Diocetyl Sodium Sulphosuccinate with Bisacodyl	100mg-10mg, 5	1 @ 1.53	FM
1344R	Diphtheria Antitoxin	10,000 Units	1 @ 24.40	CS
1341N	Diphtheria and Tetanus Vaccine Adsorbed	0.5mL	1 @ 1.65	CS
3019X	Diphtheria and Tetanus Vaccine Adsorbed, Diluted for Adult Use	0.5mL	1 @ 1.65	CS
1346W	Diphtheria, Tetanus and Pertussis Vaccine, Adsorbed	0.5mL	1 @ 1.76	CS, PD
1348Y	Diphtheria Vaccine, Adsorbed	0.5mL	1 @ 1.96	CS
3020Y	Diphtheria Vaccine, Adsorbed, Diluted for Adult Use	0.5mL	1 @ 1.89	CS
1398N	Erythromycin Lactobionate	300mg	1 @ 4.25	AB
3166P	Ethynodiol Diacetate with Ethinyloestradiol	500mcg-50mcg	1 @ 1.51	SR
3167Q		1mg-50mcg	1 @ 1.51	SR
2447T		Tablet-Pack	1 @ 1.51	SR
3168R		Tablet-Pack	1 @ 1.51	SR
3169T	Ethynodiol Diacetate with Mestranol	500mcg-100mcg	1 @ 1.51	SR
3170W		1mg-100mcg	1 @ 1.51	SR
3171X		2mg-100mcg	1 @ 1.51	SR
1436N	Folic Acid	15mg in 1mL	5 @ 2.81	AB
2699C	Gas Gangrene Antitoxin - Mixed (Polyvalent)	25,000 Units	1 @ 37.21	CS

Code	Approved Name	Form/Strength	Pack and Price \$	Manufacturer
1053K	Heparin Calcium	12,500 Units in 0.5mL	1 @ 3.44	CS
1054L		25,000 Units in 1mL	1 @ 4.46	CS
1468G	Heparin Sodium	25,000 Units in 5mL	1 @ 4.46	CS,WP
1076P		35,000 Units in 35mL	1 @ 8.26	CS,WP
1502C	Hydrocortisone Acetate	25g	1 @ 16.20	SV
1501B	Hydrocortisone Sodium Succinate	100mg set	1 @ 3.05	NR
			1 @ 3.09	GL,UP
1710B	Insulin (bovine)	100 Units per mL, 10mL	1 @ 9.70	BW,CS
1530M		300 Units per mL, 5mL	1 @ 12.64	CS
1723Q	Insulin Biphasic (mixed porcine/bovine)	100 Units per mL, 10mL	1 @ 9.70	CS,NO
1711C	Insulin Isophane (N.P.H.) (bovine)	100 Units per mL, 10mL	1 @ 8.64	WP
			1 @ 9.70	BW,CS,NO
1712D	(porcine)	100 Units per mL, 10mL	1 @ 9.70	BW,CS,NO
1427D	Insulin Isophane (N.P.H.)-Insulin Neutral, (Mixed) (porcine)	100 Units (70 Units-30 Units) per mL, 10mL	1 @ 9.70	BW
1713E	Insulin Neutral (bovine)	100 Units per mL, 10mL	1 @ 8.64	WP
1714F	(porcine)	100 Units per mL, 10mL	1 @ 9.70	BW,CS,NO
1715G	Insulin Protamine Zinc (bovine)	100 Units per mL, 10mL	1 @ 8.64	BW,CS
1716H	Insulin Zinc Suspension (bovine)	100 Units per mL, 10mL	1 @ 9.70	BW,CS
1717J	(porcine)	100 Units per mL, 10mL	1 @ 9.70	CS,NO
1430G	(mixed porcine/bovine)	100 Units per mL, 10mL	1 @ 9.70	NO
1719L	Insulin Zinc Suspension (Amorphous) (bovine)	100 Units per mL, 10mL	1 @ 9.70	BW,CS
1720M	Insulin Zinc Suspension (Amorphous) (porcine)	100 Units per mL, 10mL	1 @ 9.70	CS,NO
1721N	Insulin Zinc Suspension (Crystalline) (bovine)	100 Units per mL, 10mL	1 @ 9.70	BW,CS,NO
2913H	Levonorgestrel	30mcg	1 @ 1.51	SC,WY
1455N	Levonorgestrel with Ethinylloestradiol	125mcg-50mcg	1 @ 1.51	SC
1393H		150mcg-30mcg	1 @ 1.51	SC,WY
3186Q		250mcg-50mcg	1 @ 1.51	SC,WY
1457Q		Tablet-Pack	1 @ 1.51	WY
1458R		Tablet-Pack	1 @ 1.51	SC,WY
1456P		Tablet-Pack	1 @ 1.51	SC
1394J		Tablet-Pack	1 @ 1.51	SC,WY

(Apply wastage factor in calculating broken quantity prices)

4

Code	Approved Name	Form/Strength	Pack and Price \$	Manufacturer
3188T	Levonorgestrel with Ethinylloestradiol	Tablet-Pack	1 @ 1.51	SC,WY
1391F		Tablet-Pack	1 @ 1.51	SC,WY
1392G		Tablet-Pack	1 @ 1.51	SC,WY
2401J	Lypressin	50 Units per mL, 5mL	1 @ 5.16	SZ
2547C	Melphalan	2mg	25 @ 13.48	BW
2548D		5mg	25 @ 23.09	BW
1598D	Mercaptopurine	50mg	25 @ 20.55	BW
1612W	Methdilazine	4mg	50 @ 1.93	GL
1613X		8mg	50 @ 2.06	GL
1620G	Methenolone Acetate	5mg	50 @ 6.86	SC
2393Y	Methotrexate	5mg	1 @ 4.25	LE
2396D		5mg in 2mL	1 @ 4.25	LE
2394B		50mg	1 @ 12.44	LE
2395C		50mg in 2mL	1 @ 11.69	LE
1284N	Milk Powder - Lactose Modified	500g	1 @ 4.94	SJ
1283M	Milk Powder - Low Lactose Formula	500g	1 @ 4.94	SJ
3092R	Milk Powder - Synthetic	397g	1 @ 10.83	MN
1637E		454g	1 @ 11.51	MN
2685H		454g	1 @ 28.44	MN
1924G	Mithramycin	2.5mg	1 @ 19.44	PF
1681L	Niclosamide	500mg	4 @ 2.54	BN
1967M	Norethisterone	350mcg	1 @ 1.51	ET,SD
2772X	Norethisterone with Ethinylloestradiol	500mcg-35mcg	1 @ 1.51	ET,SD
2773Y		1mg-35mcg	1 @ 1.51	ET,SD
2774B		Tablet-Pack	1 @ 1.51	ET,SD
2775C		Tablet-Pack	1 @ 1.51	ET,SD
2776D		Tablet-Pack	1 @ 1.51	SD
3176E	Norethisterone with Mestranol	1mg-50mcg	1 @ 1.51	ET,SD
3177F		1mg-80mcg	1 @ 1.51	ET
3178G		2mg-100mcg	1 @ 1.51	SD
3179H		Tablet-Pack	1 @ 1.51	SD
3180J	Norethisterone Acetate with Ethinylloestradiol	1mg-50mcg	1 @ 1.51	SC
3181K		3mg-50mcg	1 @ 1.51	SC
3182L		4mg-50mcg	1 @ 1.51	SC
3183M		Tablet-Pack	1 @ 1.51	PD,SC
3184N		Tablet-Pack	1 @ 1.51	PD
1442X	Norgestrel with Ethinylloestradiol	500mcg-50mcg	1 @ 1.51	SC
3187R		500mcg-50mcg	1 @ 1.51	SC,WY
3189W		Tablet-Pack	1 @ 1.51	SC
2564Y	Nutramigen	500g	1 @ 13.26	MJ
2410W	Peritoneal Dialysis Solution	1.36% Anhydrous Glucose, 1L	1 @ 2.75	AB
3192B		3.86% Anhydrous Glucose, 1L	1 @ 2.75	AB
1706T	Phenethicillin	125mg	25 @ 2.05	SI
1707W		250mg	25 @ 2.49	CS,SI
1709Y		250mg	25 @ 2.49	CS,SI
1702N	Phenoxymethylpenicillin	125mg	25 @ 2.05	AB,CS
1703P		250mg	25 @ 2.38	AB,CS,FM, LY,SI
1705R		250mg	25 @ 2.38	AB,CS,FA,FM, LY,SI
1865E	Phenylalanine Low Content Formula	2.5 lb	1 @ 53.50	MJ
1901C	Plague Vaccine	0.5mL	1 @ 3.90	CS
1919B	Prednisolone Acetate	10mg in 1mL	1 @ 1.56	SC

Code	Approved Name	Form/Strength	Pack and Price \$	Manufacturer
1920C	Prednisolone Sodium Phosphate	20mg in 100mL	7 @ 14.65	GL
2554K		5mg, 10	1 @ 5.31	GL
1941E	Procainamide	100mg per mL, 10mL	1 @ 2.81	SQ
2893G	Prochlorperazine	5mg	100 @ 2.65	PT
			100 @ 2.68	MB,SK
1948M	Promethazine	50mg in 2mL	5 @ 1.63	BL
2830Y	Propranolol	1mg in 1mL	10 @ 9.45	IC
3056W	Protein Hydrolysate Formula without Phenylalanine	200g	1 @ 31.40	SJ
1987N	Rolitetraacycline	I.V. 275mg	1 @ 3.50	HP
1990R		I.M. 350mg	1 @ 3.50	HP
2013Y	Sodium Aurothiomalate	1mg	10 @ 17.69	MB
2015C		5mg	10 @ 21.79	MB
2016D		10mg	10 @ 26.58	MB
3015Q	Sodium Bicarbonate	8.4%, 100mL	1 @ 2.78	AB
1261J	Sodium Valproate	200mg	100 @ 19.14	RC
2289L		200mg (e.c.)	100 @ 19.14	RC
2040J	Soya Formula	375mL	1 @ 1.14	MJ
2039H		384mL	1 @ 1.14	RD
3130R	Streptokinase	100,000 I.U.	1 @ 23.13	PS
2906Y		250,000 I.U.	1 @ 38.39	HP
			1 @ 40.74	PS
2962X		600,000 I.U.	1 @ 82.75	PS
2907B		750,000 I.U.	1 @ 97.34	HP
2093E	Sulphasalazine	500mg	100 @ 11.91	PS
2096H		500mg (e.c.)	100 @ 11.91	PS
2115H	Testosterone Propionate	25mg in 1mL	3 @ 2.24	SC
2116J		50mg in 1mL	3 @ 3.90	SC
2127Y	Tetanus Vaccine, Adsorbed	0.5mL	1 @ 1.44	CS
2832C	Tetracosactrin	1mg in 1mL	1 @ 3.95	CG
2135J	Tetracycline	250mg	25 @ 2.80	BZ(N),CS,LE,UP
2152G	Tetracycline with Nystatin	250mg-250,000 Units	25 @ 2.80	BC,LE,SQ,UP
2146Y	Tetracycline (Buffered)	250mg	25 @ 2.80	BC,CS,FM,HP,LE,SQ
2368P	Thiethylperazine	6.5mg (base) in 1mL	5 @ 2.41	SZ
2345K	Thiotepa	15mg	1 @ 8.38	LE
1355H	Tobramycin Sulphate	40mg	1 @ 3.73	LY
1356J		80mg	1 @ 5.88	LY
2676W	Triglycerides, Medium Chain	400g	1 @ 14.28	NT
2686J		450g	1 @ 12.81	MJ
2679B		454g	1 @ 14.28	MJ
2800J	Typhoid Vaccine	0.5mL	1 @ 1.66	CS
2195M	Typhus Vaccine	1mL	1 @ 20.55	CS
3131T	Vancomycin	500mg	1 @ 15.84	LY
2197P	Vasopressin Tannate	5 Units in 1mL	5 @ 12.86	PD
2198Q	Vinblastine	10mg	1 @ 22.69	LY
2371T	Vincristine	1mg	1 @ 19.94	LY

(Apply wastage factor in calculating broken quantity prices)

Code	Approved Name	Form/Strength	Pack and Price \$	Manufacturer
INTRAVENOUS INFUSIONS FOR INJECTION				
2305H	Dextran 40	10%-5%, 500mL	1 @ 13.98	FC
3199J	Electrolyte Replacement Solution	1L	1 @ 3.73	AB,TV
2245E	Glucose	5%, 1L	1 @ 3.08	AB,TV
2247G		10%, 1L	1 @ 3.55	AB,TV
2249J		20%, 1L	1 @ 3.73	AB,TV
2251L		25%, 1L	1 @ 3.73	AB,TV
2252M		50%, 500mL	1 @ 3.09	AB
2264E	Sodium Chloride	0.9%, 1L	1 @ 3.08	AB,TV,VF(N)
2260Y		3%, 1L	1 @ 3.73	AB,TV
2262C		5%, 1L	1 @ 3.73	TV
2266G	Sodium Chloride Compound BPC 1959	1L	1 @ 3.58	AB,TV
2271M	Sodium Chloride and Glucose	0.9%-5%, 1L	1 @ 3.73	AB,TV
2278X		0.45%-2.5%, 500mL	1 @ 3.08	AB,TV
2279Y		0.225%-3.75%, 500mL	1 @ 3.08	AB,TV
2281C		0.18%-4%, 1L	1 @ 3.08	AB,TV
2282D		0.18%-4.3%, 1L	1 @ 3.15	AB
2284F	Sodium Lactate	1L	1 @ 3.66	VF
2286H	Sodium Lactate Compound	1L	1 @ 3.08	AB,TV
2288K	Sodium Lactate Compound and Anhydrous Glucose	5%, 1L	1 @ 3.73	AB,TV
2293Q	Standard Maintenance Fluid	500mL	1 @ 2.71	AB
PREPARATIONS WHICH MAY BE PRESCRIBED BY PARTICIPATING DENTAL PRACTITIONERS FOR DENTAL TREATMENT ONLY				
3342X	Nystatin	500,000 Units	50 @ 6.94	GP,LE,SQ

PROPRIETARY INDEX

PART 1 PROPRIETARY NAMES INDEX

PART 2 TRADE NAMES INDEX

ABBREVIATIONS

(C & I) Preparations available for colostomy and
ileostomy use

(P & Q) Preparations available for use by para-
plegic and quadriplegic patients

Proprietary Name	Manu- fac- turer	Name
Abbecillin	AB	Penicillin Products
Abbecillin-V	AB	Phenoxymethylpenicillin
Abbecillin-VK	AB	Phenoxymethylpenicillin
Acetopt	SI	Sulphacetamide Sodium
Achromycin	LE	Tetracycline
Achromycin V	LE	Tetracycline (Buffered)
Achrostatin	LE	Tetracycline with Nystatin
Actacode	SI	Codeine Phosphate
Actal	WL	Aluminium Hydroxide Dried
Actidil	BW	Triprolidine
Actrapid M.C. Novo	NO	Insulin Neutral
Actuss	SI	Pholcodine
Adacor	NN	Hydrocortisone
Adalat	BN	Nifedipine
Adaphol	NN	Pholcodine
Adaquin	NN	Quinine Sulphate
Adasone	NN	Prednisone
Adnisolone	NN	Prednisolone
Adroyd	PD	Oxymetholone
Aerocortin	BW	Polymyxin B Sulphate with Neomycin and Hydrocortisone
Aerosporin	BW	Polymyxin B Sulphate
Akineton	KN	Biperiden
Albalon Liquifilm	AG	Naphazoline Hydrochloride
Albay Bee Venom	BN	Insect Allergen Extract - Honey Bee Venom
Albay Wasp Venom	BN	Insect Allergen Extract - Wasp Venom Protein
Albumaid XP	SJ	Protein Hydrolysate Formula without Phenylalanine
Aldactone	SR	Spironolactone
Aldecin	SH	Beclomethasone Dipropionate
Aldomet	MK	Methyldopa
Aldomet-M	MK	Methyldopa
Alfaré	NT	Triglycerides, Medium Chain
Alinol	US	Allopurinol
Alkeran	BW	Melphalan
Allegron	DL	Nortriptyline
Allergex	PT	Chlorpheniramine
Almacarb	GL	Aluminium Hydroxide and Magnesium Carbonate Co-Dried Gel
Alodorm	AF	Nitrazepam
Alphapress 25	AF	Hydralazine Hydrochloride
Alphapress 50	AF	Hydralazine Hydrochloride
Alucone	DH	Aluminium Hydroxide with Magnesium Hydroxide
Aludrox	WY	Aluminium Hydroxide with Magnesium Hydroxide
Alupent	BY	Orciprenaline
Alusorb	DH	Aluminium Hydroxide
Ames-BG	AM	Glucose Indicator - Blood
Aminogran F.S.	GL	Amino Acid Formula without Phenylalanine
Aminogran M.M.	GL	Mineral Mixture
Aminopt	SI	Aminacrine Hydrochloride
Amitrip	PT	Amitriptyline
Amizide	PT	Hydrochlorothiazide with Amiloride
Amoxil	BR	Amoxycillin
Amphojel	WY	Aluminium Hydroxide

Proprietary Name	Manufacturer	Name
Amphotabs	WY	Aluminium Hydroxide Dried
Ampicyn	PT	Ampicillin
Amytal Sodium	LY	Amylobarbitone Sodium
Anapolon	SD	Oxymetholone
Anatensol	SQ	Fluphenazine
Ancolan	GL	Meclozine
Ancotil	RO	Flucytosine
Angilol	BM	Propranolol
Anginine Stabilised	BW	Glyceryl Trinitrate
Anovlar	SC	Norethisterone Acetate with Ethinyloestradiol
Antadine	DT	Amantadine Hydrochloride
Anti-Naus	PT	Prochlorperazine
Antipres	PT	Guanethidine
Antipres M	PT	Guanethidine
Anti-Spas	PT	Benzhexol
Antistine Privine	ZY	Antazoline with Naphazoline
Anturan	CG	Sulphinpyrazone
Anusol	WW	Zinc Oxide
Apresoline	CG	Hydralazine Hydrochloride
Aprinox	BT	Bendrofluazide
Aprinox-M	BT	Bendrofluazide
Aptin	AP	Alprenolol
Aquacare H.P.	AG	Urea
Aquacillin	FA	Procaine Penicillin
Aquadrate	NW	Urea
Aquamox	LE	Quinethazone
Arfonad	RO	Trimetaphan
Aristocort 0.02%	LE	Triamcinolone Acetonide
Aristocort 0.05%	LE	Triamcinolone Acetonide
Artane	LE	Benzhexol
Arterioflexin	PT	Clofibrate
Arthrexin	AF	Indomethacin
Ascabiol	MB	Benzyl Benzoate
Ascorb "50"	PT	Ascorbic Acid
Aspalgin	FM	Codeine Phosphate with Aspirin
A.T.10	WL	Dihydrotachysterol
Atrobel	FM	Belladonna Alkaloids
Atrobel FORTE	FM	Belladonna Alkaloids
Atromid-S	IC	Clofibrate
Atropt	SI	Atropine Sulphate
Atrovent	BY	Ipratropium Bromide
Aureomycin	LE	Chlortetracycline
Austramycin	CS	Tetracycline
Austramycin-V	CS	Tetracycline (Buffered)
Austrapen	CS	Ampicillin
Austrapen Forte	CS	Ampicillin
Austrastaph	CS	Cloxacillin
Avil	HP	Pheniramine
Avlosulfon	IC	Dapsone
Avomine	MB	Promethazine Theoclate
Azide	FM	Chlorothiazide
Bactrim	RO	Trimethoprim with Sulphamethoxazole
Bactrim DS	RO	Trimethoprim with Sulphamethoxazole
B.A.L.	BT	Dimercaprol
Banish	DY	Deodorant Concentrate (C & I)
Baycaron	BN	Mefruside

Proprietary Name	Manu- fac- turer	Name
Becotide	GL	Beclomethasone Dipropionate
Becotide Rotacaps	GL	Beclomethasone Dipropionate
Benadryl	PD	Diphenhydramine
Benemid	FR	Probenecid
Benzemul	MG	Benzyl Benzoate
Benzide	PT	Bendrofluazide
Benzide M	PT	Bendrofluazide
Benzotran	PT	Oxazepam
Berotec	BY	Fenoterol Hydrobromide
Betacard	BR	Alprenolol
Betaloc	AP	Metoprolol
Betamin	US	Thiamine Hydrochloride
Betatabs-50	FM	Thiamine Hydrochloride
Betatabs-100	FM	Thiamine Hydrochloride
Beta Sol	FM	Thiamine Hydrochloride
Betnovate 1/5	GL	Betamethasone Valerate
Betnovate 1/2	GL	Betamethasone Valerate
Bi-Chinine	DH	Quinine Bisulphate
Bicillin All Purpose	WY	Benzathine Penicillin Compound
Biphasil 21	WY	Levonorgestrel with Ethinyloestradiol
Biphasil 28	WY	Levonorgestrel with Ethinyloestradiol
Bi-Prin	BT	Aspirin
Biquin	NN	Quinine Bisulphate
Bi-Quinate	US	Quinine Bisulphate
Bisalax	PT	Bisacodyl
Bitard-2	CS	Insulin Biphasic
Bleph 10	AG	Sulphacetamide Sodium
Blocadren	FR	Timolol
BM-Test-BG	BO	Glucose Indicator - Blood
BM-Test-Glycemie 20-800	BO	Glucose Indicator - Blood
Brevinor	SD	Norethisterone with Ethinyloestradiol
Brevinor-1	SD	Norethisterone with Ethinyloestradiol
Bricanyl	AP	Terbutaline Sulphate
Brinaldix	SZ	Clopamide
Brondecon	WW	Choline Theophyllinate with Guaiphenesin
Brondecon-PD	PD	Choline Theophyllinate
Brondecon Elixir-PD	PD	Choline Theophyllinate
Bronkephrine	WL	Ethylnoradrenaline
Brufen	BT	Ibuprofen
Bufferin	BC	Aspirin
Burinex	AP	Bumetanide
Buscopan	BY	Hyoscine Butylbromide
Cafergot	SZ	Ergotamine Tartrate with Caffeine
Cafergot PB	SZ	Ergotamine Tartrate with Caffeine, Itobarbitone and Belladonna Alkaloids
Calciparine	DF	Heparin Calcium
Calcium Disodium Versenate	RK	Sodium Calciumedetate
Calcium Sandoz	SZ	Calcium Gluconate
Calmazine	PT	Trifluoperazine
Calmurid	PS	Urea
Camcolit	NE	Lithium Carbonate
Campholinct	DH	Camphor Compound

Proprietary Name	Manu- fac- turer	Name
Canesten	BN	Clotrimazole
Canesten 1	BN	Clotrimazole
Canesten 3	BN	Clotrimazole
Capoten	SQ	Captopril
Caprin	CS	Heparin Calcium
Captol	PT	Oxprenolol
Capurate-100	FM	Allopurinol
Capurate-300	FM	Allopurinol
Carbapen	CS	Carbenicillin
Carbolith	DH	Lithium Carbonate
Cardinol	PT	Propranolol
Cardophyllin	HA	Aminophylline
Cardoquin	NN	Quinidine Sulphate
Catapres	BY	Clonidine
Ceetamol	PT	Paracetamol
Celestone	SH	Betamethasone
Celestone Chronodose	SH	Betamethasone Acetate with Betamethasone Sodium Phosphate
Celestone-M	SH	Betamethasone Valerate
Celestone-V	SH	Betamethasone Valerate
Half Strength		
Celontin	PD	Methsuximide
Ceporacin	GL	Cephalothin Sodium
Char-Bons	LF	Charcoal, Activated (C & I)
Chinine	DH	Quinine Sulphate
Chlomin	US	Chloramphenicol
Chloralix	RK	Chloral Hydrate
Chloramin	LF	Chlorpheniramine
Chloromycetin	PD	Chloramphenicol
Chloromycetin Palmitate	PD	Chloramphenicol
Chloromycetin Succinate	PD	Chloramphenicol
Chloromyxin	PD	Chloramphenicol with Polymyxin B
Chloroptic	AG	Chloramphenicol
Chlorquin	PT	Chloroquine
Chlorsig	SI	Chloramphenicol
Chlorvescent	PT	Potassium Chloride
Chlotride	FR	Chlorothiazide
Choledyl	WW	Choline Theophyllinate
Cidomycin	RL	Gentamicin Sulphate
Cilicaine	SI	Procaine Penicillin
Cilicaine V	SI	Phenoxymethylpenicillin
Cilicaine VK	SI	Phenoxymethylpenicillin
Citralka	PD	Sodium Acid Citrate
Citravescent Sachets	PT	Sodium Citro-Tartrate
Cleensheen	FL	Maldison
Clinistix	AM	Glucose Indicator - Urine
Clinitest	AM	Copper Sulphate
Clinoril	FR	Sulindac
Codalgin	FM	Codeine Phosphate with Paracetamol
Codate	US	Codeine Phosphate
Codelix	DH	Codeine Phosphate
Codlin	NN	Codeine Phosphate
Codral Forte	BW	Codeine Phosphate with Aspirin

Proprietary Name	Manu- fac- turer	Name
Cogentin	MK	Benztropine
Colestid	UP	Colestipol Hydrochloride
Colgout	PT	Colchicine
Colifoam	SV	Hydrocortisone Acetate
Colly-seels	DY	Sterculia (C & I)
Coloplast	ST	Sterculia (C & I)
Coloxyl	FM	Diocetyl Sodium Sulphosuccinate with Bisacodyl
Coluric	NN	Colchicine
Coly-Mycin Injection	WW	Colistin
Coly-Mycin Ear Drops	WW	Colistin with Neomycin
Compazine	SK	Prochlorperazine
Compenase	CS	Penicillinase
Comycin	UP	Tetracycline with Nystatin
Concordin	MK	Protriptyline
Convuline	PT	Carbamazepine
Cordarone X 200	RC	Amiodarone Hydrochloride
Cordilox	SC	Verapamil Hydrochloride
Cortate	PT	Cortisone Acetate
Cortef	UP	Hydrocortisone
Cotazym	OR	Pancrelipase
Coumadin	DT	Warfarin
Crystapen	GL	Benzylpenicillin
Cyclidox	PT	Doxycycline
Cyklokapron	PS	Tranexamic Acid
Cytamen 100	GL	Cyanocobalamin
Cytamen 1000	GL	Cyanocobalamin
Cytosar-U	UP	Cytarabine
Daktarin	JP	Miconazole
Daktarin	JP	Miconazole Nitrate
Dalacin C	UP	Clindamycin
Danocrine	WL	Danazol
Dantrium	NW	Dantrolene Sodium
Daonil	HP	Glibenclamide
Daranide	MK	Dichlorphenamide
Daraprim	BW	Pyrimethamine
Dartalan	SR	Thiopropazate
Decadron	MK	Dexamethasone
Decadron Shock Pak	MK	Dexamethasone
Deca-Durabolin	OR	Nandrolone Decanoate
Declinax	RO	Debrisoquine
De-Lact Infant	SJ	Milk Powder - Low Lactose Formula
Delta-Cortef	UP	Prednisolone
Deltasolone	US	Prednisolone
Deltasone	US	Prednisone
De-Nol	PD	Tri-potassium Di-citrate Bismuthate Complex
Depo-Medrol	UP	Methylprednisolone Acetate
Depo-Provera	UP	Medroxyprogesterone
Deralin 10	AF	Propranolol
Deralin 40	AF	Propranolol
Deralin 160	AF	Propranolol
Dermabase S	HA	Dimethicone
Dermacort	PD	Hydrocortisone
Dermacort "O"	PD	Hydrocortisone

Proprietary Name	Manu- fac- turer	Name
Deseril	SZ	Methysergide
Dexacillin	SQ	Epicillin
Dexamethasone	PT	Dexamethasone
Diabex S.R.	DF	Metformin
Diabinese	PF	Chlorpropamide
Diamicron	SE	Gliclazide
Diamox	LE	Acetazolamide
Diasol	AB	Peritoneal Dialysis Solution
Diastatin	GP	Nystatin
Diastix	AM	Glucose Indicator - Urine
Diatol	PT	Tolbutamide
Dibenyline	SK	Phenoxybenzamine
Dichlotride	MK	Hydrochlorothiazide
Digestelact	SJ	Milk Powder - Lactose Modified
Dihydergot	SZ	Dihydroergotamine
Dilantin	PD	Phenytoin
Dilantin Infatabs	PD	Phenytoin
Dilantin Sodium	PD	Phenytoin Sodium
Dilosyn	GL	Methdilazine
Dimal	PT	Methyldopa
Dimetane	RS	Brompheniramine
Dindevan	GL	Phenindione
Dipramol	PT	Dipyridamole
Diprosone	SH	Betamethasone Dipropionate
Disipal	RK	Orphenadrine Hydrochloride
Diulo	SR	Metolazone
Diuret	PT	Chlorothiazide
Diurone	US	Chlorothiazide
Dolobid	MK	Diffunisal
Donnatab	RS	Belladonna Alkaloids
Dormel	DH	Chloral Hydrate
Dormicum	PT	Nitrazepam
Doxin	GP	Doxycycline
D-Penamine	DL	Penicillamine
Ducene	SU	Diazepam
Duoluton	SC	Norgestrel with Ethinyloestradiol
Duphalac	ET	Lactulose
Duphaston	ET	Dydrogesterone
Durabolin	OR	Nandrolone Phenylpropionate
Duractin	CS	Cimetidine
Durolax	BY	Bisacodyl
Duro-Tuss	RK	Pholcodine
Dyazide	SK	Hydrochlorothiazide with Triamterene
Dymadon	BW	Paracetamol
Dymadon Co.	BW	Codeine Phosphate with Paracetamol
Dytac	SK	Triamterene
Ecostatin	SQ	Econazole Nitrate
Ecotrin	SK	Aspirin
Edecril	MK	Ethacrynic Acid
EES 200	AB	Erythromycin Ethylsuccinate
EES Dulcet	AB	Erythromycin Ethylsuccinate
Efcortelan	GL	Hydrocortisone Sodium Succinate
Ekaprol	DF	Aminocaproic Acid
Elix-Nocte Forte	NN	Chloral Hydrate
Elixophyllin	SC	Theophylline

Proprietary Name	Manu- fac- turer	Name
Elixophyllin-KI	SC	Theophylline with Potassium Iodide
Emsalin	DH	Methyl Salicylate
EMU-V	UP	Erythromycin
E-Mycin	PT	Erythromycin Stearate
Endone	DT	Oxycodone Hydrochloride
Enduron	AB	Methyclothiazide
Enduron M	AB	Methyclothiazide
Ensalate	RC	Sodium Salicylate
Epifrin	AG	Adrenaline
Epilim	RC	Sodium Valproate
Epilim EC	RC	Sodium Valproate
Epinal	AQ	Adrenaline
Eppy/N	BF	Adrenaline
Ergodryl	PD	Ergotamine Tartrate with Caffeine Citrate and Diphenhydramine Hydrochloride
Ergotrate	LY	Ergometrine Maleate
Eromycin	DL	Erythromycin Estolate
Eryc	FA	Erythromycin
Erythrocin	AB	Erythromycin Ethylsuccinate
Erythrocin	AB	Erythromycin Lactobionate
Erythrocin	AB	Erythromycin Stearate
Esidrex	CG	Hydrochlorothiazide
Estigyn	GL	Ethinylloestradiol
Estradurin	AY	Polyestradiol
Ethamolin	GL	Ethanolamine Oleate
Eucerin	SN	Wool Alcohols
Euglucon	RC	Glibenclamide
Eugynon	SC	Norgestrel with Ethinylloestradiol
Eugynon-BD	SC	Norgestrel with Ethinylloestradiol
Euhypnos	SI	Temazepam
Eumydrin	WL	Atropine Methonitrate
Falcopen V	FA	Phenoxymethylpenicillin
Falcopen VK	FA	Phenoxymethylpenicillin
Fansidar	RO	Pyrimethamine with Sulfadoxine
Fasigyn	PF	Tinidazole
Fefol	SK	Ferrous Sulphate Dried with Folic Acid
Fenamine	FM	Pheniramine
Fenamine-M	FM	Pheniramine
Fenostil	ZY	Dimethindene
Fergon	WL	Ferrous Gluconate
Feritard	PT	Ferrous Sulphate Dried
Feritard Folic	PT	Ferrous Sulphate Dried with Folic Acid
Ferro-Gradumets	AB	Ferrous Sulphate Dried
Ferrum H	SI	Iron Polymaltose Complex
Fespan	SK	Ferrous Sulphate Dried
F.G.F.	AB	Ferrous Sulphate Dried with Folic Acid
Flagyl	MB	Metronidazole
Flagyl S	MB	Benzoyl Metronidazole
Flophen	CS	Flucloxacillin
Floraquin	SR	Di-iodohydroxyquinoline
Florinef	SQ	Fludrocortisone Acetate
Floxapen	BR	Flucloxacillin
Flucon	AQ	Fluorometholone
FML Liquifilm	AG	Fluorometholone
Folasic	NN	Folic Acid

Proprietary Name	Manu- fac- turer	Name
Folicid	US	Folic Acid
Fucidin	SK	Fusidic Acid
Fulcin 125	IC	Griseofulvin
Fulcin 500	IC	Griseofulvin
Fungilin	SQ	Amphotericin
Fungizone	SQ	Amphotericin
Furadantin	NW	Nitrofurantoin
Furamide	BT	Diloxanide Furoate
Galactomin Formula 17	MN	Milk Powder - Synthetic
Galactomin Formula 19	MN	Milk Powder - Synthetic
Gantanol	RO	Sulphamethoxazole
Gantrisin	RO	Sulphafurazole
Garamycin	SH	Gentamicin Sulphate
Gastrogel	FM	Aluminium Hydroxide with Magnesium Trisilicate and Magnesium Hydroxide
Gelox	PR	Aluminium Hydroxide
Gelusil	WW	Aluminium Hydroxide with Magnesium Hydroxide
Geopen Oral	PF	Carindacillin
Glaucon	AQ	Adrenaline
Glucophage	RN	Metformin
Glucose Nutramigen	MJ	Nutramigen
Glyfosolix	DH	Glycerophosphate Compound
Gold-50	SH	Aurothioglucose
Gondafon	SC	Glymidine
Granocol	SC	Bassorin with Frangula Bark
Griseostatin	SH	Griseofulvin
Grisovin	GL	Griseofulvin
Grisovin 500	GL	Griseofulvin
Gyne-Lotremin	SH	Clotrimazole
Gyno-Daktarin 7	JP	Miconazole Nitrate
Gyno-Travogen	SC	Isoconazole Nitrate
Gynovlar	SC	Norethisterone Acetate with Ethinyloestradiol
Halotestin	UP	Fluoxymesterone
Hemineurin	AP	Chlormethiazole
Hemorex	WL	Phenylephrine
Herplex	AG	Idoxuridine
Hibitane Concentrate	IC	Chlorhexidine
Hiprex	RK	Hexamine Hippurate
Histalert	RK	Diphenylpyraline
HMS Liquifilm	AG	Medrysone
Hollihesive Skin Barrier	HO	Polyisobutylene (C & I)
Honvan	BC	Fosfestrol Sodium
Hostacycline P	HP	Tetracycline (Buffered)
Hycor	SI	Hydrocortisone
Hydracycline	FM	Tetracycline (Buffered)
Hydrea	SQ	Hydroxyurea
Hydrosone	US	Hydrocortisone
Hygroton	CG	Chlorthalidone
Hyperstat I.V.	SH	Diazoxide
Hypurin Isophane	WP	Insulin Isophane (N.P.H.)

Proprietary Name	Manu- fac- turer	Name
Hypurin Neutral	WP	Insulin Neutral
Hysone	PT	Hydrocortisone
Hysone-A	PT	Hydrocortisone Acetate
Ilocap	LY	Erythromycin
Ilosone	LY	Erythromycin Estolate
Ilotycin	LY	Erythromycin Gluceptate
Imferon	FC	Iron Dextran
Imiprin	PT	Imipramine
Imodium	JP	Loperamide Hydrochloride
Imuran	BW	Azathioprine
Inderal	IC	Propranolol
Indocid	MK	Indomethacin
Infasoy	WY	Soya Formula
Inflam	PT	Ibuprofen
Insulatard Nordisk	BW	Insulin Isophane (N.P.H.)
Insulin-2	CS	Insulin
Intal	FC	Sodium Cromoglycate
Intal Spincaps	FC	Sodium Cromoglycate
Invite-B	NN	Thiamine Hydrochloride
Ismelin	CG	Guanethidine
Isomil	RD	Soya Formula
Isophane M.C.	NO	Insulin Isophane (N.P.H.)
Isoptin	KN	Verapamil Hydrochloride
Isopto Carpine	AQ	Pilocarpine Hydrochloride
Isopto Cetamide	AQ	Sulphacetamide Sodium
Isopto Frin	AQ	Phenylephrine
Isopto Tears	AQ	Hypromellose
Isordil	AY	Isosorbide Dinitrate
Isordil Sublingual	AY	Isosorbide Dinitrate
Isotard-2	CS	Insulin Isophane (N.P.H.)
Isotard-2 PC	CS	Insulin Isophane (N.P.H.)
Isotrate	PD	Isosorbide Dinitrate
Isotrate Sublingual	PD	Isosorbide Dinitrate
Jectofer	AP	Iron Sorbitol
Kabikinase	PS	Streptokinase
Kanasig	SI	Kanamycin
Kantrex	BC	Kanamycin
Kaogel	FA	Aluminium Hydroxide with Kaolin
Kaomagma	WY	Aluminium Hydroxide with Kaolin
Kaopectate	UP	Kaolin with Pectin
Karaya Paste	HO	Sterculia (C & I)
Kay Ciel	SC	Potassium Chloride
Keflex	LY	Cephalexin
Keflin Neutral	LY	Cephalothin Sodium
Kefzol	LY	Cephazolin Sodium
Kemadrin	BW	Procyclidine
Kenacomb Otic	SQ	Triamcinolone Acetonide with Neomycin Sulphate, Gramicidin and Nystatin
Kenacort-A10	SQ	Triamcinolone Acetonide
Kenalone	SQ	Triamcinolone Acetonide
Kenalone 0.02%	SQ	Triamcinolone Acetonide
Keto-Diastix	AM	Glucose and Ketone Indicator - Urine
Ketovite	ST	Vitamin Supplement
Kinidin	AP	Quinidine Bisulphate

Proprietary Name	Manu- fac- turer	Name
Klortee	PT	Chloramine (C & I)
Kolpon	OR	Oestrone
Konakion	RO	Phytomenadione
K-San	PR	Potassium Chloride
Lacril	AG	Hypromellose
Lanoxin	BW	Digoxin
Lanoxin-PG	BW	Digoxin
Lanvis	BW	Thioguanine
Largactil	MB	Chlorpromazine
Larodopa	RO	Levodopa
Laroxyl	RO	Amitriptyline
Lasix	HP	Frusemide
Lasix-M	HP	Frusemide
Ledermycin	LE	Demeclocycline Hydrochloride
Lente-2	CS	Insulin Zinc Suspension
Lente-2 PC	CS	Insulin Zinc Suspension
Lente M.C. Novo	NO	Insulin Zinc Suspension
Leucovorin	LE	Calcium Folate
Leukeran	BW	Chlorambucil
Lincocin	UP	Lincomycin
Lincocin SS	UP	Lincomycin
Paediatric		
Lingraine	WL	Ergotamine Tartrate
Lioresal	CG	Baclofen
Liquifilm Forte	AG	Polyvinyl Alcohol
Liquifilm Tears	AG	Polyvinyl Alcohol
Lithicarb	PT	Lithium Carbonate
Locacorten	CG	Flumethasone with Clioquinol
Vioform		
Locasol	MN	Milk Powder - Synthetic
Lofenalac	MJ	Phenylalanine Low Content Formula
Lomodex	FC	Dextran 40
Lomotil	SR	Diphenoxylate Hydrochloride with Atropine Sulphate
Loniten	UP	Minoxidil
Lopresor	CG	Metoprolol
Lorexane	IC	Lindane
Lorexane Concentrate	IC	Lindane
Lotremin	SH	Clotrimazole
LPV	CS	Phenoxymethylpenicillin
LPV 125	CS	Phenoxymethylpenicillin
LPV 250	CS	Phenoxymethylpenicillin
Lyspafen	PT	Difenoxin Hydrochloride with Atropine Sulphate
M & B 693	MB	Sulphapyridine
Macrochantin	NW	Nitrofurantoin
Macrodex	PS	Dextran 70
Madopar	RO	Levodopa with Benserazide
Madopar-M	RO	Levodopa with Benserazide
Madopar Q	RO	Levodopa with Benserazide
Magnoplasm	FA	Magnesium Sulphate
Maloprim	BW	Pyrimethamine with Dapsone
Mandelamine	WW	Hexamine Mandelate

Proprietary Name	Manu- fac- turer	Name
Mandelamine	WW	Hexamine Mandelate
Hafgrams		
Marevan	GL	Warfarin
Maxamaid XP	SJ	Amino Acid Formula with Vitamins and Minerals without Phenylalanine
Maxidex	AQ	Dexamethasone
Maxolon	BR	Metoclopramide Hydrochloride
Medrol	UP	Methylprednisolone
Melipramine	UW	Imipramine
Melleril	SZ	Thioridazine
Mestinon	RO	Pyridostigmine
Metamide	PT	Metoclopramide Hydrochloride
Methopa	US	Methyldopa
Methoprim	PT	Trimethoprim
Methopt	SI	Hypromellose
Methopt Forte	SI	Hypromellose
Meth-Zine	PT	Promethazine
Metin	CS	Methicillin
Mexitil	BY	Mexiletine Hydrochloride
Microgynon 30	SC	Levonorgestrel with Ethinyloestradiol
Microgynon 30 ED	SC	Levonorgestrel with Ethinyloestradiol
Microgynon 50	SC	Levonorgestrel with Ethinyloestradiol
Microgynon 50 ED	SC	Levonorgestrel with Ethinyloestradiol
Microlut 28	SC	Levonorgestrel
Micronor	ET	Norethisterone
Microval 28	WY	Levonorgestrel
Midamor	MK	Amiloride
Midone	PT	Primidone
Migral	BW	Ergotamine Tartrate with Caffeine and Cyclizine Hydrochloride
Milontin	PD	Phensuximide
Minipress	PF	Prazosin Hydrochloride
Minirin	PT	Desmopressin
Minomycin	LE	Minocycline
Minovlar	SC	Norethisterone Acetate with Ethinyloestradiol
Minovlar ED	SC	Norethisterone Acetate with Ethinyloestradiol
Mintezol	MK	Thiabendazole
Mithracin	PF	Mithramycin
Mixtard Nordisk	BW	Insulin Isophane (N.P.H.) - Insulin Neutral, (Mixed)
Modecate	SQ	Fluphenazine Decanoate
Modicon	ET	Norethisterone with Ethinyloestradiol
Moduretic	MK	Hydrochlorothiazide with Amiloride
Mogadon	RO	Nitrazepam
Monistat 7	ET	Miconazole Nitrate
Monotard M.C. Novo	NO	Insulin Zinc Suspension
Mortha	WH	Morphine with Tacrine
Moxacin	CS	Amoxycillin
Mucaine	WY	Aluminium Hydroxide with Magnesium Hydroxide and Oxethazaine
Mucomyst	MJ	Acetylcysteine
Murelax	AY	Oxazepam
Mycitracin	UP	Polymyxin B Sulphate with Bacitracin and Neomycin
Mycostatin	SQ	Nystatin
Mylanta	PD	Aluminium Hydroxide with Magnesium Hydroxide

Proprietary Name	Manu- fac- turer	Name
Myleran	BW	Busulphan
Myocrisin	MB	Sodium Aurothiomalate
Myoquin	FM	Quinine Bisulphate
Mysoline	IC	Primidone
Mysteclin-V	SQ	Tetracycline with Nystatin
Mytelase	WL	Ambenonium Chloride
Naprosyn	SD	Naproxen
Narcan Neonatal	DT	Naloxone Hydrochloride
Nardil	WW	Phenelzine
Natulan	RO	Procarbazine
Navidrex	CG	Cyclopenthiiazide
Nebcin	LY	Tobramycin Sulphate
Nefrolan	MB	Clorexolone
Negram	WL	Nalidixic Acid
Nemdyn	HA	Neomycin Undecenoate with Bacitracin Zinc
Neocon	ET	Norethisterone with Ethinyloestradiol
Neo-Cortef	UP	Hydrocortisone with Neomycin Sulphate
Neogynon	SC	Levonorgestrel with Ethinyloestradiol
Neogynon ED	SC	Levonorgestrel with Ethinyloestradiol
Neo-Mercazole	NS	Carbimazole
Neopt	SI	Neomycin
Neosporin	BW	Polymyxin B Sulphate with Bacitracin and Neomycin
Eye Ointment		
Neosporin	BW	Polymyxin B Sulphate with Neomycin and Gramicidin
Eye Drops		
Neosulf	PT	Neomycin
Neo-Synephrine	WL	Phenylephrine
Neotracin	ET	Polymyxin B Sulphate with Bacitracin and Neomycin
Neulactil	MB	Pericyazine
Neutralon	SC	Aluminium Sodium Silicate
Nikacid	US	Nicotinic Acid
Nilstat	LE	Nystatin
Nipride	RO	Sodium Nitroprusside
Nitoman	RO	Tetrabenazine
Nitro-Bid	PT	Glyceryl Trinitrate
Nivaquine	MB	Chloroquine
Nobecutane	AP	Acrylic Resin (C & I)
Noctec	SQ	Chloral Hydrate
Nolvadex	IC	Tamoxifen Citrate
Nordette 21	WY	Levonorgestrel with Ethinyloestradiol
Nordette 28	WY	Levonorgestrel with Ethinyloestradiol
Nordicort	NR	Hydrocortisone Sodium Succinate
Nordioli 21	WY	Levonorgestrel with Ethinyloestradiol
Nordioli 28	WY	Levonorgestrel with Ethinyloestradiol
Noriday	SD	Norethisterone
Norinyl-1	SD	Norethisterone with Mestranol
Norinyl-2	SD	Norethisterone with Mestranol
Norinyl-1/28	SD	Norethisterone with Mestranol
Norlestrin	PD	Norethisterone Acetate with Ethinyloestradiol
Normison	WY	Temazepam
Normosol R	AB	Electrolyte Replacement Solution
Norpac	SR	Disopyramide
Nortab	SQ	Nortriptyline
Nuelin	RK	Theophylline
Nuelin Paediatric	RK	Theophylline

Proprietary Name	Manu- fac- turer	Name
Nuelin-S.R. 250	RK	Theophylline
Nuralin-2	CS	Insulin Neutral
Nutraplus	OL	Urea
Ocusert Pilo 20	PT	Pilocarpine
Ocusert Pilo 40	PT	Pilocarpine
Odortrol	LA	Deodorant Concentrate (C & I)
Omnopon	RO	Papaveretum
Omnopon Scopolamine	RO	Papaveretum with Hyoscine Hydrobromide
Oncovin	LY	Vincristine
Opticrom	FC	Sodium Cromoglycate
Optipen	CS	Phenethicillin
Orabase	SQ	Carmellose Sodium with Pectin and Gelatin (C & I)
Orabolin	OR	Ethylloestrenol
Oradexon	OR	Dexamethasone
Orahesive	SQ	Carmellose Sodium with Pectin and Gelatin (C & I)
Orbenin	BR	Cloxacillin
Orlest	PD	Norethisterone Acetate with Ethinyloestradiol
Oroxine	BW	Thyroxine Sodium (BP 1980)
Orpadrex	PT	Orphenadrine Hydrochloride
Ortho-Novum 1/50	ET	Norethisterone with Mestranol
Ortho-Novum 1/80	ET	Norethisterone with Mestranol
Ospolot	BN	Sulthiame
Ostelin	GL	Ergocalciferol
Ovral	WY	Norgestrel with Ethinyloestradiol
Ovulen 0.5	SR	Ethynodiol Diacetate with Mestranol
Ovulen 1	SR	Ethynodiol Diacetate with Mestranol
Ovulen 2	SR	Ethynodiol Diacetate with Mestranol
Ovulen 0.5/50	SR	Ethynodiol Diacetate with Ethinyloestradiol
Ovulen 0.5/50-28	SR	Ethynodiol Diacetate with Ethinyloestradiol
Ovulen 1/50	SR	Ethynodiol Diacetate with Ethinyloestradiol
Ovulen 1/50-28	SR	Ethynodiol Diacetate with Ethinyloestradiol
Pacedol	PT	Haloperidol
Palaprin Forte	NS	Aloxiaprin
Palfium	FA	Dextromoramide
Paludrine	IC	Proguanil
Panacete	PR	Paracetamol
Panafcort	PT	Prednisone
Panafcortelone	PT	Prednisolone
Panamax	WL	Paracetamol
Panamax Co.	WL	Codeine Phosphate with Paracetamol
Pancrease	ET	Pancrelipase
Panmycin P	UP	Tetracycline
Pantheline	PT	Propantheline Bromide
Paracodin	KN	Dihydrocodeine Tartrate
Paralgin	FM	Paracetamol
Parasin	NN	Paracetamol
Parlodel	SZ	Bromocriptine Mesylate
Parmol	US	Paracetamol
Parnate	SK	Tranylcypromine
PCL	DH	Paracetamol
Pectolin	FA	Pholcodine
Penbritin	BR	Ampicillin
Penbritin Forte	BR	Ampicillin
Pensig	SI	Phenethicillin

Proprietary Name	Manu- fac- turer	Name
Pensig 125	SI	Phenethicillin
Pensig 250	SI	Phenethicillin
Perdolat	KN	Penicillamine
Periactin	FR	Cyproheptadine
Persantin 100	BY	Dipyridamole
Pertofran	CG	Desipramine
Pethoid	BW	Pethidine
Pevaryl	SK	Econazole Nitrate
Pexid	ML	Perhexiline Maleate
Phenergan	MB	Promethazine
Pholcolin	DH	Pholcodine
Pholcolin Red	DH	Pholcodine
Pholtrate	MG	Pholcodine
Phospholine Iodide	AY	Ecothiopate Iodide
Physeptone	BW	Methadone
Pilopt	SI	Pilocarpine Hydrochloride
Pimafucin	GB	Natamycin
Piriton	GL	Chlorpheniramine
Pitressin Tannate	PD	Vasopressin Tannate
PK AID I	SJ	Amino Acid Formula without Phenylalanine
PK AID II	SJ	Amino Acid Formula without Phenylalanine
Plaquenil	WL	Hydroxychloroquine
Plasma-Lyte 148	TV	Electrolyte Replacement Solution
Plesmet	NN	Ferrous Aminoacetosulphate
Pneumovax	CS	Pneumococcal Vaccine, Polyvalent
Polaramine	SH	Dexchlorpheniramine
Portagen	MJ	Triglycerides, Medium Chain
Potavescent	PT	Potassium
Pramin	AF	Metoclopramide Hydrochloride
Prednefrin Forte	AG	Prednisolone Acetate with Phenylephrine
Predsol	GL	Prednisolone Sodium Phosphate
Prefrin	AG	Phenylephrine
Prefrin-Z	AG	Zinc with Phenylephrine
Pregestimil	MJ	Triglycerides, Medium Chain
Priadel	PT	Lithium Carbonate
Primobolan	SC	Methenolone Acetate
Primogyn C	SC	Ethinylloestradiol
Primogyn Depot	SC	Oestradiol Valerate
Primolut N	SC	Norethisterone
Primolut Nor	SC	Norethisterone Acetate
Primoteston Depot	SC	Testosterone Enanthate
Primperan	US	Metoclopramide Hydrochloride
Procid	PT	Probenecid
Procort	PR	Hydrocortisone
Progan	NN	Promethazine
Progout	PT	Allopurinol
Proladone	BT	Oxycodone
Prolol	US	Propranolol
Promacid	US	Chlorpromazine
Promide	PT	Chlorpropamide
Prominal	WL	Methylphenobarbitone
Pronestyl	SQ	Procainamide
Pro-Pam	PT	Diazepam
Propine	AG	Dipivefrine Hydrochloride
ProSobee	MJ	Soya Formula
Prostigmin	RO	Neostigmine
Prothazine	US	Promethazine

Proprietary Name	Manu- fac- turer	Name
Protaphane M.C.	NO	Insulin Isophane (N.P.H.)
Protran	PT	Chlorpromazine
Provera	UP	Medroxyprogesterone
Purinethol	BW	Mercaptopurine
P.V. Carpine	AG	Pilocarpine Hydrochloride
PVK	LY	Phenoxymethylpenicillin
P.V.O.	FM	Phenoxymethylpenicillin
Pydox	PT	Pyridoxine Hydrochloride
Questran	MJ	Cholestyramine
Quibron	MJ	Theophylline with Guaiphenesin
Quinate	US	Quinine Sulphate
Quinbisan	PR	Quinine Bisulphate
Quinbisul	AF	Quinine Bisulphate
Quinidex LA	RS	Quinidine Sulphate
Quinidis	US	Quinidine Sulphate
Quinidoxin	BW	Quinidine Sulphate
Quinoctal	FM	Quinine Sulphate
Quinsan	PR	Quinine Sulphate
Quinsul	AF	Quinine Sulphate
Quitaxon	RC	Doxepin
Rapitard M.C. Novo	NO	Insulin Biphasic
Rastinon	HP	Tolbutamide
Rectinol	GP	Benzocaine with Adrenaline
Redu-Press	PT	Debrisoquine
Redu-Press M	PT	Debrisoquine
Repalyte	DH	Electrolyte Replacement (Oral)
Respolin	RK	Salbutamol
Reverin	HP	Rolitetetracycline
Rheomacrodex	PS	Dextran 40
Rheumacin	PT	Indomethacin
Rhumax	PR	Sodium Salicylate
Rhusal	GP	Aspirin
Rikodeine	RK	Dihydrocodeine Tartrate
Rimycin 150	AF	Rifampicin
Rimycin 300	AF	Rifampicin
Rivotril	RO	Clonazepam
Rocaltrol	RO	Calcitriol
Randomycin	WW	Methacycline
Rythmodan	RL	Disopyramide
Sacsol	EG	Surgical Cement
Sacsol Non Flammable	EG	Surgical Cement
Salazopyrin	PS	Sulphasalazine
Salazopyrin-EN	PS	Sulphasalazine
Sandocal 1000	SZ	Calcium
Sandomigran	SZ	Pizotifen Malate
Saroten	NS	Amitriptyline
Saventrine	PN	Isoprenaline Hydrochloride
Scherisolon	SC	Prednisolone Acetate
S-Dimidine	PT	Sulphadimidine
Sedlingtus	RT	Pholcodine
Semilente-2	CS	Insulin Zinc Suspension (Amorphous)
Semilente-2 PC	CS	Insulin Zinc Suspension (Amorphous)

Proprietary Name	Manu- fac- turer	Name
Semilente M.C. Novo	NO	Insulin Zinc Suspension (Amorphous)
Senamon	DH	Senega and Ammonia
Septrin	BW	Trimethoprim with Sulphamethoxazole
Septrin Forte	BW	Trimethoprim with Sulphamethoxazole
Sequilar ED	SC	Levonorgestrel with Ethinyloestradiol
Serenace	SR	Haloperidol
Serepax	WY	Oxazepam
SH420	SC	Norethisterone Acetate
Sigmacort	SI	Hydrocortisone
Silcon	FA	Dimethicone
Silicon Skin Spray	EG	Dimethicone (C & I)
Silvazine	SN	Silver Sulphadiazine with Chlorhexidine Gluconate
Simeco Suspension	WY	Aluminium Hydroxide with Magnesium Hydroxide
Simeco Tablet	WY	Aluminium Hydroxide and Magnesium Carbonate Co-Dried Gel
Sinemet	MK	Levodopa with Carbidopa
Sinemet 100/25	MK	Levodopa with Carbidopa
Sinemet M	MK	Levodopa with Carbidopa
Sinequan	PF	Doxepin
Sintisone	EC	Prednisolone Stearoylglycolate
Skin Gel	HO	Isopropyl Monoester Polymer with Isopropyl Alcohol (C & I)
Skin-Prep	DY	Butyl Monoester Polymer with Isopropyl Alcohol (C & I)
Slow-Fe	CG	Ferrous Sulphate Dried
Slow-K	CG	Potassium Chloride
Sodexol	SC	Aluminium Hydroxide with Magnesium Hydroxide
Sofradex	RL	Dexamethasone with Framycetin and Gramicidin
Soframycin	RL	Framycetin
Solcode	RC	Codeine Phosphate with Aspirin
Solone	FM	Prednisolone
Solprin	RC	Aspirin
Solu-Cortef	UP	Hydrocortisone Sodium Succinate
Solu-Medrol	UP	Methylprednisolone Sodium Succinate
Somophyllin	FC	Aminophylline
Sone	FM	Prednisone
Span-K	PT	Potassium Chloride
Spirotone	PT	Spirolactone
Spray-On Bande	EG	Polyvinylpyrrolidone and Vinyl Acetate Copolymer (C & I)
Squibb-HC	SQ	Hydrocortisone
S.R.A.	BT	Aspirin
Steclin-V	SQ	Tetracycline (Buffered)
Stelazine	SK	Trifluoperazine
Stemetil	MB	Prochlorperazine
Sterofrin	AQ	Prednisolone Acetate
Sterogyl-15	RL	Ergocaliciferol
Stomahesive	SQ	Butyl Monoester Polymer with Ethanol (C & I)
Stomahesive Set	SQ	Polyisobutylene (C & I)
Stoxil	SK	Idoxuridine
Streptase	HP	Streptokinase
Sulfazole	PT	Sulphafurazole

Proprietary Name	Manu- fac- turer	Name
Supres 25	PT	Hydralazine Hydrochloride
Supres 50	PT	Hydralazine Hydrochloride
Surmontil	MB	Trimipramine
Sustanon '100'	OR	Testosterone Esters
Sustanon '250'	OR	Testosterone Esters
Symmetrel	CG	Amantadine Hydrochloride
Synacthen Depot	CG	Tetracosactrin
Synphasic	SD	Norethisterone with Ethinyloestradiol
Syntocinon	SZ	Oxytocin
Syntometrine	SZ	Oxytocin with Ergometrine
Tagamet	SK	Cimetidine
TAGG	EG	Deodorant Detergent Solution (C & I) (P & Q)
Tarcil	BR	Ticarcillin
Tears Naturale	AQ	Hypromellose with Dextran
Tegretol	CG	Carbamazepine
Tenormin	IC	Atenolol
Terramycin	PF	Oxytetracycline
Tertroxin	GL	Liothyronine
Tes-Tape	LY	Glucose Indicator - Urine
Testomet	PT	Methyltestosterone
Testoviron	SC	Testosterone Propionate
Tetramykoin	BZ	Tetracycline
Tetrex	BC	Tetracycline (Buffered)
Tetrex-F	BC	Tetracycline with Nystatin
Theo-Dur	AP	Theophylline
Thiminone	LF	Thiamine Hydrochloride
Thiotepa	LE	Thiotepa
Thyroxinal	FM	Thyroxine Sodium (BP 1980)
Tiberal	RO	Ornidazole
Ticillin	CS	Ticarcillin
Tigason	RO	Etretinate
Timoptol	FR	Timolol
Tofranil	CG	Imipramine
Tolinase	UP	Tolazamide
Tolvon	OR	Mianserin Hydrochloride
Topilar	SD	Fluclorolone Acetonide
Topodil	SC	Fluocortolone Esters
Torecan	SZ	Thiethylperazine
Trandate	GL	Labetalol
Trasicor	CG	Oxprenolol
Travogen	SC	Isoconazole Nitrate
Trib	PT	Trimethoprim with Sulphamethoxazole
Trib DS	PT	Trimethoprim with Sulphamethoxazole
Trichozole	PT	Metronidazole
Triphasil	WY	Levonorgestrel with Ethinyloestradiol
Triphasil 28	WY	Levonorgestrel with Ethinyloestradiol
Triprim	BW	Trimethoprim
Triquilar	SC	Levonorgestrel with Ethinyloestradiol
Triquilar ED	SC	Levonorgestrel with Ethinyloestradiol
Trisoralen	PT	Trioxysalen
Trobicin	UP	Spectinomycin
Tryptanol	MK	Amitriptyline
Tussinol	GP	Pholcodine
Ulcaron	SH	Tri-potassium Di-citrato Bismuthate Complex

Proprietary Name	Manu- fac- turer	Name
Ulsanic	DT	Sucralfate
Ultralan-D	SC	Fluocortolone Esters
Ultralan-D Fatty	SC	Fluocortolone Esters
Ultralente-2	CS	Insulin Zinc Suspension (Crystalline)
Ultralente M.C. Novo	NO	Insulin Zinc Suspension (Crystalline)
Unisolve	DY	Surgical Cement
Ural Sachets	AB	Sodium Citro-Tartrate
Urecholine	MK	Bethanechol
Uremide	PT	Frusemide
Urex	FM	Frusemide
Urex-Forte	FM	Frusemide
Urex-M	FM	Frusemide
Urid	PT	Chlorthalidone
Urimor	PT	Methyclothiazide
Uro-Carb	HA	Bethanechol
Urolucosil	WW	Sulphamethizole
Valium	RO	Diazepam
Vallergan	MB	Trimeprazine
Vancocin	LY	Vancomycin
Vasopressin	SZ	Lypressin
Vaxigrip	MB	Influenza Vaccine
Velbe	LY	Vinblastine
Velosef	SQ	Cephadrine
Velosulin Nordisk	BW	Insulin Neutral
Ventolin	GL	Salbutamol
Ventolin Rotacaps	GL	Salbutamol
Verpamil	PT	Verapamil Hydrochloride
Vibramycin	PF	Doxycycline
Vibra-Tabs	PF	Doxycycline
Vioform	CG	Clioquinol
Viokase	RS	Pancreatin Enzyme
Vira A	PD	Vidarabine
Virifenemide	WR	Frusemide
Visken	SZ	Pindolol
Voltaren 50	CG	Diclofenac Sodium
Wellcome Insulin	BW	Insulin
Wellcome Isophane	BW	Insulin Isophane (N.P.H.)
Wellcome Lente	BW	Insulin Zinc Suspension
Wellcome Semilente	BW	Insulin Zinc Suspension (Amorphous)
Wellcome Ultralente	BW	Insulin Zinc Suspension (Crystalline)
Xylocard 100	AP	Lignocaine
Xylocard 300 I.M.	AP	Lignocaine
Xylocard 500	AP	Lignocaine
Yomesan	BN	Niclosamide

Proprietary Name	Manu- fac- turer	Name
Zadine	SH	Azatadine Maleate
Zantac	GL	Ranitidine Hydrochloride
Zarontin	PD	Ethosuximide
Zephiran	WL	Benzalkonium Chloride
Concentrated		
Zerodor	ZR	Deodorant Concentrate (C & I)
Zincfrin	AQ	Zinc Sulphate with Phenylephrine
Zoff	SN	Surgical Cement
Zyloprim	BW	Allopurinol

PART 2 - TRADE NAMES INDEX

The following words, in association with a chemical name or generic name or approved name indicate the product of the manufacturer shown.

Abboject	Abbott A'asia - Injections
Albay	Bayer Pharmaceutical Company - Allergen extracts
Chewies	Dista - Chewable tablets
Cota-Tabs	Faulding - Coated tablets
Dulcets	Abbott A'asia - Chewable tablets
Durules	Astra Chemicals - Sustained release tablets
Emplets	Parke, Davis - Tablet preparations
Ensa	Reckitts - Tablet preparations
Enseals	Lilly - Enteric coated tablets
Filmtabs	Abbott A'asia - Coated tablets
Flex Flac	Vifor - Intravenous infusions
Gradumets	Abbott A'asia - Sustained release tablets
Hamiltabs	Hamilton Laboratories - Tablet preparations
Hermette	Bull Laboratories - Injections
Hyperduric	Glaxo - Injections
Isoject	Pfizer Pty Ltd - Injections
Isopto	Alcon Laboratories - Eye drops
Kapseals	Parke, Davis - Capsules
Linguets	Ciba-Geigy - Sublingual tablets
Novo	Novo Laboratories - Preparations
Pedipac	Lilly - Sachets
Prestab	Ethnor - Tablet preparations
Pulvules	Lilly - Capsules
Rox	Rocke Tompsitt - Preparations
Siguent	Sigma - Ointment preparations
Spansules	Smith, Kline & French - Delayed release capsules
Sterivial	Parke, Davis - Injections
Sterop	Ethnor - Eye drops
Sustets	Lederle - Sustained release capsules
Tabloid	Wellcome Australia Limited - Tablet preparations
Tastitabs	Pfizer Pty Ltd - Chewable tablets
Tri-Test	Drug Houses of Australia Pty Ltd - Preparations
Venosol	Abbott A'asia - Intravenous infusions
Viaflex	Travenol Laboratories - Intravenous infusions
Viules	Boots - Injections
Wellcome	Wellcome Australia Limited - Preparations

CUMULATIVE AMENDMENTS OF THE SCHEDULE OF PHARMACEUTICAL BENEFITS
DECEMBER 1984 EDITION FOR APPROVED CHEMISTS
DECEMBER/JANUARY/FEBRUARY

EMERGENCY DRUG (DOCTOR'S BAG) ORDER FORMS

New Emergency Drug (Doctor's Bag) Order and Supplies forms for the period July 1984 - June 1986 have been issued to medical practitioners. These forms are in the new PHARMPAY processing format in anticipation of the introduction of the full PHARMPAY system. It will be noted that there is no column for a Code Number on the new form. Until you are advised that there is no further requirement for coding, would you please insert the appropriate code number and the quantity supplied in the column headed "Quantity Supplied".

Example -

Pharmaceutical Benefit and Form	Strength	Quantity Required	TO BE COMPLETED BY CHEMIST	
			Serial Number	Quantity Supplied
Glucose injection	50%, 10mL	5	D1	3040B/5

TRANSCRIPTION DETAILS ON REPEAT AUTHORISATION FORMS

Pharmacists are reminded of the requirement that the approved person issuing a repeat authorisation is to provide a complete transcription, in the space provided, of the pharmaceutical benefit item for which the repeat authorisation is being issued. With the implementation of PHARMPAY, successful processing for payment will depend on the completeness and legibility of the transcribed details. It is in the pharmacist's interest, therefore, that all repeat authorisation forms submitted for payment bear all the relevant transcribed details.

PRICE ADJUSTMENTS OF SECTION 2 - WHITE PAGES

Page No.	Code	Name and Form	Max. Qty	No. of Rpts	Amended Price \$	Prop. Name and Mfr	Price Effective
		CODEINE PHOSPHATE with ASPIRIN					
15	1222H	Tablet 30mg-325mg	100	..	*10.39	Codral Forte BW	1.1.85
		COPPER SULPHATE					
16	1228P	Diagnostic Compound Tablets, 36	2	3	*5.39	Clinitest AM	1.1.85
		DEXTROMORAMIDE					
18	1024X	Suppositories 10mg, 10	≠1	..	13.48	Palfium FA	1.1.85
		GLUCOSE INDICATOR - URINE					
27	2352T	Reagent Strips 100	≠1	2	5.26	Clinistix AM	1.1.85
	3104J	Reagent Strips 100	≠1	2	5.26	Diastix AM	1.1.85
		GLUCOSE and KETONE INDICATOR - URINE					
27	3107M	Reagent Strips 100	≠1	2	5.51	Keto-Diastix AM	1.1.85

OTHER AMENDMENTS OF SECTION 2 - WHITE PAGES

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Max. Qty</u>	<u>No. of Rpts</u>	<u>Amendment</u>	<u>Amendment Effective</u>
2	2630K	ACETYLCYSTEINE Solution 20%, 10mL	5	3	27.86 Delete Mucomyst MJ Add Mucomyst AP	1.2.85 1.2.85
5	1884E	AMOXICILLIN Capsule 250mg	20	..	6.04 Add Cilamox SI	1.1.85
	1886G	Powder for Syrup 125mg per 5mL, 100mL	#1	1	#6.74 Add Cilamox SI	1.1.85
5	2389R	AMPICILLIN Injection 250mg (solvent required)	5	1	6.59 Add Penbritin BR	1.2.85
	2390T	500mg (solvent required)	5	1	8.62 Add Penbritin BR	1.2.85
	2977Q	1g (solvent required)	5	1	12.72 Add Penbritin BR	1.2.85
6	3110Q	ASPIRIN Tablet 325mg (buffered)	100	2	4.42 Delete Bufferin BC Add Bufferin AP	1.2.85 1.2.85
10	2419H	CARBAMAZEPINE Tablet 200mg	200	2	Add 17.76 Teril AF	1.1.85
13	2967E	CHOLESTYRAMINE Powder, 9g sachet (equivalent to 4g cholestyramine), 50	2	..	*45.81 Delete Questran MJ Add Questran AP	1.2.85 1.2.85
43	2723H	NITRAZEPAM Tablet 5mg	25	..	3.49 Add Nitepam US	1.2.85
46	3132W	OXAZEPAM Tablet 15mg	50	..	Add 3.63 Alepam 15 AF	1.12.84
	3133X	30mg	50	..	Add 4.01 Alepam 30 AF	1.12.84
56	1972T	QUININE BISULPHATE Tablet 300mg	50	..	9.09 Add SoulBiQuin SL	1.12.84
57	1975Y	QUININE SULPHATE Tablet 300mg	50	..	9.09 Add SoulQuin SL	1.12.84
63	2151F	TETRACYCLINE with NYSTATIN Capsule 250mg-250,000 Units	25	..	4.93 Delete Tetrex-F BC Add Tetrex-F AP	1.2.85 1.2.85
	2152G	Capsule 250mg-250,000 Units	50	5	*7.73 Delete Tetrex-F BC Add Tetrex-F AP	1.2.85 1.2.85

Other Amendments of Section 2 - White Pages (cont.)

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Max. Qty</u>	<u>No. of Rpts</u>	<u>Amendment</u>	<u>Amendment Effective</u>
63	2145X	TETRACYCLINE (BUFFERED) Capsule 250mg	25	..	4.93 Delete Tetrex BC Add Tetrex AP	1.2.85 1.2.85
	2146Y	Capsule 250mg	50	5	*7.73 Delete Tetrex BC Add Tetrex AP	1.2.85 1.2.85
63	2669L	THEOPHYLLINE with GUAIPHENESIN Capsule 150mg-90mg	100	2	5.48 Delete Quibron MJ Add Quibron AP	1.2.85 1.2.85
64	2985D	Elixir 150mg-90mg per 15mL, 500mL	#1	4	4.94 Delete Quibron MJ Add Quibron AP	1.2.85 1.2.85
67	2922T	TRIMETHOPRIM Tablet 300mg	7	..	Add 5.09 Alprim AF	1.2.85
67	2949F	TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	Add 4.01 Resprim AF	1.12.84
	2951H	160mg-800mg	10	..	Add 5.01 Resprim Forte AF	1.12.84
PREPARATIONS WHICH MAY BE PRESCRIBED BY PARTICIPATING DENTAL PRACTITIONERS FOR DENTAL TREATMENT ONLY						
72	3301R	AMOXYCILLIN Capsule 250mg	20	..	6.04 Add Cilamox SI	1.1.85
	3302T	Powder for Syrup 125mg per 5mL, 100mL	#1	..	#6.74 Add Cilamox SI	1.1.85
72	3312H	AMPICILLIN Injection 250mg (solvent required)	5	..	6.59 Add Penbritin BR	1.2.85
	3313J	500mg (solvent required)	5	..	8.62 Add Penbritin BR	1.2.85
	3314K	1g (solvent required)	5	..	12.72 Add Penbritin BR	1.2.85
75	3386F	TETRACYCLINE (BUFFERED) Capsule 250mg	25	..	4.93 Delete Tetrex BC Add Tetrex AP	1.2.85 1.2.85
75	3389J	TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	Add 4.01 Resprim AF	1.12.84
	3390K	160mg-800mg	10	..	Add 5.01 Resprim Forte AF	1.12.84

PRICE ADJUSTMENTS OF SECTION 3 - WHITE PAGES

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Max. Qty</u>	<u>No. of Rpts</u>	<u>Amended Price</u> \$	<u>Prop. Name and Mfr</u>	<u>Price Effective</u>
PREPARATIONS AVAILABLE FOR COLOSTOMY AND ILEOSTOMY USE							
3	2259X	STERCULIA (Indian Tragacanth; Gum Karaya) Powder 71g	#1	..	7.94	DY	1.1.85

PRICE ADJUSTMENTS OF SECTION 6 - STANDARD PACKS AND PRICES

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Amended Price</u> \$	<u>Price Effective</u>
2	1222H	Codeine Phosphate with Aspirin 30mg-325mg	50 @ 4.13 BW	1.1.85
2	1228P	Copper Sulphate Tablets	1 @ 1.63 AM	1.1.85

OTHER AMENDMENTS OF SECTION 6 - STANDARD PACKS AND PRICES

<u>Page No.</u>	<u>Code</u>	<u>Name</u>	<u>Form</u>	<u>Amendment</u>	<u>Amendment Effective</u>
2	2967E	Cholestyramine	9g sachet (equiv. to 4g cholestyramine)	Delete MJ Add AP	1.2.85 1.2.85
5	2152G	Tetracycline with Nystatin	250mg-250,000 units	Delete BC Add AP	1.2.85 1.2.85
5	2146Y	Tetracycline (Buffered)	250mg	Delete BC Add AP	1.2.85 1.2.85

ADVANCE NOTICES

DELETIONS - ITEMS

The items listed below will be deleted from the Schedule of Pharmaceutical Benefits as from 1 April 1985.

- Items being discontinued by the manufacturer -

Section 2 - Prescribing by medical practitioners

1021R Adrenaline, eye drops 2%, 7.5mL (Eppy/N)
 1029E Aluminium Hydroxide with Magnesium Hydroxide, tablet 300mg-90mg (Aludrox)
 1653B Cephradine, capsule 250mg (Velosef)
 1654C 500mg (Velosef)
 1655D powder for syrup 125mg per 5mL, 100mL (Velosef)
 1656E 250mg per 5mL, 100mL (Velosef)
 1895R injection 500mg (solvent required) (Velosef)
 1896T 1g (solvent required) (Velosef)

Advance Notices - Deletion of Items (cont.)

- 1691B Nitrofurantoin, paediatric suspension 25mg per 5mL, 200mL^V (Furadantin)
- 3181K Norethisterone Acetate with Ethinyloestradiol, tablet 3mg-50 micrograms, 21 (Gynovlar)
- 3182L Norethisterone Acetate with Ethinyloestradiol, tablet 4mg-50 micrograms, 21 (Anovlar)
- 2332R Orciprenaline, inhalation solution for use in HAND NEBULISER 5%, 7.5mL (Alupent)
- 1762R Penicillinase, injection set containing 0.8megaU and 1mL solvent (Compenase)
- 2513G Sulphacetamide Sodium, eye drops 15%, 15mL (Isopto Cetamide)
- 2068W Sulphadiazine, tablet 500mg
- 2561T Sulphamethoxazole, tablet 500mg (Gantanol)

- Items recommended for deletion by the Pharmaceutical Benefits Advisory Committee -

Section 2 - Prescribing by medical practitioners

- 2866W Choline Theophyllinate with Guaiphenesin, tablet 200mg-100mg (Brondecon)
- 2867X elixir 50mg-25mg per 5mL, 500mL (Brondecon)
- 2669L Theophylline with Guaiphenesin, capsule 150mg-90mg (Quibron)
- 2985D elixir 150mg-90mg per 15mL, 500mL (Quibron)
- 2976P Theophylline with Potassium Iodide, oral liquid 80mg-130mg per 15mL, 500mL (Elixophyllin-KI)
- 1152P Aminophylline, suppositories 100mg, 12 (Cardophyllin)
- 1041T 175mg, 12 (Cardophyllin)
- 1042W 250mg, 12 (Cardophyllin)
- 1043X 400mg, 12 (Cardophyllin)
- (The absorption of aminophylline when given by suppository is unpredictable and variable.)
- 1331C Di-iodohydroxyquinoline, compound pessaries 100mg, 25 (Floraquin)
- (There is a lack of evidence to support the safety or efficacy of this item.)
- Ethinodiol Diacetate with Mestranol,
- 3169T tablet 500 micrograms-100 micrograms, 21 (Ovulen 0.5)
- 3170W 1mg-100 micrograms, 21 (Ovulen 1)
- 3171X 2mg-100 micrograms, 21 (Ovulen 2)
- (Oestrogen dose unnecessarily high for an anovulant formulation.)
- Norethisterone with Mestranol,
- 3177F tablet 1mg-80 micrograms, 21 (Ortho-Novum 1/80)
- 3178G 2mg-100 micrograms, 21 (Norinyl-2)
- (Oestrogen dose unnecessarily high for an anovulant formulation.)
- 2333T Orciprenaline, tablet 20mg (Alupent)
- 2828W syrup 10mg per 5mL, 300mL (Alupent)
- 2783L inhalation solution for use in RESPIRATOR or JET NEBULISER 2%, 75mL (Alupent)
- 2784M inhalation, metered aerosol spray replacement pack, 15mg per mL, 15mL (300 dose) (Alupent)
- (Therapeutically preferred alternatives are available as pharmaceutical benefits.)

The following item will be deleted at a future date.

- 2851C Influenza Vaccine, injection 1mL (Trivalent)
- (CSL Influenza Vaccine for the 1985 season will be supplied as an 0.5mL injection.)

DELETIONS - BRANDS

The following brands will be deleted from the Schedule of Pharmaceutical Benefits as from 1 April 1985.

Section 2 - Prescribing by medical practitioners

2434D Adrenaline, eye drops 0.5%, 7.5mL: Epinal AQ
1014J 1%, 7.5mL: Epinal AQ
1168L Gentamicin Sulphate, injection 60mg (base) in 1.5mL: Cidomycin RL
2773Y Norethisterone with Ethinyloestradiol, tablet 1mg-35 micrograms,
21: Neocon ET
2775C Norethisterone with Ethinyloestradiol, pack containing 21 tablets
1mg-35 micrograms and 7 inert tablets: Neocon ET
2063N Sulphacetamide Sodium, eye drops 10%, 15mL: IQ
2134H Tetracycline, capsule 250mg: Austramycin CS
2135J capsule 250mg: Austramycin CS

Section 2 - Prescribing by participating dental practitioners

3383C Tetracycline, capsule 250mg: Austramycin CS

CUMULATIVE AMENDMENTS OF THE SCHEDULE OF PHARMACEUTICAL BENEFITS
DECEMBER 1984 EDITION FOR APPROVED CHEMISTS
DECEMBER/JANUARY

EMERGENCY DRUG (DOCTOR'S BAG) ORDER FORMS

New Emergency Drug (Doctor's Bag) Order and Supplies forms for the period July 1984 - June 1986 have been issued to medical practitioners. These forms are in the new PHARMPAY processing format in anticipation of the introduction of the full PHARMPAY system. It will be noted that there is no column for a Code Number on the new form. Until you are advised that there is no further requirement for coding, would you please insert the appropriate code number and the quantity supplied in the column headed "Quantity Supplied".

Example -

Pharmaceutical Benefit and Form	Strength	Quantity Required	TO BE COMPLETED BY CHEMIST	
			Serial Number	Quantity Supplied
Glucose injection	50%, 10mL	5	D1	3040B/5

TRANSCRIPTION DETAILS ON REPEAT AUTHORISATION FORMS

Pharmacists are reminded of the requirement that the approved person issuing a repeat authorisation is to provide a complete transcription, in the space provided, of the pharmaceutical benefit item for which the repeat authorisation is being issued. With the implementation of PHARMPAY, successful processing for payment will depend on the completeness and legibility of the transcribed details. It is in the pharmacist's interest, therefore, that all repeat authorisation forms submitted for payment bear all the relevant transcribed details.

PRICE ADJUSTMENTS OF SECTION 2 - WHITE PAGES

Page No.	Code	Name and Form	Max. Qty	No. of Rpts	Amended Price \$	Prop. Name and Mfr	Price Effective
		CODEINE PHOSPHATE with ASPIRIN					
15	1222H	Tablet 30mg-325mg	100	..	*10.39	Codral Forte BW	1.1.85
		COPPER SULPHATE					
16	1228P	Diagnostic Compound Tablets, 36	2	3	*5.39	Clinitest AM	1.1.85
		DEXTROMORAMIDE					
18	1024X	Suppositories 10mg, 10	¶1	..	13.48	Palfium FA	1.1.85
		GLUCOSE INDICATOR - URINE					
27	2352T	Reagent Strips 100	¶1	2	5.26	Clinistix AM	1.1.85
	3104J	Reagent Strips 100	¶1	2	5.26	Diastix AM	1.1.85
		GLUCOSE and KETONE INDICATOR - URINE					
27	3107M	Reagent Strips 100	¶1	2	5.51	Keto-Diastix AM	1.1.85

OTHER AMENDMENTS OF SECTION 2 - WHITE PAGES

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Max. Qty</u>	<u>No. of Rpts</u>	<u>Amendment</u>	<u>Amendment Effective</u>
5	1884E	AMOXICILLIN Capsule 250mg	20	..	6.04 add Cilamox SI	1.1.85
	1886G	Powder for Syrup 125mg per 5mL, 100mL	#1	1	#6.74 add Cilamox SI	1.1.85
10	2419H	CARBAMAZEPINE Tablet 200mg	200	2	Add 17.76 Teril AF	1.1.85
46	3132W	OXAZEPAM Tablet 15mg	50	..	Add 3.63 Alepam 15 AF	1.12.84
	3133X	30mg	50	..	Add 4.01 Alepam 30 AF	1.12.84
56	1972T	QUININE BISULPHATE Tablet 300mg	50	..	Add 9.09 SoulBiQuin SL	1.12.84
57	1975Y	QUININE SULPHATE Tablet 300mg	50	..	Add 9.09 SoulQuin SL	1.12.84
67	2949F	TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	Add 4.01 Resprim AF	1.12.84
	2951H	160mg-800mg	10	..	Add 5.01 Resprim Forte AF	1.12.84

PREPARATIONS WHICH MAY BE PRESCRIBED BY PARTICIPATING DENTAL PRACTITIONERS
FOR DENTAL TREATMENT ONLY

72	3301R	AMOXICILLIN Capsule 250mg	20	..	6.04 add Cilamox SI	1.1.85
	3302T	Powder for Syrup 125mg per 5mL, 100mL	#1	..	#6.74 add Cilamox SI	1.1.85
75	3389J	TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	Add 4.01 Resprim AF	1.12.84
	3390K	160mg-800mg	10	..	Add 5.01 Resprim Forte AF	1.12.84

PRICE ADJUSTMENTS OF SECTION 3 - WHITE PAGES

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Max. Qty</u>	<u>No. of Rpts</u>	<u>Amended Price</u>	<u>Prop. Name and Mfr</u>	<u>Price Effective</u>

PREPARATIONS AVAILABLE FOR COLOSTOMY AND ILEOSTOMY USE

STERCULIA
(Indian Tragacanth; Gum
Karaya)

3	2259X	Powder 71g	#1	..	7.94	DY	1.1.85

PRICE ADJUSTMENTS OF SECTION 6 - STANDARD PACKS AND PRICES

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Amended Price</u> \$	<u>Price Effective</u>
2	1222H	Codeine Phosphate with Aspirin 30mg-325mg	50 @ 4.13 BW	1.1.85
2	1228P	Copper Sulphate Tablets	1 @ 1.63 AM	1.1.85

ADVANCE NOTICES

DELETIONS - ITEMS

The items listed below will be deleted from the Schedule of Pharmaceutical Benefits as from 1 April 1985.

- Items being discontinued by the manufacturer -

Section 2 - Prescribing by medical practitioners

1021R Adrenaline, eye drops 2%, 7.5mL (Eppy/N)
 1029E Aluminium Hydroxide with Magnesium Hydroxide, tablet 300mg-90mg (Aludrox)
 1653B Cephradine, capsule 250mg (Velosef)
 1654C 500mg (Velosef)
 1655D powder for syrup 125mg per 5mL, 100mL (Velosef)
 1656E 250mg per 5mL, 100mL (Velosef)
 1895R injection 500mg (solvent required) (Velosef)
 1896T 1g (solvent required) (Velosef)
 1691B Nitrofurantoin, paediatric suspension 25mg per 5mL, 200mL (Furadantin)
 3181K Norethisterone Acetate with Ethinyloestradiol, tablet 3mg-50 micrograms, 21 (Gynovlar)
 3182L Norethisterone Acetate with Ethinyloestradiol, tablet 4mg-50 micrograms, 21 (Anovlar)
 2332R Orciprenaline, inhalation solution for use in HAND NEBULISER 5%, 7.5mL (Alupent)
 1762R Penicillinase, injection set containing 0.8megaU and 1mL solvent (Compenase)
 2513G Sulphacetamide Sodium, eye drops 15%, 15mL (Isopto Cetamide)
 2068W Sulphadiazine, tablet 500mg
 2561T Sulphamethoxazole, tablet 500mg (Gantanol)

- Items recommended for deletion by the Pharmaceutical Benefits Advisory Committee -

Section 2 - Prescribing by medical practitioners

2866W Choline Theophyllinate with Guaiphenesin, tablet 200mg-100mg (Brondecon)
 2867X elixir 50mg-25mg per 5mL, 500mL (Brondecon)
 2669L Theophylline with Guaiphenesin, capsule 150mg-90mg (Quibron)
 2985D elixir 150mg-90mg per 15mL, 500mL (Quibron)
 2976P Theophylline with Potassium Iodide, oral liquid 80mg-130mg per 15mL, 500mL (Elixophyllin-KI)
 1152P Aminophylline, suppositories 100mg, 12 (Cardophyllin)
 1041T 175mg, 12 (Cardophyllin)
 1042W 250mg, 12 (Cardophyllin)
 1043X 400mg, 12 (Cardophyllin)
 (The absorption of aminophylline when given by suppository is unpredictable and variable.)

Advance Notices - Deletion of Items (cont.)

- 1331C Di-iodohydroxyquinoline, compound pessaries 100mg, 25 (Floraquin)
(There is a lack of evidence to support the safety or efficacy of this item.)
- Ethinodiol Diacetate with Mestranol,
3169T tablet 500 micrograms-100 micrograms, 21 (Ovulen 0.5)
3170W 1mg-100 micrograms, 21 (Ovulen 1)
3171X 2mg-100 micrograms, 21 (Ovulen 2)
(Oestrogen dose unnecessarily high for an anovulant formulation.)
- Norethisterone with Mestranol,
3177F tablet 1mg-80 micrograms, 21 (Ortho-Novum 1/80)
3178G 2mg-100 micrograms, 21 (Norinyl-2)
(Oestrogen dose unnecessarily high for an anovulant formulation.)
- 2333T Orciprenaline, tablet 20mg (Alupent)
2828W syrup 10mg per 5mL, 300mL (Alupent)
2783L inhalation solution for use in RESPIRATOR or JET
NEBULISER 2%, 75mL (Alupent)
2784M inhalation, metered aerosol spray replacement
pack, 15mg per mL, 15mL (300 dose) (Alupent)
(Therapeutically preferred alternatives are available as
pharmaceutical benefits.)

The following item will be deleted at a future date.

- 2851C Influenza Vaccine, injection 1mL (Trivalent)
(CSL Influenza Vaccine for the 1985 season will be supplied as an
0.5mL injection.)

DELETIONS - BRANDS

The following brands will be deleted from the Schedule of Pharmaceutical Benefits as
from 1 April 1985.

Section 2 - Prescribing by medical practitioners

- 2434D Adrenaline, eye drops 0.5%, 7.5mL: Epinal AQ
1014J 1%, 7.5mL: Epinal AQ
1168L Gentamicin Sulphate, injection 60mg (base) in 1.5mL: Cidomycin RL
2773Y Norethisterone with Ethinyloestradiol, tablet 1mg-35 micrograms,
21: Neocon ET
2775C Norethisterone with Ethinyloestradiol, pack containing 21 tablets
1mg-35 micrograms and 7 inert tablets: Neocon ET
2063N Sulphacetamide Sodium, eye drops 10%, 15mL: IQ
2134H Tetracycline, capsule 250mg: Austramycin CS
2135J capsule 250mg: Austramycin CS

Section 2 - Prescribing by participating dental practitioners

- 3383C Tetracycline, capsule 250mg: Austramycin CS

CUMULATIVE AMENDMENTS OF THE SCHEDULE OF PHARMACEUTICAL BENEFITS
DECEMBER 1984 EDITION FOR APPROVED CHEMISTS
DECEMBER/JANUARY/FEBRUARY/MARCH

EMERGENCY DRUG (DOCTOR'S BAG) ORDER FORMS

New Emergency Drug (Doctor's Bag) Order and Supplies forms for the period July 1984 - June 1986 have been issued to medical practitioners. These forms are in the new PHARMPAY processing format in anticipation of the introduction of the full PHARMPAY system. It will be noted that there is no column for a Code Number on the new form. Until you are advised that there is no further requirement for coding, would you please insert the appropriate code number and the quantity supplied in the column headed "Quantity Supplied".

Example -

Pharmaceutical Benefit and Form	Strength	Quantity Required	TO BE COMPLETED BY CHEMIST	
			Serial Number	Quantity Supplied
Glucose injection	50%, 10mL	5	D1	3040B/5

TRANSCRIPTION DETAILS ON REPEAT AUTHORISATION FORMS

Pharmacists are reminded of the requirement that the approved person issuing a repeat authorisation is to provide a complete transcription, in the space provided, of the pharmaceutical benefit item for which the repeat authorisation is being issued. With the implementation of PHARMPAY, successful processing for payment will depend on the completeness and legibility of the transcribed details. It is in the pharmacist's interest, therefore, that all repeat authorisation forms submitted for payment bear all the relevant transcribed details.

PRICE ADJUSTMENTS OF SECTION 2 - WHITE PAGES

Page No.	Code	Name and Form	Max. Qty	No. of Rpts	Amended Price \$	Prop. Name and Mfr	Price Effective
		BENZATHINE PENICILLIN COMPOUND					
		Benzathine Penicillin 450mg; Procaine Penicillin 300mg; Benzylpenicillin Potassium 187mg.					
7	1767B	Injection set containing 1 vial and 2mL water for injections	1	..	5.88	Bicillin All-Purpose WY	1.3.85
		CODEINE PHOSPHATE with ASPIRIN					
15	1222H	Tablet 30mg-325mg	100	..	*10.39	Codral Forte BW	1.1.85
		COPPER SULPHATE					
16	1228P	Diagnostic Compound Tablets, 36	2	3	*5.39	Clinitest AM	1.1.85
		DEXTROMORAMIDE					
18	1024X	Suppositories 10mg, 10	#1	..	13.48	Palfium FA	1.1.85

Price Adjustments of Section 2 - White Pages (cont.)

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Max. Qty</u>	<u>No. of Rpts</u>	<u>Amended Price</u> \$	<u>Prop. Name and Mfr</u>	<u>Price Effective</u>
27	2352T	GLUCOSE INDICATOR - URINE Reagent Strips 100	#1	2	5.26	Clinistix AM	1.1.85
	3104J	Reagent Strips 100	#1	2	5.26	Diastix AM	1.1.85
27	3107M	GLUCOSE and KETONE INDICATOR - URINE Reagent Strips 100	#1	2	5.51	Keto-Diastix AM	1.1.85
32	2852D	INFLUENZA VACCINE Injection (Trivalent) 0.5mL	1	..	7.13	Fluvax CS Vaxigrip MB (see Other Amendments p3.)	1.3.85 1.3.85
43	1691B	NITROFURANTOIN Paediatric Suspension 25mg per 5mL, 200mL	#1	..	8.38	Furadantin NW	1.3.85

OTHER AMENDMENTS OF SECTION 2 - WHITE PAGES

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Max. Qty</u>	<u>No. of Rpts</u>	<u>Amendment</u>	<u>Amendment Effective</u>
2	2630K	ACETYLCYSTEINE Solution 20%, 10mL	5	3	27.86 Delete Mucomyst MJ Add Mucomyst AP	1.2.85 1.2.85
2	2600W	ALLOPURINOL Tablet 100mg	100	5	Add 5.96 Alloremmed 100 DH	1.3.85
	2604C	300mg	30	5	Add 5.86 Alloremmed 300 DH	1.3.85
5	1884E	AMOXYCILLIN Capsule 250mg	20	..	6.04 Add Cilamox SI	1.1.85
	1886G	Powder for Syrup 125mg per 5mL, 100mL	#1	1	#6.74 Add Cilamox SI	1.1.85
5	2389R	AMPICILLIN Injection 250mg (solvent required)	5	1	6.59 Add Penbritin BR	1.2.85
	2390T	500mg (solvent required)	5	1	8.62 Add Penbritin BR	1.2.85
	2977Q	1g (solvent required)	5	1	12.72 Add Penbritin BR	1.2.85
6	3110Q	ASPIRIN Tablet 325mg (buffered)	100	2	4.42 Delete Bufferin BC Add Bufferin AP	1.2.85 1.2.85
10	2419H	CARBAMAZEPINE Tablet 200mg	200	2	Add 17.76 Teril AF	1.1.85
13	2967E	CHOLESTYRAMINE Powder, 9g sachet (equivalent to 4g cholestyramine), 50	2	..	*45.81 Delete Questran MJ Add Questran AP	1.2.85 1.2.85

Other Amendments of Section 2 - White Pages (cont.)

Page No.	Code	Name and Form	Max. Qty	No. of Rpts	Amendment	Amendment Effective
18	3161J	DIAZEPAM Tablet 2 mg	50	..	Add 3.69 Antenex 2 AF	1.3.85
	3162K	5 mg	50	..	Add 3.88 Antenex 5 AF	1.3.85
20	2708M	DOXYCYCLINE Capsule 100mg	7	..	5.28 Add Doryx FA	1.3.85
32	2852D	INFLUENZA VACCINE Injection (Trivalent) 0.5mL	1	..	Add 7.13 Fluvax CS	1.3.85
Delete 2851C		Injection (Trivalent) 1mL	1	..	6.61 CS	1.3.85
CSL have replaced their 1mL ampoule with an 0.5mL prefilled syringe. As from 1 March 1985 the CS and MB brands of influenza vaccine available as a pharmaceutical benefit are the formulation determined for the 1985 season.						
43	2723H	NITRAZEPAM Tablet 5mg	25	..	3.49 Add Nitepam US	1.2.85
46	3132W	OXAZEPAM Tablet 15mg	50	..	Add 3.63 Alepam 15 AF	1.12.84
	3133X	30mg	50	..	Add 4.01 Alepam 30 AF	1.12.84
56	1972T	QUININE BISULPHATE Tablet 300mg	50	..	9.09 Add SoulBiQuin SL	1.12.84
57	1975Y	QUININE SULPHATE Tablet 300mg	50	..	9.09 Add SoulQuin SL	1.12.84
63	2151F	TETRACYCLINE with NYSTATIN Capsule 250mg-250,000 Units	25	..	4.93 Delete Tetrex-F BC Add Tetrex-F AP	1.2.85 1.2.85
	2152G	Capsule 250mg-250,000 Units	50	5	*7.73 Delete Tetrex-F BC Add Tetrex-F AP	1.2.85 1.2.85
63	2145X	TETRACYCLINE (BUFFERED) Capsule 250mg	25	..	4.93 Delete Tetrex BC Add Tetrex AP	1.2.85 1.2.85
	2146Y	Capsule 250mg	50	5	*7.73 Delete Tetrex BC Add Tetrex AP	1.2.85 1.2.85
63	2669L	THEOPHYLLINE with GUAIPHENESIN Capsule 150mg-90mg	100	2	5.48 Delete Quibron MJ Add Quibron AP	1.2.85 1.2.85
64	2985D	Elixir 150mg-90mg per 15mL, 500mL	≠1	4	4.94 Delete Quibron MJ Add Quibron AP	1.2.85 1.2.85

Other Amendments of Section 2 - White Pages (cont.)

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Max. Qty</u>	<u>No. of Rpts</u>	<u>Amendment</u>	<u>Amendment Effective</u>
67	2922T	TRIMETHOPRIM Tablet 300mg	7	..	Add 5.09 Alprim AF	1.2.85
67	2949F	TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	Add 4.01 Resprim AF	1.12.84
	2951H	160mg-800mg	10	..	Add 5.01 Resprim Forte AF	1.12.84
PREPARATIONS WHICH MAY BE PRESCRIBED BY PARTICIPATING DENTAL PRACTITIONERS FOR DENTAL TREATMENT ONLY						
72	3301R	AMOXICILLIN Capsule 250mg	20	..	6.04 Add Cilamox SI	1.1.85
	3302T	Powder for Syrup 125mg per 5mL, 100mL	#1	..	#6.74 Add Cilamox SI	1.1.85
72	3312H	AMPICILLIN Injection 250mg (solvent required)	5	..	6.59 Add Penbritin BR	1.2.85
	3313J	500mg (solvent required)	5	..	8.62 Add Penbritin BR	1.2.85
	3314K	1g (solvent required)	5	..	12.72 Add Penbritin BR	1.2.85
72	3322W	DOXYCYCLINE Capsule 100mg	7	..	5.28 Add Doryx FA	1.3.85
75	3386F	TETRACYCLINE (BUFFERED) Capsule 250mg	25	..	4.93 Delete Tetrex BC Add Tetrex AP	1.2.85 1.2.85
75	3389J	TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	Add 4.01 Resprim AF	1.12.84
	3390K	160mg-800mg	10	..	Add 5.01 Resprim Forte AF	1.12.84

PRICE ADJUSTMENTS OF SECTION 3 - WHITE PAGES

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Max. Qty</u>	<u>No. of Rpts</u>	<u>Amended Price</u> \$	<u>Prop. Name and Mfr</u>	<u>Price Effective</u>
PREPARATIONS AVAILABLE FOR COLOSTOMY AND ILEOSTOMY USE							
3	2259X	STERCULIA (Indian Tragacanth; Gum Karaya) Powder 71g	#1	..	7.94	DY	1.1.85

PRICE ADJUSTMENTS OF SECTION 6 - STANDARD PACKS AND PRICES

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Amended Price</u> \$	<u>Price Effective</u>
2	1222H	Codeine Phosphate with Aspirin 30mg-325mg	50 @ 4.13 BW	1.1.85
2	1228P	Copper Sulphate Tablets	1 @ 1.63 AM	1.1.85

OTHER AMENDMENTS OF SECTION 6 - STANDARD PACKS AND PRICES

<u>Page No.</u>	<u>Code</u>	<u>Name</u>	<u>Form</u>	<u>Amendment</u>	<u>Amendment Effective</u>
2	2967E	Cholestyramine	9g sachet (equiv. to 4g cholestyramine)	Delete MJ Add AP	1.2.85 1.2.85
5	2152G	Tetracycline with Nystatin	250mg-250,000 Units	Delete BC Add AP	1.2.85 1.2.85
5	2146Y	Tetracycline (Buffered)	250mg	Delete BC Add AP	1.2.85 1.2.85

ADVANCE NOTICES

WITHDRAWAL OF ADVANCE NOTICE

Nitrofurantoin Suspension

The previously advised notice of the deletion of nitrofurantoin paediatric suspension 25mg per 5mL, 200mL (Furadantin) is withdrawn. Arrangements have now been made with the manufacturer to enable this product to be retained in the Schedule of Pharmaceutical Benefits.

DELETIONS - ITEMS

The items listed below will be deleted from the Schedule of Pharmaceutical Benefits as from 1 April 1985.

- Items being discontinued by the manufacturer -

Section 2 - Prescribing by medical practitioners

1021R Adrenaline, eye drops 2%, 7.5mL (Eppy/N)
 1029E Aluminium Hydroxide with Magnesium Hydroxide, tablet 300mg-90mg (Aludrox)
 1653B Cephradine, capsule 250mg (Velosef)
 1654C 500mg (Velosef)
 1655D powder for syrup 125mg per 5mL, 100mL (Velosef)
 1656E 250mg per 5mL, 100mL (Velosef)
 1895R injection 500mg (solvent required) (Velosef)
 1896T 1g (solvent required) (Velosef)
 3181K Norethisterone Acetate with Ethinyloestradiol, tablet 3mg-50 micrograms,
 21 (Gynovlar)
 3182L Norethisterone Acetate with Ethinyloestradiol, tablet 4mg-50 micrograms,
 21 (Anovlar)
 2332R Orciprenaline, inhalation solution for use in HAND NEBULISER
 5%, 7.5mL (Alupent)
 1762R Penicillinase, injection set containing 0.8megaU and 1mL
 solvent (Compenase)
 2513G Sulphacetamide Sodium, eye drops 15%, 15mL (Isopto Cetamide)
 2068W Sulphadiazine, tablet 500mg
 2561T Sulphamethoxazole, tablet 500mg (Gantanol)

Advance Notices - Deletion of Items (cont.)

Items recommended for deletion by the Pharmaceutical Benefits Advisory Committee -

Section 2 - Prescribing by medical practitioners

- 2866W Choline Theophyllinate with Guaiphenesin, tablet 200mg-100mg (Brondecon)
 2867X elixir 50mg-25mg per 5mL, 500mL (Brondecon)
 2669L Theophylline with Guaiphenesin, capsule 150mg-90mg (Quibron)
 2985D elixir 150mg-90mg per 15mL, 500mL (Quibron)
 2976P Theophylline with Potassium Iodide, oral liquid 80mg-130mg per 15mL, 500mL (Elixophyllin-KI)
 1152P Aminophylline, suppositories 100mg, 12 (Cardophyllin)
 1041T 175mg, 12 (Cardophyllin)
 1042W 250mg, 12 (Cardophyllin)
 1043X 400mg, 12 (Cardophyllin)
 (The absorption of aminophylline when given by suppository is unpredictable and variable.)
 1331C Di-iodohydroxyquinoline, compound pessaries 100mg, 25 (Floraquin)
 (There is a lack of evidence to support the safety or efficacy of this item.)
 Ethynodiol Diacetate with Mestranol,
 3169T tablet 500 micrograms-100 micrograms, 21 (Ovulen 0.5)
 3170W 1mg-100 micrograms, 21 (Ovulen 1)
 3171X 2mg-100 micrograms, 21 (Ovulen 2)
 (Oestrogen dose unnecessarily high for an anovulant formulation.)
 Norethisterone with Mestranol,
 3177F tablet 1mg-80 micrograms, 21 (Ortho-Novum 1/80)
 3178G 2mg-100 micrograms, 21 (Norinyl-2)
 (Oestrogen dose unnecessarily high for an anovulant formulation.)
 2333T Orciprenaline, tablet 20mg (Alupent)
 2828W syrup 10mg per 5mL, 300mL (Alupent)
 2783L inhalation solution for use in RESPIRATOR or JET NEBULISER 2%, 75mL (Alupent)
 2784M inhalation, metered aerosol spray replacement pack, 15mg per mL, 15mL (300 dose) (Alupent)
 (Therapeutically preferred alternatives are available as pharmaceutical benefits.)

DELETIONS - BRANDS

The following brands will be deleted from the Schedule of Pharmaceutical Benefits as from 1 April 1985.

Section 2 - Prescribing by medical practitioners

- 2434D Adrenaline, eye drops 0.5%, 7.5mL: Epinal AQ
 1014J 1%, 7.5mL: Epinal AQ
 1168L Gentamicin Sulphate, injection 60mg (base) in 1.5mL: Cidomycin RL
 2773Y Norethisterone with Ethinyloestradiol, tablet 1mg-35 micrograms, 21: Neocon ET
 2775C Norethisterone with Ethinyloestradiol, pack containing 21 tablets 1mg-35 micrograms and 7 inert tablets: Neocon ET
 2063N Sulphacetamide Sodium, eye drops 10%, 15mL: IQ
 2134H Tetracycline, capsule 250mg: Austramycin CS
 2135J capsule 250mg: Austramycin CS

Section 2 - Prescribing by participating dental practitioners

- 3383C Tetracycline, capsule 250mg: Austramycin CS

CUMULATIVE AMENDMENTS OF THE SCHEDULE OF PHARMACEUTICAL BENEFITS
DECEMBER 1984 EDITION FOR APPROVED CHEMISTS
DECEMBER

EMERGENCY DRUG (DOCTOR'S BAG) ORDER FORMS

New Emergency Drug (Doctor's Bag) Order and Supplies forms for the period July 1984 - June 1986 have been issued to medical practitioners. These forms are in the new PHARMPAY processing format in anticipation of the introduction of the full PHARMPAY system. It will be noted that there is no column for a Code Number on the new form. Until you are advised that there is no further requirement for coding, would you please insert the appropriate code number and the quantity supplied in the column headed "Quantity Supplied".

Example -

Pharmaceutical Benefit and Form	Strength	Quantity Required	TO BE COMPLETED BY CHEMIST	
			Serial Number	Quantity Supplied
Glucose injection	50%, 10mL	5	D1	3040B/5

TRANSCRIPTION DETAILS ON REPEAT AUTHORISATION FORMS

Pharmacists are reminded of the requirement that the approved person issuing a repeat authorisation is to provide a complete transcription, in the space provided, of the pharmaceutical benefit item for which the repeat authorisation is being issued. With the implementation of PHARMPAY, successful processing for payment will depend on the completeness and legibility of the transcribed details. It is in the pharmacist's interest, therefore, that all repeat authorisation forms submitted for payment bear all the relevant transcribed details.

AMENDMENTS OF SECTION 2 - WHITE PAGES

<u>Page No.</u>	<u>Code</u>	<u>Name and Form</u>	<u>Max. Qty</u>	<u>No. of Rpts</u>	<u>Amendment</u>	<u>Amendment Effective</u>
46	3132W	OXAZEPAM Tablet 15mg	50	..	Add 3.63 Alepam 15 AF	1.12.84
	3133X	30mg	50	..	Add 4.01 Alepam 30 AF	1.12.84
56	1972T	QUININE BISULPHATE Tablet 300mg	50	..	Add 9.09 SoulBiQuin SL	1.12.84
	1975Y	QUININE SULPHATE Tablet 300mg	50	..	Add 9.09 SoulQuin SL	1.12.84
67	2949F	TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	Add 4.01 Resprim AF	1.12.84
	2951H	160mg-800mg	10	..	Add 5.01 Resprim Forte AF	1.12.84

Amendments of Section 2 - White Pages (cont.)

PREPARATIONS WHICH MAY BE PRESCRIBED BY PARTICIPATING DENTAL
PRACTITIONERS FOR DENTAL TREATMENT ONLY

Page No.	Code	Name and Form	Max. Qty	No. of Rpts	Amendment	Amendment Effective
75	3389J	TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	Add 4.01 Resprim AF	1.12.84
	3390K	160mg-800mg	10	..	Add 5.01 Resprim Forte AF	1.12.84

ADVANCE NOTICES

DELETIONS - ITEMS

The items listed below will be deleted from the Schedule of Pharmaceutical Benefits as from 1 April 1985.

. Items being discontinued by the manufacturer -

Section 2 - Prescribing by medical practitioners

1021R Adrenaline, eye drops 2%, 7.5mL (Eppy/N)
 1029E Aluminium Hydroxide with Magnesium Hydroxide, tablet 300mg-90mg (Aludrox)
 1653B Cephadrine, capsule 250mg (Velosef)
 1654C 500mg (Velosef)
 1655D powder for syrup 125mg per 5mL, 100mL (Velosef)
 1656E 250mg per 5mL, 100mL (Velosef)
 1895R injection 500mg (solvent required) (Velosef)
 1896T 1g (solvent required) (Velosef)
 1691B Nitrofurantoin, paediatric suspension 25mg per 5mL, 200mL (Furadantin)
 3181K Norethisterone Acetate with Ethinyloestradiol, tablet 3mg-50 micrograms,
 21 (Gynovlar)
 3182L Norethisterone Acetate with Ethinyloestradiol, tablet 4mg-50 micrograms,
 21 (Anovlar)
 2332R Orciprenaline, inhalation solution for use in HAND NEBULISER
 5%, 7.5mL (Alupent)
 1762R Penicillinase, injection set containing 0.8megaU and 1mL
 solvent (Compenase)
 2513G Sulphacetamide Sodium, eye drops 15%, 15mL (Isopto Cetamide)
 2068W Sulphadiazine, tablet 500mg
 2561T Sulphamethoxazole, tablet 500mg (Gantanol)

. Items recommended for deletion by the Pharmaceutical Benefits Advisory
Committee -

Section 2 - Prescribing by medical practitioners

2866W Choline Theophyllinate with Guaiphenesin, tablet 200mg-100mg (Brondecon)
 2867X elixir 50mg-25mg per 5mL,
 500mL (Brondecon)
 2669L Theophylline with Guaiphenesin, capsule 150mg-90mg (Quibron)
 2985D elixir 150mg-90mg per 15mL, 500mL (Quibron)
 2976P Theophylline with Potassium Iodide, oral liquid 80mg-130mg per
 15mL, 500mL (Elixophyllin-KI)

Advance Notices - Deletion of Items (cont.)

- 1152P Aminophylline, suppositories 100mg, 12 (Cardophyllin)
 1041T 175mg, 12 (Cardophyllin)
 1042W 250mg, 12 (Cardophyllin)
 1043X 400mg, 12 (Cardophyllin)
 (The absorption of aminophylline when given by suppository is unpredictable and variable.)
- 1331C Di-iodohydroxyquinoline, compound pessaries 100mg, 25 (Floraquin)
 (There is a lack of evidence to support the safety or efficacy of this item.)
- Ethynodiol Diacetate with Mestranol,
 3169T tablet 500 micrograms-100 micrograms, 21 (Ovulen 0.5)
 3170W 1mg-100 micrograms, 21 (Ovulen 1)
 3171X 2mg-100 micrograms, 21 (Ovulen 2)
 (Oestrogen dose unnecessarily high for an anovulant formulation.)
- Norethisterone with Mestranol,
 3177F tablet 1mg-80 micrograms, 21 (Ortho-Novum 1/80)
 3178G 2mg-100 micrograms, 21 (Norinyl-2)
 (Oestrogen dose unnecessarily high for an anovulant formulation.)
- 2333T Orciprenaline, tablet 20mg (Alupent)
 2828W syrup 10mg per 5mL, 300mL (Alupent)
 2783L inhalation solution for use in RESPIRATOR or JET
 NEBULISER 2%, 75mL (Alupent)
 2784M inhalation, metered aerosol spray replacement
 pack, 15mg per mL, 15mL (300 dose) (Alupent)
 (Therapeutically preferred alternatives are available as pharmaceutical benefits.)

The following item will be deleted at a future date.

- 2851C Influenza Vaccine, injection 1mL (Trivalent)
 (CSL Influenza Vaccine for the 1985 season will be supplied as an 0.5mL injection.)

DELETIONS - BRANDS

The following brands will be deleted from the Schedule of Pharmaceutical Benefits as from 1 April 1985.

Section 2 - Prescribing by medical practitioners

- 2434D Adrenaline, eye drops 0.5%, 7.5mL: Epinal AQ
 1014J 1%, 7.5mL: Epinal AQ
 1168L Gentamicin Sulphate, injection 60mg (base) in 1.5mL: Cidomycin RL
 2773Y Norethisterone with Ethinyloestradiol, tablet 1mg-35 micrograms,
 21: Neocon ET
 2775C Norethisterone with Ethinyloestradiol, pack containing 21 tablets
 1mg-35 micrograms and 7 inert tablets: Neocon ET
 2063N Sulphacetamide Sodium, eye drops 10%, 15mL: IQ
 2134H Tetracycline, capsule 250mg: Austramycin CS
 2135J capsule 250mg: Austramycin CS

Section 2 - Prescribing by participating dental practitioners

- 3383C Tetracycline, capsule 250mg: Austramycin CS

AMENDMENTS OF CODE INDEX - DECEMBER 1982 EDITIONEffective 1 December 1984CHANGE OF ITEM NAME

<u>From</u>	<u>To</u>
1351D Dipivefrin Hydrochloride	1351D Dipivefrine Hydrochloride
2176M Ticarcillin Disodium	2176M Ticarcillin
2781J Dexamethasone Metasulphobenzoate with Framycetin and Gramicidin	2781J Dexamethasone with Framycetin and Gramicidin
3099D Prednisolone Steaglate	3099D Prednisolone Stearoylglycolate
3110Q Aspirin Buffered	3110Q Aspirin

ADDITIONS

1006Y Clotrimazole	2510D Butyl Monoester Polymer with Isopropyl Alcohol
1130L Bumetanide	2786P Choline Theophyllinate
1300K Diclofenac Sodium	7500R Clioquinol, Cream BP
1540C Ipratropium Bromide	7504Y Clioquinol Aqueous, Cream, APF
1541D Ipratropium Bromide	7569J Lactic and Salicylic Acid, Paint, APF
1630T Benzoyl Metronidazole	

DELETIONS

1208N Metoclopramide Hydrochloride	2416E Bethanidine
1255C Cyclizine	2537M Digoxin
1666Q Morphine with Tacrine	2562W Sulphamethoxazole
1669W Nalorphine	2644E Ampicillin
1754H Paraldehyde	2703G Propylene Glycol
1851K Phenobarbitone	2712R Bethanidine
1867G Phenylbutazone	2754Y Phenylbutazone
1868H Phenylbutazone	2755B Phenylbutazone
2106W Tacrine	2944Y Pentazocine
2107X Tacrine	3135B Glycerol
2192J Triprolidine	3196F Nalorphine
	3311G Ampicillin



Pharmaceutical Benefits

DECEMBER 1984 EDITION

PHARMACEUTICAL BENEFITS

Explanatory Circular regarding the December 1984 edition of the Schedule of Pharmaceutical Benefits for Participating Dental Practitioners.

The reprint of the Schedule will take effect on 1 December 1984 and all previous editions of the Schedule are cancelled.

Deletion of Form and Strength of Existing Item

Ampicillin, 100mg injection (solvent required) (*Austrapen*) (Item discontinued by manufacturer).

NOT FOR SALE



**SCHEDULE OF
PHARMACEUTICAL BENEFITS
for
DENTAL PRACTITIONERS**

OPERATIVE FROM 1 DECEMBER 1984

Commonwealth Department of Health,
CANBERRA, A.C.T.

83797

A. B. CAUDELL, Government Printer, Tasmania

CONTENTS

SECTION 1	<i>Paragraph</i>	<i>Page</i>
Explanatory Notes—		
Prescribing of Benefits—Procedure by Dentists—		
Schedule of Benefits 	1-7	3
Prescriptions 	8-13	3-4
Manner of Administration 	14	4
Maximum Quantities 	15-19	5
Patient Contribution 	20-21	5
Eligibility of patients to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate 	22	5-6
Establishment of patient's entitlement to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate 	23-25	6
Urgent Cases 	26	7
Enquiries 	27	7
Addresses of Commonwealth Department of Health Central Office and Regional Offices 		
Index of Manufacturers' Codes 		8-10 11
SECTION 2		
Schedule of Benefits 		13-18
SECTION 3		
Prescribers' List 		19
PROPRIETARY INDEX		
Part 1—Proprietary Names Index 		20-22
Part 2—Trade Names Index 		22

SECTION 1—EXPLANATORY NOTES

PRESCRIBING OF BENEFITS—PROCEDURE BY DENTISTS

1. Pharmaceutical benefits which may be prescribed by participating dental practitioners are listed in this book.

References in these notes to a dentist or dental practitioner relate to 'participating dental practitioner'.

2. The Schedule of Benefits includes the form, manner of administration and brand of these items which may be prescribed. Where the words 'solvent required' are included after the form, the item and a solvent may be prescribed as one benefit. In such cases, any listed brand of solvent may be ordered with the item. For clarity, such benefits should be written as one prescription, e.g. 'Ampicillin, Injection 1g with 2 mL water for injections'.

3. The Schedule also shows the maximum quantity allowable for each item.

4. A list of extemporaneous formulae appears in Section 3 — Prescribers' List.

5. A proprietary name index of ready prepared items is included after Section 3.

6. Symbols used in the Schedule of Benefits are explained on page 1, Section 2.

7. Admixtures of items in this schedule may not be prescribed as pharmaceutical benefits.

Prescriptions

8. A prescription ordering a pharmaceutical benefit may be written only for the dental treatment of the person named on the prescription and requiring treatment with that pharmaceutical benefit and may not be written for any other purpose. The prescription is valid only if it is written by a participating dental practitioner.

9. CARE MUST BE TAKEN TO COMPLY WITH THE PROVISIONS OF STATE LAW, PARTICULARLY IN REGARD TO THE PRESCRIBING OF DRUGS LISTED AS SPECIFIED OR RESTRICTED UNDER STATE LEGISLATION.

10. Dentists are required by legislation under the National Health Act to observe the following rules when writing prescriptions for pharmaceutical benefits:—

- (a) Write the prescription in indelible form, i.e. ink or ball point pen in own handwriting either on the standard prescription form supplied by the Department or on paper as near as convenient to 18 cm × 12 cm. The name and address of the dentist plus the D.P. number (the dental practitioner's number as notified by the Department) must be shown. 'N.H.S.' is to be endorsed at the top if a Departmental standard prescription form is not being used.
- (b) Write the prescription in duplicate marking the duplicate copy with the word 'Duplicate'. This is pre-printed on the standard prescription forms.
- (c) Set out the name and address of the patient. Dentists are reminded that full details of the patient's address are required on each prescription.
- (d) The pharmaceutical benefit must be identified in the prescription by such particulars, including the name, form, strength and quantity, as are necessary for the complete identification of that benefit.
- (e) Each prescription must be written legibly.
- (f) Date and sign the prescription.

11. Prescriptions for pharmaceutical benefits for more than one person must not be written on the one prescription form.

12. A prescription is not a valid pharmaceutical benefit prescription if the dentist prescribes a pharmaceutical benefit for a person in respect of whom another prescription for the same benefit has been written on the same day by the same dentist.

13. To avoid confusing patients and the dispensing chemist, dentists should not write prescriptions for pharmaceutical benefits and non-pharmaceutical benefits on the one form.

Manner of Administration

14. Where a particular manner of administration is indicated in the Schedule, the item may not be prescribed as a pharmaceutical benefit for administration in any other way.

Maximum Quantities

15. For ready prepared preparations, the allowable maximum quantity is shown in the second column of Section 2. For extemporaneously prepared preparations, the maximum quantity is shown in Section 3 — Prescribers' List. **DENTISTS MAY NOT PRESCRIBE REPEATS ON A PHARMACEUTICAL BENEFIT PRESCRIPTION.**

16. Where the maximum quantity of an item is marked with a double dagger (‡), the maximum quantity has been determined as a single pack. In such instances, chemists are required to supply unbroken packs (see page 1, Section 2). These items should be prescribed in the standard pack sizes.

17. For other items it is not necessary to prescribe the maximum quantity if the dentist considers a lesser quantity is sufficient for the patient's needs.

18. The relevant maximum quantity is not to be exceeded.

19. A pharmaceutical benefit may not be supplied to the same person more than once on any one day.

Patient Contribution

20. The dispensing chemist may in respect of each supply by him charge the person to whom the pharmaceutical benefit is supplied an amount of \$4 in respect of general patients or an amount of \$2 in respect of patients with a concessional entitlement. A charge is not to be made in respect of patients who are eligible pensioners.

21. A prescription, other than a prescription for a pensioner, written for a benefit for which the dispensed price at the date of supply is equal to or less than \$4 in respect of general patients, or \$2 in respect of patients with a concessional entitlement, is not a prescription for a pharmaceutical benefit.

Eligibility of patients to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate

22. Under the Pharmaceutical Benefits Scheme, persons holding a valid Pensioner Health Benefits Card or a valid Health Benefits Card and their dependants are entitled to receive pharmaceutical benefits free of

charge. Persons holding a valid Health Care Card or a valid Pharmaceutical Benefits Concession Card and their dependants are entitled to receive pharmaceutical benefits at the concessional patient contribution rate.

Establishment of patient's entitlement to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate

23. Any person (including a dentist) may enter the relevant information to establish the patient's entitlement to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate, where space has been provided on prescription forms (front or back) supplied by the Department for the provision of entitlement information.

24. The person entering the entitlement information must complete all the relevant details applicable to the patient's entitlement on the prescription. The information to be provided in the appropriate space is:—

- (i) the entitlement number appearing on the card, i.e., a ten-character alpha-numeric number (the entitlement number does not identify the type of card or the entitlement category);
- (ii) a cross (X) in the appropriate box indicating the type of entitlement card held by the patient. The type of card denotes the entitlement of the patient to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate.

Where a patient or agent is required to sign and date a receipt for the supply of a benefit on an original prescription form, the patient or agent also accepts responsibility for the validity of the entitlement information shown on the prescription.

25. Where prescriptions are written on forms which do not provide space (front or back) for the entry of entitlement information, the dentist should not enter the patient's entitlement information on the prescription form. In these instances the dispensing chemist, on request, shall place the declaration stamp imprint on the back of the original prescription form to enable the patient's entitlement information (see paragraph 24) to be provided.

Urgent Cases

26. In urgent cases, a chemist may supply a benefit before the prescription is surrendered to him, if the dentist communicates the prescription to the chemist by telephone or other means. *In such cases the dentist must write out the prescription and forward it to the approved chemist who made the supply within 24 hours of such communication.* This provision does not apply to prescriptions for supply by chemists where the law of the State in which the chemist's premises are situated requires the prescription to be in writing.

Enquiries

27. Any enquiries regarding the Pharmaceutical Benefits Scheme or requests for Departmental publications or stationery should be made to the Regional Director, Commonwealth Department of Health in the capital city of your State.

ADDRESSES OF COMMONWEALTH DEPARTMENT OF HEALTH OFFICES

CENTRAL OFFICE

Director-General,
Commonwealth Department of Health,
P.O. Box 100,
Woden, A.C.T. 2606

REGIONAL OFFICES

NEW SOUTH WALES

Commonwealth Department of Health,
Commonwealth Government Centre,
Chifley Square,
Corner Phillip and Hunter Streets,
Sydney, N.S.W. 2000 Telephone 239 3000
Assistant Director (Medical)—
Dr L. B. Lilley After hours: Telephone 929 6164

VICTORIA

Commonwealth Department of Health,
Commonwealth Centre,
Corner Spring and Latrobe Streets,
Melbourne, Vic. 3000 Telephone 662 2999
Assistant Director (Medical)—
Dr A. I. Mead After hours: Telephone 347 0103

QUEENSLAND

Commonwealth Department of Health,
 Australian Government Offices,
 Anzac Square,
 Adelaide Street,
 Brisbane, Qld 4000

Telephone 225 0122

G.P.O. Box 567, Brisbane, Qld 4001

Director of Health—

Dr Peter E. R. Ulrich

Assistant Director (Medical)—

Dr J. R. Meyers

After hours: Telephone 399 5857

SOUTH AUSTRALIA

Commonwealth Department of Health,
 I.M.F.C. House,
 33-39 King William Street,
 Adelaide, S.A. 5000

Telephone 216 3911

G.P.O. Box 2219, Adelaide, S.A. 5001

Director of Health—

Dr J. Y. Hancock

After hours: Telephone 272 0527

WESTERN AUSTRALIA

Commonwealth Department of Health,
 Victoria Centre,
 2-6 St George's Terrace,
 Perth, W.A. 6000

Telephone 323 5711

G.P.O. Box M970, Perth, W.A. 6001

Director of Health —

Dr D. J. Daly

After hours: Telephone 399 6075

TASMANIA

Commonwealth Department of Health,
Kirksway House,
6 Kirksway Place,
Hobart, Tas. 7000

Telephone 20 5011

G.P.O. Box 919J, Hobart, Tas. 7001

Director of Health—

Dr C. W. Phillips

After hours: Telephone 25 1536

NORTHERN TERRITORY

Commonwealth Department of Health,
M.L.C. Building,
Smith Street,
Darwin, N.T. 5794

Telephone 80 2911

P.O. Box 147, Darwin, N.T. 5794

Director of Health—

Dr F. H. Stewart

After hours: Telephone 81 2036

AUSTRALIAN CAPITAL TERRITORY

C.T.H.C. Building,
Corner Moore and Alinga Streets,
Canberra City, A.C.T. 2601

Telephone 45 4111

G.P.O. Box 825, Canberra City, A.C.T. 2601

INDEX OF MANUFACTURERS' CODES

<i>Code</i>	<i>Manufacturer</i>
AB	Abbott Laboratories Pty Ltd
BC	Bristol Laboratories Pty Ltd
BL	David Bull Laboratories
BR	Beecham Research Laboratories
BW	Wellcome Australia Limited
BZ	Boucher & Muir Pty Ltd
CS	Commonwealth Serum Laboratories
DH	Drug Houses of Australia Pty Ltd
DL	Dista Products (Australia) & Company
FA	F. H. Faulding & Co. Ltd
FM	Fawns and McAllan Pty Ltd
GP	G. P. Laboratories
HP	Hoechst Australia Ltd
IC	ICI Australia Operations Pty Ltd
LE	Lederle Laboratories Division
LY	Eli Lilly (Australia) and Company
MB	May & Baker Australia Pty Ltd
NN	Nelson Laboratories (Sales) Pty Ltd
PF	Pfizer Pty Ltd
PT	Protea Pharmaceuticals
RO	Roche Products Pty Ltd
SI	Sigma Co. Ltd
SQ	E. R. Squibb & Sons Pty Ltd
UP	Upjohn Pty Ltd
US	USV Pharmaceuticals
WL	Winthrop Laboratories

SECTION 2 - SCHEDULE OF BENEFITS

SYMBOLS USED IN THE SCHEDULE

- (a) A double dagger (‡) in the maximum quantity column indicates an item for which the maximum quantity has been specially determined to correspond to the manufacturer's pack and the manufacturer's standard pack should be supplied.
 - (b) A gauge sign (#) against the price of an item indicates that the product is not preconstituted.
 - (c) Where a STATE is indicated after the manufacturer's code, that brand may be available only in the State indicated. N.S.W. - (N); Vic. - (V); Qld. - (Q); S.A. - (S); W.A. - (W); Tas. - (T).
-

Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
AMOXYCILLIN					
Tablet 250mg	20	..	6.04	Amoxil	BR
Capsule 250mg	20	..	6.04	Amoxil Moxacin	BR CS
Powder for Syrup 125mg per 5mL, 100mL	#1	..	#6.74	Amoxil Moxacin	BR CS
AMPHOTERICIN					
Tablet 100mg	50	..	9.44	Fungilin	SQ
Lozenge 10mg	20	..	4.33	Fungilin	SQ
Suspension 100mg per mL, 24mL	#1	..	5.14	Fungilin	SQ
Ointment 3%, 15g	#1	..	4.59	Fungilin	SQ
AMPICILLIN					
Injection 250mg (solvent required)	5	..	6.59	Ampicyn	PT
			6.66	Austrapen	CS
500mg (solvent required)	5	..	8.62	Ampicyn	PT
			8.69	Austrapen	CS
1g (solvent required)	5	..	12.72	Ampicyn	PT
			12.79	Austrapen	CS
ASPIRIN					
Mixture, APF - See Section 3, Prescribers' List					
Mixture for Children, APF - See Section 3, Prescribers' List					
ASPIRIN with CODEINE					
Aspirin Mixture, APF with Codeine Phosphate 30mg per 10mL - See Section 3, Prescribers' List					
DOXYCYCLINE					
Tablet 100mg	7	..	5.28	Vibramycin	PF
Capsule 100mg	7	..	5.22	Cyclidox	PT
			5.28	Doxin	GP

Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
ERYTHROMYCIN					
Tablet 250mg	25	..	5.87	EMU-V	UP
Capsule 125mg	25	..	4.87	Eryc	FA
250mg	25	..	5.87	Eryc Ilocap	FA LY
ERYTHROMYCIN ESTOLATE					
Paediatric Drops					
100mg (base) per mL, 10mL	≠1	..	4.81	Ilosone	LY
Paediatric Suspension					
125mg (base) per 5mL, 100mL	≠1	..	5.13	Eromycin Ilosone	DL LY
ERYTHROMYCIN ETHYLSUCCINATE					
Tablet 200mg (base)	25	..	5.26	EES Dulcet	AB
Granules for Paediatric Suspension					
200mg (base) per 5mL, 100mL	≠1	..	#6.89	EES 200	AB
ERYTHROMYCIN STEARATE					
Tablet 250mg (base)	25	..	5.87	Erythrocin	AB
Capsule 250mg (base)	25	..	5.83 5.87	E-Mycin Erythrocin	PT AB
Paediatric Suspension					
125mg (base) per 5mL, 100mL	≠1	..	5.13	Erythrocin	AB
Suspension					
250mg (base) per 5mL, 100mL	≠1	..	6.99	Erythrocin	AB
METRONIDAZOLE					
Tablet 200mg	21	..	4.87 4.93	Trichozole Flagyl	PT MB
NYSTATIN					
Tablet 500,000 Units	25	..	6.53	Diastatin Mycostatin Nilstat	GP SQ LE
Mixture					
100,000 Units per mL, 24mL	≠1	..	5.14	Mycostatin Nilstat	SQ LE
PARACETAMOL					
Mixture 120mg per 5mL, 100mL	≠1	..	3.84	Dymadon Panamax Parmol	BW WL US

Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
PHENETHICILLIN					
Tablet 125mg	25	..	4.18	Pensig	SI
250mg	25	..	4.62	Optipen	CS
				Pensig	SI
Capsule 250mg	25	..	4.62	Optipen	CS
				Pensig	SI
500mg	25	..	5.66	Optipen	CS
				Pensig	SI
Powder for Syrup					
125mg per 5mL, 100mL	≠1	..	#5.34	Pensig 125	SI
250mg per 5mL, 100mL	≠1	..	#6.00	Pensig 250	SI
PHENOXYMETHYLPENICILLIN					
Tablet 125mg	25	..	4.18	Abbocillin-V	AB
				LPV	CS
250mg	25	..	4.51	Abbocillin-VK	AB
				Cilicaine VK	SI
				LPV	CS
				PVK	LY
				P.V.O.	FM
500mg	25	..	5.48	Abbocillin-VK	AB
				LPV	CS
				PVK	LY
				P.V.O.	FM
Capsule 250mg	25	..	4.51	Abbocillin-VK	AB
				Cilicaine VK	SI
				Falcopen VK	FA
				LPV	CS
				PVK	LY
				P.V.O.	FM
500mg	25	..	5.48	Cilicaine VK	SI
				Falcopen VK	FA
				LPV	CS
				P.V.O.	FM
(continued)					

Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
PHENOXYMETHYLPENICILLIN - cont. Paediatric Suspension 125mg per 5mL, 100mL	#1	..	4.39	Abbocillin-V AB Cilicaine V SI Falcopen V FA LPV 125 CS
Suspension 250mg per 5mL, 100mL	#1	..	4.99	Abbocillin-V AB Cilicaine V SI Falcopen V FA LPV 250 CS
PROCAINE PENICILLIN Injection BP, 1g	5	..	13.58	Aquacillin FA Cilicaine SI
1.5g	5	..	13.71	Aquacillin FA Cilicaine SI
SULPHADIMIDINE Tablet 500mg	40	..	4.52	S-Dimidine PT
TETRACYCLINE Capsule 250mg	25	..	4.93	Achromycin LE Australamycin CS Panmycin P UP Tetramykoin BZ(N)
TETRACYCLINE (BUFFERED) Capsule 250mg	25	..	4.93	Achromycin V LE Australamycin-V CS Hostacycline P HP Hydracycline FM Stecilin-V SQ Tetrex BC
TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	4.52	Bactrim RO Septrin BW Trib PT
160mg-800mg	10	..	5.62	Bactrim DS RO Septrin Forte BW Trib DS PT
Suspension 40mg-200mg per 5mL, 100mL	#1	..	5.12	Bactrim RO Septrin BW Trib PT

Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
WATER FOR INJECTIONS (For use only with an injectible benefit which requires a solvent)				
Injection 2mL	5	..	3.79	BL,BT,BZ,SI
5mL	5	..	3.94	BL,BT,BZ,SI

PROPRIETARY INDEX

PART 1 PROPRIETARY NAMES INDEX

PART 2 TRADE NAMES INDEX



Proprietary Name	Manu- fac- turer	Name
Abbocillin-V	AB	Phenoxymethylpenicillin
Abbocillin-VK	AB	Phenoxymethylpenicillin
Achromycin	LE	Tetracycline
Achromycin V	LE	Tetracycline (Buffered)
Amoxil	BR	Amoxycillin
Ampicyn	PT	Ampicillin
Aquacillin	FA	Procaine Penicillin
Austramycin	CS	Tetracycline
Austramycin-V	CS	Tetracycline (Buffered)
Austrapen	CS	Ampicillin
Bactrim	RO	Trimethoprim with Sulphamethoxazole
Bactrim DS	RO	Trimethoprim with Sulphamethoxazole
Cilicaine	SI	Procaine Penicillin
Cilicaine V	SI	Phenoxymethylpenicillin
Cilicaine VK	SI	Phenoxymethylpenicillin
Cyclidox	PT	Doxycycline
Diastatin	GP	Nystatin
Doxin	GP	Doxycycline
Dymadon	BW	Paracetamol
EES 200	AB	Erythromycin Ethylsuccinate
EES Dulcet	AB	Erythromycin Ethylsuccinate
EMU-V	UP	Erythromycin
E-Mycin	PT	Erythromycin Stearate
Eromycin	DL	Erythromycin Estolate
Eryc	FA	Erythromycin
Erythrocin	AB	Erythromycin Stearate
Falcopen V	FA	Phenoxymethylpenicillin
Falcopen VK	FA	Phenoxymethylpenicillin
Flagyl	MB	Metronidazole
Fungilin	SQ	Amphotericin
Hostacycline P	HP	Tetracycline (Buffered)
Hydracycline	FM	Tetracycline (Buffered)
Ilocap	LY	Erythromycin
Ilosone	LY	Erythromycin Estolate
LPV	CS	Phenoxymethylpenicillin
LPV 125	CS	Phenoxymethylpenicillin
LPV 250	CS	Phenoxymethylpenicillin
Moxacin	CS	Amoxycillin
Mycostatin	SQ	Nystatin
Nilstat	LE	Nystatin
Optipen	CS	Phenethicillin

Proprietary Name	Manufacturer	Name
Panamax	WL	Paracetamol
Panmycin P	UP	Tetracycline
Parmol	US	Paracetamol
Pensig	SI	Phenethicillin
Pensig 125	SI	Phenethicillin
Pensig 250	SI	Phenethicillin
PVK	LY	Phenoxymethylpenicillin
P.V.O.	FM	Phenoxymethylpenicillin
S-Dimidine	PT	Sulphadimidine
Septrin	BW	Trimethoprim with Sulphamethoxazole
Septrin Forte	BW	Trimethoprim with Sulphamethoxazole
Steclin-V	SQ	Tetracycline (Buffered)
Tetramykoin	BZ	Tetracycline
Tetrex	BC	Tetracycline (Buffered)
Trib	PT	Trimethoprim with Sulphamethoxazole
Trib DS	PT	Trimethoprim with Sulphamethoxazole
Trichazole	PT	Metronidazole
Vibramycin	PF	Doxycycline

PART 2 - TRADE NAMES INDEX

The following words, in association with a chemical name or generic name or approved name indicate the product of the manufacturer shown.

Cota-Tabs	Faulding - Coated tablets
Dulcets	Abbott A'asia - Chewable tablets
Filmtabs	Abbott A'asia - Coated tablets
Pulvules	Lilly - Capsules



Pharmaceutical Benefits

DECEMBER 1984

NOT FOR SALE

LATE AMENDMENTS

Section 2

NEW ITEMS

The following items will be available as pharmaceutical benefits on 1 December 1984:-

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
IPRATROPIUM BROMIDE					
Inhalation, metered aerosol spray, 20 micrograms per dose (200 dose)	#1	5	7.28	Atrovent	BY
Nebuliser Solution 0.025%, 20mL	#1	2	6.26	Atrovent	BY

Section 2

Other Amendments

Page No.	Name and Form	Max. Qty	No. of Rpts	Amendment	
33	DIPYRIDAMOLE Tablet 100mg	100	..	Add 16.39 Persantin 100	BY
	GRISEOFULVIN				
	*Use in recalcitrant tinea infections; Kerion.				
44	Tablet 125mg	100	2	Please note deletion of authority requirement, change of restriction and addition of repeats	
	330mg	28	2		
	500mg	28	2		

ADVANCE NOTICES

DELETIONS

Items being discontinued by the manufacturer-

The items listed below will be deleted from the Schedule of Pharmaceutical Benefits as from 1 April 1985.

Adrenaline, 2%, 7.5mL eye drops (Eppy/N)
Aluminium Hydroxide with Magnesium Hydroxide, 300mg-90mg tablet (Aludrox)
Nitrofurantoin, 25mg per 5mL, 200mL paediatric suspension (Furadantin)
Norethisterone Acetate with Ethinyloestradiol, 3mg-50micrograms, 21 tablet (Gynovlar); 4mg-50micrograms, 21 tablet (Anovlar)
Orciprenaline, 5%, 7.5mL inhalation solution for use in HAND NEBULISER (Alupent)
Penicillinase, 0.8megaU and 1mL solvent injection set (Compenase)
Sulphacetamide Sodium, 15%, 15mL eye drops (Isopto Cetamide)
Sulphadiazine, 500mg tablet
Sulphamethoxazole, 500mg tablet (Gantanol)

The following item will be deleted at a future date.

Influenza Vaccine, 1mL injection (Trivalent) -
(CSL Influenza Vaccine for the 1985 season will be supplied as an 0.5mL injection.)

The following items, on the recommendation of the Pharmaceutical Benefits Advisory Committee, will be deleted from the Schedule of Pharmaceutical Benefits as from 1 April 1985.

Choline Theophyllinate with Guaiphenesin, 200mg-100mg tablet (Brondecon); 50mg-25mg per 5mL, 500mL elixir (Brondecon)
Theophylline with Guaiphenesin, 150mg-90mg capsule (Quibron); 150mg-90mg per 15mL, 500mL elixir (Quibron)
Theophylline with Potassium Iodide, 80mg-130mg per 15mL, 500mL oral liquid (Elixophyllin-KI)

Aminophylline, 100mg, 175mg, 250mg and 400mg suppositories (Cardophyllin)
(The absorption of aminophylline when given by suppository is unpredictable and variable.)

Di-iodohydroxyquinoline, 100mg compound pessaries (Floraquin)
(There is no evidence to support the safety or efficacy of this item.)

Ethynodiol Diacetate with Mestranol, tablet 500 micrograms-100 micrograms, 21 (Ovulen 0.5); tablet 1mg-100 micrograms, 21 (Ovulen 1); tablet 2mg-100 micrograms, 21 (Ovulen 2)
(Oestrogen dose unnecessarily high for an anovulant formulation.)

Norethisterone with Mestranol, tablet 1mg-80 micrograms, 21 (Ortho-Novum 1/80); tablet 2mg-100 micrograms, 21 (Norinyl-2)
(Oestrogen dose unnecessarily high for an anovulant formulation.)

Orciprenaline, 20mg tablet; 10mg per 5mL, 300mL syrup; 2%, 75mL inhalation solution for use in RESPIRATOR or JET NEBULISER; 15mg per mL, 15mL (300 dose) inhalation, metered aerosol spray replacement pack (Alupent)
(Therapeutically preferred alternatives are available as pharmaceutical benefits.)

PHARMACEUTICAL BENEFITS

Explanatory Circular regarding the December 1984 edition of the Schedule of Pharmaceutical Benefits for Medical Practitioners.

The reprint of the Schedule will take effect on 1 December 1984 and all previous editions of the Schedule are cancelled.

Your attention is drawn to the following:—

Increased Quantities and Repeats of 'Authority Required' Items

The Pharmaceutical Benefits Advisory Committee wants to remind prescribers of the availability of increased maximum quantities and repeats for 'Authority Required' benefits.

Unless specifically stated in the entry for the item in this Schedule that there is a limit on the maximum quantity and/or repeats (e.g. cimetidine), a quantity sufficient for one month's treatment, plus repeats for a further two months' treatment, may be authorised.

The inclusion of the symbol '.' in the Repeats column does not indicate that no repeats are available on authority, but rather that the prescriber should indicate the number of repeats required.

While the normal limitation is for one month's supply plus *two* repeats, exceptions are made for those 'Authority Required' items listed on pages 22 and 23 of the lemon pages for which *six* months' therapy may be authorised.

SUMMARY OF CHANGES

ADDITIONS

Section 1

Items For Which An Authority To Prescribe May Be Granted To Provide Up To Six Months' Therapy.

The following items have been added:—

Bromocriptine Mesylate, 2.5mg tablet; 10mg capsule

Diazepam, 2mg and 5mg tablets; 2mg per 5mL, 100mL paediatric syrup; 10mg in 2mL injection. (Only for the treatment of disabling spasticity; malignant neoplasia (late stage).)

Section 2

New Items

Benzoyl Metronidazole, 6.4% (equivalent to 200mg metronidazole in 5mL), 100mL suspension (*Flagyl S*)

Bumetanide, 1mg tablet (*Burinex*)

Diclofenac Sodium, 50mg (enteric coated) tablet (*Voltaren 50*)

New Forms and Strengths of Existing Items

Choline Theophyllinate, 50mg per 5mL, 500mL elixir (*Brondecon Elixir-PD*)

Clotrimazole, 2%, 20g vaginal cream (*Canesten 3*)

Section 3

Preparations Available for Colostomy and Ileostomy Use

New Form of Existing Item

Butyl Monoester Polymer with Isopropyl Alcohol, 50 protective dressing wipes (*Skin-Prep*)

Section 4

Acid Lactic BP

Clioquinol BP

DELETIONS

Section 2

Items

Bethanidine, 10mg and 25mg tablets (*Esbatal*) (Items discontinued by manufacturer)

Cyclizine, 50mg tablet (*Marzine*) (Item discontinued by manufacturer)

Nalorphine, 1mg in 1mL and 10mg in 1mL injections (*Lethidrone*)
Paraldehyde, 5mL injection
Pentazocine, 60mg in 2mL injection (*Fortral*)
Phenylbutazone, 100mg tablet (*Butacal*, *Butazone*, *Butalgin*); 100mg (enteric coated) tablet (*Butazolidin*); 600mg in 3mL injection (*Butazolidin*); 250mg suppositories, 20 (*Butazolidin*)
Propylene Glycol, propylene glycol 10%, glycerol 2% in normal saline, 200mL spray diluent (Item discontinued by manufacturer)
Tacrine, 10mg, 2mL and 30mg, 2mL injections (*T.H.A.*)

Forms and Strengths of Existing Items

Ampicillin, 100mg (solvent required) injection (*Austrapen*) (Item discontinued by manufacturer)
Digoxin, 50 micrograms in 2mL injection for infants (*Lanoxin*) (Item discontinued by manufacturer)
Glycerol, 1g suppositories, 10 (Item discontinued by manufacturer)
Morphine with Tacrine, 30mg-30mg in 1.5mL injection (*Mortha*)
Phenobarbitone, 60mg tablet (Item discontinued by manufacturer)
Sulphamethoxazole, 500mg per 5mL, 50mL syrup (*Gantanol*) (Item discontinued by manufacturer)
Triprolidine, 1mg per 5mL, 100mL paediatric elixir (*Actidil*) (Item discontinued by manufacturer)

ALTERATIONS

Section 2

To be Unrestricted

Diflunisal, 250mg tablet (*Dolobid*)
Metoclopramide Hydrochloride, 5mg per 5mL, 100mL syrup (*Primperan*); 10mg tablet (*Maxolon*, *Metamide*, *Primperan*) (The differential listing of the 10mg tablet has been deleted)

Restriction Changes

Captopril, 25mg and 50mg tablets (*Capoten*)
Cephalothin Sodium, 1g (solvent required) injection (*Ceporacin*, *Keflin Neutral*); 2g (solvent required) and 4g (solvent required) injections (*Keflin Neutral*)
Cephazolin Sodium, 500mg (solvent required) and 1g (solvent required) injections (*Kefzol*)

Cephadrine, 500mg (solvent required) and 1g (solvent required) injections
(*Velosef*)

Etretinate, 10mg and 25mg capsules (*Tigason*)

Mexiletine Hydrochloride, 50mg and 200mg capsules (*Mexitil*); 250mg in
10mL injection (*Mexitil*)

Minoxidil, 10mg and 25mg tablets (*Loniten*)

Nalidixic Acid, 500mg tablet (*Negram*); 50mg per mL, 200mL oral
suspension (*Negram*)

Nifedipine, 10mg capsule (*Adalat*)

Maximum Quantities

	<i>From</i>	<i>To</i>
Metoclopramide Hydrochloride , 10mg tablet (<i>Maxolon, Metamide, Primperan</i>)	10	25
Sodium Aurothiomalate , 20mg injection (<i>Myocrisin</i>)	5	10

Number of Repeats

	<i>From</i>	<i>To</i>
Glyceryl Trinitrate , 2%, 60g ointment (<i>Nitro-Bid</i>)	nil	2
Sodium Aurothiomalate , 20mg injection (<i>Myocrisin</i>)	nil	1
Sodium Valproate , 200mg per 5mL, 200mL syrup (<i>Epilim</i>)	1	2

Proprietary Name

	<i>From</i>	<i>To</i>
Erythromycin Ethylsuccinate , 200mg (base) tablet	EES	EES Dulcet

Manufacturers' Codes

Section 2

	<i>From</i>	<i>To</i>
Aluminium Hydroxide and Magnesium Carbonate Co-Dried Gel , 375mg tablet (<i>Almacarb</i>)	AH	GL

Beclomethasone Dipropionate , 100 micrograms capsule (oral inhalation) (<i>Becotide Rotacaps</i>); 50 micrograms per dose (200 dose) inhalation, metered aerosol spray (<i>Becotide</i>)	<i>From</i> AH	<i>To</i> GL
Ethinylloestradiol , 10 micrograms, 20 micrograms and 50 micrograms tablets (<i>Estigyn</i>)	AH	GL
Labetalol , 100mg and 200mg tablets (<i>Trandate</i>)	AH	GL
Meclozine , 25mg tablet (<i>Ancolan</i>)	AH	GL
Methdilazine , 4mg and 8mg tablets (<i>Dilosyn</i>)	AH	GL
Salbutamol , 4mg tablet (<i>Ventolin</i>); 2mg per 5mL, 300mL syrup (<i>Ventolin</i>); 200 micrograms capsule (oral inhalation) (<i>Ventolin Rotacaps</i>); 0.5%, 30mL inhalation solution for use in RESPIRATOR (<i>Ventolin</i>); 100 micrograms per dose (200 dose) inhalation, metered aerosol spray (<i>Ventolin</i>)	AH	GL
Surgical Cement , 240mL solvent (<i>Sacsol</i>); 250mL solvent (<i>Sacsol Non Flammable</i>)	LF	EG

Preparations Available for Colostomy and Ileostomy Use

Benzoin , 35%, 167mL benzoin compound tincture aerosol spray	<i>From</i> LF	<i>To</i> EG
Deodorant Detergent Solution , lauryl-dimethylbenzyl ammonium chloride 12.5g, "TERIC" N8, 125g in 500mL solution (<i>TAGG</i>)	LF	EG
Dimethicone , 10%, 180mL aerosol spray solution (<i>Silicon Skin Spray</i>)	LF	EG
Polyvinylpyrrolidone and Vinyl Acetate Copolymer , 6%, 121mL aerosol spray (<i>Spray-On Bande</i>)	LF	EG

Preparations Available for Paraplegic and Quadriplegic Patients

	<i>From</i>	<i>To</i>
Deodorant Detergent Solution , lauryl-dimethylbenzyl ammonium chloride 12.5g, "TERIC" N8, 125g in 500mL solution (<i>TAGG</i>)	<i>LF</i>	<i>EG</i>

NOTES

Notes have been added, deleted or altered in respect of the following items:—

Calcium Folate, 15mg tablet (*Leucovorin*)

Cholestyramine, 9g sachet (equivalent to 4g cholestyramine) powder, 50 (*Questran*)

Clofibrate, 500mg capsule (*Arterioflexin, Atromid-S*)

Colestipol Hydrochloride, 5g sachet, 120 (*Colestid*)

Metoclopramide Hydrochloride, 10mg tablet (*Maxolon, Metamide, Primperan*)

All Previous Editions Cancelled



**SCHEDULE OF
PHARMACEUTICAL BENEFITS**

for

MEDICAL PRACTITIONERS

OPERATIVE FROM 1 DECEMBER 1984

Commonwealth Department of Health,
CANBERRA, A.C.T.

A. B. CAUDELL, Government Printer, Tasmania

CONTENTS

SECTION 1 — LEMON PAGES

	<i>Paragraph</i>	<i>Page</i>
Explanatory Notes —		
Prescribing of Benefits — Procedure by Doctors —		
Schedule of Benefits	1-9	4
Explanatory and Warning Statements	10-11	5
Prescriptions	12-21	5-7
Manner of Administration	22	7
Restrictions	23-24	8
Maximum Quantities and Repeats	25-33	8-9
Regulation 24	34-35	9-10
Patient Contribution	36-37	10
Eligibility of patients to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate	38	10-11
Establishment of patient's entitlement to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate	39-41	11
Authority to Prescribe	42-43	12
Urgent Cases	44-45	12
Emergency Drug (Doctor's Bag) Supplies	46-49	13
Enquiries	50	13
Addresses of Poisons Information Centres		14
Addresses of Commonwealth Department of Health Central Office and Regional Offices		15-17
Index of Manufacturers' Codes		18-21
Items for which an Authority to Prescribe may be granted to provide up to six months' therapy		22-23
List of Emergency Drug (Doctor's Bag) Supplies		24-26

SECTION 2 — WHITE PAGES

Page

Schedule of Benefits —

General, Pensioner and Restricted Benefits	....	1-112
Intravenous Infusions	.... ..	113-114

SECTION 3 — WHITE PAGES

Schedule of Benefits —

Preparations Available for Colostomy and Ileostomy Use	.... ..	1-3
Preparations Available for Use by Paraplegic and Quadriplegic Patients	.... ..	4

SECTION 4 — GREEN PAGES

Schedule of Benefits — Drugs Available for Extemporaneous Preparations	.... ..	1-4
Table of Maximum Quantities and Number of Repeats for Extemporaneous Preparations	.... ..	5

SECTION 5 — GREEN PAGES

Prescribers' List — Pharmaceutical Benefits Formulae		1-13

PROPRIETARY INDEX

Part 1 — Proprietary Names Index	.... ..	4-22
Part 2 — Trade Names Index	.... ..	23

SECTION 1 — EXPLANATORY NOTES

PRESCRIBING OF BENEFITS — PROCEDURE BY DOCTORS

1. Pharmaceutical benefits which may be prescribed by doctors are listed in this book.
2. Ready prepared items are listed in Sections 2 and 3 of the Schedule of Benefits. Restrictions apply to the prescribing of some items in Section 2 and all the items in Section 3. Further details may be found in these notes — paragraphs 23–24.
3. The Schedule of ready prepared items includes the form, manner of administration and brand of these items which may be prescribed. Where the words ‘solvent required’ are included after the form, the item and a solvent may be prescribed as one benefit. In such cases, any listed brand of solvent may be ordered with the item. For clarity, such benefits should be written as one prescription, e.g. ‘Ampicillin, Injection 1g with 2mL water for injections’.
4. The Schedule also shows the maximum quantity and the number of repeats allowable for each item. Further details may be found in these notes — paragraphs 25–35.
5. The drugs which may be used in extemporaneous preparations are listed in Section 4 (Green Pages). Where a restriction applies to the use of a drug listed in this Section it is indicated against the item.
6. Formulae in common use are listed in Section 5 — Prescribers’ List (Green Pages).
7. A proprietary name index of ready prepared items is included after Section 5.
8. Symbols used in the Schedule of Benefits are explained on page 1, Section 2 (White Pages).
9. The following admixtures are not pharmaceutical benefits:—
 - (a) the admixture of two or more ready prepared items listed in the Schedule of Benefits; or
 - (b) the admixture of a ready prepared item and a drug or drugs listed in Section 4 of the Schedule of Benefits.

Explanatory and Warning Statements

10. The Use of 'Note' in Section 2 (White Pages) of the Schedule is reserved for explanatory purposes in relation to the prescribing of some drugs as pharmaceutical benefits.

11. The use of 'Caution' in Section 2 (White Pages) of the Schedule is reserved for the purpose of warning of adverse reactions or precautions associated with the use of a drug. The absence of a cautionary note does not necessarily imply that significant adverse reactions may not be encountered.

Prescriptions

12. A prescription ordering a pharmaceutical benefit may be written only for the medical treatment of the person named on the prescription and requiring treatment with that pharmaceutical benefit and must not be written for any other purpose. The prescription is valid only when it is written by a registered medical practitioner.

13. CARE MUST BE TAKEN TO COMPLY WITH THE PROVISIONS OF STATE LAW, PARTICULARLY IN REGARD TO THE PRESCRIBING OF DRUGS LISTED AS NARCOTIC, SPECIFIED OR RESTRICTED UNDER STATE LEGISLATION.

14. With regard to DRUGS OF ADDICTION, notification or approval of the appropriate State Health Authority or officer is required in all States for therapeutic use for a period exceeding two months (four weeks in Victoria, 30 days in Western Australia). Prior approval of the appropriate State Health Authority or officer is required in all States for the treatment of DRUG DEPENDENT PERSONS with ANY DRUG OF ADDICTION.

15. Medical practitioners are required by legislation under the National Health Act to observe the following rules when writing prescriptions for pharmaceutical benefits:—

- (a) Write the prescription in indelible form, i.e., ink or ball point pen in own handwriting (or with the approval of the Director-General otherwise record the prescription) either on the standard prescription form supplied by the Department or on paper as near as convenient to 18 cm × 12 cm. The name and address of the medical practitioner must be shown and 'N.H.S.' endorsed at the top.

- (b) Write the prescription in duplicate marking the duplicate copy with the word 'Duplicate'. This is pre-printed on the standard prescription forms.
- (c) Set out the name and address of the patient. Doctors are reminded that full details of the patient's address are required on each N.H.S. prescription.
- (d) The pharmaceutical benefit must be identified in the prescription by such particulars, including the name, form, strength and quantity, as are necessary for the complete identification of that benefit.
- (e) In the case of pharmaceutical benefits which are restricted in use, the prescription must be endorsed in the doctor's own handwriting with the words 'Specified Purpose'. Abbreviations such as 'Spec. Purp.' or 'S.P.' will be accepted.
- (f) If the benefit is a single drug, the manner of administration must be indicated.
- (g) When directing that the maximum quantity and repeats of a pharmaceutical benefit be supplied at the one time the prescription must be endorsed in own handwriting with the words 'Regulation 24'. Further details are available in paragraphs 34-35.
- (h) Date and sign the prescription.

16. A doctor may write up to three prescriptions on a single prescription form. Each prescription must be written legibly.

17. Prescriptions for pharmaceutical benefits for more than one person must not be written on the one prescription form.

18. A prescription is not a valid pharmaceutical benefit prescription if the medical practitioner —

- (a) prescribes a pharmaceutical benefit for a person in respect of whom another prescription for the same benefit has been written on the same day by the same medical practitioner;

- (b) prescribes on the one form a benefit that is a drug of addiction and another benefit and directs that the supply of either benefit is to be repeated. If no repeats of either item are ordered, the prescription may be accepted;
- (c) prescribes a narcotic drug for the medical practitioner writing the prescription.

19. Where a medical practitioner writes a prescription for a pharmaceutical benefit, a formulation of which is available as a ready prepared pharmaceutical benefit and does not specify a brand, payment to the chemist is made on the basis of the lowest priced brand of the ready prepared benefit item which is listed. This also applies if the preparation is, or the ingredients are, available for use in dispensing extemporaneously prepared benefits (i.e. listed in Section 4).

20. Where, in a prescription for a pharmaceutical benefit which is not listed as a ready prepared pharmaceutical benefit, a medical practitioner states a monograph title of a formulation but does not specify a formulary, payment to the chemist is made on the basis of the formula, if any, specified in the Prescribers' List (Section 5). Should there be no formula specified in the Prescribers' List, payment to the chemist is made on the basis of the precedence of formularies accorded by State legislation.

21. To avoid confusing patients and the dispensing chemist, doctors should not write prescriptions for pharmaceutical benefits and non-pharmaceutical benefits on the one form. Where the prescription is for a restricted benefit and the patient is not suffering from one of the allowable conditions the doctor should write the prescription on a private prescription form, or if he does use an N.H.S. standard prescription form, delete N.H.S. from the top of the form.

Manner of Administration

22. Where a particular manner of administration is indicated in the Schedule, the item may not be prescribed as a pharmaceutical benefit for administration in any other way, e.g., an ophthalmic preparation may not be prescribed for topical use.

Restrictions

23. Certain pharmaceutical benefits may only be prescribed for a particular class of person, for a specified purpose, disease or condition and, where specified with the written authority of the Regional Director, Commonwealth Department of Health in the State concerned. Full particulars of these items and their restrictions are printed in red in Sections 2 and 3 (White Pages) of the Schedule. It is not necessary for the particular restriction to be identified on the prescription.

24. Pharmaceutical benefits which are available for use for colostomy and ileostomy conditions as well as pharmaceutical benefits which are available for use by paraplegic and quadriplegic patients are listed in Section 3 of the Schedule.

Maximum Quantities and Repeats

25. For ready prepared preparations, the allowable maximum quantity and number of repeats are shown in the second and third columns of Sections 2 and 3. For extemporaneously prepared preparations, details are set out in the Table of Maximum Quantities and Repeats (Green Pages).

26. Where the maximum quantity of an item is marked with a double dagger (‡), the maximum quantity has been determined as a single pack. In such instances, chemists are required to supply unbroken packs (see page 1, Section 2 White Pages). These items should be prescribed in the standard pack sizes.

27. For other items it is not necessary to prescribe the maximum quantity either for the original or for a repeat supply, if the medical practitioner considers a lesser quantity is sufficient for the patient's needs.

28. If a medical practitioner requires a prescription to be repeated, he must show the quantity to be supplied and the number of repeats. It is not necessary for the maximum quantity to be ordered before the supply can be repeated. Repeats may be for any quantity up to the maximum, irrespective of whether the original supply is for an equal, greater or lesser quantity.

29. The relevant maximum quantity and number of repeats are not to be exceeded, unless the prescription is accompanied by a written authority from the Regional Director, Commonwealth Department of Health (see paragraphs 31-33).

30. The normal maximum quantity and number of repeats for pharmaceutical benefit items are recommended by the Pharmaceutical Benefits Advisory Committee (PBAC). For the treatment of an acute condition the PBAC recommends a maximum quantity which will provide sufficient medication for the treatment of the condition; for the treatment of chronic conditions the PBAC recommends sufficient, at normal dosage levels, for one month's treatment and two repeats.

31. However, special provisions exist to assist chronically ill patients who require large quantities of drugs and/or continuous treatment. In most cases under these provisions a doctor may, if he considers it to be in his patient's interest, apply to the Regional Director, Commonwealth Department of Health in his State for authority to prescribe a quantity in excess of the listed maximum quantity and/or number of repeats.

32. Normally a quantity sufficient for approximately three months' treatment at the higher dosage levels, i.e. one month's treatment with two repeats, may be authorised by the Director. For certain items the Pharmaceutical Benefits Advisory Committee has recommended that authorities may be granted to provide for up to six months' treatment i.e. one month's treatment with five repeats. A list of these items appears on pages 22-23 (Lemon Pages). One patient contribution fee is payable for each supply of the benefit so authorised.

33. For restricted drugs, where the written authority of the Regional Director, Commonwealth Department of Health is required to prescribe, the provisions of paragraph 32 will apply except where otherwise indicated in the individual entry in Section 2 of the Schedule. Where the number of repeats for such a drug is not specified in Section 2, the prescriber should indicate the number of repeats required in accordance with paragraph 32.

Regulation 24

34. Generally, a pharmaceutical benefit may not be supplied to the same person more than once on any one day. However, a doctor may direct that the original supply and the repeat supplies of a benefit ordered in a prescription be supplied at the one time, provided he is satisfied that—

- (a) the maximum quantity specified for the benefit is insufficient for the medical treatment of the person for whom it is prescribed;

- (b) that person is suffering from a chronic illness or is resident in a place remote from the nearest approved pharmaceutical chemist; and
- (c) that person, without great hardship, could not obtain the pharmaceutical benefit on separate occasions.

The doctor must endorse the prescription 'Regulation 24' as certification that the above conditions have been satisfied.

35. Where a prescription is endorsed 'Regulation 24' the dispensing chemist should make the relevant prescribed charge for the original and the same charge for each repeat that would normally be needed to make up the total supplies, for example, if the prescription orders two repeats, three patient contributions would be charged to a patient other than a person issued with a valid Pensioner Health Benefits Card or a valid Health Benefits Card (see paragraph 38).

Patient Contribution

36. The dispensing chemist may in respect of each supply by him whether on a prescription or repeat authorisation, charge the person to whom the pharmaceutical benefit is supplied an amount of \$4 in respect of general patients or an amount of \$2 in respect of patients with a concessional entitlement. A charge is not to be made in respect of patients who are eligible pensioners.

37. A prescription, other than a prescription for an eligible pensioner, written for a benefit for which the dispensed price at the date of supply is equal to or less than \$4 in respect of general patients, or \$2 in respect of patients with a concessional entitlement, is not a prescription for a pharmaceutical benefit. This also applies to prescriptions endorsed 'Regulation 24' (see paragraphs 34, 35), for which the price of the total quantity of the benefit supplied is equal to or less than the authorised charge specified in paragraph 35.

Eligibility of patients to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate

38. Under the Pharmaceutical Benefits Scheme, persons holding a valid Pensioner Health Benefits Card or a valid Health Benefits Card and their dependants are entitled to receive pharmaceutical benefits free of charge. Persons holding a valid Health Care Card or a valid

Pharmaceutical Benefits Concession Card and their dependants are entitled to receive pharmaceutical benefits at the concessional patient contribution rate.

Establishment of patient's entitlement to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate

39. Any person (including a doctor) may enter the relevant information to establish the patient's entitlement to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate, where space has been provided on prescription forms (front or back) supplied by the Department for the provision of entitlement information.

40. The person entering the entitlement information must complete all the relevant details applicable to the patient's entitlement on the prescription. The information to be provided in the appropriate space is:—

- (i) the entitlement number appearing on the card, i.e., a ten-character alpha-numeric number (the entitlement number does not identify the type of card or the entitlement category);
- (ii) a cross(×) in the appropriate box indicating the type of entitlement card held by the patient. The type of card denotes the entitlement of the patient to receive pharmaceutical benefits free of charge or at the concessional patient contribution rate.

Where a patient or agent is required to sign and date a receipt for the supply of a benefit on an original prescription form, the patient or agent also accepts responsibility for the validity of the entitlement information shown on the prescription.

41. Where prescriptions are written on forms which do not provide space (front or back) for the entry of entitlement information, the doctor should not enter the patient's entitlement information on the prescription form. In these instances the dispensing chemist, on request, shall place the declaration stamp imprint on the back of the original prescription form to enable the patient entitlement information (see paragraph 40) to be entered.

Authority to Prescribe

42. Where the written authority of the Regional Director, Commonwealth Department of Health is required to prescribe:—

- (i) restricted drugs (paragraphs 23, 24); or
- (ii) increased maximum quantities (paragraphs 31–33); and/or
- (iii) increased number of repeats (paragraphs 31–33)

application should be made on the combined application/authority prescription form (Form PB86). The 'Health Department copy' together with the completed original and duplicate of the authority prescription are to be forwarded to the Director. The doctor's copy should be retained.

43. The original and duplicate authority prescription, when authorised, can be returned to the doctor or sent direct to the patient. If the application can be approved after some amendment, an Authority to Prescribe (Form PB15) will be forwarded to the doctor, specifying what has been approved. A new prescription should then be written on the form PB15, the original and duplicate sent to the patient, and the triplicate (green copy) retained by the doctor.

Urgent Cases

44. In urgent cases, a chemist may supply a benefit before the prescription is surrendered to him, if the doctor communicates the prescription to the chemist by telephone or other means. *In such cases the doctor must write out the prescription and forward it to the approved chemist who made the supply within 24 hours of such communication.* This provision does not apply to prescriptions for supply by chemists where the law of the State in which the chemist's premises are situated requires the prescription to be in writing.

45. The provision for communication of prescriptions in urgent cases applies also to those drugs for which the written authority of the Director of Health is necessary for supply as a pharmaceutical benefit (see paragraph 23). In such cases the doctor must first obtain advice from the Regional Director, Commonwealth Department of Health in the particular State, by telephone or other means, that the authority will be issued, and notify the chemist accordingly when communicating the prescription. *The doctor must subsequently submit a form PB86, obtain the written authority and forward it, within 24 hours of its receipt, to the approved chemist who supplied the benefit.*

Emergency Drug (Doctor's Bag) Supplies

46. Certain pharmaceutical benefits are provided free to doctors for emergency use. These emergency supplies are not available to ships' doctors. The patient is not required to make any payment when benefits are made available to him from these supplies.

47. Supplies of these drugs may be obtained from an approved chemist upon the production of an official Emergency Drug (Doctor's Bag) Order Form (Form PB7) in duplicate, signed by the doctor personally. Each order form is valid during the month printed thereon and each doctor may obtain the benefits not more often than once per month. (Doctors approved to supply pharmaceutical benefits under section 92 of the National Health Act are to use Form PB7A which must not be presented to an approved chemist for supplies. Special instructions are issued to these doctors.)

48. The maximum quantity listed against the Emergency Drug items permitted to be obtained at the one time may be ordered provided the quantity of the item that the doctor has on hand is less than the maximum quantity.

49. A doctor may also specify on the order form any listed brand of a benefit. If this brand is not available, the doctor will be requested by the approved chemist to specify in the order another listed brand which is available, and to initial the alteration. The doctor issuing the order form must sign and date the form. A receipt for the benefits supplied on this order form must be signed by either the doctor himself or by a person authorised by him.

Enquiries

50. Any enquiries regarding the Pharmaceutical Benefits Scheme or requests for Departmental publications or stationery other than N.H.S. standard prescription pads should be made to the Regional Director, Commonwealth Department of Health in the capital city of your State. Orders for N.H.S. prescription pads should be forwarded to the Director-General of Health, Canberra.

ADDRESSES OF POISONS INFORMATION CENTRES

NEW SOUTH WALES

Royal Alexandra Hospital for Children,
Pymont Bridge Road,
Camperdown.

Telephone No.

Sydney
51 0466

VICTORIA

Royal Children's Hospital,
Flemington Road,
Parkville.

Melbourne
347 5522

QUEENSLAND

Brisbane Royal Children's Hospital,
Herston Road,
Herston.

Brisbane
253 8233

SOUTH AUSTRALIA

Adelaide Children's Hospital (Incorporated),
King William Road,
North Adelaide.

Adelaide
267 4999
Ext. 117 or 119

WESTERN AUSTRALIA

Princess Margaret Hospital for Children,
Thomas Street,
Subiaco.

Perth
382 8222

TASMANIA

Royal Hobart Hospital,
Liverpool Street,
Hobart.

Hobart
38 8485

NORTHERN TERRITORY

Royal Darwin Hospital,
Darwin.

Darwin
20 8385

AUSTRALIAN CAPITAL TERRITORY

Royal Canberra Hospital,
Canberra.

Canberra
43 2154

ADDRESSES OF COMMONWEALTH DEPARTMENT OF HEALTH OFFICES

NOTE: All applications for authority to prescribe should be forwarded to the appropriate Regional Office.

CENTRAL OFFICE

Director-General,
Commonwealth Department of Health,
P.O. Box 100,
Woden, A.C.T. 2606

REGIONAL OFFICES

NEW SOUTH WALES

Commonwealth Department of Health,
Commonwealth Government Centre,
Chifley Square,
Corner Phillip and Hunter Streets,
Sydney, N.S.W. 2000 Telephone 239 3000
Assistant Director (Medical) —
Dr L. B. Lilley After hours: Telephone 929 6164

VICTORIA

Commonwealth Department of Health,
Commonwealth Centre,
Corner Spring and Latrobe Streets,
Melbourne, Vic. 3000 Telephone 662 2999
Assistant Director (Medical) —
Dr A. I. Mead After hours: Telephone 347 0103

QUEENSLAND

Commonwealth Department of Health,
 Australian Government Offices,
 Anzac Square,
 Adelaide Street,
 Brisbane, Qld 4000

Telephone 225 0122

G.P.O. Box 567, Brisbane, Qld 4001

Director of Health —

Dr Peter E. R. Ulrich

Assistant Director (Medical) —

Dr J. R. Meyers

After hours: Telephone 399 5857

SOUTH AUSTRALIA

Commonwealth Department of Health,
 I.M.F.C. House,
 33-39 King William Street,
 Adelaide, S.A. 5000

Telephone 216 3911

G.P.O. Box 2219, Adelaide, S.A. 5001

Director of Health —

Dr J. Y. Hancock

After hours: Telephone 272 0527

WESTERN AUSTRALIA

Commonwealth Department of Health,
 Victoria Centre,
 2-6 St George's Terrace,
 Perth, W.A. 6000

Telephone 323 5711

G.P.O. Box M970, Perth, W.A. 6001

Director of Health —

Dr D. J. Daly

After hours: Telephone 399 6075

TASMANIA

Commonwealth Department of Health,

Kirksway House,

6 Kirksway Place,

Hobart, Tas. 7000

Telephone 20 5011

G.P.O. Box 919J, Hobart, Tas. 7001

Director of Health —

Dr C. W. Phillips

After hours: Telephone 25 1536

NORTHERN TERRITORY

Commonwealth Department of Health,

M.L.C. Building,

Smith Street,

Darwin, N.T. 5794

Telephone 80 2911

P.O. Box 147, Darwin, N.T. 5794

Director of Health —

Dr F. H. Stewart

After hours: Telephone 81 2036

AUSTRALIAN CAPITAL TERRITORY

C.T.H.C. Building,

Corner Moore and Alinga Streets,

Canberra City, A.C.T. 2601

Telephone 45 4111

G.P.O. Box 825, Canberra City, A.C.T. 2601

Applications for authority to prescribe —

Dr B. C. Bromhead

After hours: Telephone 82 2868

Alternative: (048) 47 5017

INDEX OF MANUFACTURERS' CODES

<i>Code</i>	<i>Manufacturer</i>
AB	Abbott Laboratories Pty Ltd
AF	Alphapharm Pty Ltd
AG	Allergan Pharmaceuticals Pty Ltd
AM	Ames Company, Division of Miles Laboratories Australia Pty Ltd
AP	Astra Pharmaceuticals Pty Ltd
AQ	Alcon Laboratories (Australia) Pty Ltd
AY	Ayerst Laboratories Pty Ltd
BC	Bristol Laboratories Pty Ltd
BF	Barnes-Hind Pty Limited
BH	Biopharm Pty Ltd
BL	David Bull Laboratories
BM	Bermudapharm
BN	Bayer Pharmaceutical Company
BO	Boehringer Mannheim, Australia Pty Ltd
BR	Beecham Research Laboratories
BT	The Boots Company (Australia) Pty Ltd
BW	Wellcome Australia Limited
BY	Boehringer Ingelheim Pty Ltd
BZ	Boucher & Muir Pty Ltd
CG	Ciba-Geigy Australia Limited
CS	Commonwealth Serum Laboratories
DF	Difrex (Aust.) Laboratories
DH	Drug Houses of Australia Pty Ltd
DL	Dista Products (Australia) & Company
DT	Du Pont Pharmaceuticals
DY	Denyer Brothers
EC	Erba Carlo S.p.A., Australian Distributor, Sigma Co. Ltd
EG	Eagle Laboratory Pty Ltd

<i>Code</i>	<i>Manufacturer</i>
ET	Ethnor Pty Ltd
FA	F. H. Faulding & Co. Ltd
FC	Fisons Pty Ltd
FL	Florafaun Pty Ltd
FM	Fawns and McAllan Pty Ltd
FR	Charles E. Frosst (Australia) Pty Ltd
GB	Gist-Brocades nv, The Netherlands, Australian Distributor, Astra Pharmaceuticals Pty Ltd
GL	Glaxo
GP	G.P. Laboratories
HA	Hamilton Laboratories Pty Ltd
HO	Hollister Incorporated, Australian Distributor, Abbott Laboratories Pty Ltd
HP	Hoechst Australia Ltd
IC	ICI Australia Operations Pty Ltd
IQ	The Ioquin Company
JP	Janssen Pharmaceutica Pty Ltd
KN	Knoll, A.G.
LA	L.A. Chemicals Pty Ltd
LE	Lederle Laboratories Division
LF	Langly Laboraatories Pty Ltd
LY	Eli Lilly (Australia) and Company
MB	May & Baker Australia Pty Ltd
MG	J. McGloin Pty Ltd
MJ	Mead Johnson

<i>Code</i>	<i>Manufacturer</i>
MK	Merck, Sharp & Dohme (Australia) Pty Ltd
ML	Merrell Dow Pharmaceuticals Australia Pty Ltd
MN	Muir & Neil (Sales) Pty Ltd
NE	Norgine Pty Ltd
NN	Nelson Laboratories (Sales) Pty Ltd
NO	Novo Laboratories Pty Ltd
NR	Nordia, Australian Distributor, Ascot Pharmaceuticals Pty Ltd
NS	Nicholas Pty Ltd
NT	Nestle Australia Ltd
NW	Norwich-Eaton Pty Ltd
OL	Owen Laboratories
OR	Organon (Australia) Pty Ltd
PD	Parke, Davis Pty Ltd
PF	Pfizer Pty Ltd
PN	Pharmax Ltd, Australian Distributor, Protea Pharmaceuticals Pty Ltd
PR	Prosana Laboratories Pty Ltd
PS	Pharmacia (South Seas) Pty Ltd
PT	Protea Pharmaceuticals
QE	Queensland Ethicals
RC	Reckitts Pty Ltd
RD	Ross Laboratories
RK	Riker Laboratories Australia Pty Ltd
RL	Roussel Pharmaceuticals Pty Ltd
RN	Rona Laboratories Ltd, Australian Distributor, Riker Laboratories Australia Pty Ltd
RO	Roche Products Pty Ltd
RS	A. H. Robins Pty Ltd
RT	Rocke, Tomsitt & Co., Ltd

<i>Code</i>	<i>Manufacturer</i>
SC	Schering, A.G.
SD	Syntex Pharmaceuticals Ltd
SE	Servier Laboratories (Aust.) Pty Ltd
SH	Schering Corporation
SI	Sigma Co. Ltd
SJ	Sharpe Laboratories Pty Ltd
SK	Smith Kline & French Laboratories (Aust.) Ltd
SL	Soul Pattinson Laboratories Pty Ltd
SN	Smith & Nephew (Aust.) Pty Ltd
SQ	E. R. Squibb & Sons Pty Ltd
SR	Searle Laboratories
ST	A. E. Stansen & Co. Pty Ltd
SU	Sauter Laboratories (Aust.) Pty Ltd
SV	Stafford-Miller Limited
SZ	Sandoz Australia Pty Ltd
TO	R. D. Toppin & Sons Pty Ltd
TV	Travenol Laboratories Pty Ltd
UP	Upjohn Pty Ltd
US	USV Pharmaceuticals
UW	United Works of Pharmaceutical and Dietetic Products, Australian Distributor, Boucher and Muir Pty Ltd
VF	Vifor, S.A., Australian Distributor, Boucher and Muir Pty Ltd
WH	H. W. Woods Pty Ltd
WL	Winthrop Laboratories
WP	Weddel Pharmaceuticals
WR	A. A. Wright Pty Ltd
WW	Wm R. Warner
WY	Wyeth Pharmaceuticals Pty Ltd
ZR	Zero Chemicals (Aust.) Pty Ltd
ZY	Zyma Pharmaceuticals

ITEMS FOR WHICH AN AUTHORITY TO PRESCRIBE MAY BE GRANTED TO PROVIDE UP TO SIX MONTHS' THERAPY

(i.e. one month's treatment with five repeats)

- Azathioprine, tablet 50mg
- Benztropine, tablet 2mg (only for the treatment of non-drug-induced parkinsonism)
- Bromocriptine Mesylate, tablet 2.5mg; capsule 10mg
- Calcium, compound effervescent tablet equivalent to 1g (25mmol)Ca²⁺
(provided that for any such authority, the maximum quantity and number of repeats shown in Section 2 is not exceeded)
- Carbimazole, tablet 5mg
- Cholestyramine, powder, 9g sachet (equivalent to 4g cholestyramine), 50
- Clofibrate, capsule 500mg
- Colestipol Hydrochloride, sachets 5g, 120
- Cortisone Acetate, tablets 5mg and 25mg
- Danazol, capsule 200mg
- Dexamethasone, tablet 500 micrograms
- Dexamphetamine, tablet 5mg
- Diazepam tablets 2mg and 5mg; paediatric syrup 2mg per 5mL, 100mL; injection 10mg in 2mL. (Only for the treatment of disabling spasticity; malignant neoplasia (late stage)).
- Dihydratachysterol, capsule 125 micrograms
- Dipyridamole, tablet 100mg
- Ergocalciferol, tablet 250 micrograms; oral solution 15mg in 1.5mL alcoholic solution
- Glucose Indicator-Blood, reagent strips 25
- Levodopa, tablets 100mg, 250mg and 500mg
- Levodopa with Benserazide, tablet 200mg-50mg; capsules 50mg-12.5mg, 100mg-25mg and 200mg-50mg
- Levodopa with Carbidopa, tablets 100mg-10mg, 100mg-25mg and 250mg-25mg
- Lithium Carbonate, tablets 250mg and 400mg (sustained release)
- Methylphenobarbitone, tablets 30mg, 60mg and 200mg
- Nitrazepam, tablet 5mg (only for the treatment of myoclonic epilepsy)
- Oxymetholone, tablets 50mg and 100mg
- Pancreatin Enzyme, tablet 325mg; powder 250g; capsule 305mg
- Pancrelipase, capsules 234mg and 300mg
- Penicillamine, tablets 125mg and 250mg
- Phenobarbitone, tablet 30mg

Prednisolone, tablets 1mg, 5mg and 25mg

Propantheline Bromide, tablet 15mg

Propylthiouracil, tablet 50mg

Sulthiame, tablets 50mg and 200mg

Triglycerides, Medium Chain, compound powder 450g; lactalbumin
demineralised powder 400g; protein hydrolysate compound powder
454g

Vitamin Supplement, tablet; liquid 100mL

EMERGENCY DRUG (DOCTOR'S BAG) SUPPLIES

<i>Name of Pharmaceutical Benefit</i>	<i>Strength and Volume</i>	<i>Form</i>	<i>Maximum Quantity</i>
Adrenaline Injection BP	1mg in 1mL	Ampoule	5
Aminophylline injection I.V.	250mg in 10mL	Ampoule	5
Atropine sulphate injection	600 micrograms in 1mL	Ampoule	5
Chlorpromazine Injection BP	50mg in 2mL	Ampoule	10
Diazepam injection	10mg in 2mL	Ampoule	5
Digoxin Injection BP	500 micrograms in 2mL	Ampoule	5
Ergometrine maleate injection	250 micrograms in 1mL	Ampoule	5
Erythromycin ethylsuccinate injection I.M.	100mg (base) in 2mL	Ampoule	5
Frusemide injection	20mg in 2mL	Ampoule	5
Glucose injection	50%, 10mL	Ampoule	5
Heparin Sodium Injection BP	5 000 units in 1mL	Ampoule	1
<i>or</i>			
Heparin Sodium Injection BP	25 000 units in 5mL	Ampoule	1
Hydrocortisone sodium succi- nate injection	Equivalent to 100mg hydro- cortisone and 2mL solvent	Injection Set	2 sets
<i>or</i>			

<i>Name of Pharmaceutical Benefit</i>	<i>Strength and Volume</i>	<i>Form</i>	<i>Maximum Quantity</i>
Hydrocortisone sodium succinate injection	Equivalent to 250mg hydrocortisone and solvent	Injection Set	1 set
<i>or</i> Dexamethasone sodium phosphate injection	Equivalent to 4 mg dexamethasone phosphate in 1mL	Ampoule	5
Lignocaine injection	100mg in 5mL	Ampoule	4
<i>or</i> Lignocaine injection I.M.	300mg in 3mL	Disposable syringe pack	1
Morphine sulphate injection	15mg in 1mL	Ampoule	5
<i>or</i> Morphine sulphate injection	30mg in 1mL	Ampoule	5
Morphine sulphate with atropine sulphate injection	15mg-600 micrograms in 1mL	Ampoule	5
Pethidine Injection BP	100mg in 2mL	Ampoule	5
Procaine Penicillin Injection BP	1.5g	Disposable syringe pack	10
Metoclopramide hydrochloride injection	10mg in 2mL	Ampoule	10
<i>or</i> Prochlorperazine injection	12.5mg in 1mL	Ampoule	10
<i>or</i>			

<i>Name of Pharmaceutical Benefit</i>	<i>Strength and Volume</i>	<i>Form</i>	<i>Maximum Quantity</i>
Thiethylperazine injection	6.5mg (base) in 1mL	Ampoule	10
Promethazine injection	50mg in 2mL	Ampoule	10
Terbutaline sulphate injection	100 micrograms in 1mL	Ampoule	5
<i>or</i>			
Terbutaline sulphate injection	500 micrograms in 1mL	Ampoule	5
Tetanus vaccine adsorbed	0.5mL	Ampoule	10
Verapamil Hydrochloride Injection BP	5mg in 2mL	Ampoule	5

NOTE: Only those brands of benefits listed in Section 2 (white pages) may be ordered on a Doctor's Bag Order Form.

SECTION 2 - SCHEDULE OF BENEFITS

SYMBOLS USED IN THE SCHEDULE

- (a) An asterisk (*) in front of a restriction indicates an additional or amended purpose in this issue.
- (b) A double dagger (‡) in the maximum quantity column indicates an item for which the maximum quantity has been specially determined to correspond to the manufacturer's pack and the manufacturer's standard pack should be supplied.
- (c) A gauge sign (#) against the price of an item indicates that the product is not preconstituted.
- (d) Where a STATE is indicated after the manufacturer's code, that brand may be available only in the State indicated. N.S.W. - (N); Vic. - (V); Qld. - (Q); S.A. - (S); W.A. - (W); Tas. - (T).

A straight line is drawn between entries for different forms and strengths of an item to indicate clearly the different restrictions which apply to these various forms and strengths.

Attention is drawn to paragraph 15(e) of the explanatory notes which provides for endorsement by the prescribing doctor of prescriptions for pharmaceutical benefits with the words "specified purpose". Abbreviations such as "Spec. Purp." or "S.P." will be accepted.

Except where otherwise indicated, the maximum quantity and/or number of repeats in respect of an item shown in the Schedule may be varied by the Director of Health when issuing an authority prescription (Form PB86) or an authority to prescribe (Form PB15). The quantity and number of repeats shown on the authority shall be supplied. (See paragraphs 31 and 32 of Section 1 - Explanatory Notes (Lemon pages)).

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
ACETAZOLAMIDE					
Tablet 250mg	50	6	8.16	Diamox	LE
Capsule 500mg (sustained release)	50	3	14.66	Diamox	LE
Injection 500mg (solvent required)	1	..	8.64	Diamox	LE
ACETYLCYSTEINE					
Bronchiectasis; Cystic fibrosis (mucoviscidosis).					
Solution 20%, 10mL	5	3	27.86	Mucomyst	MJ
ADRENALINE					
Eye Drops 0.5%, 7.5mL	#1	6	5.54	Epinal Eppy/N	AQ BF
0.5%, 10mL	#1	6	5.69	Epifrin	AG
1%, 7.5mL	#1	6	5.89	Epinal Eppy/N	AQ BF
1%, 10mL	#1	6	6.02	Epifrin Glaucan	AG AQ
2%, 7.5mL	#1	6	7.36	Eppy/N	BF
2%, 10mL	#1	6	9.32	Epifrin Glaucan	AG AQ
Injection BP 1mg in 1mL (1 in 1,000)	5	1	3.97	BL,SI	
ALLOPURINOL					
Tablet 100mg	100	5	7.13 7.19	Alinol Progout Zyloprim	US PT BW
300mg	30	5	6.92 6.98	Alinol Progout Zyloprim	US PT BW
Capsule 100mg	100	5	7.13	Capurate-100	FM
300mg	30	5	6.92	Capurate-300	FM
ALOXIPRIN					
Tablet 600mg	100	2	4.93	Palaprin Forte	NS

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
ALPRENOLOL Tablet 100mg	100	2	9.92	Aptin Betacard	AP BR
ALUMINIUM HYDROXIDE Mixture 320mg per 5mL, 500mL	≠1	4	4.81	Alusorb Amphojel Gelox	DH WY PR
ALUMINIUM HYDROXIDE DRIED Tablet 300mg	100	2	4.46	Actal Amphotabs	WL WY
ALUMINIUM HYDROXIDE with KAOLIN Mixture 137mg-1g per 5mL, 375mL	≠1	2	4.39	Kaogel Kaomagma	FA WY
ALUMINIUM HYDROXIDE with MAGNESIUM HYDROXIDE Tablet 300mg-90mg	100	2	4.46	Aludrox	WY
200mg-200mg	100	2	4.46	Mylanta	PD
Mixture 300mg-100mg per 5mL, 500mL	≠1	4	4.81	Aludrox	WY
Suspension 215mg-80mg per 5mL, 500mL	≠1	4	4.81	Simeco	WY
200mg-200mg per 5mL, 500mL	≠1	4	4.81	Alucone Gelusil Mylanta Sodexol	DH WW PD SC
ALUMINIUM HYDROXIDE with MAGNESIUM HYDROXIDE and OXETHAZAINE Suspension 306mg-97.5mg-10mg per 5mL, 500mL	≠1	4	4.81	Mucaine	WY
ALUMINIUM HYDROXIDE with MAGNESIUM TRISILICATE and MAGNESIUM HYDROXIDE Tablet 250mg-120mg-120mg	100	2	4.46	Gastrogel	FM
Mixture 250mg-120mg-120mg per 5mL, 500mL	≠1	4	4.81	Gastrogel	FM
ALUMINIUM HYDROXIDE and MAGNESIUM CARBONATE CO-DRIED GEL Tablet 375mg	100	2	4.46	Almacarb Simeco	GL WY

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
ALUMINIUM SODIUM SILICATE Powder 100g	≠1	2	4.46	Neutralon	SC
AMANTADINE HYDROCHLORIDE Parkinson's disease which is not drug induced.					
Capsule 100mg	100	5	21.94 22.02	Antadine Symmetrel	DT CG
AMBENONIUM CHLORIDE Tablet 10mg	100	2	11.02	Mytelase	WL
AMILORIDE <u>NOTE</u> : Supplementary potassium may cause fatal hyperkalaemia.					
Tablet 5mg	50	2	5.14	Midamor	MK
AMINACRINE HYDROCHLORIDE Eye Drops 3mg in 15mL	≠1	2	4.33	Aminopt	SI
AMINO ACID FORMULA with VITAMINS and MINERALS without PHENYLALANINE Phenylketonuria.					
Powder 200g	5	5	143.18	Maxamaid XP	SJ
AMINO ACID FORMULA without PHENYLALANINE Phenylketonuria.					
Powder 250g	2	5	160.93	PK AID I	SJ
250g	2	5	196.73	PK AID II	SJ
Food Supplement Powder 500g	≠1	5	125.41	Aminogran F.S.	GL
AMINOCAPROIC ACID Treatment in hospital of severe haemorrhage associated with excessive fibrinolysis.					
Oral Solution 250mg per mL, 20mL	10	..	19.21	Ekaprol	DF
Injection I.V. 250mg per mL, 10mL	10	..	11.02	Ekaprol	DF

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
AMINOPHYLLINE				
Tablet 100mg	100	2	4.16	Cardophyllin HA
Oral Liquid 105mg per 5mL, 500mL	≠1	4	4.93	Somophyllin FC
Injection I.V. 250mg in 10mL	5	..	5.28	BT,SI
I.M. 500mg in 2mL	5	..	4.99	AB
Suppositories 100mg, 12	≠1	1	4.52	Cardophyllin HA
175mg, 12	≠1	1	4.52	Cardophyllin HA
250mg, 12	≠1	1	4.52	Cardophyllin HA
400mg, 12	≠1	1	4.52	Cardophyllin HA
AMIODARONE HYDROCHLORIDE				
<u>Authority required.</u>				
For the continuing treatment of severe refractory cardiac arrhythmias where treatment with amiodarone hydrochloride was initiated in a hospital.				
<u>CAUTION: Amiodarone hydrochloride has been reported to cause frequent and potentially serious toxicity.</u>				
Tablet 200mg	30	..	31.71	Cordarone X 200 RC
AMITRIPTYLINE				
Tablet 10mg	50	2	3.61 3.67	Amitrip PT Laroxyl RO Tryptanol MK
25mg	50	2	4.26 4.32	Amitrip PT Laroxyl RO Saroten NS Tryptanol MK
AMMONIUM CHLORIDE				
Tablet 500mg	100	3	5.14	FM
AMOXYCILLIN				
Lower urinary tract infection.				
Dispersible Tablet 3g	1	..	4.79	Amoxil BR Moxacin CS
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
AMOXYCILLIN - cont.					
Tablet 250mg	20	..	6.04	Amoxil	BR
Capsule 250mg	20	..	6.04	Amoxil Moxacin	BR CS
Powder for Syrup 125mg per 5mL, 100mL	≠1	1	#6.74	Amoxil Moxacin	BR CS
AMPHOTERICIN					
Tablet 100mg	50	..	9.44	Fungilin	SQ
Lozenge 10mg	20	1	4.33	Fungilin	SQ
Suspension 100mg per mL, 24mL	≠1	1	5.14	Fungilin	SQ
Injection 50mg (solvent required)	1	..	6.84	Fungizone	SQ
Cream 3%, 15g	≠1	1	4.59	Fungilin	SQ
Ointment 3%, 15g	≠1	1	4.59	Fungilin	SQ
AMPICILLIN					
Capsule 250mg	25	..	5.48 5.54	Ampicyn Austrapen Penbritin	PT CS BR
500mg	12	1	5.22 5.28	Ampicyn Austrapen Penbritin	PT CS BR
Powder for Syrup 125mg per 5mL, 100mL	≠1	..	#5.59 #5.66	Ampicyn Austrapen Penbritin	PT CS BR
250mg per 5mL, 100mL	≠1	..	#6.83 #6.89	Ampicyn Austrapen Forte Penbritin Forte	PT CS CS BR
Injection 250mg (solvent required)	5	1	6.59 6.66	Ampicyn Austrapen	PT CS
500mg (solvent required)	5	1	8.62 8.69	Ampicyn Austrapen	PT CS
1g (solvent required)	5	1	12.72 12.79	Ampicyn Austrapen	PT CS

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
AMYLOBARBITONE SODIUM Injection 500mg (solvent required)	2	..	7.35	Amytal Sodium LY
ANTAZOLINE with NAPHAZOLINE Eye Drops 10mL	#1	2	4.26	Antistine- Privine ZY
ANTIVENOM - RED BACK SPIDER Injection 500 Units	2	..	66.31	CS
ASCORBIC ACID Tablet 50mg	100	2	3.77	Ascorb "50" DH,FM PT
ASPIRIN Tablet 300mg	100	2	3.92	SI
300mg (dispersible)	100	2	3.98	Solprin FM RC
325mg (buffered)	100	2	4.42	Bufferin BC
650mg (enteric coated)	100	2	5.54	Ecotrin Rhusal SK GP
650mg (sustained release)	100	2	4.93	S.R.A. BT
650mg (includes 350mg sustained release)	100	2	4.67	Bi-Prin BT
ATENOLOL Hypertension.				
Tablet 50mg	30	2	9.98	Tenormin IC
ATROPINE METHONITRATE Tablet 1mg	50	2	5.96	Eumydrin WL
Oral Solution 0.6%, 15mL	#1	..	5.22	Eumydrin WL
ATROPINE SULPHATE Tablet 600 micrograms	100	2	4.24	FM
Injection 600 micrograms in 1mL	5	1	3.92	BL,BT
1.2mg in 1mL	5	1	3.94 3.96	BT BL
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
ATROPINE SULPHATE - cont. Eye Drops 0.5%, 15mL	≠1	2	4.39	Atropt SI
1%, 15mL	≠1	2	4.46	Atropt SI
Eye Ointment 1%, 4g	≠1	..	5.89	PD
AUROTHIOGLUCOSE Injection 50mg per mL, 10mL	1	..	61.76	Gold-50 SH
AZATADINE MALEATE Tablet 1mg	50	2	4.46	Zadine SH
Syrup 500 micrograms per 5mL, 100mL	≠1	4	3.84	Zadine SH
AZATHIOPRINE <u>Authority required.</u> Anaemia, autoimmune haemolytic; Arthritis, rheumatoid with vasculitis or visceral complications; Continuing azathioprine therapy initiated in a hospital; Crohn's disease; Dermatomyositis; Granulomatosis, Wegener's; Hepatitis, active, chronic; Lupus erythematosus, systemic; Nephrotic syndrome; Organ transplant; Pemphigus; Polyarteritis nodosa; Pyoderma gangrenosum; Scleroderma; Thrombocytopenic purpura; Ulcerative colitis.				
Tablet 50mg	100	..	56.31	Imuran BW
BACLOFEN Spasticity due to multiple sclerosis or spinal cord lesions.				
Tablet 10mg	100	5	27.88	Lioresal CG
25mg	100	5	51.24	Lioresal CG

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
BASSORIN with FRANGULA BARK For use by paraplegic and quadriplegic patients; For use by patients who are receiving long-term extensive nursing care in hospitals and nursing homes; For use by patients for whose care a Commonwealth Domiciliary Nursing Care Benefit is approved.				
Granules 47.3%-8.3%, 250g	¶1	2	6.39	Granocol SC
BECLOMETHASONE DIPROPIONATE Chronic intractable asthma.				
Capsule 100 micrograms (Oral Inhalation)	100	2	11.58	Becotide Rotacaps GL
Inhalation, metered aerosol spray, 50 micrograms per dose (200 dose)	¶1	2	9.92	Aldecin SH Becotide GL
<u>NOTE:</u> No authorities will be granted for increased maximum quantities of beclomethasone metered aerosol spray.				
BELLADONNA ALKALOIDS Hyoscyamine Hydrobromide, Atropine Sulphate and Hyoscine Hydrobromide				
Tablet 101.1 micrograms-14.8 micrograms-10.7 micrograms	100	2	4.16	Atrobel FM
Tablet 151.6 micrograms-22.2 micrograms-16.0 micrograms	100	2	4.26	Atrobel FORTE FM
Hyoscyamine Sulphate, Atropine Sulphate and Hyoscine Hydro- bromide				
Tablet 103.7 micrograms-19.4 micrograms-6.5 micrograms	100	2	4.16	Donnatab RS
BENDROFLUAZIDE Tablet 2.5mg (continued)	50	2	4.06 4.12	Benzide M PT Aprinox-M BT

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
BENDROFLUAZIDE - cont. Tablet 5mg	50	2	4.93 4.99	Benzide PT Aprinox BT
BENZALKONIUM CHLORIDE Solution 10%, 125mL	¶1	..	4.52	Zephiran Con- centrated WL
BENZATHINE PENICILLIN COMPOUND Benzathine Penicillin 450mg; Procaine Penicillin 300mg; Benzylpenicillin Potassium 187mg. Injection set containing 1 vial and 2mL water for injections	1	..	4.73	Bicillin All-Purpose WY
BENZHEXOL CAUTION: Long term use with major tranquillisers increases the risk of tardive dyskinesia.				
Tablet 2mg	100	2	5.14 5.22	Anti-Spas PT Artane LE
5mg	100	2	6.47 6.49	Anti-Spas PT Artane LE
BENZOCAINE with ADRENALINE Compound Ointment 50g	¶1	1	4.39	Rectinol GP
Compound Suppositories, 12	¶1	1	4.39	Rectinol GP
BENZOYL METRONIDAZOLE Suspension 6.4% (equivalent to 200mg metronidazole in 5mL), 100mL	¶1	..	7.62	Flagyl S MB
BENZTROPINE CAUTION: Long term use with major tranquillisers increases the risk of tardive dyskinesia. NOTE: An authority to prescribe may be granted to provide up to six months' oral therapy for the treatment of non-drug-induced parkinsonism only.				
Tablet 2mg	30	2	4.46	Cogentin MK
Injection 2mg in 2mL	5	..	9.32	Cogentin MK

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
BENZYL BENZOATE Application 25% w/v, 200mL	≠1	2	4.79 4.87	Benzemul MG Ascabiol MB
BENZYL PENICILLIN Injection 300mg (solvent required)	5	1	5.62	CS
600mg (solvent required)	5	1	5.76	Crystapen GL CS
3g (solvent required)	10	..	24.61	Crystapen GL CS
6g (solvent required)	10	..	32.93	CS
BETAMETHASONE Tablet 500 micrograms	30	2	3.97	Celestone SH
BETAMETHASONE ACETATE with BETAMETHASONE SODIUM PHOSPHATE Alopecia areata; For local intra-articular or peri-articular infiltration; Granulomata dermal; Keloid; Lichen planus hypertrophic; Lichen simplex chronicus; Lupus erythematosus, chronic discoïd; Necrobiosis lipoidica; Uveitis.				
Injection 3mg-3.9mg (equivalent to 5.7mg betamethasone) in 1mL	5	.	12.04	Celestone SH Chronodose
BETAMETHASONE DIPROPIONATE Cream 0.05%, 15g	≠1	1	3.79	Diprosone SH
Ointment 0.05%, 15g	≠1	1	3.79	Diprosone SH
BETAMETHASONE VALERATE Cream 0.02%, 100g	≠1	..	4.73	Betnovate 1/5 GL Celestone-M SH
0.05%, 15g	≠1	1	3.79	Betnovate 1/2 GL Celestone-V Half Strength SH
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
BETAMETHASONE VALERATE - cont.				
Gel 0.05%, 15g	#1	1	3.79	Betnovate 1/2 GL
Ointment 0.02%, 100g	#1	..	4.73	Celestone-M SH
0.05%, 15g	#1	1	3.79	Betnovate 1/2 GL Celestone-V Half Strength SH
BETHANECHOL				
Tablet 10mg	50	1	5.66	Urecholine MK Uro-Carb HA
Injection 5mg in 1mL	2	..	4.81	Urecholine MK
BIPERIDEN				
<u>CAUTION:</u> Long term use with major tranquillisers increases the risk of tardive dyskinesia.				
Tablet 2mg	100	2	8.01	Akineton KN
Injection 5mg in 1mL	5	..	4.99	Akineton KN
BISACODYL				
For use by paraplegic and quadriplegic patients; For use by patients who are receiving long-term extensive nursing care in hospitals and nursing homes; For use by patients for whose care a Commonwealth Domiciliary Nursing Care Benefit is approved.				
Tablet 5mg	100	2	4.61	Bisalax PT
Suppositories 10mg, 10	#1	..	4.94	Durolax BY
BROMOCRIPTINE MESYLATE				
<u>NOTE:</u> The possibility of pituitary tumour should be kept under review, particularly in pregnancy.				
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
BROMOCRIPTINE MESYLATE - cont. <u>Authority required.</u> Acromegaly, prior to surgery or radiotherapy or where surgery or radiotherapy is inappropriate; Parkinson's disease where treatment with levodopa is unsatisfactory; Pathological hyperprolactinaemia where appropriate surgery or radiotherapy is not indicated or has already been used with incomplete resolution.				
Tablet 2.5mg	60	..	31.11	Parlodel SZ
Capsule 10mg	100	..	182.87	Parlodel SZ
BROMPHENIRAMINE Tablet 4mg	50	2	4.16	Dimetane RS
Syrup 2mg per 5mL, 100mL	#1	4	3.84	Dimetane' RS
BUMETANIDE Tablet 1mg	50	2	4.93	Burinex AP
BUSULPHAN Tablet 2mg	100	..	24.53	Myleran BW
CALCITRIOL <u>Authority required.</u> Hypocalcaemia due to renal disease; Hypoparathyroidism.				
Capsule 0.25 micrograms	100	..	43.44	Rocaltrol RO
CALCIUM <u>Authority required.</u> Hypocalcaemia; Osteoporosis; Proven malabsorption. <u>NOTE:</u> An authority will be limited to the maximum quantity and repeats shown in this schedule.				
Compound Effervescent Tablet equivalent to 1g (25mmol) Ca ²⁺ <u>NOTE:</u> Each 'Sandocal 1000' tablet also contains 18mmol Na ⁺ .	30	5	8.43	Sandocal 1000 SZ

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
CALCIUM FOLINATE <u>Authority required.</u> Antidote to folic acid antagonists. NOTE: Each authority will be limited to a maximum of 20 tablets; repeats will not be authorised.				
Tablet 15mg	10	..	104.73	Leucovorin LE
Antidote to folic acid antagonists.				
Injection 3mg in 1mL	5	..	16.19	BL
CALCIUM GLUCONATE Injection 10%, 10mL	5	1	7.19	Calcium- Sandoz SZ
CAMPBOR COMPOUND Linctus 0.06% camphor, 100mL	≠1	2	3.84 3.87 3.91 3.98	MG Camphorlinct DH SI NN,TO PR,QE(NQ)
CAPTOPRIL <u>Authority required.</u> *Severe refractory hypertensive disease; For the continuing treatment of severe refractory cardiac failure where treatment with captopril was initiated in a hospital.				
CAUTION: Neutropenia and proteinuria have been reported. Regular white cell and urine checks are advisable.				
Tablet 25mg	90	..	36.83	Capoten SQ
50mg	90	..	61.17	Capoten SQ
CARBACHOL Eye Drops 0.75%, 15mL	≠1	6	4.81	AQ
1.5%, 15mL	≠1	6	4.87	AQ
3%, 15mL	≠1	6	4.99	AQ

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
CARBAMAZEPINE					
Tablet 100mg	200	2	11.62	Tegretol	CG
200mg	200	2	19.49 19.56	Convuline Tegretol	PT CG
CARBENICILLIN					
Infections where positive bacteriological evidence confirms that carbenicillin is the most appropriate therapeutic agent; Septicaemia, suspected or proven.					
Injection 1g (solvent required)	5	..	21.67	Carbapen	CS
5g (solvent required)	6	..	104.64	Carbapen	CS
CARBIMAZOLE					
Tablet 5mg	100	2	5.22	Neo-Mercazole	NS
CARINDACILLIN					
<u>Authority required.</u>					
Urinary tract infections where positive bacteriological evidence confirms that carindacillin or carbenicillin is the most appropriate therapeutic agent.					
Tablet (equivalent to 382mg carbenicillin)	40	..	27.92	Geopen Oral	PF
CEPHALEXIN					
<u>Authority required.</u>					
Infections where both clinical and bacteriological evidence suggest that cephalexin is the most appropriate therapeutic agent.					
Capsule 250mg	25	..	13.14	Keflex	LY
500mg	12	..	12.74	Keflex	LY
Granules for Syrup					
125mg per 5mL, 100mL	#1	..	#9.36	Keflex	LY
250mg per 5mL, 100mL	#1	..	#13.79	Keflex	LY

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
CEPHALOTHIN SODIUM Infections where positive bacteriological evidence confirms that cephalothin sodium is the most appropriate therapeutic agent; *Septicaemia, suspected or proven.				
Injection 1g (solvent required)	5	.	25.03	Ceporacin GL Keflin LY Neutral
2g (solvent required)	1	..	11.54	Keflin LY Neutral
4g (solvent required)	1	..	19.93	Keflin LY Neutral
CEPHAZOLIN SODIUM Infections where positive bacteriological evidence confirms that cephalazolin sodium is the most appropriate therapeutic agent; *Septicaemia, suspected or proven.				
Injection 500mg (solvent required)	5	..	23.03	Kefzol LY
1g (solvent required)	5	..	41.83	Kefzol LY
CEPHRADINE <u>Authority required.</u> Infections where both clinical and bacteriological evidence suggest that cephradine is the most appropriate therapeutic agent.				
Capsule 250mg	25	..	13.16	Velosef SQ
500mg	12	..	12.74	Velosef SQ
Powder for Syrup 125mg per 5mL, 100mL	#1	..	#9.36	Velosef SQ
250mg per 5mL, 100mL	#1	..	#13.79	Velosef SQ
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
CEPHRADINE - cont. Infections where positive bacteriological evidence confirms that cephadrine is the most appropriate therapeutic agent; *Septicaemia, suspected or proven.				
Injection 500mg (solvent required)	5	..	18.59	Velosef SQ
1g (solvent required)	5	..	32.94	Velosef SQ
CHLORAL HYDRATE Capsule 500mg	50	..	4.46	Noctec SQ
Mixture 250mg per 5mL, 500mL	#1	4	4.52	Dormel DH
1g per 10mL, 200mL	#1	4	4.26	Chloralix RK Elix-Nocte Forte NN Noctec Syrup SQ
CHLORAMBUCIL <u>Authority required.</u> Anaemia, autoimmune, haemolytic; Arthritis, rheumatoid with vasculitis or visceral complications; Carcinoma of the breast; Carcinoma of the ovary; Continuing chlorambucil therapy initiated in a hospital; Granulomatosis, Wegener's; Leukaemia, chronic lymphatic; Lupus erythematosus, systemic; Lymphoma; Myeloproliferative disorders; Polyarteritis nodosa; Scleroderma; Thrombocytopenic purpura.				
Tablet 2mg	100	..	49.37	Leukeran BW
5mg	100	..	59.65	Leukeran BW

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
CHLORAMPHENICOL Bacterial meningitis; Rickettsioses; Intraocular infections; Typhoid; Other serious infections where positive bacteriological evidence confirms that chloramphenicol is the ONLY appropriate antibiotic. <u>CAUTION:</u> Chloramphenicol may cause aplastic anaemia.				
Capsule 250mg	16	..	5.28	Chloromycetin PD
Paediatric Suspension 125mg per 5mL, 100mL	≠1	..	5.42	Chloromycetin Palmitate PD
Injection 1g (solvent required)	3	..	16.86	Chloromycetin Succinate PD
CHLORAMPHENICOL <u>CAUTION:</u> Topical chloramphenicol may cause aplastic anaemia.				
Ear Drops (aqueous) 0.5%, 5mL	≠1	2	4.33	Chloromycetin PD
Eye Drops 0.5%, 10mL	≠1	2	4.33	Chlomin US Chloromycetin PD Chloroptic AG Chlorsig SI
Eye Ointment 1%, 4g	≠1	..	4.06	Chlomin US Chloromycetin PD Chlorsig SI
CHLORAMPHENICOL with POLYMYXIN B <u>CAUTION:</u> Topical chloramphenicol may cause aplastic anaemia.				
Eye Drops 5mg-5,000 Units per mL, 10mL	≠1	2	4.33	Chloromyxin PD
Eye Ointment 1%-5,000 Units per g, 4g	≠1	..	4.06	Chloromyxin PD
CHLORHEXIDINE Solution 5%, 200mL	≠1	1	5.14	Hibitane Concentrate IC

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
CHLORMETHIAZOLE <u>Authority required.</u> Short-term alcohol or drug withdrawal therapy in a hospital or approved centre; Status epilepticus. <u>CAUTION:</u> The risk of drug dependence is high.					
<u>NOTE:</u> No authorities will be granted for increased maximum quantities and/or repeats of chlormethiazole capsules.					
Capsule 192mg	50	..	8.29	Hemineurin	AP
Short-term alcohol or drug withdrawal therapy in a hospital or approved centre; Status epilepticus. <u>CAUTION:</u> The risk of drug dependence is high.					
Solution 0.8% for I.V. Infusion, 500mL	1	..	14.08	Hemineurin	AP
CHLOROQUINE Tablet equivalent to 150mg (approx.) Chloroquine base	100	..	6.43 6.49	Chlorquin Nivaquine	PT MB
Injection 40mg per mL, 5mL	5	1	7.18	Nivaquine	MB
CHLOROTHIAZIDE Tablet 500mg	50	2	5.14 5.23	Diuret Azide Chlotride Diurone	PT FM FR US
CHLORPHENIRAMINE Tablet 4mg	50	2	4.31 4.33	Allergex Chloramin Piriton	PT LF GL

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
CHLORPROMAZINE Chorea; Hyperactive states of organic or toxic delirium; Malignant neoplasia (late stage); Radiation sickness; Severe conduct disorders of children; Major psychoses including:- Major organic psychoses includ- ing arteriopathic dementia; Manic depressive psychosis; Paranoid states; Schizophrenia; Senile dementia.					
Tablet 10mg	100	1	4.17 4.18	Protran Largactil	PT MB
25mg	100	1	4.31 4.33	Protran Largactil	PT MB
50mg	100	1	5.28	Largactil Protran	MB PT
100mg	100	1	7.32	Largactil Protran	MB PT
Mixture 25mg per 5mL, 100mL	≠1	4	4.06	Largactil Promacid	MB US
Injection BP, 25mg in 1mL	10	..	5.54	Largactil	MB
50mg in 2mL	10	..	5.69	Largactil	MB
Suppositories 100mg, 5	≠1	1	4.33	Largactil	MB
CHLORPROPAMIDE Tablet 250mg	100	2	8.07 8.14	Promide Diabinese	PT PF
CHLORTETRACYCLINE Cream 3%, 15g	≠1	..	4.16	Aureomycin	LE
Ointment 3%, 15g	≠1	..	4.16	Aureomycin	LE
CHLORTHALIDONE Tablet 25mg	50	2	4.52 4.59	Urid Hygroton	PT CG

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
CHOLERA VACCINE Injection 1mL	2	..	5.75	CS
CHOLESTYRAMINE <u>Authority required.</u> Bile salt malabsorption associated with ileal resection or proven ileal disease; Pruritus associated with partial biliary obstruction not respond- ing to other therapy; Hypercholesterolaemia. <u>NOTE:</u> Hypercholesterolaemia means an initial fasting serum cholesterol level of at least 6.5mmol/L following dietary therapy for three months. An authority for a second or subsequent course (up to six months) of treatment for hyper- cholesterolaemia will be granted only where there is a fall in serum cholesterol since commence- ment of cholestyramine therapy. Not all patients will benefit from cholestyramine. A significant fall in serum cholesterol indicates a positive response. Attention to compliance is essential. Serum cholesterol levels are an aid to monitoring compliance. Cholestyramine may affect the absorption of other medication. Cholestyramine is preferred to clofibrate if fasting serum tri- glyceride is less than 3mmol/L. Powder, 9g sachet (equivalent to 4g cholestyramine), 50	2	..	45.81	Questran MJ
CHOLINE THEOPHYLLINATE Tablet 100mg	100	2	4.99	Choledyl WW
200mg	100	2	5.39	Brondecon-PD PD Choledyl WW
Elixir 50mg per 5mL, 500mL	≠1	4	4.67	Brondecon PD Elixir-PD PD
Syrup 50mg per 5mL, 500mL	≠1	4	4.67	Choledyl WW

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
CHOLINE THEOPHYLLINATE with GUAIPHENESIN Tablet 200mg-100mg	100	2	5.54	Brondecon	WW
Elixir 50mg-25mg per 5mL, 500mL	≠1	4	4.81	Brondecon	WW
CIMETIDINE <u>Authority required.</u> Duodenal ulcer, confirmed by radiology, endoscopy or surgery. <u>NOTE:</u> Initial application for authority must state the date of barium meal, endoscopy or surgery. Increased maximum quantities and/or repeats will not be authorised for duodenal ulcer.					
<u>Authority required.</u> Zollinger-Ellison syndrome, proven by investigation.					
Tablet 200mg	120	2	40.67	Duractin Tagamet	CS SK
400mg	60	2	40.67	Duractin Tagamet	CS SK
<u>Authority required.</u> Gastric ulcer, confirmed by radiology, endoscopy or surgery. <u>NOTE:</u> Applications for authority must state the date of barium meal, endoscopy or surgery (procedure must have been within three months of application). Not more than 240 (200mg) or 120 (400mg) tablets will be available on authority for each proven episode of benign gastric ulceration. Increased maximum quantities and/or repeats will not be authorised.					
Tablet 200mg	120	1	40.67	Duractin Tagamet	CS SK
400mg	60	1	40.67	Duractin Tagamet	CS SK

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
CLINDAMYCIN				
Gram-positive coccal infections where these cannot be safely and effectively treated with a penicillin.				
Capsule 75mg	25	..	6.33	Dalacin C UP
150mg	25	..	9.44	Dalacin C UP
Granules for Syrup 75mg per 5mL, 100mL	#1	..	#8.66	Dalacin C UP
CLIOQUINOL				
Cream 1%, 30g	#1	..	4.12	Vioform CG
CLOFIBRATE				
<u>Authority required.</u>				
Hypertriglyceridaemia.				
NOTE: Hypertriglyceridaemia means an initial fasting serum triglyceride level of at least 4mmol/L following dietary therapy for three months. An authority for a second or subsequent course (up to six months) of treatment for hypertriglyceridaemia will be granted only where there is a fall of at least 1mmol/L in serum triglyceride since commencement of clofibrate therapy.				
<u>Authority required.</u>				
Hypercholesterolaemia.				
NOTE: Hypercholesterolaemia means an initial fasting serum cholesterol level of at least 6.5mmol/L following dietary therapy for three months. An authority for a second or subsequent course (up to six months) of treatment for hypercholesterolaemia will be granted only where there is a fall in serum cholesterol since commencement of clofibrate therapy.				
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
CLOFIBRATE - cont.				
Not all patients will benefit from clofibrate. A significant fall in serum cholesterol indicates a positive response. Attention to compliance is essential. Serum cholesterol levels are an aid to monitoring compliance.				
Clofibrate is preferred to cholestyramine and colestipol if fasting serum triglyceride is greater than 3mmol/L.				
<u>CAUTION:</u> Use of this drug is associated with an increased incidence of cholelithiasis.				
Capsule 500mg	100	..	11.49 11.56	Arterioflexin PT Atromid-S IC
CLONAZEPAM				
Tablet 500 micrograms	200	2	9.57	Rivotril RO
2mg	200	2	14.22	Rivotril RO
Paediatric Drops				
2.5mg in 1mL, 10mL	≠1	1	4.52	Rivotril RO
Injection 1mg in 2mL (set containing solution 1mg in 1mL and 1mL diluent)	5	..	5.43	Rivotril RO
CLONIDINE				
Tablet 150 micrograms	100	2	10.06	Catapres BY
Injection 150 micrograms in 1mL	5	..	5.89	Catapres BY
CLOPAMIDE				
Tablet 20mg	50	2	5.69	Brinaldix SZ
CLOREXOLONE				
Tablet 10mg	50	2	4.52	Nefrolan MB
25mg	50	2	4.93	Nefrolan MB

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
CLOTRIMAZOLE					
Cream 1%, 20g	#1	1	5.53	Lotremin	SH
			5.54	Canesten	BN
Lotion 1%, 20mL	#1	1	5.54	Canesten	BN
Pessaries 100mg, 6	#1	..	6.27	Gyne-Lotremin	SH
			6.29	Canesten	BN
Pessary 500mg	1	..	6.29	Canesten 1	BN
Vaginal Cream 1%, 35g	#1	..	6.23	Gyne-Lotremin	SH
			6.24	Canesten	BN
2%, 20g	#1	..	6.24	Canesten 3	BN
CLOXACILLIN					
<u>Authority required.</u>					
Infections due to penicillin-resistant staphylococci; Osteomyelitis.					
Capsule 250mg	25	..	10.81	Austrastaph Orbenin	CS BR
500mg	12	..	10.51	Austrastaph Orbenin	CS BR
Powder for Syrup 125mg per 5mL, 100mL	#1	..	#9.09	Austrastaph Orbenin	CS BR
CLOXACILLIN					
Injection 250mg (solvent required)	5	..	9.32	Austrastaph Orbenin	CS BR
500mg (solvent required)	5	..	13.34	Austrastaph Orbenin	CS BR
1g (solvent required)	5	..	20.91	Austrastaph Orbenin	CS BR
CODEINE PHOSPHATE					
Tablet 30mg	25	..	5.94	Codate DH,FA,FM	US
Linctus 0.5%, 100mL	#1	2	4.44	MG	
			4.47	Codelix	DH
			4.51	Codlin	NN
			4.52	Actacode PR,QE(NQ)	SI

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
CODEINE PHOSPHATE with ASPIRIN <u>Authority required.</u> Disabling pain associated with proven malignant neoplasia.				
Tablet 30mg-325mg	100	..	9.85	Codral Forte BW
CODEINE PHOSPHATE with ASPIRIN Tablet Soluble 8mg-300mg	50	2	4.06	Aspalgin FM
8mg-500mg	50	2	4.06	Solcode RC
CODEINE PHOSPHATE with PARACETAMOL Tablet 8mg-500mg	50	1	4.13	Codalgin FM Dymadon Co. BW Panamax Co. WL
COLCHICINE Tablet 500 micrograms	100	2	5.26	Colgout PT DH, PR, RT
			5.32	Coluric NN
COLESTIPOL HYDROCHLORIDE <u>Authority required.</u> Hypercholesterolaemia. NOTE: Hypercholesterolaemia means an initial fasting serum cholesterol level of at least 6.5mmol/L following dietary therapy for three months. An authority for a second or subsequent course (up to six months) of treatment for hypercholesterolaemia will be granted only where there is a fall in serum cholesterol since commencement of colestipol therapy. Not all patients will benefit from colestipol. A significant fall in serum cholesterol indicates a positive response. Attention to compliance is essential. Serum cholesterol levels are an aid to monitoring compliance. Colestipol may affect the absorption of other medication. Colestipol is preferred to clofibrate if fasting serum triglyceride is less than 3mmol/L. (continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
COLESTIPOL HYDROCHLORIDE - cont. Sachets 5g, 120	#1	..	36.83	Colestid UP
COLISTIN Gram-negative infections where NO other drug is effective; Pyocyanus infection.				
Injection 150mg (solvent required)	5	..	71.78	Coly-Mycin WW
COLISTIN with NEOMYCIN Ear Drops 3mg-3.3mg per mL, 10mL	#1	2	4.18	Coly-Mycin WW
COPPER SULPHATE Diagnostic Compound Tablets, 36	2	3	4.95	Clinitest AM
CORTISONE ACETATE Tablet 5mg	50	1	4.52	Cortate PT
25mg	30	2	5.54	Cortate PT
CYANOCOBALAMIN Pernicious anaemia and other proven vitamin B12 deficiencies (post-gastrectomy treatment; subacute combined degeneration of the cord).				
Injection 100 micrograms in 1mL	5	1	5.01	Cytamen 100 GL
1mg in 1mL	5	..	5.37	Cytamen 1000 GL
CYCLOPENTHIAZIDE Tablet 500 micrograms	50	2	4.99	Navidrex CG
CYPROHEPTADINE Prevention of migraine.				
Tablet 4mg	100	2	6.63	Periactin FR
CYPROHEPTADINE Tablet 4mg	50	2	4.38	Periactin FR
CYTARABINE Injection set containing 100mg and 5mL solvent	10	1	84.93	Cytosar-U UP

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
DANAZOL <u>Authority required.</u> Endometriosis, visually proven; Hereditary angio-oedema.					
Capsule 200mg	100	..	125.68	Danocrine	WL
DANTROLENE SODIUM <u>Authority required.</u> Treatment of chronic spasticity. <u>CAUTION:</u> Dose related hepatotoxicity has been reported.					
Capsule 25mg	100	..	20.82	Dantrium	NW
50mg	100	..	31.38	Dantrium	NW
DAPSONE Tablet 100mg	100	2	5.14	Avlosulfon	IC
DEBRISOQUINE Tablet 10mg	100	2	7.11 7.17	Redu-Press M Declinax	PT RO
20mg	100	2	8.82 8.88	Redu-Press Declinax	PT RO
DEMECLOCYCLINE HYDROCHLORIDE <u>Authority required.</u> Syndrome of inappropriate antidiuretic hormone secretion, which is not drug induced.					
Capsule 150mg	100	..	20.13	Ledermycin	LE
DESIPRAMINE Tablet 25mg	50	2	5.83	Pertofran	CG
DESMOPRESSIN <u>NOTE:</u> For use in the treatment of cranial diabetes insipidus only.					
Nasal Solution 100 micrograms per mL, 2.5mL	5	2	124.03	Minirin	PT
DEXAMETHASONE For use in a hospital.					
Injection 120mg in 5mL	1	..	34.16	Decadron Shock Pak	MK
(continued)					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
DEXAMETHASONE - cont. Tablet 500 micrograms	30	2	4.39 4.46	Dexamethsone PT Oradexon OR
4mg	30	1	8.97	Dexamethsone PT
Injection 4mg in 1mL	5	..	10.33	Decadron MK
5mg in 1mL	5	..	13.06	Oradexon OR
8mg in 2mL	5	..	15.79	Decadron MK
Eye Drops 0.1%, 5mL	≠1	2	5.08	Maxidex AQ
DEXAMETHASONE with FRAMYCETIN and GRAMICIDIN				
Ear Drops 500 micrograms 5mg-50 micrograms per mL, 8mL	≠1	2	4.33	Sofradex RL
Ear Ointment 500 micrograms-5mg- 50 micrograms per g, 5g	≠1	2	4.18	Sofradex RL
DEXAMPHETAMINE <u>Authority required.</u> Hyperkinetic brain damage syndrome in children; Narcolepsy.				
Tablet 5mg	100	..	5.87	SI
DEXCHLORPHENIRAMINE Tablet 2mg	50	2	4.16	Polaramine SH
DEXTRAN 40 See Intravenous Infusions				
DEXTRAN 70 See Intravenous Infusions				
DEXTROMORAMIDE Disabling pain associated with proven malignant neoplasia. <u>CAUTION:</u> The risk of drug dependence is high.				
Tablet 5mg	20	..	5.87	Palfium FA
Injection 5mg in 1mL	10	..	10.76	Palfium FA
Suppositories 10mg, 10	≠1	..	11.87	Palfium FA

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
DIAZEPAM					
Tablet 2mg	50	..	3.92	Ducene Pro-Pam Valium	SU PT RO
5mg	50	..	4.18 4.26	Ducene Pro-Pam Valium	SU PT RO
Paediatric Syrup 2mg per 5mL, 100mL	≠1	..	4.46	Valium	RO
Injection 10mg in 2mL	5	..	5.06	Valium BL	RO
NOTE: Authorities for increased maximum quantities and/or repeats of DIAZEPAM will be granted only for the treatment of: Disabling spasticity; Malignant neoplasia (late stage).					
DIAZOXIDE					
Injection 300mg in 20mL	1	..	16.57	Hyperstat I.V.	SH
DICHLORPHENAMIDE					
Tablet 50mg	50	6	9.92	Daranide	MK
DICLOFENAC SODIUM					
Tablet 50mg (enteric coated)	50	2	7.62	Voltaren 50	CG
DIENOESTROL					
Cream 0.01%, 85g	≠1	1	4.52	ET	
DIFENOXIN HYDROCHLORIDE with ATROPINE SULPHATE					
Tablet 500 micrograms-25 micrograms	20	..	4.13	Lyspafen	PT
DIFLUNISAL					
Tablet 250mg	50	2	7.62	Dolobid	MK
DIGOXIN					
Tablet 62.5 micrograms	100	2	4.39	Lanoxin-PG	BW
250 micrograms	50	2	3.92	Lanoxin	BW
Oral Solution for Children 50 micrograms per mL, 100mL (continued)	≠1	2	8.13	Lanoxin	BW

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
DIGOXIN - cont. Injection BP 500 micrograms in 2mL	5	1	9.02	Lanoxin BW
DIHYDROCODEINE TARTRATE Linctus 0.19%, 100mL	≠1	2	3.71	Paracodin KN Rikodeine RK
DIHYDROERGOTAMINE Injection 1mg in 1mL	5	..	5.83	Dihydergot SZ
DIHYDROTACHYSTEROL <u>Authority required.</u> Hypoparathyroidism; Osteomalacia following gastrect- omy, severe steatorrhoea or renal failure; Vitamin D-resistant rickets.				
Capsule 125 micrograms	100	..	22.48	A.T.10 WL
DI- IODOHYDROXYQUINOLINE Compound Pessaries 100mg, 25	≠1	1	4.71	Floraquin SR
DILOXANIDE FUROATE Tablet 500mg	30	..	10.69	Furamide BT
DIMERCAPROL Injection 5%, 2mL	12	..	28.74	B.A.L. BT
DIMETHICONE For colostomy and ileostomy use; For use by paraplegic and quadriplegic patients; For use with surgical appliances.				
Cream 10%, 50g	≠1	..	3.64	Dermabase-S HA
10%, 75g	≠1	..	3.98	Silcon FA
Solution - See Colostomy and Ileostomy				
DIMETHINDENE Tablet 1mg	50	2	4.16	Fenostil ZY

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
DIOCTYL SODIUM SULPHOSUCCINATE with BISACODYL For use by paraplegic and quadriplegic patients; For use by patients who are receiving long-term extensive nursing care in hospitals and nursing homes; For use by patients for whose care a Commonwealth Domiciliary Nursing Care Benefit is approved.					
Suppositories 100mg-10mg, 5	2	..	5.19	Coloxyl	FM
DIPHENHYDRAMINE Capsule 50mg	50	2	4.18	Benadryl	PD
Paediatric Elixir 12.5mg per 5mL, 100mL	#1	4	3.84	Benadryl	PD
DIPHENOXYLATE HYDROCHLORIDE with ATROPINE SULPHATE Tablet 2.5mg-25 micrograms	20	..	4.13	Lomotil	SR
DIPHENYLPYRALINE Tablet 2.5mg	50	2	4.16	Histalert	RK
Paediatric Syrup 2.5mg per 5mL, 100mL	#1	4	3.84	Histalert	RK
DIPHThERIA ANTITOXIN Injection 10,000 Units	2	1	50.93	CS	
DIPHThERIA and TETANUS VACCINE, ADSORBED For immunisation of children up to the age of eight (8) years.					
Injection 0.5mL	3	..	7.08	CS	
DIPHThERIA and TETANUS VACCINE, ADSORBED, DILUTED FOR ADULT USE For immunisation of adults and children over the age of eight (8) years.					
Injection 0.5mL	3	..	7.08	CS	
DIPHThERIA, TETANUS and PERTUSSIS VACCINE, ADSORBED Injection 0.5mL	3	..	7.41	CS, PD	

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
DIPHTHERIA VACCINE, ADSORBED For immunisation of children up to the age of eight (8) years. Injection 0.5mL	2	1	6.05	CS
DIPHTHERIA VACCINE, ADSORBED, DILUTED FOR ADULT USE For immunisation of adults and children over the age of eight (8) years. Injection 0.5mL	2	..	5.91	CS
DIPIVEFRINE HYDROCHLORIDE Eye Drops 0.1%, 10mL	#1	6	9.07	Propine AG
DIPYRIDAMOLE <u>Authority required.</u> Biopsy proven glomerulonephritis; Mesangiocapillary renal disease; Renal allograft; Patients with cardiac valve prosthesis. Tablet 100mg	100	..	16.33	Dipramol PT
DISOPYRAMIDE Capsule 100mg	100	2	17.43	Norpace Rythmodan SR RL
150mg	100	2	22.42	Norpace Rythmodan SR RL
DOXEPIN Tablet 10mg	50	2	4.18	Quitaxon RC
25mg	50	2	5.11	Quitaxon RC
Capsule 10mg	50	2	4.18	Sinequan PF
25mg	50	2	5.11	Sinequan PF
DOXYCYCLINE Bronchiectasis in patients over the age of eight (8) years; Chronic bronchitis in patients over the age of eight (8) years; Severe acne. Tablet 50mg	25	5	7.52	Vibra-Tabs PF
(cont.)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
DOXYCYCLINE - cont.				
Tablet 100mg	7	..	5.28	Vibramycin PF
Capsule 100mg	7	..	5.22 5.28	Cyclidox Doxin PT GP
DYDROGESTERONE				
Authority required.				
Endometriosis, visually proven.				
Tablet 10mg	50	..	21.26	Duphaston ET
ECONAZOLE NITRATE				
Cream 1%, 20g	#1	1	5.54	Ecostatin SQ Pevaryl SK
Lotion 1%, 20mL	#1	1	5.54	Ecostatin SQ Pevaryl SK
Pessaries 150mg, 3	#1	..	6.29	Ecostatin SQ Pevaryl SK
Vaginal Cream 1.5%, 35g	#1	..	6.24	Ecostatin SQ
ECOTHIOPATE IODIDE				
Eye Drops				
0.03%, 1.5mg and 5mL solvent	#1	6	#8.28	Phospholine AY Iodide
0.06%, 3mg and 5mL solvent	#1	6	#8.43	Phospholine AY Iodide
0.125%, 6.25mg and 5mL solvent	#1	6	#8.55	Phospholine AY Iodide
0.25%, 12.5mg and 5mL solvent	#1	6	#8.69	Phospholine AY Iodide
ELECTROLYTE REPLACEMENT (ORAL)				
Powder for Solution, 40g sachet, 6	#1	..	5.19	Repalyte DH
ELECTROLYTE REPLACEMENT SOLUTION				
See Intravenous Infusions				
EPICILLIN				
Capsule 250mg	25	..	5.82	Dexacillin SQ
500mg	12	1	5.52	Dexacillin SQ
Powder for Syrup				
250mg per 5mL, 100mL	#1	..	#7.03	Dexacillin SQ

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
ERGOALCIFIEROL Hypocalcaemia; Hypoparathyroidism; Osteomalacia following gastrectomy, severe steatorrhoea or renal failure; Vitamin D-resistant rickets.				
Tablet 250 micrograms	100	2	7.03	Ostelin GL
Oral Solution 15mg (600,000 Units) in 1.5mL alcoholic solution	3	2	5.22	Sterogyl-15 RL
ERGOMETRINE MALEATE Tablet 200 micrograms	25	..	4.59	Ergotrate LY
Injection 250 micrograms in 1mL	5	..	4.33	BL
ERGOTAMINE TARTRATE Tablet 1mg	50	2	5.69	Lingraine WL
ERGOTAMINE TARTRATE with CAFFEINE Tablet 1mg-100mg	50	2	6.43	Cafergot SZ
ERGOTAMINE TARTRATE with CAFFEINE and CYCLIZINE HYDROCHLORIDE Tablet 2mg-100mg-50mg	50	2	6.43	Migral BW
ERGOTAMINE TARTRATE with CAFFEINE, ITOBARBITONE and BELLADONNA ALKALOIDS Suppositories 2mg-100mg-100mg-250 micrograms, 6	1	2	5.42	Cafergot PB SZ
ERGOTAMINE TARTRATE with CAFFEINE CITRATE and DIPHENHYDRAMINE HYDROCHLORIDE Capsule 1mg-100mg-25mg	50	2	6.43	Ergodryl PD
ERYTHROMYCIN Tablet 250mg	25	..	5.87	EMU-V UP
Capsule 125mg	25	..	4.87	Eryc FA
250mg	25	..	5.87	Eryc FA Ilocap LY

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
ERYTHROMYCIN ESTOLATE					
Paediatric Drops 100mg (base) per mL, 10mL	¶1	..	4.81	Ilosone	LY
Paediatric Suspension 125mg (base) per 5mL, 100mL	¶1	..	5.13	Eromycin Ilosone	DL LY
ERYTHROMYCIN ETHYLSUCCINATE					
Tablet 200mg (base)	25	..	5.26	EES Dulcet	AB
Granules for Paediatric Suspension 200mg (base) per 5mL, 100mL	¶1	..	#6.89	EES 200	AB
Injection I.M. 100mg (base) in 2mL	5	..	9.18	Erythrocin	AB
ERYTHROMYCIN GLUCEPTATE					
Infusion I.V. 1g (base)	1	..	14.43	Ilotycin	LY
ERYTHROMYCIN LACTOBIONATE					
Infusion I.V. 300mg (base)	5	..	23.38	Erythrocin	AB
1g (base)	1	..	14.43	Erythrocin	AB
ERYTHROMYCIN STEARATE					
Tablet 250mg (base)	25	..	5.87	Erythrocin	AB
Capsule 250mg (base)	25	..	5.83 5.87	E-Mycin Erythrocin	PT AB
Paediatric Suspension 125mg (base) per 5mL, 100mL	¶1	..	5.13	Erythrocin	AB
Suspension 250mg (base) per 5mL, 100mL	¶1	..	6.99	Erythrocin	AB
ETHACRYNIC ACID					
Patients hypersensitive to other oral diuretics.					
Tablet 50mg	50	2	7.88	Edecril	MK
ETHANOLAMINE OLEATE					
Injection 5%, 2mL	5	1	8.22	Ethamolin	GL
ETHINYLOESTRADIOL					
Tablet 10 micrograms	100	1	4.29	Estigyn	GL
20 micrograms	100	1	4.46	Estigyn Primogyn C	GL SC
50 micrograms	100	1	5.22	Estigyn	GL

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
ETHOSUXIMIDE Capsule 250mg	200	2	17.61	Zarontin PD
Paediatric Syrup 250mg per 5mL, 250mL	≠1	4	9.16	Zarontin PD
ETHYLNORADRENALINE Injection 2mg in 1mL	5	..	5.54	Bronkephrine WL
ETHYLOESTRENOL <u>Authority required.</u> Osteoporosis; Patients on long-term treatment with corticosteroids. <u>NOTE:</u> An authority for three months' treatment will be limited to the maximum quantity and repeats shown in this schedule.				
Tablet 2mg	100	1	14.36	Orabolin OR
ETHYNODIOL DIACETATE with ETHINYLOESTRADIOL Tablet 500 micrograms-50 micrograms, 21	2	2	5.15	Ovulen 0.5/50 SR
1mg-50 micrograms, 21	2	2	5.15	Ovulen 1/50 SR
Pack containing 21 tablets 500 micrograms-50 micrograms and 7 inert tablets	2	2	5.15	Ovulen 0.5/50 -28 SR
Pack containing 21 tablets 1mg- 50 micrograms and 7 inert tablets	2	2	5.15	Ovulen 1/50 -28 SR
ETHYNODIOL DIACETATE with MESTRANOL Tablet 500 micrograms-100 micrograms, 21	2	2	5.15	Ovulen 0.5 SR
1mg-100 micrograms, 21	2	2	5.15	Ovulen 1 SR
2mg-100 micrograms, 21	2	2	5.15	Ovulen 2 SR

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
ETRETINATE				
<u>Authority required.</u>				
Treatment initiated in a hospital of:-				
Darier's disease;				
Erythrokeratoderma;				
Pityriasis rubra pilaris;				
Severe congenital ichthyosis (lamellar, bullous and sex linked);				
Severe intractable psoriasis;				
Severe palmo-plantar keratoderma;				
*For the continuing treatment of a patient who has already received long-term (greater than six months) therapy with etretinate for a condition listed above (condition to be specified).				
<u>CAUTION:</u> This drug is a potent teratogen - pregnancy should be avoided for at least one year after cessation of therapy.				
Capsule 10mg	100	..	83.07	Tigason RO
25mg	100	..	189.69	Tigason RO
FENOTEROL HYDROBROMIDE				
<u>NOTE:</u> Oral preparations are generally less effective and produce more side effects than inhaled preparations.				
Tablet 2.5mg	100	2	7.42	Berotec BY
Elixir 2.5mg per 5mL, 300mL	#1	4	5.37	Berotec BY
Inhalation Solution for use in RESPIRATOR or NEBULISER 0.1%, 20mL	#1	2	5.94	Berotec BY
Inhalation, metered aerosol spray, 200 micrograms per dose (300 dose)	#1	5	6.66	Berotec BY
FERROUS AMINOACETOSULPHATE				
Paediatric Syrup 100mL	#1	4	3.92	Plesmet NN

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
FERROUS GLUCONATE					
Tablet 300mg	100	2	3.92	Fergon	WL
Paediatric Elixir 6%, 100mL	≠1	4	3.92	Fergon	WL
FERROUS SULPHATE DRIED					
Tablet 320mg (delayed release)	30	2	3.92	Slow-Fe	CG
350mg (sustained release)	30	2	3.81	Feritard	PT
			3.87	Ferro-Gradumets	AB
Capsule 320mg (delayed release)	30	2	3.92	Fespan	SK
FERROUS SULPHATE DRIED with FOLIC ACID					
Tablet 270mg-300 micrograms (delayed release)	30	2	3.92	Feritard Folic	PT
270mg-300 micrograms (sustained release)	30	2	3.98	F.G.F.	AB
Capsule 270mg-300 micrograms (delayed release)	30	2	3.98	Fefol	SK
FLUCLOROLONE ACETONIDE					
Cream 0.025%, 15g	≠1	1	3.79	Topilar	SD
FLUCLOXACILLIN					
<u>Authority required.</u>					
Infections due to penicillin- resistant staphylococci; Osteomyelitis.					
Capsule 250mg	25	..	10.81	Flophen Floxacpen	CS BR
500mg	12	..	10.51	Flophen Floxacpen	CS BR
Powder for Syrup 125mg per 5mL, 100mL	≠1	..	#9.09	Flophen Floxacpen	CS BR
(continued)					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
FLUCLOXACILLIN - cont.					
Injection 250mg (solvent required)	5	..	9.32	Flopen Flozapen	CS BR
500mg (solvent required)	5	..	13.34	Flopen Flozapen	CS BR
1g (solvent required)	5	..	20.91	Flopen Flozapen	CS BR
FLUCYTOSINE					
Invasive or systemic fungal infections such as candidiasis, cryptococcosis and chromoblastomycosis.					
Tablet 500mg	100	..	71.04	Ancotil	RO
FLUDROCORTISONE ACETATE					
Tablet 100 micrograms	100	1	7.03	Florinef	SQ
FLUMETHASONE with CLIOQUINOL					
Ear Drops 0.02%-1%, 7.5mL	≠1	..	4.33	Locacorten Vioform	CG
FLUOCORTOLONE ESTERS					
Cream 0.08%, 100g	≠1	..	4.73	Topodil	SC
0.2%, 15g	≠1	1	3.79	Ultralan-D	SC
Ointment 0.2%, 15g	≠1	1	3.79	Ultralan-D	SC
Ointment (Anhydrous) 0.2%, 15g	≠1	1	3.79	Ultralan-D Fatty	SC
FLUOROMETHOLONE					
Eye Drops 0.1%, 5mL	≠1	6	5.22	Flucon FML Liquifilm	AQ AG
FLUOROURACIL					
Injection 250mg per 10mL	10	..	27.86 27.92	BL RO	

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
FLUOXYMESTERONE <u>Authority required.</u> Aplastic anaemias, proven; Carcinoma of the breast; Hypogonadism; Osteoporosis. <u>NOTE:</u> An authority for three months' treatment of osteoporosis will be limited to the maximum quantity and repeats shown in this schedule.					
Tablet 5mg	100	1	21.09	Halotestin	UP
FLUPHENAZINE Chorea; Hyperactive states of organic or toxic delirium; Malignant neoplasia (late stage); Radiation sickness; Major psychoses including:- Major organic psychoses including arteriopathic dementia; Manic-depressive psychosis; Paranoid states; Schizophrenia; Senile dementia.					
Tablet 1mg	100	1	6.21	Anatensol	SQ
2.5mg	100	1	7.94	Anatensol	SQ
5mg	100	1	8.89	Anatensol	SQ
Elixir 500 micrograms per mL, 60mL	≠1	4	4.38	Anatensol	SQ
FLUPHENAZINE DECANOATE Chorea; Hyperactive states of organic or toxic delirium; Malignant neoplasia (late stage); Radiation sickness; Major psychoses including:- Major organic psychoses including arteriopathic dementia; Manic-depressive psychosis; Paranoid states; Schizophrenia; Senile dementia.					
(continued)					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
FLUPHENAZINE DECANOATE - cont. Injection 12.5mg in 0.5mL	5	..	13.41	Modecate	SQ
25mg in 1mL	5	..	23.04	Modecate	SQ
50mg in 2mL	5	..	30.96	Modecate	SQ
FOLIC ACID Tablet 500 micrograms	100	..	3.81	DH, PT	
			3.82	Folicid SI	US
5mg	100	2	3.96	DH, PT	
			3.98	Folasic Folicid FM, PR, RT, SI	NN US
Injection 15mg in 1mL	10	..	7.75	AB	
POSFESTROL SODIUM Carcinoma of the prostate.					
Tablet 120mg	100	2	28.01	Honvan	BC
Injection 250mg in 5mL	10	..	18.18	Honvan	BC
FRAMYCETIN Eye Ointment 0.5%, 5g	≠1	..	3.98	Soframycin	RL
Eye/Ear Drops 0.5%, 8mL	≠1	2	4.37	Soframycin	RL
FRUSEMIDE Renal failure.					
Tablet 500mg	50	2	21.87 21.93	Urex-Forte Lasix	FM HP
FRUSEMIDE Tablet 20mg	50	2	4.59 4.66	Urex-M Lasix-M	FM HP
40mg	50	2	4.87 4.93	Urex Virifenemide Lasix Uremide	FM WR HP PT
Oral Solution 10mg per mL, 30mL	≠1	2	6.72	Lasix	HP
Injection 20mg in 2mL	5	..	6.04	Lasix	HP

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
FUSIDIC ACID Authority required. For use in combination with another antibiotic in the treatment of proven serious staphylococcal infections.					
Tablet (Sodium salt) 250mg (enteric coated)	36	..	50.36	Fucidin	SK
Suspension 50mg per mL, 90mL	#1	..	23.31	Fucidin	SK
GAS GANGRENE ANTITOXIN - MIXED (POLYVALENT) Injection - 1 amp containing: 10,000 Units Perfringens; 10,000 Units Novyi; 5,000 Units Septicum.	2	1	76.55	CS	
GENTAMICIN SULPHATE Injection 10mg (base) in 1mL	5	..	12.38	Garamycin	SH
40mg (base) in 1mL	5	..	15.46 15.96	Cidomycin Garamycin BL	RL SH
60mg (base) in 1.5mL	5	..	18.68 19.26	Cidomycin Garamycin BL	RL SH
80mg (base) in 2mL	5	..	21.92 22.58	Cidomycin Garamycin BL	RL SH
GLIBENCLAMIDE Tablet 5mg	100	2	14.36	Daonil Euglucon	HP RC
GLICLAZIDE Tablet 80mg	100	2	14.36	Diamicron	SE
GLUCAGON HYDROCHLORIDE Injection 1 I.U. with diluent	1	1	9.28	Novo LY	NO
GLUCOSE Injection 50%, 10mL	5	..	5.84	BL	
Injections 500mL and 1L - See Intravenous Infusions					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
GLUCOSE INDICATOR - BLOOD Reagent Strips 25	#1	5	6.84	Ames-BG AM
Reagent Strips 25	#1	5	8.83	BM-Test-BG BO
Reagent Strips 25	#1	5	11.03	BM-Test-Glycemie 20-800 BO
GLUCOSE INDICATOR - URINE Test Dispenser 4m	#1	2	5.62	Tes-Tape LY
Reagent Strips 100	#1	2	4.81	Clinistix AM
Reagent Strips 100	#1	2	4.91	Diastix AM
GLUCOSE and KETONE INDICATOR - URINE Reagent Strips 100	#1	2	5.36	Keto-Diastix AM
GLYCEROL 100mL	#1	1	3.99	DH
GLYCEROPHOSPHATE COMPOUND Syrup 1.5% Sodium Glycerophosphate 100mL	#1	4	3.77 3.87 3.92	MG Glyfosolix DH SI PR
GLYCERYL TRINITRATE Tablets 600 micrograms, 100	#1	2	4.12	Anginine Stabilised BW
Ointment 2%, 60g	#1	2	10.21	Nitro-Bid PT
GLYIMIDINE Tablet 500mg	100	2	8.29	Gondafon SC
GRISEOFULVIN <u>Authority required.</u> Use in recalcitrant tinea infections due to Microsporum, Trichophyton or Epidermophyton species proven by pathology testing or, in the case of the scalp, by pathology testing or by Wood's Light examination; Kerion.				
Tablet 125mg	100	..	9.64	Fulcin 125 IC Grisovin GL
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
GRISEOFULVIN - cont.					
Tablet 330mg	28	..	8.71	Griseostatin	SH
500mg	28	..	9.38	Fulcin 500 Grisovin 500	IC GL
GUANETHIDINE					
Tablet 10mg	100	1	6.24 6.31	Antipres M Ismelin	PT CG
25mg	100	1	10.33 10.39	Antipres Ismelin	PT CG
HALOPERIDOL					
Chorea; Hyperactive states of organic or toxic delirium; Malignant neoplasia (late stage); Radiation sickness; Major psychoses including:- Major organic psychoses including arteriopathic dementia; Manic-depressive psychosis; Paranoid states; Schizophrenia; Senile dementia.					
Tablet 1.5mg	100	1	5.97 6.03	Pacedol Serenace	PT SR
5mg	50	1	6.97 7.03	Pacedol Serenace	PT SR
Injection 5mg in 1mL	10	..	11.69	Serenace	SR
HEPARIN CALCIUM					
Injection 5,000 Units in 0.2mL	5	5	9.64	Calciparine Caprin	DF CS
5,000 Units in 0.5mL	5	5	9.64	Caprin	CS
12,500 Units in 0.5mL	2	5	8.97 9.01	Calciparine CS	DF
25,000 Units in 1mL	2	5	11.02 11.05	Calciparine CS	DF

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
HEPARIN SODIUM				
Injection BP, 5,000 Units in 0.2mL	5	5	8.22	BL,CS,WP
5,000 Units in 1mL	5	5	8.22 8.28	BL,WP CS
20,000 Units in 20mL	12	5	47.01	BL
25,000 Units in 5mL	2	5	11.05	CS,WP
35,000 Units in 35mL	12	5	101.25	CS,WP
HEXAMINE HIPPURATE				
Tablet 1g	100	2	9.92	Hiprex RK
HEXAMINE MANDELATE				
Tablet 250mg	100	2	4.26	Mandelamine WW
500mg	100	2	5.82	Mandelamine Hafgrams WW
1g	100	2	8.64	Mandelamine WW
HOMATROPINE HYDROBROMIDE				
Eye Drops 2%, 15mL	≠1	2	4.87	AG,AQ
5%, 15mL	≠1	2	5.43	AG,AQ
HYDRALAZINE HYDROCHLORIDE				
Tablet 25mg	100	2	5.94 6.84	Alphapress 25 AF Supres 25 PT Apresoline CG
50mg	100	2	7.62 9.11	Alphapress 50 AF Supres 50 PT Apresoline CG
HYDROCHLOROTHIAZIDE				
Tablet 25mg	50	2	4.76	Dichlotride MK Esidrex CG
50mg	50	2	6.02	Dichlotride MK Esidrex CG
HYDROCHLOROTHIAZIDE with AMILORIDE				
<u>NOTE:</u> Supplementary potassium may cause fatal hyperkalaemia.				
Tablet 50mg-5mg	30	2	4.79 4.86	Amizide PT Moduretic MK

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
HYDROCHLOROTHIAZIDE with TRIAMTERENE <u>NOTE: Supplementary potassium may cause fatal hyperkalaemia.</u>					
Tablet 25mg-50mg	30	2	5.19	Dyazide	SK
HYDROCORTISONE					
Tablet 4mg	50	1	4.52	Hysone	PT
20mg	30	2	5.54	Hysone	PT
Eye Drops 0.5%, 5mL	≠1	2	4.33	Hycor	SI
0.5%, 10mL	≠1	2	4.59	Hycor	SI
1%, 3mL	≠1	2	4.33	Hycor	SI
1%, 10mL	≠1	2	4.81	Hycor	SI
2.5%, 5mL	≠1	2	4.81	Hycor	SI
2.5%, 10mL	≠1	2	5.28	Hycor	SI
Eye Ointment 0.5%, 4g	≠1	..	4.34	Cortef	UP
0.5%, 5g	≠1	..	4.39	Hycor	SI
1%, 5g	≠1	..	4.46	Hycor	SI
Cream 1%, 30g	≠1	1	4.33	Adacor Cortef Dermacort Hydrosone Procort Sigmacort Squibb-HC	NN UP PD US PR SI SQ
1%, 50g	≠1	1	4.93	Adacor Cortef Dermacort Hydrosone Procort Sigmacort Squibb-HC	NN UP PD US PR SI SQ
(continued)					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
HYDROCORTISONE - cont. Topical Ointment 1%, 30g	#1	1	4.33	Adacor NN Cortef UP Dermacort "O" PD Procort PR Sigmacort SI Squibb-HC SQ
1%, 50g	#1	1	4.93	Adacor NN Cortef UP Dermacort "O" PD Procort PR Sigmacort SI Squibb-HC SQ
HYDROCORTISONE with NEOMYCIN SULPHATE Ear Drops 1.5%-0.5%, 5mL	#1	..	4.26	Neo-Cortef UP
Ear Ointment 1.5%-0.5%, 4g	#1	2	4.18	Neo-Cortef UP
HYDROCORTISONE ACETATE Alopecia areata; For local intra-articular or peri-articular infiltration; Granulomata, dermal; Keloid; Lichen planus hypertrophic; Lichen simplex chronicus; Lupus erythematosus, chronic discoid.				
Injection 25mg in 1mL	5	..	6.11	Hysone-A PT
Proctitis; Ulcerative colitis.				
Rectal Foam 10%, Aerosol 25g	2	1	34.53	Colifoam SV
HYDROCORTISONE SODIUM SUCCINATE For use in a hospital.				
Injection Set containing equivalent of 500mg hydrocortisone and solvent	1	..	14.84	Solu-Cortef UP
(Continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
HYDROCORTISONE SODIUM SUCCINATE - cont. Injection Set containing equivalent of 100mg hydrocortisone and 2mL solvent	2	..	8.23 8.31	Nordicort NR Ef cortelan GL Solu-Cortef UP
containing equivalent of 250mg hydrocortisone and solvent	1	..	8.83	Solu-Cortef UP
HYDROGEN PEROXIDE SOLUTION, DILUTE (10 vol), 100mL	≠1	..	3.23	FA
HYDROXYCHLOROQUINE Tablet 200mg	100	..	12.48	Plaquenil WL
HYDROXYUREA Capsule 500mg	100	..	29.11	Hydrea SQ
HYOSCINE BUTYLBROMIDE Injection 20mg in 1mL	5	..	5.28	Buscopan BY
HYPROMELLOSE Eye Drops 0.5%, 15mL	≠1	6	4.18	Isopto Tears AQ Lacril AG Methopt SI
1%, 15mL	≠1	6	4.33	Methopt Forte SI
HYPROMELLOSE with DEXTRAN Eye Drops 0.3%-0.1%, 15mL	≠1	6	4.67	Tears Naturale AQ
IBUPROFEN Tablet 200mg	50	2	4.81 4.91	Inflam PT Brufen BT
400mg	50	2	5.62 5.69	Inflam PT Brufen BT
IDOXURIDINE Eye infections caused by herpes simplex virus.				
Eye Drops 0.1%, 15mL	≠1	2	6.11	Herplex AG Stoxil SK
Eye Ointment 0.5%, 5g	≠1	..	6.11	Stoxil SK
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
IDOXURIDINE - cont. Topical Ointment 0.5%, 5g	1	..	4.07	Stoxil SK
IMIPRAMINE Tablet 10mg	50	2	3.93	Imiprin PT Tofranil CG
25mg	50	2	4.73 4.76	Imiprin PT Melipramine UW(N) CG
4.83				Tofranil CG
Injection I.M. 25mg in 2mL	10	..	7.59	Tofranil CG
INDOMETHACIN Capsule 25mg	50	2	5.63	Arthrexin AF Rheumacin PT 5.69 Indocid MK
Suppository 100mg	20	2	9.93	Indocid MK
INFLUENZA VACCINE Persons at special risk of adverse consequences from infections of the lower respiratory tract.				
Injection (Trivalent) 0.5mL	1	..	6.61	Vaxigrip MB
1mL	1	..	6.61	CS
INSECT ALLERGEN EXTRACT - BULL ANT Injection Sets strengths A,B,C each 5mL	1	..	43.23	CS
strengths A,B,C,D each 5mL	1	..	59.89	CS
Injection strength C, 5mL	1	..	17.61	CS
strength D, 5mL	1	..	18.89	CS
INSECT ALLERGEN EXTRACT - HONEY BEE VENOM Injection Set containing 550 micrograms	1	..	79.11	Albay Bee Venom BN

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
INSECT ALLERGEN EXTRACT - JUMPER ANT				
Injection Sets strengths A,B,C each 5mL	1	..	43.23	CS
strengths A,B,C,D each 5mL	1	..	59.89	CS
Injection strength C, 5mL	1	..	17.61	CS
strength D, 5mL	1	..	18.89	CS
INSECT ALLERGEN EXTRACT - MOSQUITO				
Injection Sets strengths A,B,C each 5mL	1	..	43.23	CS
strengths A,B,C,D each 5mL	1	..	59.89	CS
Injection strength C, 5mL	1	..	17.61	CS
strength D, 5mL	1	..	18.89	CS
INSECT ALLERGEN EXTRACT - WASP VENOM PROTEIN				
Injection Set containing 550 micrograms	1	..	85.52	Albay Wasp Venom BN
INSULIN				
Injection (bovine) 100 Units per mL, 10mL	5	2	50.63	Insulin-2 Wellcome CS Insulin BW
300 Units per mL, 5mL	10	2	128.53	CS
INSULIN BIPHASIC				
Injection (mixed porcine/bovine) 100 Units per mL, 10mL	5	2	50.63	Bitard-2 Rapitard M.C. Novo CS NO
INSULIN ISOPHANE (N.P.H.)				
Injection (bovine) 100 Units per mL, 10mL	5	2	45.33	Hypurin Isophane WP Isophane M.C. NO Isotard-2 CS Wellcome Isophane BW
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
INSULIN ISOPHANE (N.P.H.)-(cont.) Injection (porcine) 100 Units per mL, 10mL	5	2	50.63	Insulatard Nordisk BW Isotard-2 PC CS Protaphane M.C. NO
INSULIN ISOPHANE (N.P.H.) -INSULIN NEUTRAL, (MIXED) Injection (porcine) 100 Units (70 Units-30 Units) per mL, 10mL	5	2	50.63	Mixtard Nordisk BW
INSULIN NEUTRAL Injection (bovine) 100 Units per mL, 10mL	5	2	45.33	Hypurin Neutral WP
Injection (porcine) 100 Units per mL, 10mL	5	2	50.63	Actrapid M.C. Novo NO Nuralin-2 CS Velosulin Nordisk BW
INSULIN PROTAMINE ZINC Injection (bovine) 100 Units per mL, 10mL	5	2	45.33	BW, CS
INSULIN ZINC SUSPENSION (Lente) Injection (bovine) 100 Units per mL, 10mL	5	2	50.63	Lente-2 CS Wellcome Lente BW
Injection (porcine) 100 Units per mL, 10mL	5	2	50.63	Lente-2 PC CS Monotard M.C. Novo NO
Injection (mixed porcine/bovine) 100 Units per mL, 10mL	5	2	50.63	Lente M.C. Novo NO

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
INSULIN ZINC SUSPENSION (AMORPHOUS) (Semilente) Injection (bovine) 100 Units per mL, 10mL	5	2	50.63	Semilente-2 CS Wellcome Semilente BW
Injection (porcine) 100 Units per mL, 10mL	5	2	50.63	Semilente-2 PC CS Semilente M.C. NO Novo
INSULIN ZINC SUSPENSION (CRYSTALLINE) (Ultralente) Injection (bovine) 100 Units per mL, 10mL	5	2	50.63	Ultralente-2 CS Ultralente M.C. NO Novo Wellcome Ultralente BW
INTRAVENOUS INFUSIONS 500mL and 1L - see separate listings at end of Section 2				
IRON DEXTRAN Injection 2mL	5	..	6.49	Imferon FC
IRON POLYMALTOSE COMPLEX Tablet 40mg (Iron)	100	2	3.92	Ferrum H SI
Injection 100mg (Iron) in 2mL	5	..	6.91	Ferrum H SI
IRON SORBITOL Injection I.M. Trivalent Iron 2mL	5	..	6.91	Jectofer AP
ISOCONAZOLE NITRATE Cream 1%, 20g	#1	1	5.54	Travogen SC
Lotion 1%, 20mL	#1	1	5.54	Travogen SC
Pessaries 300mg, 2	#1	..	6.29	Gyno-Travogen SC
ISONIAZID Tablet 50mg	200	2	4.81	FM
100mg	100	2	4.81	FM
ISOPRENALINE HYDROCHLORIDE Tablet 30mg (sustained release)	100	2	11.02	Saventrine PN

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
ISOSORBIDE DINITRATE					
Tablet 10mg	100	2	4.39	Isordil Isotrate	AY PD
Sublingual Tablet 5mg	100	2	4.26	Isordil Sublingual Isotrate Sublingual	AY PD
KANAMYCIN					
Injection 30mg in 1mL	5	1	9.57	Kanasig	SI
250mg in 2mL	5	..	13.41	Kanasig	SI
500mg in 2mL	5	..	14.51	Kanasig Kantrex	SI BC
1g in 3mL	5	..	16.76	Kanasig Kantrex	SI BC
KAOLIN with PECTIN					
Mixture 5.91g-132mg per 30mL, 375mL	≠1	2	4.39	Kaopectate	UP
LABETALOL					
Hypertension.					
Tablet 100mg	100	2	11.98	Trandate	GL
200mg	100	2	17.76	Trandate	GL
LACTULOSE					
<u>Authority required.</u> Hepatic coma or precoma (chronic porto-systemic encephalopathy); Terminal malignant neoplasia.					
Mixture 3.34g per 5mL, 500mL	≠1	..	12.32	Duphalac	ET
LEVODOPA					
Tablet 100mg	50	2	7.07	Larodopa	RO
250mg	100	2	13.81	Larodopa	RO
500mg	250	2	47.88	Larodopa	RO

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
LEVODOPA with BENSERAZIDE Tablet 200mg-50mg	100	2	26.49	Madopar RO
Capsule 50mg-12.5mg	100	2	11.86	Madopar Q RO
100mg-25mg	100	2	17.53	Madopar-M RO
200mg-50mg	100	2	26.49	Madopar RO
LEVODOPA with CARBIDOPA Tablet 100mg-10mg	100	2	17.53	Sinemet M MK
100mg-25mg	100	2	29.83	Sinemet 100/25 MK
250mg-25mg	100	2	32.57	Sinemet MK
LEVONORGESTREL Tablet 30 micrograms, 28	2	2	5.15	Microlut 28 SC Microval 28 WY
LEVONORGESTREL with ETHINYLOESTRADIOL Tablet				
125 micrograms-50 micrograms, 21	2	2	5.15	Microgynon 50 SC
150 micrograms-30 micrograms, 21	2	2	5.15	Microgynon 30 SC Nordette 21 WY
250 micrograms-50 micrograms, 21	2	2	5.15	Neogynon SC Nordiol 21 WY
Pack containing 21 tablets 125 micrograms-50 micrograms and 7 inert tablets	2	2	5.15	Microgynon 50 ED SC
Pack containing 21 tablets 150 micrograms-30 micrograms and 7 inert tablets	2	2	5.15	Microgynon 30 ED SC Nordette 28 WY
Pack containing 21 tablets 250 micrograms-50 micrograms and 7 inert tablets	2	2	5.15	Neogynon ED SC Nordiol 28 WY
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
LEVONORGESTREL with ETHINYLLOESTRADIOL - cont. Pack containing 11 tablets 50 micrograms-50 micrograms and 10 tablets 125 micrograms- 50 micrograms	2	2	5.15	Biphasil 21	WY
Pack containing 11 tablets 50 micrograms-50 micrograms, 10 tablets 125 micrograms- 50 micrograms and 7 inert tablets	2	2	5.15	Biphasil 28 Sequilar ED	WY SC
Pack containing 6 tablets 50 micrograms-30 micrograms, 5 tablets 75 micrograms- 40 micrograms and 10 tablets 125 micrograms-30 micrograms	2	2	5.15	Triphasil Triquilar	WY SC
Pack containing 6 tablets 50 micrograms-30 micrograms, 5 tablets 75 micrograms- 40 micrograms, 10 tablets 125 micrograms-30 micrograms and 7 inert tablets	2	2	5.15	Triphasil 28 Triquilar ED	WY SC
LIGNOCAINE Injection 100mg in 5mL	2	..	5.48	Xylocard 100	AP
I.M. 300mg in 3mL	1	..	5.83	Xylocard 300 I.M.	AP
Infusion 500mg in 5mL	5	..	7.52	Xylocard 500	AP
LINCOMYCIN Gram-positive coccal infections where these cannot be safely and effectively treated with a penicillin.					
Injection 300mg in 1mL	5	..	8.42	Lincocin SS Paediatric	UP
600mg in 2mL	5	..	10.31	Lincocin	UP

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
LINDANE					
Cream 1%, 200g	¶1	2	6.02	Lorexane	IC
Head Lotion 0.2%, 200mL	¶1	..	4.93	Lorexane	IC
Lotion Concentrate 1%, 200mL	¶1	..	4.93	Lorexane Concentrate	IC
LIOTHYRONINE					
Tablet 20 micrograms	100	1	4.98	Tertroxin	GL
LITHIUM CARBONATE					
Tablet 250mg	100	2	5.28 5.34	Lithicarb Camcolit Carbolith	PT NE DH
400mg (sustained release)	100	1	7.94	Priadel	PT
LOPERAMIDE HYDROCHLORIDE					
Capsule 2mg	12	..	4.13	Imodium	JP
LYPRESSIN					
Nasal Spray 50 Units per mL, 5mL	10	2	53.73	Vasopressin	SZ
MAGNESIUM SULPHATE					
Paste 50g	¶1	1	3.84	Magnoplasm	FA
100g	¶1	1	4.28	Magnoplasm	FA
MALDISON					
Lotion 0.5%, 100mL	¶1	..	4.47	Cleensheen	FL
MANNITOL					
See Intravenous Infusions					
MECLOZINE					
Tablet 25mg	50	2	4.18	Ancolan	GL
MEDROXYPROGESTERONE					
Dysfunctional uterine bleeding; Precocious puberty; Turner's syndrome.					
Tablet 2.5mg	25	..	5.89	Provera	UP
(continued)					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
MEDROXYPROGESTERONE - cont. Breast cancer; Dysfunctional uterine bleeding; Endometrial cancer; Endometriosis; Precocious puberty; Renal cell cancer; Turner's syndrome.				
Tablet 10mg	100	2	30.13	Provera UP
Breast cancer; Endometrial cancer; Renal cell cancer.				
Tablet 100mg	100	2	73.86	Provera UP
Injection 50mg in 1mL	1	..	6.24	Depo-Provera UP
Breast cancer; Endometrial cancer; Precocious puberty; Renal cell cancer.				
Injection 150mg in 1mL	1	..	11.23	Depo-Provera UP
MEDRYSONE Eye Drops 1%, 5mL	41	6	5.22	HMS Liquifilm AG
MEFRUSIDE Tablet 25mg	50	2	5.62	Baycaron BN
MELPHALAN Tablet 2mg	100	..	56.05	Alkeran BW
5mg	100	..	94.49	Alkeran BW
MERCAPTOPURINE Tablet 50mg	50	1	43.23	Purinethol BW

59

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
METFORMIN					
Maturity onset diabetes not satisfactorily controlled by diet and other drugs, where the risk of lactic acidosis is minimised by excluding predisposing factors, especially reduced renal, hepatic or cardiovascular function.					
Tablet 500mg	100	2	11.04	Glucophage	RN
500mg (sustained release)	100	2	11.06	Diabex S.R.	DF
METHACYCLINE					
Capsule 150mg	21	..	5.69	Randomycin	WW
300mg	11	..	5.69	Randomycin	WW
METHADONE					
Disabling pain associated with proven malignant neoplasia; Disabling pain of short duration not responding to non-narcotic analgesics, the maximum duration of treatment being two weeks.					
<u>CAUTION:</u> The risk of drug dependence is high.					
Tablet 5mg	20	..	5.47	Physeptone	BW
10mg	20	..	6.53	Physeptone	BW
Injection 10mg in 1mL	5	..	9.99	Physeptone	BW
<u>NOTE:</u> Authorities for increased maximum quantities and/or repeats of METHADONE will be granted only for the treatment of disabling pain associated with late-stage malignant neoplasia.					
METHDILAZINE					
Prevention of migraine.					
Tablet 4mg	100	2	5.99	Dilosyn	GL
8mg	100	2	6.25	Dilosyn	GL
(continued)					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
METHDILAZINE - cont. Tablet 4mg	50	2	4.06	Dilosyn	GL
8mg	50	2	4.19	Dilosyn	GL
METHENOLONE ACETATE <u>Authority required.</u> Osteoporosis; Patients on long-term treatment with corticosteroids. <u>NOTE:</u> An authority for three months' treatment will be limited to the maximum quantity and repeats shown in this schedule.					
Tablet 5mg	100	1	15.85	Primobolan	SC
METHICILLIN Endophthalmitis; Septicaemia, staphylococcal, suspected or proven.					
Injection 1g (solvent required)	5	1	19.08	Metin	CS
METHOTREXATE <u>CAUTION:</u> Cytotoxic effect and liver damage can be enhanced by poor renal function.					
<u>Authority required.</u> Acute leukaemia; Breast cancer; Choriadenoma destruens; Continuing methotrexate therapy initiated in a hospital; Gestational choriocarcinoma; Head and neck epidermoid cell carcinoma; Hydatidiform mole; Lung cancer; Lymphoma; Osteogenic sarcoma; Pemphigus; Severe intractable or extensive psoriasis.					
Tablet 2.5mg	100	..	20.57	LE	
(continued)					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
METHOTREXATE - cont.				
Injection 5mg (solvent required)	5	..	23.38	LE
5mg in 2mL	5	..	23.38	LE
<u>Authority required.</u>				
Carcinoma of the breast;				
Continuing methotrexate therapy				
initiated in a hospital;				
Head and neck epidermoid cell				
carcinoma;				
Lymphoma;				
Osteogenic sarcoma;				
Pemphigus.				
Injection 50mg (solvent required)	5	..	64.33	LE
50mg in 2mL	5	..	60.53	BL
			60.58	LE
METHSUXIMIDE				
Capsule 300mg	200	2	17.61	Celontin PD
METHYLCLOTHIAZIDE				
Tablet 2.5mg	50	2	4.73	Enduron-M AB
5mg	50	2	4.98	Urimor PT
			5.06	Enduron AB
METHYLDOPA				
Tablet 125mg	100	2	7.73	Aldomet-M MK
250mg	100	2	9.86	Dimaf PT
				Methopa US
			9.92	Aldomet MK
METHYLPHENOBARBITONE				
Epilepsy.				
Tablet 30mg	200	2	4.93	Prominal WL
60mg	200	2	5.57	Prominal WL
200mg	200	2	9.02	Prominal WL
METHYLPREDNISOLONE				
Eye Ointment 0.1%, 4g	#1	..	4.46	Medrol UP

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
METHYLPREDNISOLONE ACETATE For local intra-articular or peri-articular infiltration.				
Injection 40mg in 1mL	5	..	16.48	Depo-Medrol UP
METHYLPREDNISOLONE SODIUM SUCCINATE Injection 40mg (base) in 1mL	5	..	16.48	Solu-Medrol UP
METHYL SALICYLATE Liniment APF, 100mL	≠1	1	3.87 3.89 3.92	Emsalin SI, TO MG NN, PR, QE(NQ) DH
METHYLTESTOSTERONE Hypogonadism in children.				
Tablet 5mg	100	2	5.26	Testomet PT
Carcinoma of the breast; Hypogonadism; Klinefelter's syndrome (seminif- erous tubule dysgenesis).				
Tablet 25mg	100	2	8.89 8.97	Testomet ET PT
50mg	100	2	12.93	Testomet PT
METHYSERGIDE Carcinoid syndrome; Prevention of disabling migraine when other treatment has failed.				
Tablet 1mg	100	2	20.17	Deseril SZ
METOCLOPRAMIDE HYDROCHLORIDE Tablet 10mg	25	..	4.94 5.06 5.07	Pramin AF Primperan US Metamide PT Maxolon BR
Syrup 5mg per 5mL, 100mL	≠1	..	4.47	Primperan US
Injection 10mg in 2mL	10	..	6.11	Maxolon BR Primperan US
METOLAZONE Tablet 2.5mg	50	2	4.87	Diulo SR

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
METOPROLOL					
<u>NOTE: Increased maximum quantities may be obtained on authority.</u>					
Tablet 50mg	100	2	10.33	Betaloc Lopresor	AP CG
100mg	30	2	7.36	Betaloc Lopresor	AP CG
METRONIDAZOLE					
<u>Authority required.</u>					
Treatment in a hospital of acute anaerobic sepsis.					
Solution for intravenous infusion 500mg in 100mL (0.5%)	1	..	16.33	Flagyl BL	MB
METRONIDAZOLE					
Tablet 200mg	21	1	4.87 4.93	Trichozole Flagyl	PT MB
Suppositories 500mg, 10	≠1	..	8.64	Flagyl Trichozole	MB PT
1g, 10	≠1	..	10.56	Flagyl	MB
MEXILETINE HYDROCHLORIDE					
*Ventricular arrhythmias.					
Capsule 50mg	100	2	12.57	Mexitil	BY
200mg	100	2	26.77	Mexitil	BY
Injection 250mg in 10mL	5	..	15.82	Mexitil	BY
MIANSERIN HYDROCHLORIDE					
<u>Authority required.</u>					
Depressive illness in persons with cardiovascular disease.					
<u>CAUTION: Neutropenia and agranulocytosis have been reported with this drug.</u>					
Tablet 10mg	50	..	8.42	Tolvon	OR

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
MICONAZOLE					
Oral Gel 2%, 20g	≠1	1	5.54	Daktarin	JP
Tincture 2%, 20mL	≠1	1	5.54	Daktarin	JP
MICONAZOLE NITRATE					
Cream 2%, 20g	≠1	1	5.54	Daktarin	JP
Lotion 2%, 20g	≠1	1	5.54	Daktarin	JP
Pessaries 100mg, 7	≠1	..	6.29	Gyno- Daktarin 7 Monistat 7	JP ET
Vaginal Cream 2%, 40g	≠1	..	6.24	Gyno- Daktarin 7 Monistat 7	JP ET
MILK POWDER - LACTOSE MODIFIED					
Authority required.					
Lactose intolerance.					
NOTE: An authority will be limited to the maximum quantity and repeats shown in this schedule.					
Lactose-Predigested Powder 500g	2	20	12.01	Digestelact	SJ
MILK POWDER - LOW LACTOSE FORMULA					
Acute gastro-enteritis complicated by lactose intolerance in infants up to the age of twelve months. Age of patient to be shown on the prescription; Proven lactose intolerance in infants up to the age of twelve months. Age of patient to be shown on the prescription.					
NOTE: No authorities will be granted for increased maximum quantities. Authorities for an increased number of repeats will be limited to a maximum of 20 repeats. Confirmation of lactose intolerance to be included in application. An acceptable confirmation of lactose intolerance for the issue of an authority for repeats is the					
(continued)					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
MILK POWDER - LOW LACTOSE FORMULA - cont. presence of not less than 1% reducing substance in stool exudate tested with copper sulphate diagnostic compound tablet. Lactose-Predigested Powder Infant Formula 500g	2	..	12.01	De-Lact Infant SJ
MILK POWDER - SYNTHETIC <u>Authority required.</u> Hypercalcaemia in children under the age of two (2) years; Osteopetrosis. <u>NOTE:</u> An authority will be limited to the maximum quantity and repeats shown in this schedule. Low Calcium Compound Powder 397g	2	20	23.79	Locasol MN
<u>Authority required.</u> Galactosaemia; Conditions needing an extreme restriction of lactose in diet in children under the age of four (4) years. <u>NOTE:</u> An authority will be limited to the maximum quantity and repeats shown in this schedule. Low Lactose Compound Powder 454g	2	20	25.15	Galactomin Formula 17 MN
<u>Authority required.</u> Glucose-galactose malabsorption. <u>NOTE:</u> An authority will be limited to the maximum quantity and repeats shown in this schedule. Fructose Formula, Reduced Fat, Low Lactose Compound Powder 454g	2	20	59.01	Galactomin Formula 19 MN

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
MINERAL MIXTURE (For use with Amino Acid Formula without Phenylalanine) Phenylketonuria.				
Powder 250g	#1	5	20.56	Aminogran M.M. GL
MINOCYCLINE Capsule 100mg	11	..	5.69	Minomycin LE
MINOXIDIL <u>Authority required.</u> For the continuing treatment of severe refractory hypertensive disease where treatment with minoxidil was initiated in a hospital; *For the continuing treatment of a patient who has already received long-term (greater than six months) therapy with minoxidil for severe refractory hypertension.				
Tablet 10mg	100	..	38.11	Loniten UP
25mg	100	..	82.96	Loniten UP
MITHRAMYCIN For use in a hospital for - inoperable testicular neoplasm; symptomatic hypercalcaemia and hypercalcinuria associated with advanced neoplasia.				
Injection 2.5mg (solvent required)	5	..	99.33	Mithracin PF
MORPHINE with TACRINE Severe intractable pain.				
Tablet 30mg-15mg	50	..	14.41	Mortha WH
MORPHINE SULPHATE Injection 10mg in 1mL	5	..	5.38	BL,BT,SI
15mg in 1mL	5	..	5.47	BL,BT,SI
30mg in 1mL	5	..	5.81	BL

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
MORPHINE SULPHATE with ATROPINE SULPHATE Injection 15mg-600 micrograms in 1mL	5	..	5.61	BL
MUSTINE Injection 10mg (solvent required)	1	..	8.29	BT
NALIDIXIC ACID <u>Authority required.</u> For use as a urinary antiseptic in patients with neurogenic bladder; *Urinary tract infections where current clinical and bacterio- logical evidence confirms that nalidixic acid is the most appropriate therapeutic agent.				
Tablet 500mg	56	..	12.84	Negram WL
Oral Suspension 50mg per mL, 200mL	≠1	..	8.44	Negram WL
NALOXONE HYDROCHLORIDE Injection 40 micrograms in 2mL	5	..	24.66	Narcan Neonatal DT
NANDROLONE DECANOATE <u>Authority required.</u> Carcinoma of the breast; Osteoporosis; Patients on long-term treatment with corticosteroids. <u>NOTE:</u> An authority for three months' treatment of osteoporosis and of patients on long-term treatment with corticosteroids will be limited to the maximum quantity and repeats shown in this schedule.				
Injection 50mg in 1mL	1	1	11.77	Deca- Durabolin OR

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
NANDROLONE PHENYLPROPIONATE <u>Authority required.</u> Carcinoma of the breast; Osteoporosis; Patients on long-term treatment with corticosteroids. NOTE: An authority for three months' treatment of osteoporosis and of patients on long-term treatment with corticosteroids will be limited to the maximum quantity and repeats shown in this schedule.				
Injection 25mg in 1mL	3	1	11.77	Durabolin OR
NAPHAZOLINE HYDROCHLORIDE Eye Drops 0.1%, 15mL	¶1	2	4.33	Albalon Liquifilm AG
NAPROXEN Tablet 250mg	50	2	7.56	Naprosyn SD
Suppository 500mg	20	2	9.93	Naprosyn SD
NATAMYCIN Tablet 100mg	50	..	9.44	Pimafucin GB
Suspension 1%, 5mL	¶1	1	4.52	Pimafucin GB
Cream 20mg per g, 15g	¶1	1	4.59	Pimafucin GB
Pessaries 25mg, 20	¶1	..	6.37	Pimafucin GB
NEOMYCIN Acute leukaemia during induction of remission with chemotherapy; Bowel sterilisation preparatory to major surgery; Encephalopathy, hepatic.				
Tablet 500mg	25	1	11.02	Neosulf ET PT
NEOMYCIN Eye Drops 0.5% (0.35% Neomycin Base), 10mL	¶1	2	4.33	Neopt SI

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
NEOMYCIN UNDECENOATE with BACITRACIN ZINC Ear Ointment 12mg (3.5mg base)- 400 Units per g, 10g	41	..	4.26	Nemdyn	HA
NEOSTIGMINE Tablet 15mg	100	2	6.72	Prostigmin	RO
Injection 500 micrograms in 1mL	5	3	4.34	Prostigmin	RO
2.5mg in 1mL	5	3	4.79	Prostigmin	RO
NICLOSAMIDE Hymenolepiasis nana.					
Tablet 500mg	16	..	12.29	Yomesan	BN
NICLOSAMIDE Tablet 500mg	4	..	4.67	Yomesan	BN
NICOTINIC ACID Tablet 25mg	100	2	3.84	Nikacid DH	US
50mg	100	2	3.92	Nikacid DH,RT,SI	US
100mg	100	2	4.06	Nikacid DH	US
250mg	100	2	4.18	DH	
NIFEDIPINE <u>Authority required.</u> *Angina.					
Capsule 10mg	100	..	22.09	Adalat	BN
NITRAZEPAM Tablet 5mg	25	..	3.49 3.92	Alodorm Dormicum Mogadon	AF PT RO
NOTE: Authority to prescribe an increased maximum quantity and/or repeats of NITRAZEPAM should be sought for treatment of myoclonic epilepsy.					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
NITROFURANTOIN					
Urinary tract infections where sulphonamide treatment has proved ineffective and where positive bacteriological evi- dence shows the organism to be sensitive to nitrofurantoin or where the patient is sensitive to sulphonamides.					
Tablet 50mg	25	1	5.93	Furadantin	NW
100mg	25	1	7.91	Furadantin	NW
Capsule 50mg	30	1	6.78	Macrochantin	NW
100mg	30	1	9.24	Macrochantin	NW
Paediatric Suspension 25mg per 5mL, 200mL	1	..	5.31	Furadantin	NW
NORETHISTERONE					
Benign mammary dysplasia; Dysfunctional uterine bleeding; Endometriosis; Precocious puberty; Turner's syndrome.					
Tablet 5mg	30	5	6.31	Primolut N	SC
NORETHISTERONE					
Tablet 350 micrograms, 28	2	2	5.15	Micronor Noriday	ET SD
NORETHISTERONE with ETHINYL- OESTRADIOL					
Tablet 500 micrograms-35 micrograms, 21	2	2	5.15	Brevinor Modicon	SD ET
1mg-35 micrograms, 21	2	2	5.15	Brevinor-1 Neocon	SD ET
Pack containing 21 tablets 500 micrograms-35 micrograms and 7 inert tablets	2	2	5.15	Brevinor Modicon	SD ET
(continued)					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
NORETHISTERONE with ETHINYL- OESTRADIOL - cont.					
Pack containing 21 tablets 1mg-35 micrograms and 7 inert tablets	2	2	5.15	Brevinor-1 Neocon	SD ET
Pack containing 12 tablets 500 micrograms-35 micrograms, 9 tablets 1mg-35 micrograms and 7 inert tablets.	2	2	5.15	Synphasic	SD
NORETHISTERONE with MESTRANOL Tablet 1mg-50 micrograms, 21	2	2	5.15	Noriny1-1 Ortho-Novum 1/50	SD ET
1mg-80 micrograms, 21	2	2	5.15	Ortho-Novum 1/80	ET
2mg-100 micrograms, 21	2	2	5.15	Noriny1-2	SD
Pack containing 21 tablets 1mg-50 micrograms and 7 inert tablets	2	2	5.15	Noriny1-1/28	SD
NORETHISTERONE ACETATE Dysfunctional uterine bleeding; Endometriosis; Precocious puberty; Turner's syndrome.					
Tablet 2.5mg	30	5	6.31	Primolut Nor	SC
Malignant neoplasia.					
Tablet 10mg	100	2	27.41	SH420	SC
NORETHISTERONE ACETATE with ETHINYLOESTRADIOL					
Tablet 1mg-50 micrograms, 21	2	2	5.15	Minovlar	SC
3mg-50 micrograms, 21	2	2	5.15	Gynovlar	SC
4mg-50 micrograms, 21	2	2	5.15	Anovlar	SC
Pack containing 21 tablets 1mg - 50 micrograms and 7 inert tablets	2	2	5.15	Minovlar ED Orlest	SC PD
Pack containing 21 tablets 2.5mg- 50 micrograms and 7 inert tablets	2	2	5.15	Norlestrin	PD

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
NORGESTREL with ETHINYLOESTRADIOL Tablet				
500 micrograms-50 micrograms, 20	2	2	5.15	Duoluton SC
500 micrograms-50 micrograms, 21	2	2	5.15	Eugynon SC Ovral WY
Pack containing 21 tablets 500 micrograms-50 micrograms and 7 inert tablets	2	2	5.15	Eugynon ED SC
NORTRIPTYLINE Tablet 10mg	50	2	3.89	Allegron DL Nortab SQ
25mg	50	2	4.76	Allegron DL Nortab SQ
Paediatric Elixir 10mg per 5mL, 100mL	≠1	4	3.84	Allegron DL
NUTRAMIGEN <u>Authority required.</u> Cows' milk allergy in children under the age of two (2) years; Cystic fibrosis (mucoviscidosis); Galactosaemia; Glycogen storage disease due to glucose-6-phosphatase deficiency in children under the age of two (2) years; Lactose intolerance. <u>NOTE:</u> Milk allergy means eczema, asthma or severe gastro-intestinal upset, demonstrated to be due to cows' milk by relief on withdrawal of cows' milk for one week and recurrence on subsequent feeding with cows' milk. Since cows' milk allergy and lactose intolerance are not always permanent, a further challenge with cows' milk should be made each three months. Age of patient to be shown on application for authority. <u>NOTE:</u> An authority will be limited to the maximum quantity and repeats shown in this schedule.				
Powder 500g	2	20	28.65	Glucose Nutramigen MJ

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
NYSTATIN					
Tablet 500,000 Units	50	..	9.07	Diastatin Mycostatin Nilstat	GP SQ LE
Capsule 500,000 Units	50	..	9.07	Mycostatin	SQ
Lozenge 100,000 Units	20	1	4.33	Nilstat	LE
Mixture 100,000 Units per mL, 24mL	≠1	1	5.14	Mycostatin Nilstat	SQ LE
Cream 100,000 Units per g, 15g	≠1	1	4.46	Mycostatin Nilstat	SQ LE
Gel 100,000 Units per g, 15g	≠1	1	4.46	Mycostatin	SQ
Ointment 100,000 Units per g, 15g	≠1	1	4.46	Mycostatin Nilstat	SQ LE
Pessaries 100,000 Units, 15	≠1	1	4.71	Diastatin Mycostatin Nilstat	GP SQ LE
Cream Pessaries 100,000 Units, 15	≠1	1	4.86	Nilstat	LE
Vaginal Cream 100,000 Units per 4g, 60g (15 doses)	≠1	1	4.99	Mycostatin	SQ
100,000 Units per 5g, 75g (15 doses)	≠1	1	4.99	Nilstat	LE
OESTRADIOL VALERATE					
Injection 10mg in 1mL	3	..	10.96	Primogyn Depot	SC
OESTRONE					
Pessaries 1,000 Units, 12	≠1	1	5.48	Kolpon	OR
10,000 Units, 12	≠1	1	7.39	Kolpon	OR
ORCIPRENALINE					
<u>NOTE:</u> Oral preparations are generally less effective and produce more side effects than inhaled preparations.					
Tablet 20mg (continued)	100	2	7.19	Alupent	BY

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
ORCIPRENALINE cont. Syrup 10mg per 5mL, 300mL	#1	4	5.42	Alupent	BY
Inhalation Solution for use in HAND NEBULISER 5%, 7.5mL	#1	..	4.73	Alupent	BY
Inhalation Solution for use in RESPIRATOR or JET NEBULISER 2%, 75mL	#1	..	9.86	Alupent	BY
Inhalation, metered aerosol spray replacement pack, 15mg per mL, 15mL (300 dose)	#1	5	5.96	Alupent	BY
ORNIDAZOLE Tablet 500mg	3	..	5.51	Tiberal	RO
ORPHENADRINE HYDROCHLORIDE Parkinsonism. <u>CAUTION:</u> Long term use with major tranquillisers increases the risk of tardive dyskinesia.					
Tablet 50mg	100	2	5.34 5.41	Orpadrex Disipal	PT RK
OXAZEPAM Tablet 15mg	50	..	3.89 3.94	Benzotran Murelax Serepax	PT AY WY
30mg	50	..	4.33	Benzotran Murelax Serepax	PT AY WY
<u>NOTE:</u> No authorities will be granted for increased maximum quantities and/or repeats for OXAZEPAM.					
OXPRENOLOL Tablet 20mg	100	2	6.71 6.77	Captol Trasicor	PT CG
40mg	100	2	8.94 9.01	Captol Trasicor	PT CG
Injection 2mg (solvent required)	5	..	7.19	Trasicor	CG

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
OXYCODONE Disabling pain associated with proven malignant neoplasia.				
Suppositories 30mg, 12	#1	..	14.92	Proladone BT
OXYCODONE HYDROCHLORIDE Disabling pain associated with proven malignant neoplasia.				
<u>CAUTION:</u> The risk of drug dependence is high.				
Tablet 5mg	20	..	5.87	Endone DT
OXYMETHOLONE <u>Authority required.</u> Aplastic anaemias, proven; Myelosclerosis.				
Tablet 50mg	100	..	69.41	Anapolon SD
100mg	100	..	135.99	Adroyd PD
OXYTETRACYCLINE Capsule 250mg	25	..	4.81	Terramycin PF
Ointment 3%, 15g	#1	..	4.16	Terramycin PF
OXYTOCIN Injection 2 Units in 2mL	5	..	5.34	Syntocinon SZ
5 Units in 1mL	5	..	5.48	Syntocinon SZ
10 Units in 1mL	5	..	5.62	Syntocinon SZ
OXYTOCIN with ERGOMETRINE Injection 5 Units and 500 micrograms in 1mL	5	..	5.89	Syntometrine SZ
PANCREATIN ENZYME Cystic fibrosis (mucoviscidosis); Following pancreatico- duodenectomy; Steatorrhoea, pancreatic.				
4 times USNF.XIII strength Tablet 325mg	500	1	33.56	Viokase RS
Powder 250g	#1	2	26.03	Viokase RS
5 times USNF.XIV strength Capsule 305mg	500	1	36.91	Viokase RS

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
PANCRELIPASE Cystic fibrosis (mucoviscidosis); Following pancreatico- duodenectomy; Steatorrhoea, pancreatic.				
Capsule 234mg	250	1	54.99	Pancrease ET
300mg	250	1	33.56	Cotazym OR
PAPAVERETUM <u>CAUTION: This drug may cause dependence.</u>				
Disabling pain associated with proven malignant neoplasia; Disabling pain of short duration not responding to non-narcotic analgesics, the maximum duration of treatment being two weeks.				
Tablet 10mg	20	..	5.87	Omnopon RO
PAPAVERETUM <u>CAUTION: This drug may cause dependence.</u>				
Injection 20mg in 1mL	5	..	5.74	Omnopon RO
PAPAVERETUM with HYOSCINE HYDROBROMIDE Injection 20mg-430 micrograms in 1mL	5	..	5.87	Omnopon- Scopolamine RO
PARACETAMOL Tablet 500mg	50	1	3.76 3.84	Ceetamol PT Dymadon BW Panacete PR Panamax WL Paralgin FM Parasin NN Parmol US PCL DH
Mixture 120mg per 5mL, 100mL	≠1	4	3.84	Dymadon BW Panamax WL Parmol US

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
PENICILLAMINE <u>Authority required.</u> Acute heavy metal intoxication; Cystinosis; Cystinuria with calculus formation; For the continuing treatment of rheumatoid arthritis where penicillamine therapy was initiated in a hospital; Haemoglobinuria, paroxysmal cold; Patients with rheumatoid arthritis who have already received long- term (greater than 6 months) therapy with penicillamine; Wilson's disease (hepatolenticular degeneration). <u>NOTE:</u> Regular blood and urine checks are essential.					
Tablet 125mg	100	..	20.24	D-Penamine Perdolat	DL KN
250mg	100	..	32.53	D-Penamine Perdolat	DL KN
PENICILLINASE Injection set containing 0.8megaU and 1mL solvent	1	..	23.37	Compenase	CS
PERHEXILINE MALEATE <u>Authority required.</u> Angina not responding to other therapy. <u>CAUTION:</u> Note high incidence of severe toxicity including neurotoxicity and hepatotoxicity.					
Tablet 100mg	100	..	19.97	Pexid	ML

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
PERICYAZINE					
Chorea; Hyperactive states of organic or toxic delirium; Malignant neoplasia (late stage); Radiation sickness; Severe conduct disorders of children; Major psychoses including:- Major organic psychoses including arteriopathic dementia; Manic-depressive psychosis; Paranoid states; Schizophrenia; Senile dementia.					
Tablet 2.5mg	100	1	4.73	Neulactil	MB
10mg	100	1	7.88	Neulactil	MB
Mixture 2.5mg per 5mL, 100mL	≠1	4	4.33	Neulactil	MB
PERITONEAL DIALYSIS SOLUTION					
Injection with 1.36% Anhydrous Glucose, 1L	20	1	57.13	Diasol	AB
with 3.86% Anhydrous Glucose, 1L	20	1	57.13	Diasol	AB
PETHIDINE					
Injection BP, 50mg in 1mL	5	..	5.27	Pethoid BL,BT,SI	BW
100mg in 2mL	5	..	5.32	BL,BT,SI	
NOTE: Authorities for increased maximum quantities and/or repeats of PETHIDINE will be granted only for the treatment of late-stage malignant neoplasia.					
PHENELZINE					
<u>Authority required.</u>					
Depressive illness resistant to treatment with either tricyclic anti-depressants or electro- convulsive therapy; Phobic states.					
CAUTION: This drug is a monoamine oxidase inhibitor.					
Tablet 15mg	50	..	6.59	Nardil	WW

15

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
PHENETHICILLIN					
Prophylaxis of recurrent streptococcal infections (including rheumatic fever).					
Tablet 125mg	50	5	6.23	Pensig	SI
250mg	50	5	7.11	Optipen Pensig	CS SI
Capsule 250mg	50	5	7.11	Optipen Pensig	CS SI
PHENETHICILLIN					
Tablet 125mg	25	1	4.18	Pensig	SI
250mg	25	1	4.62	Optipen Pensig	CS SI
Capsule 250mg	25	1	4.62	Optipen Pensig	CS SI
500mg	25	1	5.66	Optipen Pensig	CS SI
Powder for Syrup					
125mg per 5mL, 100mL	#1	1	#5.34	Pensig 125	SI
250mg per 5mL, 100mL	#1	1	#6.00	Pensig 250	SI
PHENINDIONE					
Tablet 10mg	100	2	6.24	Dindevan	GL
50mg	100	2	7.88	Dindevan	GL
PHENIRAMINE					
Tablet 10mg	50	2	3.84	Fenamine-M	FM
50mg	50	2	4.16	Avil Fenamine	HP FM
Paediatric Syrup					
15mg per 5mL, 100mL	#1	4	3.84	Fenamine	FM
PHENOBARBITONE					
Epilepsy.					
Tablet 30mg	200	2	4.46	DH, FM, SI	

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
PHENOBARBITONE SODIUM Injection 200mg in 1mL	5	..	4.86	BL, FM
PHENOXYBENZAMINE <u>Authority required.</u> Phaeochromocytoma; Neurogenic urinary retention.				
Capsule 10mg	100	..	8.03	Dibenyline SK
PHENOXYMETHYLPENICILLIN Prophylaxis of recurrent strepto- coccal infections (including rheumatic fever).				
Tablet 125mg	50	5	6.23	Abbocillin-V AB LPV CS
250mg	50	5	6.89	Abbocillin-VK AB Cilicaine VK SI LPV CS PVK LY P.V.O. FM
Capsule 250mg	50	5	6.89	Abbocillin-VK AB Cilicaine VK SI Falcopen VK FA LPV CS PVK LY P.V.O. FM
PHENOXYMETHYLPENICILLIN Tablet 125mg	25	1	4.18	Abbocillin-V AB LPV CS
250mg	25	1	4.51	Abbocillin-VK AB Cilicaine VK SI LPV CS PVK LY P.V.O. FM
500mg	25	1	5.48	Abbocillin-VK AB LPV CS PVK LY P.V.O. FM
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
PHENOXYMETHYLPENICILLIN - cont. Capsule 250mg	25	1	4.51	Abbocillin-VK AB Cilicaine VK SI Falcopen VK FA LPV CS PVK LY P.V.O. FM
500mg	25	1	5.48	Cilicaine VK SI Falcopen VK FA LPV CS P.V.O. FM
Paediatric Suspension 125mg per 5mL, 100mL	≠1	1	4.39	Abbocillin-V AB Cilicaine V SI Falcopen V FA LPV 125 CS
Suspension 250mg per 5mL, 100mL	≠1	1	4.99	Abbocillin-V AB Cilicaine V SI Falcopen V FA LPV 250 CS
PHENSUXIMIDE Capsule 500mg	200	2	17.61	Milontin PD
PHENYLALANINE LOW CONTENT FORMULA Phenylketonuria.				
Powder 2.5 lb	2	5	109.13	Lofenalac MJ
PHENYLEPHRINE Compound Ointment 60g	≠1	1	4.39	Hemorex WL
Compound Suppositories, 12	≠1	1	4.39	Hemorex WL
Eye Drops 0.12%, 15mL	≠1	2	4.18	Isopto Frin AQ Prefrin AG
10%, 5mL	≠1	..	4.99	Neo- Synephrine WL
PHENYTOIN Tablet 50mg	200	2	7.67	Dilantin PD Infatabs
Paediatric Suspension 30mg per 5mL, 500mL	≠1	3	6.31	Dilantin PD

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
PHENYTOIN SODIUM				
Tablet 100mg	200	2	6.37	FM
Capsule 30mg	200	2	7.53	Dilantin Sodium PD
100mg	200	2	7.81	Dilantin Sodium PD
Injection 100mg in 2mL	1	..	6.78	Dilantin Sodium PD
250mg in 5mL	1	..	8.01	Dilantin Sodium PD
PHOLCODINE				
Linctus 0.1%, 100mL	#1	2	3.71	Actuss SI Adaphol NN Duro-Tuss RK Pectolin FA Pholcolin DH Pholcolin Red DH Pholtrate MG Sedlingtus RT Tussinol GP PR,RT
PHYSOSTIGMINE SALICYLATE				
Eye Drops 0.25%, 15mL	#1	6	5.94	IQ
0.5%, 15mL	#1	6	6.33	IQ
PHYTOMENADIONE				
Injection 1mg	5	..	4.99	Konakion RO
10mg	5	..	6.91	Konakion RO
PILOCARPINE				
Authority required.				
Chronic glaucoma when other miotics are not tolerated.				
Eye Disc 5mg (releasing 20 micrograms per hour)	8	..	34.27	Ocusert Pilo 20 PT
Eye Disc 11mg (releasing 40 micrograms per hour)	8	..	34.27	Ocusert Pilo 40 PT

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
PILOCARPINE HYDROCHLORIDE Eye Drops 0.5%, 15mL	≠1	6	4.47	Isopto Carpine AQ Pilopt SI P.V. Carpine AG IQ
1%, 15mL	≠1	6	4.54	Isopto Carpine AQ Pilopt SI P.V. Carpine AG IQ
2%, 15mL	≠1	6	4.79	Isopto Carpine AQ Pilopt SI P.V. Carpine AG IQ
3%, 15mL	≠1	6	5.06	Isopto Carpine AQ Pilopt SI P.V. Carpine AG IQ
4%, 15mL	≠1	6	5.31	Isopto Carpine AQ Pilopt SI P.V. Carpine AG IQ
6%, 15mL	≠1	6	5.94	Isopto Carpine AQ Pilopt SI P.V. Carpine AG
PINDOLOL Hypertension where there is an inadequate response to not less than 15mg of pindolol daily; Frequent disabling angina without evidence of cardiac failure where there is an inadequate response to not less than 15mg of pindolol daily.				
Tablet 15mg	50	2	12.46	Visken SZ
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
PINDOLOL - cont. Tablet 5mg	100	2	9.92	Visken	SZ
Injection 400 micrograms in 2mL	5	..	7.19	Visken	SZ
PIZOTIFEN MALATE Prevention of migraine.					
Tablet 500 micrograms (base)	100	2	11.49	Sandomigran	SZ
PLAGUE VACCINE Injection 1,500 million organisms in 0.5mL	2	..	9.93	CS	
PNEUMOCOCCAL VACCINE, POLYVALENT Splenectomised persons over two (2) years of age; Persons with Hodgkin's disease; Persons at high risk of pneumococcal infections.					
Injection 0.5mL	1	..	14.22	Pneumovax	CS
POLYESTRADIOL Carcinoma of the breast; Carcinoma of the prostate.					
Injection set containing 40mg and 2mL solvent	1	..	9.03	Estradurin	AY
POLYMYXIN B SULPHATE Ear Drops (Propylene Glycol Base) 10,000 Units per mL, 10mL	≠1	2	4.33	Aerosporin	BW
POLYMYXIN B SULPHATE with BACITRACIN and NEOMYCIN Ear Drops 10,000 Units-500 Units- 3.5mg (base) per mL, 15mL	≠1	..	4.33	Neotracin	ET
Eye Ointment 5,000 Units- 400 Units-5mg per g, 4g	≠1	..	4.06	Mycitracin Neosporin	UP BW
POLYMYXIN B SULPHATE with NEOMYCIN and GRAMICIDIN Eye Drops 5,000 Units-2.5mg- 25 micrograms per mL, 10mL	≠1	2	4.59	Neosporin	BW
POLYMYXIN B SULPHATE with NEOMYCIN and HYDROCORTISONE Ear Drops 10,000 Units-3.5mg (base)-10mg per mL, 7mL	≠1	2	4.33	Aerocortin	BW

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
POLYVINYL ALCOHOL Eye Drops 1.4%, 15mL	#1	6	4.67	Liquifilm Tears AG
3%, 15mL	#1	6	4.84	Liquifilm Forte AG
POTASSIUM <u>Authority required.</u> Hyperchloraemic hypokalaemic acidosis.				
Effervescent Tablet 6.5mmol K ⁺	100	..	4.87	Potavescent PT
POTASSIUM CHLORIDE <u>NOTE: Concomitant amiloride or triamterene may cause fatal hyperkalaemia.</u>				
Tablet 600mg (sustained release)	100	2	4.46	K-San PR Slow-K CG Span-K PT
Effervescent Tablet 14mmol K ⁺ and 8mmol Cl ⁻	30	2	4.59	Chlorvescent PT
Elixir 1.5g (20mmol K ⁺ and 20mmol Cl ⁻) per 15mL, 500mL	#1	2	4.81	Kay Ciel SC
Injection Standard Maintenance Fluid-See Intravenous Infusions				
PRALIDOXIME IODIDE Injection 500mg	5	..	15.11	AB
PRAZOSIN HYDROCHLORIDE Tablet 1mg (base)	100	2	8.69	Minipress PF
2mg (base)	100	2	11.69	Minipress PF
5mg (base)	100	2	17.51	Minipress PF
PREDNISOLONE Tablet 1mg	100	1	4.59	Panafcort- elone PT
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
PREDNISOLONE - cont. Tablet 5mg	30	2	3.76 3.77	Panafcort- elone PT Adnisolone NN Delta-Cortef UP Deltasolone US Solone FM PR
25mg	30	1	5.82 5.83	Panafcort- elone PT Solone FM
Eye Ointment 0.5%, 4g	≠1	..	4.46	Delta-Cortef UP
PREDNISOLONE ACETATE For local intra-articular or peri-articular infiltration.				
Injection 10mg in 1mL	5	..	9.93	Scherisolon SC
PREDNISOLONE ACETATE Eye Drops 0.5%, 5mL	≠1	6	4.99	Sterofrin AQ
PREDNISOLONE ACETATE with PHENYLEPHRINE Corneal grafts; Uveitis.				
Eye Drops 1%-0.12%, 10mL	≠1	2	6.24	Prednefrin Forte AG
PREDNISOLONE SODIUM PHOSPHATE Proctitis; Ulcerative colitis.				
Retention Enema 20mg in 100mL	28	1	60.73	Predsol GL
Suppositories equivalent to 5mg prednisolone, 10	3	1	18.06	Predsol GL
PREDNISOLONE SODIUM PHOSPHATE Eye/Ear Drops 0.5%, 5mL	≠1	6	5.08	Predsol GL
PREDNISOLONE STEAROYLGLYCOLATE Tablet 6.65mg	30	2	3.84	Sintisone EC

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
PREDNISONE					
Tablet 1mg	100	1	4.59	Panafcort	PT
5mg	30	2	3.76	Panafcort	PT
			3.77	DH Adasone	NN
				Deltasone	US
				Sone	FM
				PR	
25mg	30	1	5.82	Panafcort	PT
			5.83	Sone	FM
PRIMAQUINE					
Tablet equivalent to 7.5mg base	42	..	6.36	IC	
PRIMIDONE					
Tablet 250mg	200	2	8.94	Midone	PT
				Mysoline	IC
PROBENECID					
Tablet 500mg	100	2	10.06	Procid	PT
			10.08	Benemid	FR
PROCAINAMIDE					
Capsule 250mg	100	2	7.47	Pronestyl	SQ
375mg	100	2	8.97	Pronestyl	SQ
Injection 100mg per mL, 10mL	2	..	7.75	Pronestyl	SQ
PROCAINE PENICILLIN					
Injection BP, 1g	5	..	13.58	Aquacillin	FA
				Cilicaine	SI
1.5g	5	..	13.71	Aquacillin	FA
				Cilicaine	SI
PROCARBAZINE					
Authority required.					
Lymphoma;					
Small cell carcinoma of the lung.					
CAUTION: As well as being cytotoxic					
procarbazine is a monoamine					
oxidase inhibitor with an					
Antabuse-like activity.					
Capsule 50mg	100	..	20.17	Natulan	RO

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
PROCHLORPERAZINE					
<u>Authority required.</u>					
Emesis associated with malignant disease; Rotational vertigo.					
Tablet 5mg	100	..	4.78 4.81	Anti-Naus Compazine Stemetil	PT SK MB
PROCHLORPERAZINE					
Tablet 5mg	25	..	3.24 3.25	Anti-Naus Compazine Stemetil	PT SK MB
<u>NOTE: Authorities for increased maximum quantities and/or repeats of prochlorperazine tablets will be granted only for the treatment of emesis associated with malignant disease or rotational vertigo.</u>					
Injection 12.5mg in 1mL	10	..	6.11	Compazine Stemetil	SK MB
Suppositories 5mg, 5	≠1	..	4.18	Stemetil	MB
25mg, 5	≠1	..	4.59	Stemetil	MB
PROCYCLIDINE					
<u>CAUTION: Long term use with major tranquillisers increases the risk of tardive dyskinesia.</u>					
Tablet 5mg	100	2	6.91	Kemadrin	BW
PROGUANIL					
Tablet 100mg	100	2	5.77	Paludrine	IC
PROMETHAZINE					
Tablet 10mg	50	2	3.92	Phenergan	MB
25mg	50	2	4.14 4.16	Meth-Zine Phenergan	PT MB
Mixture 5mg per 5mL, 100mL	≠1	4	3.84	Progan Prothazine	NN US
Injection 50mg in 2mL	10	..	5.39	BL	

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
PROMETHAZINE THEOCLATE Tablet 25mg	30	1	4.38	Avomine MB
PROPANTHELINE BROMIDE <u>Authority required.</u> Chronic neurogenic incontinence of urine.				
Tablet 15mg	100	..	5.28	Pantheline PT
PROPRANOLOL Hypertension where there is an inadequate response to not less than 160mg of propranolol daily; Frequent disabling angina without evidence of cardiac failure where there is an inadequate response to not less than 160mg of propranolol daily.				
Tablet 160mg	50	2	9.28	Cardinol PT
				Deralin 160 AF
			9.34	Prolol US
			11.77	Inderal IC
PROPRANOLOL Tablet 10mg	100	2	5.43	Cardinol PT
				Deralin 10 AF
			5.49	Angilol BM
				Prolol US
			5.71	Inderal IC
40mg	100	2	7.36	Cardinol PT
				Deralin 40 AF
			7.42	Angilol BM
				Prolol US
			8.69	Inderal IC
Injection 1mg in 1mL	5	..	8.28	Inderal IC
PROPYLTHIOURACIL Tablet 50mg	100	2	6.71	ET
PROTAMINE SULPHATE Injection 1%, 10mL	6	..	19.51	BT
PROTEIN HYDROLYSATE FORMULA without PHENYLALANINE Phenylketonuria. Powder 200g sachet	10	5	316.13	Albumaid XP SJ

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
PROTRIPTYLINE					
Tablet 5mg	50	2	4.87	Concordin	MK
10mg	50	2	5.69	Concordin	MK
PYRIDOSTIGMINE					
Tablet 10mg	100	2	6.84	Mestinon	RO
60mg	100	2	17.51	Mestinon	RO
180mg (sustained release)	100	1	33.17	Mestinon	RO
Injection 1mg in 1mL	5	1	4.98	Mestinon	RO
PYRIDOXINE HYDROCHLORIDE					
Homocystinuria; Peripheral neuritis due to isoniazid therapy, prophylaxis or treatment; Primary hyperoxaluria; Pyridoxine-responsive anaemia, proven; Pyridoxine-responsive convulsions; Radiation sickness; Sideroblastic (refractory) anaemia.					
Tablet 25mg	100	..	4.87	Pydox DH,FM	PT
PYRIDOXINE HYDROCHLORIDE					
Injection 50mg in 1mL	5	1	4.87	BL,FM	
PYRIMETHAMINE					
Tablet 25mg	50	..	5.69	Daraprim	BW
PYRIMETHAMINE with DAPSONE					
Prophylaxis of chloroquine- resistant falciparum malaria only.					
Tablet 12.5mg-100mg	10	..	5.54	Maloprim	BW
PYRIMETHAMINE with SULFADOXINE					
Prophylaxis or treatment of chloroquine-resistant falciparum malaria only.					
Tablet 25mg-500mg	12	..	7.28	Fansidar	RO
QUINETHAZONE					
Tablet 50mg	50	2	5.86	Aquamox	LE

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
QUINIDINE BISULPHATE Tablet 250mg (sustained release)	100	2	16.13	Kinidin AP
QUINIDINE SULPHATE Tablet 200mg	100	2	15.24 15.39	DH, PT Cardoquin NN Quinidis US Quinidoxin BW PR, QE(NQ), TO
300mg (sustained release)	100	2	21.38	Quinidex LA RS
QUININE BISULPHATE Tablet 300mg	50	..	9.09	Bi-Chinine DH Quinbisul AF PT
			9.18	Biquin NN Bi-Quinate US Myoquin FM Quinbisan PR SI
QUININE SULPHATE Tablet 300mg	50	..	9.09	Chinine DH Quinsul AF PT
			9.18	Adaquin NN Quinate US Quinocetl FM Quinsan PR SI, TO
RANITIDINE HYDROCHLORIDE <u>Authority required.</u> Duodenal ulcer, confirmed by radiology, endoscopy or surgery. <u>NOTE:</u> Initial application for authority must state the date of barium meal, endoscopy or surgery. Increased maximum quantities and/or repeats will not be authorised for duodenal ulcer.				
<u>Authority required.</u> Zollinger-Ellison syndrome, proven by investigation.				
Tablet 150mg (base)	60	2	45.79	Zantac GL
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
RANITIDINE HYDROCHLORIDE - cont. <u>Authority required.</u> Gastric ulcer, confirmed by radiology, endoscopy or surgery. <u>NOTE:</u> Applications for authority must state the date of barium meal, endoscopy or surgery (procedure must have been within three months of application). Not more than 120 tablets will be available on authority for each proven episode of benign gastric ulceration. Increased maximum quantities and/or repeats will not be authorised.					
Tablet 150mg (base)	60	1	45.79	Zantac	GL
RIBOFLAVINE Tablet 5mg	100	2	4.18	FM	
RIFAMPICIN <u>Authority required.</u> Leprosy in adults; Prophylaxis of meningococcal disease in close contacts and carriers.					
Capsule 150mg	100	..	39.63	Rimycin 150	AF
300mg	100	..	77.13	Rimycin 300	AF
ROLITETRACYCLINE I.V. Injection set containing 275mg and 10mL solvent	5	..	19.63	Reverin	HP
I.M. Injection set containing 350mg and 2mL solvent	5	..	19.63	Reverin	HP
SACCHARIN or SACCHARIN SODIUM Tablets 30mg, 500	≠1	1	3.74 4.08	DH FA	
SALBUTAMOL <u>NOTE:</u> Oral preparations are generally less effective and produce more side effects than inhaled preparations.					
Tablet 4mg (continued)	100	2	7.59	Respolin Ventolin	RK GL

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
SALBUTAMOL - cont. Syrup 2mg per 5mL, 300mL	≠1	4	5.36	Respolin RK Ventolin GL
Capsule 200 micrograms (Oral Inhalation)	100	5	7.99	Ventolin Rotacaps GL
Inhalation Solution For use in RESPIRATOR, 0.5%, 30mL	≠1	2	7.33	Respolin RK Ventolin GL
Inhalation, metered aerosol spray, 100 micrograms per dose (200 dose)	≠1	5	5.83	Respolin RK Ventolin GL
SALICYLAMIDE Tablet 500mg	100	2	4.18	PT
SENEGA and AMMONIA Mixture APF, 200mL	≠1	4	3.77	Senamon DH MG,RT,SI, SL(NQVW) 3.84 PR,QE(NQ),TO
SILVER SULPHADIAZINE with CHLORHEXIDINE GLUCONATE <u>Authority required.</u> Treatment, in a hospital, of burns.	≠1	..	23.93	Silvazine SN
SODIUM ACID CITRATE Mixture 5.5g per 20mL, 500mL	≠1	4	4.87	Citralka PD
SODIUM AUROTHIOMALATE Injection 1mg	5	..	13.39	Myocrisin MB
5mg	5	..	15.93	Myocrisin MB
10mg	5	..	18.90	Myocrisin MB
20mg	10	1	39.63	Myocrisin MB
50mg	10	1	68.32	Myocrisin MB

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
SODIUM BICARBONATE Injection 8.4%, 100mL 4.2%, 500mL - See Intravenous Infusions	5	..	16.03	AB
SODIUM CALCIUMEDETATE Tablet 500mg	100	2	17.22	Calcium Disodium Versenate RK
SODIUM CHLORIDE Injection 0.9%, 2mL	5	1	3.87	BL,BT
0.9%, 5mL	5	1	4.08	BL,BT
0.9%, 10mL	5	1	4.42	BL,BT
1L size-See Intravenous Infusions				
SODIUM CHLORIDE and GLUCOSE See Intravenous Infusions				
SODIUM CHLORIDE COMPOUND See Intravenous Infusions				
SODIUM CITRO-TARTRATE Effervescent Granules 100g	1	4	4.87	Citravescent Sachets PT Ural Sachets AB
SODIUM CROMOGLYCATE Capsule 20mg (Oral Inhalation)	100	5	18.18	Intal Spincaps FC
SODIUM CROMOGLYCATE Use in a power-operated nebuliser for prophylaxis of asthma in persons who are unable to use the capsule for oral inhalation. Nebuliser Solution 20mg per 2mL, ampoule	48	2	19.92	Intal FC
Authority required. Vernal kerato-conjunctivitis.				
Eye Drops 2%, 10mL	1	..	7.94	Opticrom FC

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
SODIUM LACTATE See Intravenous Infusions				
SODIUM LACTATE COMPOUND See Intravenous Infusions				
SODIUM LACTATE COMPOUND and ANHYDROUS GLUCOSE See Intravenous Infusions				
SODIUM NITROPRUSSIDE Infusion 50mg	10	..	47.08	Nipride RO
SODIUM SALICYLATE Tablet 300mg (enteric coated)	100	2	4.87	Rhumax PR
500mg (enteric coated)	100	2	5.22	Rhumax PR
600mg (enteric coated)	100	2	5.54	Ensalate RC Rhumax PR
SODIUM VALPROATE Epilepsy. <u>CAUTION:</u> There are reports of (i) fatal hepatotoxicity, particularly in children; (ii) teratogenesis (spina bifida in humans).				
Tablet 200mg	200	2	40.41	Epilim RC
200mg (enteric coated)	200	2	40.41	Epilim EC RC
500mg (enteric coated)	100	2	41.96	Epilim EC RC
Syrup 200mg per 5mL, 200mL	¥1	2	12.04	Epilim RC
SOYA FORMULA <u>Authority required.</u> Galactosaemia; Homocystinuria; Lactose intolerance; Cows' milk allergy in children under the age of two (2) years.				
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
SOYA FORMULA - cont.				
NOTE: Milk allergy means eczema, asthma or severe gastro-intestinal upset demonstrated to be due to cows' milk by relief on withdrawal of cows' milk for one week and recurrence on subsequent feeding with cows' milk.				
Since cows' milk allergy and lactose intolerance are not always permanent, a further challenge with cows' milk should be made each three months.				
Age of patient to be shown on application for authority.				
NOTE: An authority will be limited to the maximum quantity and repeats shown in this schedule.				
Liquid 375mL	5	20	7.83	ProSobee MJ
384mL	5	20	7.83	Isomil RD
Powder 500g	4	20	7.78	Infasoy WY
SPECTINOMYCIN				
Injection 2g with 3.2mL diluent	1	..	8.56	Trobicin UP
4g with 6.5mL diluent	1	..	13.06	Trobicin UP
SPIRONOLACTONE				
Authority required.				
Primary hyperaldosteronism;				
Secondary hyperaldosteronism.				
NOTE: Supplementary potassium may cause fatal hyperkalaemia.				
Tablet 25mg	100	..	11.22 11.28	Spirotone PT Aldactone SR
STANDARD MAINTENANCE FLUID				
See Intravenous Infusions				
STAPHYLOCOCCUS TOXOID (FORMALINISED)				
Injection				
Diluted 1 in 10 for use in initial injection 5mL	1	..	8.51	CS
Undiluted 5mL	1	..	9.28	CS

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
STILBOESTROL				
Tablet 500 micrograms	100	2	3.79	HA
1mg	100	2	3.92	HA
5mg	100	2	4.12	DH, HA
10mg	100	2	4.98	HA
STREPTOKINASE				
Injection				
100,000 I.U. (solvent required)	2	..	48.39	Kabikinase PS
250,000 I.U. (solvent required)	2	..	78.91	Streptase HP
			83.61	Kabikinase PS
600,000 I.U. (solvent required)	5	..	415.88	Kabikinase PS
750,000 I.U. (solvent required)	5	..	488.83	Streptase HP
STREPTOMYCIN SULPHATE				
Injection 1g (solvent required)	5	3	6.91	GL
SUCRALFATE				
Authority required.				
Duodenal ulcer, confirmed by radiology, endoscopy or surgery;				
Gastric ulcer, confirmed by radiology, endoscopy or surgery.				
NOTE: Applications for authority must state the date of barium meal, endoscopy or surgery (procedure must have been within three months of application). Increased maximum quantities and/or repeats will not be authorised.				
NOTE: Not more than 240 tablets will be available on authority for each proven episode of benign gastric or duodenal ulceration.				
Tablet 1g	120	1	29.14	Ulsanic DT

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
SULINDAC Chronic osteoarthritis; Chronic rheumatoid arthritis. <u>CAUTION:</u> There are increasing reports of hepatotoxicity with sulindac.					
Tablet 100mg	50	2	6.89	Clinoril	FR
SULPHACETAMIDE SODIUM Eye Drops 10%, 15mL	¶1	2	4.33	Acetopt Bleph 10 IQ	SI AG
15%, 15mL	¶1	2	4.33	Isopto Cetamide	AQ
20%, 15mL	¶1	2	4.33	Acetopt	SI
SULPHADIAZINE Tablet 500mg	40	2	4.37	PT	
SULPHADIMIDINE Tablet 500mg	40	2	4.52	S-Dimidine	PT
SULPHAFURAZOLE Tablet 500mg	40	2	4.87	Gantrisin Sulfazole	RO PT
Eye Drops 4%, 10mL	¶1	2	4.33	Gantrisin	RO
Eye Ointment 4%, 5g	¶1	..	4.06	Gantrisin	RO
SULPHAMETHIZOLE Tablet 250mg	40	2	4.46	PT	
500mg	40	2	5.48 5.62	PT Urolucosil	WW
1g	20	2	5.47	Urolucosil	WW
Paediatric Suspension 100mg per 5mL, 100mL	¶1	1	5.12	Urolucosil	WW
SULPHAMETHOXAZOLE Tablet 500mg	20	1	4.37	Gantanol	RO
SULPHAPYRIDINE Tablet 500mg	100	..	7.39	M&B 693	MB

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
SULPHASALAZINE Crohn's disease; Ulcerative colitis.				
Tablet 500mg	200	5	25.95	Salazopyrin PS
500mg (enteric coated)	200	5	25.95	Salazopyrin- EN PS
SULPHINPYRAZONE <u>Authority required.</u> Glomerulonephritis; Gout; Renal transplantation.				
Tablet 100mg	100	..	11.43	Anturan CG
SULTHIAME Tablet 50mg	200	1	8.29	Ospolot BN
200mg	200	1	15.11	Ospolot BN
SURGICAL CEMENT For colostomy and ileostomy use; For use by paraplegic and quadriplegic patients; For use with surgical appliances.				
Skin Bond Adhesive 4fl oz	¥1	2	7.58	DY
Solvent 200mL	¥1	..	5.28	Zoff SN
227mL	¥1	2	6.17	Unisolve DY
240mL	¥1	2	5.76	Sacsol EG
250mL	¥1	2	6.08	Sacsol Non Flammable EG
TAMOXIFEN CITRATE <u>Authority required.</u> Treatment of post-menopausal recurrent or metastatic breast cancer.				
Tablet 10mg (base)	30	..	22.56	Nolvadex IC
TEMAZEPAM Capsule 10mg	25	..	3.92	Euhypnos Normison SI WY

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
TERBUTALINE SULPHATE				
<u>NOTE:</u> Oral preparations are generally less effective and produce more side effects than inhaled preparations.				
Tablet 5mg	100	2	7.59	Bricanyl AP
Elixir 300 micrograms per mL, 300mL	≠1	4	5.42	Bricanyl AP
Injection 100 micrograms in 1mL	5	..	5.83	Bricanyl AP
500 micrograms in 1mL	5	..	5.96	Bricanyl AP
Inhalation, metered aerosol spray, 250 micrograms per dose (400 dose)	≠1	5	8.01	Bricanyl AP
Nebuliser Solution 1%, 50mL	≠1	2	10.61	Bricanyl AP
TESTOSTERONE ENANTHATE				
Carcinoma of the breast; Hypogonadism; Klinefelter's syndrome (seminif- erous tubule dysgenesis).				
Injection 100mg in 1mL	3	1	12.99	Primoteston Depot SC
250mg in 1mL	3	1	27.06	Primoteston Depot SC
TESTOSTERONE ESTERS				
Carcinoma of the breast; Gigantism; Hypogonadism; Klinefelter's syndrome (seminif- erous tubule dysgenesis).				
Injection 100mg	3	1	13.58	Sustanon"100" OR
250mg	3	1	26.56	Sustanon"250" OR
TESTOSTERONE PROPIONATE				
Carcinoma of the breast; Hypogonadism; Klinefelter's syndrome (seminif- erous tubule dysgenesis).				
Injection 25mg in 1mL	9	..	8.85	Testoviron SC
50mg in 1mL	9	..	13.83	Testoviron SC

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
TETANUS VACCINE, ADSORBED Injection 0.5mL	3	..	6.45	CS
TETRABENAZINE <u>Authority required.</u> Chorea not adequately controlled by other drug therapy.				
Tablet 25mg	100	..	12.72	Nitoman RO
TETRACOSACTRIN <u>Authority required.</u> Children who need long-term corticosteroid therapy but who are in danger of growth suppression as a result; Hypsarrhythmia; Multiple sclerosis, acute exacerbation; (An authority for up to 10 ampoules may be issued for each acute exacerbation.) Patients who are being withdrawn from long-term corticosteroid therapy; (An authority for up to 5 ampoules may be issued for this purpose.) Ulcerative colitis, proven, not responding to parenteral corticosteroids.				
Injection 500 micrograms in 1mL	5	..	15.04	Synacthen Depot CG
1mg in 1mL	5	..	21.88	Synacthen Depot CG
TETRACYCLINE Bronchiectasis in patients over the age of eight (8) years; Chronic bronchitis in patients over the age of eight (8) years; Severe acne.				
Capsule 250mg	50	5	7.73	Achromycin LE Australamycin CS Panmycin P UP Tetramykoin BZ(N)
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
TETRACYCLINE - cont. Capsule 250mg	25	..	4.93	Achromycin LE Australamycin CS Panmycin P UP Tetramykoin BZ(N)
TETRACYCLINE with NYSTATIN Bronchiectasis in patients over the age of eight (8) years; Chronic bronchitis in patients over the age of eight (8) years; Severe acne. Capsule 250mg-250,000 Units	50	5	7.73	Achrostatin LE Comycin UP Mysteclicin-V SQ Tetrex-F BC
TETRACYCLINE with NYSTATIN Capsule 250mg-250,000 Units	25	..	4.93	Achrostatin LE Comycin UP Mysteclicin-V SQ Tetrex-F BC
TETRACYCLINE (BUFFERED) Bronchiectasis in patients over the age of eight (8) years; Chronic bronchitis in patients over the age of eight (8) years; Severe acne. Capsule 250mg	50	5	7.73	Achromycin V LE Australamycin-V CS Hostacycline P HP Hydracycline FM Steclin-V SQ Tetrex BC
TETRACYCLINE (BUFFERED) Capsule 250mg	25	..	4.93	Achromycin V LE Australamycin-V CS Hostacycline P HP Hydracycline FM Steclin-V SQ Tetrex BC

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
THEOPHYLLINE Tablet 50mg	100	2	4.46	Nuelin Paediatric RK
125mg	100	2	5.28	Nuelin RK
200mg	100	2	5.89	Nuelin RK
200mg (sustained release)	50	2	4.98	Theo-Dur AP
250mg (sustained release)	50	2	5.43	Nuelin-S.R. 250 RK
300mg (sustained release)	50	2	5.84	Theo-Dur AP
Capsule 200mg	100	2	5.89	Elixophyllin SC
Elixir 80mg per 15mL, 500mL	≠1	4	4.59	Elixophyllin SC
Syrup 80mg per 15mL, 500mL	≠1	4	4.59	Nuelin RK
THEOPHYLLINE with GUAIPHENESIN Capsule 150mg-90mg	100	2	5.48	Quibron MJ
Elixir 150mg-90mg per 15mL, 500mL	≠1	4	4.94	Quibron MJ
THEOPHYLLINE with POTASSIUM IODIDE Oral Liquid 80mg-130mg per 15mL, 500mL	≠1	4	4.73	Elixophyllin-KI SC
THIABENDAZOLE Tablet 500mg	16	..	6.67	Mintezol MK
THIAMINE HYDROCHLORIDE Tablet 50mg	100	2	4.24 4.26	PT Betamin US Betatabs-50 FM Invite-B NN DH, PR
100mg	100	2	4.79 4.81	PT US Betamin US Betatabs-100 FM Invite-B NN Thiminone LF PR, QE(NQ)
Injection 100mg in 1mL	5	1	4.67	Beta-Sol FM

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
THIETHYLPERAZINE					
Tablet 6.5mg (base)	50	..	4.56	Torecan	SZ
Injection 6.5mg (base) in 1mL	10	..	6.95	Torecan	SZ
Suppositories 6.5mg (base), 6	≠1	..	4.27	Torecan	SZ
THIOGUANINE					
Tablet 40mg	25	1	52.46	Lanvis	BW
THIOPROPAZATE					
Chorea.					
Tablet 5mg	100	1	7.82	Dartalan	SR
THIORIDAZINE					
Chorea; Hyperactive states of organic or toxic delirium; Malignant neoplasia (late stage); Radiation sickness; Severe conduct disorders of children; Major psychoses including:- Major organic psychoses includ- ing arteriopathic dementia; Manic-depressive psychosis; Paranoid states; Schizophrenia; Senile dementia.					
Tablet 10mg	100	1	4.26	Melleril	SZ
25mg	100	1	5.08	Melleril	SZ
50mg	100	1	6.87	Melleril	SZ
100mg	100	1	10.94	Melleril	SZ
Oral Solution 3% (30mg per mL), 30mL	≠1	4	5.83	Melleril	SZ
Injection 25mg per mL, 2mL	10	..	7.32	Melleril	SZ
THIOTEPA					
Injection 15mg (solvent required)	2	1	18.89	LE	
Eye Drops set containing 15mg vial, 2 x 10mL ampoules sterile water, syringe with needle and 15mL dropper bottle	≠1	5	#17.29	LE	

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
THYROXINE SODIUM (BP 1980) Tablet 50 micrograms	100	2	3.84	Oroxine BW Thyroxinal FM
100 micrograms	100	2	3.98	Oroxine BW Thyroxinal FM
200 micrograms	100	2	4.33	Oroxine BW Thyroxinal FM
TICARCILLIN <u>Authority required.</u> Infections where positive bacteriological evidence confirms that ticarcillin is the most appropriate therapeutic agent; Septicaemia, suspected or proven.				
Injection 3g (solvent required)	5	..	61.14 61.17	Ticillin CS Tarcil BR
TIMOLOL Tablet 5mg	100	2	9.92	Blocadren FR
Eye Drops 0.25%, 5mL	#1	6	8.97	Timoptol FR
0.5%, 5mL	#1	6	9.98	Timoptol FR
CAUTION: Timolol eye drops may precipitate bronchospasm in susceptible patients.				
TINIDAZOLE Tablet 500mg	4	..	5.51	Fasigyn PF
TOBRAMYCIN SULPHATE <u>Authority required.</u> Infections where positive bact- eriological evidence confirms that tobramycin is the MOST appropriate antibiotic; Septicaemia, suspected or proven.				
Injection 40mg	5	..	20.78	Nebcin LY
80mg	5	..	31.53	Nebcin LY
TOLAZAMIDE Tablet 250mg	100	2	10.33	Tolinase UP

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
TOLBUTAMIDE Tablet 500mg	100	2	5.22 5.28	Diatol PT Rastinon HP
lg	100	2	8.22	Rastinon HP
TRANEXAMIC ACID <u>Authority required.</u> Hereditary angio-oedema.				
Tablet 500mg	100	..	37.39	Cyklokapron PS
TRANLYCYPROMINE <u>Authority required.</u> Depressive illness resistant to treatment with either tricyclic anti-depressants or electro- convulsive therapy; Phobic states. <u>CAUTION:</u> This drug is a monoamine oxidase inhibitor.				
Tablet 10mg	50	..	6.59	Parnate SK
TRIAMCINOLONE ACETONIDE Alopecia areata; For local intra-articular or peri-articular infiltration; Granulomata, dermal; Keloid; Lichen planus hypertrophic; Lichen simplex chronicus; Lupus erythematosus, chronic discoid; Necrobiosis lipidica; Psoriasis.				
Injection 10mg in 1mL	5	..	11.84	Kenacort-A10 SQ
TRIAMCINOLONE ACETONIDE Cream 0.02%, 45g	#1	..	4.17	Kenalone 0.02% SQ
0.02%, 100g	#1	..	4.73	Aristocort 0.02% LE Kenalone 0.02% SQ
(continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
TRIAMCINOLONE ACETONIDE - cont. Cream 0.05%, 15g	≠1	1	3.79	Aristocort 0.05% Kenalone LE SQ
Ointment 0.02%, 45g	≠1	..	4.17	Kenalone 0.02% SQ
0.02%, 100g	≠1	..	4.73	Aristocort 0.02% Kenalone LE 0.02% SQ
0.05%, 15g	≠1	1	3.79	Aristocort 0.05% Kenalone LE SQ
TRIAMCINOLONE ACETONIDE with NEOMYCIN SULPHATE, GRAMICIDIN and NYSTATIN Ear Drops 0.1%-0.25% (base)- 0.025%-100,000 Units per g, 7.5mL	≠1	2	4.33	Kenacomb Otic SQ
Ear Cream 0.1%-0.25% (base)- 0.025%-500,000 Units in 5g	≠1	2	4.18	Kenacomb Otic SQ
Ear Ointment 0.1%-0.25% (base)- 0.025%-500,000 Units in 5g	≠1	2	4.18	Kenacomb Otic SQ
TRIAMTERENE NOTE: Supplementary potassium may cause fatal hyperkalaemia. Tablet 100mg	50	2	6.63	Dytac SK
TRIFLUOPERAZINE Chorea; Hyperactive states of organic or toxic delirium; Malignant neoplasia (late stage); Radiation sickness; Severe conduct disorders of children; Major psychoses including:- Major organic psychoses includ- ing arteriopathic dementia; Manic-depressive psychosis; Paranoid states; Schizophrenia; Senile dementia. (continued)				

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
TRIFLUOPERAZINE - cont.					
Tablet 1mg	100	1	5.63	Calmazine Stelazine	PT SK
2mg	100	1	6.99	Calmazine Stelazine	PT SK
5mg	100	1	7.51	Calmazine Stelazine	PT SK
Injection 1mg in 1mL	10	..	6.49	Stelazine	SK
TRIGLYCERIDES, MEDIUM CHAIN					
<u>Authority required.</u>					
Patients requiring a ketogenic diet for intractable childhood epilepsy; Proven malabsorption.					
Compound Powder 450g	2	..	27.75	Portagen	MJ
<u>Authority required.</u>					
Cystic fibrosis; Enterokinase deficiency; Intolerance to both milk protein and soya protein; Severe diarrhoea of greater than two weeks duration in infants under the age of four (4) months.					
Lactalbumin Demineralised Powder 400g	2	..	30.69	Alfaré	NJ
Protein Hydrolysate Compound Powder 454g	2	..	30.69	Pregestimil	MJ
TRIMEPAZINE					
Tablet 10mg	50	2	4.33	Vallergan	MB
TRIMETAPHAN					
Injection set containing 250mg and 5mL water for injections	3	..	18.87	Arfonad	RO
TRIMETHOPRIM					
Acute urinary tract infections.					
Tablet 300mg	7	..	5.62	Methoprim Triprim	PT BW

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
TRIMETHOPRIM with SULPHAMETHOXAZOLE Tablet 80mg-400mg	10	..	4.52	Bactrim Septrin Trib	RO BW PT
160mg-800mg	10	..	5.62	Bactrim DS Septrin Forte Trib DS	RO BW PT
Suspension 40mg-200mg per 5mL, 100mL	1	..	5.12	Bactrim Septrin Trib	RO BW PT
TRIMIPRAMINE					
<u>Authority required.</u>					
Endogenous depression where there is an inadequate response to not less than 100mg of trimipramine daily.					
Capsule 50mg	50	..	5.34	Surmontil	MB
TRIMIPRAMINE					
Tablet 25mg	50	2	4.83	Surmontil	MB
TRIOXYSALEN					
Vitiligo.					
Tablet 5mg	100	2	23.31	Trisoralen	PT
TRI-POTASSIUM DI-CITRATO BISMUTHATE COMPLEX					
<u>Authority required.</u>					
Duodenal ulcer, confirmed by radiology, endoscopy or surgery; Gastric ulcer, confirmed by radiology, endoscopy or surgery.					
<u>NOTE:</u> Applications for authority must state the date of barium meal, endoscopy or surgery (procedure must have been within three months of application). Increased maximum quantities and/or repeats will not be authorised.					
<u>CAUTION:</u> Long term bismuth therapy is potentially toxic.					
(continued)					

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
TRI-POTASSIUM DI-CITRATO BISMUTHATE COMPLEX - cont. Tablet 107.7mg (Bi)	112	1	18.89	De-No1	PD
Mixture 156mg (Bi) per 5mL, 500mL	#1	1	13.17	Ulcaron	SH
NOTE: Not more than the maximum quantity and one repeat for either the mixture or the tablet will be available on authority for each proven episode of benign gastric or duodenal ulceration.					
TRIPROLIDINE Tablet 2.5mg	50	2	4.33	Actidil	BW
TYPHOID VACCINE Injection 0.5mL	2	..	5.45	CS	
TYPHUS VACCINE Injection 1mL	2	..	43.23	CS	
UREA Cream 10%, 100g	#1	2	6.59	Aquacare H.P. Aquadrate Calmurid Nutraplus	AG NW PS OL
VANCOMYCIN Endophthalmitis.					
For use in a hospital.					
Injection 500mg (solvent required)	5	..	81.33	Vancocin	LY
VASOPRESSIN TANNATE Oily Injection 5 Units in 1mL	10	1	27.85	Pitressin Tannate	PD

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
VERAPAMIL HYDROCHLORIDE					
<u>CAUTION:</u> The myocardial depressant effects of this drug and of beta-blocking drugs are additive.					
Angina; Cardiac arrhythmias; Hypertension.					
Tablet 40mg	100	2	8.83 8.96	Verpamil Cordilox Isoptin	PT SC KN
80mg	100	2	12.81 12.93	Verpamil Cordilox Isoptin	PT SC KN
Cardiac arrhythmias.					
Injection 5mg in 2mL	5	..	6.02	Cordilox Isoptin	SC KN
VIDARABINE					
Eye infections caused by herpes simplex virus where idoxuridine has proved ineffective.					
Eye Ointment 3%, 3.5g	≠1	..	11.29	Vira A	PD
VINBLASTINE					
Injection 10mg (solvent required)	2	..	47.51	Velbe	LY
VINCRIStINE					
Injection set containing 1mg and 10mL solvent	5	..	101.83	Oncovin	LY
5mg and 10mL solvent	1	..	87.43	Oncovin	LY
VITAMIN SUPPLEMENT					
<u>Authority required.</u>					
Galactosaemia; Persistent monosaccharide intolerance; Phenylketonuria; Tyrosinosis, hereditary.					
Tablet	100	..	5.48	Ketovite	ST
Liquid 100mL	≠1	..	4.07	Ketovite	ST

Name, Restriction Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer	
WARFARIN					
Tablet 1mg	50	2	5.54	Coumadin Marevan	DT GL
2mg	50	2	5.76	Coumadin	DT
2.5mg	50	2	5.89	Coumadin	DT
3mg	50	2	5.69	Marevan	GL
5mg	50	2	5.96	Coumadin Marevan	DT GL
7.5mg	50	2	6.76	Coumadin	DT
10mg	50	2	7.94	Coumadin	DT
WATER FOR INJECTIONS					
Injection 2mL	5	3	3.79	BL,BT,BZ,SI	
5mL	5	3	3.94	BL,BT,BZ,SI	
10mL	5	3	4.18	BL,BT,BZ,SI	
WOOL ALCOHOLS					
Ointment 100g	¢1	1	3.92	Eucerin	SN
WOOL FAT, HYDROUS					
50g tube or jar	¢1	..	4.06	SI	
ZINC with PHENYLEPHRINE					
Eye Drops 0.25%-0.12%, 15mL	¢1	2	4.18	Prefrin-Z Zincfrin	AG AQ
ZINC OXIDE					
Compound Ointment 50g	¢1	1	4.39	Anusol	WW
Compound Suppositories, 12	¢1	1	4.39	Anusol	WW

Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
DEXTRAN 40				
10% with 5% anhydrous glucose, 500mL	12	..	169.89	Lomodex FC
10% with 5% glucose, 500mL	12	..	178.43	Rheomacrodex PS
10% with 0.9% sodium chloride, 500mL	12	..	178.43	Rheomacrodex PS
DEXTRAN 70				
6% with 5% glucose, 500mL	12	..	114.32	Macrodex PS
6% with 0.9% sodium chloride, 500mL	12	..	114.32	Macrodex PS
ELECTROLYTE REPLACEMENT SOLUTION 1L	2	1	9.59	Normosol R AB Plasma - Lyte 148 TV
GLUCOSE				
5%, 1L	5	1	17.53	AB,TV
10%, 1L	5	1	19.88	AB,TV
20%, 1L	2	1	9.59	AB,TV
25%, 1L	2	1	9.59	AB,TV
50%, 500mL	2	1	8.31	AB
MANNITOL				
10%, 1L	1	1	6.14	AB
20%, 500mL	1	1	6.14	AB
SODIUM BICARBONATE				
4.2%, 500mL	1	1	5.69	AB
SODIUM CHLORIDE				
0.9%, 1L	5	1	17.53	AB,TV,VF(N)
3%, 1L	2	1	9.59	AB,TV
5%, 1L	2	1	9.59	TV
SODIUM CHLORIDE COMPOUND BPC 1959 1L	4	1	16.45	AB,TV

Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
SODIUM CHLORIDE and GLUCOSE 0.9%-5%, 1L	2	1	9.59	AB, TV
0.45%-2.5%, 500mL	5	1	17.53	AB, TV
0.225%-3.75%, 500mL	5	1	17.53	AB, TV
0.18%-4%, 1L	5	1	17.53	AB, TV
0.18%-4.3%, 1L	5	1	17.88	AB
SODIUM LACTATE (Solution 1/6 Molar) 1L	5	1	20.43	VF
SODIUM LACTATE COMPOUND 1L	5	1	17.53	AB, TV
SODIUM LACTATE COMPOUND and ANHYDROUS GLUCOSE 5%, 1L	2	1	9.59	AB, TV
STANDARD MAINTENANCE FLUID 500mL	6	..	18.39	AB

SECTION 3 - SCHEDULE OF BENEFITS

Preparations Available for Colostomy
and Ileostomy Use

Preparations Available for Use by Paraplegic
and Quadriplegic Patients

PREPARATIONS AVAILABLE FOR COLOSTOMY AND ILEOSTOMY USE
(Prescriptions to be endorsed "S.P.")

2

Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
ACRYLIC RESIN Solution 125g Aerosol Spray	≠1	..	9.64	Nobecutane AP
BENZOIN Compound Tincture 35%, 167mL Aerosol Spray	≠1	..	6.31	EG
BUTYL MONOESTER POLYMER with ETHANOL Paste 60g	≠1	..	8.64	Stomahesive SQ
BUTYL MONOESTER POLYMER with ISOPROPYL ALCOHOL Protective Dressing Aerosol 120g	≠1	..	11.26	Skin-Prep DY
Solution 59mL	≠1	..	9.13	Skin-Prep DY
Wipes, 50	≠1	..	12.76	Skin-Prep DY
CARMELLOSE SODIUM with PECTIN and GELATIN Paste 16.7%-16.7%-16.7%, 15g	≠1	..	4.73	Orabase SQ
Powder 33.3%-33.3%-33.3%, 15g	≠1	..	4.61	Orahesive SQ
CHARCOAL, ACTIVATED Tablet 300mg	500	1	15.04	Char-Bons QE(NQ),TO LF
CHLORAMINE Deodorant Tablet 120mg	500	..	6.59	Klortee PT
Powder 25g	≠1	4	4.06	Klortee PT
DEODORANT CONCENTRATE Liquid 15mL	≠1	..	4.68 4.69	Zerodor ZR Odortrol LA
0.5fl oz	≠1	..	4.69	Banish DY
DEODORANT DETERGENT SOLUTION Solution, Lauryldimethylbenzyl ammonium chloride 12.5g, "TERIC" N8, 125g in 500mL	≠1	..	5.76	TAGG EG
DIMETHICONE Solution 10%, 180mL Aerosol Spray	≠1	..	6.31	Silicon Skin Spray EG

(continued)

Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
DIMETHICONE - cont. Cream 10%, 50g 10%, 75g See Section 2				
ISOPROPYL MONOESTER POLYMER with ISOPROPYL ALCOHOL Adhesive Protective Gel 28.35g	#1	..	6.11	Skin Gel HO
POLYISOBUTYLENE Compound Adhesive Wafers, 5	#1	5	12.03	Hollihesive Skin Barrier HO
Compound Adhesive Wafers with Adhesive Discs, 5	#1	5	13.19 13.96	BH Stomahesive Set SQ
POLYVINYLPIRROLIDONE and VINYL ACETATE COPOLYMER Aerosol Spray 6%, 121mL	#1	..	6.54	Spray-On Bande EG
STERCULIA (Indian Tragacanth; Gum Karaya) Paste 127.6g	#1	..	8.89	Karaya Paste HO
Powder 71g	#1	..	7.73	DY
Discs, 12	#1	5	8.94	Coloplast BH, DY ST
Discs, Compound, 10	#1	5	11.39	Colly-seels DY
Squares, 6	#1	5	21.61	BH
SURGICAL CEMENT Skin Bond Adhesive 4fl oz Solvent 200mL 227mL 240mL 250mL See Section 2				

PREPARATIONS AVAILABLE FOR USE BY PARAPLEGIC AND QUADRIPLEGIC PATIENTS
4 (Prescriptions to be endorsed "S.P.")

Name, Manner of Administration and Form	Max. Qty	No. of Rpts	Price \$	Proprietary Name and Manufacturer
DEODORANT DETERGENT SOLUTION Solution, Lauryldimethylbenzyl ammonium chloride 12.5g, "TERIC" N8, 125g in 500mL	#1	..	5.76	TAGG EG
BASSORIN with FRANGULA BARK Granules 47.3%-8.3%, 250g				
See Section 2				
BISACODYL Tablet 5mg				
Suppositories 10mg, 10				
See Section 2				
DIMETHICONE Cream 10%, 50g				
10%, 75g				
See Section 2				
DIOCTYL SODIUM SULPHOSUCCINATE WITH BISACODYL Suppositories 100mg-10mg, 5				
See Section 2				
SURGICAL CEMENT Skin Bond Adhesive 4fl oz				
Solvent 200mL				
227mL				
240mL				
250mL				
See Section 2				

SECTION 4

SCHEDULE OF BENEFITS DRUGS AVAILABLE FOR EXTEMPORANEOUS PREPARATIONS

Drug	Drug
Acetone BP (use as additive only) ACIDS Acetic (6%) BP Acetic (33%) BP Ascorbic BP (use as ingredient of Mixtures of Ferrous Sulphate APF and PL) Benzoic BP Boric Crystal BP (use as additive only) Boric Powder BP (use as additive only) Citric Monohydrate BP Hydrochloric BP Hydrochloric Dilute BP Lactic BP Oleic BP Salicylic BP Trichloroacetic BP Acriflavine BPC 63 Adrenaline BP (may only be prescribed in eye drops) Alum BP Aminophylline BP Ammoniated Mercury BP 73 Aspirin BP Atropine Sulphate BP Beeswax White BP Bentonite BP, sterilised Benzocaine BP Borax BP (use as additive only) Calamine BP Calcium Hydroxide BP Cetomacrogol Emulsifying Wax BP Cetostearyl Alcohol BP Cetrimide BP Chlorbutol BP Chlorhexidine Acetate BP (use as additive only) Chlorinated Lime BP Chlorocresol BP Chloroform BP (use as additive only) Clioquinol BP Cocaine Hydrochloride BP	Codeine Phosphate BP Collodion Flexible BP CREAMS Aqueous APF Aqueous BP Calamine Oily APF Cetomacrogol Aqueous APF Cetomacrogol Aqueous APF 74 Cetrimide BP Cetrimide Aqueous APF Cetrimide Aqueous APF 74 Zinc BP Zinc Oily APF Crystal Violet BP Dithranol BP Emulsifying Wax BP Ephedrine Hydrochloride BP (may only be prescribed in nasal instillations) Ethanol (90%) BP (use as additive only) Ethanol (96%) BP (use as additive only) Ether Solvent BP (use as additive only) EXTRACTS Hyoscyamus Liquid BPC 73 Liquorice Liquid BP Ferrous Sulphate BP Ferrous Sulphate Dried BP Glucose BP (use as additive only) GLYCERIN Ichthammol BPC 73 Glycerol BP GUMS Acacia BP Tragacanth BP Homatropine Hydrobromide BP Ichthammol BP INFUSION Gentian Compound Concentrated BP 1 in 10 Iodine BP

Drug	Drug
Kaolin, Light or Kaolin, Light (Natural) BP	OINTMENTS
Lactose BP	Ammoniated Mercury BP 73
Lignocaine Hydrochloride BP	Benzoic Acid Compound APF
LINIMENTS	Emulsifying BP
Methyl Salicylate BP	Hydrous BP (white)
Methyl Salicylate Compound APF	Hydrous BP (yellow)
Turpentine BP	Methyl Salicylate BP
LOTION	Methyl Salicylate Compound
Calamine BP	APF 34
Magenta BPC 73	Paraffin BP (white)
MAGNESIUM	Paraffin BP 68 (yellow)
Carbonate Light BP	Salicylic Acid APF
Sulphate BP	Salicylic Acid BP
(may only be prescribed for other than oral use)	Simple BP (white)
Sulphate Dried BP	Simple BP (yellow)
(may only be prescribed for other than oral use)	Sulphur BP
Trisilicate BP	Wool Alcohols BP (white)
Menthol BP	Wool Alcohols BP (yellow)
Methyl Salicylate BP	Zinc BP
Morphine Hydrochloride BP	Zinc and Castor Oil BP
MUCILAGES	Paint Magenta APF
Acacia APF	Paraffin Hard BP
Tragacanth APF	Paraffin Liquid BP
Tragacanth BPC 73	(may only be prescribed for other than oral use)
OILS	Paraffin Liquid Light BPC 63
Arachis BP	Paraffin Soft White BP
(use as additive only)	Paraffin Soft Yellow BP
Cade BPC 73	PASTES
Castor BP	Zinc Compound BP
(use as additive only)	Zinc and Salicylic Acid BP
Coconut BP	Phenobarbitone BP
Eucalyptus BP	(may only be prescribed for the treatment of epilepsy)
(use as additive only)	Phenobarbitone Sodium BP
Lavender Spike BPC 68	(may only be prescribed for the treatment of epilepsy)
Maize BP	Phenol BP
(use as additive only)	(not available for ear drops)
Olive BP 73	Phenol Liquefied BP
(use as additive only)	(not available for ear drops)
Peppermint BP	Phenoxyethanol BP
(use as additive only)	Pilocarpine Hydrochloride BP
Pumilio Pine BP	Pilocarpine Nitrate BP
Siberian Fir BPC 49	Podophyllum Resin BP
Turpentine BP	POTASSIUM
(use as additive only)	Citrate BP
	Iodide BP
	Permanganate BP

Drug	Drug
POWDER Tragacanth Compound BP Propylene Glycol BP Resorcinol BP Silver Nitrate BP SOAPS Ethereal APF 55 Soft BP SODIUM Acid Phosphate BP Bicarbonate BP Chloride BP Citrate BP Phosphate BP Thiosulphate BP (use as additive only) SOLUTIONS Aluminium Acetate BPC 73 Benzoic Acid BP Calcium Hydroxide BP Chlorhexidine Gluconate BP (use as additive only) Coal Tar BP Formaldehyde BP Iodine Aqueous BP Iodine Weak BP Morphine Hydrochloride BPC 73 Sodium Chloride BP SPIRITS Ammonia Aromatic BP Camphor Compound APF Chloroform BP Lemon BP Methylated Industrial BP (use as additive only) Squill Elixir BP Squill Oxymel BP Starch BP Sulphur Precipitated BP Sulphurated Potash BPC 73 SYRUPS Lemon APF Orange APF Orange BP Pholcodine Citrate BPC 59 (use as additive only) Raspberry BP Red APF Syrup BP Tolu BP	Talc Purified BP, sterilised Tar Coal BP Tar Coal Prepared BP 73 Theophylline BP Thymol BP Thymol Mouth Wash Compound APF TINCTURES Belladonna BP Benzoin Compound BP Ipecacuanha BP Lobelia Ethereal BPC 73 Opium BP Orange BP Stramonium BP Titanium Dioxide BP Triethanolamine BP WATERS Anise Concentrated BP 1 in 40 (use as additive only) Chlorbutol APF 55 Chloroform Concentrated APF 1 in 40 For Injections BP (extemporaneously prepared eye drops and eye lotions) Peppermint Concentrated APF 1 in 40 (use as additive only) Purified BP Wool Alcohols BP Wool Fat BP Wool Fat Hydrous BP ZINC Oxide BP Sulphate BP

TABLE OF MAXIMUM QUANTITIES
AND NUMBER OF REPEATS FOR
EXTEMPORANEOUS PREPARATIONS

Preparation	Maximum Quantity	No. of Repeats
Creams	100g	1
Dusting Powders	100g	1
Ear Drops	15mL	2
Elixirs	100mL	4
Eye Drops of Cocaine	15mL	..
Eye Drops of Pilocarpine	15mL	6
Eye Drops, Other	15mL	2
Eye Lotions	200mL	1
Gargles	200mL	4
Glycerins	100mL	1
Inhalations	50mL	1
Inhalations, Solid	4g	1
Linctuses	100mL	2
Liniments	100mL	1
Lotions	200mL	2
Mixtures	200mL	4
Mixtures for Children	100mL	4
Mouth Washes	200mL	1
Nasal Instillations	15mL	2
Ointments and Waxes	100g	1
Paints	25mL	1
Pastes of Cocaine	25g	..
Pastes, Other	100g	1
Powders for Internal Use	100g	2
Powders, Irrigation	100g	1
Soaps	200mL	1
Solutions	200mL	2
Syrups	100mL	4
Tinctures	25mL	1

SECTION 5 — PRESCRIBERS' LIST

PREScription

CREAMS

(Maximum Quantity 100g and 1 Repeat)

ALUMINIUM ACETATE, OILY (APF)

[illegible]

AQUEOUS (APF, BP)

[illegible]

BUFFERED, AQUEOUS (APF)

Sodium Phosphate	....	....	....	....	....	....	....	2.5	g
Citric Acid Monohydrate		....	....	....	....	....	....	500	mg
Chlorocresol	....	....	....	....	....	....	....	100	mg
Glycerol	....	....	....	....	....	....	....	5	mL
Emulsifying Ointment	....	....	....	....	....	....	....	30	g
Purified Water, freshly boiled and cooled to						....	....	100	g

CALAMINE, AQUEOUS (APF, BP)

[illegible]

CALAMINE, OILY (APF)

[illegible]

 PRESCRIPTION

 CREAMS — *continued*

CETOMACROGOL, AQUEOUS (APF)

Cetomacrogol Emulsifying Wax	....	....	....	....	....	15	g
Liquid Paraffin	....	....	....	....	....	10	g
White Soft Paraffin	....	....	....	....	....	10	g
Chlorocresol	....	....	....	....	....	100	mg
Propylene Glycol	....	....	....	....	....	5	mL
Purified Water, freshly boiled and cooled to	....	....	....	....	....	100	g

CETRIMIDE, AQUEOUS (APF)

Cetrimide	....	....	....	....	....	500	mg
Chlorocresol	....	....	....	....	....	100	mg
Cetostearyl Alcohol	....	....	....	....	....	5	g
Liquid Paraffin	....	....	....	....	....	50	g
Purified Water, freshly boiled and cooled to	....	....	....	....	....	100	g

CHLORHEXIDINE, AQUEOUS (APF) (Chlorhexidine 1% BP)

Chlorhexidine Gluconate Solution	....	....	....	....	....	5	mL
Cetomacrogol Emulsifying Wax	....	....	....	....	....	25	g
Liquid Paraffin	....	....	....	....	....	10	g
Purified Water, freshly boiled and cooled to	....	....	....	....	....	100	g

COAL TAR and ZINC, OILY (APF)

Coal Tar, BP	....	....	....	....	....	1	g
Castor Oil	....	....	....	....	....	1	g
Zinc Cream Oily, APF	....	....	....	....	....	98	g

COLD (APF)

White Beeswax	....	....	....	....	....	17	g
Liquid Paraffin	....	....	....	....	....	45	g
Borax	....	....	....	....	....	1	g
Purified Water, freshly boiled and cooled	....	....	....	....	....	37	mL

GLYCEROL, OILY (APF)

Glycerol	....	....	....	....	....	20	g
Calcium Hydroxide Solution	....	....	....	....	....	32	mL
Arachis Oil	....	....	....	....	....	22	g
Wool Fat	....	....	....	....	....	26	g

ICHTHAMMOL and ZINC, OILY (APF)

Ichthammol	....	....	....	....	....	5	g
Wool Fat	....	....	....	....	....	15	g
Zinc Cream Oily, APF	....	....	....	....	....	80	g

PREScription

CREAMS — *continued*

OILY (APF)

Wool Alcohols Ointment, APF	....	....	....	....	....	50	g
Phenoxyethanol	....	....	....	....	....	1	g
Dried Magnesium Sulphate	....	....	....	....	....	500	mg
Purified Water, freshly boiled and cooled to	....	....	....	....	....	100	g

SALICYLIC ACID and RESORCINOL, AQUEOUS (APF)

[illegible]

SALICYLIC ACID and SULPHUR, AQUEOUS (APF)

(Salicylic Acid and Sulphur BP)

[illegible]

ZINC, OILY (APF)

[illegible]

ZINC, WEAK (PL)

[illegible]

DUSTING POWDER

(Maximum Quantity 100g and 1 Repeat)

ZINC, STARCH and TALC (APF)

[illegible]

(Maximum Quantity 15mL and 2 Repeats)

Aluminium Acetate Solution	...	...	...	...	...	9	mL
Purified Water, freshly boiled and cooled to	...	...	...	...	...	15	mL

[illegible][illegible][illegible][illegible]

Ethanol (90 per cent)							7·5	mL
Purified Water, freshly boiled and cooled to							15	mL

(Maximum Quantity 50 mL and 1 Repeat)

Benzoin Tincture, Compound						50	mL

Menthol		1	g
Oil of Siberian Fir		2·5	mL
Benzoin Tincture, Compound to		50	mL

CALAMINE, OILY (APF, BP)

[illegible][illegible][illegible]

(Maximum Quantity 200 mL and 4 Repeats)

[illegible][illegible]

 PRESCRIPTION

MIXTURES — *continued*
GENTIAN, ALKALINE (APF, BP)

Concentrated Compound Gentian Infusion	....	....	....	1	mL
Sodium Bicarbonate	....	....	....	500	mg
Concentrated Chloroform Water	....	....	....	0.25	mL
Purified Water to	....	....	....	10	mL

IPECACUANHA and SQUILL (APF)

Synonym: Cough Mixture

Ipecacuanha Tincture	....	....	....	0.25	mL
Compound Camphor Spirit	....	....	....	1	mL
Tolu Syrup	....	....	....	1	mL
Squill Oxymel	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.15	mL
Concentrated Anise Water	....	....	....	0.15	mL
Purified Water to	....	....	....	10	mL

KAOLIN and OPIUM (APF)

Light Kaolin or Light Kaolin (Natural)	....	....	....	2.5	g
Alum	....	....	....	10	mg
Opium Tincture	....	....	....	0.5	mL
Concentrated Chloroform Water	....	....	....	0.25	mL
Purified Water to	....	....	....	10	mL

POTASSIUM CITRATE (APF)

Potassium Citrate	....	....	....	2	g
Citric Acid Monohydrate	....	....	....	400	mg
Lemon Syrup, APF	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.2	mL
Purified Water to	....	....	....	10	mL

POTASSIUM CITRATE and SODIUM BICARBONATE (APF)

Potassium Citrate	....	....	....	1	g
Sodium Bicarbonate	....	....	....	750	mg
Orange Syrup, APF	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	0.2	mL
Purified Water to	....	....	....	10	mL

MIXTURES — continued

POTASSIUM IODIDE and STRAMONIUM, COMPOUND (APF)

Synonym: Lobelia and Stramonium Mixture

[illegible]

SODIUM CITRATE (APF)

[illegible]

NASAL INSTILLATIONS

(Maximum Quantity 15 mL and 2 Repeats)

EPHEDRINE (APF)

[illegible]

GLUCOSE and GLYCEROL (APF)

[illegible]

OINTMENTS

(Maximum Quantity 100 g and 1 Repeat)

BENZOIC ACID, COMPOUND (APF, BP)

Benzoic Acid in fine powder	....	....	....	....	....	6	g
Salicylic Acid in fine powder	....	....	....	....	....	3	g
Emulsifying Ointment	....	....	....	....	....	91	g

PREScription

OINTMENTS — *continued*

EMULSIFYING (APF, BP)

[illegible]

RESORCINOL and SULPHUR, COMPOUND (APF)

[illegible]

SALICYLIC ACID (APF)

[illegible]

SIMPLE (APF, BP)

(White Simple Ointment)

[illegible]

ZINC and CASTOR OIL (APF, BP)

[illegible]

ZINC OXIDE (APF)

(Zinc BP)

[illegible]

PREScription

PAINTS

(Maximum Quantity 25 mL and 1 Repeat)

ICHTHAMMOL (APF)

[illegible]

MAGENTA (APF)

[illegible]

PODOPHYLLIN (PL)

[illegible]

PODOPHYLLIN, COMPOUND (APF, BP)

[illegible]

SALICYLIC ACID (APF)

[illegible]

PASTES

(Maximum Quantity 100 g and 1 Repeat)

COAL TAR and ZINC (APF)

[illegible]

DITHRANOL (APF)

[illegible]

PREScription

PASTES — *continued*

TITANIUM DIOXIDE (APF)

[illegible]

ZINC, COMPOUND (APF, BP)

[illegible]

ZINC and SALICYLIC ACID (APF)

[illegible]

SECTION 5 — PRESCRIBERS' LIST CHILDREN'S SECTION

PRESCRIPTION

MIXTURES

(Maximum Quantity 100mL and 4 Repeats)

ASPIRIN (APF)

Aspirin	....	....	....	....	....	....	....	....	150	mg
Compound Tragacanth Powder	....	....	....	....	....	....	....	....	100	mg
Raspberry Syrup	....	....	....	....	....	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	....	....	....	....	....	0.1	mL
Purified Water to	....	....	....	....	....	....	....	....	5	mL

BELLADONNA (APF)

Belladonna Tincture	....	....	....	....	....	....	....	....	0.1	mL
Orange Syrup, APF	....	....	....	....	....	....	....	....	1	mL
Glycerol	....	....	....	....	....	....	....	....	1	mL
Benzoic Acid Solution	....	....	....	....	....	....	....	....	0.1	mL
Purified Water to	....	....	....	....	....	....	....	....	5	mL

FERROUS SULPHATE (APF)

Ferrous Sulphate	....	....	....	....	....	....	....	....	100	mg
Ascorbic Acid	....	....	....	....	....	....	....	....	5	mg
Orange Syrup, APF	....	....	....	....	....	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	....	....	....	....	....	0.1	mL
Purified Water to	....	....	....	....	....	....	....	....	5	mL

IPECACUANHA and SQUILL (APF)

Ipecacuanha Tincture	....	....	....	....	....	....	....	....	0.1	mL
Compound Camphor Spirit	....	....	....	....	....	....	....	....	0.25	mL
Squill Oxymel	....	....	....	....	....	....	....	....	1	mL
Purified Water to	....	....	....	....	....	....	....	....	5	mL

POTASSIUM CITRATE (APF)

Potassium Citrate	....	....	....	....	....	....	....	....	1	g
Citric Acid Monohydrate	....	....	....	....	....	....	....	....	200	mg
Lemon Syrup, APF	....	....	....	....	....	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	....	....	....	....	....	0.1	mL
Purified Water to	....	....	....	....	....	....	....	....	5	mL

CHILDREN'S SECTION

 PRESCRIPTION

MIXTURES — *continued*
POTASSIUM IODIDE (APF)

Potassium Iodide	....	....	....	....	....	....	....	....	100	mg
Liquorice Liquid Extract	....	....	....	....	....	....	....	....	0.25	mL
Aromatic Ammonia Spirit	....	....	....	....	....	....	....	....	0.1	mL
Concentrated Chloroform Water	....	....	....	....	....	....	....	....	0.1	mL
Purified Water to	....	....	....	....	....	....	....	....	5	mL

SODIUM CITRATE (APF)

Sodium Citrate	....	....	....	....	....	....	....	....	1	g
Citric Acid Monohydrate	....	....	....	....	....	....	....	....	200	mg
Lemon Syrup, APF	....	....	....	....	....	....	....	....	1	mL
Concentrated Chloroform Water	....	....	....	....	....	....	....	....	0.1	mL
Purified Water to	....	....	....	....	....	....	....	....	5	mL

PROPRIETARY INDEX

PART 1 PROPRIETARY NAMES INDEX

PART 2 TRADE NAMES INDEX

ABBREVIATIONS

- (C & I) Preparations available for colostomy and ileostomy use
- (P & Q) Preparations available for use by paraplegic and quadriplegic patients

Proprietary Name	Manufacturer	Name
Abbccillin	AB	Penicillin Products
Abbccillin-V	AB	Phenoxymethylpenicillin
Abbccillin-VK	AB	Phenoxymethylpenicillin
Acetopt	SI	Sulphacetamide Sodium
Achromycin	LE	Tetracycline
Achromycin V	LE	Tetracycline (Buffered)
Achrostatin	LE	Tetracycline with Nystatin
Actacode	SI	Codeine Phosphate
Actal	WL	Aluminium Hydroxide Dried
Actidil	BW	Triprolidine
Actrapid M.C. Novo	NO	Insulin Neutral
Actuss	SI	Pholcodine
Adacor	NN	Hydrocortisone
Adalat	BN	Nifedipine
Adaphol	NN	Pholcodine
Adaquin	NN	Quinine Sulphate
Adasone	NN	Prednisone
Adnisolone	NN	Prednisolone
Adroyd	PD	Oxymetholone
Aerocortin	BW	Polymyxin B Sulphate with Neomycin and Hydrocortisone
Aerosporin	BW	Polymyxin B Sulphate
Akineton	KN	Biperiden
Albalon Liquifilm	AG	Naphazoline Hydrochloride
Albay Bee Venom	BN	Insect Allergen Extract - Honey Bee Venom
Albay Wasp Venom	BN	Insect Allergen Extract - Wasp Venom Protein
Albumaid XP	SJ	Protein Hydrolysate Formula without Phenylalanine
Aldactone	SR	Spironolactone
Aldecin	SH	Beclomethasone Dipropionate
Aldomet	MK	Methyldopa
Aldomet-M	MK	Methyldopa
Alfaré	NT	Triglycerides, Medium Chain
Alinol	US	Allopurinol
Alkeran	BW	Melphalan
Allegron	DL	Nortriptyline
Allergex	PT	Chlorpheniramine
Almacarb	GL	Aluminium Hydroxide and Magnesium Carbonate Co-Dried Gel
Alodorm	AF	Nitrazepam
Alphapress 25	AF	Hydralazine Hydrochloride
Alphapress 50	AF	Hydralazine Hydrochloride
Alucone	DH	Aluminium Hydroxide with Magnesium Hydroxide
Aludrox	WY	Aluminium Hydroxide with Magnesium Hydroxide
Alupent	BY	Orciprenaline
Alusorb	DH	Aluminium Hydroxide
Ames-BG	AM	Glucose Indicator - Blood
Aminogran F.S.	GL	Amino Acid Formula without Phenylalanine
Aminogran M.M.	GL	Mineral Mixture
Aminopt	SI	Aminacrine Hydrochloride
Amitrip	PT	Amitriptyline
Amizide	PT	Hydrochlorothiazide with Amiloride
Amoxil	BR	Amoxycillin
Amphojel	WY	Aluminium Hydroxide

Proprietary Name	Manufacturer	Name
Amphotabs	WY	Aluminium Hydroxide Dried
Ampicyn	PT	Ampicillin
Amytal Sodium	LY	Amylobarbitone Sodium
Anapolon	SD	Oxymetholone
Anatensol	SQ	Fluphenazine
Ancolan	GL	Meclozine
Ancotil	RO	Flucytosine
Angilol	BM	Propranolol
Anginine Stabilised	BW	Glyceryl Trinitrate
Anovlar	SC	Norethisterone Acetate with Ethinyloestradiol
Antadine	DT	Amantadine Hydrochloride
Anti-Naus	PT	Prochlorperazine
Antipres	PT	Guanethidine
Antipres M	PT	Guanethidine
Anti-Spas	PT	Benzhexol
Antistine Privine	ZY	Antazoline with Naphazoline
Anturan	CG	Sulphinpyrazone
Anusol	WW	Zinc Oxide
Apresoline	CG	Hydralazine Hydrochloride
Aprinox	BT	Bendrofluazide
Aprinox-M	BT	Bendrofluazide
Aptin	AP	Alprenolol
Aquacare H.P.	AG	Urea
Aquacillin	FA	Procaine Penicillin
Aquadrate	NW	Urea
Aquamox	LE	Quinethazone
Arfonad	RO	Trimetaphan
Aristocort 0.02%	LE	Triamcinolone Acetonide
Aristocort 0.05%	LE	Triamcinolone Acetonide
Artane	LE	Benzhexol
Arterioflexin	PT	Clofibrate
Arthrexin	AF	Indomethacin
Ascabiol	MB	Benzyl Benzoate
Ascorb "50"	PT	Ascorbic Acid
Aspalgin	FM	Codeine Phosphate with Aspirin
A.T.10	WL	Dihydrotachysterol
Atrobel	FM	Belladonna Alkaloids
Atrobel FORTE	FM	Belladonna Alkaloids
Atromid-S	IC	Clofibrate
Atropt	SI	Atropine Sulphate
Atrovent	BY	Ipratropium Bromide
Aureomycin	LE	Chlortetracycline
Austramycin	CS	Tetracycline
Austramycin-V	CS	Tetracycline (Buffered)
Austrapen	CS	Ampicillin
Austrapen Forte	CS	Ampicillin
Austrastaph	CS	Cloxacillin
Avil	HP	Pheniramine
Avlosulfon	IC	Dapsone
Avomine	MB	Promethazine Theoclate
Azide	FM	Chlorothiazide
Bactrim	RO	Trimethoprim with Sulphamethoxazole
Bactrim DS	RO	Trimethoprim with Sulphamethoxazole
B.A.L.	BT	Dimercaprol
Banish	DY	Deodorant Concentrate (C & I)
Baycaron	BN	Mefruside

Proprietary Name	Manu- fac- turer	Name
Becotide	GL	Beclomethasone Dipropionate
Becotide Rotacaps	GL	Beclomethasone Dipropionate
Benadryl	PD	Diphenhydramine
Benemid	FR	Probenecid
Benzemul	MG	Benzyl Benzoate
Benzide	PT	Bendrofluazide
Benzide M	PT	Bendrofluazide
Benzotran	PT	Oxazepam
Berotec	BY	Fenoterol Hydrobromide
Betacard	BR	Alprenolol
Betaloc	AP	Metoprolol
Betamin	US	Thiamine Hydrochloride
Betatabs-50	FM	Thiamine Hydrochloride
Betatabs-100	FM	Thiamine Hydrochloride
Beta Sol	FM	Thiamine Hydrochloride
Betnovate 1/5	GL	Betamethasone Valerate
Betnovate 1/2	GL	Betamethasone Valerate
Bi-Chinine	DH	Quinine Bisulphate
Bicillin All Purpose	WY	Benzathine Penicillin Compound
Biphasil 21	WY	Levonorgestrel with Ethinyloestradiol
Biphasil 28	WY	Levonorgestrel with Ethinyloestradiol
Bi-Prin	BT	Aspirin
Biquin	NN	Quinine Bisulphate
Bi-Quinate	US	Quinine Bisulphate
Bisalax	PT	Bisacodyl
Bitard-2	CS	Insulin Biphasic
Bleph 10	AG	Sulphacetamide Sodium
Blocadren	FR	Timolol
BM-Test-BG	BO	Glucose Indicator - Blood
BM-Test-Glycemie 20-800	BO	Glucose Indicator - Blood
Brevinor	SD	Norethisterone with Ethinyloestradiol
Brevinor-1	SD	Norethisterone with Ethinyloestradiol
Bricanyl	AP	Terbutaline Sulphate
Brinaldix	SZ	Clopamide
Brondecon	WW	Choline Theophyllinate with Guaiphenesin
Brondecon-PD	PD	Choline Theophyllinate
Brondecon Elixir-PD	PD	Choline Theophyllinate
Bronkephrine	WL	Ethylnoradrenaline
Brufen	BT	Ibuprofen
Bufferin	BC	Aspirin
Burinex	AP	Bumetanide
Buscopan	BY	Hyoscine Butylbromide
Cafergot	SZ	Ergotamine Tartrate with Caffeine
Cafergot PB	SZ	Ergotamine Tartrate with Caffeine, Itobarbitone and Belladonna Alkaloids
Calciparine	DF	Heparin Calcium
Calcium Disodium Versenate	RK	Sodium Calciumedetate
Calcium Sandoz	SZ	Calcium Gluconate
Calmazine	PT	Trifluoperazine
Calmurid	PS	Urea
Camcolit	NE	Lithium Carbonate
Campholinct	DH	Camphor Compound

Proprietary Name	Manufacturer	Name
Canesten	BN	Clotrimazole
Canesten 1	BN	Clotrimazole
Canesten 3	BN	Clotrimazole
Capoten	SQ	Captopril
Caprin	CS	Heparin Calcium
Captol	PT	Oxprenolol
Capurate-100	FM	Allopurinol
Capurate-300	FM	Allopurinol
Carbapen	CS	Carbenicillin
Carbolith	DH	Lithium Carbonate
Cardinol	PT	Propranolol
Cardophyllin	HA	Aminophylline
Cardoquin	NN	Quinidine Sulphate
Catapres	BY	Clonidine
Ceetamol	PT	Paracetamol
Celestone	SH	Betamethasone
Celestone	SH	Betamethasone Acetate with
Chronodose		Betamethasone Sodium Phosphate
Celestone-M	SH	Betamethasone Valerate
Celestone-V	SH	Betamethasone Valerate
Half Strength		
Celontin	PD	Methsuximide
Ceporacin	GL	Cephalothin Sodium
Char-Bons	LF	Charcoal, Activated (C & I)
Chinine	DH	Quinine Sulphate
Chlomin	US	Chloramphenicol
Chloralix	RK	Chloral Hydrate
Chloramin	LF	Chlorpheniramine
Chloromycetin	PD	Chloramphenicol
Chloromycetin	PD	Chloramphenicol
Palmitate		
Chloromycetin	PD	Chloramphenicol
Succinate		
Chloromyxin	PD	Chloramphenicol with Polymyxin B
Chloroptic	AG	Chloramphenicol
Chloroquin	PT	Chloroquine
Chlorsig	SI	Chloramphenicol
Chlorvescent	PT	Potassium Chloride
Chlotride	FR	Chlorothiazide
Choledyl	WW	Choline Theophyllinate
Cidomycin	RL	Gentamicin Sulphate
Cilicaine	SI	Procaine Penicillin
Cilicaine V	SI	Phenoxymethylpenicillin
Cilicaine VK	SI	Phenoxymethylpenicillin
Citralka	PD	Sodium Acid Citrate
Citravescent		
Sachets	PT	Sodium Citro-Tartrate
Cleensheen	FL	Maldison
Clinistix	AM	Glucose Indicator - Urine
Clinitest	AM	Copper Sulphate
Clinoril	FR	Sulindac
Codalgin	FM	Codeine Phosphate with Paracetamol
Codate	US	Codeine Phosphate
Codelix	DH	Codeine Phosphate
Codlin	NN	Codeine Phosphate
Codral Forte	BW	Codeine Phosphate with Aspirin

Proprietary Name	Manufacturer	Name
Cogentin	MK	Benztropine
Colestid	UP	Colestipol Hydrochloride
Colgout	PT	Colchicine
Colifoam	SV	Hydrocortisone Acetate
Colly-seels	DY	Sterculia (C & I)
Coloplast	ST	Sterculia (C & I)
Coloxyl	FM	Dioctyl Sodium Sulphosuccinate with Bisacodyl
Coluric	NN	Colchicine
Coly-Mycin	WW	Colistin
Injection		
Coly-Mycin	WW	Colistin with Neomycin
Ear Drops		
Compazine	SK	Prochlorperazine
Compenase	CS	Penicillinase
Comycin	UP	Tetracycline with Nystatin
Concordin	MK	Protriptyline
Convuline	PT	Carbamazepine
Cordarone X 200	RC	Amiodarone Hydrochloride
Cordilox	SC	Verapamil Hydrochloride
Cortate	PT	Cortisone Acetate
Cortef	UP	Hydrocortisone
Cotazym	OR	Pancrelipase
Coumadin	DT	Warfarin
Crystapen	GL	Benzylpenicillin
Cyclidox	PT	Doxycycline
Cyklokapron	PS	Tranexamic Acid
Cytamen 100	GL	Cyanocobalamin
Cytamen 1000	GL	Cyanocobalamin
Cytosar-U	UP	Cytarabine
Daktarin	JP	Miconazole
Daktarin	JP	Miconazole Nitrate
Dalacin C	UP	Clindamycin
Danocrine	WL	Danazol
Dantrium	NW	Dantrolene Sodium
Daonil	HP	Glitenclamide
Daranide	MK	Dichlorphenamide
Daraprim	BW	Pyrimethamine
Dartalan	SR	Thiopropazate
Decadron	MK	Dexamethasone
Decadron Shock Pak	MK	Dexamethasone
Deca-Durabolin	OR	Nandrolone Decanoate
Declinax	RO	Debrisoquine
De-Lact Infant	SJ	Milk Powder - Low Lactose Formula
Delta-Cortef	UP	Prednisolone
Deltasolone	US	Prednisolone
Deltasone	US	Prednisone
De-Nol	PD	Tri-potassium Di-citrate Bismuthate Complex
Depo-Medrol	UP	Methylprednisolone Acetate
Depo-Provera	UP	Medroxyprogesterone
Deralin 10	AF	Propranolol
Deralin 40	AF	Propranolol
Deralin 160	AF	Propranolol
Dermabase S	HA	Dimethicone
Dermacort	PD	Hydrocortisone
Dermacort "O"	PD	Hydrocortisone

Proprietary Name	Manufacturer	Name
Deseril	SZ	Methysergide
Dexacillin	SQ	Epicillin
Dexamethsone	PT	Dexamethasone
Diabex S.R.	DF	Metformin
Diabinese	PF	Chlorpropamide
Diamicron	SE	Gliclazide
Diamox	LE	Acetazolamide
Diasol	AB	Peritoneal Dialysis Solution
Diastatin	GP	Nystatin
Diastix	AM	Glucose Indicator - Urine
Diatol	PT	Tolbutamide
Dibenyline	SK	Phenoxybenzamine
Dichlotride	MK	Hydrochlorothiazide
Digestelact	SJ	Milk Powder - Lactose Modified
Dihydergot	SZ	Dihydroergotamine
Dilantin	PD	Phenytoin
Dilantin Infatabs	PD	Phenytoin
Dilantin Sodium	PD	Phenytoin Sodium
Dilosyn	GL	Methdilazine
Dimal	PT	Methyldopa
Dimetane	RS	Brompheniramine
Dindevan	GL	Phenindione
Dipramol	PT	Dipyridamole
Diprosone	SH	Betamethasone Dipropionate
Disipal	RK	Orphenadrine Hydrochloride
Diulo	SR	Metolazone
Diuret	PT	Chlorothiazide
Diurone	US	Chlorothiazide
Dolobid	MK	Diflunisal
Donnatub	RS	Belladonna Alkaloids
Dormel	DH	Chloral Hydrate
Dormicum	PT	Nitrazepam
Doxin	GP	Doxycycline
D-Penamine	DL	Penicillamine
Ducene	SU	Diazepam
Duoluton	SC	Norgestrel with Ethinyloestradiol
Duphalac	ET	Lactulose
Duphaston	ET	Dydrogesterone
Durabolin	OR	Nandrolone Phenylpropionate
Duractin	CS	Cimetidine
Durolax	BY	Bisacodyl
Duro-Tuss	RK	Pholcodine
Dyazide	SK	Hydrochlorothiazide with Triamterene
Dymadon	BW	Paracetamol
Dymadon Co.	BW	Codeine Phosphate with Paracetamol
Dytac	SK	Triamterene
Ecostatin	SQ	Econazole Nitrate
Ecotrin	SK	Aspirin
Edecril	MK	Ethacrynic Acid
EES 200	AB	Erythromycin Ethylsuccinate
EES Dulcet	AB	Erythromycin Ethylsuccinate
Efcortelan	GL	Hydrocortisone Sodium Succinate
Ekaprol	DF	Aminocaproic Acid
Elix-Nocte Forte	NN	Chloral Hydrate
Elixophyllin	SC	Theophylline

Proprietary Name	Manufacturer	Name
Elixophyllin-KI	SC	Theophylline with Potassium Iodide
Emsalin	DH	Methyl Salicylate
EMU-V	UP	Erythromycin
E-Mycin	PT	Erythromycin Stearate
Endone	DT	Oxycodone Hydrochloride
Enduron	AB	Methyclothiazide
Enduron M	AB	Methyclothiazide
Ensalate	RC	Sodium Salicylate
Epifrin	AG	Adrenaline
Epilim	RC	Sodium Valproate
Epilim EC	RC	Sodium Valproate
Epinal	AQ	Adrenaline
Eppy/N	BF	Adrenaline
Ergodryl	PD	Ergotamine Tartrate with Caffeine Citrate and Diphenhydramine Hydrochloride
Ergotrate	LY	Ergometrine Maleate
Eromycin	DL	Erythromycin Estolate
Eryc	FA	Erythromycin
Erythrocin	AB	Erythromycin Ethylsuccinate
Erythrocin	AB	Erythromycin Lactobionate
Erythrocin	AB	Erythromycin Stearate
Esidrex	CG	Hydrochlorothiazide
Estigyn	GL	Ethinylloestradiol
Estradurin	AY	Polyestradiol
Ethamolin	GL	Ethanolamine Oleate
Eucerin	SN	Wool Alcohols
Euglucon	RC	Glibenclamide
Eugynon	SC	Norgestrel with Ethinylloestradiol
Eugynon-ED	SC	Norgestrel with Ethinylloestradiol
Euhypnos	SI	Temazepam
Eumydrin	WL	Atropine Methonitrate
Falcopen V	FA	Phenoxymethylpenicillin
Falcopen VK	FA	Phenoxymethylpenicillin
Fansidar	RO	Pyrimethamine with Sulfadoxine
Fasigyn	PF	Tinidazole
Fefol	SK	Ferrous Sulphate Dried with Folic Acid
Fenamine	FM	Pheniramine
Fenamine-M	FM	Pheniramine
Fenostil	ZY	Dimethindene
Fergon	WL	Ferrous Gluconate
Feritard	PT	Ferrous Sulphate Dried
Feritard Folic	PT	Ferrous Sulphate Dried with Folic Acid
Ferro-Gradumets	AB	Ferrous Sulphate Dried
Ferrum H	SI	Iron Polymaltose Complex
Fespan	SK	Ferrous Sulphate Dried
F.G.F.	AB	Ferrous Sulphate Dried with Folic Acid
Flagyl	MB	Metronidazole
Flagyl S	MB	Benzoyl Metronidazole
Flophen	CS	Flucloxacillin
Floraquin	SR	Di-iodohydroxyquinoline
Florinef	SQ	Fludrocortisone Acetate
Floxapen	BR	Flucloxacillin
Flucon	AQ	Fluorometholone
FML Liquifilm	AG	Fluorometholone
Folasic	NN	Folic Acid

Proprietary Name	Manufacturer	Name
Folicid	US	Folic Acid
Fucidin	SK	Fusidic Acid
Fulcin 125	IC	Griseofulvin
Fulcin 500	IC	Griseofulvin
Fungilin	SQ	Amphotericin
Fungizone	SQ	Amphotericin
Furadantin	NW	Nitrofurantoin
Furamide	BT	Diloxanide Furoate
Galactomin	MN	Milk Powder - Synthetic
Formula 17		
Galactomin	MN	Milk Powder - Synthetic
Formula 19		
Gantanol	RO	Sulphamethoxazole
Gantrisin	RO	Sulphafurazole
Garamycin	SH	Gentamicin Sulphate
Gastrogel	FM	Aluminium Hydroxide with Magnesium Trisilicate and Magnesium Hydroxide
Gelox	PR	Aluminium Hydroxide
Gelusil	WW	Aluminium Hydroxide with Magnesium Hydroxide
Geopen Oral	PF	Carindacillin
Glaucon	AQ	Adrenaline
Glucophage	RN	Metformin
Glucose Nutramigen	MJ	Nutramigen
Glyfosolix	DH	Glycerophosphate Compound
Gold-50	SH	Aurothioglucose
Gondafon	SC	Glymidine
Granocol	SC	Bassorin with Frangula Bark
Griseostatin	SH	Griseofulvin
Grisovin	GL	Griseofulvin
Grisovin 500	GL	Griseofulvin
Gyne-Lotremin	SH	Clotrimazole
Gyno-Daktarin 7	JP	Miconazole Nitrate
Gyno-Travogen	SC	Isoconazole Nitrate
Gynovlar	SC	Norethisterone Acetate with Ethinyloestradiol
Halotestin	UP	Fluoxymesterone
Hemineurin	AP	Chlormethiazole
Hemorex	WL	Phenylephrine
Herplex	AG	Idoxuridine
Hibitane	IC	Chlorhexidine
Concentrate		
Hiprex	RK	Hexamine Hippurate
Histalert	RK	Diphenylpyraline
HMS Liquifilm	AG	Medrysone
Hollihesive Skin Barrier	HO	Polyisobutylene (C & I)
Honvan	BC	Fosfestrol Sodium
Hostacycline P	HP	Tetracycline (Buffered)
Hycor	SI	Hydrocortisone
Hydracycline	FM	Tetracycline (Buffered)
Hydrea	SQ	Hydroxyurea
Hydrosone	US	Hydrocortisone
Hygroton	CG	Chlorthalidone
Hyperstat I.V.	SH	Diazoxide
Hypurin Isophane	WP	Insulin Isophane (N.P.H.)

Proprietary Name	Manu- fac- turer	Name
Hypurin Neutral	WP	Insulin Neutral
Hysone	PT	Hydrocortisone
Hysone-A	PT	Hydrocortisone Acetate
Ilocap	LY	Erythromycin
Ilosone	LY	Erythromycin Estolate
Ilotycin	LY	Erythromycin Gluceptate
Imferon	FC	Iron Dextran
Imiprin	PT	Imipramine
Imodium	JP	Loperamide Hydrochloride
Imuran	BW	Azathioprine
Inderal	IC	Propranolol
Indocid	MK	Indomethacin
Infasoy	WY	Soya Formula
Inflam	PT	Ibuprofen
Insulatard Nordisk	BW	Insulin Isophane (N.P.H.)
Insulin-2	CS	Insulin
Intal	FC	Sodium Cromoglycate
Intal Spincaps	FC	Sodium Cromoglycate
Invite-B	NN	Thiamine Hydrochloride
Ismelin	CG	Guanethidine
Isomil	RD	Soya Formula
Isophane M.C.	NO	Insulin Isophane (N.P.H.)
Isoptin	KN	Verapamil Hydrochloride
Isopto Carpine	AQ	Pilocarpine Hydrochloride
Isopto Cetamide	AQ	Sulphacetamide Sodium
Isopto Frin	AQ	Phenylephrine
Isopto Tears	AQ	Hypromellose
Isordil	AY	Isosorbide Dinitrate
Isordil Sublingual	AY	Isosorbide Dinitrate
Isotard-2	CS	Insulin Isophane (N.P.H.)
Isotard-2 PC	CS	Insulin Isophane (N.P.H.)
Isotrate	PD	Isosorbide Dinitrate
Isotrate Sublingual	PD	Isosorbide Dinitrate
Jectofer	AP	Iron Sorbitol
Kabikinase	PS	Streptokinase
Kanasig	SI	Kanamycin
Kantrex	BC	Kanamycin
Kaogel	FA	Aluminium Hydroxide with Kaolin
Kaomagma	WY	Aluminium Hydroxide with Kaolin
Kaopectate	UP	Kaolin with Pectin
Karaya Paste	HO	Sterculia (C & I)
Kay Ciel	SC	Potassium Chloride
Keflex	LY	Cephalexin
Keflin Neutral	LY	Cephalothin Sodium
Kefzol	LY	Cephazolin Sodium
Kemadrin	BW	Procyclidine
Kenacomb Otic	SQ	Triamcinolone Acetonide with Neomycin Sulphate, Gramicidin and Nystatin
Kenacort-A10	SQ	Triamcinolone Acetonide
Kenalone	SQ	Triamcinolone Acetonide
Kenalone 0.02%	SQ	Triamcinolone Acetonide
Keto-Diastix	AM	Glucose and Ketone Indicator - Urine
Ketovite	ST	Vitamin Supplement
Kinidin	AP	Quinidine Bisulphate

Proprietary Name	Manu- fac- turer	Name
Klortee	PT	Chloramine (C & I)
Kolpon	OR	Oestrone
Konakion	RO	Phytomenadione
K-San	PR	Potassium Chloride
Lacril	AG	Hypromellose
Lanoxin	BW	Digoxin
Lanoxin-PG	BW	Digoxin
Lanvis	BW	Thioguanine
Largactil	MB	Chlorpromazine
Larodopa	RO	Levodopa
Laroxyl	RO	Amitriptyline
Lasix	HP	Fruzemide
Lasix-M	HP	Fruzemide
Ledermycin	LE	Demeclocycline Hydrochloride
Lente-2	CS	Insulin Zinc Suspension
Lente-2 PC	CS	Insulin Zinc Suspension
Lente M.C. Novo	NO	Insulin Zinc Suspension
Leucovorin	LE	Calcium Folate
Leukeran	BW	Chlorambucil
Lincocin	UP	Lincomycin
Lincocin SS	UP	Lincomycin
Paediatric		
Lingraine	WL	Ergotamine Tartrate
Lioresal	CG	Baclofen
Liquifilm Forte	AG	Polyvinyl Alcohol
Liquifilm Tears	AG	Polyvinyl Alcohol
Lithicarb	PT	Lithium Carbonate
Locacorten	CG	Flumethasone with Clioquinol
Vioform		
Locasol	MN	Milk Powder - Synthetic
Lofenalac	MJ	Phenylalanine Low Content Formula
Lomodex	FC	Dextran 40
Lomotil	SR	Diphenoxylate Hydrochloride with Atropine Sulphate
Loniten	UP	Minoxidil
Lopresor	CG	Metoprolol
Lorexane	IC	Lindane
Lorexane	IC	Lindane
Concentrate		
Lotremin	SH	Clotrimazole
LPV	CS	Phenoxymethylpenicillin
LPV 125	CS	Phenoxymethylpenicillin
LPV 250	CS	Phenoxymethylpenicillin
Lyspafen	PT	Difenoxin Hydrochloride with Atropine Sulphate
M & B 693	MB	Sulphapyridine
Macrochantin	NW	Nitrofurantoin
Macrodex	PS	Dextran 70
Madopar	RO	Levodopa with Benserazide
Madopar-M	RO	Levodopa with Benserazide
Madopar Q	RO	Levodopa with Benserazide
Magnoplasm	FA	Magnesium Sulphate
Maloprim	BW	Pyrimethamine with Dapsone
Mandelamine	WW	Hexamine Mandelate

Proprietary Name	Manu- fac- turer	Name
Mandelamine	WW	Hexamine Mandelate
Hafgrams		
Marevan	GL	Warfarin
Maxamaid XP	SJ	Amino Acid Formula with Vitamins and Minerals without Phenylalanine
Maxidex	AQ	Dexamethasone
Maxolon	BR	Metoclopramide Hydrochloride
Medrol	UP	Methylprednisolone
Melipramine	UW	Imipramine
Melleril	SZ	Thioridazine
Mestinon	RO	Pyridostigmine
Metamide	PT	Metoclopramide Hydrochloride
Methopa	US	Methyldopa
Methoprim	PT	Trimethoprim
Methopt	SI	Hypromellose
Methopt Forte	SI	Hypromellose
Meth-Zine	PT	Promethazine
Metin	CS	Methicillin
Mexitil	BY	Mexiletine Hydrochloride
Microgynon 30	SC	Levonorgestrel with Ethinyloestradiol
Microgynon 30 ED	SC	Levonorgestrel with Ethinyloestradiol
Microgynon 50	SC	Levonorgestrel with Ethinyloestradiol
Microgynon 50 ED	SC	Levonorgestrel with Ethinyloestradiol
Microlut 28	SC	Levonorgestrel
Micronor	ET	Norethisterone
Microval 28	WY	Levonorgestrel
Midamor	MK	Amiloride
Midone	PT	Primidone
Migral	BW	Ergotamine Tartrate with Caffeine and Cyclizine Hydrochloride
Milontin	PD	Phensuximide
Minipress	PF	Prazosin Hydrochloride
Minirin	PT	Desmopressin
Minomycin	LE	Minocycline
Minovlar	SC	Norethisterone Acetate with Ethinyloestradiol
Minovlar ED	SC	Norethisterone Acetate with Ethinyloestradiol
Mintezol	MK	Thiabendazole
Mithracin	PF	Mithramycin
Mixtard Nordisk	BW	Insulin Isophane (N.P.H.) - Insulin Neutral, (Mixed)
Modecate	SQ	Fluphenazine Decanoate
Modicon	ET	Norethisterone with Ethinyloestradiol
Moduretic	MK	Hydrochlorothiazide with Amiloride
Mogadon	RO	Nitrazepam
Monistat 7	ET	Miconazole Nitrate
Monotard M.C. Novo	NO	Insulin Zinc Suspension
Mortha	WH	Morphine with Tacrine
Moxacin	CS	Amoxycillin
Mucaine	WY	Aluminium Hydroxide with Magnesium Hydroxide and Oxethazaine
Mucomyst	MJ	Acetylcysteine
Murelax	AY	Oxazepam
Mycitracin	UP	Polymyxin B Sulphate with Bacitracin and Neomycin
Mycostatin	SQ	Nystatin
Mylanta	PD	Aluminium Hydroxide with Magnesium Hydroxide

Proprietary Name	Manufacturer	Name
Myleran	BW	Busulphan
Myocrisin	MB	Sodium Aurothiomalate
Myoquin	FM	Quinine Bisulphate
Mysoline	IC	Primidone
Mysteclin-V	SQ	Tetracycline with Nystatin
Mytelase	WL	Ambenonium Chloride
Naprosyn	SD	Naproxen
Narcan Neonatal	DT	Naloxone Hydrochloride
Nardil	WW	Phenelzine
Natulan	RO	Procarbazine
Navidrex	CG	Cyclopenthiiazide
Nebcin	LY	Tobramycin Sulphate
Nefrolan	MB	Clorexolone
Negram	WL	Nalidixic Acid
Nemdyn	HA	Neomycin Undecenoate with Bacitracin Zinc
Neocon	ET	Norethisterone with Ethinyloestradiol
Neo-Cortef	UP	Hydrocortisone with Neomycin Sulphate
Neogynon	SC	Levonorgestrel with Ethinyloestradiol
Neogynon ED	SC	Levonorgestrel with Ethinyloestradiol
Neo-Mercazole	NS	Carbimazole
Neopt	SI	Neomycin
Neosporin	BW	Polymyxin B Sulphate with Bacitracin and Neomycin
Eye Ointment		
Neosporin	BW	Polymyxin B Sulphate with Neomycin and Gramicidin
Eye Drops		
Neosulf	PT	Neomycin
Neo-Synephrine	WL	Phenylephrine
Neotracin	ET	Polymyxin B Sulphate with Bacitracin and Neomycin
Neulactil	MB	Pericyazine
Neutralon	SC	Aluminium Sodium Silicate
Nikacid	US	Nicotinic Acid
Nilstat	LE	Nystatin
Nipride	RO	Sodium Nitroprusside
Nitoman	RO	Tetrabenazine
Nitro-Bid	PT	Glyceryl Trinitrate
Nivaquine	MB	Chloroquine
Nobecutane	AP	Acrylic Resin (C & I)
Noctec	SQ	Chloral Hydrate
Nolvadex	IC	Tamoxifen Citrate
Nordette 21	WY	Levonorgestrel with Ethinyloestradiol
Nordette 28	WY	Levonorgestrel with Ethinyloestradiol
Nordicort	NR	Hydrocortisone Sodium Succinate
Nordioli 21	WY	Levonorgestrel with Ethinyloestradiol
Nordioli 28	WY	Levonorgestrel with Ethinyloestradiol
Noriday	SD	Norethisterone
Norinyl-1	SD	Norethisterone with Mestranol
Norinyl-2	SD	Norethisterone with Mestranol
Norinyl-1/28	SD	Norethisterone with Mestranol
Norlestrin	PD	Norethisterone Acetate with Ethinyloestradiol
Normison	WY	Temazepam
Normosol R	AB	Electrolyte Replacement Solution
Norpace	SR	Disopyramide
Nortab	SQ	Nortriptyline
Nuelin	RK	Theophylline
Nuelin Paediatric	RK	Theophylline

Proprietary Name	Manufacturer	Name
Nuelin-S.R. 250	RK	Theophylline
Nuralin-2	CS	Insulin Neutral
Nutraplus	OL	Urea
Ocusert Pilo 20	PT	Pilocarpine
Ocusert Pilo 40	PT	Pilocarpine
Odortrol	LA	Deodorant Concentrate (C & I)
Omnopon	RO	Papaveretum
Omnopon	RO	Papaveretum with Hyoscine Hydrobromide
Scopolamine		
Oncovin	LY	Vincristine
Opticrom	FC	Sodium Cromoglycate
Optipen	CS	Phenethicillin
Orabase	SQ	Carmellose Sodium with Pectin and Gelatin (C & I)
Orabolin	OR	Ethynloestrenol
Oradexon	OR	Dexamethasone
Orahesive	SQ	Carmellose Sodium with Pectin and Gelatin (C & I)
Orbenin	BR	Cloxacillin
Orlest	PD	Norethisterone Acetate with Ethinyloestradiol
Oroxine	BW	Thyroxine Sodium (BP 1980)
Orpadrex	PT	Orphenadrine Hydrochloride
Ortho-Novum 1/50	ET	Norethisterone with Mestranol
Ortho-Novum 1/80	ET	Norethisterone with Mestranol
Ospolot	BN	Sulthiame
Ostelin	GL	Ergocalciferol
Ovral	WY	Norgestrel with Ethinyloestradiol
Ovulen 0.5	SR	Ethynodiol Diacetate with Mestranol
Ovulen 1	SR	Ethynodiol Diacetate with Mestranol
Ovulen 2	SR	Ethynodiol Diacetate with Mestranol
Ovulen 0.5/50	SR	Ethynodiol Diacetate with Ethinyloestradiol
Ovulen 0.5/50-28	SR	Ethynodiol Diacetate with Ethinyloestradiol
Ovulen 1/50	SR	Ethynodiol Diacetate with Ethinyloestradiol
Ovulen 1/50-28	SR	Ethynodiol Diacetate with Ethinyloestradiol
Pacedol	PT	Haloperidol
Palaprin Forte	NS	Aloxiprin
Palfium	FA	Dextromoramide
Paludrine	IC	Proguanil
Panacete	PR	Paracetamol
Panafcort	PT	Prednisone
Panafcortelone	PT	Prednisolone
Panamax	WL	Paracetamol
Panamax Co.	WL	Codeine Phosphate with Paracetamol
Pancrease	ET	Pancrelipase
Panmycin P	UP	Tetracycline
Pantheline	PT	Propantheline Bromide
Paracodin	KN	Dihydrocodeine Tartrate
Paralgin	FM	Paracetamol
Parasin	NN	Paracetamol
Parlodel	SZ	Bromocriptine Mesylate
Parmol	US	Paracetamol
Parnate	SK	Tranylcypromine
PCL	DH	Paracetamol
Pectolin	FA	Pholcodine
Penbritin	BR	Ampicillin
Penbritin Forte	BR	Ampicillin
Pensig	SI	Phenethicillin

Proprietary Name	Manu- fac- turer	Name
Pensig 125	SI	Phenethicillin
Pensig 250	SI	Phenethicillin
Perdolat	KN	Penicillamine
Periactin	FR	Cyproheptadine
Persantin 100	BY	Dipyridamole
Pertofran	CG	Desipramine
Pethoid	BW	Pethidine
Pevaryl	SK	Econazole Nitrate
Pexid	ML	Perhexiline Maleate
Phenergan	MB	Promethazine
Pholcolin	DH	Pholcodine
Pholcolin Red	DH	Pholcodine
Pholtrate	MG	Pholcodine
Phospholine Iodide	AY	Ecothiopate Iodide
Physeptone	BW	Methadone
Pilopt	SI	Pilocarpine Hydrochloride
Pimafucin	GB	Natamycin
Piriton	GL	Chlorpheniramine
Pitressin Tannate	PD	Vasopressin Tannate
PK AID I	SJ	Amino Acid Formula without Phenylalanine
PK AID II	SJ	Amino Acid Formula without Phenylalanine
Plaquenil	WL	Hydroxychloroquine
Plasma-Lyte 148	TV	Electrolyte Replacement Solution
Plesmet	NN	Ferrous Aminoacetosulphate
Pneumovax	CS	Pneumococcal Vaccine, Polyvalent
Polaramine	SH	Dexchlorpheniramine
Portagen	MJ	Triglycerides, Medium Chain
Potavescent	PT	Potassium
Pramin	AF	Metoclopramide Hydrochloride
Prednefrin Forte	AG	Prednisolone Acetate with Phenylephrine
Predsol	GL	Prednisolone Sodium Phosphate
Prefrin	AG	Phenylephrine
Prefrin-Z	AG	Zinc with Phenylephrine
Pregestimil	MJ	Triglycerides, Medium Chain
Priadel	PT	Lithium Carbonate
Primobolan	SC	Methenolone Acetate
Primogyn C	SC	Ethinylloestradiol
Primogyn Depot	SC	Oestradiol Valerate
Primolut N	SC	Norethisterone
Primolut Nor	SC	Norethisterone Acetate
Primoteston Depot	SC	Testosterone Enanthate
Primperan	US	Metoclopramide Hydrochloride
Procid	PT	Probenecid
Procort	PR	Hydrocortisone
Progan	NN	Promethazine
Progout	PT	Allopurinol
Proladone	BT	Oxycodone
Prolol	US	Propranolol
Promacid	US	Chlorpromazine
Promide	PT	Chlorpropamide
Prominal	WL	Methylphenobarbitone
Pronestyl	SQ	Procainamide
Pro-Pam	PT	Diazepam
Propine	AG	Dipivefrine Hydrochloride
ProSobee	MJ	Soya Formula
Prostigmin	RO	Neostigmine
Prothazine	US	Promethazine

Proprietary Name	Manu- fac- turer	Name
Protaphane M.C.	NO	Insulin Isophane (N.P.H.)
Protran	PT	Chlorpromazine
Provera	UP	Medroxyprogesterone
Purinethol	BW	Mercaptopurine
P.V. Carpine	AG	Pilocarpine Hydrochloride
PVK	LY	Phenoxymethylpenicillin
P.V.O.	FM	Phenoxymethylpenicillin
Pydox	PT	Pyridoxine Hydrochloride
Questran	MJ	Cholestyramine
Quibron	MJ	Theophylline with Guaiphenesin
Quinate	US	Quinine Sulphate
Quinbisan	PR	Quinine Bisulphate
Quinbisul	AF	Quinine Bisulphate
Quinidex LA	RS	Quinidine Sulphate
Quinidis	US	Quinidine Sulphate
Quinidoxin	BW	Quinidine Sulphate
Quinocetl	FM	Quinine Sulphate
Quinsan	PR	Quinine Sulphate
Quinsul	AF	Quinine Sulphate
Quitaxon	RC	Doxepin
Rapitard M.C. Novo	NO	Insulin Biphasic
Rastinol	HP	Tolbutamide
Rectinol	GP	Benzocaine with Adrenaline
Redu-Press	PT	Debrisoquine
Redu-Press M	PT	Debrisoquine
Repalyte	DH	Electrolyte Replacement (Oral)
Respolin	RK	Salbutamol
Reverin	HP	Rolitettracycline
Rheomacrodex	PS	Dextran 40
Rheumacin	PT	Indomethacin
Rhumax	PR	Sodium Salicylate
Rhusal	GP	Aspirin
Rikodeine	RK	Dihydrocodeine Tartrate
Rimycin 150	AF	Rifampicin
Rimycin 300	AF	Rifampicin
Rivotril	RO	Clonazepam
Rocaltrol	RO	Calcitriol
Randomycin	WW	Methacycline
Rythmodan	RL	Disopyramide
Sacsol	EG	Surgical Cement
Sacsol Non Flammable	EG	Surgical Cement
Salazopyrin	PS	Sulphasalazine
Salazopyrin-EN	PS	Sulphasalazine
Sandocal 1000	SZ	Calcium
Sandomigran	SZ	Pizotifen Malate
Saroten	NS	Amitriptyline
Saventrine	PN	Isoprenaline Hydrochloride
Scherisolon	SC	Prednisolone Acetate
S-Dimidine	PT	Sulphadimidine
Sedlingtus	RT	Pholcodine
Semilente-2	CS	Insulin Zinc Suspension (Amorphous)
Semilente-2 PC	CS	Insulin Zinc Suspension (Amorphous)

Proprietary Name	Manufacturer	Name
Semilente M.C. Novo	NO	Insulin Zinc Suspension (Amorphous)
Senamon	DH	Senega and Ammonia
Septtrin	BW	Trimethoprim with Sulphamethoxazole
Septtrin Forte	BW	Trimethoprim with Sulphamethoxazole
Sequilar ED	SC	Levonorgestrel with Ethinyloestradiol
Serenace	SR	Haloperidol
Serepax	WY	Oxazepam
SH420	SC	Norethisterone Acetate
Sigmacort	SI	Hydrocortisone
Silcon	FA	Dimethicone
Silicon Skin Spray	EG	Dimethicone (C & I)
Silvazine	SN	Silver Sulphadiazine with Chlorhexidine Gluconate
Simeco Suspension	WY	Aluminium Hydroxide with Magnesium Hydroxide
Simeco Tablet	WY	Aluminium Hydroxide and Magnesium Carbonate Co-Dried Gel
Sinemet	MK	Levodopa with Carbidopa
Sinemet 100/25	MK	Levodopa with Carbidopa
Sinemet M	MK	Levodopa with Carbidopa
Sinequan	PF	Doxepin
Sintisone	EC	Prednisolone Stearoylglycolate
Skin Gel	HO	Isopropyl Monoester Polymer with Isopropyl Alcohol (C & I)
Skin-Prep	DY	Butyl Monoester Polymer with Isopropyl Alcohol (C & I)
Slow-Fe	CG	Ferrous Sulphate Dried
Slow-K	CG	Potassium Chloride
Sodexol	SC	Aluminium Hydroxide with Magnesium Hydroxide
Sofradex	RL	Dexamethasone with Framycetin and Gramicidin
Soframycin	RL	Framycetin
Solcode	RC	Codeine Phosphate with Aspirin
Solone	FM	Prednisolone
Solprin	RC	Aspirin
Solu-Cortef	UP	Hydrocortisone Sodium Succinate
Solu-Medrol	UP	Methylprednisolone Sodium Succinate
Somophyllin	FC	Aminophylline
Sone	FM	Prednisone
Span-K	PT	Potassium Chloride
Spirotone	PT	Spironolactone
Spray-On Bande	EG	Polyvinylpyrrolidone and Vinyl Acetate Copolymer (C & I)
Squibb-HC	SQ	Hydrocortisone
S.R.A.	BT	Aspirin
Steclin-V	SQ	Tetracycline (Buffered)
Stelazine	SK	Trifluoperazine
Stemetil	MB	Prochlorperazine
Sterofrin	AQ	Prednisolone Acetate
Sterogyl-15	RL	Ergocaliciferol
Stomahesive	SQ	Butyl Monoester Polymer with Ethanol (C & I)
Stomahesive Set	SQ	Polyisobutylene (C & I)
Stoxil	SK	Idoxuridine
Streptase	HP	Streptokinase
Sulfazole	PT	Sulphafurazole

Proprietary Name	Manufacturer	Name
Supres 25	PT	Hydralazine Hydrochloride
Supres 50	PT	Hydralazine Hydrochloride
Surmontil	MB	Trimipramine
Sustanon '100'	OR	Testosterone Esters
Sustanon '250'	OR	Testosterone Esters
Symmetrel	CG	Amantadine Hydrochloride
Synacthen Depot	CG	Tetracosactrin
Synphasic	SD	Norethisterone with Ethinyloestradiol
Syntocinon	SZ	Oxytocin
Syntometrine	SZ	Oxytocin with Ergometrine
Tagamet	SK	Cimetidine
TAGG	EG	Deodorant Detergent Solution (C & I) (P & Q)
Tarcil	BR	Ticarcillin
Tears Naturale	AQ	Hypromellose with Dextran
Tegretol	CG	Carbamazepine
Tenormin	IC	Atenolol
Terramycin	PF	Oxytetracycline
Tertroxin	GL	Liothyronine
Tes-Tape	LY	Glucose Indicator - Urine
Testomet	PT	Methyltestosterone
Testoviron	SC	Testosterone Propionate
Tetramykoin	BZ	Tetracycline
Tetrex	BC	Tetracycline (Buffered)
Tetrex-F	BC	Tetracycline with Nystatin
Theo-Dur	AP	Theophylline
Thiminone	LF	Thiamine Hydrochloride
Thiotepa	LE	Thiotepa
Thyroxinal	FM	Thyroxine Sodium (BP 1980)
Tiberal	RO	Ornidazole
Ticillin	CS	Ticarcillin
Tigason	RO	Etretinate
Timoptol	FR	Timolol
Tofranil	CG	Imipramine
Tolinase	UP	Tolazamide
Tolvon	OR	Mianserin Hydrochloride
Topilar	SD	Fluclorolone Acetonide
Topodil	SC	Fluocortolone Esters
Torecan	SZ	Thiethylperazine
Trandate	GL	Labetalol
Trasicor	CG	Oxprenolol
Travogen	SC	Isoconazole Nitrate
Trib	PT	Trimethoprim with Sulphamethoxazole
Trib DS	PT	Trimethoprim with Sulphamethoxazole
Trichozole	PT	Metronidazole
Triphasil	WY	Levonorgestrel with Ethinyloestradiol
Triphasil 28	WY	Levonorgestrel with Ethinyloestradiol
Triprim	BW	Trimethoprim
Triquilar	SC	Levonorgestrel with Ethinyloestradiol
Triquilar ED	SC	Levonorgestrel with Ethinyloestradiol
Trisoralen	PT	Trioxysalen
Trobicin	UP	Spectinomycin
Tryptanol	MK	Amitriptyline
Tussinol	GP	Pholcodine
Ulcaron	SH	Tri-potassium Di-citrato Bismuthate Complex

Proprietary Name	Manu- fac- turer	Name
Ulsanic	DT	Sucralfate
Ultralan-D	SC	Fluocortolone Esters
Ultralan-D Fatty	SC	Fluocortolone Esters
Ultralente-2	CS	Insulin Zinc Suspension (Crystalline)
Ultralente M.C. Novo	NO	Insulin Zinc Suspension (Crystalline)
Unisolve	DY	Surgical Cement
Ural Sachets	AB	Sodium Citro-Tartrate
Urecholine	MK	Bethanechol
Uremide	PT	Fruzemide
Urex	FM	Fruzemide
Urex-Forte	FM	Fruzemide
Urex-M	FM	Fruzemide
Urid	PT	Chlorthalidone
Urimor	PT	Methyclothiazide
Uro-Carb	HA	Bethanechol
Urolucosil	WW	Sulphamethizole
Valium	RO	Diazepam
Vallergan	MB	Trimeprazine
Vancocin	LY	Vancomycin
Vasopressin	SZ	Lypressin
Vaxigrip	MB	Influenza Vaccine
Velbe	LY	Vinblastine
Velosef	SQ	Cephadrine
Velosulin Nordisk	BW	Insulin Neutral
Ventolin	GL	Salbutamol
Ventolin Rotacaps	GL	Salbutamol
Verpamil	PT	Verapamil Hydrochloride
Vibramycin	PF	Doxycycline
Vibra-Tabs	PF	Doxycycline
Vioform	CG	Clioquinol
Viokase	RS	Pancreatin Enzyme
Vira A	PD	Vidarabine
Virifenemide	WR	Fruzemide
Visken	SZ	Pindolol
Voltaren 50	CG	Diclofenac Sodium
Wellcome Insulin	BW	Insulin
Wellcome Isophane	BW	Insulin Isophane (N.P.H.)
Wellcome Lente	BW	Insulin Zinc Suspension
Wellcome Semilente	BW	Insulin Zinc Suspension (Amorphous)
Wellcome Ultralente	BW	Insulin Zinc Suspension (Crystalline)
Xylocard 100	AP	Lignocaine
Xylocard 300 I.M.	AP	Lignocaine
Xylocard 500	AP	Lignocaine
Yomesan	BN	Niclosamide

Proprietary Name	Manufacturer	Name
Zadine	SH	Azatadine Maleate
Zantac	GL	Ranitidine Hydrochloride
Zarontin	PD	Ethosuximide
Zephiran	WL	Benzalkonium Chloride
Concentrated		
Zerodor	ZR	Deodorant Concentrate (C & I)
Zincfrin	AQ	Zinc Sulphate with Phenylephrine
Zoff	SN	Surgical Cement
Zyloprim	BW	Allopurinol

PART 2 - TRADE NAMES INDEX

The following words, in association with a chemical name or generic name or approved name indicate the product of the manufacturer shown.

Abboject	Abbott A'asia - Injections
Albay	Bayer Pharmaceutical Company - Allergen extracts
Chewies	Dista - Chewable tablets
Cota-Tabs	Faulding - Coated tablets
Dulcets	Abbott A'asia - Chewable tablets
Durules	Astra Chemicals - Sustained release tablets
Emplets	Parke, Davis - Tablet preparations
Ensa	Reckitts - Tablet preparations
Enseals	Lilly - Enteric coated tablets
Filmtabs	Abbott A'asia - Coated tablets
Flex Flac	Vifor - Intravenous infusions
Gradumets	Abbott A'asia - Sustained release tablets
Hamiltabs	Hamilton Laboratories - Tablet preparations
Hermette	Bull Laboratories - Injections
Hyperduric	Glaxo - Injections
Isoject	Pfizer Pty Ltd - Injections
Isopto	Alcon Laboratories - Eye drops
Kapseals	Parke, Davis - Capsules
Linguets	Ciba-Geigy - Sublingual tablets
Novo	Novo Laboratories - Preparations
Pedipac	Lilly - Sachets
Prestab	Ethnor - Tablet preparations
Pulvules	Lilly - Capsules
Rox	Rocke Tompsitt - Preparations
Siguent	Sigma - Ointment preparations
Spansules	Smith, Kline & French - Delayed release capsules
Sterivial	Parke, Davis - Injections
Sterop	Ethnor - Eye drops
Sustets	Lederle - Sustained release capsules
Tabloid	Wellcome Australia Limited - Tablet preparations
Tastitabs	Pfizer Pty Ltd - Chewable tablets
Tri-Test	Drug Houses of Australia Pty Ltd - Preparations
Venosol	Abbott A'asia - Intravenous infusions
Viaflex	Travenol Laboratories - Intravenous infusions
Viules	Boots - Injections
Wellcome	Wellcome Australia Limited - Preparations

