

**List of
Vital Essential
and Necessary
Drugs and
Medical Sundries for
Public Health
Institutions**

2020



STANDARDS & REGULATION DIVISION

JAMAICA

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PREFACE

Background

The first national essential medicines list – The List of Vital, Essential, and Necessary Drugs and Medical Sundries for Public Health Institutions (VEN List) was published in 1988 to guide the procurement and rational use of pharmaceuticals in the public sector.

It was based on the WHO Model List and various national guidelines for specific conditions (eg. HIV/AIDS, STI, HTN, DM, Asthma, TB/leprosy) which represent the best current therapeutic practice in each of the priority conditions covered.

This document embraces the concept of rational drug use – rational procurement, rational prescribing, rational dispensing and rational use by the patient - and serves as a guide to doctors, nurses, pharmacists, and students of these disciplines in the public health sector.

The VEN List document is considered a key policy and reference for the sector, and efforts are constantly made to ensure that it is updated, effectively disseminated and its regular and routine use promoted.

It has undergone several reviews, on an average five yearly basis, the last of which was completed in **2019**.

Past experience with the VEN List

The current edition, VEN List 2015, was prepared by an ad-hoc technical working group under the supervision of the National Drug and Therapeutics Committee (NDTC), following a well-managed process. It was the product of extensive, diligent, and relevant work.

The potential impact of the VEN List as a guideline for use primarily by physicians in the public sector, is limited by the lack of enabling legislation to mandate evidence-based cost-effectiveness evaluation in the determination of the public financing of medicines. This lack of legal status of the VEN List (and the associated clinical guidelines) has also contributed to a failure to adhere to this very useful tool.

VEN List Revision & Amendment Procedure

The Ministry established a National Drugs and Therapeutics Committee (NDTC) in 1994 to oversee some centrally managed drug related activities such as revision of the VEN List. Leadership was through the Director of Pharmaceutical Services (now Standards & Regulation Division) who chaired the Committee on behalf of the Chief Medical Officer. The membership comprised a multidisciplinary team of persons from the Head Office and from the field, including the pharmacy department of the University Hospital of the West Indies and a representative from the pharmacology department of the University of Technology.

The role of NDTC remains critically important in identifying appropriate medicines for use throughout the system and for guiding the use of those medicines due to its ability to ensure evidence-based therapeutics, as part of the comprehensive quality of care program.

The National Drug & Therapeutics Committee (NDTC) undertakes the review and revision of the VEN List. In this strictly evidence-based process, the NDTC is well guided by:

1. Feedback obtained from operational information on VEN List use in each of the key medicines management areas in hospitals
2. Reports on VEN List use obtained through feedback by users in the field
3. MoHW-approved changes in disease management protocols (with concurrent changes to the relevant Clinical Guidelines)
4. Changes made to the biannual WHO Model Lists
5. Results of other relevant health research into disease management and medicines utilization
6. New information provided by medicines manufacturers on their products
7. New information arising through quality assurance systems, eg. pharmacovigilance and post-market surveillance
8. VEN List amendment requests received from physicians and other health practitioners in the public system.

The inclusion of a medicine on the VEN List is considered if the medicine, as far as reasonably possible, meets the following criteria established by the WHO:

- **Relevance/Need:** Public health relevance and contributes towards meeting the priority health care needs of the population
- **Safety:** Scientifically proven and acceptable safety (side-effects & toxicity) in its expected way of use
- **Comparative Efficacy:** Proven and reliable efficacy compared with available alternatives (based on adequate and scientifically sound data from clinical studies)
- **Quality:** Compliance with internationally acceptable quality standards, as recognized by the national medicines regulatory authority - currently the Standards & Regulation Division (including stability under expected conditions of storage & use)
- **Performance:** Sufficient evidence of acceptable performance in a variety of settings (eg. levels of health care)
- **Comparative cost-benefit:** a favourable cost-benefit ratio (in terms of total treatment costs) compared with alternatives
- **Single ingredient:** Unless there is no suitable alternative available, a medicine should have only a single active ingredient
- **Local Suitability/Appropriateness:** Preference is given to a medicine which is well known to health professionals, suitable for local use (eg. dose-form, staff training, support facilities) and socio-culturally appropriate (eg. method of use/administration)
- **Pharmacokinetic Profile:** Wherever possible the medicine should have favourable pharmacokinetic properties (absorption, distribution, metabolism and excretion; drug interactions)

- **Local Production:** Wherever possible the medicine should have the possibility of being manufactured locally (for improved availability, reduced procurement costs)

Steps in the Amendment Process of the VEN List

- Health professionals (physician, pharmacist, nurse, etc.) submit an application on the prescribed form along with the relevant supporting information
- Submissions are compiled and summarized by the Technical Secretary of the National Drug & Therapeutics Committee (NDTC), drug literature evaluation carried out and reports generated.
- NDTC review reports for completeness and accuracy, carries out initial evaluation of requests and makes recommendation to accept or refuse application. Comparisons are made with current WHO EML and current national treatment guidelines.
- VEN List workshops are held where specialists in all key therapeutic areas and other health professionals and representatives from other agencies such as academia, professional associations, procurement agencies, health economists are invited to participate in the review.
- With regard to the workshops, participants are reminded of the steps to be followed and the criteria to be applied. At the workshops, participants are divided into working groups which carry out a systematic and thorough review of each Essential Medicines item by item, and section by section.
- Using the WHO Model List and the tools developed for the review, and through careful application of Essential Medicines principles and selection criteria, discrepancies and issues requiring clarification are identified and discussed and consensus reached on required amendments to the VEN List.
- During the course of the review process important practice issues (especially relating to current irrational use of medicines or medical supplies by health professionals) are identified for urgent attention.
- Recommendations from workshop along with justifications are compiled and summarized by NDTC Secretary.
- NDTC reviews the recommendations and justifications from the workshops and make final ruling.
- Following incorporation of all the agreed changes, the updated drafts of the VEN List are circulated to the disease programme directors and senior directors in the Ministry of Health and to Regional D&T Committees for final review and confirmation of its completeness and correctness and corrections made based on comments received.

- Simultaneous work completed by NDTC Secretary to produce a print-ready version of the VEN List for signing-off by the Chief Medical Officer and the Permanent Secretary in the Ministry, prior to printing, official launch and dissemination.
- Printed and electronic VEN List booklets are widely disseminated following launch of the new publication by the Chief Medical Officer.
- All changes to the document are highlighted at the launching ceremony and the information disseminated with the document.

Classification of Drugs

The drugs listed in the VEN List have been classified in pharmacological and therapeutic groupings, and categorized as Vital (V), Essential (E) and Necessary (N) according to the following definitions.

Vital

Drugs or (Medical Supplies) that are potentially lifesaving or which are considered the drug of choice or ‘first line’ items in their respective therapeutic categories

Essential

Drugs or (Medical Supplies), which are effective against less severe, but nevertheless significant forms of illnesses, or which provide important ‘back-up’ for vital items. They include ‘second line’ items.

Necessary

Termed ‘Non-Essential’ in some countries, this group of drugs is used for minor, or self-limiting illnesses, and those which have a comparatively high cost for additional therapeutic value. It includes drugs which are prescribed but which provide useful alternative therapy.

The General List

The General List represents the priority needs for the health-care system. Medicines on the General List are:

1. Considered to be the most efficacious, safe and cost-effective for the relevant conditions
2. Those which do not require specialist inputs (see Specialist List below)
3. Expected to be routinely available in health facilities (at the appropriately designated levels of care)

Priority conditions corresponding to the General List were identified on the basis of current and anticipated future public health relevance and their potential for safe and effective treatment.

The Specialist List

These items listed as “specialist only” or those requiring consultant signature are essential medicines for priority conditions for which specialized diagnostic or monitoring facilities, and/or specialist medical care, and/or specialist training are needed.

Level of Use

This indicates the lowest level of the healthcare delivery system at which each particular medicine may reasonably be expected to be appropriately used (ie. after correct diagnosis and a correct decision on management of the condition according to current best therapeutic practice).

It is thus the lowest level at which the medicine is expected to be available for use (ie. distributed, stored, prescribed and dispensed) ranging from a Type A Hospital (Secondary Care) through to a Community Health Centre (Type1) (Primary Care).

Main Uses of the VEN List

The VEN List is an investment guide - a guide for the investment of health-care funds in financing the most appropriate medicines to achieve therapeutic aims in response to prioritised public health need. It is also meant to guide policy, focus of attention and resources (time, financial, technical and human) in areas and activities which support the above aims, such as training, quality assurance, financing & insurance, regulation & monitoring, appropriate use (including control of antimicrobial resistance), operational research and local production.

As such the VEN List must be fully responsive to the aims and objectives of national health policies and strategies. In this respect, the VEN List has incorporated the most current guidance to adequately address the heavy but gradually decreasing burden of communicable diseases (such as TB and HIV). In addition, particular attention has been paid to medicines to manage the ever-increasing numbers of those with non-communicable diseases (especially heart disease, diabetes, cancers and chronic respiratory diseases) which already account for over half of hospital admissions and deaths. Furthermore, medicines for other key (but often neglected or less well managed) areas of public health such nicotine use disorders and Alzheimer), have been included in this VEN List.

Summary of Main Changes in VEN List 2020

The latest VEN List review has resulted in significant changes over the 2015 List. These comprise additions of new medicines, deletions of medicines either considered obsolete, or have more cost effective substitutes, as well as changes to facilitate better administration and use.

The summary below highlights major changes:

Amendments Summary

- Deletions from VEN List **2015** – 161 preparations
- Additions to VEN List **2015** – 5 preparations
- Total drug molecules deleted - 128

VEN List 2020 Totals

- Total drugs molecules - 452
- Total presentations 751 (including vaccines, anti-retroviral preparations)

Challenges faced during the review and revision process

Despite the systematic, scientific approach and best efforts of the NDTC, a number of challenges presented themselves during the process of review and revision of the List such as lack of vital information on the cost to the health sector for some medicines, number of patients expected to require care or benefit from an item (to assist in making a judgement on public health priority) and limited published scientific information on an item and its use, These constraints highlight a lack of the health technology assessment (HTA) required to ensure fully evidence-based (scientific) selection decisions and thus solid justification for each of these decisions.

The efforts of the members of the Drug and Therapeutics Committee in the Ministry of Health and Wellness, the participants in the seminars and consultants who sent their comments on specific therapeutic groups of drugs, are acknowledged with thanks.

Please send comments and queries on the VEN List to the Central Drug and Therapeutic Committee, through the Director of Standards and Regulation Division, Ministry of Health and Wellness.

Membership of the National Drug and Therapeutics Committee

Director, Standards and Regulation Division, MOHW (Chairman)
Director, Health Promotion and Health Protection, MOHW
Director Health Services Planning & Integration, MOHW
Director, Family Health, MOHW
Director, Pharmaceutical and Regulatory Affairs Department, MOHW
Director, Pharmacy Services, MOHW
Scientific Officers, MOHW
Regional Technical Directors
Regional Pharmacists
Medical Officer of Health (one from each Health Region)
Consultant Microbiologist National Public Health Laboratory
Government Chemist
Director, Pharmacy Services, University Hospital of the West Indies
Registrar, Pharmacy Council of Jamaica
Matron, Kingston Public Hospital
Dean, School of Pharmacy, University of Technology

INFORMATION ON HOSPITALS AND HEALTH CENTRES

Service Delivery of the Public Health Care System is managed by four (4) Regional Health Authorities. There are two hundred sixty nine (269) health institutions which comprise twenty-five (25) hospitals and two hundred forty four (244) health centres.

Hospitals are categorised as Types A, B, C, Specialist and Community hospitals. The number of each type is as follows:

Type A	03
Type B	06
Type C	08
Specialist	06
Community	02

The specialist hospitals are:

1. Bellevue - Mental Health care
2. Bustamante - Paediatric care
3. Hope Institute - Oncology care
4. Sir John Golding
Rehabilitation Centre - Rehabilitative care for physically
challenged patients and paraplegics
5. National Chest - Cardio-thoracic care
6. Victoria Jubilee - Obstetrics & Gynaecology care

Public Health Centres by classification and allocation are indicated below:

Community (Comm): **158 (formerly Types 1 & 2)**

District (Dist): **65 (formerly Type 3)**

Parish (Par): **11 (formerly Types 3 & 4 located in parish capitals)**

Comprehensive (Comp): **8 (Formerly Type 5)**

Rural Maternity Clinic (RMC): **2**

A Health Department is located in each parish and the office of the Medical Officer of Health is situated there. This department is responsible for supplies of vaccines and related products for the parish.

EXPLANATORY NOTES

1. The column headed "Category" indicates the classification of the products as Vital (V), Essential (E) or Necessary (N).
2. The Column headed "Institution" reflects the type of institution in and above which the product is designated for stocking, dispensing and use. So that:
 - o **Where a type of health centre appears under the Institution column, the product may be used in that type of Primary Care institution and upwards.** Example: "Dist" means for use in district health centres up to Type A hospitals.
 - o **Where a letter appears under the Institution column the product is designated for use in that type of hospital and upwards.** Example: "C" means for use in Type C through to Type A hospitals.
 - o **Where a specific institution, out-patient clinic or unit is named, the product is designated for use in that institution/clinic/unit only.**

Abbreviations and Symbols

BVH	Bellevue Hospital
BHC	Bustamante Hospital for Children
NCH	National Chest Hospital
VJH	Victoria Jubilee Hospital
RU	Renal Unit
HCl	Hydrochloride
Inj.	Injection
Susp.	Suspension
Tabs.	Tablets
Oint.	Ointment
Co.	Compound
Soln.	Solution
Neb.	Nebulization
*	Location specified at the end of the section
⌘	Restricted use; Consultant's or Registrar's authorization required, supported by C&S Tests where applicable
◊	Drugs in categories "E" and "N" will only be available on special request
-	Available as Raw Material for manufacturing
©	Controlled Drugs/Narcotics; appropriate storage measures required
SR	Sustained Release

PREScription WRITING

[Pharmacy Regulation 20; Food and Drug Regulation 51(4)]

Prescribing of medicines should only be done when necessary and in all cases should be subject to a risk-benefit analysis.

Prescriptions for drugs or poison should be written clearly, in ink and should include the following:

- a. The date of the prescription.
- b. The name and address of the person for whom the prescription is issued and health records registration number.
- c. The name and quantity of the drug prescribed using the generic name.
- d. The name and address of the practitioner prescribing the drug.
- e. Adequate directions for use given with the prescription, and if that prescription is to be repeated, the number of times and intervals of time at which it may be repeated;
- f. The usual legible signature of the prescriber in ink.
- g. The name and registration number of the prescriber should either clearly written or stamped.
- h. The name and address of the person receiving the prescription, if given verbally.
- i. Where the prescription is given by a registered dentist ... the words "for dental treatment only" ... as the case may require.

The following guidelines are applicable, and when used can minimize medication errors:

- The age of children 12 years and under must be stated.
- The dose, frequency and duration of medicines should be stated. A minimum dose interval is to be given in cases where preparations are to be used "as needed".
- Suitable quantities of dermatological preparations should be stated.
- Prescriptions for controlled drugs should be written for a maximum duration of two (2) weeks without repeats. A new prescription must be written each time the patient requires the drug.
- Prescriptions for controlled drugs must state the total quantity of the drug to be dispensed.
- Prescriptions for controlled drugs can only be written by licensed prescribers.
- The names of drugs and related preparations must be written in full, not abbreviated.

PRESCRIPTION WRITING cont'd

[Pharmacy Regulation 20; Food and Drug Regulation 51(4)]

- The units of measure, microgram and nanogram, should be written in full. Latin abbreviations for directions for use are acceptable.
- Unofficial abbreviations can be misinterpreted and should therefore not be used.
- Avoid the unnecessary use of decimal points. E.g. 50 mg not 50.0 mg, 1G not 1.0 G, 500 mg not 0.5 G, 200 micrograms not 0.2 mg. Where the use of a decimal is unavoidable a zero is to be placed before the decimal point when no other number is present, E.g. 0.8 ml not .8ml
- When prescribing for infants, dose should preferably be calculated using the weight of the child rather than the age. See formula below.

patient's weight in kg X adult dose

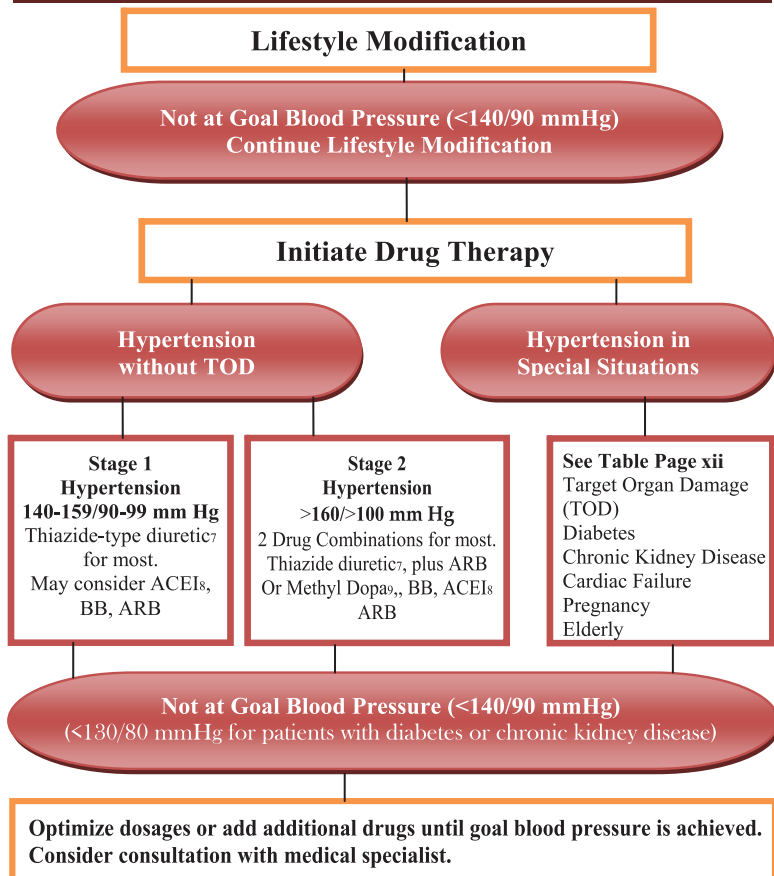
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TREATMENT OF HYPERTENSION

Principles of Hypertension Treatment

- Lifestyle modification is the cornerstone of the management of the patient with hypertension*
- Majority of patients will require two medications to reach goal

Algorithm for Treatment of Hypertension⁶



⁶Modification of Algorithm for Treatment of Hypertension, JNC7

⁷Drug of first choice in hypertension; ⁸ Drug of first choice in patients with diabetes

⁹Women only

HYPERTENSION IN SPECIAL SITUATIONS

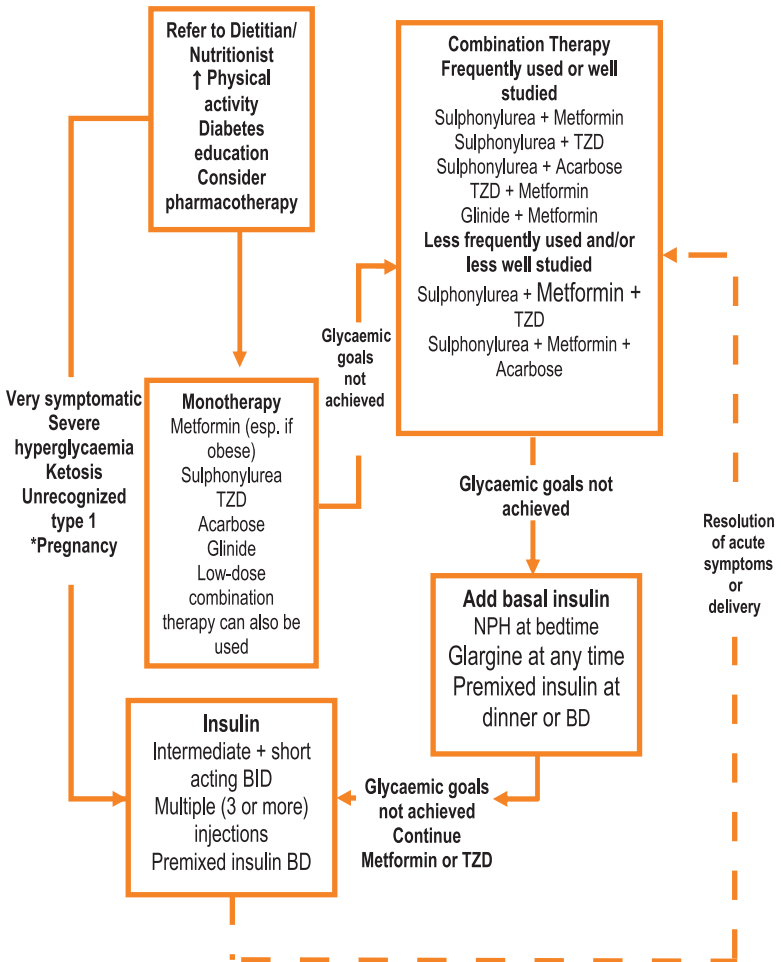
Without TOD BP (mm Hg)	Management Plan
Pre-Hypertension 120-139/80-89.	Lifestyle Modification (Non-pharmacological interventions e.g. Dietary Approach to Stop Hypertension (DASH) Diet
Stage 1 140□159/90-99	Lifestyle Modification. If BP>140/90 ₁₀ for > 6 months, initiate drug therapy with THIAZIDE DIURETIC..
Stage 2 >160/100	THIAZIDE DIURETIC, ACEI Follow-up monthly.
Special Situations BP (mm Hg)	Management Plan
Stage 2 + TOD >160/100	THIAZIDE DIURETIC, ACEI Follow-up weekly.
Diabetes Goal BP <130/80	ACEI, THIAZIDE DIURETIC., BB, CCB, ARB. (Low dose ASA recommended >40yrs. unless BP very high).
Chronic Kidney Disease Goal BP <130/80	Furosemide (b.d), ACEI, ARB.
Congestive Cardiac Failure (CCF)	Furosemide ₁₀ , ACEI ₁₁ , BB (in the elderly introduce Beta-blocker after heart failure is controlled) Aldosterone Antagonist ₁₂ .
Pregnancy Avoid ACEI	Refer to High Risk Ante Natal Clinic. Methyl Dopa, Hydralazine, BB
Elderly (> 60)	Avoid prolonged NSAID use. Decrease dosage of anti-ypertensives if renal impairment.. Caution: Postural hypotension.
Chronic Pain	Avoid prolonged NSAID.

10 – administer twice daily for anti-hypertensive effect but large doses (80 mg and greater) of this or Metolazone (5-20 mg) are often required for patients who also have renal impairment; discourage usage in the evenings to minimize nocturia

11 -Should be given to all patients in cardiac failure

12 – Usage is contraindicated in patients with impaired renal function

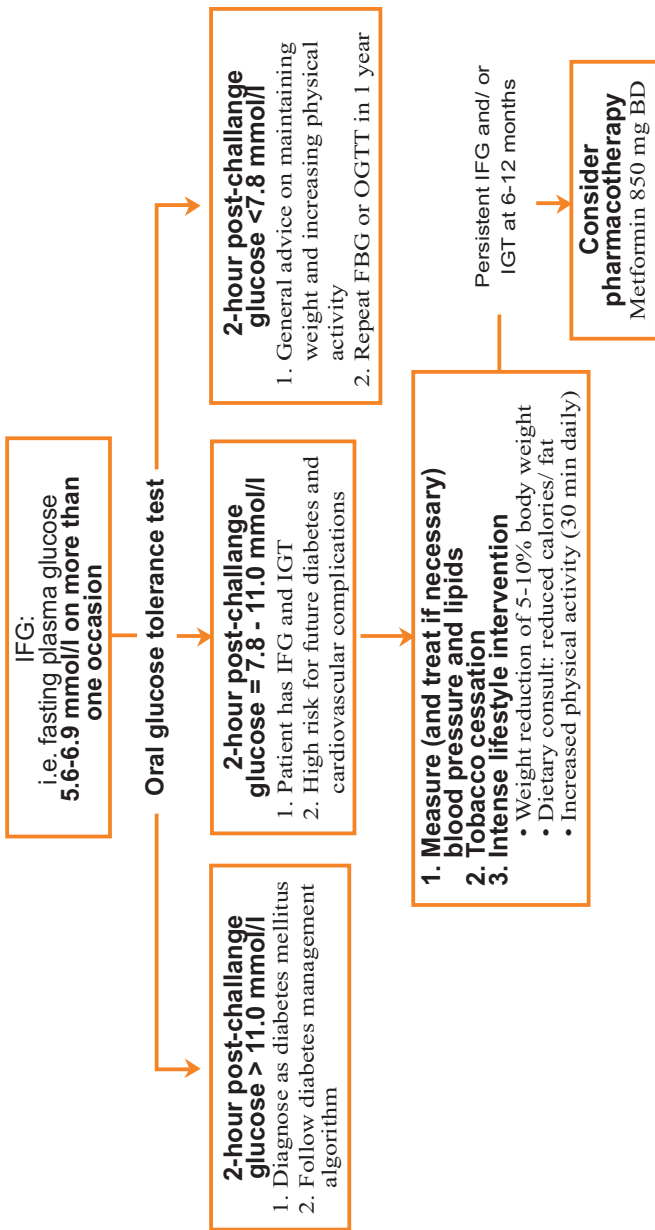
Management of Type 2 Diabetes



Modified from American Diabetes Association.

***Pregnancy in woman with preexisting diabetes.**

Management of Impaired Fasting Glucose (IFG)



LIST OF DRUGS

SECTION 1

1. CARDIOVASCULAR SYSTEM**1.1 DIURETICS**

Furosemide Tablets 40 mg	V	Dist
Furosemide Injection 10 mg/ ml	V	C
Furosemide Paediatric Liquid 1 mg/ml	V	C
Hydrochlorothiazide Tablets 25 mg	V	Dist
Indapamide SR Tablets 1.5 mg	E	Dist
Metolazone Tablets 5 mg	N	C
Spironolactone Tablets 25 mg	V	Dist

1.2 CARDIAC GLYCOSIDES

Digoxin Tablets 0.125 mg, 0.25 mg	V	Dist
Digoxin Injection 0.25 mg/ ml	V	C
Digoxin Elixir 0.05 mg/ml	V	C

1.3 ANTI-ARRHYTHMIC DRUGS**1.3.1 Class 1B**

Lignocaine HCl Inj. 10 mg/ml, 20 mg/ml	V	C
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1.3.2 Class 2 (Beta - Adrenergic Blocking Drugs)

Atenolol Tablets 50 mg	V	Dist
Esmolol Injection 10mg/ml	V	B

1.3.3 Class 3

Amiodarone Injection 50 mg/ml	V	⌘*
Amiodarone Tablet 100mg	V	⌘*
Adenosine Injection 6mg/2ml	V	⌘*

1.3.4 Class 4 (Calcium Channel Blocker)

Verapamil Tablets 80mg, 160 mg	E	Dist
Verapamil Injection 2.5 mg/ml	V	C

SECTION 1 (cont'd)

1.4 ANTI-HYPERTENSIVE THERAPY

1.4.1 Vasodilators

Hydralazine Tablets 25 mg	V	Dist
Hydralazine Injection 20 mg	V	Dist

1.4.2 Centrally Acting Alpha-Agonist

Methyldopa Tablets 250 mg, 500 mg	V	Dist
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1.5 ANGIOTENSIN CONVERTING ENZYME (ACE) INHIBITORS

Captopril Tablets 12.5 mg, 25 mg	V	Dist
Enalapril Tablets 5 mg, 10 mg, 20 mg	V	Dist

1.6 ANGIOTENSIN II RECEPTOR ANTAGONIST

Losartan Tablets 25 mg, 50 mg	E	Dist
Valsartan Tablets 80mg, 160mg, 320mg	N	Dist
Valsartan/HCTZ 80/12.5 mg, 160/12.5 mg, 320/12.5 mg	N	Dist

1.7 ANTI-ANGINAL DRUGS

1.7.1 Nitrates

Isosorbide Dinitrate Tablets 10 mg	V	Dist
Glycerol Trinitrate Tablets 600 mcg	V	Dist
Glycerol Trinitrate Injection 5 mg/ml	V	C

1.7.2 Calcium Channel Blockers

Amlodipine Tablets 5mg, 10mg	E	Dist
Nifedipine SR Tabs. 10mg, 20 mg	V	Dist

CLASSIFICATION AND DRUGS	CATEGORY	INSTITUTION
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SECTION 1 (cont'd)

1.7.3 Beta-Adrenergic Blocking Drugs

See Section 1.3.2

Carvedilol Tablets 6.25 mg, 12.5mg, 25mg	N	Par
Labetalol Injection 5 mg/ml	V	C

Selective Sinus Node If Channel Inhibitor

Ivabradine Hydrochloride 5 mg	E	Specialist only/ Special order
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1.7.4 Other

♠Sildenafil Citrate Tablets 50 mg	V	Specialist only/ Special order
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1.8 SYMPATHOMIMETICS

Adrenaline Injection 0.1%	V	Dist
Dobutamine Injection 12.5 mg, 50 mg	V	C
Dopamine Injection 40 mg/ml	V	C
Ephedrine Injection 30 mg/ml, 50 mg/ml	V	Dist
Phenylephrine Injection 10mg/ml	V	Specialist only/ Special order

1.9 ANTI-COAGULANT AND ANTI-PLATELET DRUGS

Acetylsalicylic Acid Tablets 81mg	V	Dist
Clopidogrel Tablets 75 mg	V	Dist
Dabigatran Capsules 110 mg, 150 mg	N	Specialist only/ Special order
Enoxaparin Injection 20 mg/ml, 40 mg/ml 80 mg/ml	V	C
Heparin Injection 5,000 U/ml, 10,000 U/ml	V	C
Warfarin Tablets 1 mg, 5 mg	V	Dist

SECTION 1 (cont'd)

1.10 HAEMOSTATICS

Phytomenadione Injection 2 mg/ml	V	C
Phytomenadione Tablets 10 mg	N	C
Factor VIII Fraction	N	Specialist only
Factor IX Fraction	E	Specialist only
Tranexamic Acid Tablet 500 mg	E	Specialist only
Tranexamic Acid Injection 100 mg/ml	E	Specialist only

1.11 LIPID LOWERING DRUGS

Statins

Atorvastatin Tablets 10 mg, 20 mg, 40 mg	E	Dist
Pravastatin Tabs 10 mg, 20 mg, 40mg	V	HIV/AIDS patients only
Simvastatin Tablets 10 mg, 20 mg, 40 mg	V	Dist

1.12 FIBRINOLYTIC

Streptokinase Injection 1,500,000 Units	V	C
Tissue Plasminogen Activator 50mg, 100mg	V	Specialist only

1.13 OTHER CARDIOVASCULAR DRUGS

Diosmin 450 mg/Hesperidin 50 mg Tabs.	N	Dist
Milrinone Injection 1 mg/ml	E	Specialist only/ Special order
Pentoxifylline Tablets 400 mg	E	Dist
Prostaglandin E ₁ Intravenous Solution	V	Specialist only
Trimetazidine Tablets MR 35mg	E	Specialist only/ Special order

* **BHC and Regional Hospitals Only**

SECTION 2

2. CENTRAL NERVOUS SYSTEM**2.1 ANTICONVULSANTS**

Carbamazepine Syrup 100 mg/5ml	V	Dist
Carbamazepine Tab100mg, 200mg, 400mg	V	Dist
Carbamazepine Tab CR 200 mg, 400 mg	V	Dist
Clonazepam Tablets 0.5 mg, 2 mg	V	Specialist only
Clonazepam Injection 1 mg/ml	V	Specialist only
Oxcarbazepine Tablets 150 mg, 300 mg	N	Specialist only
Oxcarbazepine Suspension 300 mg/5ml	N	Specialist only
Topiramate Tabs. 25mg, 50mg, 100mg	E	Specialist/for children only
Paraldehyde Injection 5ml	E	Specialist only/ Special order
Phenytoin Sodium Injection 50 mg/ml	V	C
Phenytoin Sodium Capsules 100 mg	V	Dist
Phenytoin Sodium Susp. 125mg/5ml	V	Dist
@Sodium Valproate Tablets 200 mg	V	Dist
@Sodium Valproate Chrono Tabs. 200 mg, 300mg		E
Dist		
@Sodium Valproate Syrup 200 mg/5ml	V	Dist
Valproic Acid Capsules 250 mg	V	Dist
Valproic Acid Syrup 250 mg/5ml	V	Dist

See Section 2.5 - Sedatives

2.2 ANXIOLYTICS

Alprazolam Tabs. 0.25 mg, 0.5 mg, 1mg	E	Dist
Diazepam Tablets 2 mg, 5 mg	V	Dist
Diazepam Injection 5 mg/ml	V	Dist
Lorazepam Injection 4 mg/ml	V	Specialist only

SECTION 2 (cont'd)

2.3 ANTIDEPRESSANTS

Amitriptyline Hydrochloride Tablets 25 mg	V	Dist
Clozapine Tablets 25 mg, 100 mg	V	Specialist only/ Special order
Fluoxetine HCl Tablets 10 mg, 20 mg	V	Dist
Imipramine HCl Tablets 25 mg	E	Dist
Paliperidone (Invega) Injection 50 mg, 75 mg,	V	Specialist only/ Special order*
Paroxetine Tablets 10mg, 30mg	N	Par
Paroxetine Tablets CR 12.5mg, 25mg	N	Par
Sertraline Tablets 50 mg, 100 mg	E	Par

2.4 ANTIPSYCHOTICS

Chlorpromazine HCl Tablets 25 mg, 50 mg, 100 mg Dist		V
Chlorpromazine HCl Syrup 25 mg/ 5 ml	V	Dist
Chlorpromazine HCl Injection 25 mg/ ml	V	Dist
Fluphenazine Decanoate Inj. 25 mg/ml	V	Dist
Haloperidol Tablets 5 mg	V	Dist
Haloperidol Injection 5 mg/ml	V	Dist
Haloperidol Decanoate Injection 50 mg/ml	V	Dist
Lithium Carbonate Tablets 250 mg	E	Par
Olanzapine Tablets 10 mg, 20 mg	E	Dist
Risperidone Tablets 1 mg, 2 mg	E	Dist
Risperidone Consta Inj. 25 mg, 37.5 mg	E	Dist
Trifluoperazine HCl Tablets 5 mg	V	Dist
Zuclopenthixol Acetate Injection 20 mg/ml	V	Dist
Zuclopenthixol Dihydrochloride Drops 20 mg/ml	V	Dist
Zuclopenthixol Decanoate Injection 200 mg/ml	V	Dist

SECTION 2 (cont'd)

2.5 SEDATIVES

Phenobarbitone Sodium Injection 200 mg/ml	V	Dist	
Phenobarbitone Tablets 30 mg	V		Dist

See Section 2.2 – Anxiolytics

See Section 15.1 – Anaesthesia

2.6 DRUGS USED IN VERTIGO AND NAUSEA

Dimenhydrinate Tablets 50 mg	V		Dist
Dimenhydrinate Injection 50 mg/ml	V		Dist
Dimenhydrinate Suppositories 50 mg	V		C
Dimenhydrinate Syrup 15mg /5ml	V		Dist
Domperidone Tablets 10mg	E		B
Domperidone Susp. 5 mg/ml	E		B
Prochlorperazine Maleate Tablets 5 mg	V		Dist
Prochlorperazine Mesylate Inj. 12.5 mg/ml	V		Par

See Section 8.8 – Drugs used in Malignant Disease; Adjuncts

2.7 ANALGESICS, ANTI-INFLAMMATORY AND ANTI-PYRETIC DRUGS**2.7.1 Opioid Analgesics**

©Codeine Phosphate Oral Soln. 15mg/5ml	V		Par
© Morphine Sulphate SR Tablets 10mg, 30mg, 60mg Comp			V
Morphine Sulphate Tablets 10 mg, 30 mg, 60 mg Comp			V
© - Mist Morphine Oral Solution 10 mg/5ml, 20 mg/5ml, 100 mg/5ml	V		Comp
©Morphine Sulphate Inj 10 mg/ml,15 mg/ml	V		C
©Pethidine HCl. Inj 50 mg/ml – 50 mg, 100mgV			C
Tramadol Injection 50 mg/ml	E		Specialist only
Tramadol Tablets 50 mg, 100 mg	E		Specialist only
Tramadol Suspension	E		Specialist only

SECTION 2 (cont'd)

2.7.2 Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)

Acetylsalicylic Acid Tablets 325 mg	V	Dist
Diclofenac Sodium Tablets 75 mg	V	Dist
Diclofenac Sodium Suppository 100 mg	V	C
Diclofenac Sodium Injection 75 mg/3ml	V	Dist
Diclofenac Potassium Supp. 12.5mg, 25 mg	V	C
Diclofenac Potassium Drops 1.5%	V	Dist
Diclofenac Potassium Tabs. 25 mg, 50 mg	V	Dist
Diclofenac Potassium Susp. 9 mg/5ml	V	Dist
Ibuprofen Suspension 100 mg/5ml	V	Dist
Ibuprofen Tablets 200 mg, 400 mg	V	Dist
Meloxicam Tablets 15mg	E	Dist
Metamizole Drops 500mg/ml	E	Dist
Metamizole Sodium Tablets 500 mg	E	Dist
Metamizole Sodium Injection 500 mg/ml	V	Dist
Paracetamol Tablets 500 mg	V	Comm
Paracetamol Syrup 125 mg/5ml	V	Comm
Paracetamol Suppositories 125mg, 250mg	E	C

2.7.3 NSAIDs/ Opioid Combination Analgesics

Paracetamol 500 mg /Codeine 30 mg Tablets	E	Par
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2.8 DRUGS USED IN PARKINSONISM AND RELATED DISORDERS

Benzotropine Mesylate Tablets 2 mg	V	Dist
Benzotropine Mesylate Injection 1mg/ml	V	Dist
Levodopa/ Carbidopa Tablets 100/25 mg, 250 mg/25mg	V	Par

2.9 CENTRAL NERVOUS SYSTEM STIMULANT

Methylphenidate HCl Tablets 10mg	V	∅Par
Methylphenidate Tablets 18mg, 27mg, 36mg,	E	∅Par

SECTION 2 (cont'd)

2.10 DRUGS USED IN MANAGEMENT OF NICOTINE USE DISORDERS

Bupropion SR Tablets 150 mg	E	Par
Nicotine Patch 7 – 21 mg/24 h	E	Par

2.11 ACETYLCHOLINESTERASE INHIBITOR

Donepezil Tablets 5mg, 10mg	E	Specialist only
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*** Bellevue, BHC and Regional Hospitals Only**

PMC – Pain Management Clinic

SECTION 3

3. DRUGS USED IN DERMATOLOGY**3.1 ANTIBACTERIALS**

Fucidic Acid Intertulle Dressing	V	Dist
Mupirocin Ointment 2%	V	Comm
Silver Sulphadiazine Cream 1%	V	Comm
Tetracycline Skin Ointment 3%	V	Comm

See Section 7.1 - Infections

3.2 ACNE PREPARATIONS

-Clindamycin Solution 1%	E	*
Tretinoin Cream 0.025%, 0.05%	E	Specialist only

See Section 7.1 - Infections

3.3 ANTIFUNGALS

Clotrimazole Cream 1%	V	Dist
Clotrimazole Solution 1%	N	Dist
Ketoconazole Cream 2%	N	Dist
Terbinafine Cream 1%	E	Dist

See Section 7.4 Infections

3.4 ANTIPRURITICS

-Calamine Lotion	E	Dist
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3.5 ASTRINGENTS AND ANTISEPTIC DYES

Hydrogen Peroxide 6% (20 vols)	E	Comm
-Potassium Permanganate Solution 0.1%	V	Dist

SECTION 3 (cont'd)

3.6 CORTICOSTEROIDS

Betamethasone Valerate Cream 0.1%	V	Dist
Betamethasone Valerate Ointment 0.1%	V	Dist
Hydrocortisone Cream 1%	V	Dist
Hydrocortisone Ointment 1%	V	Dist
Methylprednisolone Aceponate Oint. 0.1%	V	Specialist only
Methylprednisolone Aceponate Cream 0.1%	V	Specialist only

See Section 5.3 - Endocrine System

3.7 PARASITICIDES

Permethrin Cream 1%	V	Dist
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3.8 SKIN DISINFECTANTS

Cetrimide Lotion	V	Comm
Chlorhexidine Solution	V	Comm
-Povidone – Iodine Solution 10%	V	Dist

3.9 SHAMPOOS

-Cetrimide Solution 1%	V	Dist
Ketoconazole shampoo 2%	V	Dist

3.10 OTHERS

-Aqueous Cream	E	C
-Emulsifying Ointment	E	Dist
-Formaldehyde Solution 10%	E	Dist
Ketanserin Gel 2%	V	Par
Lubricant Gel	V	Dist
-Podophyllum Paint 25%	V	Par
Zinc Hyaluronic Gel	N	Dist

*** Dermatology Clinics Only**

SECTION 4

4. DRUGS USED IN DISORDERS OF THE EAR, NOSE & OROPHARYNX**4.1 EAR**

Betamethasone Sodium Phosphate 0.1% Ear Drops	V	Dist
Chloramphenicol Ear Drops 5%	V	Dist
Ciprofloxacin/Dexamethasone Ear Drops	E	Par
Clotrimazole Solution 1%	E	Dist

4.2. NOSE

Betamethasone Sodium Phosphate 0.1% with Neomycin Sulphate 0.5% Nose Drops	V	Dist
Fluticasone Nasal Spray	E	Par
-Normal Saline Nose Drops	E	Dist
Silver Nitrate Stick (long applicator)	E	Dist
Xylometazoline Nasal Drops 0.5%, 1%	N	Dist

4.3 OROPHARYNX

-Chlorhexidine Mouth Wash 0.1%, 0.2%	E	Dist
Hydrogen Peroxide 6% (20 vols.)	E	Dist

4.4 ANTI - INFECTIVES

See Section 7 – Infections

4.5 OTHERS

See Section 13 – Respiratory System

SECTION 5

5. DRUGS USED IN DISORDERS OF THE ENDOCRINE SYSTEM
5.1 DRUGS USED IN DIABETES

Acarbose Tablets 50 mg, 100 mg	N	Par
Gliclazide MR Tablets 30 mg, 60 mg	V	Dist
Glimepiride 2mg, 4mg	V	Dist
Insulin Glargine 100 units/ml	N	Specialist only/ Special order
Insulin soluble 100 units/ml	V	Dist
Insulin N 100 units/ml	V	Dist
Insulin 70/30 units/ml	V	Dist
Metformin Tablets 500 mg	V	Dist
Metformin XR Tablets 500mg, 850 mg	E	Dist

5.2. THYROID AND ANTI-THYROID DRUGS

Carbimazole Tablets 5 mg	V	Dist
L-Thyroxine Tabs 25, 50, 100 mcg	V	Dist
-Iodine 5% Solution (Lugol's Solution)	V	C
Propylthiouracil Tablets 50 mg	V	C

Adjuvants

Propranolol Tablets 10 mg, 40 mg	N	Par
Propranolol Injection 1 mg/ml	E	Par

5.3 CORTICOSTEROIDS

Cortisone acetate Tablets 25 mg	E	C
Dexamethasone Tablets 0.5 mg, 2mg, 4mg	E	C
Dexamethasone Sodium Phosphate Injection 4 mg/ml	V	C
Hydrocortisone Sodium Succinate Injection 100mg	V	Dist
Methyl Prednisolone Injection 40mg/ml I	V	C

SECTION 5 (cont'd)

5.3 CORTICOSTEROIDS (cont'd)

Prednisolone Syrup 5 mg/5ml; 15 mg/5ml	V	Dist
Prednisone Tablets 5 mg, 50 mg	V	Dist
Triamcinolone Injection 40 mg/ml	N	C

See Section 3 – Dermatology

See Section 13.2 – Respiratory

5.4 HORMONES

Desmopressin Acetate Nasal Soln. 0.1%	V	∅C
Medroxyprogesterone Acetate Depot Injection 150 mg/ml	V	C
Oxytocin Injection 10 units/ml	V	*C

5.5 CONTRACEPTIVES

Ethinyl Estradiol 0.03 mg; Norgestrel 0.3 mg Tablets	V	Comm
Ethinyl Estradiol 0.03 mg; levonorgestrel 0.15 mg Tablets	V	Comm
Levonorgestrel Tablets 750 mcg	N	*
Levonorgestrel Implant	N	Specialist only
Levonorgestrel Intrauterine System	N	Specialist only

SECTION 6

6. GASTRO-INTESTINAL SYSTEM

6.1 ANTACIDS

Aluminium + Magnesium Hydroxide Gel Tablet	E	Comm
Aluminium Hydroxide 250 mg/ Magnesium Hydroxide 500mg/5ml Susp.	E	Comm

6.2 ANTISPASMODICS AND OTHER DRUGS ALTERING GUT MOTILITY

Domperidone Tablets 10 mg	E	C
Hyoscine Butylbromide Injection 20mg/ml	N	C
Metoclopramide HCl Tablets 10mg	V	Dist
Metoclopramide HCl Injection 5mg/ml	V	Dist

6.3 DRUGS USED IN THE TREATMENT OF DIARRHOEA

6.3.1 Fluid and Electrolyte Replacement

Oral Rehydration Salts	V	Comm
Zinc tablets 25 mg	E	Dist

See Section 10.2.1 – Intravenous Infusions

6.3.2 Antimotility drugs (not recommended for use in Gastroenteritis)

Loperamide Hydrochloride Tablets 2 mg	E	Dist
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6.4 ULCER HEALING DRUGS

Omeprazole Injection 40 mg	V	C
Omeprazole Capsule 20 mg	V	Par
⌘Pantoprazole Injection 40 mg	V	C
⌘Pantoprazole Tablet 20 mg, 40 mg	V	Par

SECTION 6 (cont'd)

6.4 ULCER HEALING DRUGS (cont'd)

Ranitidine Hydrochloride Tablets 150 mg, 300 mg	V	Dist
Ranitidine Syrup 75 mg/5ml	V	Dist
Ranitidine Hydrochloride Injection 25 mg/ml	V	Dist

6.5 LAXATIVES/BOWEL CLEANSING SOLUTIONS

Bisacodyl Tablets 5 mg	N	Dist
Fleet Enema V	Par	
Fleet Phospha Soda Oral Soln.	V	C
Glycerine Suppositories (paediatric & adult)	V	Dist
Lactulose Powder 10 G Sachet	N	C
Mineral Oil V	Dist	
Sodium Picosulphate Drops	N	C

6.6 OTHERS

Sulphasalazine Tablets 500 mg	N	B
Vasopressin Injection 20 mcg/ml	V	⊗B

See Section 5.3 (Corticosteroids)

SECTION 7

7. DRUGS USED IN THE TREATMENT OF INFECTIONS

7.1 ANTIBIOTICS

Amikacin Sulphate Injection 250mg/ml	V	∅C
Amikacin Sulphate Paediatric Injection 50mg/ml	V	∅C
Amoxycillin Sodium Injection 250mg, 500mg	V	C
Amoxycillin Trihydrate Caps 250 mg, 500 mg	V	Dist
Amoxycillin Trihydrate Suspension 125 mg/5ml, 250 mg/5ml	V	Dist
Amoxycillin Trihydrate/ Clavulanic Acid Tablets 625mg, 1G	V	Dist
Amoxycillin / Clavulanic Acid Suspension 228mg/5ml, 457mg/5ml	V	Dist
Amoxicillin / Clavulanic Acid Injection 600 mg, 1.2 G	V	∅C
Ampicillin Injection 500 mg, 1G	N	∅B
Azithromycin Suspension 200 mg/5ml	N	Dist
Azithromycin Tablets 250 mg, 500 mg	N	Dist
Benzathine Penicillin Inj 1.2 MU, 2.4 MU	V	Dist
Benzyl Penicillin Injection 1,000,000 Units	V	Dist
Ceftazidime Pentahydrate Injection 500 mg, 1G	V	∅C
Ceftriaxone Sodium Injection 250 mg, 1G	V	∅Par
Cefuroxime Axetil Tablets 250 mg, 500 mg	E	Par
Cefuroxime Axetil Suspension 125 mg/5ml	E	Par
Cefuroxime Sodium Injection 750 mg, 1.5 G	V	∅C
Ciprofloxacin Injection 2 mg/ml	V	∅C
Ciprofloxacin HCL Tablets 250 mg, 500 mg	E	∅C
Clarithromycin Tablets 250 mg, 500 mg	E	∅Comp
Clindamycin HCl. Capsules 150 mg, 300 mg	N	Par
Clindamycin Phosphate Injection 150 mg/ml	E	∅C
Clindamycin Suspension 75mg/5ml	E	Par
Doxycycline Capsules 100mg	V	Dist
Erythromycin Estolate Suspension 200 mg/ 5 ml	V	Dist
Erythromycin Stearate Tabs 250 mg, 500mg	V	Dist

SECTION 7 (cont'd)

7.1 ANTIBIOTICS (cont'd)

Gentamycin Sulphate Injection 10 mg/ml, 40 mg/ml	V	C
Imipenem 500 mg/Cilastatin 500 mg Injection	V	▣B
Levofloxacin Injection 500 mg	N	▣B
Levofloxacin Tablets 500 mg,	N	▣B
Meropenem Injection 500 mg, 1G	V	▣B
Norfloxacin Tablets 400 mg	E	Dist
Piperacillin/Tazobactam Injection 4.5G	V	▣B
Vancomycin Hydrochloride Injection 500 mg, 1G	V	▣B

7.2 ANTILEPROTIC DRUGS

Clofazimine Capsules 100 mg	V	*
Dapsone Tablets 100 mg	V	*
Ethambutol Hydrochloride Tablets 400 mg	V	*
Ethambutol 275 mg/ Isoniazid 75mg/ pyrazinamide 400 mg/rifampicin 150 mg Tablets	V	*

7.3 ANTITUBERCULAR DRUGS

Isoniazid Tablets 100 mg	V	*
Isoniazid 30 mg/rifampicin 60 mg Dis. Tabs.	V	*
Isoniazid 150 mg/ rifampicin 300 mg Caps.	V	*
Pyrazinamide Tablets 500 mg	V	*
Pyridoxine Tablets 400 mg	V	*
Rifabutin Tablets 150mg	E	*
Rifampicin Capsules 150 mg, 300 mg	V	*
Rifampicin Syrup 100 mg/ 5 ml	V	*
Streptomycin Sulphate Inj. 1 G, 5 G	V	*

7.3.2 Adjunct**See Section 10.1 Nutrition**

SECTION 7 (cont'd)

7.4 ANTIFUNGALS

Amphotericin B Injection 50 mg	V	*
Clotrimazole Mouth Paint 1%	V	Dist
Fluconazole Caps 50 mg, 150 mg, 200 mg	E	Dist
Fluconazole Injection 2 mg/ml	V	B
Griseofulvin Tablets 125 mg, 500 mg	E	Dist
Griseofulvin Suspension 125 mg/ 5 ml	E	Dist
Ketoconazole Tablets 200 mg	V	Par
Nystatin Oral Suspension 100,000 units/ml	V	Dist
Terbinafine Tablets 125 mg, 250 mg	E	Dist

See Section 3.3 - Dermatology

See Section 12.3 - G&U Disorders; Drugs Used in STDs

7.5 ANTHELMINTICS

Albendazole Tablets 200 mg	E	Dist
Albendazole Suspension 100 mg/5 ml	E	Dist
Mebendazole Tablets 100 mg	N	Dist
Mebendazole Suspension 100 mg/ 5 ml	N	Dist

7.6 ANTI-MALARIALS

Chloroquine Phosphate Tablets 250 mg	E	C
Mefloquine Hydrochloride Tablets 250 mg	N	C
Primaquin Tablets 7.5 mg	N	∞C
Proguanil HCl. Tablets 100 mg	N	C
Quinine Dihydrochloride Injection 300 mg	N	Special order
Quinine Tablets 300 mg	N	Special order

7.7 ANTIVIRALS

Abacavir Tablets 300mg	E	C
Abacavir Oral Soln. 20 mg/ml	E	C
Acylovir Tablets 200 mg, 400 mg, 800 mg	V	Dist

SECTION 7 (cont'd)

7.7 ANTIVIRALS (cont'd)

Acyclovir Suspension 200 mg/5 ml	V	Dist
Acyclovir Cream 5%	E	Dist
Acyclovir Injection 250 mg, 500mg	N	C
Atazanavir /Ritonavir Tabs. 200/100 mg, 300/100mg	E	Dist
Darunavir Tablets 150 mg, 300 mg, 600mg	E	Dist
Efavirenz Caps/Tab 50mg, 200 mg, 600mg	V	Dist
Efavirenz Oral Solution 30 mg/ml	V	Dist
Etravirine Tablets 100 mg, 200 mg	E	Dist
Ganciclovir Injection 500 mg	E	C
Lamivudine Tablets 150 mg	V	Dist
Lamivudine Suspension 50 mg/5ml	V	C
Lopinavir/Ritonavir Tablets 100 mg/25mg, 200mg/ 50mg	V	Dist
Lopinavir/Ritonavir Oral Soln. 80/20 mg/ml	V	Dist
Nevirapine Tablets 200 mg	V	Dist
Nevirapine Suspension 50 mg/ 5ml	V	Dist
Oseltamivir Capsules 30 mg, 45 mg	*E	B
Raltegravir Tablets 100 mg, 400 mg		
Ritonavir Capsules 100 mg	V	Dist
Ritonavir Oral Solution 400 mg/5ml	V	Dist
Tenofovir/Lamivudine Tabs 300/300 mg	V	Dist
Tenofovir/Lamivudine Paed Formulation	V	Dist
Tenofovir/Lamivudine /Nevirapine	V	Dist
Tenofovir/Lamivudine/Efavirenz	E	Dist
Zidovudine Suspension 50 mg/5ml	V	Dist
Zidovudine 300mg + Lamivudine 150mg + Nevirapine 200mg Tablets	V	Dist
Zidovudine/Lamivudine 300mg/150mg Tabs	V	Dist

7.8 OTHER ANTI-INFECTIVES

Cotrimoxazole Tablets 480 mg, 960 mg	V	Dist
Cotrimoxazole Suspension 240 mg/ 5ml	V	Dist
Cotrimoxazole Injection 96 mg/ml	E	C
Metronidazole Susp 200mg/5ml, 250mg/5ml	V	Dist
Metronidazole Tabs 250mg, 500mg	V	Dist

SECTION 7 (cont'd)

7.8 OTHER ANTI-INFECTIVES (con't)

Metronidazole Injection 5 mg/ml	V	C
Nitrofurantoin Tablets 100 mg	N	Par
Pyrimethamine Tablets 25mg	N	PC
Sulphadiazine Tablet 500mg	N	C

* National Chest, Bustamante & Regional Hospital Only

7.9 ANTISEPTIC/DISINFECTING SOLUTIONS

Chlorhexidine (Hibitane) Solution	V	Dist
Glutaraldehyde OPA Solution	V	Comm

SECTION 8

8. DRUGS USED IN TREATMENT OF MALIGNANT DISEASES AND FOR IMMUNOSUPPRESSION
8.1 ALKYLATING DRUGS

Busulfan Tablets 2 mg	E	C
Carboplatin Injection 10mg/ml	E	B
Chlorambucil Tablets 2 mg	V	C
Cisplatin Injection 50 mg, 100 mg	V	B
Cyclophosphamide Tablets 50 mg	V	C
Cyclophosphamide Injection 200 mg, 500 mg, 1G	V	C
☐Ifosfamide Injection 1G	N	B
☐Lomustine (CCNU) Capsules 10 mg, 40 mg, 100 mg	E	B
☐Lomustine (CCNU) Injection 10 mg	E	B
Melphalan Tablets 2 mg, 5 mg	V	C
Oxaliplatin Injection 50mg, 100mg	E	B
Temozolomide Caps. 5 mg, 20 mg, 100 mg	N	A

8.2 ANTIMETABOLITES

☐Capecitabine Tablets 500mg	V	B
*Cytarabine Injection 100 mg, 500 mg	V	B
5 - Fluorouracil Inj 250 mg, 500mg, 1000mg	V	C
☐Fluorouracil Cream 5%	N	B
Gemcitabine Injection 200 mg, 1G	N	A
1, 6 Mercaptopurine Tablets 50 mg	V	B
Methotrexate Sodium Tablets 2.5 mg	V	C
Methotrexate Sodium Injection 50 mg	V	C

SECTION 8 (cont'd)

8.3 CYTOTOXIC ANTIBIOTICS

Actinomycin D Injection 0.5 mg	V	B
Bleomycin Sulphate Injection 15 U, 30U	E	B
Daunorubicin Injection 50 mg	E	B
Doxorubicin HCl Injection 10 mg, 50 mg	V	C
²Mitomycin Inj. 2 mg, 10 mg, 20 mg	N	B

8.4 VINCA ALKALOIDS AND ETOPOSIDE

²Etoposide Capsules 50 mg, 100 mg	N	B
Etoposide Injection 20 mg/ml	N	B
Vinblastine Sulphate Injection 1mg/ml	E	B
Vincristine Sulphate Injection 1 mg/ml	V	C

8.5 OTHER ANTINEOPLASTIC DRUGS

²L. Asparaginase Injection 10,000 Units	E	B
²Bortezomib Injection 3.5 mg	N	A
Dacarbazine (DTIC) Injection 100 mg	V	B
Hydroxyurea Capsules 500 mg	V	B
²Paclitaxel Injection 30 mg, 300 mg	E	B
Procarbazine HCl Capsules 50 mg	V	B
²Trastuzumab Injection 440 mg, 600 mg	N	Specialist only/ Special order
Zoledronic Acid Inj 4 mg	N	B

8.6 HORMONE ANTAGONISTS

²Anastrozole Tablets 1 mg	N	B
Cyproterone Acetate Tablets 50 mg, 100mg	N	A
Cytosine Arabinoside Injection 100 mg	V	B
²Finasteride Tablets 5 mg	N	B
²Flutamide Tablets 250 mg	N	B
²Goserelin Acetate Implant 10.8 mg	E	B
²Leuprolide Acetate Inj. 3.75 mg, 11.25mg	N	A
²Tamoxifen Citrate Tablets 10 mg	E	C

SECTION 8 (cont'd)

8.7 IMMUNOSUPPRESSANTS

Azathioprine Tablets 50 mg	V	B
°Mycophenolate Mofetil Capsules 500 mg	E	Specialist only
°Mycophenolate Mofetil Injection 5 mg/ml	N	Specialist only
°Tacrolimus Injection 5 mg/ml	N	Specialist only/ Special order

See Section 9.3

8.8 ADJUNCTS

Calcium Folate Tablet 15 mg	E	B
Calcium Folate Injection 50 mg, 300 mg	V	B
Filgrastim Injection 300 mcg/ml	N	B
Granisetron Hydrochloride Tablets 1mg	E	B
Granisetron Hydrochloride Inj. 1 mg/ml	E	B
°Mesna Tablets 400mg, 600mg	E	B
°Mesna Injection 100mg/ml	E	B

SECTION 9

9. DRUGS USED IN MUSCULOSKELETAL AND JOINT DISEASES**9.1 NON-STEROIDAL ANTI-INFLAMMATORY (NSAIDs) DRUGS**

See Section 2.7.2 – CNS

9.2 CORTICOSTEROIDS

See Section 5.3 - Endocrine System

9.3 IMMUNOSUPPRESSANTS

°Basiliximab Injection 10 mg	N	Specialist only/ Special order
Chloroquine Phosphate Tablets 250 mg	V	Comp
Cyclosporin Capsules 25 mg	N	B
Cyclosporin Oral Solution 100 mg/ml	N	B
Hydroxychloroquine Tablets 200 mg	V	Par
°Infliximab Injection	N	Specialist only
Methotrexate Tablets 2.5 mg	V	B
Methotrexate Injection 50 mg	E	B
Sulphasalazine Tablets 500 mg	E	C

See Section 8.7 - Malignant Disorders

9.4 ANTIBIOTICS

Ceftriaxone Sodium Inj. 250 mg, 1G	E	C
Cefuroxime Sodium Inj. 750 mg, 1.5 G	E	C
Gentamycin Sulphate (Beads)	E	C

See Section 7 – Antibiotics

SECTION 9 (cont'd)

9.5 NEUROMUSCULAR DRUGS

Baclofen Tablet 10 mg	V	Par
Diazepam Tablets 5 mg	V	Dist
Diazepam Injection 5 mg/ml	V	Dist
Edrophonium Chloride Injection 10 mg/ml	N	B
Pyridostigmine Bromide Tablets 60 mg	V	C
Gabapentin Caps. 100 mg,	N	Specialist only
Allopurinol Tablets 100 mg	V	Dist
Diclofenac Sodium Gel	V	Dist

9.6 OTHERS

Allopurinol Tablets 100 mg	V	Dist
Diclofenac Sodium Gel	V	Dist

See Section 7.6 – Infections

See Section 2.1 – CNS

SECTION 10

10. DRUGS AFFECTING NUTRITION AND BLOOD

10.1 NUTRITION

10.1.1 Vitamins

Cyanocobalamin Injection 1000 mcg/ml	V	Dist
Folic Acid Tablets 5 mg	V	Comm
Multivitamin/mineral Syrup	E	Comm
Multivitamin for Parenteral Use	V	C
Multivitamins/mineral for Antenatal Use	E	Comm
Pyridoxine tablet 50 mg, 100 mg	N	Dist
Pyridoxine Injection	E	C
Thiamine HCl Inj. 50 mg/ml, 100 mg/ml	V	C
Thiamine Hydrochloride Tablets 100 mg	V	C
Vitamin B Complex with Vit.amin C Injection	N	C
Vitamin B Complex Tablets	N	Dist

See Section 10.3.2 - Haemostatics

10.2 FLUIDS AND ELECTROLYTES

10.2.1

Calcium Chloride Injection 10%	V	C
Calcium Gluconate Tablets 500 mg	N	C
Calcium Gluconate Injection 10%	V	C
Oral Rehydration Salts	V	Comm
Potassium Chloride Tablets 600 mg	V	Dist
Potassium Chloride Injection 20 mEq/100ml	V	C
Sodium Polystyrene Sulphonate Powder	V	Par

10.2.2 Intravenous Infusions

Albumin 25% V	C	
Amino Acid 10 %	N	C
Dextrose 5% in 1/2 Normal Saline	V	C
Dextrose 5% in Normal Saline	V	Dist
Dextrose 5% in Water	V	Dist
Dextrose 20% in Water	N	C

SECTION 10 (cont'd)

10.2.2 Intravenous Infusions (cont'd)

Dextrose 50% in Water	V	Dist
Fractionated Soya Oil 10%, 20 %	V	C
Gelofusine V	C	
Glycerol 2.5% N	C	
Mannitol 10%, 20%	V	C
Potassium Chloride 20 mEq/ ml vial	V	Dist
Sodium Bicarbonate 8.4% vial	V	Dist
Sodium Chloride 0.45%, 0.9%	V	Comm
Sodium Chloride 3%, 5%	V	C
Sodium Lactate Compound	V	Dist
Water for Injection	E	Comm
Water for Injection Multi-dose Vial	V	Dist

10.3 BLOOD**10.3.1 Iron Preparations**

Ferrous Sulphate Tabs. 300mg	E	Comm
Ferrous Sulphate Compound Liquid	E	Comm
Iron/B12/Folic Acid Drops	E	Comm
Iron and Multivitamin Tablets	E	Comm

10.3.2 Haemostatics

Phytomenadione Injection 2 mg/ml	V	C
Phytomenadione Tablets 10 mg	N	C

10.4 OTHER FLUIDS

Water for Irrigation 1.5L, 3L	E	Comm
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SECTION 11

11. DRUGS USED IN OPHTHALMOLOGY**11.1 MYDRIATICS AND CYCLOPLEGICS**

Atropine Sulphate Eye Drops 1%	V	C
Cyclopentolate 1% Eye Drops	E	⊗B
Phenylephrine HCl. Eye Drops 2.5%	E	⊗B
Tropicamide Eye Drops 1%	E	⊗B

11.2 MIOTICS AND DRUGS FOR TREATING GLAUCOMA

Acetazolamide Tablets 250 mg	V	C
Dorzolamide Eye Drops 2%	E	B
Dorzolamide 2%/ Timolol 0.5% Eye Drops	E	B
Pilocarpine HCl. Eye Drops 4%	V	C
Timolol Maleate Eye Drops 0.5%,	V	C
Travaprost 40mg/Timolol 5mg/ml Eye Drops	E	C
Travaprost Eye Drops 0.004%	E	B

11.3 CORTICOSTEROIDS

Betamethasone Sodium Eye Drops 0.1%	E	C
Dexamethasone Injection 4mg/ml for Subconjunctival use	E	⊗B
Dexamethasone Eye Drops 0.1%	V	C
Methylprednisolone Acetate Inj 40 mg/ml	E	C
Prednisolone Acetate Eye Drops 1%	V	B

See Section 5.3 - Endocrine

SECTION 11 (cont'd)

11.4 ANTIBACTERIALS

Betamethasone Sodium Phosphate 0.1% with Neomycin 0.5% Eye Drops	V	Dist
Chloramphenicol Eye Drops 0.5%	V	Dist
Ciprofloxacin 0.3% Eye Drops	V	Par
Ciprofloxacin 0.3% Eye Ointment	E	C
Gentamicin Eye Drops 0.3%	N	C
Gentamycin Injection for Conjunctival use	V	▣B
Tetracycline Eye Ointment 1%	V	Dist

See Section 7.1 - Antibiotics

11.5 OTHERS

Acetylcholine Powder for Reconstitution 1% for Intraocular irrigation	E	B
Acyclovir Eye Ointment 3%	E	C
Balanced Salt Solution	E	▣B
Diclofenac Sodium Eye Drops 0.1%	E	Par
Fluorescein Sodium Eye Drops 1%, 2%	N	▣B
Flourescein Strips	E	▣B
Intra Ocular Lens	V	Specialist only/ Special order
Olopatadine HCl Solution 0.2%		Special order
Silver Nitrate Eye Drops 1%	V	C
VisoElastic Injection (lvisc)	V	Specialist only/ Special order

See Section 7 - Infections

SECTION 12

12. DRUGS USED IN GENITO-URINARY SYSTEM DISORDERS**12.1 DRUGS ACTING ON UTERINE MUSCLE****12.1.1 Uteronics**

Methylergometrine Maleate Tabs 200 mcg	V	C
Methylergometrine Maleate Inj. 200 mcg/ml	V	C
Misoprostol Tablets 200 mcg	N	C
Oxytocin Injection 10 units/ml	V	Dist

12.1.2 Uterine Muscle Relaxants

Magnesium Sulphate Injection 50% Solution	V	C
Salbutamol Sulphate Tablets 4 mg	V	Dist

12.1.3 Uterine Muscle Vasoreactant Drug

Vasopressin Aqueous Solution 20 units/m	V	B
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12.2 OBSTETRIC CONDITIONS

⌘Rhogam Injection 350 mcg	V	Specialist only/ Special order
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12.3 DRUGS USED IN STI's

Benzathine Penicillin Inj. 2,400,000 Units	V	Dist
Ceftriaxone Injection 250 mg	V	Dist
Ciprofloxacin Tablets 250 mg, 500 mg	E	Dist
Clotrimazole Pessaries 100 mg	V	Dist
Clotrimazole Cream 1%	V	Dist
Cotrimoxazole Tablets 480 mg	N	Dist
Doxycycline Capsules 100 mg	V	Dist
Erythromycin Tablets 250 mg, 500 mg	V	Dist
Fluconazole Capsule 150mg, 200mg	E	Dist
Metronidazole Suspension 200 mg/5ml	V	Dist
Metronidazole Tablets 200 mg, 500 mg	V	Dist

SECTION 12 (cont'd)

12.3 DRUGS USED IN STI's (cont'd)

Metronidazole/Miconazole Vaginal Tablets	E	Dist
Norfloxacin Tablets 400 mg	N	Dist
-Podophyllin Paint 25% in Tr. Benzoin Co	N	Dist
Silver Nitrate Sticks	E	Dist

See Section 7 – Infections

12.4 DRUGS USED FOR URINARY RETENTION

Finasteride Tablets 5 mg	V	Dist
Tamsulosin CR Tablets 0.4 mg	E	Dist
Terazosin Tablet 1 mg, 5 mg	E	Dist

12.5 DRUGS USED FOR URINARY FREQUENCY, ENURESIS & INCONTINENCE

Oxybutynin Tablets 2.5 mg, 5 mg	E	B
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12.6 OTHERS

See Sections 5.4 - Hormones;
5.5 - Oral Contraceptives;
8 - Malignant Disease

SECTION 13

13. DRUGS USED IN TREATMENT OF DISORDERS OF THE RESPIRATORY SYSTEM
13.1 BRONCHODILATORS

Aminophylline Injection I.V. 250 mg/10ml	V	C
Ipratropium Bromide Nebuliser Solution 250 mcg/ml	V	C
Ipratropium Bromide Inhaler 20 mcg/metered dose	E	Dist
Salbutamol Inhaler 100 mcg/metered dose	V	Dist
Salbutamol Nebuliser Solution 5 mg/ml	V	Dist
Salbutamol Syrup 2 mg/5ml	E	Dist
Salbutamol Tablets 4 mg	E	Dist
Salbutamol/Ipratropium MDI 100mcg/20mcg	N	Dist

13.2 CORTICOSTEROIDS

Beclomethasone Inhaler 50 mcg/metered dose, 250 mcg/metered dose	V	Dist
Budesonide Soln. for Neb. 250 mcg/ml	N	C
Budesonide Turbohaler 100 mcg/dose	E	α*
Fluticasone Inhaler 50 mcg/metered dose, 125 mcg/metered dose	V	αPar
Hydrocortisone Inj. 100 mg/2ml, 250 mg/2ml	V	Dist
Methylprednisolone Injection 40 mg/ml	V	Dist
Prednisolone Syrup 5 mg/5ml, 15 mg/5ml	V	Dist
Prednisone Tablets 5 mg, 50 mg	V	Dist

See Section 4.2 – ENT; Drug Used in the Nose

SECTION 13 (cont'd)

13.3 BRONCHODILATOR/CORTICOSTEROID COMBINATION

Salmeterol/ Fluticasone Inhaler 25mcg/125mcg; 25mcg/250mcg	V	Par
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13.4 ANTIHISTAMINES

Chlorpheniramine Maleate Inj. 10 mg/ml	V	Comm
Chlorpheniramine Maleate Tablets 4 mg	V	Comm
Chlorpheniramine Syrup 2 mg/5ml	V	Comm
Diphenhydramine Hydrochloride Injection 10 mg/ml	V	Comm
Diphenhydramine HCl. Elixir 12.5 mg/5ml	V	Comm
Diphenhydramine HCl. Caps. 25 mg, 50 mg	V	Comm
Loratidine Tablets 10 mg	N	Dist
Loratidine Syrup 5 mg/5ml	N	Dist

13.5 ANTI-INFECTIVES

See Section 7 – Infections

13.6 EXPECTORANTS AND COUGH SUPPRESSANTS

Bromhexine Hydrochloride Elixir 4mg/5ml	E	Dist
Chlorpheniramine 2.5 mg/5ml / Ammonium Chloride 96 mg/5ml / Ephedrine HCl.16 mg/5ml / Sodium Citrate 40 mg/5ml Syrup	N	Dist
Diphenhydramine, 15 mg/ Ammonium Chloride 135 mg/ Sodium Citrate 57 mg / 5ml Syrup	N	Dist

SECTION 13 (cont'd)

13.7 OXYGEN

Oxygen	V	Comm
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13.8 NASAL DECONGESTANTS

See Section 4.2 – ENT Drugs

13.9 PULMONARY SURFACTANT

⌘Beractant Suspension 25 mg/ml	E	Special order
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13.10 OTHERS

Montelukast Tablets 4 mg, 10 mg	N	*
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See Section 8 - Malignant Disorders

* BHC, NCH & Regional Hospitals only

SECTION 14

14. VACCINES AND RELATED PRODUCTS

Bacillus Calmette-Guerin (BCG) Vaccine	V	*
Diphtheria Antitoxin (ADS) Injection	V	*
Diphtheria and Tetanus adsorbed (DT) (adult and child) Vaccine	V	*
Diphtheria, Tetanus and Pertussis (DTP) Vaccine	V	*
DPT, Hepatitis B, Haemophilus Influenzae Type B Combination Vaccine	V	*
Gas Gangrene Antitoxins (Mixed)	V	*
Haemophilus Influenzae Vaccine	V	*
Hepatitis B Vaccine	V	*
Hepatitis B Immunoglobulin	E	C
Human Immunoglobulin	V	C
Human Papillomavirus Vaccine	E	**
Influenzae Vaccine	V	*
Measles, Mumps and Rubella (MMR) Vaccine	V	*
Pneumococcal Conjugate Vaccine	E	**/°
Poliomyelitis (OPV) Vaccine	V	*
Poliomyelitis Inactivated Vaccine	V	*
Tetanus Immunoglobulin	V	C
Tuberculin (PPD) Vaccine	V	*
Yellow Fever Vaccine	V	*

*Available at all Parish Health Departments

** To be introduced at a later date

° Available for high risk cases

SECTION 15

15. DRUGS USED IN ANAESTHESIA

15.1 GENERAL ANAESTHESIA

15.1.1 Peri-Operative Agents

Alprazolam Tablet 0.5 mg	N	C
Atropine Sulphate Injection 0.6 mg/ml	V	C
- Chloral Hydrate Paediatric Elixir 4%	V	C
Glycopyrrolate Injection 0.2 mg/ml	N	Specialist only/ Special order

See Section 2.2 - CNS Drugs

15.1.2 Intravenous Agents

Ketamine Hydrochloride Injection 50 mg/ml	V	C
Propofol Injection 10 mg/ml	V	C
Thiopental Sodium Injection 0.5G, 1G	V	C

15.1.3 Inhalation Agents

Isoflurane 100 ml	V	C
Nitrous Oxide Gas	V	C
Sevoflurane 250ml	V	C
Oxygen	V	Dist

15.1.4 Muscle Relaxants

Atracrium Injection 10 mg/ml	E	C
Cis-atracurium Injection 2 mg /ml	V	C
Dantrolene Injection 20 mg	N	Specialist only/ Special order
Pancuronium Bromide Injection 4 mg/2ml	E	C
Suxamethonium Chloride Injection 50 mg/ml	V	C
Vecuronium Injection 10 mg	E	C

SECTION 15 (cont'd)

15.1 GENERAL ANAESTHESIA CONTD.**15.1.5 Narcotics and Sedatives**

©Codeine Phosphate Injection 60 mg/ml	N	B
©Fentanyl Patches 25, 50, 75, 100	E	B
©Fentanyl Citrate Injection 50 mcg / ml	E	C
Midazolam Injection 2 mg/ml	V	C
©Morphine Sulphate Injection 10 mg/ml	V	C
©Pethidine Hydrochloride Injection 50 mg/ml	V	C
©Remifentanil Injection 1 mg, 2mg	N	C

15.1.6 Adjuvants

Esmolol Injecton 10mg/ml	V	B
Flumazenil Injection 100 mcg/ml	V	B
Labetolol Hydrochloride Injection 5 mg/ml	N	C
Isoprenaline Injection 20 mcg	V	B
Naloxone Hydrochloride Injection 0.4 mg/ml	V	C
©Naloxone Hydrochloride Neonatal Injection 0.2 mg/ml	V	C
Noradrenaline Injection	E	C
Phenylephrine Injection 1%	V	C
Sodium Citrate Solution 0.3mg	V	C
Sodium Nitroprusside Injection 10 mg	E	C

15.1.7 Anticholinesterases

Neostigmine Methylsulphate Injection 2.5 mg/ml	V	C
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15.1.8 Others

See Sections 1, 2, 5, 8, 9, 10, 13, 16

SECTION 15 (cont'd)

15.2 LOCAL ANAESTHESIA

Bupivacaine Hydrochloride Injection 0.25 %, 0.5%	E	C
Bupivacaine 0.5%, Glucose 80 mg/ml Injection	V	B
Lignocaine gel	E	Dist
Lignocaine HCl Injection 1%, 2%	V	Dist
Lignocaine Hydrochloride Injection 2% with Adrenaline 1: 200,000	V	Dist
Lignocaine Hydrochloride Spray 10%	N	Dist
Lignocaine 2.5% / Prilocaine 2.5 % Cream	E	C
Lignocaine 2% with Epinephrine Injection 1:100,000	V	Dist
Lignocaine Patches	E	C

SECTION 16

**16. ANTIDOTES & OTHER SUBSTANCES
USED IN POISONING**
16.1 NON-SPECIFIC

Activated Charcoal Powder	V	Dist
Adrenaline Injection 0.1%	V	Dist
Atropine Sulphate Injection 1 mg	V	Dist
Calcium Gluconate Injection 100 mg/ml	V	Dist
Diazepam Injection 5 mg/ml	V	C

16.2 SPECIFIC

Acetylcysteine Injection 200 mg/ml	V	C
Desferrioxamine Injection 500 mg	V	C
Dimercaprol Injection 50 mg/ml	V	C
Flumazenil Injection 0.1 mg/ml	V	C
Glucagon Injection 1 mg/ml	V	C
Naloxone HCl Injection 400 mcg/ml	V	C
Pralidoxime Mesylate Injection 200 mg/ml	V	C
Protamine Sulphate Injection 50 mg/5ml	V	C
Remifentanyl Injection	V	C
Sodium Calcium Edetate Injection 200 mg/ml	V	C

SECTION 17

17. DRUGS USED IN TREATMENT OF PATIENTS WITH RENAL DISORDERS
17.1 CARDIOVASCULAR AGENTS
17.1.1 Angiotensin Converting Enzyme (ACE) Inhibitor

∅ Perindopril Tablets 5 mg, 10 mg E ∅C/RU

17.1.2 Channel Blocker

® Nifedipine (Adalat Oros) 30 mg, 60 mg E ∅C/RU

17.1.3 Vasodilator

Minoxidil 10 mg V ∅C/RU

17.2 NUTRITION
17.2.1 Vitamins

Calcitriol Capsule 0.25 mcg E RU

Paricacitol Injection 5mcg/ ml; 2mcg/ ml N RU

17.2.2 Minerals and Electrolytes

Calcium Carbonate Tablets 750 mg N RU

Iron Sucrose Injection 20 mg/ml V RU

Other Preparations

Epoetin Alfa Injection V RU

Epoetin Beta Injection V C/RU

∅® Methoxy polyethylene glycol-epoetin beta (Micera) V

Specialist/ Special order

17.3 SPECIFIC ANTIDOTE

∅ Renvela (Sevelamer) 800mg V Specialist/
Special order

SECTION 17 (cont'd)

17. DRUGS USED IN TREATMENT OF PATIENTS WITH RENAL DISORDERS (cont'd)**17.1 DIALYSIS FLUIDS**

Acid Bicarbonate for Hemodialysis	V	RU
Hemodialysis Solution	V	RU
Peritoneal Dialysis Solution	V	RU
Renalin Cold Sterilant Solution	V	RU

RAW MATERIALS

◆ BANDAGES AND DRESSINGS

Bandage Tegaderm	E	Comm
Cotton Unbleached	V	Comm
Cotton Wadding	V	Comm
Cotton Wool Absorbent Non-Sterile	V	Comm
Cotton Wool Non-Absorbent Sterile	V	Comm
Gauze Absorbent	V	Comm
Gauze Bandage (Elastic) 10 cm	E	Comm
Gauze Tube Bandage Applicators 2", 4", 8"	E	Comm
Lint Absorbent	N	Comm
Plaster of Paris 7.5 cm, 15 cm, 20 cm	V	C
Plasters Extension 5 cm	V	Comm
Surgicell	V	Comm
Tape Elastic Adhesive		
Tape Micropore	V	Comm

◆ BLADES

Blades Surgical #10, 15, 22	V	Comm
Blades Surgical #20	E	Comm
Blades Surgical #11, 12	N	Comm

◆ CATHETERS AND TUBES

Cannulas Nasal	V	C
Catheter Foley	V	Dist
Catheters Suction	V	C
Catheters I V Placement Sizes 14 – 24	V	Dist
Catheters Umbilical	V	C
Central Venous Catheter irrigation set, paed	V	C
Dialysis Catheters - Haemodialysis	V	B
Dialysis Catheters – Peritoneal	V	B
Embolectomy Catheter (Fogarty)	V	C
Endotracheal Tubes - adult, paed, neonates	V	C
Feeding tubes (all sizes)	V	C
Intravenous Administration Sets	V	Dist
Thoracostomy Tube	V	B
Tubes Argyle Chest Trocar # 10,12,14,16, 8	V	C
Tubes Nasogastric	V	C
T - Tubes	V	C
Y - Connector	V	BHC

MEDICAL SUNDRIES (cont'd)

◆ GLOVES

Gloves Elbow Sterile and Disposable	E	C
Gloves Disposable Sterile	V	Comm
Gloves Disposable Medium, Large (Latex)	V	Comm
Gloves Postmortem # 7.5, 8.5	E	C
Gloves Surgeon (All Sizes) Sterile	V	Comm

◆ NEEDLES SURGICAL

Needles Aspiration #14	V	Dist
Needles Disposable # 18, 19, 20, 21, 22, 24, 25 G x 1.5"	V	Comm
Needles Epidural 18 G	E	A
Needles Epidural Pack (Mini)	E	A
Needles Hemodialysis Fistula	V	B
Needles Lumbar Puncture 3.5 cm , 6 cm	E	A
Needles Spinal #22, 24, 25, 26 G	V	B
Spinal sets	E	A

◆ SYRINGES

Syringes Disposable Luerlock (All Sizes)	V	Comm
Syringes Insulin 100 Units	V	Comm
Syringes Insulin 50 Units	V	Comm
Syringes Luerlock 50 cc, 20cc, 60cc	N	Comm
Syringes without Luerlock 20cc	V	Dist

◆ OTHER SUNDRIES

ABG Blood Gas Cartridges	V	C
Air Bulb	E	Comm
Air Contrast Flexi Tip #9322	V	BHC
Airways with Introducer – adult, paediatric	V	C
Ambu Resuscitator Bags – paediatric, adult	V	Dist
Anaesthetic Extension Sets	V	C
Autoclave Indicator Strips	V	Comm
Autoclave Tapes	V	Comm

MEDICAL SUNDRIES (cont'd)

Bags Colostomy	E	Comp
Bags Urine (Adult & Paediatric)	E	Comp
Bands Identification (colour coded)	N	C
Blood Giving Sets –all types	V	C
Blood Pumps	V	C
Blood Glucose Test Kits, Strips & Lancets	V	Comm
Body Bags	E	C
Bone Marrow Biopsy Sets	E	A
Bottles Underwater Drainage	V	C
Cardiotocograph Machine & Paper Tracing	V	C
Caps Nurses Disposable	E	Comm
Central Venous Pressure sets 16g, 20g	V	C
Cricothyroidotomy Set (Emergency airway)	V	A
Colostomy Tips #s 9323, 9513, 9519	V	C
Containers - Infectious Waste	N	Comm
Container – Sharps	N	Comm
Container – Specimen	N	C
Containers - Tablets Jars (all sizes)	N	Dist
Cord Clamps – Hollister (Umbilical)	V	C
Cover Shoes	V	C
Dacron patches	N	B
Dialyzers – Fresenius, Nipro, Rexeed	V	Renal Unit
Diathermy Leads & Pads	V	B

◆ OTHER SUNDRIES (cont'd)

ECG Leads	V	C
Enema Sets	V	C
Enema Retention Rings #s 820, 825	V	C
Enema Tips - Flexi-tip - #s 9504, 9510, 9518, 9522	V	C
Envelopes - Pharmaceuticals	V	Comm
Eye Drop Bottles 15 ml	E	Dist
Eyepads	V	Comm
Eyeshields	V	Comm
Feeding Tubes (all sizes)	V	C

MEDICAL SUNDRIES (cont'd)

Foetoscope	V	Comm
Gauze Pledgets (peanut swabs)	E	C
Gowns Disposable Sterile	E	C
Gowns Disposable Unsterile	E	Dist
Gortex Tube Grafts	N	B
Hand Sanitizers	E	Comm
Humidifiers	V	C
Labels (Pharmaceuticals)	N	Dist
Macintosh	N	C
Masks Disposable	V	Comm
Mask Splash Guard (face shields)	/V	C
Masks with Ventilator	N	Dist
Maternity Pads	N	Par
Medication Cups	E	Comm
Mersilene Tape for Cervical Cerclage	V	C
Mucous Extractor Specimen Traps	N	C
Nebulizing Chambers	V	Dist
Oxygen Masks	V	Dist
Oxygen Connectors	V	Dist
Pads Incontinent	N	C
Pampers – adult, paediatric	E	C

◆ OTHER SUNDRIES (cont'd)

Peak Flow Meters and Mouth Pieces	N	Dist
Peritoneal Dialysis Cassettes for Home Choice Machines	V	B
Plastic Aprons	N	C
Plastic Medicine Bottles (2 oz – 16 oz sizes)	V	Comm
Portex Vaginal Pessaries 65, 70, 75, 80	N	C
Prolene Mesh	V	C
Pulse Oximeter Sensor – all types	N	Dist
Razor Sets	E	Par
Scrub Brushes with or without Iodine	V	C
S-Entry Mats	E	C
Sheeting Disposable	N	Comm

MEDICAL SUNDRIES (cont'd)

Skin Traction Kit	V	C
Slings – Figure 8 & Arm	V	Comm
Soft Rolls	E	C
Spacer with face Mask (for inhalation)	N	C
Splints Various sizes	E	Comm
Sterilizing Pouches	V	Comm
Stethoscopes	V	Comm
Sutures – all types	V	Comm
Test Kits – HCG Urine	E	Comm
Test Kits – Blood Glucose and Strips	E	Comm
Test Kits - T and B cross Match	V	B
Test Kits – HLA Tissue Typing	V	B
Thermometers Digital, Mercury, Rectal	V	Comm
Tongue Depressors	N	Comm
Troponin 1 Test Kits	V	C
Umbilical Cotton Tapes	V	C
Volumetric Sets (Paediatric) (Buretrol)	V	C
Wrapping Paper (autoclave)	V	Comm
Ziplock bags	N	Comm

DENTAL SUPPLIES

PRODUCTS & EQUIPMENTS

Abrasive Paste
Amalgam Pellets
Anaesthetic Topical Liquid
Calcium Hydroxide Refill
Cement Zinc Oxide Powder
Composite Material
Detergent Cleaner
Developer and Replenisher X-Ray
Guttapercha
I.R.M. Powder and Liquid
Lubricant H.P.
Needles
Sealant
Solvent and Thinner
Sterilant Solution
Surgical Blades
Sutures
Syringes
X-Ray Films
Zinc Oxide Powder
Zoe Cement (Powder and Liquid)

RADIOGRAPHY DEPARTMENT

Diagnostic Agents

Gastromiro (iopamidol) Solution

Magnevist (gadopentetate dimeglumine) Injection

Optiray (ioversol) Injection

Ultravist (iopromide) Injection

Urografin (sodium amidotrizoate/ meglumine amidotrizoate) Injection

RAW MATERIALS

Castor Oil	Pulv. Cocaine Hydrochloride
Crystal Chloral Hydrate	Pulv. Codeine Phosphate
Crystal Chlorocresol	Pulv. Ephedrine Hydrochloride
Crystal Citric Acid	Pulv. Hydrocortisone Acetate
Crystal Gentian Violet	Pulv. Magnesium Carbonate
Crystal Phenol	Pulv. Magnesium Trisilicate
Crystal Magnesium Sulphate	Pulv. Morphine Hydrochloride
Crystal Potassium Chloride	Pulv. Precipitated Sulphur
Crystal Potassium Citrate	Pulv. Salicylic Acid
Crystal Potassium Iodide	Pulv. Tetracycline
Crystal Potassium Permanganate	Pulv. Zinc Oxide
Crystal Sodium Citrate	Pulv. Zinc Sulphate
Crystal Sodium Chloride	Resin Podophyllum
Crystal Sodium Thiosulphate	Solution Formaldehyde
Emulsifying Wax	Yellow/White Soft Paraffin
Extract of Liquorice	
Liquid Acetic Acid	
Liquid Benzalkonium	
Liquid Chloroform	
Liquid Glycerine	
Liquid Ichthammol	
Liquid Methylsalicylate	
Liquid Paraffin (Light and Heavy)	
Liquid Resorcinol	
Menthol Crystals	
Oil of Lemon	
Oil of Peppermint	
Pulv. Acriflavine	
Pulv. Ammonium Bicarbonate	
Pulv. Ammonium Chloride	
Pulv. Benzoic Acid	
Pulv. Boric Acid	
Pulv. Calamine	
Pulv. Chlorhexidine (Acetate and Gluconate)	
Pulv. Chlorinated Lime	

DONATION OF PHARMACEUTICALS and RELATED GOODS

1. INTRODUCTION

The Ministry of Health is a recipient of various gifts from both local and international donors. Pharmaceuticals, medical sundries and other related products account for a large percentage of the items donated.

In 1999 the Ministry developed a system to streamline and monitor donation activities for drugs and sundries. This led to the development of a gift policy that remains germane to these donations. Further, the provisions under the relevant laws and regulations are applicable to drugs and related products. For example goods are not to arrive at the ports before or without the requisite Permit issued by the Division in keeping with the Food and Drugs Regulations, 1975.

Critical factors that influence acceptance of gifts include the quantities being donated, usefulness, usage pattern, expiry dates, distribution and likely public health impact. Quantities are important because they can directly impact the Ministry's spending on drugs and other items. By foregoing purchases of items that have been donated in adequate quantities, scarce money can be used for other supplies.

Another major aim for monitoring donations is to as far as possible, avoid spoilage and disposal. This is important as drug disposal is costly both to the organization and the environment.

2. GUIDELINES FOR DONATION OF PHARMACEUTICALS

- The specific products and quantities to be donated must be based on the expressed needs for domestic use at the local level.
- The list of pharmaceuticals and any other related items proposed for donation should be sent through the Regional Health Offices to the major local health facilities for which the donations are intended, to determine whether the products can be utilized, once the donor has identified them as possible donations for Jamaica. A coordinator based locally may act on behalf of overseas donors.

GUIDELINES FOR DONATION OF PHARMACEUTICALS cont'd

- The Regional or Chief Pharmacist should dialogue with the Medical Officer of Health and Senior Medical Officer at the local health facility, to determine the specific needs so that donations which are accepted are those which are needed for use. This process also applies to Community Medical Missions.
- The recipient(s) must confirm acceptance of specific items with quantities in writing to the donor/coordinator.
- The donor/local coordinator submits the list in duplicate, along with copies of the letters of acceptance from the local health facilities to the Pharmaceutical and Regulatory Affairs Department at least fourteen (14) days prior to the shipment.
- A description of each item to be supplied should include the following information:
 - Trade name
 - Generic name
 - Name and address of manufacturer
 - Quantity being supplied. Include pack size.
 - Strength (of drug)
 - Expiry date
 - Batch number
- The donations should bear an expiry date of at least twelve (12) months after the landed date.
- In special circumstances where the items being imported are out of stock locally and it is established that the quantities being donated can be used ahead of a shorter expiry date (not less than six months), approval may be obtained to import these items.
- The brand or generic moiety of a donation (drug) should be registered for use in Jamaica as well as approved by the health authorities for use in the country of manufacture or export. The manufacturing facility of the donated product should be Good Manufacturing Practice certified in accordance with the World Health Organization guidelines. Special consideration may be applied where a drug not registered locally is to be administered in emergency procedures (e.g. invasive cardiovascular or cerebral interventions)

GUIDELINES FOR DONATION OF PHARMACEUTICALS cont'd

- The appropriate importation permit should be obtained from the regulatory department, prior to arrival of the donation at the port of entry. There is a **twenty-four (24) hour turn-around time** for the evaluation of permit applications..
- The importer should submit quarterly reports to the Standards and Regulation Division indicating the items imported and quantities distributed.
- The labels for donated products including package inserts should be written in English. Bilingual labels are acceptable on condition one of the languages is English.
- Donated products should be imported in their original containers from the manufacturer. Products that have been opened, and used will not be accepted. Pre-packaged products must be appropriately labelled and must state the brand name, generic name and strength, batch number and expiry date of the product.
- Following distribution at a community health mission, all unused pharmaceuticals should be sent to the Pharmacy Department of the nearest Government health facility for handling. Notice of destruction is to be sent to the Chief Drug Inspector in the Ministry of Health.
- The Standards and Regulation Division on behalf of the Health Ministry, reserves the right to detain, seize or cause to be re-exported, pharmaceuticals and other related products imported contrary to these guidelines. Failure to comply with the guidelines is a breach of the Food and Drugs Act 1964 and the Food and Drugs Regulation 1975.
- Breaches of the Customs Act 1941 may result in the imposition of fines as deemed appropriate in keeping with that Act.

**Standards and Regulation Division
Ministry of Health
November 2015**

**MINISTRY OF HEALTH
CENTRAL DRUG & THERAPEUTICS COMMITTEE
FORMULARY DRUG REQUEST FORM**

Application for addition, deletion or re-evaluation of a specific drug

Section A: To be completed by physician or pharmacist

Name of drug (generic/trade)	Dosage form(s) and strength(s)
Indication(s):	Dosage regimen(s):
<p>Your recommendation:</p> <ul style="list-style-type: none"> • Delete drug • Add drug • Add drug with restrictions/guidelines • Re-evaluate drug 	<p>If the recommendation is for deletion, please indicate reason(s)</p> <ul style="list-style-type: none"> • New evidence drug is unsafe (provide supporting documents) • An equivalent drug on the formulary is more effective (state name of drug) • A more effective drug is being recommended • A less expensive drug is being recommended • Other (please state)
<p>If the recommendation is for an addition/re-evaluation, please provide evidence base documentation to support the following criteria.</p> <ul style="list-style-type: none"> • Efficacy • Effectiveness • Safety • Financial impact 	
Name of Applicant	Qualification/license #
Place of Practice	Telephone #/ Fax Number #/ email
Signature:	Date:

MINISTRY OF HEALTH

DRUG REPORT FORM

The objective of the Drug Report Form is to capture information on adverse drug reaction as well as the efficacy of drugs. The form is therefore intended as a tool for drug surveillance reporting. The information provided may be used to guide the decision making process with respect to drug selection thereby ensuring that only the most effective therapies are used.

SECTION 1 - ADVERSE DRUG REACTION (ADR)

1.1 PATIENT INFORMATION

Patient Initials: _____ Sex: M / F Weight (kg): _____

Age (at time of reaction) _____ Identification (Your Practice/Hospital Ref.): _____

1.2 PATIENT MEDICAL HISTORY

1.3 SUSPECTED DRUG(S)

Give brand name of drug and batch number if known

Route	Dosage	Date Started	Date Stopped	Quantity taken
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1.4 OTHER DRUGS (Including self medication and herbal remedies)

Did the patient take any other drugs in the last three months prior to the reaction? Yes / No
If yes, please give the following information if known:

Drug (Brand if known)	Route	Dosage	Date started	Date Stopped	Prescribed for
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1.5 TYPE OF REACTION(S) OBSERVED AND TREATMENT GIVEN

Allergy () Severe Nausea () Dizziness () Bleeding () Wheezing ()

Other (please specify) _____

Onset of reaction after first dose: Within one hour () six hours () Twelve hours () one day () Other (specify) _____

Date ADR ended _____

Severity of reaction: Mild () Moderate () Very Severe () Hospitalization required () Incapacitated ()

Birth Defect () Death ()

Any previous reaction in same person? _____

Please state treatment given and outcome: _____

SECTION 2 - DRUG REVIEW

2.1 DRUG EFFICACY

Name of Drug _____ Strength _____

Goal of therapy achieved Yes / No

Drug as effective as other brands Yes / No

Drug effective as others in same category Same () More than () Less than ()

Drug recommended for continued use Yes / No

2.2 UNSATISFACTORY PHYSICAL FEATURES

Drug Packaging () Labelling by Manufacturer () Stability () Breaking of tablets () Colour change ()

Other (specify) _____

Reason for response _____

Reported by:

Doctor () Pharmacist () Nurse () Patient () Other ()

Name of Institution _____ Name of Doctor (if not the reporter) _____

Address _____ Address _____

Telephone _____

Signature _____ Date _____

Return to : Standards and Regulation Division, Ministry of Health, 9th Floor, 2 - 4 King Street, Kingston, Jamaica, West Indies:
Tel: 967 -1100 - 3; Fax: 967 - 1629

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