Australian Government

Department of Health and Ageing

SCHEDULE OF PHARMACEUTICAL BENEFITS FOR APPROVED PHARMACISTS AND MEDICAL PRACTITIONERS

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM SUPPLEMENT

EFFECTIVE 1 DECEMBER 2009

CHEMOTHERAPY PHARMACEUTICALS ACCESS PROGRAM

This Supplement is effective from 1 December 2009 and all previous issues are cancelled. This Supplement is to be read in conjunction with the December 2009 issue of the Schedule of Pharmaceutical Benefits for Approved Pharmacists and Medical Practitioners.

SUMMARY OF CHANGES

ADDITIONS

Additions — Brands

5958N *Irinotecan Alphapharm, AF* — **Irinotecan hydrochloride trihydrate**, I.V. injection 40 mg in 2 mL

5959P *Irinotecan Alphapharm, AF* — **Irinotecan hydrochloride trihydrate**, I.V. injection 100 mg in 5 mL

Explanatory Notes

In addition to the drugs and medicinal preparations listed in the Schedule of Pharmaceutical Benefits, a number of drugs are also available as pharmaceutical benefits but are distributed under alternative arrangements. These alternative arrangements are provided for under section 100 of the *National Health Act 1953*.

Section 100 chemotherapy drugs for day only admitted and non-admitted patients of Public Hospitals

The adoption of the Australian Government's pharmaceutical reforms will see a change to the access arrangements for cancer chemotherapy drugs for public hospitals.

A range of currently listed PBS cancer chemotherapy agents have been transferred to section 100 funding arrangements to facilitate access to day admitted and non-admitted patients. Benefits are available for the listed chemotherapy drugs only. There is no facility for individual approval for chemotherapy drugs outside those listed.

To gain access to a Commonwealth funded drug under this arrangement a patient must attend a participating public hospital and be a day admitted or non-admitted patient. Only a medical practitioner, in the course of employment with the participating public hospital, may prescribe the subsidised medication.

Chemotherapy drugs claimed under this arrangement may only be supplied by an approved hospital authority and only dispensed by the hospital pharmacy.

All drugs supplied under these arrangements will have a patient copayment deducted from the Commonwealth reimbursement price. Under the provisions of the National Healthcare Agreement, copayments cannot be raised, by the hospital, for drugs supplied to day admitted patients. Copayments can be raised and collected, by the hospital, for non-admitted patients.

If you would like further information about the special arrangements for section 100 chemotherapy drugs, please contact the State Government adviser:

Victoria	(03) 9096 2506
Queensland	(07) 3636 9830
Western Australia	(08) 9388 4980
Northern Territory	(08) 8999 2448

As of 1 September 2009, some of the chemotherapy pharmaceuticals that are available for supply under the Program no longer require an authority from the Medicare Australia CEO. Medical practitioners who prescribe these drugs to their patients (and approved hospital authorities acting on their behalf) only need to record a four digit streamlined authority code on the patient's medication chart to indicate that these drugs have been prescribed in accordance with the restrictions set out in this schedule.

For more information on how to prescribe these 'Authority required (STREAMLINED)' items, refer to the Explanatory Notes of the Schedule of Pharmaceutical Benefits at www.pbs.gov.au or the Medicare Australia website at www.medicareaustralia.gov.au.

For further information on streamlined authority arrangements, visit the Department of Health and Ageing website at www.health.gov.au/pbsreform.

Index of Manufacturers' Codes

Code	*Manufacturer*
AF	Alphapharm Pty Limited Chase Building 2 Wentworth Park Road Glebe NSW 2037 Tel: (02) 9298 3999 Fax: (02) 9566 4686
BQ	Bristol-Myers Squibb Pharmaceuticals A Division of Bristol-Myers Squibb Australia Pty Ltd 556 Princes Highway Noble Park Vic 3174 Tel: (03) 9213 4000 Fax: (03) 9701 1518
BX	Baxter Healthcare Pty Limited 1 Baxter Drive Old Toongabbie NSW 2146 Tel: (02) 9848 1111 Fax: (02) 9848 1123
FB	Pierre Fabre Medicament Australia Pty Limited Unit 26B, Parkview Business Centre 1 Maitland Place Baulkham Hills NSW 2153 Tel: (02) 8858 2800 Fax: (02) 8858 2888
GK	GlaxoSmithKline Australia Pty Ltd 1061 Mountain Highway Boronia Vic 3155 Tel: (03) 9721 6000 Fax: (03) 9729 5319
GQ	Generic Health Pty Ltd Suite 1, Level 1 1175 Toorak Road Camberwell Vic 3124 Tel: (03) 9809 7900 Fax: (03) 9809 7999
GZ	Genzyme Australasia Pty Ltd Level 1, Building C 12-24 Talavera Road North Ryde NSW 2113 Tel: (02) 9978 3900 Fax: (02) 9889 3900
HH	Hospira Pty Ltd (David Bull Laboratories, Faulding Pharmaceuticals) Level 6, 390 St Kilda Road Melbourne Vic 3004 Tel: (03) 9868 0700 Fax: (03) 9868 0111
IT	InterPharma Pty Ltd Suite 3, 14 Sydney Road Manly NSW 2095 Tel: (02) 9976 6876 Fax: (02) 9976 6859
JC	Janssen-Cilag Pty Ltd 1-5 Khartoum Road North Ryde NSW 2113 Tel: (02) 8875 3333 Fax: (02) 8875 3300
LM	Link Medical Products Pty Ltd Level 1, Bridgepoint Centre 3 Brady Street Mosman NSW 2088 Tel: (02) 9960 0150 Fax: (02) 9960 0149
LY	Eli Lilly Australia Pty Limited 112 Wharf Road West Ryde NSW 2114 Tel: (02) 9325 4444 Fax: (02) 9325 4410
MK	Merck Sharp & Dohme (Australia) Pty Ltd 54-68 Ferndell Street South Granville NSW 2142 Tel: (02) 9795 9500 Fax: (02) 9795 9595
NV	Novartis Pharmaceuticals Australia Pty Ltd 54 Waterloo Road North Ryde NSW 2113 Tel: (02) 9805 3555 Fax: (02) 9887 4551
OA	Orphan Australia Pty Ltd 48 Kangan Drive Berwick Vic 3806 Tel: (03) 9769 5744 Fax: (03) 9769 5944
OE	Omegapharm Pty Ltd 15a Leinster Street Ormond Vic 3204 Tel: (03) 9578 0806 Fax: (03) 9578 0806
PF	Pfizer Pty Limited 38-42 Wharf Road West Ryde NSW 2114 Tel: (02) 9850 3333 Fax: (02) 9858 1347

Code	Manufacturer
PH	Pharmacia Australia Pty Limited 38-42 Wharf Road West Ryde NSW 2114 Tel: (02) 9850 3333 Fax: (02) 9858 1347
PL	Phebra 332 Burns Bay Road Lane Cove NSW 2066 Tel: (02) 9420 9199 Fax: (02) 9420 9177
PU	Pharmacia & Upjohn Pty Limited 38-42 Wharf Road West Ryde NSW 2114 Tel: (02) 9850 3333 Fax: (02) 9858 1347
RE	Real-RL Division of GlaxoSmithKline Australia Pty Ltd 1061 Mountain Highway Boronia Vic 3155 Tel: (03) 9721 6000 Fax: (03) 9721 5319
RO	Roche Products Pty Ltd 4-10 Inman Road Dee Why NSW 2099 Tel: (02) 9454 9000 Fax: (02) 9971 7401
SE	Servier Laboratories (Aust.) Pty Ltd 8 Cato Street Hawthorn Vic 3122 Tel: (03) 8823 7333 Fax: (03) 9822 9790
SG	Merck Serono Australia Pty Ltd Unit 3-4, 25 Frenchs Forest Road East Frenchs Forest NSW 2086 Tel: (02) 8977 4100 Fax: (02) 9975 1516
SH	Schering-Plough Pty Ltd Level 4, 66 Waterloo Road North Ryde NSW 2113 Tel: (02) 8988 8000 Fax: (02) 9852 7500
SI	Sigma Pharmaceuticals (Australia) Pty Ltd A member of Sigma Group of Companies 96 Merrindale Drive Croydon Vic 3136 Tel: (03) 9839 2800 Fax: (03) 9839 2753
SW	Sanofi-Aventis Australia Pty Ltd Building D, Talavera Corporate Centre 12-24 Talavera Road Macquarie Park NSW 2113 Tel: (02) 8666 2000 Fax: (02) 8666 3000
SZ	Sandoz Pty Ltd Level 4, Suite 7-19 100 Harris Street Pyrmont NSW 2009 Tel: (02) 9566 1500 Fax: (02) 9566 1458
TS	Specialised Therapeutics Australia Pty Ltd Suite 3-4, 6 Westbrook Street East Kew Vic 3102 Tel: (03) 9859 1493 Fax: (03) 9859 6950
TX	Apotex Pty Ltd 66 Waterloo Road North Ryde NSW 2113 Tel: (02) 8877 8333 Fax: (02) 8877 8377
WA	Winthrop Pharmaceuticals Division of Sanofi-Aventis Australia Pty Limited Building D, Talavera Corporate Centre 12-24 Talavera Road Macquarie Park NSW 2113 Tel: (02) 8666 2000 Fax: (02) 8666 3000
ZP	Spirit Pharmaceuticals Pty Ltd 117 Harrington Street The Rocks Sydney NSW 2000 Tel: (02) 9251 1088 Fax: (02) 9251 1099

SPECIAL PHARMACEUTICAL BENEFITS

The special patient contribution is payable by all patients in addition to the relevant patient contribution for concessional and general patients. Other than for bleomycin sulfate, exemptions on medical grounds are available. For eligible veterans under RPBS provisions, see RPBS EXPLANATORY NOTES, paragraph 32, in the Schedule of Pharmaceutical Benefits.

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts		Premium $	Reimburse-ment Price for Max. Qty $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $		Proprietary Name and Manufacturer	
	BLEOMYCIN SULFATE										
	Restricted Benefit ***Germ cell neoplasms;*** ***Lymphoma.***										
5903Q	***Powder for injection 15,000 i.u.***	***10***	***..***		***s382.90***	****425.80***	**** 808.70***	***32.90***	***a***	***Hospira Pty Limited***	***HH***
					s383.00	***425.74***	***808.74***	***32.90***	***a***	***Blenamax***	***SI***
					B65.99	***425.74***	***874.73***	***32.90***	***a***	***Blenoxane***	***BQ***
					s383.00						

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
	APREPITANT							
	NOTE:							
	Aprepitant is not PBS-subsidised for nausea and vomiting associated with radiotherapy being used to treat malignancy.							
	Authority Required							
	Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy, in combination with a 5HT3 antagonist and dexamethasone, where any 1 of the following chemotherapy agents are to be administered: ***(a) altretamine;*** ***(b) carmustine;*** ***(c) cisplatin when a single dose constitutes a cycle of chemotherapy;*** ***(d) cyclophosphamide at a dose of 1500 mg per square metre per day or greater;*** ***(e) dacarbazine;*** ***(f) procarbazine when a single dose constitutes a cycle of chemotherapy;*** ***(g) streptozocin.*** ***No more than 1 pack containing 1 x 125 mg capsule and 2 x 80 mg capsules will be authorised per cycle of cytotoxic chemotherapy;***							
	Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat breast cancer, in combination with a 5HT3 antagonist and dexamethasone, where cyclophosphamide and an anthracycline are to be co-administered. ***No more than 1 pack containing 1 x 125 mg capsule and 2 x 80 mg capsules will be authorised per cycle of cytotoxic chemotherapy.***							
	NOTE:							
	No applications for increased maximum quantities will be authorised. Prescribers should advise Medicare Australia of the number of cycles planned when requesting approval for repeats.							
5888X	***Pack containing 1 capsule 125 mg and 2 capsules 80 mg***	***‡ 1***	***..***	***..***	***120.00***	***32.90***	***Emend***	***MK***
	ARSENIC TRIOXIDE							
	Authority Required							
	Induction and consolidation treatment of relapsed acute promyelocytic leukaemia (characterised by the presence of the t(15:17) translocation or PML/RAR-alpha fusion gene transcript) in a patient who is arsenic naive at induction.							
5851Y	***Injection concentrate 10 mg in 10 mL***	***60***	***2***	***..***	**** 24049.62***	***32.90***	***Phenasen***	***PL***
	BCG IMMUNOTHERAPEUTIC (Bacillus Calmette-Guérin/ Connaught strain)							
	Restricted Benefit							
	Treatment of carcinoma in situ of the urinary bladder.							
5901N	***Single dose set comprising 1 vial powder for intravesical administration containing 6.6 to 19.2 x 10^8 CFU and 1 vial diluent 3 mL***	***3***	***1***	***..***	**** 405.00***	***32.90***	***ImmuCyst***	***SW***
	BCG-TICE (Bacillus Calmette-Guérin/ Tice strain)							
	Restricted Benefit							
	Primary and relapsing superficial urothelial carcinoma of the bladder.							
5902P	***Vial containing powder for intravesical administration approximately 5 x 10^8 CFU***	***3***	***1***	***..***	***491.83***	***32.90***	***OncoTICE***	***SH***

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
	BEVACIZUMAB							
	Authority Required ***Initial PBS-subsidised treatment, in combination with first-line chemotherapy, of a patient with previously untreated metastatic colorectal cancer with a WHO performance status of 0 or 1.***							
	NOTE: ***Not for use as monotherapy.***							
	Authority Required ***Continuing PBS-subsidised treatment, in combination with first-line chemotherapy, of a patient with metastatic colorectal cancer who has previously been issued with an authority prescription for bevacizumab and who does not have progressive disease and who remains on first-line chemotherapy.***							
	NOTE: ***Not for use as monotherapy.***							
5849W	***Solution for I.V. infusion 100 mg in 4 mL***	***1***	***..***	***..***	***472.50***	***32.90***	***Avastin***	***RO***
5850X	***Solution for I.V. infusion 400 mg in 16 mL***	***1***	***..***	***..***	***1720.00***	***32.90***	***Avastin***	***RO***
	NOTE: ***Special Pricing Arrangements apply.***							
	CALCIUM FOLINATE							
5890B	Injection equivalent to 50 mg folinic acid in 5 mL	5	5	..	* 122.95	32.90	[a] Leucovorin Calcium	HH
				..	122.96	32.90	[a] Calcium Folinate Ebewe	IT
				B0.13	* 123.08	32.90	[a] Leucovorin Calcium	PF
5886T	Injection equivalent to 100 mg folinic acid in 10 mL	10	1	..	226.90	32.90	[a] Leucovorin Calcium	PF
				..	* 226.90	32.90	[a] Calcium Folinate Ebewe	IT
5870Y	Injection equivalent to 300 mg folinic acid in 30 mL	4	1	..	* 265.44	32.90	Leucovorin Calcium	HH
	Restricted Benefit ***Antidote to folic acid antagonists.***							
5904R	***Tablet equivalent to 15 mg folinic acid***	***10***	***..***	***..***	***79.14***	***32.90***	***Leucovorin Calcium***	***HH***
	CARBOPLATIN							
5906W	Solution for I.V. injection 50 mg in 5 mL	2	..	..	* 51.28	32.90	[a] Carboplatin Ebewe	IT
							[a] Hospira Pty Limited	HH
							[a] Pfizer Australia Pty Ltd	PU
5907X	Solution for I.V. injection 150 mg in 15 mL	6	..	..	* 371.40	32.90	[a] Carboplatin Ebewe	IT
							[a] Hospira Pty Limited	HH
							[a] Pfizer Australia Pty Ltd	PU

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Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $		Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
5908Y	Solution for I.V. injection 450 mg in 45 mL		2	..	..	* 233.30	32.90	[a] Carboplatin Ebewe [a] Hospira Pty Limited [a] Pfizer Australia Pty Ltd	IT HH PU
	CETUXIMAB								
	Authority Required ***Initial treatment of stage III, IVa or IVb squamous cell cancer of the larynx, oropharynx or hypopharynx for the week prior to radiotherapy, where cisplatin is contraindicated according to the TGA-approved Product Information;*** ***Initial treatment of stage III, IVa or IVb squamous cell cancer of the larynx, oropharynx or hypopharynx, in combination with radiotherapy, where cisplatin is not tolerated.*** **NOTE:** ***No applications for repeats will be authorised.***								
5836E	***Solution for I.V. infusion 100 mg in 20 mL***		***1***	..	..	***341.00***	***32.90***	***Erbitux***	***SG***
5831X	***Solution for I.V. infusion 100 mg in 50 mL***		***1***	..	..	***341.00***	***32.90***	***Erbitux***	***SG***
5837F	***Solution for I.V. infusion 500 mg in 100 mL***		***1***	..	..	***1705.00***	***32.90***	***Erbitux***	***SG***
	Authority Required ***Continuing treatment of stage III, IVa or IVb squamous cell cancer of the larynx, oropharynx or hypopharynx, in combination with radiotherapy, where cisplatin is either contraindicated or not tolerated.*** **NOTE:** ***A maximum lifetime supply for this indication is limited to a maximum of 8 treatments per site and to 10 treatments per site for patients in whom radiotherapy is interrupted.***								
5838G	***Solution for I.V. infusion 100 mg in 20 mL***		***1***	***6***	..	***341.00***	***32.90***	***Erbitux***	***SG***
5832Y	***Solution for I.V. infusion 100 mg in 50 mL***		***1***	***6***	..	***341.00***	***32.90***	***Erbitux***	***SG***
5839H	***Solution for I.V. infusion 500 mg in 100 mL***		***1***	***6***	..	***1705.00***	***32.90***	***Erbitux***	***SG***
	CISPLATIN								
5909B	I.V. injection 10 mg in 10 mL		1	..	..	6.68	7.73	Pfizer Australia Pty Ltd	PU
5910C	I.V. injection 50 mg in 50 mL		1	..	..	17.92	18.97	[a] Hospira Pty Limited [a] Pfizer Australia Pty Ltd	HH PU
5911D	I.V. injection 100 mg in 100 mL		1	..	..	45.15	32.90	[a] Cisplatin Ebewe [a] Hospira Pty Limited [a] Pfizer Australia Pty Ltd	IT HH PU

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
	CLADRIBINE							
	Authority Required (STREAMLINED) ***3180.***							
	Hairy cell leukaemia.							
5889Y	***Injection 10 mg in 5 mL***	***7***	***..***	***..***	**** 4483.22***	***32.90***	***Litak***	***OA***
5912E	***Solution for I.V. infusion 10 mg in 10 mL***	***7***	***..***	***..***	***4483.23***	***32.90***	***Leustatin***	***JC***
	CYCLOPHOSPHAMIDE							
5914G	Powder for injection 500 mg	2	..	..	* 18.88	19.93	Endoxan	BX
5915H	Powder for injection 1 g	1	..	..	16.66	17.71	Endoxan	BX
5916J	Powder for injection 2 g	1	..	..	29.67	30.72	Endoxan	BX
	CYTARABINE							
5918L	Injection 100 mg in 5 mL	10	1	..	* 75.34	32.90	Pfizer Australia Pty Ltd	PU
	DOCETAXEL							
	Authority Required ***Neoadjuvant treatment of a patient with a WHO performance status of 1 or less, with inoperable Stage III, IVa or IVb squamous cell carcinoma of the oral cavity, larynx, oropharynx or hypopharynx, in combination with cisplatin and fluorouracil.*** **NOTE:** ***The carcinoma can be considered inoperable for technical or organ preservation reasons.***							
5842L	***Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL and 1 single use vial solvent 1.5 mL***	***1***	***..***	***..***	***292.73***	***32.90***	***Taxotere***	***SW***
	Authority Required ***Adjuvant treatment of node-positive breast cancer in combination with an anthracycline and cyclophosphamide;*** ***Advanced breast cancer after failure of prior therapy which includes an anthracycline;*** ***Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound;*** ***Locally advanced or metastatic non-small cell lung cancer;*** ***Treatment of HER2 positive early breast cancer in combination with trastuzumab.***							
	Authority Required ***Treatment of androgen independent (hormone refractory) metastatic carcinoma of the prostate in a patient with a Karnofsky performance-status score of at least 60%. Docetaxel must be used as first-line chemotherapy and administered in three weekly cycles.*** **NOTE:** ***A maximum of 10 cycles of treatment with docetaxel will be authorised under this restriction.***							
5921P	***Injection set containing 1 single use vial concentrate for I.V. infusion 20 mg (anhydrous) in 0.5 mL and 1 single use vial solvent 1.5 mL***	***2***	***..***	***..***	**** 585.46***	***32.90***	***Taxotere***	***SW***

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Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
	Authority Required ***Neoadjuvant treatment of a patient with a WHO performance status of 1 or less, with inoperable Stage III, IVa or IVb squamous cell carcinoma of the oral cavity, larynx, oropharynx or hypopharynx, in combination with cisplatin and fluorouracil.***							
	NOTE: ***The carcinoma can be considered inoperable for technical or organ preservation reasons.***							
	Authority Required ***Adjuvant treatment of node-positive breast cancer in combination with an anthracycline and cyclophosphamide;*** ***Advanced breast cancer after failure of prior therapy which includes an anthracycline;*** ***Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound;*** ***Locally advanced or metastatic non-small cell lung cancer;*** ***Treatment of HER2 positive early breast cancer in combination with trastuzumab.***							
	Authority Required ***Treatment of androgen independent (hormone refractory) metastatic carcinoma of the prostate in a patient with a Karnofsky performance-status score of at least 60%. Docetaxel must be used as first-line chemotherapy and administered in three weekly cycles.***							
	NOTE: ***A maximum of 10 cycles of treatment with docetaxel will be authorised under this restriction.***							
5922Q	***Injection set containing 1 single use vial concentrate for I.V. infusion 80 mg (anhydrous) in 2 mL and 1 single use vial solvent 6 mL***	***1***	***..***	***..***	***1174.21***	***32.90***	***Taxotere***	***SW***
	DOLASETRON MESYLATE							
	Restricted Benefit ***Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.*** ***Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.***							
5923R	***Tablet 200 mg***	***2***	***..***	***..***	***37.02***	***32.90***	***Anzemet***	***SW***
5924T	***I.V. injection 100 mg in 5 mL***	***1***	***..***	***..***	***18.50***	***19.55***	***Anzemet***	***SW***
	DOXORUBICIN HYDROCHLORIDE							
5925W	Solution for I.V. injection or intravesical administration 10 mg in 5 mL	4	..	..	* 42.08	32.90	[a] Adriamycin Solution [a] Doxorubicin Ebewe [a] Hospira Pty Limited	PH IT HH
5926X	Solution for I.V. injection or intravesical administration 20 mg in 10 mL	4	..	..	* 75.24	32.90	Adriamycin Solution	PH
5927Y	Solution for I.V. injection or intravesical administration 50 mg in 25 mL	3	..	..	* 133.38	32.90	[a] Adriamycin Solution [a] Doxorubicin Ebewe [a] Hospira Pty Limited	PH IT HH
5879K	Solution for I.V. injection or intravesical administration 100 mg in 50 mL	1	..	..	239.00	32.90	Doxorubicin Ebewe	IT
5880L	Solution for I.V. injection or intravesical administration 200 mg in 100 mL	1	..	..	177.83	32.90	[a] Adriamycin [a] Doxorubicin Ebewe	PF IT

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
	DOXORUBICIN HYDROCHLORIDE, PEGYLATED LIPOSOMAL							
	Authority Required ***Advanced epithelial ovarian cancer in women who have failed a first-line platinum-based chemotherapy regimen;*** ***Metastatic breast cancer, as monotherapy, after failure of prior therapy which includes capecitabine and a taxane;*** ***Metastatic breast cancer, as monotherapy, where therapy with capecitabine and/or a taxane is contraindicated.***							
5891C	***Suspension for I.V. infusion 20 mg in 10 mL***	***1***	***..***	***..***	***622.99***	***32.90***	***Caelyx***	***SH***
5892D	***Suspension for I.V. infusion 50 mg in 25 mL***	***1***	***..***	***..***	***1483.30***	***32.90***	***Caelyx***	***SH***
	EPIRUBICIN HYDROCHLORIDE							
5928B	Solution for injection 10 mg in 5 mL	4	..	..	* 178.04	32.90	[a] Epirubicin Ebewe [a] Pharmorubicin Solution	IT PH
5929C	Solution for injection 20 mg in 10 mL	4	..	..	* 343.68	32.90	Pharmorubicin Solution	PH
5930D	Solution for injection 50 mg in 25 mL	4	..	..	* 849.84	32.90	[a] Epirubicin Ebewe [a] Hospira Pty Limited [a] Pharmorubicin Solution	IT HH PH
5885R	Solution for injection 100 mg in 50 mL	2	..	..	* 838.42	32.90	[a] Epirubicin Ebewe [a] Hospira Pty Limited	IT HH
5884Q	Solution for injection 200 mg in 100 mL	1	..	..	825.86	32.90	Epirubicin Ebewe	IT
	ETOPOSIDE							
5931E	Solution for I.V. infusion 100 mg in 5 mL	5	..	..	* 138.25	32.90	[a] Hospira Pty Limited	HH
				..	138.27	32.90	[a] Etoposide Ebewe	IT
5932F	Powder for I.V. infusion 100 mg (as phosphate)	5	..	..	* 138.25	32.90	Etopophos	BQ
5933G	Powder for I.V. infusion 1 g (as phosphate)	1	..	..	276.50	32.90	Etopophos	BQ
	FLUDARABINE PHOSPHATE							
	Authority Required ***B-cell chronic lymphocytic leukaemia in combination with cyclophosphamide where the patient has advanced disease (Binet Stage B or C) or evidence of progressive Stage A disease.*** ***Stage A progressive disease is defined by at least one of the following:*** ***persistent rise in lymphocyte count with doubling time less than 12 months;*** ***a downward trend in haemoglobin or platelets, or both;*** ***more than 50% increase in the size of liver, spleen, or lymph nodes, or appearance of these signs if not previously present;*** ***constitutional symptoms attributable to disease.*** ***The diagnosis of chronic lymphocytic leukaemia (CLL) must have been established based on:*** ***(a) a lymphocytosis, with more than 5,000 million lymphocytes per L in the peripheral blood; and*** ***(b) a clonal population of B-cells (CD5/CD19) documented by flow cytometry.***							

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Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $		Proprietary Name and Manufacturer	
5840J	***Powder for I.V. injection 50 mg***	***5***	***3***	***..***	***1430.64***	***32.90***	***a***	***Fludara***	***GZ***
				..	**** 1430.65***	***32.90***	***a***	***Fludarabine Actavis***	***GQ***
5841K	***Solution for I.V. injection 50 mg in 2 mL***	***5***	***3***	***..***	***1430.64***	***32.90***	***a***	***Fludarabine Ebewe***	***IT***
	NOTE: ***The solution for I.V. injection and powder for I.V. injection (after reconstitution) are bioequivalent.***								
	FLUOROURACIL								
5935J	Injection 500 mg in 10 mL	10	..	..	* 42.50	32.90	a	Hospira Pty Limited	HH
				..	* 42.50	32.90	a	Fluorouracil Ebewe	IT
5872C	Injection 1000 mg in 20 mL	5	..	..	* 36.15	32.90		Fluorouracil Ebewe	IT
	FOTEMUSTINE								
	Authority Required (STREAMLINED) ***3181.*** ***Metastatic malignant melanoma.***								
5900M	***Powder for injection 208 mg with solvent***	***1***	***4***	***..***	***982.14***	***32.90***		***Muphoran***	***SE***
	GEMCITABINE HYDROCHLORIDE								
	Authority Required ***Advanced breast cancer in combination with paclitaxel after failure of prior therapy which includes an anthracycline;*** ***Advanced epithelial ovarian cancer, in combination with carboplatin, in patients who relapse more than 6 months after platinum-based therapy;*** ***Locally advanced or metastatic non-small cell lung cancer;*** ***Locally advanced or metastatic adenocarcinoma of the pancreas;*** ***Locally advanced or metastatic bladder cancer, in combination with cisplatin.***								
5936K	***Powder for I.V. infusion 200 mg (base)***	***4***	***2***	***..***	**** 172.12***	***32.90***	***a***	***DBL Gemcitabine for Injection***	***HH***
							a	***Gemcitabine Actavis***	***GQ***
							a	***Gemcite***	***ZP***
							a	***Gemzar***	***LY***
5843M	***Solution concentrate for I.V. infusion 200 mg (base) in 20 mL***	***4***	***2***	***..***	**** 172.12***	***32.90***	***a***	***Gemcitabine Ebewe***	***IT***
	NOTE: ***The powder for I.V. infusion 200 mg (base) (after reconstitution) and the solution concentrate for I.V. infusion 200 mg (base) are bioequivalent.***								
5852B	***Solution concentrate for I.V. infusion 500 mg (base) in 50 mL***	***4***	***2***	***..***	**** 425.00***	***32.90***		***Gemcitabine Ebewe***	***IT***
5937L	***Powder for I.V. infusion 1 g (base)***	***2***	***2***	***..***	**** 425.00***	***32.90***	***a***	***DBL Gemcitabine for Injection***	***HH***
							a	***Gemcitabine Actavis***	***GQ***
							a	***Gemcite***	***ZP***
							a	***Gemzar***	***LY***

continued ☞

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
5844N	***Solution concentrate for I.V. infusion 1000 mg (base) in 100 mL***	*2*	*2*	*..*	** 425.00*	*32.90*	*[a] Gemcitabine Ebewe*	*IT*
	NOTE: ***The powder for I.V. infusion 1 g (base) (after reconstitution) and the solution concentrate for I.V. infusion 1000 mg (base) are bioequivalent.***							
5845P	***Powder for I.V. infusion 2 g (base)***	*1*	*2*	*..*	*425.97*	*32.90*	*DBL Gemcitabine for Injection*	*HH*
	GRANISETRON HYDROCHLORIDE **Restricted Benefit** ***Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.*** ***Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.***							
5898K	***Tablet 2 mg (base)***	*2*	*..*	*..*	** 44.44*	*32.90*	*Kytril*	*HH*
5899L	***Concentrated injection 3 mg (base) in 3 mL***	*1*	*..*	*..*	*25.42*	*26.47*	*Kytril*	*HH*
	IDARUBICIN HYDROCHLORIDE **Restricted Benefit** ***Acute myelogenous leukaemia.***							
5941Q	***Solution for I.V. injection 5 mg in 5 mL***	*3*	*..*	*..*	*503.00*	*32.90*	*Zavedos Solution*	*PH*
5942R	***Solution for I.V. injection 10 mg in 10 mL***	*6*	*..*	*..*	*1958.44*	*32.90*	*Zavedos Solution*	*PH*
	IFOSFAMIDE **Restricted Benefit** ***Relapsed or refractory germ cell tumours following first-line chemotherapy;*** ***Relapsed or refractory sarcomas following first-line chemotherapy.***							
5943T	***Powder for I.V. injection 1 g***	*5*	*5*	*..*	** 220.55*	*32.90*	*Holoxan*	*BX*
5944W	***Powder for I.V. injection 2 g***	*5*	*5*	*..*	** 421.00*	*32.90*	*Holoxan*	*BX*
	INTERFERON ALFA-2a **CAUTION:** ***Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.*** **Authority Required** ***Hairy cell leukaemia;*** ***Myeloproliferative disease with excessive thrombocytosis.***							
5945X	***Injection 3,000,000 i.u. in 0.5 mL single dose pre-filled syringe***	*15*	*4*	*..*	** 447.00*	*32.90*	*Roferon-A*	*RO*
	Authority Required ***Myeloproliferative disease with excessive thrombocytosis.***							
5996N	***Injection 4,500,000 i.u. in 0.5 mL single dose pre-filled syringe***	*5*	*4*	*..*	** 223.50*	*32.90*	*Roferon-A*	*RO*

continued ☞

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
5997P	***Injection 6,000,000 i.u. in 0.5 mL single dose pre-filled syringe***	*5*	*4*	*..*	** 297.90*	*32.90*	***Roferon-A***	***RO***
5998Q	***Injection 9,000,000 i.u. in 0.5 mL single dose pre-filled syringe***	*5*	*4*	*..*	** 446.90*	*32.90*	***Roferon-A***	***RO***

Authority Required
Low grade non-Hodgkin's lymphoma with clinical features suggestive of a poor prognosis, in combination with anthracycline-based chemotherapy.

5946Y	***Injection 3,000,000 i.u. in 0.5 mL single dose pre-filled syringe***	*15*	*5*	*..*	** 447.00*	*32.90*	***Roferon-A***	***RO***
5947B	***Injection 4,500,000 i.u. in 0.5 mL single dose pre-filled syringe***	*5*	*5*	*..*	** 223.50*	*32.90*	***Roferon-A***	***RO***
5948C	***Injection 6,000,000 i.u. in 0.5 mL single dose pre-filled syringe***	*5*	*5*	*..*	** 297.90*	*32.90*	***Roferon-A***	***RO***
5949D	***Injection 9,000,000 i.u. in 0.5 mL single dose pre-filled syringe***	*5*	*5*	*..*	** 446.90*	*32.90*	***Roferon-A***	***RO***

INTERFERON ALFA-2b
CAUTION:
Treatment with interferon alfa has been associated with depression and suicide in some patients. Patients with a history of suicidal ideation or depressive illness should be warned of the risks. Psychiatric status during therapy should be monitored.

Authority Required
Hairy cell leukaemia.

5893E	***Solution for injection 18,000,000 i.u. in 1.2 mL multi-dose injection pen***	*3*	*4*	*..*	** 536.22*	*32.90*	***Intron A Redipen***	***SH***

Authority Required
Maintenance treatment of multiple myeloma once remission has been achieved with chemotherapy;

Low grade non-Hodgkin's lymphoma with clinical features suggestive of a poor prognosis, in combination with anthracycline-based chemotherapy.

5953H	***Solution for injection 18,000,000 i.u. in 1.2 mL multi-dose injection pen***	*3*	*5*	*..*	** 536.22*	*32.90*	***Intron A Redipen***	***SH***
5956L	***Solution for injection 30,000,000 i.u. in 1.2 mL multi-dose injection pen***	*3*	*5*	*..*	** 893.70*	*32.90*	***Intron A Redipen***	***SH***

IRINOTECAN HYDROCHLORIDE TRIHYDRATE

Authority Required (STREAMLINED)
3184.

Metastatic colorectal cancer in patients with a WHO performance status of 2 or less.

NOTE:
In first-line usage, effectiveness and tolerance may be improved when irinotecan is combined with an infusional 5-fluorouracil regimen.

continued ☞

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
5958N	***I.V. injection 40 mg in 2 mL***	***1***	***3***	***..***	***113.45***	***32.90***	[a] ***Camptosar***	***PU***
							[a] ***Hospira Pty Limited***	***HH***
							[a] ***Irinotecan Alphapharm***	***AF***
							[a] ***Irinotecan Actavis***	***GQ***
							[a] ***Irinotecan Sandoz***	***SZ***
							[a] ***Omegapharm Irinotecan***	***OE***
5959P	***I.V. injection 100 mg in 5 mL***	***2***	***3***	***..***	**** 567.22***	***32.90***	[a] ***Hospira Pty Limited***	***HH***
				..	**** 567.24***	***32.90***	[a] ***Camptosar***	***PU***
							[a] ***Irinotecan Alphapharm***	***AF***
							[a] ***Irinotecan Actavis***	***GQ***
							[a] ***Irinotecan Sandoz***	***SZ***
							[a] ***Omegapharm Irinotecan***	***OE***
5846Q	***I.V. injection 300 mg in 15 mL***	***1***	***3***	***..***	***850.12***	***32.90***	***Camptosar***	***PF***
5833B	***I.V. injection 500 mg in 25 mL***	***1***	***3***	***..***	***1454.70***	***32.90***	***Hospira Pty Limited***	***HH***
	MESNA							
	Restricted Benefit ***Adjunctive therapy for use with ifosfamide or high dose cyclophosphamide.***							
5960Q	***Solution for I.V. injection 400 mg in 4 mL***	***15***	***5***	***..***	***56.13***	***32.90***	***Uromitexan***	***BX***
5961R	***Solution for I.V. injection 1 g in 10 mL***	***15***	***5***	***..***	***128.30***	***32.90***	***Uromitexan***	***BX***
	METHOTREXATE							
5962T	Injection 5 mg in 2 mL	5	..	..	25.08	26.13	Hospira Pty Limited	HH
5963W	Injection 50 mg in 2 mL	5	..	..	24.52	25.57	Hospira Pty Limited	HH
							Pfizer Australia Pty Ltd	PU
5873D	Solution concentrate for I.V. infusion 500 mg in 20 mL	1	..	..	49.04	32.90	Hospira Pty Limited	HH
5875F	Solution concentrate for I.V. infusion 1000 mg in 10 mL	1	..	..	98.09	32.90	[a] Hospira Pty Limited	HH
							[a] Methotrexate Ebewe	IT
5876G	Solution concentrate for I.V. infusion 5000 mg in 50 mL	1	..	..	490.48	32.90	Methotrexate Ebewe	IT
	MITOZANTRONE HYDROCHLORIDE							
5964X	Injection 10 mg (base) in 5 mL	1	..	..	84.23	32.90	[a] Mitozantrone Ebewe	IT
							[a] Pfizer Australia Pty Ltd	PU

continued ☞

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
5965Y	Injection 20 mg (base) in 10 mL	1	..	..	168.46	32.90	[a] Hospira Pty Limited	HH
							[a] Mitozantrone Ebewe	IT
							[a] Onkotrone	BX
							[a] Pfizer Australia Pty Ltd	PU
5966B	Injection 25 mg (base) in 12.5 mL	1	..	..	210.45	32.90	[a] Onkotrone	BX
							[a] Pfizer Australia Pty Ltd	PU
	NAB PACLITAXEL							
	Authority Required ***Metastatic breast cancer after failure of prior therapy which includes an anthracycline.***							
5847R	***Powder for I.V. injection 100 mg (base)***	***1***	**..**	**..**	***401.48***	***32.90***	***Abraxane***	***TS***
	ONDANSETRON							
	Restricted Benefit ***Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.*** ***Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.***							
5967C	***Tablet 4 mg***	***4***	**..**	**..**	***27.25***	***28.30***	[a] ***APO-Ondansetron***	***TX***
							[a] ***Ondansetron-RL***	***RE***
							[a] ***Ondaz***	***SZ***
							[a] ***Onsetron 4***	***SI***
				[B]***0.56***	***27.81***	***28.30***	[a] ***Zofran***	***GK***
5968D	***Tablet 8 mg***	***4***	**..**	**..**	***42.68***	***32.90***	[a] ***APO-Ondansetron***	***TX***
							[a] ***Ondansetron-RL***	***RE***
							[a] ***Ondaz***	***SZ***
							[a] ***Onsetron 8***	***SI***
				[B]***0.57***	***43.25***	***32.90***	[a] ***Zofran***	***GK***
5969E	***Wafer 4 mg***	***4***	**..**	**..**	***27.25***	***28.30***	[a] ***Ondansetron-RL Zydis***	***RE***
							[a] ***Ondaz Zydis***	***SZ***
				[B]***0.56***	***27.81***	***28.30***	[a] ***Zofran Zydis***	***GK***
5970F	***Wafer 8 mg***	***4***	**..**	**..**	***42.68***	***32.90***	[a] ***Ondansetron-RL Zydis***	***RE***
							[a] ***Ondaz Zydis***	***SZ***
				[B]***0.57***	***43.25***	***32.90***	[a] ***Zofran Zydis***	***GK***
5848T	***Syrup 4 mg per 5 mL, 50 mL***	***‡ 1***	**..**	**..**	***68.12***	***32.90***	***Zofran syrup 50 mL***	***GK***
5971G	***I.V. injection 4 mg in 2 mL***	***1***	**..**	**..**	***13.27***	***14.32***	[a] ***Ondansetron-RL***	***RE***
							[a] ***Ondaz***	***SZ***
							[a] ***Onsetron***	***SI***
							[a] ***Pfizer Australia Pty Ltd***	***PF***
				[B]***0.56***	***13.83***	***14.32***	[a] ***Zofran***	***GK***

continued ☞

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
5972H	*I.V. injection 8 mg in 4 mL*	*1*	*..*	*..*	*21.08*	*22.13*	[a] *Ondansetron-RL*	*RE*
							[a] *Ondaz*	*SZ*
							[a] *Onsetron*	*SI*
							[a] *Pfizer Australia Pty Ltd*	*PF*
				[B]*0.54*	*21.62*	*22.13*	[a] *Zofran*	*GK*
	OXALIPLATIN							
	Authority Required *Metastatic colorectal cancer in patients with a WHO performance status of 2 or less, to be used in combination with 5-fluorouracil and folinic acid;* *Adjuvant treatment of stage III (Dukes C) colon cancer, in combination with 5-fluorouracil and folinic acid, following complete resection of the primary tumour.* **NOTE:** *Oxaliplatin is not PBS-subsidised for the treatment of patients with stage II (Dukes B) colon cancer.* *Oxaliplatin is not PBS-subsidised for the adjuvant treatment of patients with rectal cancer.*							
5877H	*Solution concentrate for I.V. infusion 50 mg in 10 mL*	*1*	*2*	*..*	*315.60*	*32.90*	[a] *Eloxatin*	*SW*
5994L	*Powder for I.V. infusion 50 mg*	*1*	*2*	*..*	*315.60*	*32.90*	[a] *Hospira Pty Limited*	*HH*
							[a] *Oxalatin*	*ZP*
							[a] *Oxaliplatin Alphapharm*	*AF*
							[a] *Oxaliplatin Actavis*	*GQ*
							[a] *Oxaliplatin Ebewe*	*IT*
	NOTE: *The solution concentrate for I.V. infusion 50 mg and powder for I.V. infusion 50 mg (after reconstitution) are bioequivalent.*							
5878J	*Solution concentrate for I.V. infusion 100 mg in 20 mL*	*1*	*2*	*..*	*609.63*	*32.90*	[a] *Eloxatin*	*SW*
5995M	*Powder for I.V. infusion 100 mg*	*1*	*2*	*..*	*609.63*	*32.90*	[a] *Hospira Pty Limited*	*HH*
							[a] *Oxalatin*	*ZP*
							[a] *Oxaliplatin Alphapharm*	*AF*
							[a] *Oxaliplatin Actavis*	*GQ*
							[a] *Oxaliplatin Ebewe*	*IT*
							[a] *Winthrop Oxaliplatin*	*WA*
	NOTE: *The solution concentrate for I.V. infusion 100 mg and powder for I.V. infusion 100 mg (after reconstitution) are bioequivalent.*							
5999R	*Solution concentrate for I.V. infusion 200 mg in 40 mL*	*1*	*2*	*..*	*1216.50*	*32.90*	*Eloxatin*	*SW*

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
	PACLITAXEL							
	Authority Required ***Adjuvant treatment of node-positive breast cancer administered sequentially to an anthracycline and cyclophosphamide;*** ***Advanced breast cancer after failure of prior therapy which includes an anthracycline;*** ***Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound;*** ***Primary treatment of ovarian cancer in combination with a platinum compound;*** ***Locally advanced or metastatic non-small cell lung cancer;*** ***Treatment of HER2 positive early breast cancer in combination with trastuzumab.***							
5973J	*Solution concentrate for I.V. infusion 30 mg in 5 mL*	*5*	*..*	*..*	** 844.55*	*32.90*	*[a] Anzatax* *[a] Paclitaxel Actavis* *[a] Taxol*	*HH* *GQ* *BQ*
				..	*844.56*	*32.90*	*[a] Paclitaxel Ebewe*	*IT*
5974K	*Solution concentrate for I.V. infusion 100 mg in 16.7 mL*	*2*	*..*	*..*	** 1134.88*	*32.90*	*[a] Anzatax* *[a] Paclitaxel Actavis* *[a] Paclitaxel Ebewe* *[a] Taxol*	*HH* *GQ* *IT* *BQ*
5975L	*Solution concentrate for I.V. infusion 150 mg in 25 mL*	*2*	*..*	*..*	** 1686.24*	*32.90*	*[a] Anzatax* *[a] Paclitaxel Actavis* *[a] Paclitaxel Ebewe* *[a] Taxol*	*HH* *GQ* *IT* *BQ*
5976M	*Solution concentrate for I.V. infusion 300 mg in 50 mL*	*1*	*..*	*..*	*1703.29*	*32.90*	*[a] Anzatax* *[a] Paclitaxel Actavis* *[a] Paclitaxel Ebewe* *[a] Taxol*	*HH* *GQ* *IT* *BQ*
	PEMETREXED DISODIUM							
	Authority Required ***Locally advanced or metastatic non-small cell lung cancer, after prior platinum-based chemotherapy.*** ***Doses greater than 500 mg per metre squared body surface area (BSA) will not be approved for PBS subsidy. The patient's BSA must be provided at the time of the authority approval.***							
	Authority Required ***Mesothelioma in combination with cisplatin.*** ***Doses greater than 500 mg per metre squared body surface area (BSA) will not be approved for PBS subsidy. The patient's BSA must be provided at the time of the authority approval.***							
	NOTE: ***No applications for increased maximum quantities for the 500 mg vial will be authorised.***							
5835D	*Powder for I.V. infusion 100 mg (base)*	*1*	*3*	*..*	*311.97*	*32.90*	*Alimta*	*LY*
5834C	*Powder for I.V. infusion 500 mg (base)*	*1*	*3*	*..*	*1559.86*	*32.90*	*Alimta*	*LY*
	RALTITREXED							
	Authority Required (STREAMLINED) ***3185.*** ***For use as a single agent in the treatment of advanced colorectal cancer.***							
5977N	*Powder for I.V. infusion 2 mg*	*3*	*2*	*..*	** 760.02*	*32.90*	*Tomudex*	*HH*

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
	RITUXIMAB							
	Authority Required ***Relapsed or refractory low-grade B-cell non-Hodgkin's lymphoma;*** ***Relapsed or refractory follicular B-cell non-Hodgkin's lymphoma.***							
5978P	***Solution for I.V. infusion 100 mg in 10 mL***	***2***	***3***	***..***	***905.43***	***32.90***	***Mabthera***	***RO***
5979Q	***Solution for I.V. infusion 500 mg in 50 mL***	***1***	***3***	***..***	***2263.57***	***32.90***	***Mabthera***	***RO***
	Authority Required ***Treatment of previously untreated, CD20 positive, diffuse large B-cell non-Hodgkin's lymphoma, in combination with chemotherapy;*** ***Treatment of symptomatic patients with previously untreated, CD20 positive, Stage III or IV, follicular, B-cell non-Hodgkin's lymphoma, in combination with chemotherapy.***							
5896H	***Solution for I.V. infusion 100 mg in 10 mL***	***2***	***7***	***..***	***905.43***	***32.90***	***Mabthera***	***RO***
5897J	***Solution for I.V. infusion 500 mg in 50 mL***	***1***	***7***	***..***	***2263.57***	***32.90***	***Mabthera***	***RO***
	THIOTEPA							
5984Y	Powder for injection 15 mg	2	1	..	* 126.20	32.90	Sigma Pharmaceuticals (Australia) Pty Ltd	SI
	TOPOTECAN HYDROCHLORIDE							
	Authority Required (STREAMLINED) ***3186.*** ***Advanced metastatic ovarian cancer after failure of prior therapy which includes a platinum compound.***							
5985B	***Powder for I.V. infusion 4 mg (base)***	***5***	***1***	***..***	***1980.00***	***32.90***	***Hycamtin***	***GK***
	TROPISETRON HYDROCHLORIDE							
	Restricted Benefit ***Management of nausea and vomiting associated with cytotoxic chemotherapy being used to treat malignancy which occurs within 48 hours of chemotherapy administration.*** ***Increased maximum quantities will be limited to a maximum of 7 days per chemotherapy cycle.***							
5986C	***Capsule 5 mg (base)***	***2***	***..***	***..***	***37.02***	***32.90***	***Navoban***	***NV***
5987D	***I.V. injection 5 mg (base) in 5 mL***	***1***	***..***	***..***	***18.50***	***19.55***	***Navoban***	***NV***
	VINBLASTINE SULFATE							
5989F	Solution for I.V. injection 10 mg in 10 mL	5	..	..	84.06	32.90	Hospira Pty Limited	HH
	VINCRISTINE SULFATE							
5991H	I.V. injection 1 mg in 1 mL	10	..	..	* 128.36	32.90	[a] Hospira Pty Limited [a] Pfizer Australia Pty Ltd	HH PU

Code	Name, Restriction Manner of Administration and Form	Max. Qty	No.of Rpts	Premium $	Dispensed Price for Max. Qty $	Maximum Recordable Value for Safety Net $	Proprietary Name and Manufacturer	
	VINORELBINE TARTRATE							
	Authority Required ***Advanced breast cancer after failure of prior therapy which includes an anthracycline;*** ***Locally advanced or metastatic non-small cell lung cancer.***							
5992J	***Solution for I.V. infusion 10 mg (base) in 1 mL***	***16***	***2***	***..***	**** 1039.52***	***32.90***	[a] ***Hospira Pty Limited***	***HH***
							[a] ***Navelbine***	***FB***
							[a] ***Vinorelbine Ebewe***	***IT***
							[a] ***Vinorelbine Link***	***LM***
5993K	***Solution for I.V. infusion 50 mg (base) in 5 mL***	***4***	***2***	***..***	**** 1087.44***	***32.90***	[a] ***Hospira Pty Limited***	***HH***
							[a] ***Navelbine***	***FB***
							[a] ***Vinorelbine Ebewe***	***IT***
							[a] ***Vinorelbine Link***	***LM***

Proprietary Index

Proprietary Name	Manufacturer	Name
Abraxane	TS	NAB PACLITAXEL
Adriamycin	PF	DOXORUBICIN HYDROCHLORIDE
Adriamycin Solution	PH	DOXORUBICIN HYDROCHLORIDE
Alimta	LY	PEMETREXED DISODIUM
Anzatax	HH	PACLITAXEL
Anzemet	SW	DOLASETRON MESYLATE
APO-Ondansetron	TX	ONDANSETRON
Avastin	RO	BEVACIZUMAB
Blenamax	SI	BLEOMYCIN SULFATE
Blenoxane	BQ	BLEOMYCIN SULFATE
Caelyx	SH	DOXORUBICIN HYDROCHLORIDE, PEGYLATED
Calcium Folinate Ebewe	IT	CALCIUM FOLINATE
Camptosar	PF	IRINOTECAN HYDROCHLORIDE TRIHYDRATE
Camptosar	PU	IRINOTECAN HYDROCHLORIDE TRIHYDRATE
Carboplatin Ebewe	IT	CARBOPLATIN
Cisplatin Ebewe	IT	CISPLATIN
DBL Gemcitabine for Injection	HH	GEMCITABINE HYDROCHLORIDE
Doxorubicin Ebewe	IT	DOXORUBICIN HYDROCHLORIDE
Eloxatin	SW	OXALIPLATIN
Emend	MK	APREPITANT
Endoxan	BX	CYCLOPHOSPHAMIDE
Epirubicin Ebewe	IT	EPIRUBICIN HYDROCHLORIDE
Erbitux	SG	CETUXIMAB
Etopophos	BQ	ETOPOSIDE
Etoposide Ebewe	IT	ETOPOSIDE
Fludara	GZ	FLUDARABINE PHOSPHATE
Fludarabine Actavis	GQ	FLUDARABINE PHOSPHATE
Fludarabine Ebewe	IT	FLUDARABINE PHOSPHATE
Fluorouracil Ebewe	IT	FLUOROURACIL
Gemcitabine Actavis	GQ	GEMCITABINE HYDROCHLORIDE
Gemcitabine Ebewe	IT	GEMCITABINE HYDROCHLORIDE
Gemcite	ZP	GEMCITABINE HYDROCHLORIDE
Gemzar	LY	GEMCITABINE HYDROCHLORIDE
Holoxan	BX	IFOSFAMIDE
Hospira Pty Limited	HH	BLEOMYCIN SULFATE
Hospira Pty Limited	HH	CARBOPLATIN
Hospira Pty Limited	HH	CISPLATIN
Hospira Pty Limited	HH	DOXORUBICIN HYDROCHLORIDE
Hospira Pty Limited	HH	EPIRUBICIN HYDROCHLORIDE
Hospira Pty Limited	HH	ETOPOSIDE
Hospira Pty Limited	HH	FLUOROURACIL
Hospira Pty Limited	HH	IRINOTECAN HYDROCHLORIDE TRIHYDRATE
Hospira Pty Limited	HH	METHOTREXATE
Hospira Pty Limited	HH	MITOZANTRONE HYDROCHLORIDE
Hospira Pty Limited	HH	OXALIPLATIN
Hospira Pty Limited	HH	VINBLASTINE SULFATE
Hospira Pty Limited	HH	VINCRISTINE SULFATE
Hospira Pty Limited	HH	VINORELBINE TARTRATE
Hycamtin	GK	TOPOTECAN HYDROCHLORIDE
ImmuCyst	SW	BCG IMMUNOTHERAPEUTIC (Bacillus Calmette-Guérin/Connaught Strain)
Intron A Redipen	SH	INTERFERON ALFA-2B
Irinotecan Actavis	GQ	IRINOTECAN HYDROCHLORIDE TRIHYDRATE
Irinotecan Alphapharm	AF	IRINOTECAN HYDROCHLORIDE TRIHYDRATE
Irinotecan Sandoz	SZ	IRINOTECAN HYDROCHLORIDE TRIHYDRATE
Kytril	HH	GRANISETRON HYDROCHLORIDE
Leucovorin Calcium	HH	CALCIUM FOLINATE
Leucovorin Calcium	PF	CALCIUM FOLINATE
Leustatin	JC	CLADRIBINE
Litak	OA	CLADRIBINE
Mabthera	RO	RITUXIMAB
Methotrexate Ebewe	IT	METHOTREXATE
Mitozantrone Ebewe	IT	MITOZANTRONE HYDROCHLORIDE
Muphoran	SE	FOTEMUSTINE
Navelbine	FB	VINORELBINE TARTRATE
Navoban	NV	TROPISETRON HYDROCHLORIDE
Omegapharm Irinotecan	OE	IRINOTECAN HYDROCHLORIDE TRIHYDRATE

Proprietary Name	Manufacturer	Name
OncoTICE	SH	BCG-TICE (Bacillus Calmette-Guérin/Tice Strain)
Ondansetron-RL	RE	ONDANSETRON
Ondansetron-RL Zydis	RE	ONDANSETRON
Ondaz	SZ	ONDANSETRON
Ondaz Zydis	SZ	ONDANSETRON
Onkotrone	BX	MITOZANTRONE HYDROCHLORIDE
Onsetron	SI	ONDANSETRON
Onsetron 4	SI	ONDANSETRON
Onsetron 8	SI	ONDANSETRON
Oxalatin	ZP	OXALIPLATIN
Oxaliplatin Actavis	GQ	OXALIPLATIN
Oxaliplatin Alphapharm	AF	OXALIPLATIN
Oxaliplatin Ebewe	IT	OXALIPLATIN
Paclitaxel Actavis	GQ	PACLITAXEL
Paclitaxel Ebewe	IT	PACLITAXEL
Pharmorubicin Solution	PH	EPIRUBICIN HYDROCHLORIDE
Phenasen	PL	ARSENIC TRIOXIDE
Pfizer Australia Pty Ltd	PF	ONDANSETRON
Pfizer Australia Pty Ltd	PU	CARBOPLATIN
Pfizer Australia Pty Ltd	PU	CISPLATIN
Pfizer Australia Pty Ltd	PU	CYTARABINE
Pfizer Australia Pty Ltd	PU	METHOTREXATE
Pfizer Australia Pty Ltd	PU	MITOZANTRONE HYDROCHLORIDE
Pfizer Australia Pty Ltd	PU	VINCRISTINE SULFATE
Roferon-A	RO	INTERFERON ALFA-2A
Sigma Pharmaceuticals (Australia) Pty Ltd	SI	THIOTEPA
Taxol	BQ	PACLITAXEL
Taxotere	SW	DOCETAXEL
Tomudex	HH	RALTITREXED
Uromitexan	BX	MESNA
Vinorelbine Ebewe	IT	VINORELBINE TARTRATE
Vinorelbine Link	LM	VINORELBINE TARTRATE
Winthrop Oxaliplatin	WA	OXALIPLATIN
Zavedos Solution	PH	IDARUBICIN HYDROCHLORIDE
Zofran	GK	ONDANSETRON
Zofran syrup 50 mL	GK	ONDANSETRON
Zofran Zydis	GK	ONDANSETRON