



Australian Government

Department of Health



Schedule of Pharmaceutical Benefits

Summary of Changes

Effective 1 January 2016



Fees, Patient Contributions and Safety Net Thresholds

The following fees, patient contributions and safety net thresholds apply as at 1 January 2016 and are included, where applicable, in prices published in the Schedule —

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|--|--------------------------------------|-----------|
| Dispensing Fees: | Ready-prepared | \$6.93 |
| | Dangerous drug fee | \$2.91 |
| | Extemporaneously-prepared | \$8.97 |
| | Allowable additional patient charge* | \$4.33 |
| Additional Fees (for safety net prices): | Ready-prepared | \$1.17 |
| | Extemporaneously-prepared | \$1.53 |
| Patient Co-payments: | General | \$38.30 |
| | Concessional | \$6.20 |
| Safety Net Thresholds: | General | \$1475.70 |
| | Concessional | \$372.00 |
| Safety Net Card Issue Fee: | | \$9.61 |

* The allowable additional patient charge is a discretionary charge to general patients if a pharmaceutical item has a dispensed price for maximum quantity less than the general patient co-payment. The pharmacist may charge general patients the allowable additional fee but the fee cannot take the cost of the prescription above the general patient co-payment for the medicine. This fee does not count towards the Safety Net threshold.

Summary of Changes

These changes to the Schedule of Pharmaceutical Benefits are effective from 1 January 2016. The Schedule is updated on the first day of each month and is available on the internet at www.pbs.gov.au.

General Pharmaceutical Benefits

Additions

Addition – Brand

| | |
|-------|--|
| 1891M | <i>AlphaClav Duo, AF</i> – AMOXYCILLIN + CLAVULANIC ACID , amoxicillin 500 mg + clavulanic acid 125 mg tablet, 10 |
| 5008N | <i>AlphaClav Duo, AF</i> – AMOXYCILLIN + CLAVULANIC ACID , amoxicillin 500 mg + clavulanic acid 125 mg tablet, 10 (Dental) |
| 5006L | <i>AlphaClav Duo Forte, AF</i> – AMOXYCILLIN + CLAVULANIC ACID , amoxicillin 875 mg + clavulanic acid 125 mg tablet, 10 (Dental) |
| 8254K | <i>AlphaClav Duo Forte, AF</i> – AMOXYCILLIN + CLAVULANIC ACID , amoxicillin 875 mg + clavulanic acid 125 mg tablet, 10 |
| 2502Q | <i>APO-Calcitriol, TX</i> – CALCITRIOL , calcitriol 0.25 microgram capsule, 100 |
| 8504N | <i>Asartan HCT 16/12.5, DO</i> – CANDESARTAN + HYDROCHLOROTHIAZIDE , candesartan cilexetil 16 mg + hydrochlorothiazide 12.5 mg tablet, 30 |
| 9314F | <i>Asartan HCT 32/12.5, DO</i> – CANDESARTAN + HYDROCHLOROTHIAZIDE , candesartan cilexetil 32 mg + hydrochlorothiazide 12.5 mg tablet, 30 |
| 9315G | <i>Asartan HCT 32/25, DO</i> – CANDESARTAN + HYDROCHLOROTHIAZIDE , candesartan cilexetil 32 mg + hydrochlorothiazide 25 mg tablet, 30 |
| 8092X | <i>Auro-Famciclovir 125, DO</i> – FAMCICLOVIR , famciclovir 125 mg tablet, 40 |
| 8897G | <i>Auro-Famciclovir 500, DO</i> – FAMCICLOVIR , famciclovir 500 mg tablet, 30 |

Addition – Equivalence Indicator

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|-------|---|
| 1207M | <i>Pramin, AF</i> – METOCLOPRAMIDE , metoclopramide hydrochloride 10 mg tablet, 25 |
| 5151D | <i>Pramin, AF</i> – METOCLOPRAMIDE , metoclopramide hydrochloride 10 mg tablet, 25 (Dental) |
| 2565B | <i>Deralin 10, AF</i> – PROPRANOLOL , propranolol hydrochloride 10 mg tablet, 100 |
| 2566C | <i>Deralin 40, AF</i> – PROPRANOLOL , propranolol hydrochloride 40 mg tablet, 100 |

Deletions

Deletion – Item

| | |
|--------|---|
| 2159P | ALUMINIUM HYDROXIDE + MAGNESIUM HYDROXIDE + MAGNESIUM TRISILICATE , aluminium hydroxide 250 mg/5 mL + magnesium hydroxide 120 mg/5 mL + magnesium trisilicate 120 mg/5 mL oral liquid, 500 mL (<i>Gastrogel</i>) |
| 10002K | ATORVASTATIN (&) EZETIMIBE , atorvastatin 10 mg tablet [30] (&) ezetimibe 10 mg tablet [30], 1 pack (<i>Atozet Composite Pack</i>) |

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|--------|---|
| 2874G | ATORVASTATIN (& EZETIMIBE , atorvastatin 20 mg tablet [30] (& ezetimibe 10 mg tablet [30], 1 pack (<i>Atozet Composite Pack</i>) |
| 2821L | ATORVASTATIN (& EZETIMIBE , atorvastatin 40 mg tablet [30] (& ezetimibe 10 mg tablet [30], 1 pack (<i>Atozet Composite Pack</i>) |
| 10006P | ATORVASTATIN (& EZETIMIBE , atorvastatin 80 mg tablet [30] (& ezetimibe 10 mg tablet [30], 1 pack (<i>Atozet Composite Pack</i>) |
| 1086E | CEFOTAXIME , cefotaxime 2 g injection, 1 x 2 g vial (<i>Cefotaxime Sandoz</i>) |
| 5049R | CEFOTAXIME , cefotaxime 2 g injection, 1 x 2 g vial (<i>Cefotaxime Sandoz</i>) (Dental) |
| 2360F | CHLORAMPHENICOL , chloramphenicol 0.5% eye drops, 10 mL (<i>Chlorsig</i>) |
| 5055C | CHLORAMPHENICOL , chloramphenicol 0.5% eye drops, 10 mL (<i>Chlorsig</i>) (Dental) |
| 5512D | CHLORAMPHENICOL , chloramphenicol 0.5% eye drops, 10 mL (<i>Chlorsig</i>) (Optometrical) |
| 1171P | CHLORAMPHENICOL , chloramphenicol 1% eye ointment, 4 g (<i>Chlorsig</i>) |
| 5511C | CHLORAMPHENICOL , chloramphenicol 1% eye ointment, 4 g (<i>Chlorsig</i>) (Optometrical) |
| 8985X | FERROUS FUMARATE , ferrous fumarate 200 mg (equivalent to 65.7 mg of elemental iron) tablet, 60 (<i>Ferro-tab</i>) |
| 9011G | FERROUS FUMARATE + FOLIC ACID , ferrous fumarate 310 mg (equivalent to 100 mg elemental iron) + folic acid 350 microgram tablet, 60 (<i>Ferro-f-tab</i>) |
| 9255D | GLUCOSE AND KETONE INDICATOR URINE , glucose and ketone indicator urine strip: diagnostic, 50 diagnostic strips (<i>Keto-Diastix</i>) |
| 9254C | GLUCOSE AND KETONE INDICATOR URINE , glucose and ketone indicator urine strip: diagnostic, 50 diagnostic strips (<i>Keto-Diabur- Test 5000</i>) |
| 8806L | GLUCOSE INDICATOR BLOOD , glucose indicator blood strip: diagnostic, 51 diagnostic strips (<i>Accu-Chek Integra</i>) |
| 9275E | GLUCOSE INDICATOR BLOOD , glucose indicator blood strip: diagnostic, 51 diagnostic strips (<i>Accu-Chek Integra</i>) |
| 10099M | GLUCOSE INDICATOR BLOOD , glucose indicator blood strip: diagnostic, 100 (<i>GoodLife</i>) |
| 10101P | GLUCOSE INDICATOR BLOOD , glucose indicator blood strip: diagnostic, 100 (<i>GoodLife</i>) |
| 9253B | GLUCOSE INDICATOR URINE , glucose indicator urine strip: diagnostic, 50 diagnostic strips (<i>Diastix</i>) |
| 2887Y | HYDROCORTISONE ACETATE , hydrocortisone acetate 1% (10 mg/g) cream, 30 g (<i>Cortic-DS 1%, Sigmacort</i>) |
| 5111B | HYDROCORTISONE ACETATE , hydrocortisone acetate 1% (10 mg/g) cream, 30 g (<i>Cortic-DS 1%, Sigmacort</i>) (Dental) |
| 2888B | HYDROCORTISONE ACETATE , hydrocortisone acetate 1% (10 mg/g) ointment, 30 g (<i>Cortic-DS 1%, Sigmacort</i>) |
| 5112C | HYDROCORTISONE ACETATE , hydrocortisone acetate 1% (10 mg/g) ointment, 30 g (<i>Cortic-DS 1%, Sigmacort</i>) (Dental) |
| 3033P | NYSTATIN , nystatin 100 000 international units/mL oral liquid, 24 mL (<i>Mycostatin, Nilstat</i>) |
| 3343Y | NYSTATIN , nystatin 100 000 international units/mL oral liquid, 24 mL (<i>Mycostatin, Nilstat</i>) (Dental) |

Deletion – Brand

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| 8511Y | <i>Ossmax 70mg, RA</i> – ALENDRONATE , alendronate 70 mg tablet, 4 |
| 9012H | <i>APO-Alendronate Plus D3 70 mg/70 mcg, TX</i> – ALENDRONATE + COLECALCIFEROL , alendronate 70 mg + colecalciferol 70 microgram tablet, 4 |
| 9012H | <i>Chem mart Alendronate Plus D3 70 mg/70 mcg, CH</i> – ALENDRONATE + COLECALCIFEROL , alendronate 70 mg + colecalciferol 70 microgram tablet, 4 |
| 9012H | <i>Terry White Chemists Alendronate Plus D3 70 mg/70 mcg, TW</i> – ALENDRONATE + COLECALCIFEROL , alendronate 70 mg + colecalciferol 70 microgram tablet, 4 |
| 9183H | <i>APO-Alendronate Plus D3 70 mg/140 mcg, TX</i> – ALENDRONATE + COLECALCIFEROL , alendronate 70 mg + colecalciferol 140 microgram tablet, 4 |
| 9183H | <i>Chem mart Alendronate Plus D3 70 mg/140 mcg, CH</i> – ALENDRONATE + COLECALCIFEROL , alendronate 70 mg + colecalciferol 140 microgram tablet, 4 |
| 9183H | <i>Terry White Chemists Alendronate Plus D3 70 mg/140 mcg, TW</i> – ALENDRONATE + COLECALCIFEROL , alendronate 70 mg + colecalciferol 140 microgram tablet, 4 |
| 1886G | <i>GenRx Amoxicillin, GX</i> – AMOXYCILLIN , amoxicillin 125 mg/5 mL oral liquid: powder for, 100 mL |
| 3302T | <i>GenRx Amoxicillin, GX</i> – AMOXYCILLIN , amoxicillin 125 mg/5 mL oral liquid: powder for, 100 mL (Dental) |

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| 1887H | <i>GenRx Amoxicillin, GX</i> – AMOXYCILLIN , amoxicillin 250 mg/5 mL oral liquid: powder for, 100 mL |
| 3393N | <i>GenRx Amoxicillin, GX</i> – AMOXYCILLIN , amoxicillin 250 mg/5 mL oral liquid: powder for, 100 mL (Dental) |
| 8202Q | <i>Astrix, YN</i> – ASPIRIN , aspirin 100 mg tablet, 112 |
| 8202Q | <i>Mayne Pharma Aspirin, YT</i> – ASPIRIN , aspirin 100 mg tablet, 112 |
| 8361C | <i>Xeloda, RO</i> – CAPECITABINE , capecitabine 150 mg tablet, 60 |
| 5479J | <i>Cefazolin Sandoz, SZ</i> – CEPHAZOLIN , cephazolin 2 g injection, 1 x 2 g vial |
| 9326W | <i>Cefazolin Sandoz, SZ</i> – CEPHAZOLIN , cephazolin 2 g injection, 1 x 2 g vial |
| 9048F | <i>Hydroxo-B12, AS</i> – HYDROXOCOBALAMIN , hydroxocobalamin 1 mg/mL injection, 3 x 1 mL ampoules |
| 8814X | <i>Panadol Osteo, GC</i> – PARACETAMOL , paracetamol 665 mg tablet: modified release, 96 tablets |
| 3196F | <i>O.R.S., AS</i> – SODIUM CHLORIDE + POTASSIUM CHLORIDE + GLUCOSE MONOHYDRATE + CITRATE , sodium chloride 470 mg + potassium chloride 300 mg + glucose monohydrate 3.56 g + sodium acid citrate 530 mg oral liquid: powder for, 10 x 4.9 g sachets |
| 8646C | <i>TACROLIMUS APOTEX, TX</i> – TACROLIMUS , tacrolimus 500 microgram capsule, 100 |
| 8647D | <i>TACROLIMUS APOTEX, TX</i> – TACROLIMUS , tacrolimus 1 mg capsule, 100 |
| 8648E | <i>TACROLIMUS APOTEX, TX</i> – TACROLIMUS , tacrolimus 5 mg capsule, 50 |
| 2791X | <i>APO-Trandolapril, TX</i> – TRANDOLAPRIL , trandolapril 500 microgram capsule, 28 |
| 2792Y | <i>APO-Trandolapril, TX</i> – TRANDOLAPRIL , trandolapril 1 mg capsule, 28 |
| 2793B | <i>APO-Trandolapril, TX</i> – TRANDOLAPRIL , trandolapril 2 mg capsule, 28 |
| 8758Y | <i>APO-Trandolapril, TX</i> – TRANDOLAPRIL , trandolapril 4 mg capsule, 28 |

Deletion – Equivalence Indicator

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| 8202Q | <i>Spren 100, QA</i> – ASPIRIN , aspirin 100 mg tablet, 112 |
| 1759N | <i>Hospira Pty Limited, HH</i> – CEFOTAXIME , CEFOTAXIME Powder for injection 2 g, 10 |
| 1769D | <i>Hospira Pty Limited, HH</i> – CEFOTAXIME , CEFOTAXIME Powder for injection 2 g, 10 (Dental) |
| 5479J | <i>Cephazolin Alphapharm, AF</i> – CEPHAZOLIN , cephazolin 2 g injection, 1 x 2 g vial |
| 9326W | <i>Cephazolin Alphapharm, AF</i> – CEPHAZOLIN , cephazolin 2 g injection, 1 x 2 g vial |
| 8814X | <i>Osteomol 665 Paracetamol, CR</i> – PARACETAMOL , paracetamol 665 mg tablet: modified release, 96 tablets |

Alterations

Changes to Restrictions

The following items have additions, deletions or alterations to restrictions, notes and/or cautions.

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| 2014B | ALGINATE SODIUM + CALCIUM CARBONATE + BICARBONATE , alginate sodium 500 mg/10 mL + calcium carbonate 160 mg/10 mL + sodium bicarbonate 267 mg/10 mL oral liquid, 500 mL (Gaviscon P) |
| 2157M | ALUMINIUM HYDROXIDE WITH MAGNESIUM HYDROXIDE , ALUMINIUM HYDROXIDE with MAGNESIUM HYDROXIDE Oral suspension 200 mg-200 mg per 5 mL, 500 mL, 1 (Mylanta P) |
| 1010E | ASPIRIN , aspirin 300 mg tablet: effervescent, 96 (Solprin) |
| 5018D | ASPIRIN , aspirin 300 mg tablet: effervescent, 96 (Solprin) (Dental) |
| 8202Q | ASPIRIN , aspirin 100 mg tablet, 112 (Spren 100) |
| 1258F | BISACODYL , bisacodyl 10 mg suppository, 12 (Petrus Bisacodyl Suppositories) |
| 1260H | BISACODYL , bisacodyl 10 mg suppository, 10 (Dulcolax, Petrus Bisacodyl Suppositories) |
| 1759N | CEFOTAXIME , CEFOTAXIME Powder for injection 2 g, 10 (Hospira Pty Limited) |
| 1769D | CEFOTAXIME , CEFOTAXIME Powder for injection 2 g, 10 (Hospira Pty Limited) |
| 1437P | FOLIC ACID , folic acid 5 mg tablet, 100 (Megafol 5) |
| 2958Q | FOLIC ACID , folic acid 500 microgram tablet, 100 (Foltabs 500, Megafol 0.5) |
| 3106L | GLUCOSE AND KETONE INDICATOR URINE , glucose and ketone indicator urine strip: diagnostic, 50 diagnostic strips (Keto-Diabur- Test 5000) |

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| 3107M | GLUCOSE AND KETONE INDICATOR URINE , glucose and ketone indicator urine strip: diagnostic, 50 diagnostic strips (Keto-Diastix) |
| 3104J | GLUCOSE INDICATOR URINE , glucose indicator urine strip: diagnostic, 50 diagnostic strips (Diastix) |
| 2555L | GLYCEROL , glycerol 700 mg suppository, 12 (Petrus Pharmaceuticals Pty Ltd) |
| 2556M | GLYCEROL , glycerol 1.4 g suppository, 12 (Petrus Pharmaceuticals Pty Ltd) |
| 2557N | GLYCEROL , glycerol 2.8 g suppository, 12 (Petrus Pharmaceuticals Pty Ltd) |
| 2162T | HYDROXOCOBALAMIN , hydroxocobalamin 1 mg/mL injection, 3 x 1 mL ampoules (Vita-B12) |
| 9048F | HYDROXOCOBALAMIN , hydroxocobalamin 1 mg/mL injection, 3 x 1 mL ampoules (Neo-B12) |
| 1024X | OLANZAPINE , olanzapine 2.5 mg tablet, 28 (Olanzapine generichealth 2.5) |
| 1037N | OLANZAPINE , olanzapine 5 mg tablet, 28 (Olanzapine generichealth 5) |
| 1041T | OLANZAPINE , olanzapine 7.5 mg tablet, 28 (Olanzapine generichealth 7.5) |
| 1042W | OLANZAPINE , olanzapine 10 mg tablet, 28 (Olanzapine generichealth 10) |
| 3381Y | OLANZAPINE , OLANZAPINE Tablet 5 mg (orally disintegrating), 28 (APO-Olanzapine ODT, Chem mart Olanzapine ODT, Olanzapine AN ODT, Olanzapine ODT generichealth 5, Olanzapine ODT-DRLA, Olanzapine RBX ODT, Olanzapine Sandoz ODT 5, Olanzapine-GA ODT, Ozin ODT 5, Pharmacy Choice Olanzapine ODT, Terry White Chemists Olanzapine ODT) |
| 3382B | OLANZAPINE , OLANZAPINE Tablet 10 mg (orally disintegrating), 28 (APO-Olanzapine ODT, Chem mart Olanzapine ODT, Olanzapine AN ODT, Olanzapine ODT generichealth 10, Olanzapine ODT-DRLA, Olanzapine RBX ODT, Olanzapine Sandoz ODT 10, Olanzapine-GA ODT, Ozin ODT 10, Pharmacy Choice Olanzapine ODT, Terry White Chemists Olanzapine ODT) |
| 3384D | OLANZAPINE , olanzapine 15 mg tablet, 28 (APO-Olanzapine ODT, Chem mart Olanzapine ODT, Olanzapine AN ODT, Olanzapine Sandoz ODT 15, Ozin ODT 15, Terry White Chemists Olanzapine ODT) |
| 3385E | OLANZAPINE , olanzapine 20 mg tablet, 28 (APO-Olanzapine ODT, Chem mart Olanzapine ODT, Olanzapine AN ODT, Olanzapine Sandoz ODT 20, Ozin ODT 20, Terry White Chemists Olanzapine ODT) |
| 8170B | OLANZAPINE , olanzapine 2.5 mg tablet, 28 (APO-Olanzapine, Chem mart Olanzapine, Lanzek, Olanzapine AN, Olanzapine RBX, Olanzapine Sandoz, Olanzapine-DRLA, Olanzapine-GA, Ozin 2.5, Pharmacor Olanzapine 2.5, Pharmacy Choice Olanzapine, Terry White Chemists Olanzapine, Zypine, Zyprexa) |
| 8185T | OLANZAPINE , olanzapine 5 mg tablet, 28 (APO-Olanzapine, Chem mart Olanzapine, Lanzek, Olanzapine AN, Olanzapine GH, Olanzapine RBX, Olanzapine Sandoz, Olanzapine-DRLA, Olanzapine-GA, Ozin 5, Pharmacor Olanzapine 5, Pharmacy Choice Olanzapine, Terry White Chemists Olanzapine, Zypine, Zyprexa) |
| 8186W | OLANZAPINE , olanzapine 7.5 mg tablet, 28 (APO-Olanzapine, Chem mart Olanzapine, Lanzek, Olanzapine AN, Olanzapine GH, Olanzapine RBX, Olanzapine Sandoz, Olanzapine-DRLA, Olanzapine-GA, Ozin 7.5, Pharmacor Olanzapine 7.5, Pharmacy Choice Olanzapine, Terry White Chemists Olanzapine, Zypine, Zyprexa) |
| 8187X | OLANZAPINE , olanzapine 10 mg tablet, 28 (APO-Olanzapine, Chem mart Olanzapine, Lanzek, Olanzapine AN, Olanzapine GH, Olanzapine RBX, Olanzapine Sandoz, Olanzapine-DRLA, Olanzapine-GA, Ozin 10, Pharmacor Olanzapine 10, Pharmacy Choice Olanzapine, Terry White Chemists Olanzapine, Zypine, Zyprexa) |
| 8433W | OLANZAPINE , olanzapine 5 mg wafer, 28 (Lanzek Zydis, Zypine ODT, Zyprexa Zydis) |
| 8434X | OLANZAPINE , olanzapine 10 mg wafer, 28 (Lanzek Zydis, Zypine ODT, Zyprexa Zydis) |
| 8952E | OLANZAPINE , olanzapine 15 mg wafer, 28 (Zypine ODT, Zyprexa Zydis) |
| 8953F | OLANZAPINE , olanzapine 20 mg wafer, 28 (Zypine ODT, Zyprexa Zydis) |
| 1746X | PARACETAMOL , paracetamol 500 mg tablet, 100 (APO-Paracetamol, Febridol, Generic Health Pty Ltd, Panamax, Paracetamol (Sandoz), Paralgin, Parapane) |
| 1747Y | PARACETAMOL , paracetamol 120 mg/5 mL oral liquid, 100 mL (Panamax) |
| 1770E | PARACETAMOL , paracetamol 240 mg/5 mL oral liquid, 200 mL (Panamax 240 Elixir) |
| 3348F | PARACETAMOL , paracetamol 120 mg/5 mL oral liquid, 100 mL (Panamax) (Dental) |
| 3349G | PARACETAMOL , paracetamol 240 mg/5 mL oral liquid, 200 mL (Panamax 240 Elixir) (Dental) |
| 5196L | PARACETAMOL , paracetamol 500 mg tablet, 100 (APO-Paracetamol, Febridol, Generic Health Pty Ltd, Panamax, Paracetamol (Sandoz), Paralgin, Parapane) (Dental) |
| 5224Y | PARACETAMOL , paracetamol 500 mg tablet, 100 (APO-Paracetamol, Febridol, Generic Health Pty Ltd, Panamax, Paracetamol (Sandoz), Paralgin, Parapane) (Dental) |
| 8784H | PARACETAMOL , paracetamol 500 mg tablet, 100 (APO-Paracetamol, Febridol, Generic Health Pty Ltd, Panamax, Paracetamol (Sandoz), Paralgin, Parapane) |

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| 8814X | PARACETAMOL , paracetamol 665 mg tablet: modified release, 96 tablets (Osteomol 665 Paracetamol) | | |
| 3196F | SODIUM CHLORIDE + POTASSIUM CHLORIDE + GLUCOSE MONOHYDRATE + CITRATE , sodium chloride 470 mg + potassium chloride 300 mg + glucose monohydrate 3.56 g + sodium acid citrate 530 mg oral liquid: powder for, 10 x 4.9 g sachets (Repalyte New Formulation, restore O.R.S.) | | |

Alteration – Restriction Level

| | | From | To |
|-------|--|--------------|------------|
| 2014B | ALGINATE SODIUM + CALCIUM CARBONATE + BICARBONATE , alginate sodium 500 mg/10 mL + calcium carbonate 160 mg/10 mL + sodium bicarbonate 267 mg/10 mL oral liquid, 500 mL (<i>Gaviscon P</i>) | unrestricted | restricted |
| 2157M | ALUMINIUM HYDROXIDE WITH MAGNESIUM HYDROXIDE , ALUMINIUM HYDROXIDE with MAGNESIUM HYDROXIDE Oral suspension 200 mg-200 mg per 5 mL, 500 mL, 1 (<i>Mylanta P</i>) | unrestricted | restricted |
| 1010E | ASPIRIN , aspirin 300 mg tablet: effervescent, 96 (<i>Solprin</i>) | unrestricted | restricted |
| 5018D | ASPIRIN , aspirin 300 mg tablet: effervescent, 96 (<i>Solprin</i>)(Dental) | unrestricted | restricted |
| 8202Q | ASPIRIN , aspirin 100 mg tablet, 112 (<i>Spren 100</i>) | unrestricted | restricted |
| 1437P | FOLIC ACID , folic acid 5 mg tablet, 100 (<i>Megafol 5</i>) | unrestricted | restricted |
| 2958Q | FOLIC ACID , folic acid 500 microgram tablet, 100 (<i>Foltabs 500, Megafol 0.5</i>) | unrestricted | restricted |
| 3106L | GLUCOSE AND KETONE INDICATOR URINE , glucose and ketone indicator urine strip: diagnostic, 50 diagnostic strips (<i>Keto-Diabus- Test 5000</i>) | unrestricted | restricted |
| 3107M | GLUCOSE AND KETONE INDICATOR URINE , glucose and ketone indicator urine strip: diagnostic, 50 diagnostic strips (<i>Keto-Diastix</i>) | unrestricted | restricted |
| 3104J | GLUCOSE INDICATOR URINE , glucose indicator urine strip: diagnostic, 50 diagnostic strips (<i>Diastix</i>) | unrestricted | restricted |
| 1746X | PARACETAMOL , paracetamol 500 mg tablet, 100 (<i>APO-Paracetamol, Febridol, Generic Health Pty Ltd, Panamax, Paracetamol (Sandoz), Paralgin, Parapane</i>) | unrestricted | restricted |
| 1747Y | PARACETAMOL , paracetamol 120 mg/5 mL oral liquid, 100 mL (<i>Panamax</i>) | unrestricted | restricted |
| 1770E | PARACETAMOL , paracetamol 240 mg/5 mL oral liquid, 200 mL (<i>Panamax 240 Elixir</i>) | unrestricted | restricted |
| 3348F | PARACETAMOL , paracetamol 120 mg/5 mL oral liquid, 100 mL (<i>Panamax</i>)(Dental) | unrestricted | restricted |
| 3349G | PARACETAMOL , paracetamol 240 mg/5 mL oral liquid, 200 mL (<i>Panamax 240 Elixir</i>)(Dental) | unrestricted | restricted |
| 5196L | PARACETAMOL , paracetamol 500 mg tablet, 100 (<i>APO-Paracetamol, Febridol, Generic Health Pty Ltd, Panamax, Paracetamol (Sandoz), Paralgin, Parapane</i>)(Dental) | unrestricted | restricted |
| 3196F | SODIUM CHLORIDE + POTASSIUM CHLORIDE + GLUCOSE MONOHYDRATE + CITRATE , sodium chloride 470 mg + potassium chloride 300 mg + glucose monohydrate 3.56 g + sodium acid citrate 530 mg oral liquid: powder for, 10 x 4.9 g sachets (<i>Repalyte New Formulation, restore O.R.S.</i>) | unrestricted | restricted |

Alteration – Manufacturer Code

| | | From | To |
|-------|---|------|----|
| 2544X | <i>Akineton</i> – BIPERIDEN , biperiden hydrochloride 2 mg tablet, 100 | LM | ZC |
| 1153Q | <i>Neo-Mercazole</i> – CARBIMAZOLE , carbimazole 5 mg tablet, 100 | LM | ZC |
| 1585K | <i>Hygroton 25</i> – CHLORTHALIDONE , chlorthalidone 25 mg tablet, 50 | LM | ZC |
| 2424N | <i>E.E.S. 200</i> – ERYTHROMYCIN ETHYLSUCCINATE , erythromycin (as ethylsuccinate) 200 mg/5 mL oral liquid: powder for, 100 mL | LM | ZC |
| 3334L | <i>E.E.S. 200</i> – ERYTHROMYCIN ETHYLSUCCINATE , erythromycin (as ethylsuccinate) 200 mg/5 mL oral liquid: powder for, 100 mL (Dental) | LM | ZC |
| 2428T | <i>E.E.S. Granules</i> – ERYTHROMYCIN ETHYLSUCCINATE , erythromycin (as ethylsuccinate) 400 mg/5 mL oral liquid: powder for, 100 mL | LM | ZC |
| 3337P | <i>E.E.S. Granules</i> – ERYTHROMYCIN ETHYLSUCCINATE , erythromycin (as ethylsuccinate) 400 mg/5 mL oral liquid: powder for, 100 mL (Dental) | LM | ZC |
| 2750R | <i>E.E.S. 400 Filmtab</i> – ERYTHROMYCIN ETHYLSUCCINATE , erythromycin (as ethylsuccinate) 400 mg tablet, 25 | LM | ZC |

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| 3336N | <i>E.E.S. 400 Filmtab</i> – ERYTHROMYCIN ETHYLSUCCINATE , erythromycin (as ethylsuccinate) 400 mg tablet, 25 (Dental) | LM | ZC |
| 1397M | <i>Erythrocin-I.V.</i> – ERYTHROMYCIN LACTOBIONATE , erythromycin (as lactobionate) 1 g injection, 1 x 1 g vial | LM | ZC |
| 5088T | <i>Erythrocin-I.V.</i> – ERYTHROMYCIN LACTOBIONATE , erythromycin (as lactobionate) 1 g injection, 1 x 1 g vial (Dental) | LM | ZC |
| 2420J | <i>Tofranil 10</i> – IMIPRAMINE , imipramine hydrochloride 10 mg tablet, 50 | LM | ZC |
| 2421K | <i>Tofranil 25</i> – IMIPRAMINE , imipramine hydrochloride 25 mg tablet, 50 | LM | ZC |
| 10086W | <i>Kuvan</i> – SAPROPTERIN , sapropterin dihydrochloride 100 mg tablet: soluble, 30 tablets | SG | IO |
| 10087X | <i>Kuvan</i> – SAPROPTERIN , sapropterin dihydrochloride 100 mg tablet: soluble, 30 tablets | SG | IO |

Advance Notices

1 February 2016

Deletion – Brand

| | |
|-------|---|
| 2655R | <i>GenRx Cephalexin, GX</i> – CEPHALEXIN , cephalexin 250 mg capsule, 20 |
| 3058Y | <i>GenRx Cephalexin, GX</i> – CEPHALEXIN , cephalexin 250 mg capsule, 20 |
| 3119E | <i>GenRx Cephalexin, GX</i> – CEPHALEXIN , cephalexin 500 mg capsule, 20 |
| 3317N | <i>GenRx Cephalexin, GX</i> – CEPHALEXIN , cephalexin 250 mg capsule, 20 (Dental) |
| 3318P | <i>GenRx Cephalexin, GX</i> – CEPHALEXIN , cephalexin 500 mg capsule, 20 (Dental) |
| 1368B | <i>Auspril, QA</i> – ENALAPRIL , enalapril maleate 10 mg tablet, 30 |
| 1369C | <i>Auspril, QA</i> – ENALAPRIL , enalapril maleate 20 mg tablet, 30 |
| 1370D | <i>Auspril, QA</i> – ENALAPRIL , enalapril maleate 5 mg tablet, 30 |
| 8246B | <i>Karbesat 75, QA</i> – IRBESARTAN , irbesartan 75 mg tablet, 30 |
| 8247C | <i>Karbesat 150, QA</i> – IRBESARTAN , irbesartan 150 mg tablet, 30 |
| 8248D | <i>Karbesat 300, QA</i> – IRBESARTAN , irbesartan 300 mg tablet, 30 |
| 2848X | <i>Seaze 25, QA</i> – LAMOTRIGINE , lamotrigine 25 mg tablet, 56 |
| 2849Y | <i>Seaze 50, QA</i> – LAMOTRIGINE , lamotrigine 50 mg tablet, 56 |
| 2850B | <i>Seaze 100, QA</i> – LAMOTRIGINE , lamotrigine 100 mg tablet, 56 |
| 2851C | <i>Seaze 200, QA</i> – LAMOTRIGINE , lamotrigine 200 mg tablet, 56 |
| 8063J | <i>Seaze 5, QA</i> – LAMOTRIGINE , lamotrigine 5 mg tablet, 56 |
| 8654L | <i>Levitam 250, QA</i> – LEVETIRACETAM , levetiracetam 250 mg tablet, 60 |
| 8655M | <i>Levitam 500, QA</i> – LEVETIRACETAM , levetiracetam 500 mg tablet, 60 |
| 8656N | <i>Levitam 1000, QA</i> – LEVETIRACETAM , levetiracetam 1 g tablet, 60 |
| 8627C | <i>Montelukast RBX, RA</i> – MONTELUKAST , montelukast 4 mg tablet: chewable, 28 |
| 8628D | <i>Montelukast RBX, RA</i> – MONTELUKAST , montelukast 5 mg tablet: chewable, 28 |
| 8457D | <i>Seronia 100, QA</i> – QUETIAPINE , quetiapine 100 mg tablet, 90 |
| 8458E | <i>Seronia 200, QA</i> – QUETIAPINE , quetiapine 200 mg tablet, 60 |
| 8580N | <i>Seronia 300, QA</i> – QUETIAPINE , quetiapine 300 mg tablet, 60 |

1 April 2016

Deletion – Brand

| | |
|-------|--|
| 3065H | <i>Visken 15, NV</i> – PINDOLOL , pindolol 15 mg tablet, 50 |
|-------|--|

Palliative Care

Deletions

Deletion – Brand

- 5343F *Panadol Osteo, GC* – **PARACETAMOL**, paracetamol 665 mg tablet: modified release, 96 tablets
5344G *Panadol Osteo, GC* – **PARACETAMOL**, paracetamol 665 mg tablet: modified release, 96 tablets

Deletion – Equivalence Indicator

- 5343F *Osteomol 665 Paracetamol, CR* – **PARACETAMOL**, paracetamol 665 mg tablet: modified release, 96 tablets
5344G *Osteomol 665 Paracetamol, CR* – **PARACETAMOL**, paracetamol 665 mg tablet: modified release, 96 tablets

Highly Specialised Drugs Program (Private Hospital)

Additions

Addition – Item

- 10583B **RITUXIMAB**, rituximab 100 mg/10 mL injection, 2 x 10 mL vials (*Mabthera*)
10576P **RITUXIMAB**, rituximab 500 mg/50 mL injection, 1 x 50 mL vial (*Mabthera*)

Addition – Brand

- 6152T *APO-Clarithromycin, TX* – **CLARITHROMYCIN**, clarithromycin 500 mg tablet, 100

Deletions

Deletion – Item

- 6151R **CLARITHROMYCIN**, clarithromycin 250 mg tablet, 100 (*Klacid*)

Deletion – Brand

- 6152T *Klacid, GO* – **CLARITHROMYCIN**, clarithromycin 500 mg tablet, 100
6328C *TACROLIMUS APOTEX, TX* – **TACROLIMUS**, tacrolimus 500 microgram capsule, 100
6216E *TACROLIMUS APOTEX, TX* – **TACROLIMUS**, tacrolimus 1 mg capsule, 100
6217F *TACROLIMUS APOTEX, TX* – **TACROLIMUS**, tacrolimus 5 mg capsule, 50

Advance Notices

1 February 2016

Deletion – Brand

- 6426F *Sandostatin LAR, NV* – **OCTREOTIDE**, octreotide 10 mg injection: modified release [1 x 10 mg vial] (& inert substance diluent [1 x 2.5 mL syringe], 1 pack
6427G *Sandostatin LAR, NV* – **OCTREOTIDE**, octreotide 20 mg injection: modified release [1 x 20 mg vial] (& inert substance diluent [1 x 2.5 mL syringe], 1 pack
6428H *Sandostatin LAR, NV* – **OCTREOTIDE**, octreotide 30 mg injection: modified release [1 x 30 mg vial] (& inert substance diluent [1 x 2.5 mL syringe], 1 pack

Highly Specialised Drugs Program (Public Hospital)

Additions

Addition – Item

- 10591K **RITUXIMAB**, rituximab 100 mg/10 mL injection, 2 x 10 mL vials (*Mabthera*)
10593M **RITUXIMAB**, rituximab 500 mg/50 mL injection, 1 x 50 mL vial (*Mabthera*)

Addition – Brand

- 5624B *APO-Clarithromycin, TX* – **CLARITHROMYCIN**, clarithromycin 500 mg tablet, 100

Deletions

Deletion – Item

- 5625C **CLARITHROMYCIN**, clarithromycin 250 mg tablet, 100 (*Klacid*)

Deletion – Brand

- 5624B *Klacid, GO* – **CLARITHROMYCIN**, clarithromycin 500 mg tablet, 100
9558C *TACROLIMUS APOTEX, TX* – **TACROLIMUS**, tacrolimus 500 microgram capsule, 100
9560E *TACROLIMUS APOTEX, TX* – **TACROLIMUS**, tacrolimus 1 mg capsule, 100
9561F *TACROLIMUS APOTEX, TX* – **TACROLIMUS**, tacrolimus 5 mg capsule, 50

Advance Notices

1 February 2016

Deletion – Brand

- 9511N *Sandostatin LAR, NV* – **OCTREOTIDE**, octreotide 10 mg injection: modified release [1 x 10 mg vial] (&) inert substance diluent [1 x 2.5 mL syringe], 1 pack
9512P *Sandostatin LAR, NV* – **OCTREOTIDE**, octreotide 20 mg injection: modified release [1 x 20 mg vial] (&) inert substance diluent [1 x 2.5 mL syringe], 1 pack
9513Q *Sandostatin LAR, NV* – **OCTREOTIDE**, octreotide 30 mg injection: modified release [1 x 30 mg vial] (&) inert substance diluent [1 x 2.5 mL syringe], 1 pack

Highly Specialised Drugs Program (Community Access)

Advance Notices

1 February 2016

Deletion – Brand

- 10325K *Zerit, BQ* – **STAVUDINE**, stavudine 20 mg capsule, 60

Opiate Dependence Treatment Program

Alteration – Manufacturer Code

| | | From | To |
|-------|---|------|----|
| 6307Y | <i>Subutex</i> – BUPRENORPHINE , buprenorphine 400 microgram tablet, 7 | RC | IR |
| 6308B | <i>Subutex</i> – BUPRENORPHINE , buprenorphine 2 mg tablet, 7 | RC | IR |
| 6309C | <i>Subutex</i> – BUPRENORPHINE , buprenorphine 8 mg tablet, 7 | RC | IR |
| 9749D | <i>Suboxone Film 2/0.5</i> – BUPRENORPHINE + NALOXONE , buprenorphine 2 mg + naloxone 500 microgram film: sublingual, 28 films | RC | IR |
| 9750E | <i>Suboxone Film 8/2</i> – BUPRENORPHINE + NALOXONE , buprenorphine 8 mg + naloxone 2 mg film: sublingual, 28 films | RC | IR |

Repatriation Pharmaceutical Benefits

Additions

Addition – Item

| | |
|--------|--|
| 4579B | ALPROSTADIL , alprostadil 10 microgram injection [2 x 10 microgram syringes] (& inert substance diluent [2 x 0.6 mL syringes], 1 pack (<i>Caverject Impulse</i>) |
| 4580C | ALPROSTADIL , alprostadil 20 microgram injection [2 x 20 microgram syringes] (& inert substance diluent [2 x 0.6 mL syringes], 1 pack (<i>Caverject Impulse</i>) |
| 10590J | ASPIRIN , aspirin 100 mg tablet, 112 (<i>Spren 100</i>) |
| 10578R | BISACODYL , bisacodyl 10 mg suppository, 10 (<i>Dulcolax, Petrus Bisacodyl Suppositories</i>) |
| 10580W | BISACODYL , bisacodyl 10 mg suppository, 12 (<i>Petrus Bisacodyl Suppositories</i>) |
| 10594N | FERROUS FUMARATE , ferrous fumarate 200 mg (equivalent to 65.7 mg of elemental iron) tablet, 60 (<i>Ferro-tab</i>) |
| 10579T | FERROUS FUMARATE + FOLIC ACID , ferrous fumarate 310 mg (equivalent to 100 mg elemental iron) + folic acid 350 microgram tablet, 60 (<i>Ferro-f-tab</i>) |
| 10584C | FOLIC ACID , folic acid 500 microgram tablet, 100 (<i>Foltabs 500, Megafol 0.5</i>) |
| 10573L | FOLIC ACID , folic acid 5 mg tablet, 100 (<i>Megafol 5</i>) |
| 10586E | GLYCEROL , glycerol 700 mg suppository, 12 (<i>Petrus Pharmaceuticals Pty Ltd</i>) |
| 10596Q | GLYCEROL , glycerol 1.4 g suppository, 12 (<i>Petrus Pharmaceuticals Pty Ltd</i>) |
| 10577Q | HYDROXOCOBALAMIN , hydroxocobalamin 1 mg/mL injection, 3 x 1 mL ampoules (<i>Vita-B12</i>) |
| 10587F | HYDROXOCOBALAMIN , hydroxocobalamin 1 mg/mL injection, 3 x 1 mL ampoules (<i>Neo-B12</i>) |
| 10592L | LOPERAMIDE , loperamide hydrochloride 2 mg capsule, 12 (<i>Gastrex</i>) |
| 10599W | PARACETAMOL , paracetamol 240 mg/5 mL oral liquid, 200 mL (<i>Panamax 240 Elixir</i>) |
| 10582Y | PARACETAMOL , paracetamol 500 mg tablet, 100 (<i>APO-Paracetamol, Febridol, Generic Health Pty Ltd, Panamax, Paracetamol (Sandoz), Paralgin, Parapane</i>) |
| 10585D | PARACETAMOL , paracetamol 500 mg tablet, 100 (<i>APO-Paracetamol, Febridol, Generic Health Pty Ltd, Panamax, Paracetamol (Sandoz), Paralgin, Parapane</i>) |
| 10598T | PARACETAMOL , paracetamol 665 mg tablet: modified release, 96 tablets (<i>Osteomol 665 Paracetamol</i>) |
| 10574M | SODIUM CHLORIDE + POTASSIUM CHLORIDE + GLUCOSE MONOHYDRATE + CITRATE , sodium chloride 470 mg + potassium chloride 300 mg + glucose monohydrate 3.56 g + sodium acid citrate 530 mg oral liquid: powder for, 10 x 4.9 g sachets (<i>restore O.R.S.</i>) |

Addition – Brand

| | |
|-------|---|
| 4010C | <i>Pharmacy Action Anti-Fungal Nail Treatment, GQ</i> – AMOROLFINE , amorolfine 5% application, 5 mL |
| 4077N | <i>Cardasa, AF</i> – ASPIRIN , aspirin 100 mg tablet: enteric, 84 |
| 4179Y | <i>Clopidogrel AN, EA</i> – CLOPIDOGREL , clopidogrel 75 mg tablet, 28 |

| | |
|-------|---|
| 4017K | <i>Clonea 3 Day Cream, AF</i> – CLOTRIMAZOLE , clotrimazole 2% (20 mg/g) cream, 20 g |
| 4233T | <i>Finasteride AN, EA</i> – FINASTERIDE , finasteride 5 mg tablet, 30 |
| 4233T | <i>Finide, AL</i> – FINASTERIDE , finasteride 5 mg tablet, 30 |
| 4592Q | <i>Gabapentin GH, GQ</i> – GABAPENTIN , gabapentin 300 mg capsule, 100 |
| 4593R | <i>Gabapentin GH, GQ</i> – GABAPENTIN , gabapentin 400 mg capsule, 100 |
| 4594T | <i>Gabapentin AN, EA</i> – GABAPENTIN , gabapentin 600 mg tablet, 100 |
| 4595W | <i>Gabapentin AN, EA</i> – GABAPENTIN , gabapentin 800 mg tablet, 100 |
| 4444X | <i>Risedronate AN, EA</i> – RISEDRONATE , risedronate sodium 35 mg tablet, 4 |
| 4473K | <i>Pharmacy Action Pharmsil, GQ</i> – TERBINAFINE , terbinafine hydrochloride 1% cream, 15 g |

Addition – Equivalence Indicator

| | |
|-------|--|
| 4010C | <i>Aporyl, TX</i> – AMOROLFINE , amorolfine 5% application, 5 mL |
| 4010C | <i>Loceryl, GA</i> – AMOROLFINE , amorolfine 5% application, 5 mL |
| 4473K | <i>Lamisil, NC</i> – TERBINAFINE , terbinafine hydrochloride 1% cream, 15 g |

Deletions

Deletion – Item

| | |
|--------|--|
| 10031Y | ALPROSTADIL , alprostadil 10 microgram injection [1 x 10 microgram vial] (&) inert substance diluent [1 syringe], 1 pack (<i>Caverject</i>) |
| 10030X | ALPROSTADIL , alprostadil 20 microgram injection [1 x 20 microgram vial] (&) inert substance diluent [1 syringe], 1 pack (<i>Caverject</i>) |

Alterations

Alteration – Restriction Level

| | | <i>From</i> | <i>To</i> |
|-------|--|-------------|--------------|
| 4246L | GLYCEROL , glycerol 2.8 g suppository, 12 (<i>Petrus Pharmaceuticals Pty Ltd</i>) | restricted | unrestricted |

Alteration – Number of Repeats

| | | <i>From</i> | <i>To</i> |
|-------|--|-------------|-----------|
| 4246L | GLYCEROL , glycerol 2.8 g suppository, 12 (<i>Petrus Pharmaceuticals Pty Ltd</i>) | 0 | 5 |

General Pharmaceutical Benefits

■ ALGINATE SODIUM + CALCIUM CARBONATE + BICARBONATE

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

alginate sodium 500 mg/10 mL + calcium carbonate 160 mg/10 mL + sodium bicarbonate 267 mg/10 mL oral liquid, 500 mL

| 2014B | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | 2 | 5 | .. | *17.61 | 18.78 | Gaviscon P [RC] |

■ ALUMINIUM HYDROXIDE WITH MAGNESIUM HYDROXIDE

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

ALUMINIUM HYDROXIDE with MAGNESIUM HYDROXIDE Oral suspension 200 mg-200 mg per 5 mL, 500 mL, 1

| 2157M | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | 2 | 5 | .. | *20.23 | 21.40 | Mylanta P [JT] |

■ ASPIRIN

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

aspirin 300 mg tablet: effervescent, 96

| 1010E | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | 1 | 1 | .. | 11.94 | 13.11 | Solprin [RC] |

■ ASPIRIN

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

aspirin 300 mg tablet: effervescent, 96

| 5018D | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| DP | 1 | .. | .. | 11.94 | 13.11 | Solprin [RC] |

■ ASPIRIN

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

aspirin 100 mg tablet, 112

| 8202Q | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | 1 | 1 | .. | 11.68 | 12.85 | Spren 100 [QA] |

■ BISACODYL

Restricted benefit

Constipation

Clinical criteria:

Patient must be paraplegic or quadriplegic or have severe neurogenic impairment of bowel function.

Restricted benefit

Constipation

Clinical criteria:

Patient must be receiving palliative care.

Restricted benefit

Constipation

Clinical criteria:

Patient must be receiving long-term nursing care on account of age, infirmity or other condition in a hospital, nursing home or residential facility.

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

Restricted benefit

Constipation

Clinical criteria:

Patient must be receiving long-term nursing care and in respect of whom a Carer Allowance is payable as a disabled adult.

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

Restricted benefit

Terminal malignant neoplasia

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

Restricted benefit

Anorectal congenital abnormalities

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

Restricted benefit

Megacolon

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

bisacodyl 10 mg suppository, 10

| 1260H | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|-------------------|---------|----------|--|
| NP | 3 | 5 | .. | *23.04 | 24.21 | ^a Petrus Bisacodyl Suppositories [PP] |
| | | | ^B 1.29 | *24.33 | 24.21 | ^a Dulcolax [BY] |

bisacodyl 10 mg suppository, 12

| 1258F | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-------------------------------------|
| NP | 3 | 4 | .. | *20.76 | 21.93 | Petrus Bisacodyl Suppositories [PP] |

■ CEFOTAXIME**Restricted benefit**

Infection where positive bacteriological evidence confirms that this antibiotic is an appropriate therapeutic agent

CEFOTAXIME Powder for injection 2 g, 10

| 1769D | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| DP | 1 | .. | .. | 34.07 | 35.24 | Hospira Pty Limited [HH] |

■ CEFOTAXIME**Note Shared Care Model:**

For prescribing by nurse practitioners where care of a patient is shared between a nurse practitioner and medical practitioner in a formalised arrangement with an agreed management plan. Further information can be found in the Explanatory Notes for Nurse Practitioners.

Restricted benefit

Infection where positive bacteriological evidence confirms that this antibiotic is an appropriate therapeutic agent

Restricted benefit

Septicaemia, suspected

Restricted benefit

Septicaemia, proven

CEFOTAXIME Powder for injection 2 g, 10

| 1759N | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-------------------------------------|
| NP | 1 | .. | .. | 34.07 | 35.24 | Hospira Pty Limited [HH] |
| | 10 | .. | .. | *23.23 | 24.40 | ^a Cefotaxime Sandoz [SZ] |

■ FOLIC ACID**Restricted benefit**

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

folic acid 500 microgram tablet, 100

| 2958Q | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-------------------------------|-------------------------------|
| NP | 2 | .. | .. | *14.71 | 15.88 | ^a Foltabs 500 [PP] | ^a Megafol 0.5 [AF] |

▪ **FOLIC ACID**

Note The 5 mg strength tablet should be used in malabsorption states only.

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

folic acid 5 mg tablet, 100

| 1437P | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | 2 | 1 | .. | *17.03 | 18.20 | Megafol 5 [AF] |

▪ **GLUCOSE AND KETONE INDICATOR URINE**

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

glucose and ketone indicator urine strip: diagnostic, 50 diagnostic strips

| 3106L | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | 2 | 2 | .. | *19.89 | 21.06 | Keto-Diabur- Test 5000 [RD] |

glucose and ketone indicator urine strip: diagnostic, 50 diagnostic strips

| 3107M | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | 2 | 2 | .. | *19.99 | 21.16 | Keto-Diastix [BN] |

▪ **GLUCOSE INDICATOR URINE**

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

glucose indicator urine strip: diagnostic, 50 diagnostic strips

| 3104J | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | 2 | 2 | .. | *22.09 | 23.26 | Diastix [BN] |

▪ **GLYCEROL**

Restricted benefit

Constipation

Clinical criteria:

Patient must be paraplegic or quadriplegic or have severe neurogenic impairment of bowel function.

Restricted benefit

Constipation

Clinical criteria:

Patient must be receiving palliative care.

Restricted benefit

Constipation

Clinical criteria:

Patient must be receiving long-term nursing care on account of age, infirmity or other condition in a hospital, nursing home or residential facility.

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

Restricted benefit

Constipation

Clinical criteria:

Patient must be receiving long-term nursing care and in respect of whom a Carer Allowance is payable as a disabled adult.

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

Restricted benefit

Terminal malignant neoplasia

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

Restricted benefit

Anorectal congenital abnormalities

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

Restricted benefit

Megacolon

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

glycerol 1.4 g suppository, 12

| 2556M | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-------------------------------------|
| NP | 3 | 5 | .. | *23.28 | 24.45 | Petrus Pharmaceuticals Pty Ltd [PP] |

glycerol 2.8 g suppository, 12

| 2557N | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-------------------------------------|
| NP | 3 | 5 | .. | *23.79 | 24.96 | Petrus Pharmaceuticals Pty Ltd [PP] |

glycerol 700 mg suppository, 12

| 2555L | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-------------------------------------|
| NP | 3 | 5 | .. | *22.89 | 24.06 | Petrus Pharmaceuticals Pty Ltd [PP] |

■ HYDROXOCOBALAMIN

Note One injection of hydroxocobalamin 1 mg every three months provides appropriate maintenance therapy in vitamin B12 deficiencies.

Note Pharmaceutical benefits that have the form hydroxocobalamin injection 1 mg (as acetate) in 1 mL and pharmaceutical benefits that have the form hydroxocobalamin injection 1 mg (as chloride) in 1 mL are equivalent for the purposes of substitution.

Restricted benefit

Pernicious anaemia

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

Restricted benefit

Proven vitamin B12 deficiencies other than pernicious anaemia

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

Restricted benefit

Anaemias associated with vitamin B12 deficiency

Clinical criteria:

Patient must have had a gastrectomy, **AND**

The treatment must be for prophylaxis.

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

hydroxocobalamin 1 mg/mL injection, 3 x 1 mL ampoules

| 2162T | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | 1 | .. | .. | 14.69 | 15.86 | ^a Vita-B12 [GH] |

hydroxocobalamin 1 mg/mL injection, 3 x 1 mL ampoules

| 9048F | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-----------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | 1 | .. | .. | 14.69 | 15.86 | ^a Neo-B12 [HH] |

■ OLANZAPINE

Note Shared Care Model:

For prescribing by nurse practitioners where care of a patient is shared between a nurse practitioner and medical practitioner in a formalised arrangement with an agreed management plan. Further information can be found in the Explanatory Notes for Nurse Practitioners.

Note Pharmaceutical benefits that have the form olanzapine tablet 2.5 mg and pharmaceutical benefits that have the form olanzapine tablet 2.5 mg (as benzoate) are equivalent for the purposes of substitution.

Note Pharmaceutical benefits that have the form olanzapine tablet 5 mg and pharmaceutical benefits that have the form olanzapine tablet 5 mg (as benzoate) are equivalent for the purposes of substitution.

Note Pharmaceutical benefits that have the form olanzapine tablet 7.5 mg and pharmaceutical benefits that have the form olanzapine tablet 7.5 mg (as benzoate) are equivalent for the purposes of substitution.

Note Pharmaceutical benefits that have the form olanzapine tablet 10 mg and pharmaceutical benefits that have the form olanzapine tablet 10 mg (as benzoate) are equivalent for the purposes of substitution.

Note Pharmaceutical benefits that have the form olanzapine tablet 5 mg (orally disintegrating) and pharmaceutical benefits that have the form olanzapine wafer 5 mg are equivalent for the purposes of substitution.

Note Pharmaceutical benefits that have the form olanzapine tablet 10 mg (orally disintegrating) and pharmaceutical benefits that have the form olanzapine wafer 10 mg are equivalent for the purposes of substitution.

Note Pharmaceutical benefits that have the form olanzapine tablet 15 mg (orally disintegrating) and pharmaceutical benefits that have the form olanzapine wafer 15 mg are equivalent for the purposes of substitution.

Note Pharmaceutical benefits that have the form olanzapine tablet 20 mg (orally disintegrating) and pharmaceutical benefits that have the form olanzapine wafer 20 mg are equivalent for the purposes of substitution.

Authority required (STREAMLINED)

5856

Schizophrenia

Authority required (STREAMLINED)

5869

Bipolar I disorder

Clinical criteria:

The treatment must be maintenance therapy.

OLANZAPINE Tablet 10 mg (orally disintegrating), 28

| 3382B | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|--|--|
| NP | 1 | 5 | .. | 37.53 | 38.30 | ^a APO-Olanzapine ODT [TX] ^a Olanzapine AN ODT [EA] ^a Olanzapine ODT-DRLA [RZ] ^a Olanzapine RBX ODT [RA] ^a Ozin ODT 10 [DO] ^a Terry White Chemists Olanzapine ODT [TW] | ^a Chem mart Olanzapine ODT [CH] ^a Olanzapine-GA ODT [ED] ^a Olanzapine ODT generichealth 10 [GQ] ^a Olanzapine Sandoz ODT 10 [SZ] ^a Pharmacy Choice Olanzapine ODT [RI] |

OLANZAPINE Tablet 5 mg (orally disintegrating), 28

| 3381Y | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|--|
| NP | 1 | 5 | .. | 23.84 | 25.01 | ^a APO-Olanzapine ODT [TX] ^a Olanzapine AN ODT [EA] ^a Olanzapine ODT-DRLA [RZ] ^a Olanzapine RBX ODT [RA] ^a Ozin ODT 5 [DO] ^a Terry White Chemists Olanzapine ODT [TW] | ^a Chem mart Olanzapine ODT [CH] ^a Olanzapine-GA ODT [ED] ^a Olanzapine ODT generichealth 5 [GQ] ^a Olanzapine Sandoz ODT 5 [SZ] ^a Pharmacy Choice Olanzapine ODT [RI] |

olanzapine 10 mg tablet, 28

| 1042W | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|
| NP | 1 | 5 | .. | 37.53 | 38.30 | ^a Olanzapine generichealth 10 [GQ] |

olanzapine 10 mg tablet, 28

| 8187X | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|--|---|
| NP | 1 | 5 | .. | 37.53 | 38.30 | ^a APO-Olanzapine [TX] ^a Lanzek [EL] ^a Olanzapine-DRLA [RZ] ^a Olanzapine GH [GQ] ^a Olanzapine Sandoz [SZ] ^a Pharmacor Olanzapine 10 [CR] ^a Terry White Chemists Olanzapine [TW] ^a Zyprexa [LY] | ^a Chem mart Olanzapine [CH] ^a Olanzapine AN [EA] ^a Olanzapine-GA [ED] ^a Olanzapine RBX [RA] ^a Ozin 10 [DO] ^a Pharmacy Choice Olanzapine [RI] ^a Zypine [AF] |

olanzapine 10 mg wafer, 28

| 8434X | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|------------------------------|
| NP | 1 | 5 | .. | 37.53 | 38.30 | ^a Lanzek Zydis [EL] ^a Zyprexa Zydis [LY] | ^a Zypine ODT [AF] |

olanzapine 15 mg tablet, 28

| 3384D | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|--|---|
| NP | 1 | 5 | .. | 51.07 | 38.30 | ^a APO-Olanzapine ODT [TX] ^a Olanzapine AN ODT [EA] ^a Ozin ODT 15 [DO] | ^a Chem mart Olanzapine ODT [CH] ^a Olanzapine Sandoz ODT 15 [SZ] ^a Terry White Chemists Olanzapine ODT [TW] |

olanzapine 15 mg wafer, 28

| 8952E | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|------------------------------|---------------------------------|
| NP | 1 | 5 | .. | 51.07 | 38.30 | ^a Zypine ODT [AF] | ^a Zyprexa Zydis [LY] |

olanzapine 2.5 mg tablet, 28

| 1024X | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|--|
| NP | 1 | 5 | .. | 17.19 | 18.36 | ^a Olanzapine generichealth 2.5 [GQ] |

olanzapine 2.5 mg tablet, 28

| 8170B | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|---|
| NP | 1 | 5 | .. | 17.19 | 18.36 | ^a APO-Olanzapine [TX] ^a Lanzek [EL] ^a Olanzapine-DRLA [RZ] ^a Olanzapine RBX [RA] ^a Ozin 2.5 [DO] ^a Pharmacy Choice Olanzapine [RI] ^a Zypine [AF] | ^a Chem mart Olanzapine [CH] ^a Olanzapine AN [EA] ^a Olanzapine-GA [ED] ^a Olanzapine Sandoz [SZ] ^a Pharmacor Olanzapine 2.5 [CR] ^a Terry White Chemists Olanzapine [TW] ^a Zyprexa [LY] |

olanzapine 20 mg tablet, 28

| 3385E | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|--|---|
| NP | 1 | 5 | .. | 64.63 | 38.30 | ^a APO-Olanzapine ODT [TX] ^a Olanzapine AN ODT [EA] ^a Ozin ODT 20 [DO] | ^a Chem mart Olanzapine ODT [CH] ^a Olanzapine Sandoz ODT 20 [SZ] ^a Terry White Chemists Olanzapine ODT [TW] |

olanzapine 20 mg wafer, 28

| 8953F | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|------------------------------|---------------------------------|
| NP | 1 | 5 | .. | 64.63 | 38.30 | ^a Zypine ODT [AF] | ^a Zyprexa Zydis [LY] |

olanzapine 5 mg tablet, 28

| 1037N | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|--|
| NP | 1 | 5 | .. | 23.84 | 25.01 | ^a Olanzapine generichealth 5 [GQ] |

olanzapine 5 mg tablet, 28

| 8185T | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|--|
| NP | 1 | 5 | .. | 23.84 | 25.01 | ^a APO-Olanzapine [TX] ^a Lanzek [EL] ^a Olanzapine-DRLA [RZ] ^a Olanzapine GH [GQ] ^a Olanzapine Sandoz [SZ] ^a Pharmacor Olanzapine 5 [CR] ^a Terry White Chemists Olanzapine [TW] ^a Zyprexa [LY] | ^a Chem mart Olanzapine [CH] ^a Olanzapine AN [EA] ^a Olanzapine-GA [ED] ^a Olanzapine RBX [RA] ^a Ozin 5 [DO] ^a Pharmacy Choice Olanzapine [RI] ^a Zypine [AF] |

olanzapine 5 mg wafer, 28

| 8433W | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|------------------------------|
| NP | 1 | 5 | .. | 23.84 | 25.01 | ^a Lanzek Zydis [EL] ^a Zyprexa Zydis [LY] | ^a Zypine ODT [AF] |

olanzapine 7.5 mg tablet, 28

| 1041T | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|--|
| NP | 1 | 5 | .. | 30.75 | 31.92 | ^a Olanzapine generichealth 7.5 [GQ] |

olanzapine 7.5 mg tablet, 28

| 8186W | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|--|
| NP | 1 | 5 | .. | 30.75 | 31.92 | ^a APO-Olanzapine [TX] ^a Lanzek [EL] ^a Olanzapine-DRLA [RZ] ^a Olanzapine GH [GQ] ^a Olanzapine Sandoz [SZ] ^a Pharmacor Olanzapine 7.5 [CR] ^a Terry White Chemists Olanzapine [TW] ^a Zyprexa [LY] | ^a Chem mart Olanzapine [CH] ^a Olanzapine AN [EA] ^a Olanzapine-GA [ED] ^a Olanzapine RBX [RA] ^a Ozin 7.5 [DO] ^a Pharmacy Choice Olanzapine [RI] ^a Zypine [AF] |

PARACETAMOL

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

paracetamol 120 mg/5 mL oral liquid, 100 mL

| 1747Y | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | ±1 | 2 | .. | 12.99 | 14.16 | Panamax [SW] |

paracetamol 240 mg/5 mL oral liquid, 200 mL

| 1770E | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|-----------------------------|
| NP | ±1 | 2 | .. | 14.12 | 15.29 | Panamax 240 Elixir [SW] |

paracetamol 500 mg tablet, 100

| 1746X | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|---|
| NP | 1 | 1 | .. | 12.07 | 13.24 | ^a APO-Paracetamol [TX] ^a Generic Health Pty Ltd [GQ] ^a Paracetamol (Sandoz) [SZ] ^a Parapane [AF] | ^a Febridol [EA] ^a Panamax [SW] ^a Paralgin [FM] |

PARACETAMOL

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

paracetamol 120 mg/5 mL oral liquid, 100 mL

| 3348F | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|-----------------------------|
| DP | ±1 | .. | .. | 12.99 | 14.16 | Panamax [SW] |

paracetamol 240 mg/5 mL oral liquid, 200 mL

| 3349G | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|-----------------------------|
| DP | ±1 | .. | .. | 14.12 | 15.29 | Panamax 240 Elixir [SW] |

paracetamol 500 mg tablet, 100

| 5196L | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|---|
| DP | 1 | .. | .. | 12.07 | 13.24 | ^a APO-Paracetamol [TX] ^a Generic Health Pty Ltd [GQ] ^a Paracetamol (Sandoz) [SZ] ^a Parapane [AF] | ^a Febridol [EA] ^a Panamax [SW] ^a Paralgin [FM] |

PARACETAMOL

Restricted benefit

Persistent pain

Clinical criteria:

The condition must be associated with osteoarthritis.

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

paracetamol 665 mg tablet: modified release, 96 tablets

| 8814X | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|-------------------------------|
| NP | 2 | 5 | .. | *17.89 | 19.06 | Osteomol 665 Paracetamol [CR] |

PARACETAMOL

Restricted benefit

Chronic arthropathies

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

paracetamol 500 mg tablet, 100

| 5224Y | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|---|
| DP | 3 | .. | .. | *15.36 | 16.53 | ^a APO-Paracetamol [TX] ^a Generic Health Pty Ltd [GQ] ^a Paracetamol (Sandoz) [SZ] ^a Parapane [AF] | ^a Febridol [EA] ^a Panamax [SW] ^a Paralgin [FM] |

PARACETAMOL

Restricted benefit

Chronic arthropathies

Population criteria:

Patient must identify as Aboriginal or Torres Strait Islander.

paracetamol 500 mg tablet, 100

| 8784H | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|---|---|
| NP | 3 | 4 | .. | *15.36 | 16.53 | ^a APO-Paracetamol [TX] ^a Generic Health Pty Ltd [GQ] ^a Paracetamol (Sandoz) [SZ] ^a Parapane [AF] | ^a Febridol [EA] ^a Panamax [SW] ^a Paralgin [FM] |

▪ **SODIUM CHLORIDE + POTASSIUM CHLORIDE + GLUCOSE MONOHYDRATE + CITRATE**

Note Each sachet contains sodium chloride 470 mg, potassium chloride 300 mg, sodium acid citrate 530 mg and glucose 3.56 g.

Restricted benefit

For treatment of a patient identifying as Aboriginal or Torres Strait Islander

sodium chloride 470 mg + potassium chloride 300 mg + glucose monohydrate 3.56 g + sodium acid citrate 530 mg oral liquid: powder for, 10 x 4.9 g sachets

| 3196F | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|--|----------------------------------|
| NP | ‡1 | .. | .. | 16.06 | 17.23 | ^a Repalyte New Formulation [SW] | ^a restore O.R.S. [EA] |

Highly Specialised Drugs Program (Private Hospital)

▪ RITUXIMAB

Note Risk of end-organ damage or mortality includes a minimum of one of the following:

Glomerulonephritis with risk of progression

Risk to sight including scleritis/episcleritis, sudden visual loss, uveitis, retinal changes (vasculitis/thrombosis/exudates/haemorrhage)

Bronchial/subglottic obstruction

Pulmonary haemorrhage

Parenchymal lung disease

Sensory neural hearing loss

Recurrent sinonasal disease requiring recurrent surgical interventions

Meningitis, organic confusion, seizures, stroke, cord lesion, cranial nerve palsy, sensory peripheral neuropathy, motor mononeuritis multiplex

Note Patients could be considered contraindicated, refractory, or unable to tolerate cyclophosphamide for one of the following reasons:

Cyclophosphamide is contraindicated as per the TGA approved Product Information;

Cyclophosphamide is not recommended due to the need to preserve gonad function;

Patient experiences severe toxicity to cyclophosphamide that warrants cessation of treatment;

Patient has life- or organ-threatening deterioration at any time during treatment with cyclophosphamide, where the deterioration is thought to be due to severe uncontrolled active vasculitis;

Commencing a further treatment cycle with cyclophosphamide would exceed the maximum cumulative dose of cyclophosphamide of 25g; or

Patient's condition with this indication is persistent despite at least 3 months therapy with cyclophosphamide.

Note Any queries concerning the arrangements to prescribe may be directed to the Department of Human Services on 1800 700 270 (hours of operation 8 a.m. to 5 p.m. EST Monday to Friday).

Prescribing information (including Authority Application forms and other relevant documentation as applicable) is available on the Department of Human Services website at www.humanservices.gov.au

Applications for authority to prescribe should be forwarded to:

Department of Human Services

Prior Written Approval of Complex Drugs

Reply Paid 9826

HOBART TAS 7001

Note At the time of authority application, medical practitioners must request the appropriate number of vials to provide sufficient drug for four weeks of treatment.

Authority required

Severe active granulomatosis with polyangiitis (Wegeners granulomatosis)

Treatment Phase: Induction of remission

Clinical criteria:

The treatment must be for the induction of remission, **AND**

Patient must not have previously received this drug for this condition; OR

Patient must have received this drug for this condition prior to 1 January 2016, **AND**

The treatment must in combination with glucocorticoids, **AND**

Patient must be at risk of end-organ damage or mortality, **AND**

Patient must be contraindicated, refractory or unable to tolerate cyclophosphamide.

Diagnosis should be made according to the Chapel Hill Consensus Conference Nomenclature of the Vasculitides with anti-neutrophil cytoplasmic antibody (ANCA) positive serology.

This drug is not PBS-subsidised for maintenance of remission

Authority required

Severe active microscopic polyangiitis

Treatment Phase: Induction of remission

Clinical criteria:

The treatment must be for the induction of remission, **AND**

Patient must not have previously received this drug for this condition; OR

Patient must have received this drug for this condition prior to 1 January 2016, **AND**

The treatment must in combination with glucocorticoids, **AND**

Patient must be at risk of end-organ damage or mortality, **AND**
 Patient must be contraindicated, refractory or unable to tolerate cyclophosphamide.
 Diagnosis should be made according to the Chapel Hill Consensus Conference Nomenclature of the Vasculitides with anti-neutrophil cytoplasmic antibody (ANCA) positive serology.
 This drug is not PBS-subsidised for maintenance therapy.

Authority required

Severe active granulomatosis with polyangiitis (Wegeners granulomatosis)

Treatment Phase: Re-induction of remission

Clinical criteria:

The treatment must be for the re-induction of remission, **AND**
 Patient must have previously received and responded to this drug for this condition, **AND**
 The treatment must in combination with glucocorticoids, **AND**
 Patient must be at risk of end-organ damage or mortality, **AND**
 Patient must be contraindicated, refractory or unable to tolerate cyclophosphamide.
 Diagnosis should be made according to the Chapel Hill Consensus Conference Nomenclature of the Vasculitides with anti-neutrophil cytoplasmic antibody (ANCA) positive serology.
 This drug is not PBS-subsidised for maintenance of remission

Authority required

Severe active microscopic polyangiitis

Treatment Phase: Re-induction of remission

Clinical criteria:

The treatment must be for the re-induction of remission, **AND**
 Patient must have previously received and responded to this drug for this condition, **AND**
 The treatment must in combination with glucocorticoids, **AND**
 Patient must be at risk of end-organ damage or mortality, **AND**
 Patient must be contraindicated, refractory or unable to tolerate cyclophosphamide.
 Diagnosis should be made according to the Chapel Hill Consensus Conference Nomenclature of the Vasculitides with anti-neutrophil cytoplasmic antibody (ANCA) positive serology.
 This drug is not PBS-subsidised for maintenance therapy.

rituximab 100 mg/10 mL injection, 2 x 10 mL vials

| 10583B | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|-----------------------------|
| | 1 | .. | .. | 852.63 | Mabthera [RO] |

rituximab 500 mg/50 mL injection, 1 x 50 mL vial

| 10576P | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|-----------------------------|
| | 1 | .. | .. | 2079.84 | Mabthera [RO] |

Highly Specialised Drugs Program (Public Hospital)

▪ RITUXIMAB

Note Risk of end-organ damage or mortality includes a minimum of one of the following:

Glomerulonephritis with risk of progression

Risk to sight including scleritis/episcleritis, sudden visual loss, uveitis, retinal changes (vasculitis/thrombosis/exudates/haemorrhage)

Bronchial/subglottic obstruction

Pulmonary haemorrhage

Parenchymal lung disease

Sensory neural hearing loss

Recurrent sinonasal disease requiring recurrent surgical interventions

Meningitis, organic confusion, seizures, stroke, cord lesion, cranial nerve palsy, sensory peripheral neuropathy, motor mononeuritis multiplex

Note Patients could be considered contraindicated, refractory, or unable to tolerate cyclophosphamide for one of the following reasons:

Cyclophosphamide is contraindicated as per the TGA approved Product Information;

Cyclophosphamide is not recommended due to the need to preserve gonad function;

Patient experiences severe toxicity to cyclophosphamide that warrants cessation of treatment;

Patient has life- or organ-threatening deterioration at any time during treatment with cyclophosphamide, where the deterioration is thought to be due to severe uncontrolled active vasculitis;

Commencing a further treatment cycle with cyclophosphamide would exceed the maximum cumulative dose of cyclophosphamide of 25g; or

Patient's condition with this indication is persistent despite at least 3 months therapy with cyclophosphamide.

Note Any queries concerning the arrangements to prescribe may be directed to the Department of Human Services on 1800 700 270 (hours of operation 8 a.m. to 5 p.m. EST Monday to Friday).

Prescribing information (including Authority Application forms and other relevant documentation as applicable) is available on the Department of Human Services website at www.humanservices.gov.au

Applications for authority to prescribe should be forwarded to:

Department of Human Services

Prior Written Approval of Complex Drugs

Reply Paid 9826

HOBART TAS 7001

Note At the time of authority application, medical practitioners must request the appropriate number of vials to provide sufficient drug for four weeks of treatment.

Authority required

Severe active granulomatosis with polyangiitis (Wegeners granulomatosis)

Treatment Phase: Induction of remission

Clinical criteria:

The treatment must be for the induction of remission, **AND**

Patient must not have previously received this drug for this condition; OR

Patient must have received this drug for this condition prior to 1 January 2016, **AND**

The treatment must in combination with glucocorticoids, **AND**

Patient must be at risk of end-organ damage or mortality, **AND**

Patient must be contraindicated, refractory or unable to tolerate cyclophosphamide.

Diagnosis should be made according to the Chapel Hill Consensus Conference Nomenclature of the Vasculitides with anti-neutrophil cytoplasmic antibody (ANCA) positive serology.

This drug is not PBS-subsidised for maintenance of remission

Authority required

Severe active microscopic polyangiitis

Treatment Phase: Induction of remission

Clinical criteria:

The treatment must be for the induction of remission, **AND**

Patient must not have previously received this drug for this condition; OR

Patient must have received this drug for this condition prior to 1 January 2016, **AND**

The treatment must in combination with glucocorticoids, **AND**

Patient must be at risk of end-organ damage or mortality, **AND**
 Patient must be contraindicated, refractory or unable to tolerate cyclophosphamide.
 Diagnosis should be made according to the Chapel Hill Consensus Conference Nomenclature of the Vasculitides with anti-neutrophil cytoplasmic antibody (ANCA) positive serology.
 This drug is not PBS-subsidised for maintenance therapy.

Authority required

Severe active granulomatosis with polyangiitis (Wegeners granulomatosis)

Treatment Phase: Re-induction of remission

Clinical criteria:

The treatment must be for the re-induction of remission, **AND**
 Patient must have previously received and responded to this drug for this condition, **AND**
 The treatment must in combination with glucocorticoids, **AND**
 Patient must be at risk of end-organ damage or mortality, **AND**
 Patient must be contraindicated, refractory or unable to tolerate cyclophosphamide.
 Diagnosis should be made according to the Chapel Hill Consensus Conference Nomenclature of the Vasculitides with anti-neutrophil cytoplasmic antibody (ANCA) positive serology.
 This drug is not PBS-subsidised for maintenance of remission

Authority required

Severe active microscopic polyangiitis

Treatment Phase: Re-induction of remission

Clinical criteria:

The treatment must be for the re-induction of remission, **AND**
 Patient must have previously received and responded to this drug for this condition, **AND**
 The treatment must in combination with glucocorticoids, **AND**
 Patient must be at risk of end-organ damage or mortality, **AND**
 Patient must be contraindicated, refractory or unable to tolerate cyclophosphamide.
 Diagnosis should be made according to the Chapel Hill Consensus Conference Nomenclature of the Vasculitides with anti-neutrophil cytoplasmic antibody (ANCA) positive serology.
 This drug is not PBS-subsidised for maintenance therapy.

rituximab 100 mg/10 mL injection, 2 x 10 mL vials

| 10591K | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|-----------------------------|
| | 1 | .. | .. | 813.17 | Mabthera [RO] |

rituximab 500 mg/50 mL injection, 1 x 50 mL vial

| 10593M | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|-----------------------------|
| | 1 | .. | .. | 2032.91 | Mabthera [RO] |

Repatriation Pharmaceutical Benefits Scheme

▪ ALPROSTADIL

Authority required

Erectile dysfunction

Clinical criteria:

The condition must be vasculogenic; OR

The condition must be psychogenic; OR

The condition must be neurogenic, **AND**

Patient must have a specific accepted war-caused or service-related disability.

Population criteria:

Patient must be male.

Authorisation will not be given for any additional prescriptions within 6 months or for any increased quantities or repeats.

alprostadil 10 microgram injection [2 x 10 microgram syringes] (&) inert substance diluent [2 x 0.6 mL syringes], 1 pack

| 4579B | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|-----------------------------|
| | 3 | 3 | .. | *100.47 | 6.20 | Caverject Impulse [PF] |

alprostadil 20 microgram injection [2 x 20 microgram syringes] (&) inert substance diluent [2 x 0.6 mL syringes], 1 pack

| 4580C | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|-----------------------------|
| | 3 | 3 | .. | *125.31 | 6.20 | Caverject Impulse [PF] |

▪ ASPIRIN

aspirin 100 mg tablet, 112

| 10590J | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-----------------------------|
| | 1 | 1 | .. | 11.68 | 6.20 | Spren 100 [QA] |

▪ BISACODYL

bisacodyl 10 mg suppository, 10

| 10578R | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|--|
| | 3 | 5 | .. | *23.04 | 6.20 | ^a Petrus Bisacodyl Suppositories [PP] |
| | | | .. | *24.33 | 6.20 | ^a Dulcolax [BY] |

bisacodyl 10 mg suppository, 12

| 10580W | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-------------------------------------|
| | 3 | 4 | .. | *20.76 | 6.20 | Petrus Bisacodyl Suppositories [PP] |

▪ FERROUS FUMARATE

ferrous fumarate 200 mg (equivalent to 65.7 mg of elemental iron) tablet, 60

| 10594N | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-----------------------------|
| | 1 | 1 | .. | 14.94 | 6.20 | Ferro-tab [AE] |

▪ FERROUS FUMARATE + FOLIC ACID

ferrous fumarate 310 mg (equivalent to 100 mg elemental iron) + folic acid 350 microgram tablet, 60

| 10579T | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-----------------------------|
| | 1 | 1 | .. | 15.96 | 6.20 | Ferro-f-tab [AE] |

▪ **FOLIC ACID**

folic acid 500 microgram tablet, 100

| 10584C | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-------------------------------|-------------------------------|
| | 2 | .. | .. | *14.71 | 6.20 | ^a Foltabs 500 [PP] | ^a Megafol 0.5 [AF] |

▪ **FOLIC ACID**

Note The 5 mg strength tablet should be used in malabsorption states only.

folic acid 5 mg tablet, 100

| 10573L | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-----------------------------|
| | 2 | 1 | .. | *17.03 | 6.20 | Megafol 5 [AF] |

▪ **GLYCEROL**

glycerol 1.4 g suppository, 12

| 10596Q | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-------------------------------------|
| | 3 | 5 | .. | *23.28 | 6.20 | Petrus Pharmaceuticals Pty Ltd [PP] |

glycerol 2.8 g suppository, 12

| 4246L | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|-------|---------------|-------------|------------|---------|----------|-------------------------------------|
| | 3 | 5 | .. | *23.79 | 6.20 | Petrus Pharmaceuticals Pty Ltd [PP] |

glycerol 700 mg suppository, 12

| 10586E | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-------------------------------------|
| | 3 | 5 | .. | *22.89 | 6.20 | Petrus Pharmaceuticals Pty Ltd [PP] |

▪ **HYDROXOCOBALAMIN**

Note One injection of hydroxocobalamin 1 mg every three months provides appropriate maintenance therapy in vitamin B12 deficiencies.

Note Pharmaceutical benefits that have the form hydroxocobalamin injection 1 mg (as acetate) in 1 mL and pharmaceutical benefits that have the form hydroxocobalamin injection 1 mg (as chloride) in 1 mL are equivalent for the purposes of substitution.

Restricted benefit

Pernicious anaemia

Restricted benefit

Proven vitamin B12 deficiencies other than pernicious anaemia

Restricted benefit

Anaemias associated with vitamin B12 deficiency

Clinical criteria:

Patient must have had a gastrectomy, **AND**

The treatment must be for prophylaxis.

hydroxocobalamin 1 mg/mL injection, 3 x 1 mL ampoules

| 10577Q | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-----------------------------|
| | 1 | .. | .. | 14.69 | 6.20 | ^a Vita-B12 [GH] |

hydroxocobalamin 1 mg/mL injection, 3 x 1 mL ampoules

| 10587F | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-----------------------------|
| | 1 | .. | .. | 14.69 | 6.20 | ^a Neo-B12 [HH] |

▪ **LOPERAMIDE**

loperamide hydrochloride 2 mg capsule, 12

| 10592L | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-----------------------------|
| | 1 | .. | .. | 11.91 | 6.20 | Gastrex [CR] |

▪ **PARACETAMOL**

paracetamol 240 mg/5 mL oral liquid, 200 mL

| 10599W | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-----------------------------|
| | ‡1 | 2 | .. | 14.12 | 6.20 | Panamax 240 Elixir [SW] |

paracetamol 500 mg tablet, 100

| 10582Y | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|---|---|
| | 1 | 1 | .. | 12.07 | 6.20 | ^a APO-Paracetamol [TX] ^a Generic Health Pty Ltd [GQ] ^a Paracetamol (Sandoz) [SZ] ^a Parapane [AF] | ^a Febridol [EA] ^a Panamax [SW] ^a Paralgin [FM] |

■ PARACETAMOL**Restricted benefit**

Persistent pain

Clinical criteria:

The condition must be associated with osteoarthritis.

paracetamol 665 mg tablet: modified release, 96 tablets

| 10598T | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-------------------------------|
| | 2 | 5 | .. | *17.89 | 6.20 | Osteomol 665 Paracetamol [CR] |

■ PARACETAMOL**Restricted benefit**

Chronic arthropathies

paracetamol 500 mg tablet, 100

| 10585D | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|---|---|
| | 3 | 4 | .. | *15.36 | 6.20 | ^a APO-Paracetamol [TX] ^a Generic Health Pty Ltd [GQ] ^a Paracetamol (Sandoz) [SZ] ^a Parapane [AF] | ^a Febridol [EA] ^a Panamax [SW] ^a Paralgin [FM] |

■ SODIUM CHLORIDE + POTASSIUM CHLORIDE + GLUCOSE MONOHYDRATE + CITRATE**sodium chloride 470 mg + potassium chloride 300 mg + glucose monohydrate 3.56 g + sodium acid citrate 530 mg oral liquid: powder for, 10 x 4.9 g sachets**

| 10574M | Max.Qty Packs | No. of Rpts | Premium \$ | DPMQ \$ | MRVSN \$ | Brand Name and Manufacturer |
|--------|---------------|-------------|------------|---------|----------|-----------------------------|
| | ‡1 | .. | .. | 16.06 | 6.20 | restore O.R.S. [EA] |