



HOSPITAL PONTIAN



KEMENTERIAN KESIHATAN MALAYSIA

**FORMULARI (UBAT)
HOSPITAL PONTIAN
2024**

Dijaga dan dipantau oleh: Unit Farmasi, Hospital Pontian

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INDEX

A

Acetylcysteine 200mg/ml Inj
Acetylsalicylic Acid 100 mg, Glycine 45 mg Tablet
Acetylsalicylic Acid, Soluble 300 mg Tablet
Acriflavine 0.1% Lotion
Acyclovir 800 mg Tablet
Acyclovir 250 mg Injection
Adenosine 3 mg/ml Injection
Adrenaline Acid (Epinephrine) Tartrate 1 mg/ml Injection
Albendazole 200 mg Tablet
Albendazole 200 mg/5 ml Suspension
Alcohol 70% Solution
Alcohol 96% Solution, Internal
Alcohol 96% Solution, External
Alendronate Sodium 70 mg Tablet
Alfacalcidol 0.25 mcg Capsule
Alfacalcidol 1 mcg Capsule
Alfacalcidol 2 mcg/ml Injection
Alfacalcidol 2 mcg/ml Drops
Allopurinol 100 mg Tablet
Allopurinol 300 mg Tablet
Amiloride HCl 5 mg & Hydrochlorothiazide 50 mg Tablet
Amitriptyline 25mg tablet
Aminophylline 25 mg / ml Injection
Amiodarone 150mg/3 ml Injection
Amiodarone 200 mg Tablet
Amlodipine 5mg Tablet
Amlodipine 10 mg Tablet
Amoxicillin & Clavulanic Acid 1.2 g Injection
Amoxicillin & Clavulanic Acid 625 mg Tablet
Amoxicillin & Clavulanate 228mg/5ml syrup
Amoxicillin 250 mg Capsule
Amoxicillin 500 mg Capsule
Amoxicillin Trihydrate 125mg/5ml Syrup
Ampicillin & Sulbactam 1.5 g Injection
Ampicillin & Sulbactam 375 mg Tablet
Ampicillin Sodium 500 mg Injection
Anti RhD Immunoglobulin 300 mcg / 2 ml Injection
Antivenene Serum (Sea snake) 1000 units/26.3ml Injection
Aqueous Cream
Artemether 20mg + Lumefantrine 120mg Tablet
Artesunate 60mg injection

Ascorbic Acid 100 mg Tablet
Atenolol 100 mg Tablet
Atorvastatin 20 mg Tablet
Atorvastatin 40 mg Tablet
Atorvastatin 80 mg Tablet
Atropine Sulphate 1mg/ml Injection
Azathioprine 50 mg Tablet
Azithromycin 200 mg/5 ml Granules
Azithromycin 250 mg Tablet

B

Baclofen 10 mg Tablet
BCG.Freeze-dried Vaccine Injection
Benzhexol 2 mg Tablet
Benzyl Benzoate 25 % Emulsion (Adult)
Benzylpenicillin 5 mega units (3 g) Injection
Benzydamine HCl 0.15% Solution
Betamethasone 17-Valerate 1:10 Cream
Betamethasone 17-Valerate 0.025% Cream (1:4)
Bisacodyl 10 mg Suppository
Bisacodyl 5 mg Tablet
Bisoprolol Fumarate 2.5 mg Tablet
Bisoprolol Fumarate 5 mg Tablet
Bromhexine HCl 4 mg/5 ml Elixir
Bromhexine HCl 8 mg Tablet
Budesonide 1 mg/ 2 ml Nebulising Solution
Budesonide 160 mcg and Formoterol 4.5 mcg Inhalation
Budesonide 200 mcg/dose Inhalation
Budesonide 64mcg Nasal Spray

C

Calamine Cream
Calamine Lotion
Calcitriol 0.25 mcg Capsule
Calcium Carbonate 500 mg Tablet
Calcium Gluconate 10% Injection
Calcium Lactate 300mg Tablet
Calcium Polystyrene Sulphonate Powder
Captopril 25 mg Tablet
Carbamazepine 200 mg CR Tablet
Carbamazepine 200 mg Tablet
Carbimazole 5 mg Tablet
Carboprost Tromethamine 250mcg Inj
Cefazolin Sodium 1g Injection
Cefepime 1 g Injection

Ceftazidime 1g Injection
 Ceftriaxone 1g Injection
 Cefuroxime Axetil 125 mg Tablet
 Cefuroxime Axetil 125 mg/5 ml Suspension
 Cefuroxime Sodium 750 mg Injection
 Celecoxib 200 mg Capsule
 Cephalexin Monohydrate 250 mg Capsule
 Charcoal, Activated 250 mg Tablet
 Charcoal, Activated 50 g Granules
 Chloramphenicol 0.5% Eye Drops
 Chloramphenicol 1% Eye Ointment
 Chloramphenicol 5% w/v Ear Drops
 Chlorhexidine Gluconate 0.2 % Mouthwash
 Chlorhexidine Gluconate 0.5% in Industrial Methylated Spirit 70%
 Chlorhexidine Gluconate 2% in Alcohol 70%
 Chlorhexidine Gluconate 1% cream
 Chlorhexidine Gluconate 5 % Solution
 Chlorpheniramine Maleate 10 mg/ml Injection
 Chlorpheniramine Maleate 2 mg/5ml Syrup
 Chlorpheniramine Maleate 4 mg Tablet
 Chlorpromazine HCl 100 mg Tablet
 Ciclosporin 25 mg Capsule
 Cinnarizine 25 mg Tablet
 Ciprofloxacin 500mg Tablet
 Clomiphene Citrate 50mg Tablet
 Clonazepam 2 mg Tablet
 Clopidogrel 75mg tablet
 Clotrimazole 500mg vaginal tablet
 Cloxacillin Sodium 125 mg/5 ml Suspension
 Cloxacillin Sodium 250 mg Capsule
 Cloxacillin Sodium 500 mg Capsule
 Cloxacillin Sodium 500 mg Injection
 Colchicine 0.5 mg Tablet
 Conjugated Estrogens 0.3 mg Tablet
 Conjugated Estrogens 0.625 mg Tablet
 Conjugated Estrogens 0.625mg/g Cream
 Cyanocobalamin 1 mg Injection

D

Dexamethasone Sodium Phosphate 8 mg/2 ml Injection
 Dexamethasone 4mg Tablet
 Dextrose 5 % Injection, 500 ml
 Dextrose 10 % Injection, 500 ml
 Dextrose 50 % Injection
 Dextrose Powder
 Diazepam 10 mg/2 ml Injection

Diazepam 5 mg Rectal Solution
 Diazepam 5 mg Tablet
 Diclofenac 1% Emulgel
 Diclofenac Sodium 50 mg Tablet
 Diclofenac Sodium 75mg/3ml Injection
 Digoxin 62.5 mcg Tablet
 Digoxin 0.25 mg Tablet
 Digoxin 500mcg/2ml Inj
 Diltiazem HCl 30 mg Tablet
 Diosmin 450 mg & Hesperidin 50 mg Tablet
 Diphenhydramine HCl 14mg/5ml & Ammonium Chloride 135mg/5ml Expectorant
 Diphenhydramine HCl 7mg/5ml & Ammonium Chloride 67.5mg/5ml Expectorant (Peads)
 Diphenoxylate HCl 2.5mg with Atropine Sulphate 0.025mg Tablet
 Dobutamine HCl 250 mg/20 ml Injection
 Docusate Sodium 0.5% Ear Drops (SoluWax)
 Dopamine HCl 40 mg/ml Injection, 5 ml
 Doxycycline 100 mg Capsule
 Dydrogesterone HCl 10 mg Tablet

E

Edoxaban 30mg Tablet
 Edoxaban 60mg Tablet
 Empagliflozin 25mg Tablet
 Enalapril 20 mg Tablet
 Enalapril 5 mg Tablet
 Enoxaparin Sodium 40 mg Injection
 Enoxaparin Sodium 60 mg Injection
 Eperisone HCl 50 mg Tablet
 Erythromycin Ethylsuccinate 200mg/5ml Suspension
 Erythromycin Ethylsuccinate 400 mg Tablet
 Erythropoietin Human Recombinant 2000 IU Injection (Alfa & Beta)
 Ethambutol HCl 400 mg Tablet
 Etomidate 20 mg/10 ml Injection
 Etoricoxib 90 mg Tablet
 Ezetimibe 10mg Tablet

F

Felodipine 10 mg Tablet
 Felodipine 5 mg Tablet
 Fentanyl Citrate 50 mcg/ml Injection
 Ferric Ammonium Citrate 800 mg/10 ml Paediatric Mixture
 Ferrous Fumarate 200 mg Tablet
 Fluconazole 100 mg Capsule
 Flumazenil 0.5mg/5ml Inj

Fluorescein 1 mg Ophthalmic Strip
Fluphenazine Decanoate 25 mg/ml Injection
Fluticasone Propionate 125 mcg/dose Inhaler
Fluvoxamine 50 mg Tablet
Folic Acid 5 mg Tablet
Fondaparinux Sodium 2.5 mg/0.5 ml Injection
Frusemide 20 mg/2 ml Injection
Frusemide 40 mg Tablet
Fuller's Earth Powder
Fusidic Acid 2% Cream

G

Gabapentin 300 mg Capsule
Gemfibrozil 300 mg Capsule
Gentamicin 0.1% Cream
Gentamicin Sulphate 80 mg/2 ml Injection
Gliclazide 80 mg Tablet
Gliclazide 30 mg Modified Release Tablet
Glucagon (Lyophilised) 1 mg/ml Injection
Glycerin
Glycerin 25 % & Sodium Chloride 15 % Disposable Enema
Glyceryl Trinitrate 0.5 mg Tablet
Glyceryl Trinitrate 25 mg/5 ml Injection

H

Haloperidol 5 mg/ml Injection
Haemato Polyvalent Snake Antivenom Injection
Heparin 1000 units/ml Injection
Heparin Sodium 50 units in Sodium Chloride Injection, 5ml
Hepatitis B Immunoglobulin (Human) Injection
Hepatitis B Vaccine Injection 20 mcg: Adult
Hepatitis B Vaccine Injection: Paed-DNA
Human Albumin 20%, 50ml IV Soln
Hydralazine 20mg Inj
Hydrochlorothiazide 25mg Tablet
Hydrocortisone 1% Cream
Hydrocortisone 10mg Tablet
Hydrocortisone Sodium Succinate 100 mg Injection
Hydrogen Peroxide 20 vol Solution
Hydroxychloroquine Sulphate 200 mg Tablet
Hydroxyethyl Cellulose Jelly
Hydroxyurea 500 mg Capsule
Hyoscine N-Butylbromide 10 mg Tablet
Hyoscine N-Butylbromide 20 mg/ml Injection

I

Ibuprofen 200 mg Tablet
Indacaterol 150mcg, Glycopyrronium 50mcg & Mometasone 160mcg (Enerzair) Breezehaler
Industrial Methylated Spirit 96% Denaturated Alcohol, 5 Litre
Insulin Detemir 100 IU/ml Injection in Prefilled syringe/cartridge
Insulin Recombinant Synthetic Human, intermediate-acting 100 IU/ml Penfill and Refill, 3ml
Insulin Recombinant Synthetic Human, pre-mixed 100 IU/ml Penfill and Refill, 3ml
Insulin Recombinant Synthetic Human, short-acting 100 IU/ml Penfill and Refill, 3ml
Ipratropium Bromide 0.5mg & Salbutamol 2.5mg per UVD
Ipratropium Bromide 0.025 % Inhalation Soln (250 mcg/ml)
Ipratropium Bromide 20 mcg and Fenoterol 50 mcg/dose Inhalation
Iron (III) Hydroxide Sucrose Complex 20mg/ml Solution for Injection
Iron (III) Polymaltose Complex 10mg Iron/ml Syrup (Maltofer)
Iron Dextran 50mg/ml Injection
Isoniazid 100 mg Tablet
Isosorbide Dinitrate 10 mg Tablet
Isosorbide Mononitrate 60 mg CR Tablet

K

Ketoprofen 2.5% Gel
Ketamine 10 mg/ml Injection

L

Labetalol HCl 100 mg Tablet
Labetalol HCl 25mg/5ml Inj
Lactulose 3.35 g/5 ml Liquid
Lamotrigine 50 mg Tablet
Lanthanum Carbonate 1000 mg Chewable Tablet
Leucovorin Calcium (Calcium Folate) 10mg/mL Injection
Levetiracetam 500 mg Tablet
Levetiracetam 100mg/ml Oral Solution
Levodopa 100 mg & Carbidopa 25 mg Tablet
Levodopa 200 mg, Benserazide 50 mg Tablet
Levothyroxine Sodium 25 mcg Tablet
Levothyroxine Sodium 100 mcg Tablet
Lignocaine 2 % Jelly

Lignocaine HCl (Lidocaine) 100 mg/5 ml Injection
Lignocaine HCl (Lidocaine) 2% Injection
Liquid Paraffin
Loratadine 10 mg Tablet
Loratadine 1 mg/ml Syrup
Losartan 50 mg Tablet

N

Naloxone HCl 0.4 mg/ml (Adult) Injection
Naproxen 275 mg Tablet
Neostigmine Methylsulphate 2.5 mg/ml Injection
Neuro Polyvalent Snake Antivenom Injection
Nifedipine 10 mg Tablet
Noradrenaline Acid Tartrate 4 mg/4 ml Injection
Nystatin 100,000 units/ml Suspension, 60 ml

M

Magnesium Sulphate 50% Injection
Magnesium Trisilicate Mixture
Magnesium Trisilicate Tablet
Mannitol 20 % Injection (20 g/100 ml)
Mecobalamin 500 mcg Tablet
Medroxyprogesterone Acetate 5mg Tablet
Mefenamic Acid 250 mg Capsule
Meloxicam 7.5mg Tablet
Meropenem 1g Injection
Metformin HCl 500 mg Extended Release Tablet
Metformin HCl 500 mg Tablet
Methotrexate 2.5 mg Tablet
Methyl Salicylate 25% Ointment
Methyldopa 250 mg Tablet
Methylphenidate HCl 10 mg Tablet
Methylprednisolone Sodium Succinate 0.5g Injection
Metoclopramide HCl 10 mg Tablet
Metoclopramide HCl 10 mg/2 ml Injection
Metoprolol Tartrate 100 mg Tablet
Metronidazole 200 mg Tablet
Metronidazole 500 mg/100 ml Injection
Miconazole 2 % Cream
Midazolam 5 mg/ml Injection
Midazolam 15mg/3ml Injection
Minoxidil 5 mg Tablet
Modified Fluid Gelatin 4% Injection
Mometasone Furoate 50 mcg Aqueous Nasal Spray
Montelukast Sodium 4 mg Oral Granules
Montelukast Sodium 5 mg Tablet
Morphine HCl 10 mg/5ml Solution
Morphine Sulphate 10mg Prolonged Release Tablet
Morphine Sulphate 10 mg/ml Injection
Multivitamin Syrup
Mupirocin 2% cream / ointment
Mycophenolate Mofetil 250 mg Capsule
Mycophenolate Mofetil 500 mg tablet

O

Octreotide 0.05 mg/ml Injection
Ofloxacin 0.3% Otic Solution
Olanzapine 5 mg Tablet
Olanzapine 10 mg Tablet
Omeprazole 20 mg Capsule
Omeprazole 40mg Inj
Oral Rehydration Salt
Oseltamivir 75mg Capsule
Oxytocin 10 units/ml Injection
Oxytocin 5 units & Ergometrine Maleate 0.5mg/ml Injection
Oxymetazoline 0.025% Nasal Spray (Pead)
Oxymetazoline 0.05% Nasal Spray (Adult)
Oxymetazoline HCl 0.025% (Paed) Nasal Drop

P

Palm Oil, 120ml
Pantoprazole 40 mg Tablet
Pantoprazole 40 mg Injection
Paracetamol 125 mg Suppository
Paracetamol 250 mg/5 ml Syrup
Paracetamol 500 mg Tablet
Perindopril 4 mg Tablet
Pethidine HCl 50 mg/ml Injection
Phenobarbitone 30 mg Tablet
Phenobarbitone Sodium 200 mg/ml Injection
Phenoxyethyl Penicillin 125 mg Tablet
Phenoxyethyl Penicillin 125 mg/5 ml Syrup
Phenytoin Sodium 100 mg Capsule
Phenytoin Sodium 250 mg/5ml Injection
Piperacillin 4 g & Tazobactam 500 mg Injection
Pneumococcal Conjugate Vaccine
Polyethylene Glycol /Macrogol 4000 Powder (Fortrans)
Potassium Chloride (Slow Release) 600 mg Tablet

Potassium Chloride 1 g/10 ml Injection
Potassium Chloride 1 g/10 ml Mixture
Potassium Citrate 3g/10 ml & Citric Acid Mixture
Potassium Dihydrogen Phosphate Powder
Potassium Permanganate 1:10,000 Solution
Povidone Iodine 10% (eqvt. to 1% iodine) Solution
Pralidoxime 25 mg/ml Injection
Prazosin HCl 1 mg Tablet
Prazosin HCl 2 mg Tablet
Prazosin HCl 5 mg Tablet
Prednisolone 5 mg Tablet
Primaquine 7.5 mg base Tablet
Prochlorperazine Maleate 5mg Tablet
Prochlorperazine Mesylate 12.5mg/ml Injection
Procyclidine HCl 10 mg/2 ml Injection
Prolase Tablet
Promethazine HCl 25 mg/ml Injection
Promethazine HCl 5 mg/5 ml Syrup
Proparacaine HCl 0.5% Ophthalmic Drop
Propofol 10mg/ml Injection
Propranolol HCl 1mg/ml Injection
Propranolol HCL 40 mg Tablet
Propylthiouracil 50 mg Tablet
Protamine Sulphate 10 mg/ml Injection
Pyrazinamide 500 mg Tablet
Pyridostigmine Bromide 60 mg Tablet
Pyridoxine HCl 10 mg (Vitamin B6) Tablet

R

Ranitidine 50 mg/2 ml Injection
Rifampicin 150 mg Capsule
Rifampicin 300 mg Capsule
Rifampicin/Isoniazid/Pyrazinamide/Ethambutol Tab (Akurit 4)
Risperidone 1 mg Tablet
Risperidone 2 mg Tablet
Rocuronium Bromide 10 mg/ml Injection

S

Sacubitril 49mg/ Valsartan 51mg Tablet
Salbutamol 0.5mg/ml Injection
Salbutamol 0.5 % Inhalation Solution, 10 ml

Salbutamol 100 mcg/dose Inhalation
Salbutamol 2 mg/5 ml Syrup
Salmeterol 25 mcg and Fluticasone Propionate 125 mcg Inhalation
Salmeterol 50 mcg and Fluticasone Propionate 250 mcg Inhalation
Sevelamer 800mg Tablet
Sertraline HCl 50 mg Tablet
Silver Sulphadiazine 1 % Cream
Simple Syrup
Simvastatin 20 mg Tablet
Simvastatin 40 mg Tablet
Sodium Bicarbonate 5% w/v Ear Drops
Sodium Bicarbonate 8.4%(1 mmol/ml)Injection,10 ml
Sodium Bicarbonate, Citric Acid,Sodium Citrate and Tartaric Acid - 4 g per sachet
Sodium Bicarbonate, Magnesium Carbonate Compound Mixture
Sodium Bicarbonate Powder
Sodium Chloride (Half Strength) 0.45% Injection, 500 ml
Sodium Chloride 0.18% with Dextrose 10% Injection, 500 ml
Sodium Chloride 0.18% with Dextrose 4.23% Injection, 500 ml
Sodium Chloride 0.45% with Dextrose 5% 500mL IV solution
Sodium Chloride 0.9% 100mL IV solution
Sodium Chloride 0.9% Injection, 500 ml
Sodium Chloride 0.9% with Dextrose 5% Injection, 500 ml
Sodium Chloride 0.9% Eye Drops
Sodium Chloride 3% Injection, 500 ml
Sodium Chloride Powder
Sodium Lactate Compound (Hartmanns Solution), 500 ml
Sodium Valproate 200 mg Tablet
Sodium Valproate 200 mg/5 ml Syrup
Spironolactone 25 mg Tablet
Streptokinase 1,500,000 IU Injection
Sterile Water For Irrigation Solution
Sulphamethoxazole 400 mg & Trimethoprim 80 mg Tablet
Salicylazosulphapyridine (Sulfasalazine) 500 mg Tablet
Suxamethonium Chloride 50 mg/ml Inj

T

Tamoxifen Citrate 20 mg Tablet
Telmisartan 40 mg Tablet
Telmisartan 80 mg Tablet
Terbutaline Sulphate 0.5 mg/ml Injection
Tetanus Toxoid Injection
Tenecteplase 10,000 unit (50 mg) Injection
Theophylline 250 mg Long Acting Tablet
Thymol Compound Gargle
Ticlopidine HCl 250 mg Tablet
Tiotropium 2.5mcg/puff solution for inhalation
Tiotropium 2.5mcg and Olodaterol 2.5mcg per actuation, inhalation
Tramadol HCl 50 mg Capsule
Tramadol HCl 50 mg/ml Injection
Tranexamic Acid 100 mg/ml Injection
Tranexamic Acid 250 mg Capsule
Triamcinolone Acetonide 40 mg/ml Injection
Trimetazidine 20 mg Tablet
Trimetazidine 35 mg MR Tablet
Triprolidine HCl 2.5 mg and Pseudoephedrine HCl 60 mg Tablet

Tuberculine PPD Injection

V

Valsartan 80 mg Tablet
Verapamil HCl 40 mg Tablet
Verapamil HCl 5 mg/2 ml Injection
Vitamin B Complex Tablet
Vitamin B1, B6, B12 Tablet
Vitamin K1 10mg/ml Injection
Vitamin K1 1mg/ml Injection
Vildagliptin 50 mg Tablet

W

Water For Injection, 10 ml
Water For Injection, 500 ml
Warfarin Sodium 1mg Tablet
Warfarin Sodium 2 mg Tablet
Warfarin Sodium 3 mg Tablet
Warfarin Sodium 5 mg Tablet
White Soft Paraffin (Vaseline)

X

X- Temporaneous Syrup



Z

Zinc Oxide Cream
Zinc oxide, benzyl benzoate and balsam peru suppository

Disediakan Oleh:

Nama: 
Jawatan: 
Tarikh: 30.12.2024

Disemak Oleh:

Nama: 
Jawatan: 
Tarikh: 30.12.2024

HOSPITAL PONTIAN DRUG FORMULARY				
A. ALIMENTARY TRACT AND METABOLISM				
A01. STOMATOLOGICAL PREPARATIONS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Thymol Compound Gargle	C	All	For sore throat and minor mouth inflammation	To be gargled 3-4 times daily
Benzylamine HCl 0.15% Solution	B	ENT	For relief of painful condition of the oral cavity	Used as a 30 seconds gargle or rinse, undiluted. ADULT 15 ml. CHILD less 12 years 5-15 ml. Uninterrupted treatment should not be more than 7 days
A02. DRUGS FOR ACID RELATED DISORDERS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Magnesium Trisilicate Mixture	C	All	Heartburn, dyspepsia	ADULT children over 12 years: 10-20ml 3 times daily or as required; CHILD: 5-11 years: 5-10 ml three times a day or as required
Magnesium Trisilicate Tablet	C	All	Heartburn, dyspepsia	ADULT 1-2 tablet to be chewed up to 6 times a day before meals. CHILD over 6 years one tablet to be taken 3-4 times a day
Omeprazole 20 mg Capsule	A/KK	Paediatric and all Ryle's Tube patients	i) Reflux oesophagitis ii) For eradication of Helicobacter pylori infection iii) Benign peptic ulcer not responding to conventional therapy iv) Zollinger-Elison Syndrome	i) 20 - 80 mg 1 - 2 times daily up to 8 - 12 weeks ii) 20 mg twice daily in combination with any of the 2 antibiotics (clarithromycin 500 mg twice daily, amoxicillin 1 g twice daily or metronidazole 400 mg twice daily) for 1 - 2 weeks iii) 20 mg once daily for 4 - 6 weeks iv) ADULT: 20 - 120 mg once daily adjusted according to the patient's response. CHILD 0.4 - 0.8 mg/kg/day
Omeprazole 40mg Inj	A*	Paediatric	i) Reflux oesophagitis, eradication of H. Pylori infection, benign peptic ulcer not responding to conventional therapy, Zollinger-Elison Syndrome ii) Endoscopically confirmed peptic ulcer	i) 40 mg IV once daily when oral therapy is inappropriate ii) 40- 160 mg by IV in single or divided doses
Pantoprazole 40 mg Tablet	B	All	i) Helicobacter pylori eradication ii) Peptic ulcer disease iii) Erosive and non-erosive reflux oesophagitis (GERD and NERD) iv) Zollinger-Elison Syndrome v) Prevention of NSAID induced gastropathy	i) 40 mg twice daily in combination with any of the 2 antibiotics (Clarithromycin 500 mg twice daily, Amoxicillin 1 g twice daily or Metronidazole 400 mg twice daily) for 1-2 weeks ii) 40 mg daily for 2 - 4 weeks iii) 20 - 40 mg daily on morning for 4 weeks iv) Initially 80 mg daily, dose can be titrated up or down as needed. v) 20 mg daily. CHILD not recommended
Pantoprazole 40 mg Injection	A/KK	All	Short term use for symptomatic improvement and healing of gastrointestinal diseases which require a reduction in acid secretion: i) Duodenal ulcer ii) Gastric ulcer iii) Moderate and severe reflux esophagitis iv) Zollinger-Elison-Syndrome and other pathological hypersecretory conditions	40 mg twice daily until oral administration can be resumed. CHILD not recommended
Ranitidine 50 mg/2 ml Injection	B	All	i) Benign gastric/ duodenal ulceration, reflux oesophagitis, Zollinger Ellison Syndrome ii) Stress ulcer prophylaxis in postoperative and high risk patients	i) ADULT: Slow IV injection of 50 mg diluted to 20 ml and given over at least 2 minutes. May be repeated every 6-8 hours or IV infusion at rate of 25 mg/hour for 2 hours, may be repeated at 6-8 hours intervals or IM. CHILD: 1 mg/kg/dose 6-8 hourly. ii) Initial slow IV injection of 50 mg, then continuous infusion of 125-250 mcg/kg/hour
Sodium Bicarbonate, Magnesium Carbonate Compound Mixture	C	All	Heartburn, for rapid relief of dyspepsia	ADULT 10-20 ml 3 times daily
A03. DRUGS FOR FUNCTIONAL				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Atropine Sulphate 1mg/ml Injection	B	All	i) Reduce vagal inhibition, salivary and bronchial secretion in anaesthesia ii) Reversal of excessive bradycardia iii) Reversal of effect of competitive muscle relaxants iv) Overdosage with other compounds having muscarinic action v) Organophosphate poisoning	i) Adult: 300-600 mcg IM/SC 30-60 minutes before anaesthesia. Alternatively, 300-600 mcg IV immediately before induction of anaesthesia. Child: >20 kg: 300-600 mcg; 12-16 kg: 300 mcg; 7-9 kg: 200 mcg; >3 kg: 100 mcg. Doses to be given via IM/SC admin 30-60 minutes before anaesthesia. ii) Adult: 500 mcg every 3-5 minutes. Total: 3 mg. Max Dosage: 0.04 mg/kg body weight. iii) Adult 0.6-1.2 mg before or with anticholinesterase iv) Adult: 0.6-1 mg IV/IM/SC, repeated every 2 hr. v) Adult: 2 mg IV/IM, every 10-30 minutes until muscarinic effects disappear or atropine toxicity appears. In severe cases, dose can be given as often as every 5 minutes. In moderate to severe poisoning, a state of atropinisation is maintained for at least 2 days and continued for as long as symptoms are present. Child: 20 mcg/kg given every 5-10 minutes.
Hyoscine N-Butylbromide 10 mg Tablet	C	All	Gastrointestinal tract and genito-urinary tract spasm, dyskinesia of the biliary system	ADULT 10-20mg, 3-4 times a day. CHILD 6-12 years old: 10mg 3 times a day.
Hyoscine N-Butylbromide 20 mg/ml Injection	B	All	Gastrointestinal tract and genito-urinary tract spasm, dyskinesia of the biliary system	ADULT: 20 mg IM/IV repeated after 30 min if needed. Max: 100 mg daily. Not recommended for CHILD below 12 years. Dosing is individualised and according to product insert/protocol
Metoclopramide HCl 10 mg Tablet	B	All	Use in adults for: i) Prevention of delayed chemotherapy induced nausea and vomiting (CINV) ii) Prevention of radiotherapy induced nausea and vomiting (RINV) iii) Symptomatic treatment of nausea and vomiting, including acute migraine induced nausea and vomiting Use in children aged 1-18 years for: i) Prevention of delayed chemotherapy induced nausea and vomiting (CINV) as a second line option	Adult: The recommended single dose is 10mg, repeated up to three times daily. The maximum recommended daily dose is 30mg or 0.5mg/kg body weight. The maximum recommended treatment duration is 5 days. Prevention of delayed CINV (children aged 1-18 years): The recommended dose is 0.1-0.5mg/kg body weight, repeated up to three times daily by oral route. The maximum dose in 24 hours is 0.5mg/kg body weight. Dosing table CHILD age 1-3 years old (body weight 10-14kg): 1mg TDS, 3-5 years old (body weight 15-19kg): 2mg TDS, 5-9 years old (body weight 20-29kg): 2.5mg TDS, 9-18 years old (body weight 30-60kg): 5mg TDS, 15-18 years old (body weight > 60kg): 10mg TDS. Tablets are not suitable for use in children weighing less than 30kg. Other pharmaceutical forms may be more appropriate for administration to this population.
Metoclopramide HCl 10 mg/2 ml Injection	B	All	Use in adults for: i) Prevention of post-operative nausea and vomiting ii) Symptomatic treatment of nausea and vomiting, including nausea and vomiting induced by migraine attacks iii) Prevention of radiotherapy-induced nausea and vomiting Use in children aged 1 to 18 years for: i) Prevention of delayed chemotherapy-induced nausea and vomiting as a second-line option ii) Prevention of post-operative nausea and vomiting as a second-line option	All indications (adult): A single 10mg dose is recommended for the prevention of post-operative nausea and vomiting. The recommended dose for the symptomatic treatment of nausea and vomiting, including nausea and vomiting induced by migraine attacks and for the prevention of radiotherapy-induced nausea and vomiting is 10mg per dose, 1 to 3 times daily. The maximum recommended daily dose is 30mg or 0.5mg/kg. Treatment duration when administering by injection should be as short as possible and a switch to administration via oral or rectal route should be instituted as quickly as possible. All indications (children aged 1 to 18 years of age) The recommended dosage is 0.1 to 0.15mg/kg, 1 to 3 times daily, by intravenous route. The maximum daily dose is 0.5mg/kg. Dosing table: CHILD age 1-3 years old (body weight 10-14kg): 1mg TDS, 3-5 years old (body weight 15-19kg): 2mg TDS, 5-9 years old (body weight 20-29kg): 2.5mg TDS, 9-18 years old (body weight 30-60kg): 5mg TDS, 15-18 years old (body weight > 60kg): 10mg TDS. For the prevention of delayed CINV, the maximum treatment duration is 5 days. For the prevention of post-operative nausea and vomiting, the maximum treatment duration is 48 hours.

A.06 LAXATIVES				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Bisacodyl 10 mg Suppository	C	All	i) Constipation ii) Bowel preparation for radiological procedures and surgery	i) ADULT and CHILD (over 10 years): 10 mg per rectal; CHILD (4 to 10 years): 5 mg per rectal. ii) ADULT and CHILD (over 10 years): 10 to 20 mg; CHILD (4 to 10 years): 5 mg the following morning before procedures insert rectally
Bisacodyl 5 mg Tablet	C	All	i) Constipation ii) Bowel preparation for radiological procedures and surgery	i) ADULT and CHILD (over 10 years): 5 to 10 mg; CHILD (4 to 10 years): 5 mg. To be taken at night for effect on the following morning. ii) ADULT and CHILD (over 10 years): 10 mg in the morning and 10 mg in the evening the day before procedures; CHILD (4 to 10 years): 5 mg the night before procedures.
Glycerin	C+	All	As a lubricant and osmotic dehydrating agent	Apply to area when required
Glycerin 25 % & Sodium Chloride 15 % Disposable Enema	C+	All	Constipation	1 enema as required
Lactulose 3.35 g/5 ml Liquid	C+	All	i) Constipation ii) Hepatic encephalopathy	i) ADULT 15-45 ml daily in 1-2 divided doses adjusted to patient's need. Maintenance dose: 15-30ml daily in 1-2 divided doses. CHILD 0.5 ml/kg/dose once or twice daily. ii) ADULT: 30-45 ml 2-4 times daily, dose adjusted to produce 2-3 soft stools daily. CHILD: 1 ml/kg/dose 3-4 times daily.
Liquid Paraffin	C	All	Constipation	ADULT: 10-30 ml daily at night. CHILD: not recommended.
Polyethylene Glycol /Macrogol 4000 Powder (Fotrans)	A	Surgical	Bowel cleansing prior to colonoscopy, radiological examination or colonic surgery. Suitable for patients with heart failure or renal failure	1 sachet dissolved in 1 L of water and to be consumed within 1 hour. Usual dose: 3-4 L of oral solution are required. When morning surgery is planned, the oral solution is given in the late afternoon the day prior. If surgery is scheduled in afternoon, the oral solution should be given on the same day for ingestion to be completed three hours before surgery.
A07. ANTIDIARRHEALS, INTESTINAL ANTIINFLAMMATORY/ANTIINFECTIVE AGENTS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Charcoal, Activated 250 mg Tablet	C	All	i) Diarrhoea and food poisoning ii) Reduce absorption of drugs, plant, inorganic poison and chemicals in poisoning cases	i) ADULT: 500mg -1000mg given 3-4 times daily. CHILD (up to 12 years): 250-500mg 3-4 times daily. ii) ADULT and CHILD over 12 years: initial 25-100 g or 1-2g/kg; repeat initial dose as soon as possible or 25-50 g every 4-6 hours. CHILD (up to 12 years): 0.5 to 1 g/kg/dose (Maximum: 50 g/dose). Dose may be repeated every 2-6 hours as needed.
Charcoal, Activated 50 g Granules	A	All	Emergency treatment of acute oral poisoning and drug overdose	ADULT and CHILD 12 years and above: Acute poisoning: 50 to 100g in suspension. Severe poisoning: 50 to 100g as an initial dose followed by 20g every 4 to 6 hours. CHILD up to 12 years: 1 g/kg/dose (Maximum: 50 g/dose). Dose may be repeated every 4 to 6 hours as needed. Dosing is individualised and according to product insert/protocol.
Diphenoxylate HCl 2.5mg with Atropine Sulphate 0.025mg Tablet	B	All	Symptomatic treatment of acute and chronic diarrhoea	ADULT: 2 tablets 4 times daily, later reduced when diarrhoea is controlled. Maintenance: 2 tablets once daily as needed (Max: 8 tablets daily)
Nystatin 100,000 units/ml Suspension, 60 ml	B	All	Prevention and treatment of candidiasis of the skin and mucous membranes, protection against candida overgrowth during antimicrobial/corticosteroid therapy and as selective decontamination regimens	Treatment: Adult & Children: 100,000 to 600,000 units 6 hourly; Infant: 100,000 – 200,000 units 6 hourly; Neonates: 100,000 units 8 hourly. Prophylaxis: Adult: 1,000,000 units daily; Neonates and Infants: 100,000 units 2-3 times a day; Children: 250,000 – 500,000 units 2-3 times a day.
Oral Rehydration Salt	C	All	Replacement of fluid and electrolytes loss in diarrhoea	Dissolve 1 sachet in 200 or 250mL of water according to product insert. The amount to give depends on hydration status. ADULT: 200-400mL (1 - 2 sachets) for every loose motion / diarrhoea / vomiting CHILD (2 yrs & above): 100-200mL (1 sachet) for every loose motion / diarrhoea / vomiting. In severe dehydration 100ml/kg for 3-4 hours. INFANT (up to 2 yrs): 1 - 1.5 times their usual feed volume (50-100mL) each diarrhoea/vomiting Dose is according to product insert and dependent on the product / brand used as well as patient comorbidities e.g. heart failure and chronic kidney disease.
A10. DRUGS USED IN DIABETES				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Insulin Recombinant Synthetic Human, intermediate-acting 100 IU/ml Penfill and Refill, 3ml	B	All	Insulin dependent diabetes mellitus, non insulin dependent diabetes unresponsive to treatment to diet or oral hypoglycaemics, hyperkalaemia to assure proper utilisation of glucose and reduce glucosuria in non diabetic patients receiving parenteral nutrition	Dose to be individualised. The daily insulin requirement is usually between 0.3 and 1.0IU/kg /day
Insulin Recombinant Synthetic Human, pre-mixed 100 IU/ml Penfill and Refill, 3ml	B	All	Insulin dependent diabetes mellitus, non insulin dependent diabetes unresponsive to treatment to diet or oral hypoglycaemics, hyperkalaemia to assure proper utilisation of glucose and reduce glucosuria in non diabetic patients receiving parenteral nutrition	Dose to be individualised. The average daily insulin requirement is between 0.5-1.0 units/kg body weight
Insulin Recombinant Synthetic Human, short-acting 100 IU/ml Penfill and Refill, 3ml	B	All	Diabetes mellitus	Dose to be individualised. The average daily insulin requirement is between 0.3-1.0 units/kg body weight/day. Daily insulin requirement may be higher in patients with insulin resistance, and lower in patients with residual, endogenous insulin production.
Insulin Detemir 100 IU/ml Injection in Prefilled syringe/cartridge	A/KK	Medical	i) Type 1 Diabetes patients on basal bolus regimen, whom experience hypoglycaemia with conventional insulin, to be used in combination with rapid or short-acting insulin. ii) Type 2 Diabetes patients on oral anti-diabetics and basal insulin regimen or basal bolus insulin regimen whom experience hypoglycaemia with conventional basal insulin.	Individualized dose given via SC once or twice daily. Initiate at a dose of 10IU or 0.1-0.2IU/kg. For twice daily dosing, the evening dose can be administered either with the evening meal, at bedtime, or 12 hours after the morning dose.
Gliclazide 80 mg Tablet	B	All	Diabetes mellitus type 2	Initially 40-80mg daily. A single dose should not exceed 160mg and when higher doses are required, a twice daily split dosage is advised and should be divided. Maximum daily dose: 320mg. For elderly, starting dose should be 40mg twice daily.
Gliclazide 30 mg Modified Release Tablet	B	All	Diabetes mellitus type 2	Initially, 30mg daily at breakfast time, may increase in successive steps to 60, 90 or 120mg daily at 1 month intervals. Max daily dose: 120mg
Metformin HCl 500 mg Extended Release Tablet	B	All	Diabetes mellitus who experienced gastrointestinal side effects with normal metformin	500 mg once daily. Maximum dose 2000 mg once daily with evening meal
Metformin HCl 500 mg Tablet	B	All	Diabetes mellitus	Initial: 500mg orally twice daily with food. Maintenance: Titrate in 500mg increments weekly, doses up to 2000 mg daily may be divided into 2 equal doses.

Empagliflozin 25mg Tablet	A/KK	Medical	Indication 1: Indicated in the treatment of type 2 diabetes mellitus to improve glycaemic control in adults as: Add-on combination therapy: In combination with other glucose-lowering medicinal products including insulin, when these, together with diet and exercise, do not provide adequate glycaemic control. (Patients with HbA1c between 6.5%-10.0% while on single / combination anti-diabetic therapy). Indication 2: Indicated in patients with type 2 diabetes mellitus (T2DM) and established cardiovascular disease (CVD) to reduce the risk of cardiovascular (CV) death: As an adjunct to diet, exercise and standard of care, to reduce the risk of cardiovascular (CV) death. (Patients with HbA1c not more than 10.0% while on adequate trial of metformin).	- Starting dose is 10 mg empagliflozin once daily for monotherapy and add-on combination therapy with other glucose-lowering medicinal products including insulin. - In patients tolerating empagliflozin 10 mg once daily and need tighter glycaemic control, the dose can be increased to 25 mg once daily. - The maximum daily dose is 25 mg
Vildagliptin 50 mg Tablet	A/KK	Medical	FUKKM restriction: As add-on therapy for patient who failed therapy and/or contraindicated/unable to tolerate metformin and/or sulphonylurea. i) As second line therapy in type 2 diabetes patients inadequately controlled on maximal tolerated dose of metformin monotherapy and high risk of hypoglycaemia; ii) As second line therapy in type 2 diabetes patients inadequately controlled on maximal tolerated dose of sulphonylurea and intolerant/contraindicated for metformin therapy; iii) As third line therapy in type 2 diabetes patients inadequately controlled with dual OAD combination therapy with sulphonylurea and metformin; iv) As a monotherapy in type 2 diabetes mellitus patients inadequately controlled by diet and exercise alone and for whom metformin is inappropriate due to contraindications or intolerance; v) An adjunct to diet and exercise to improve glycaemic control in patients with type 2 diabetes mellitus: As a dual therapy in combination with insulin in patients with insufficient glycaemic control. Insulin dose and regimen should be optimized before addition of vildagliptin.	ADULT over 18 years: 50mg bd when combine with metformin, 50 mg od when combine with sulphonylurea

A11. VITAMINS

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Alfacalcidol 0.25 mcg Capsule	A/KK	All	i) Chronic kidney disease mineral bone disorder ii) Osteoporosis iii) Hypoparathyroidism and pseudohypoparathyroidism iv) Rickets and osteomalacia	Initial dose ADULT and CHILD above 20kg body weight : 1 mcg daily; CHILD under 20kg body weight : 0.05 mcg/kg/day. Maintenance dose : 0.25 mcg to 2 mcg daily Dosing is individualised based on serum calcium level and according to product insert/protocol
Alfacalcidol 1 mcg Capsule	A/KK	Nephrology	i) Chronic kidney disease mineral bone disorder ii) Osteoporosis iii) Hypoparathyroidism and pseudohypoparathyroidism iv) Rickets and osteomalacia	Initial dose ADULT and CHILD above 20kg body weight : 1 mcg daily; CHILD under 20kg body weight : 0.05 mcg/kg/day. Maintenance dose : 0.25 mcg to 2 mcg daily Dosing is individualised based on serum calcium level and according to product insert/protocol
Alfacalcidol 2mcg/ml Drops	A*	Paediatric	i) Neonatal hypocalcaemia ii) Osteoporosis iii) Hypoparathyroidism and pseudohypoparathyroidism iv) Rickets and osteomalacia	NEONATES : 0.1 mcg/kg/day Dosing is individualised based on serum calcium level and according to product insert/protocol
Alfacalcidol 2 mcg/ml Injection	A*	Nephrology	i) Chronic kidney disease mineral bone disorder ii) Osteoporosis iii) Hypoparathyroidism and pseudohypoparathyroidism iv) Rickets and osteomalacia	Initial dose ADULT and CHILD above 20kg body weight : 1 mcg daily; CHILD under 20kg body weight : 0.05 mcg/kg/day. Maintenance dose : 0.25 mcg to 2 mcg daily Dosing is individualised based on serum calcium level and according to product insert/protocol
Ascorbic Acid 100 mg Tablet	C+	All	Vitamin C deficiency	ADULT: 100-250 mg once or twice daily CHILD: 100 mg three times daily for one week followed by 100mg daily until symptoms abate. i) 0.25 mcg 2 times daily
Calcitriol 0.25 mcg Capsule	A/KK	All	i) Osteoporosis ii) Chronic kidney disease-mineral bone disorder iii) Hypoparathyroidism and pseudohypoparathyroidism iv) Rickets and osteomalacia	i) ADULT and CHILD 3 years and older: Initial dose: 0.25 mcg. In patients with normal or only slightly reduced serum calcium levels, doses of 0.25 mcg every other day is sufficient. Dosage may be increased if necessary to 0.5 mcg/day. Maintenance dose: 0.5-1mcg daily CHILD less than 3 years: 10 to 15 ng/kg/day iii) and iv) 0.25 mcg/day given in the morning
Cyanocobalamin 1 mg Injection	B	All	i) Prophylaxis of anaemia associated with Vitamin B12 deficiency ii) Uncomplicated pernicious anaemia or Vitamin B12 malabsorption	i) Prophylaxis of anaemia: 250-1000 mcg IM every month ii) Uncomplicated pernicious anaemia or Vitamin B12 malabsorption: Initial 100 mcg daily for 5-10 days followed by 100-200 mcg monthly until complete remission is achieved. Maintenance: up to 1000 mcg monthly. CHILD 30-50 mcg daily for 2 or more weeks (to a total dose of 1-5mg). OR AS PRESCRIBED.
Multivitamin Syrup	C+	All	For prevention and treatment of vitamin deficiencies	CHILD 5 ml daily or based on manufacturer
Pyridoxine HCl 10 mg (Vitamin B6) Tablet	C+	All	i) Pyridoxine-dependent convulsions in infant ii) Sideroblastic anaemia iii) B6-deficient anaemia in adult iv) Prophylaxis to peripheral neuritis in isoniazid therapy v) Nausea and vomiting of pregnancy and irradiation sickness	i) INFANT 4 mg/kg daily for short periods ii) 100 - 400 mg daily in divided doses iii) ADULT 20 - 50 mg up to 3 times daily iv) Prophylaxis 10 mg daily, therapeutic 50 mg 3 times daily v) 20 - 100 mg daily
Vitamin B Complex Tablet	C+	All	Prophylaxis and treatment of vitamin B deficiency	1-2 tablets daily
Vitamin B1, B6, B12 Tablet	B	All	For deficiency or raised requirement of Vitamin B1, B6, B12	1 tablets 3 times daily swallowed unchewed.

A12. MINERAL SUPPLEMENTS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Calcium Carbonate 500 mg Tablet	B	All	i) Hyperphosphatemia (phosphate binder) in chronic kidney disease patients ii) Calcium supplementation	i) Total dose of elemental calcium from calcium-based phosphate binder not to exceed 1,500 mg/day. Dosing is individualised based on serum phosphate level and according to product insert/protocol ii) 500 mg to 4g per day as calcium carbonate in 1-3 divided doses (500mg capsule contains 200mg elemental calcium) Dosing is individualised based on serum calcium level and according to product insert/protocol
Calcium Gluconate 10% Injection	B	All	i) Acute hypocalcaemia ii) Hypocalcaemic tetany iii) Cardiac resuscitation	i) ADULT: 1 to 2 g (2.2 to 4.4 mmol). CHILD: 50mg/kg/dose (0.5ml/kg/dose) IV short infusion over at least 10 to 20 minutes, per dose. Max: 20ml per dose; ii) ADULT: 1g (2.2 mmol) by slow IV injection followed by continuous infusion of 4 g (8.8 mmol) daily; iii) IV or intracardiac injection, 1g (2.2mmol). Dosing is individualised and according to product insert/protocol.
Calcium Lactate 300mg Tablet	C	All	For prophylaxis of calcium deficiency and treatment of chronic hypocalcaemia	ADULT: 300mg - 600mg (as elemental Ca) daily in divided doses; Dosing is individualised and according to product insert/protocol
Potassium Chloride (Slow Release) 600 mg Tablet	B	All	For the treatment and specific prevention of hypokalaemia	ADULT: 2 - 3 tablets daily. Severe deficiency: 9 - 12 tablets daily or according to the needs of the patient
Potassium Chloride 1 g/10 ml Mixture	C	All	Potassium depletion	1 g once or twice daily until serum potassium is restored
Potassium Citrate 3g/10 ml & Citric Acid Mixture	C	All	For systemic or urine alkalinization	ADULT: 10-20 ml 3 times daily, well diluted with water. CHILD up to 1 year: 2.5 ml 3 times daily; 1 - 5 years: 5 ml 3 times daily; 6 - 12 years: 10 ml 3 times daily. To be taken well diluted with water, after meals and at bedtime.
B. BLOOD AND BLOOD FORMING ORGANS				
B01. ANTITHROMBOTIC AGENTS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Acetylsalicylic Acid 300 mg Soluble Tablet	C	All	Initial treatment of cardiovascular disorders such as angina pectoris and myocardial infarction and for the prevention of cardiovascular events in patients at risk. Other such uses include the treatment and prevention of cerebrovascular disorders such as stroke.	150mg to be taken daily. Use in children under 16 years old is not recommended
Acetylsalicylic Acid 100 mg, Glycine 45 mg Tablet	B	All	i) Prevention of myocardial infarct, stroke, vascular occlusion and deep vein thrombosis. ii) Transient ischaemic attacks	1 tablet daily
Clopidogrel 75 mg Tablet	A/KK	Medical	Secondary prevention of atherothrombotic events in: i) Adult patients suffering from myocardial infarction (from a few days until less than 35 days), ischaemic stroke (from 7 days until less than 6 months) or established peripheral arterial disease. Prescribing restriction: as second/third line treatment in patients who are sensitive or intolerant to acetylsalicylic acid and/or ticlopidine). ii) Adult patients suffering from acute coronary syndrome. • Non-ST segment elevation acute coronary syndrome (unstable angina or non-Q-wave myocardial infarction), including patients undergoing a stent placement following percutaneous coronary intervention. • ST segment elevation acute myocardial infarction, in combination with acetylsalicylate acid (ASA) in medically treated patients eligible for thrombolytic therapy.	75 mg once daily
Edoxaban 30mg Film Coated Tablets	A*	Medical	Indicated in prevention of stroke and systemic embolism in adult patients with nonvalvular atrial fibrillation (NVAF) with one or more risk factors, such as congestive heart failure, hypertension, and age ≥ 75 years, diabetes mellitus, prior stroke or transient ischaemic attack (TIA).	The recommended dose is 60 mg edoxaban once daily. Therapy with edoxaban in NVAF patients should be continued long term. The recommended dose is 30 mg once daily in patients with one or more of the following clinical factors: • Moderate or severe renal impairment (creatinine clearance (CrCL) 15 - 50 mL/min) • Low body weight ≤ 60 kg • Concomitant use of the following P-glycoprotein (P-gp) inhibitors: ciclosporin, dronedarone, erythromycin, or ketoconazole.
Edoxaban 60mg Film Coated Tablets	A*	Medical	Indicated in prevention of stroke and systemic embolism in adult patients with nonvalvular atrial fibrillation (NVAF) with one or more risk factors, such as congestive heart failure, hypertension, and age ≥ 75 years, diabetes mellitus, prior stroke or transient ischaemic attack (TIA).	The recommended dose is 60 mg edoxaban once daily. Therapy with edoxaban in NVAF patients should be continued long term. The recommended dose is 30 mg once daily in patients with one or more of the following clinical factors: • Moderate or severe renal impairment (creatinine clearance (CrCL) 15 - 50 mL/min) • Low body weight ≤ 60 kg • Concomitant use of the following P-glycoprotein (P-gp) inhibitors: ciclosporin, dronedarone, erythromycin, or ketoconazole.
Enoxaparin Sodium 40 mg Injection	A*, A/KK	All	KATEGORI PRESKRIBER A*: i. Prophylaxis of venous thromboembolic diseases (DVT and PE) especially in perioperative, high risk surgical cases and medical patients with acute illness at increased risk of VTE ii. Treatment of venous thromboembolic diseases (DVT and PE). iii. Acute coronary syndrome: a. Treatment of unstable angina and Non-ST-segment elevation myocardial infarction (NSTEMI), in combination with oral acetylsalicylic acid. b. Treatment of acute ST-segment elevation myocardial infarction (STEMI) including patients to be managed medically or with subsequent Percutaneous Coronary Intervention (PCI). KATEGORI PRESKRIBER A/KK: Prevention of DVT in antenatal and/or postnatal women with VTE risk scoring of 3 or more. A written consent form by the patient is necessary prior treatment initiation. Healthcare facilities are advised to refer to "Panduan Penggunaan Obat- Ubat yang Mengandung Unsur Tidak Halal".	KATEGORI PRESKRIBER A* i. Moderate risk: 20mg SC 2 hours before surgery then 20mg SC once daily High risk: 40mg SC 12 hours before surgery then 40mg SC once daily Medical patients: 40mg once daily ii. 1.5mg/kg once daily or 1mg/kg twice daily iii. 1 mg/kg every 12 hours KATEGORI PRESKRIBER A/KK: <50 kg: 20mg OD 50-90 kg: 40mg OD 91-130 kg: 60mg OD 131-170 kg: 80mg OD >170 kg: 0.6mg/kg/day

Enoxaparin Sodium 60 mg Injection	A*, A/KK	All	<p>KATEGORI PRESKRIBER A*:</p> <p>i. Prophylaxis of venous thromboembolic diseases (DVT and PE) especially in perioperative, high risk surgical cases and medical patients with acute illness at increased risk of VTE</p> <p>ii. Treatment of venous thromboembolic diseases (DVT and PE).</p> <p>iii. Acute coronary syndrome: a. Treatment of unstable angina and Non-ST-segment elevation myocardial infarction (NSTEMI), in combination with oral acetylsalicylic acid. b. Treatment of acute ST-segment elevation myocardial infarction (STEMI) including patients to be managed medically or with subsequent Percutaneous Coronary Intervention (PCI).</p> <p>KATEGORI PRESKRIBER A/KK:</p> <p>Prevention of DVT in antenatal and/or postnatal women with VTE risk scoring of 3 or more. A written consent form by the patient is necessary prior treatment initiation. Healthcare facilities are advised to refer to "Panduan Penggunaan Obat- Ubat yang Mengandung Unsur Tidak Halal".</p>	<p>KATEGORI PRESKRIBER A*</p> <p>i. Moderate risk: 20mg SC 2 hours before surgery then 20mg SC once daily High risk: 40mg SC 12 hours before surgery then 40mg SC once daily Medical patients: 40mg once daily</p> <p>ii. 1.5mg/kg once daily or 1mg/kg twice daily</p> <p>iii. 1 mg/kg every 12 hours</p> <p>KATEGORI PRESKRIBER A/KK:</p> <p><50 kg: 20mg OD 50-90 kg: 40mg OD 91-130 kg: 60mg OD 131-170 kg: 80mg OD >170 kg: 0.6mg/kg/day</p>
Fondaparinux Sodium 2.5 mg/0.5 ml Injection	A	All	<p>i) Treatment of unstable angina or non-ST segment elevation myocardial infarction [UA/NSTEMI] in patients for whom urgent invasive management (PCI) is not indicated.</p> <p>ii) Treatment of ST segment elevation myocardial infarction (STEMI) in patients managed with thrombolytics or are not receiving other forms of reperfusion therapy</p>	<p>i) ADULT more than 18 years: 2.5 mg once daily given by SC, initiated as soon as possible after diagnosis and continued for up to 8 days or until hospital discharge. If patient needs to undergo PCI, unfractionated heparin to be admin as per local practice protocol, taking into account the patient's bleeding risk and time of last dose of fondaparinux. Fondaparinux may be restarted no earlier than 2 hr after sheath removal.</p> <p>ii) ADULT more than 18 years: 2.5 mg once daily; first dose to be given IV (directly through an existing IV line or as infusion in 25 or 50 ml of 0.9% saline over 1-2 min), subsequent doses to be given SC. Treatment to be initiated as soon as diagnosis is made and continued up to a max of 8 days or until hospital discharge, whichever comes earlier. If patient needs to undergo non-primary PCI, unfractionated heparin to be admin as per local practice protocol, taking into account the patient's bleeding risk and time of last dose of fondaparinux. Fondaparinux may be restarted no earlier than 3 hr after sheath removal</p>
Heparin 1000 units/ml Injection	B	All	<p>i) Prophylaxis and treatment of venous thrombosis and pulmonary embolism.</p> <p>ii) Treatment of myocardial infarction and arterial embolism.</p> <p>iii) Prevention of clotting in arterial and heart surgery and for prevention of cerebral thrombosis</p>	<p>i) By IV injection, loading dose of 5000 units (10,000 units in severe pulmonary embolism) followed by continuous infusion of 15-25 units/kg/hr. By SC injection (for DVT) of 15,000 units every 12 hours (laboratory monitoring on daily basis essential to adjust dose). Small adult or child, lower loading dose then, 15-25 units/kg/hr by IV infusion, or 250 units/kg every 12 hours by SC injection.</p> <p>ii) As i), for unstable angina and acute peripheral arterial occlusion.</p> <p>iii) Prophylaxis in general surgery, by SC injection, 5000 units 2 hour before surgery, then every 8-12 hours for 7 days or until patient is ambulant, during pregnancy (with monitoring), 5000-10000 units every 12 hours. An adjusted dose regimen may be used for major orthopaedic surgery or low molecular weight heparin may be selected</p>
Heparin Sodium 50 units in Sodium Chloride Injection, 5 ml	B	All	To maintain patency of peripheral venous catheters	Flush with 5 ml (50 units) every 4 hours or as required
Streptokinase 1,500,000 IU Injection	A*	Medical & A&E	Acute myocardial infarction, acute pulmonary embolism	Myocardial infarction: 1,500,000 units over 30 - 60 minutes. Pulmonary embolism: 250,000 units by IV infusion over 30 minutes, then 100,000 units every hour for up to 12-72 hours with monitoring of clotting factors
Tenecteplase 10,000 unit (50 mg) Injection	A*	A&E	Acute myocardial infarction where streptokinase is contraindicated due to previous streptokinase induced antibodies. [Indicated when antibodies was given more than 5 days and less than 12 months]	Less than 60 kg: 30 mg, 60 - 69 kg: 35 mg, 70 - 79 kg: 40 mg; 80 - 90 kg: 45 mg, 90 kg or above: 50 mg. Administer single IV bolus over 5-10 seconds
Ticlopidine HCl 250 mg Tablet	A/KK	All	<p>i) Prevention of thrombotic stroke for patients who are sensitive /intolerant to Acetylsalicylic Acid</p> <p>ii) Maintenance of coronary bypass surgery or angioplasty</p> <p>iii) Maintenance of patency of access in patients on chronic haemodialysis</p>	250 mg twice daily taken with food
Warfarin Sodium 1mg Tablet	B	All	Treatment and prophylaxis of thromboembolic disorders	Initially 2 to 5mg per day. Maintenance dose 2-10mg daily according to the INR Dosing is individualised based on patient's INR and according product insert/protocol/ guideline.
Warfarin Sodium 2 mg Tablet	B	All	Treatment and prophylaxis of thromboembolic disorders	Initially 2 to 5mg per day. Maintenance dose 2-10mg daily according to the INR Dosing is individualised based on patient's INR and according product insert/protocol/ guideline.
Warfarin Sodium 3 mg Tablet	B	All	Treatment and prophylaxis of thromboembolic disorders	Initially 2 to 5mg per day. Maintenance dose 2-10mg daily according to the INR Dosing is individualised based on patient's INR and according product insert/protocol/ guideline.
Warfarin Sodium 5 mg Tablet	B	All	Treatment and prophylaxis of thromboembolic disorders	Initially 2 to 5mg per day. Maintenance dose 2-10mg daily according to the INR Dosing is individualised based on patient's INR and according product insert/protocol/ guideline.
B02. ANTIHEMORRHAGICS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Tranexamic Acid 100 mg/ml Injection	B	All	Haemorrhage associated with excessive fibrinolysis	ADULT: Slow IV 0.5-1 g (10 - 15 mg/kg) 3 times daily. Continuous infusion at a rate of 25 - 50 mg/kg daily. CHILD: slow IV 10 mg/kg/day 2-3 times daily ADULT: 1-1.5 g (15-25 mg/kg) 2-4 times daily
Tranexamic Acid 250 mg Capsule	B	All	Haemorrhage associated with excessive fibrinolysis	CHILD: 25 mg/kg/day 2-3 times daily. Menorrhagia (initiated when menstruation has started), 1 g 3 times daily for up to 4 days; maximum 4 g daily
Vitamin K1 10mg/ml Injection	B	All	Haemorrhage associated with hypoprothrombinaemia caused by overdose of anticoagulants	0.5 - 20 mg by very slow IV at a rate not exceeding 1 mg per minute
Vitamin K1 1mg/ml Injection	C+	All	Vitamin K deficiency in neonates	Prophylaxis of vitamin K deficiency bleeding in neonates Child: Neonate: 0.5-1 mg, given as a single dose via IM inj. Alternatively, 2 mg may be given orally, followed by a 2nd dose of 2 mg after 4-7 days. Intravenous Vitamin K deficiency bleeding in neonates Child: Infant: 1 mg by IV/IM/SC inj, further doses may be given if necessary.
Erythropoietin Human Recombinant 2000 units Prefilled Syringes	A	Nephrology	<p>i) Treatment of anaemia associated with chronic renal failure. Dialysis patients who have haemoglobin less than 10 g/dL or are exhibiting symptoms of anaemia although haemoglobin more than 10 g/dL and pre-transplant cases</p> <p>ii) Anaemia in cancer (non-myeloid malignancies) with concomitant chemotherapy</p>	<p>a) EPO Alfa: 150IU/kg three times weekly or 40,000IU once weekly</p> <p>b) EPO Beta: 450IU/kg once weekly or 30,000 IU once weekly</p> <p>Dosing is according to product insert.</p>

B03. ANTIANEMIC PREPARATIONS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Ferric Ammonium Citrate 800 mg/10 ml Paediatric Mixture 1ml = 17.2mg elemental iron	C	All	Prevention and treatment of iron-deficiency anaemias	Prophylaxis: 2 mg/kg/day elemental iron Treatment: 6 mg/kg/day elemental iron
Ferrous Fumarate 200 mg Tablet	C+	All	Prevention and treatment of iron-deficiency anaemias	Adult: Usual dose range: Up to 600 mg daily. May increase up to 1.2 g daily if necessary. Child: As syrup containing 140 mg(45 mg iron)/5ml. Preterm neonate: 0.6-2.4 ml/kg daily; up to 6 years old: 2.5-5ml twice daily
Folic Acid 5 mg Tablet	C+	All	i) For the prevention and treatment of folate deficiency states ii) For the prevention of neural tube defect in the foetus	i) ADULT initially 10-20mg mg daily for 14 days or until haematopoietic response obtained. Daily maintenance: 2.5 mg-10mg .CHILD up to 1 year:250 mcg/kg daily; 1 to 5 years:2.5mg/day;6-12 years: 5mg/day ii) 5 mg daily starting before pregnancy and continued through the first trimester
Iron Dextran 50 mg Fe/ml Injection	B	All	Severe iron deficiency anaemia	An initial test dose of 0.5 ml should be given over the desired route. For severe iron deficiency anaemia, 1-2 ml daily given by deep IM. Dosage is individualized according to total iron deficit
Iron (III) Hydroxide Sucrose Complex 20mg/ml Solution for Injection	B	All	Treatment of iron deficiency anaemia: a) where there is a clinical need for rapid iron supply b) in patients who cannot tolerate oral iron therapy or who are non-compliant c) in active inflammatory bowel disease where oral iron preparations are ineffective	ADULT and ELDERLY: Cumulative dose is to be administered in single doses of 100 - 200 mg of iron 2 - 3 times weekly depending on Hb level. Total cumulative dose: 1000 mg
Iron (III) Polymaltose Complex 10mg iron/ml syrup	A/KK	Paediatric	Treatment of latent iron deficiency and iron deficiency anaemia (manifest iron deficiency)	Infants (up to 1 year): 2.5-5ml daily (25-50mg iron) Children (1-12 years old): 5-10ml daily (50-100mg iron) Children (>12 years), adults: 10-30 ml daily (100-300mg iron) Prenant woman 20-30ml daily (200-300mg iron)
B05. BLOOD SUBSTITUTES AND PERFUSION SOLUTIONS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Dextrose 5 % Injection, 500 ml	B	All	For parenteral replenishment of fluid and minimal carbohydrate calories as required by the clinical condition of the patient	According to the needs of the patient
Dextrose 10 % Injection, 500 ml	B	All	For parenteral replenishment of fluid and minimal carbohydrate calories as required by the clinical condition of the patient	According to the needs of the patient
Dextrose 50 % Injection	B	All	For parenteral replenishment of fluid and minimal carbohydrate calories as required by the clinical condition of the patient	According to the needs of the patient
Human Albumin 20%, 50ml IV Soln	B	All	i) Acute hypovolemic shock ii) Hypoproteinaemia iii) Restoration and maintenance of circulating blood volume in cases of volume deficiency where the use of a colloid is indicated.	Dosing is according to product insert/ protocol.
Magnesium Sulphate 50% Injection	C	All	i) Treatment and prophylaxis of acute hypomagnesaemia ii) Prevention and treatment of life-threatening seizures in the treatment of toxemias of pregnancy (pre-eclampsia and eclampsia)	i)Mid hypomagnesemia (ADULT): 1gm magnesium sulphate (8mEq) IM every 6 hours for 4 doses. Severe hypomagnesemia (ADULT): 0.25 g/kg IM over 4 hours. Alternative dose of 5g may be given by slow intravenous infusion over 3 hours ii) Toxemia of pregnancy: An initial intravenous dose of 4gm of magnesium sulphate is recommended. Followed by an intramuscular dose of 4-5gm into each buttock. This may be followed by a dose of 4-5gm into alternate buttocks every 4 hours as needed. Alternatively, the initial dose IV dose may be followed by an infusion of 1-2gm/hr
Mannitol 20 % Injection (20 g/100 ml)	A	All	Cerebral oedema	0.25- 2 g/kg IV of a 15% to 25% solution over 30-60 minutes. Safety and efficacy not established in children under 12 years of age
Modified Fluid Gelatin 4% Injection	B	All	For primary volume replacement in hypovolaemia, perioperative stabilization of the circulation, haemodilution, extracorporeal circulation (haemodialysis and heart-lung machine)	ADULT 500 - 1500 ml given as IV infusion
Potassium Chloride 1 g/10 ml Injection	B	All	For the correction of severe hypokalaemia and when sufficient potassium cannot be taken by mouth	By slow IV infusion depending on the deficit or the daily maintenance requirements. 1 g diluted in 500 ml normal saline or glucose and given slowly over 2 - 3 hours
Potassium Dihydrogen Phosphate Powder 1g = 7.35mmol K ₂ PO ₄	B	All	For treatment of hypophosphataemia	According to the needs of the patient
Sodium Bicarbonate 8.4% (1 mmol/ml) Injection, 10 ml	B	All	i) For acceleration of excretion in drug intoxication (where excretion of the drug into the urine is accelerated by elevated urine pH) ii) For metabolic acidosis secondary to underlying diseases	According to the needs of the patient. In severe shock due to cardiac arrest: 50 ml by IV
Sodium Bicarbonate, Citric Acid, Sodium Citrate and Tartaric Acid - 4 g per sachet	B	All	For relieving of discomfort in mild urinary tract infection, symptomatic relief of dysuria to enhance the action to certain antibiotics especially some sulphonamides. In gout as urinary alkalizers to prevent crystallisation of urates	4 - 8 g (1-2 sachets) dissolved in a glass of cold water 4 times daily as prescribed
Sodium Bicarbonate Powder 1g = 12mmol Na ₂ HCO ₃	B	All	For acceleration of excretion in drug intoxication (where excretion of the drug into the urine is accelerated by elevated urine pH) and for acidosis	According to the needs of the patient.
Sodium Chloride (Half Strength) 0.45% Injection, 500 ml	B	All	For replenishing fluid and for restoring / maintaining the concentration of sodium and chloride ions	100 - 1000 ml by IV or according to the needs of the patient
Sodium Chloride 0.18% with Dextrose 10% Injection, 500 ml	B	All	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions	According to the needs of the patient
Sodium Chloride 0.18% with Dextrose 4.23% Injection, 500 ml	B	All	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions	According to the needs of the patient
Sodium Chloride 0.45% with Dextrose 5% 500mL IV soln	B	All	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions	According to the needs of the patient
Sodium Chloride 0.9% Injection	C+	All	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions	100 - 1000 ml by IV or according to the needs of the patient
Sodium Chloride 0.9% with Dextrose 5% Injection, 500 ml	C+	All	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions	According to the needs of the patient
Sodium Chloride 3% Injection, 500 ml	B	All	Acute dilutional hyponatraemia	According to the needs of the patient
Sodium Chloride Powder 1g = 17.1mmol Na	B	All	For restoring or maintaining the concentration of sodium and chloride ions	According to the needs of the patient
Sodium Lactate Compound (Hartmanns Solution), 500 ml	C	All	Replacement of extracellular losses of fluid and electrolytes, as an alkaliniser agent	100-1000 ml by IV or according to the needs of the patient

C. CARDIOVASCULAR SYSTEM				
C01. CARDIAC THERAPY				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Adenosine 3 mg/ml Injection	B	All	Rapid conversion of paroxysmal supraventricular tachycardia to sinus rhythm	ADULT: Initially: 3 mg given as a rapid IV bolus (over 2 seconds). Second dose: If the first dose does not result in elimination of the supraventricular tachycardia with in 1 or 2 minutes, 6 mg should be given also as a rapid IV bolus. Third dose: If the second dose does not result in elimination of the supraventricular tachycardia with in 1-2 minutes, 12 mg should be given also as a rapid IV bolus
Adrenaline Acid (Epinephrine) Tartrate 1 mg/ml Injection	B	All	Cardiopulmonary resuscitation	1 mg by intravenous injection repeated every 3-5 minutes according to response
Amiodarone 150mg/3 ml Injection	A/KK	Medical	i) Arrhythmias ii) Cardiopulmonary resuscitation of shock-resistant ventricular fibrillation in cardiac arrest	i) Initial: 5mg/kg over 20-120minutes Maintenance: 10-20mg/kg/24hr Max. dose: 1.2g/24hr. ii) Initial: 300mg or 5mg/kg rapid Additional 150mg if condition persists. Dosing is according to product insert / protocol.
Amiodarone 200 mg Tablet	A*	Nephrology	Arrhythmias	200 mg 3 times daily for 1 week, then reduced to 200 mg twice daily for another week. Maintenance dose, usually 200 mg daily or the minimum required to control the arrhythmia. Dosing is according to product insert / protocol.
Digoxin 0.25 mg Tablet	B	All	Heart failure , with atrial fibrillation, supraventricular arrhythmias (particularly, atrial fibrillation)	Rapid digitalisation: 0.75 -1.5 mg in divided doses over 24 hours; less urgent digitalisation, 250 mcg-500 mcg daily (higher dose may be divided). Maintenance : 62.5mg -500 mcg daily (higher dose may be divided) according to renal function and , in atrial fibrillation, on heart rate response; usual range, 125-250 mcg daily (lower dose may be appropriate in elderly)
Digoxin 500mcg/2ml Inj	A	All	Heart failure , with atrial fibrillation, supraventricular arrhythmias (particularly, atrial fibrillation)	Rapid digitalisation: ADULT & CHILD over 10 years, initially 0.75 - 1.5 mg, followed by 250 mcg 6 hourly until digitalisation is complete
Digoxin 62.5 mcg Tablet	B	All	Heart failure , with atrial fibrillation, supraventricular arrhythmias (particularly, atrial fibrillation)	Rapid digitalisation: 1-1.5 mg in divided doses over 24 hours; less urgent digitalisation, 250 mcg-500 mcg daily (higher dose may be divided). Maintenance: 62.5 - 500 mcg daily (higher dose may be divided) according to renal function, and in atrial fibrillation, on heart-rate response; usual range :125 - 250 mcg daily (lower doses may be appropriate in the elderly)
Dobutamine HCl 250 mg/20 ml Injection	A	All	Hypotension and heart failure	Initial 0.5-1 mcg/kg/min by IV, maintenance 2.5-10mcg/kg/min. Frequently, doses up to 20mcg/kg/min are required for adequate hemodynamic improvement. On rare occasions, infusion rates up to 40mcg/kg/min
Dopamine HCl 40 mg/ml Injection, 5 ml	B	All	Non-hypovolemic hypotension	Initial dose 2-5 mcg/kg/min with incremental changes of 5-10 mcg/kg/min at 10-15 minutes intervals until adequate response is noted. Most patients are maintained at less than 20 mcg/kg/min. If dosage exceeds 50 mcg/kg/min, assess renal function frequently
Glycerol Trinitrate 0.5 mg Tablet	C	All	Prophylaxis and treatment of angina and left ventricular failure	0.5-1 mg sublingually may be repeated every 5 minutes until relief is obtained. Seek physician if the pain persists after a total of 3 tablets in a 15 minutes period.
Glycerol Trinitrate 25 mg/5 ml Injection	A	All	i) Angina pectoris. ii) Congestive heart failure. iii) Control of hypertensive episodes. iv) Production of controlled hypotension during surgery.	Initial: 5-25mcg/min Dosing is individualised and according to product insert or protocol.
Isosorbide Dinitrate 10 mg Tablet	B	All	Prophylaxis and treatment for: i) Angina ii) Left ventricular failure	i) 30 - 120 mg daily in divided doses ii) 40 - 160 mg, up to 240 mg if required
Isosorbide-5-Mononitrate 60mg SR Tablet	A/KK	All	Angina pectoris	Initial: 30mg daily. Maintenance: 30-60mg once daily. Max. 120mg once daily.
Lignocaine HCl (Lidocaine) 100 mg/5 ml Injection	B	All	Ventricular tachycardia and ventricular fibrillation. For IV use. To be diluted before use	50-100 mg IV as a bolus, repeated after 5 minutes if necessary. Maintenance : 1-4 mg/min by IV infusion under ECG monitoring
Noradrenaline Acid Tartrate 4 mg/4 ml Injection	A/KK	All	i) For blood pressure control in certain acute hypotensive states (e.g.pheochromocytomectomy, sympathectomy, poliomyelitis, spinal anesthesia, myocardial infarction, septicemia, blood transfusion, and drug reactions). ii) As an adjunct in the treatment of cardiac arrest and profound hypotension	Infuse and titrate to desired pressure response. Range: 0.05 - 0.5 mcg/kg/minute
Trimetazidine 20 mg Tablet	B	All	Prophylactic treatment of episodes of angina pectoris	20 mg 3 times daily
Trimetazidine 35 mg MR Tablet	B	All	Prophylactic treatment of episodes of angina pectoris	35 mg twice daily in the morning and evening with meals
C02. ANTIHYPERTENSIVES				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Hydralazine 20mg Inj	B	All	Hypertensive crisis in pregnancy	i) Slow IV injection, ADULT: 5-10 mg diluted with 10ml sodium chloride 0.9%. May be repeated after 20-30 minutes if necessary. ii) IV infusion 200-300 mcg/minutes. Maintenance dose 50-150 mca/minutes
Methyldopa 250 mg Tablet	B	All	Hypertension	Adult: 250 mg 2 - 3 times daily, gradually increased at intervals of 2 or more days, maximum; 3 g/day. Elderly: initially 125 mg twice daily, increased gradually, maximum; 2 g daily. Child: Initially, 10 mg/kg or 300 mg/m2 daily in 2-4 divided doses; increase as necessary. Max: 65 mg/kg, 2 g/m2 or 3 g daily, whichever is least.
Minoxidil 5 mg Tablet	A*	Nephrology	Severe hypertension	ADULTS and CHILD above 12 years old: Initially 5 mg daily in single or divided doses (elderly 2.5 mg). May increase by 5 - 10 mg daily at intervals of 3 or more days until optimum control is achieved. Maximum 50 mg daily
Prazosin HCl 1 mg Tablet	B	All	Hypertension	Initially 0.5 mg 2 - 3 times daily, the initial dose on retiring to bed at night; increased to 1 mg 2 - 3 times daily after 3 - 7 days: further increased if necessary to maximum 20 mg daily
Prazosin HCl 2 mg Tablet	B	All	Hypertension	Initially 0.5 mg 2 - 3 times daily, the initial dose on retiring to bed at night; increased to 1 mg 2 - 3 times daily after 3 - 7 days: further increased if necessary to maximum 20 mg daily
Prazosin HCl 5 mg Tablet	B	All	Hypertension	Initially 0.5 mg 2 - 3 times daily, the initial dose on retiring to bed at night; increased to 1 mg 2 - 3 times daily after 3 - 7 days: further increased if necessary to maximum 20 mg daily
C03. DIURETICS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Amiloride HCl 5 mg & Hydrochlorothiazide 50 mg Tablet	B	All	i) Diuretic as an adjunct to the management of oedematous states ii) Hypertension	i) Initially 1 - 2 tab daily adjusted according to response. Max : 4 tabs daily. ii) 1 -2 tabs daily as a single or divided dose
Furosemide 20 mg/2 ml Injection	B	All	Oedema	Initial: 20-50mg once via slow IV or IM Maintenance: Increase by 20mg every 2 hours and titrate to an effective dose if necessary. CHILD: 0.5 - 1.5 mg/kg 6-24hourly. Dosing is individualised and according to product insert / protocol.
Furosemide 40 mg Tablet	B	All	Oedema	ADULT: Initial: 20-80mg daily Max. 600mg/day CHILD: 1-3mg/kg daily Max. 40mg/day Dosing is individualised and according to product insert / protocol.

Hydrochlorothiazide 25mg Tablet	B	All	Diuretic, hypertension	ADULT: Diuretics; 25-200 mg daily. Hypertension 12.5-25 mg daily CHILD: Oedema and hypertension; Adjunct: 1 to 2 mg/kg ORALLY daily in single or two divided doses; Children 2-12 years old MAX dose, not to exceed 100 mg ORALLY daily; Infants less than 6 months old, may require doses up to 3 mg/kg ORALLY daily in two divided doses. Infants up to 2 yrs old: MAX dose, not to exceed 37.5 mg ORALLY daily
Spironolactone 25 mg Tablet	B	All	Oedema and ascites in cirrhosis of the liver, congestive heart failure	ADULT: 100 - 200 mg daily in divided doses. Increase to 400 mg if required. CHILD: initially 3 mg/kg daily in divided doses
C05. VASOPROTECTIVES				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Diosmin 450 mg & Hesperidin 50 mg Tablet	B	All	i) Haemorrhoids ii) Chronic venous insufficiency	i) Acute attack: 6 tablets daily for the first 4 days, then 4 tablets daily in 2 divided doses for 3 days and 2 tablets thereafter. Chronic: 2 tablets daily ii) 2 tab daily with meals
Zinc oxide, benzyl benzoate and balsam peru suppository	C	All	For relief of pruritus, burning and soreness in patients with haemorrhoids and perianal conditions	Insert 1 suppository night and morning after bowel movements; do not use for longer than 7 days OR please refer to the product insert.
C07. BETA BLOCKING AGENTS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Atenolol 100 mg Tablet	B	All	i) Hypertension ii) Arrhythmias iii) Angina pectoris iii) Myocardial infarction	i), ii) & iii) 50 - 100 mg daily iv) Dosing is individualised and according to product insert / protocol.
Bisoprolol Fumarate 2.5 mg Tablet	B	All	i) Hypertension ii) Coronary heart disease (angina pectoris) iii) Treatment of stable congestive cardiac failure in addition to ACEI's and diuretics	1.25 mg once daily, gradually titrate to maximum tolerable dose (i) & (ii): Max 20mg/ day (iii): Max 10mg/ day
Bisoprolol Fumarate 5 mg Tablet	B	All	i) Hypertension ii) Coronary heart disease (angina pectoris) iii) Treatment of stable congestive cardiac failure in addition to ACEI's and diuretics	1.25 mg once daily, gradually titrate to maximum tolerable dose (i) & (ii): Max 20mg/ day (iii): Max 10mg/ day
Labetalol HCl 100 mg Tablet	B	All	i) Mild, moderate or severe hypertension ii) Hypertension in pregnancy	i) & ii) Initial: 100mg twice daily Maintenance: 200-400mg twice daily Max. 2400mg daily in 3 or 4 divided doses Dosing is individualised and according to product insert / protocol.
Labetalol HCl 25mg/5ml Inj	B	All	Hypertension crisis	ADULT: 20mg injected slowly for at least 2 min, followed by 40-80mg dose every 10 min, if necessary upto 300 mg. Patient should remain supine during and 3 hr after the procedure.
Metoprolol Tartrate 100 mg Tablet	B	All	i) Hypertension ii) Angina pectoris iii) Myocardial infarct iv) Cardiac arrhythmias v) Migraine prophylaxis vi) Hyperthyroidism	i) Initial: 100mg daily in 1 or 2 divided doses Maintenance: 200mg daily in divided doses Max. 400mg daily ii) 50-100mg 2-3 times daily Max. 400mg daily iii) Initial: 50mg twice daily Maintenance: 100mg twice daily iv) Initial: 50mg 2-3 times daily Maintenance: 300mg daily in divided doses v) 100-200mg daily in 2 divided doses vi) 150-200mg daily in 3-4 divided doses Dosing is individualised and according to product insert/protocol.
Propranolol HCL 40 mg Tablet	B	All	i) Hypertension ii) Angina pectoris iii) Myocardial infarct iv) Cardiac arrhythmias v) Migraine prophylaxis vi) Hyperthyroidism vii) Hypertrophic obstructive cardiomyopathy viii) Portal hypertension	i) Initial: 40-80 mg twice daily Maintenance: 160-320 mg daily. Max. 640 mg daily ii) Initial: 40 mg 2-3 times daily Maintenance: 120-240 mg daily Max. 480mg daily iii) Initial (within 5-21 days of MI): 40 mg 4 times daily for 2-3 days Maintenance: 80 mg twice daily iv) 10 - 40 mg 3 - 4 times daily. Max. 240 mg/day. v) Initial: 40 mg 2-3 times. Maintenance: 80-160 mg daily. Max. 240 mg/day. vi) 10-40 mg 3-4 times daily. Max. 240 mg/day. vii) 10-40 mg 3-4 times daily viii) Initial: 40 mg twice daily Maintenance: 40-80mg 3 times daily Max. 320mg daily Dosing is individualised and according to product insert / protocol.
Propranolol HCl 1mg/ml Injection	A	All	Arrhythmias and thyrotoxicosis crisis	Slow IV injection in a dose of 1 mg over 1 minute, repeated if necessary every 2 minutes until a maximum of 10 mg has been given in conscious patients and 5 mg in patients under anaesthesia. CHILD: 25 - 50 mcg/kg slow IV with appropriate monitoring
C08. CALCIUM CHANNEL BLOCKERS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Amlodipine 10 mg Tablet	B	All	Hypertension	5 mg once daily. Max: 10 mg once daily
Amlodipine 5 mg Tablet	B	All	Hypertension	5 mg once daily. Max: 10 mg once daily
Diltiazem HCl 30 mg Tablet	B	All	i) Treatment of angina ii) Hypertension	Initially 30mg tds, may increase to 60mg tds (elderly initially twice daily); increased if necessary to 360 mg daily.
Felodipine 10 mg Tablet	A/KK	All	Hypertension	Initiate at 5 mg once daily. Usual dose, 5 - 10 mg once daily in the morning
Felodipine 5 mg Tablet	A/KK	All	Hypertension	Initiate at 5 mg once daily. Usual dose, 5 - 10 mg once daily in the morning
Nifedipine 10 mg Tablet	B	All	Hypertension	Initial dose of 10 mg twice daily. Usual range 10 - 30 mg 3 times daily. Maximum: 120 - 180 mg per day. Elderly: Dose reduction may be necessary.
Verapamil HCl 40 mg Tablet	B	All	i) Supraventricular tachyarrhythmias (SVT) prophylaxis ii) Angina iii) Hypertension	i) 120-480mg in 2-3 divided doses ii) 80mg - 120mg 3 times daily iii) Initial: 240 mg daily in 2-3 divided doses. Max: 480 mg daily
Verapamil HCl 5 mg/2 ml Injection	A/KK	All	Supraventricular tachycardia	Initially 5-10mg given by slow IV over at least 2 minutes. The dose can be repeated 10mg 30 minutes after the first dose if the initial response is not adequate.
C09. AGENTS ACTING ON THE RENIN-ANGIOTENSIN SYSTEM				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Captopril 25 mg Tablet	B	All	i) Hypertension ii) Congestive heart failure iii) Post-myocardial infarction iv) Diabetic kidney disease	i) Initial: 25-75mg in 2-3 divided doses Maintenance: 100-150mg in 2-3 divided doses ii) Initial: 6.25-12.5mg 2-3 times daily Maintenance: 75-150mg daily in divided doses iii) Initial: 6.25mg followed by 12.5mg and then 25mg Maintenance: 75-150mg daily in 2-3 divided doses iv) 75-100 mg in divided doses Dosing is individualised and according to product insert / protocol.
Enalapril 20 mg Tablet	B	All	i) Hypertension ii) Heart failure iii) Prevention of coronary ischemic events in patients with left ventricular dysfunction	i) Initial: 5mg once daily. Maintenance: 10-20mg once daily Max. 40mg daily in 1-2 divided doses ii) & iii) Initial: 2.5mg once daily Maintenance: 20mg in 1-2 divided doses Max. 40mg daily in 2 divided doses Dosing is individualised and according to product insert / protocol.
Enalapril 5 mg Tablet	B	All	i) Hypertension ii) Heart failure iii) Prevention of coronary ischemic events in patients with left ventricular dysfunction	i) Initial: 5mg once daily. Maintenance: 10-20mg once daily Max. 40mg daily in 1-2 divided doses ii) & iii) Initial: 2.5mg once daily Maintenance: 20mg in 1-2 divided doses Max. 40mg daily in 2 divided doses Dosing is individualised and according to product insert / protocol.

Losartan 50 mg Tablet	B	All	Patients intolerant to ACE inhibitors in: i) Hypertensive patient with left ventricular hypertrophy ii) Type 2 Diabetes Mellitus with chronic kidney disease iii) Hypertension	i), ii) & iii) Initial: 50mg once daily Max: 100mg once daily Dosing is individualised and according to product insert / protocol.
Perindopril 4 mg Tablet	B	All	i) Hypertension ii) Stable coronary artery disease iii) Heart failure	i) & ii) Initial: 4mg once daily Max: 8mg daily iii) Initial: 2mg once daily Maintenance: 4mg once daily Dosing is individualised and according to product insert / protocol.
Sacubitril/ Valsartan 100 mg Tablet	A*	Medical	To reduce the risk of cardiovascular death and hospitalization for heart failure in adult patients with chronic heart failure. Prescribing Restriction: i. For heart failure patients with reduced ejection fraction ii. NYHA class II-IV iii. Second line for patients intolerant of or not responding to ACEI or ARB.	The recommended starting dose of sacubitril/valsartan is one tablet of 100 mg twice daily. The dose should be doubled at 2-4 weeks to the target dose of one tablet of 200 mg twice daily, as tolerated by the patient. For the following patients, initiate with sacubitril/valsartan 50 mg twice daily. - Not currently on ACEI/ ARB - Switching from low dose of ACEI/ ARB - In patients with systolic BP \geq 100 to 110 mmHg. - In patients with moderate renal impairment (eGFR 30-60 ml/min/1.73 m ²) - In patients with moderate hepatic impairment (Child-Pugh B classification) For patients "Not currently on ACEI/ ARB" and "switching from low dose of ACEI/ ARB", double the dose every 3-4 weeks to achieve the target dose of 200 mg twice daily as tolerated by the patient.
Telmisartan 40 mg Tablet	A/KK	Medical & Nephrology	Patients intolerant to ACE inhibitors in: i) Hypertension ii) Reduction of the risk of myocardial infarction, stroke, or death from cardiovascular causes in patients 55 years or older at high risk of developing major cardiovascular events who are unable to take ACE inhibitors	i) 40mg - 80mg once daily. Max: 160mg daily ii) 80mg once daily Dosing is individualised and according to product insert / protocol.
Telmisartan 80 mg Tablet	A/KK	Medical & Nephrology	Patients intolerant to ACE inhibitors in: i) Hypertension ii) Reduction of the risk of myocardial infarction, stroke, or death from cardiovascular causes in patients 55 years or older at high risk of developing major cardiovascular events who are unable to take ACE inhibitors	i) 40mg - 80mg once daily. Max: 160mg daily ii) 80mg once daily Dosing is individualised and according to product insert / protocol.
Valsartan 80 mg Tablet	A/KK	Medical & Nephrology	Patients intolerant to ACE inhibitors in: i) Heart failure ii) Post myocardial infarction iii) Hypertension	i) Initial: 40mg twice daily. Titrate up to highest tolerated dose. Max: 320mg daily in divided doses ii) Initial: 20mg twice daily Titrate up to 160mg over next few weeks. Max: 160mg twice daily iii) 80mg or 160mg once daily Max: 320mg daily Dosing is individualised and according to package insert / protocol.

C10. SERUM LIPID REDUCING AGENTS

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Atorvastatin 20 mg Tablet	B	All	i) Hypercholesterolaemia ii) Prevention of cardiovascular disease	i) & ii) 10 mg once daily. Maximum: 80 mg daily
Atorvastatin 40 mg Tablet	B	All	i) Hypercholesterolaemia ii) Prevention of cardiovascular disease	i) & ii) 10 mg once daily. Maximum: 80 mg daily
Atorvastatin 80 mg Tablet	A/KK	Medical & Nephrology	i) Hypercholesterolaemia ii) Prevention of cardiovascular disease	i) & ii) 10 mg once daily. Maximum: 80 mg daily
Ezetimibe 10 mg Tablet	A*	Medical	i) Co-administration with statins for patients who have chronic heart disease or are chronic heart disease equivalent or familial hypercholesterolaemia with target LDL-C not achieved by maximum dose of statins ii) Monotherapy in patients with documented biochemical intolerance to statins	10 mg once daily. Not recommended for children less than 10 years old
Gemfibrozil 300 mg Capsule	A/KK	Medical & Nephrology	Treatment of hyperlipoproteinaemias (TYPES IA, IIB, III, IV, V)	ADULT: 1200 mg/day in 2 divided doses, 30 minutes before breakfast and dinner. Dose range from 0.9-1.5 g daily
Simvastatin 20 mg Tablet	B	All	i) Hypercholesterolaemia ii) Prevention of cardiovascular disease	i) & ii) 10 - 40 mg once daily. Maximum: 80 mg daily
Simvastatin 40 mg Tablet	B	All	i) Hypercholesterolaemia ii) Prevention of cardiovascular disease	i) & ii) 10 - 40 mg once daily. Maximum: 80 mg daily

D. DERMATOLOGICALS

D01. ANTIFUNGALS FOR DERMATOLOGICAL USE

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Miconazole 2 % Cream	C	All	i) Fungal infections: Tinea pedis, Tinea corporis, Tinea capitis and other dermatophyte infections caused by Trichophyton and Epidermophyton species. ii) Antifungal agent that has been in various candida infections including vaginal candidiasis.	Apply sparingly and rub gently onto affected area 1-2 times daily continuing for 14 days after lesions have healed

D02. EMOLLIENTS AND PROTECTIVES

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Aqueous Cream	C+	All	As an emollient for dry skin. Can be used as soap substitute for bathing.	As a soap or apply to the skin as an emollient cream
Zinc Oxide Cream	C+	All	Skin protective in various skin conditions such as nappy rash, eczema and problem skin	Apply 3 times daily or as required

D04. ANTIPRURITICS, INCL. ANTIHISTAMINES, ANAESTHETICS, ETC.

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Betamethasone 17-Valerate 0.01% Cream (1:10)	B	All	Topical corticosteroid indicated for the relief of inflammatory and pruritic manifestation of steroid-responsive dermatoses.	Apply sparingly to affected area 2 times daily then reduced to once daily when improvement occurs.
Betamethasone 17-Valerate 0.025% Cream (1:4)	B	All	Topical corticosteroid indicated for the relief of inflammatory and pruritic manifestation of steroid-responsive dermatoses.	Apply sparingly to affected area 2 times daily then reduced to once daily when improvement occurs.
Calamine Cream	C+	All	Soothes and relieves nappy rashes, prickly heat, minor skin irritations, insect bites and sunburn. Pruritic skin conditions.	Apply to the affected area as required, 1-3 times daily
Calamine Lotion	C+	All	Soothes and relieves nappy rashes, prickly heat, minor skin irritations, insect bites and sunburn. Pruritic skin conditions	Apply to the affected area as required, 1-3 times daily
Hydrocortisone 1% Cream	B	All	Inflammatory and pruritic manifestations of corticosteroid responsive dermatoses	Apply sparingly to the affected area. Adult: 3-4 times daily. Children: 1-2 times daily

D06. ANTIBIOTICS AND CHEMOTHERAPEUTICS FOR DERMATOLOGICAL USE

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Fusidic Acid 2% Cream	B	All	Treatment of impetigo, infected wounds, folliculitis, boils, sycosis barbae, carbuncles, hidradenitis, paronychia and erythrasma where skin infections caused by Staphylococci, Streptococci, Propionibacterium acnes, Corynebacterium minutissimum, and other organisms sensitive to fusidic acid.	Apply to affected area 2 - 3 times daily for a duration of 7 days. Do not use for more than 2 weeks.
Gentamicin 0.1% Cream	A*	Nephrology	For the treatment of primary and secondary skin infections caused by susceptible bacteria.	Apply 2 - 3 times daily
Mupirocin 2% Cream	A	Nephrology	Skin infection by Staphylococcus aureus (including MRSA), Staphylococcus epidermidis and beta-haemolytic streptococcus	Adults and child over 1 year, apply up to 3 times daily for up to 10 days
Silver Sulphadiazine 1 % Cream	B	All	Prevention and treatment of infections in severe burns, leg ulcers where infections may prevent healing and for the prophylaxis of infections in skin grafting	Burns: Apply 3 mm thick layer twice daily with sterile applicator. Leg ulcer: apply at least 3 times a week

D08. ANTISEPTICS AND DISINFECTANTS

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Acridlavine 0.1% Lotion	C+	All	Infected skin, lesions, cuts, abrasions, wounds and burns.	Apply undiluted three times daily to the affected part .
Alcohol 70% Solution	C+	All	Use as antiseptic and disinfectant	Apply to the skin undiluted or when needed
Chlorhexidine Gluconate 2% in Alcohol 70%	C	All	Use as disinfectant in central venous catheter care bundle	Skin Preparation: Use Chlorhexidine Gluconate 2% in Isopropyl Alcohol 70% and allow to dry. Catheter access: Apply to catheter ports or hubs prior to accessing the line for administering fluids or injections
Chlorhexidine gluconate 1% cream	C+	All	As a disinfectant cream. It can be used for disinfection or lubricating during gynaecological and obstetric procedures or childbirth.	Apply as required on affected area after cleaning
Chlorhexidine Gluconate 5% Solution	C+	All	Use as antiseptic and disinfectant in: i) Preoperative skin disinfection; ii) Emergency disinfection of instruments; iii) Wounds or burns.	To be used as diluted solution: (i) 0.5 % w/v Aqueous solution : Dilute 10 ml of solution with 70% alcohol up to 100ml. (ii) 0.5 % w/v Aqueous solution : Dilute 10 ml of solution with 70% alcohol up to 100ml. Immerse for 2 minutes (iii) 0.05 % w/v aqueous solution : Dilute 1 ml of solution with 100 ml of sterile water.
Hydrogen Peroxide 20 vol Solution	C	All	Skin disinfection, particularly cleansing and deodorising wounds and ulcers	Hydrogen Peroxide 6% (=approx. 20 vol) shall be dispensed. For cleansing wounds: 1.5% to 6% solution apply 2-3 times daily or when necessary. As a mouthwash: rinse the mouth for 2-3 minutes with 15ml of hydrogen peroxide 6% diluted in half a tumblerful of warm water 2-3 times daily. Disinfecting cleaned equipment: immersion for 30 minutes in 6% solution. As ear drop for removal of wax: hydrogen peroxide 6% diluted with 3 parts of water preferably just before use
Potassium Permanganate 1:10,000 Solution	C+	All	Cleansing and deodorising suppurative eczematous reactions and wounds	Use as wash (use as final rinse) / dab/ wet wrap (for 20 minutes) until there is no weeping lesions
Povidone Iodine 10% (eqvt. to 1% iodine) Solution	B	All	Skin operation prior to surgery, in cleansing open wounds, as an antiseptic for operative wounds infections	To be applied undiluted in pre-operative skin disinfection and general antiseptis.

G. GENITO URINARY SYSTEM AND SEX HORMONES
G01. GYNECOLOGICAL ANTINFECTIVES AND ANTISEPTICS

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Clotrimazole 500mg vaginal tablet	B	All	Vaginal candidiasis	500 mg as a single one-time dose

G02. OTHER GYNECOLOGICALS

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Carboprost Tromethamine 250mcg Inj	A*	O&G	Treatment of refractory postpartum haemorrhage unresponsive to conventional methods of management.	Initially 250 mcg deep IM inj. The dose may be repeated at intervals of 15-90 min if necessary. Max total dose: 2000 mcg (8 doses).
Oxytocin 5 units & Ergometrine Maleate 0.5mg/ml Injection	C+	O&G & A&E	i) Prevention and treatment of postpartum haemorrhage associated with uterine atony. ii) Active management of third stage of labour	i) 1 ml IM, may be repeated after 2 hours. Should not exceed 3 ml within 24 hours ii) For routine management of third stage of labour, 1 ml IM following delivery of the anterior shoulder or immediately after delivery of the child

G03. SEX HORMONES AND MODULATORS OF THE GENITAL SYSTEM

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Clomiphene Citrate 50 mg Tablet	A	O&G	Treatment of ovulatory failure in women desiring pregnancy	Initial: 50 mg once daily for 5 days. Increase to 100mg OD for 5 days if there is no response (commence as early as 30 days after the previous course).
Conjugated Estrogens 0.3 mg Tablet	A	O&G	i. Prevention and management of osteoporosis associated with estrogen deficiency. ii. Female hypoestrogenism. iii. Moderate to severe vasomotor symptoms associated with estrogen deficiency. iv. Atrophic vaginitis and atrophic urethritis.	i) 0.3 - 0.625 mg daily ii) 0.3- 1.25mg daily for 3weeks, then off for 1 week iii) & iv) 0.3mg-1.25mg daily
Conjugated Estrogens 0.625 mg Tablet	A	O&G	i. Prevention and management of osteoporosis associated with estrogen deficiency. ii. Female hypoestrogenism. iii. Moderate to severe vasomotor symptoms associated with estrogen deficiency. iv. Atrophic vaginitis and atrophic urethritis.	i) 0.3 - 0.625 mg daily ii) 0.3- 1.25mg daily for 3weeks, then off for 1 week iii) & iv) 0.3mg-1.25mg daily
Conjugated Estrogens 0.625mg/g Cream	A	O&G	Treatment of atrophic vaginitis, dyspareunia and kraurosis vulvae	i. Atrophic Vaginitis and Kraurosis Vulvae: Initial dose: Intravaginal 0.5g daily for 21 days and then off for 7 days (cyclical regimen). Dose range: 0.5- 2g daily based on individual response. ii. Dyspareunia: 0.5g intravaginally twice weekly continuous regimen or in a cyclic regimen of 21 days of therapy followed by 7 days off of therapy.
Dydrogesterone HCl 10 mg Tablet	A/KK	O&G & A&E	i) Dysmenorrhoea ii) Endometriosis iii) Dysfunctional uterine bleeding (to arrest and to prevent bleeding) iv) Threatened abortion v) Habitual abortion vi) Post menopausal complaints (hormone replacement therapy in combination with oestrogen)	i) 10 mg bd from day 5 - 25 of cycle ii) 10 mg bd - tds from day 5 - 25 of the cycle or continuously iii) To arrest bleeding :10 mg bd with an estrogen once daily for 5 - 7 days, To prevent bleeding : 10 mg bd with an estrogen once daily from day 11 - 25 of the cycle iv) 40 mg at once, then 10mg 8hrly until symptoms remit v) 10 mg bd until 20th week of pregnancy vi) 10-20 mg daily during last 12-14 days of each cycle
Medroxyprogesterone Acetate 5mg Tablet	B	O&G	i) Secondary amenorrhoea ii) Abnormal uterine bleeding due to hormonal imbalance	i) 5-10 mg daily for 5-10 days started anytime during cycle ii) 5-10 mg daily for 5-10 days on day 16-21 of menstrual cycle. Optimum secretory transformation 10 mg daily for 10 days from day 16 of the cycle

H. SYSTEMIC HORMONAL PREPARATIONS, EXCL. SEX HORMONES AND INSULINS				
H01. PITUITARY AND HYPOTHALAMIC HORMONES AND ANALOGUES				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Oxytocin 10 units/ml Injection	B	O&G & A&E	i) Induction of labour ii) Inadequate uterine effort iii) Management of third stage of labour iv) Prevention and treatment of post-partum haemorrhage v) As adjunctive therapy for the management of incomplete, inevitable or missed abortion	i & ii) Initiate at 2 milliunits/min, may be increased by 4 milliunits/min gradually at 30 minute intervals. Dose may be decreased once a contraction pattern similar to normal labour is achieved and labor has progressed to 5 - 6 cm dilation. Maximum dose of oxytocin for multiparae - 16 milliunits/min and nulliparae-32 milliunits/min. iii) IV/IM: 5 -10 units. iv) IV : 5-10 units followed by IV infusion at 10 units/hour. The dosing is individualized based on maternal, fetal response and product insert / protocol
Octreotide 0.05 mg/ml Injection	A	All	i) Acromegaly treatment in patients in whom surgery or radiotherapy is inappropriate or ineffective- based on level of growth hormone and high IGF-1 and residual pituitary tumor ii) Relief of symptoms associated with functional gastro-entero-pancreatic (GEP) endocrine tumors: • Carcinoid tumors with features of the carcinoid syndrome. • VIPomas, Glucagonomas • Gastrinomas/Zollinger-Ellison syndrome • Insulinomas • GRFomas. iii) Prevention of complications following pancreatic surgery iv) Emergency management of bleeding gastro-esophageal varices in patients with cirrhosis	i) Initially 0.05-0.1mg SC every 8 or 12 hours. Optimal daily dose is 0.3mg, not to exceed maximum dose of 1.5mg/day. ii) Initially 0.05 mg once or twice daily, gradually increase to 0.1-0.2mg 3 times daily. Higher doses may be required in exceptional circumstances. iii) 0.1 mg 3 times daily for 7 consecutive days, starting on the day of operation, at least 1 hour before laparotomy iv) ADULT: 50mcg bolus, followed by continuous infusion of 25-50mcg/hour for 2-5 days. CHILD: IV 1-5 mcg/kg/hour The dosing is individualized according to product insert / protocol
H02. CORTICOSTEROIDS FOR SYSTEMIC USE				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Dexamethasone 4 mg Tablet	A	All	i) Prophylaxis and management of nausea and vomiting in cancer chemotherapy, post-operation and palliative care ii) Treatment of adrenocortical function abnormalities iii) Any other treatment requiring corticosteroid therapy.	0.5mg to 10mg daily is given for oral administration. Dose can be titrated up to 20mg daily in severe disease depending on the condition being treated. The dosing is individualized according to product insert / protocol
Dexamethasone Sodium Phosphate 8 mg/2 ml Injection	B	All	i) Prophylaxis and management of nausea and vomiting in cancer chemotherapy, post-operation and palliative care ii) Treatment of adrenocortical function abnormalities iii) Any other treatment requiring corticosteroid therapy.	i-iii) Initial dosage: 0.5 mg to 20 mg per day depending on the specific disease entity being treated. The total daily dosage should not exceed 80 mg. The dosing is individualized according to product insert / protocol
Hydrocortisone 10mg Tablet	B	All	i) Glucocorticoid replacement therapy in primary or secondary adrenal insufficiencies ii) Congenital adrenal hyperplasia in children	ADULT: 20 - 30 mg daily in divided doses. CHILD: 10-15mg/m ² /day in 3 divided dose The dosing is individualized according to product insert / protocol
Hydrocortisone Sodium Succinate 100 mg Injection	C	All	Conditions responsive to systemic or local glucocorticoid injection therapy.	ADULT: Initially 100 - 500 mg IV over 30 seconds to more than 10 minutes. Dose may be repeated at intervals of 2, 4 or 6 hours CHILD: 2-4mg/kg/dose every 6 hourly. The dosing is individualized according to product insert / protocol
Methylprednisolone Sodium Succinate 0.5g Injection	A	All	Suppression of inflammatory and allergic disorders, cerebral oedema, immunosuppression treatment of haematological and oncological disorders, treatment of shock states and endocrine disorders	15 - 30 mg/kg daily. Large doses may be repeated 4 - 6 hourly for up to 48 hours
Prednisolone 5 mg Tablet	B	All	i) Replacement therapy for primary and secondary adrenocortical insufficiency ii) Adrenogenital syndrome iii) Other therapy	i) 5 - 25 mg daily in divided doses ii) 10 - 20 mg/m ² body surface daily in divided doses iii) ADULT: 5 - 60 mg daily, CHILD: 0.5 - 2 mg/kg/day in divided doses every 6 - 8 hours or as a single daily
Triamcinolone Acetonide 40 mg/ml Injection	A/KK	Orthopaedic	Allergies, dermatoses, rheumatoid arthritis and inflammatory ophthalmic diseases	40-80 mg deep into the gluteal muscle
H03. THYROID THERAPY				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Carbimazole 5 mg Tablet	B	All	Hyperthyroidism	ADULT: Initially, 10-60mg daily in divided doses given 8 hourly. Maintenance: 5 to 20mg daily. CHILDREN - 6 years: Initially 15mg daily in divided doses. CHILDREN 1-6 years: Initially 7.5mg daily in divided doses Start at low dose and increase at 2-4 weeks interval. Usual recommended dose for
Levothyroxine Sodium 25 mcg Tablet	B	All	Hypothyroidism	i) Treatment of benign euthyroid goitre: 75-200mcg. ii) Prophylaxis of relapse after surgery for euthyroid goitre: 75-200mcg iii) Substitution therapy in hypothyroidism: ADULT Initially, 25-50mcg/day. Maintenance: 100-200mcg/day. CHILDREN Initially 12.5-50mcg/day, Maintenance: 100-150mcg/m ² body surface area iv) Concomitant supplementation during anti-thyroid drug treatment of hyperthyroidism: 50-100mcg v) Suppression therapy in thyroid cancer: 150-300mcg
Levothyroxine Sodium 100 mcg Tablet	B	All	Hypothyroidism	Start at low dose and increase at 2-4 weeks interval. Adult: Initially, 50-100 mcg/day may increase by 25-50 mcg at approximately 3 to 4 weeks intervals until the thyroid deficiency is corrected. Maintenance: 100-200 mcg/day. CHILD: 0 - 3 months: 10 - 15 mcg/kg/day; 3 - 6 months: 8 - 10 mcg/kg/day; 6 - 12 months: 6 - 8 mcg/kg/day; 1 - 5 years: 5 - 6 mcg/kg/day; 6 - 12 years: 4 - 5 mcg/kg/day; more than 12 years: 2 -3 mcg/kg/day

H04. PITUITARY AND HYPOTHALAMIC HORMONES AND ANALOGUES				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Glucagon (Lyophilised) 1 mg/ml Injection	B	All	Management of hypoglycaemia	Adult, children > 20kg: 1mg by SC, IM or IV. Children < 20kg : 0.5mg. If patient does not respond within 10 minutes, administer IV glucose. Repeat in 20 minutes if necessary.
J. ANTIINFECTIVES FOR SYSTEMIC USE				
J01. ANTIBACTERIALS FOR SYSTEMIC USE				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Amoxicillin (Amoxycillin) 1g & Clavulanate 200mg Injection	A	All	Infections caused by susceptible organisms. Respiratory tract, skin, soft tissue, GUT infection, septicaemia, peritonitis, post-operative infection & osteomyelitis	CHILD less than 3 months: 30mg/kg 12 hourly. 3 months - 12 years: 30mg/kg 6 - 8 hourly. ADULT: 1.2 g by IV or intermittent infusion 6 - 8 hourly
Amoxicillin (Amoxycillin) 500mg & Clavulanate 125mg Tablet	A/KK	All	Infections due to beta-lactamase producing strain where amoxicillin alone is not appropriate. Respiratory tract, skin, soft tissue, GUT infection, septicaemia, peritonitis, post-operative infection & osteomyelitis	ADULT & CHILD more than 12 years: Mild to moderate infections: 625 mg twice daily.
Amoxicillin (Amoxycillin) & Clavulanate 228 mg/5 ml Syrup	A/KK	All	Infections caused by susceptible organisms	Mild to Moderate infection: 25mg/kg/day (based on Amoxicillin dose) in 2 divided dose. Severe infection: 45mg/kg/day (based on Amoxicillin dose) in 2 divided dose
Amoxicillin (Amoxycillin) 250mg Capsule	B	All	Infections caused by susceptible strains of gram positive and gram negative organisms	ADULT: 250 - 500 mg 3 times daily. CHILD: 20 - 40 mg/kg/day in divided doses 8 hourly
Amoxicillin (Amoxycillin) 500mg Capsule	B	All	Infections caused by susceptible strains of gram positive and gram negative organisms	ADULT: 250 - 500 mg 3 times daily. CHILD: 20 - 40 mg/kg/day in divided doses 8 hourly
Amoxicillin (Amoxycillin) Trihydrate 125 mg/5 ml Syrup	B	All	Infections caused by susceptible strains of gram positive and gram negative organisms	CHILD less than 10 years: 125 - 250 mg 8 hourly. CHILD less than 20 kg: 20 - 40 mg/kg/day in 3 - 4 divided doses
Ampicillin Sodium 1g & Sulbactam Sodium 500mg Injection	A	All	Treatment of susceptible bacterial infections	ADULT: 1.5 - 12 g/day in divided doses 6 - 8 hourly. Maximum: 4 g Sulbactam. CHILD: 150-300 mg/kg/day 6 - 8 hourly. Prophylaxis of surgical infections: 1.5 - 3 g at induction of anaesthesia. May be repeated 6 - 8 hourly. NEONATES: First week of life, 75mg/kg/day in divided doses every 12 hour
Ampicillin Sodium & Sulbactam Sodium 375 mg Tablet	A/KK	All	Treatment of susceptible bacterial infections	ADULT: 375-750mg twice daily CHILDREN AND INFANTS: 25-50mg/kg/day in 2 divided doses, if ≥ 30kg use an adult dose
Ampicillin Sodium 500 mg Injection	B	All	Treatment of susceptible bacterial infections (non beta-lactamase-producing organisms); meningitis	250 - 500 mg IM/IV every 4 - 6 hours. Maximum: 400 mg/kg/day. Meningitis: 2 g 6 hourly. CHILD: 150 mg/kg/daily IV in divided doses. Usual children dose less than 10 years, half adult dose
Azithromycin 200 mg/5 ml Granules	A*, A/KK	Paediatric	PRESCRIBER CATEGORY A*: Treatment of complicated respiratory tract infections. PRESCRIBER CATEGORY A/KK: Treatment of pertussis	CHILD 36 - 45 kg: 400 mg, 26 - 35 kg: 300mg, 15 - 25 kg 200 mg, less than 15 kg: 10 mg/kg. To be taken daily for 3 days or to be taken as a single dose on day 1, then half the daily dose on days 2 - 5
Azithromycin 250 mg Tablet	A*, A/KK	All	Category of prescriber A/KK is only approved for indications: (i) Adult treatment of uncomplicated genital infections due to Chlamydia trichomatis or susceptible Neisseria gonorrhoea. (ii) Treatment of pertussis The following indications are still under the category of prescriber A*: (iii) Treatment of complicated respiratory tract infections; (iv) Prophylaxis against Mycobacterium avium complex in patients with advanced HIV.	i) 1 g as a single dose; ii) 500mg in a single dose on day 1 then 250mg per day on days 2-5 iii) 500 mg daily for 3 days; iv) 1 g weekly
Benzylpenicillin 5 mega units (3 g) Injection	B	All	i) Infections caused by susceptible organisms ii) Infective endocarditis	i) ADULT: 600 - 1200 mg IM 4 times daily, increased if necessary in more serious infections. CHILD: 50 - 100 mg/kg body weight daily IV in 2 - 4 divided doses. ii) ADULT: 7.2 g daily by slow IV infusion in 6 divided doses
Ciprofloxacin 500mg Tablet	A	All	Treatment of infections due to susceptible bacterial strains	ADULT: 125-750 mg twice daily. Acute gonorrhoea: a single dose of 250 mg
Cefazolin Sodium 1g Injection	A	All	Infection caused by cefazolin-sensitive microorganism, infection of the respiratory tract, urogenital tract, skin and soft tissue, bile duct, bones and joint, endocarditis, systemic septic infection, peri-operative/ surgical prophylaxis	ADULT: Uncomplicated infections: 500 - 1000 mg 2 - 3 times daily. Moderately severe and severe infections: 500 - 1000 mg 3 - 4 times daily. Severe life-threatening infections: 1 - 1.5 g 4 times daily. Rarely, dose up to 12 g daily. CHILDREN >1 month: 25-50mg/kg/day in 3-4 divided dose
Cefepime 1 g Injection	A*	All	Febrile neutropenia, septicaemia, lower respiratory tract infection, urinary tract infection, skin and skin structure infections, gynaecologic and intra-abdominal infections	ADULT: 1 - 2 g twice daily for most infections. For severe infections including febrile neutropenia: 2 g 3 times daily. CHILD: 2 mth - 16 yr: ≤40 kg: 50 mg/kg every 8-12 hr for 7-10 days
Ceftazidime 1g Injection	A	All	Severe gram negative bacterial infections	ADULT: 1 g 8 hourly or 2 g 12 hourly. In severe infections: 2 g 8 hourly. CHILD: 25 - 150 mg/kg/day in 2 - 3 divided doses
Ceftriaxone 1g Injection	A	All	Infections caused by susceptible organisms	ADULT: 1 - 2 g once daily. Severe infection: 4 g daily at 12 hour intervals. NEONATE up to 2 weeks: 20 - 50 mg/kg body weight daily, not to exceed 50 mg/kg INFANT & CHILD, 3 weeks - 12 years: 20 - 80 mg/kg body weight daily. CHILD with body weight 50 kg or more: adult dose.
Cefuroxime Axetil 125 mg Tablet	A/KK	All	Upper and lower respiratory tract, genito-urinary tract, skin & soft tissue and urinary tract infections (UTI)	ADULT: Most infections: 250 mg twice daily Severe infections: 500mg twice daily CHILD: Most infections: 125mg twice daily or 30 mg/kg/day in 2 divided doses, up to 500 mg daily Severe infections: 250mg twice daily Dosing is individualised and according to package insert
Cefuroxime Axetil 125 mg/5 ml Suspension	A	All	Infections caused by susceptible organisms	30 mg/kg/day in 2 divided doses, up to 500 mg daily.
Cefuroxime Sodium 750 mg Injection	A	All	Infections caused by susceptible organisms, surgical prophylaxis	ADULT: 750 mg every 6 - 8 hours as IM or IV. Severe infections: 1.5 g every 6 - 8 hours as IV. CHILD: 30 - 100 mg/kg/day in 3 - 4 divided doses or 2-3 divided doses in neonates. Surgical prophylaxis: 1.5 g IV
Cephalexin Monohydrate 250 mg Capsule	B	All	i) Respiratory tract infection, urinary tract infection ii) Complicated, recurrent or chronic infections, bronchitis iii) Pneumonia	i) 250 mg 6 hourly ii) 250 - 500 mg 6 hourly iii) 1 - 1.5 g 3 times daily or 4 times daily. Maximum: 6 g/day Child: 25-100 mg/kg daily in divided doses. Max: 4 g daily.
Cloxacillin Sodium 125 mg/5 ml Suspension	B	All	Treatment of susceptible bacterial infections, notably penicillinase-producing staphylococci	Child: 50-100 mg/kg in divided doses every 6 hr
Cloxacillin Sodium 250 mg Capsule	B	All	Treatment of susceptible bacterial infections, notably penicillinase-producing staphylococci	ADULT: 250 - 500 mg every 6 hours. Child: 50-100 mg/kg in divided doses every 6 hr.
Cloxacillin Sodium 500 mg Capsule	B	All	Treatment of susceptible bacterial infections, notably penicillinase-producing staphylococci	ADULT: 250 - 500 mg every 6 hours. Child: 50-100 mg/kg in divided doses every 6 hr.
Cloxacillin Sodium 500 mg Injection	B	All	Treatment of susceptible bacterial infections, notably penicillinase-producing staphylococci infections	ADULT: 250 to 500 mg every 6 hours depending on type and severity of infection. CHILD less than 20 kg: 25 to 50 mg/kg/day in equally divided doses every 6 hours

Doxycycline 100 mg Capsule	B	All	Prophylaxis and treatment for infections due to susceptible organisms	Prophylaxis 100-200mg daily or weekly Treatment 100-300mg daily Dosing is individualised based on type of infections and according to product insert/protocol
Erythromycin Ethylsuccinate 200 mg/5 ml Suspension	B	All	Treatment of susceptible bacterial infections	Child: 30-50 mg/kg daily, increased to twice the usual dose in severe cases. 2-8 yr: 1 g daily in divided doses; <2 yr: 500 mg daily in divided doses.
Erythromycin Ethylsuccinate 400 mg Tablet	B	All	Treatment of susceptible bacterial infections	Adult 400 mg 6 hrly or 800 mg 12 hrly. Max: 4 g/day. Childn 30-50 mg/kg in divided doses. Childn 2-8 yr 1 g/day in divided doses in severe cases. Infant & childn ≤2 yr 500 mg/day in divided doses.
Gentamicin Sulphate 80 mg/2 ml Injection	B	All	Infections due to susceptible organisms	ADULT: 3 - 5 mg/kg/day 8 hourly IM or IV. CHILD up to 2 weeks: 3mg/kg every 12 hours; 2 weeks - 12 years: 2 mg/kg 8 hourly
Meropenem 1g Injection	A*	All	i) Nosocomial pneumonia ii) Bacterial Meningitis iii) Empirical treatment for presume infections in patients (adult and children) with febrile neutropenia, used as monotherapy or in combination with anti-virals or antifungal agent iv) Septicaemia v) Urinary tract infections vi) Intra-abdominal infections vii) Gynaecological infections	ADULT: 1-2g every 8hourly (refer to specific indication dosing) CHILD (aged 3 months and over): 10-40mg/kg 8 hourly, if body weight over 50kg, adult dosage should be used. Dosing is according to product insert/ protocol.
Metronidazole 500 mg/100 ml Injection	A	All	Anaerobic infection	ADULT: 500 mg IV infusion 8 hourly. CHILD: 7.5 mg/kg body weight every 8 hours. Neonates: 15mg/kg LD, followed by 7.5mg/kg every 12 hourly. 1 month to 18 years: 7.5mg/kg (maximum 500mg) every 8 hours.
Piperacillin 4 g & Tazobactam 500 mg Injection	A*	All	Febrile neutropenia, lower respiratory tract infection and severe sepsis	Adult and children more than 12 years: 4.5g 6 hourly, for neutropenia adult and children more than 50kg: 4.5g 6 hourly. Children less than 50kg: 90mg/kg 6 hourly
Phenoxymethyl Penicillin 125 mg Tablet	C	All	i) Treatment or prophylaxis of infections caused by susceptible organisms ii) Prophylactic, rheumatic fever	i) ADULT: 500 - 750 mg 6 hourly.CHILD: up to 1 year: 62.5 mg, 1 - 5 years: 125 mg, 6 - 12 years: 250 mg 6 hourly. ii) ADULT: 125 - 250 mg twice daily. CHILD: 25 - 50 mg/kg in divided doses every 6 - 8 hours. Maximum: 3 g/day
Phenoxymethyl Penicillin 125 mg/5 ml Syrup	C	All	Treatment or prophylaxis of infections caused by susceptible organisms	CHILD: Up to 1 year: 62.5 mg 6 hourly; 1 - 5 years: 125 mg 6 hourly; 6 - 12 years: 250 mg 6 hourly
Sulphamethoxazole 400 mg & Trimethoprim 80 mg Tablet	B	All	i) Severe or complicated infections when oral therapy is not feasible ii) Treatment and prophylaxis of pneumocystis carinii pneumonia (PCP) in immunocompromised patients	i) ADULT: 1 - 3 tablets twice daily ii) Treatment: ADULT & CHILD over 4 weeks: 120 mg/kg/day in 2 - 4 divided doses for 14 days. Prophylaxis: ADULT: 960 mg once daily or 960 mg on alternate days (3 times a week) or 960 mg twice daily on alternate days (3 times a week). CHILD: 6 weeks - 5 months: 120 mg twice daily on 3 consecutive days or 7 days per week; 6 months - 5 years: 240 mg; 6 - 12 years: 480 mg

J02. ANTIMYCOTICS FOR SYSTEMIC USE

Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Fluconazole 100 mg Capsule	A	All	i) Cryptococcosis a) cryptococcal meningitis and infections of other sites (e.g., pulmonary, cutaneous) b) Prevention of relapse of cryptococcal meningitis in patients in AIDS after a full course of primary therapy ii) Systemic candidiasis, including candidemia, disseminated candidiasis and other forms of invasive candidal infections. These include infections of the peritoneum, endocardium, eye, and pulmonary and urinary tracts. iii) Mucosal candidiasis. a) Oropharyngeal candidiasis b) Chronic oral atrophic candidiasis (denture sore mouth) c) Oesophageal, non-invasive bronchopulmonary infections, candiduria, mucocutaneous candidiasis d) Prevention of relapse of oropharyngeal candidiasis in patients with AIDS, after a full course of primary therapy iv) Genital candidiasis. a) Vaginal candidiasis (acute or recurrent) b) Prophylaxis of recurrent vaginal candidiasis (three or more episodes a year) c) Candidal balanitis. v) Prevention of fungal infections in patients with malignancy who are predisposed to such infections as a result of cytotoxic chemotherapy	i) a) 400mg on Day 1 followed by 200mg to 400mg once daily usually at least 6 to 8 weeks for cryptococcal meningitis. CHILD ≥4 weeks-11 years: Treatment:6-12mg/kg once daily. i) b) 200 mg once daily indefinitely. CHILD:- Maintenance: 6mg/kg once daily ii) 400 mg on Day 1 followed by 200 mg once daily CHILD ≥ 4weeks-11years: 6-12mg/kg once daily. iii) a) 50mg to 100mg once daily for 7 to 14 days CHILD:- Loading dose: 6mg/kg on Day 1 followed by 3mg/kg daily. iii) b) 50 mg once daily for 14 days concurrently with local antiseptic measures to the denture iii) c) 50 mg to 100 mg once daily for 14 to 30 days. CHILD:- 0-14days: Initially, 6mg/kg, followed by 3mg/kg every 72 hours. Max: 12 mg/kg 72 hourly. 15-27 days: Initially, 6mg/kg, followed by 3 mg/kg every 48 hours. Max: 12 mg/kg 48 hourly. 28 days-11 years: Initially, 6 mg/kg, followed by 3 mg/kg once daily. iii) d) 150 mg once weekly. iv) a) 150 mg as a single oral dose. iv) b) 150 mg once-monthly dose may be used for usually 4 to 12 months iv) c) 150 mg as a single oral dose. v) 50 mg to 400 mg once daily vi) a) 150 mg once weekly or 50 mg once daily for normally 2 to 6 weeks vi) b) 300mg once weekly for 2weeks; a third weekly dose of 300-400mg. An alternate dosing regimen is 50mg once daily for 2 to 4 weeks. Dosing is individualised and according to product insert/protocol.

J04. ANTIMYCOBACTERIALS

Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Ethambutol HCl 400 mg Tablet	B	All	Tuberculosis	Adult: 15-25mg/kg daily (max 1200mg) or 50mg/kg biweekly (max2000mg). Children: 15-25mg/kg daily or 50 mg/kg twice weekly.
Isoniazid 100 mg Tablet	B	All	i) Tuberculosis ii) Tuberculous meningitis	i) & ii) ADULT 5-8mg/kg daily (Max 300mg) or 15-20mg/kg biweekly (max 1200mg)
Pyrazinamide 500 mg Tablet	B	All	Tuberculosis	Adult: 20-40mg/kg daily (max 1500mg) or 50mg/kg biweekly (max 2000mg). Children: 20-30mg/kg daily or 30-40mg/kg thrice weekly.
Rifampicin 150 mg Capsule	B	All	i) Tuberculosis ii) Leprosy iii) Prophylaxis for meningococcal meningitis iv) Staphylococcus biofilm related prosthetic joint infection or any biofilm sensitive to rifampicin in combination therapy with another antibiotic	i) ADULT: 450 - 600 mg as a single morning dose. CHILD: 10 - 20 mg/kg body weight daily in 1 - 2 doses. Directly observed therapy (DOT): 10 mg/kg twice weekly or 3 times/week. Maximum: 600 mg ii) ADULT: 600 mg/day CHILD: 10mg/kg iii) ADULT: 600 mg twice daily for 2 days CHILD: 10mg/kg twice daily for 2 days INFANT: 5mg/kg twice daily for 2 days iv) ADULT: 600mg OD CHILD: 10-20mg/kg/day in 1-2 divided doses Dosing is individualised and according to product insert/protocol.
Rifampicin 300 mg Capsule	B	All	i) Tuberculosis ii) Leprosy iii) Prophylaxis for meningococcal meningitis iv) Staphylococcus biofilm related prosthetic joint infection or any biofilm sensitive to rifampicin in combination therapy with another antibiotic	i) ADULT: 450 - 600 mg as a single morning dose. CHILD: 10 - 20 mg/kg body weight daily in 1 - 2 doses. Directly observed therapy (DOT): 10 mg/kg twice weekly or 3 times/week. Maximum: 600 mg ii) ADULT: 600 mg/day CHILD: 10mg/kg iii) ADULT: 600 mg twice daily for 2 days CHILD: 10mg/kg twice daily for 2 days INFANT: 5mg/kg twice daily for 2 days iv) ADULT: 600mg OD CHILD: 10-20mg/kg/day in 1-2 divided doses Dosing is individualised and according to product insert/protocol.
Rifampicin 150 mg, Isoniazid 75 mg, Pyrazinamide 400 mg & Ethambutol HCl 275 mg Tablet (Akurit 4)	B	All	Treatment of both pulmonary and extrapulmonary tuberculosis, in the intensive treatment phase	ADULT: 30 - 37 kg: 2 tablets daily, 38 - 54 kg: 3 tablets daily, 55 - 70 kg: 4 tablets daily, more than 70 kg: 5 tablets daily

J05. ANTIVIRALS FOR SYSTEMIC USE

Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
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Acyclovir (Aciclovir) 800 mg Tablet	A/KK	All	i) Treatment of Herpes simplex & Varicella zoster infections ii) Prophylaxis of Herpes simplex infections in immune-compromised patients	(i) Treatment for Herpes Simplex: ADULT - 200mg 5 times daily; In severely immune-compromised patients: dose can be doubled to 400 mg. CHILD - two years and above should be given adult dosages, infants and children below two years old should be given half the adult dose. Treatment for Varicella Zoster: ADULT - 800mg 5 times daily; CHILD - 6 years and over: 800 mg four times daily, 2 - < 6 years: 400 mg four times daily, Under 2 years: 200 mg four times daily. Indication (ii) ADULT - Immune-compromised patients: 200 mg four times daily. Severely immune-compromised patients: dose can be doubled to 400 mg. CHILD - two years and above should be given adult dosages, infants and children below two years old should be given half the adult dose. Dosing is according to Product Information Leaflet.
Acyclovir (Aciclovir) 250mg Injection	A*	All	i) Treatment of Herpes simplex & Varicella zoster infections ii) Prophylaxis of Herpes simplex infections in immune-compromised patients	ADULT: 5 mg/kg by IV infusion 8 hourly for 5 days, doubled to 10mg/kg every 8 hourly in varicella-zoster in the immunocompromised and in simplex encephalitis (usually given for at least 10 days in encephalitis; possibly for 14 - 21 days). NEONATE & INFANT up to 3 months with disseminated herpes simplex: 20mg/kg every 8 hourly for 14 days (21 days in CNS involvement), varicella-zoster 10-20mg/kg every 8 hourly usually for 7 days. CHILD: 3 months - 12 years: Herpes simplex or Varicella Zoster: 250 mg/m ² 8 hourly for 5 days, doubled to 500 mg/m ² 8 hourly for varicella-zoster in the immunocompromised and in simplex encephalitis (usually given for 10 days in encephalitis)
Oseltamivir 75mg Capsule	A/KK	All	i) For treatment of patients with suspected or confirmed influenza and severe disease (requiring hospitalization or evidence of lower respiratory tract infection). ii) For treatment of patients with suspected or confirmed influenza and with co-morbidity and associated with increased risk of influenza complications. Not to be used as prophylaxis.	Recommended dose in adults and adolescents ≥ 13 years of age and body weight >40kg is 75mg twice daily for 5 days. Dosing adjustment for renal impaired patient, follow manufacturer's recommendations in product insert.

J06. IMMUNE SERA AND IMMUNOGLOBULINS

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Anti RhD Immunoglobulin 300 mcg / 2 ml Injection (150 mcg = 750 IU)	B	All	Prevention of Rh(D) sensitisation to Rh(D)-negative woman: i) Pregnancy/delivery of Rh(D)-positive infant ii) Abortion/threatened abortion, ectopic pregnancy or hydatidiform mole iii) Transplacental haemorrhage resulting from antepartum haemorrhage, amniocentesis, chorionic biopsy or obstetric manipulative procedures e.g. external version or abdominal trauma	i) Antenatal prophylaxis: According to general recommendations, currently administered doses range from 50 – 330 micrograms or 250 - 1650 IU. For specific details, please refer to product's package insert. ii) Postnatal prophylaxis: According to general recommendations, currently administered doses range from 100 – 300 micrograms or 500 – 1500 IU. For specific details, please refer to product's package insert.
Antivenene Serum (Sea snake) 1000 units/26.3ml Injection	B	All	Treatment of patients who exhibit manifestations of systemic envenoming following a bite by sea snake.	1000 units by IV infusion over 1/2 to 1 hour. In severe cases 3000 - 10000 units may be required
Hematotoxic Polyvalent Snake Antivenom Injection	B	All	Passive immunisation against poisonous of a range of haematotoxic snakebites or neurotoxic snakebites, based on the type of snake identified.	For initial doses, at least 20mL of reconstituted serum should be given by slow intravenous infusion (not more than 1mL/minute). If symptoms still persist, the second dose should be repeated 2 hours or even earlier after the initial dose. The further dose should be repeated every 6 hours according to the clinical symptoms. Administration: Draw 10mL of the sterile water for injection to the freeze-dried antivenin, shake well to dissolve the contents until the serum became clear colourless or pale yellow liquid, ready for administration.
Neuro Polyvalent Snake Antivenom Injection	B	All	Passive immunisation against poisonous of a range of haematotoxic snakebites neurotoxic snakebites, based on the type of snake identified.	For initial dose, at least 20mL of reconstituted serum should be given by slow intravenous infusion (not more than 1mL/minute). If symptoms still persist, the second dose should be repeated 2 hours or even earlier after the initial dose. The further dose should be repeated every 6 hours according to the clinical symptoms. Administration: Draw 10mL of the sterile water for injection to the freeze-dried antivenin, shake well to dissolve the contents until the serum became clear colourless or pale yellow liquid, ready for administration.
Hepatitis B Immunoglobulin (Human) Injection	A	All	i) For post-exposure prophylaxis of hepatitis B ii) Prophylaxis against recurrence of hepatitis B infection in chronic hepatitis B post liver transplantation	i) Adults: Recommended Dose: 1000-2000 IU IM and if necessary, the dose should be increased or repeated. Children: Inject 32-48 IU/kg of body weight, should be administered within 7 days after exposure to HBsAg (preferably within 48 hrs). Neonates: Recommended Initial Dose: 100-200 IU. The 1st dose should be administered within 5 days after birth (preferably within 48 hrs) and booster dose should be 32-48 IU/kg body weight. The booster dose should be administered between 2 and 3 months after the 1st administration. ii) Different regimens depending on hepatitis B virus (HBV) DNA positivity

J07. VACCINES

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
BCG Vaccine Freeze-Dried Injection	C+	All	For the prevention of tuberculosis	0.05 to 0.1 ml by intradermal. Dosing is according to Immunisation Schedule under NIP.
Hepatitis B Vaccine Injection	C+	All	Immunisation against infections caused by Hepatitis B virus	0.5 – 1.0 ml by IM. Dosing is according to Immunisation Schedule under NIP and product insert.
Pneumococcal Polysaccharide Conjugate Vaccine (Adsorbed) 13-Valent Injection	A*	Medical	Active immunisation for the prevention of pneumococcal disease caused by Streptococcus pneumoniae serotypes 1, 3, 4, 5, 6A, 6B, 7F, 9V, 14, 18C, 19A, 19F and 23F in adults aged 18 years and older. Prescribing Restriction: i. Adult population aged 18 years and above with associated risk in IPD with following conditions: a) Functional or anatomical asplenia; b) Cochlear implant; c) Congenital immune-deficiency; d) Haematopoietic and solid organ transplant. ii. Adult population aged 60 years and above with associated risk in IPD with following conditions: a) Chronic lung diseases, including chronic obstructive pulmonary disease (COPD), emphysema & asthma (requiring frequent hospital visit & use of multiple medications); b) Chronic liver disease including cirrhosis, biliary atresia, chronic hepatitis; c) Chronic cardiac disease, including congestive heart failure, congenital heart disease, and cardiomyopathies.	ADULT: to be administered as a single dose to adults 18 years and older including those previously vaccinated with a pneumococcal polysaccharide vaccine. The need for re-vaccination with a subsequent dose of PCV13 has not been established.
Tetanus Toxoid Vaccine Injection	C+	All	Immunization against tetanus infection	0.5 mL by IM. Dosing is according to product insert.

L. ANTINEOPLASTIC AND IMMUNOMODULATING AGENTS				
L01. ANTINEOPLASTIC AGENTS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Hydroxyurea 500 mg Capsule	A	Medical	i. Solid tumors ii. Chronic myelocytic leukaemia and myeloproliferative disease	i) Intermittent therapy: 80 mg/kg orally as a single dose every 3rd day. Continuous therapy: 20 - 30 mg/kg orally as a single dose daily. Concomitant therapy with irradiation: 80 mg/kg orally as a single dose every 3rd day (administration of hydroxyurea should be started at least 7 days before initiation of irradiation and continued during radiotherapy as well). ii) Continuous therapy 20 - 30 mg/kg orally as a single dose daily
Methotrexate 2.5 mg Tablet	A	Medical	i. Antineoplastic Chemotherapy - Treatment of gestational choriocarcinoma, and in patients with chorioadenoma destruens and hydatidiform mole. - Palliation of acute lymphocytic leukemia - Treatment and prophylaxis of meningeal leukemia. - Palliation of acute lymphoblastic (stem-cell) leukemias in children. - Alone or in combination with other anticancer agents in the management of breast cancer, epidermoid cancers of the head and neck, and lung cancer, particularly squamous cells and small cell types. - Treatment of the advanced stages (III and IV, Peters Staging System) of lymphosarcoma, particularly in those cases in children; and in advanced cases of mycosis fungoides. ii. Psoriasis Chemotherapy Symptomatic control of severe, recalcitrant, disabling psoriasis which is not adequately responsive to other forms of therapy, but only when the diagnosis has been established, as by biopsy and/or after dermatologic consultation. iii. Rheumatoid arthritis	Dosing is individualised and according to product insert / protocol
L02. ENDOCRINE THERAPY				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Tamoxifen Citrate 20 mg Tablet	A	Surgical	Breast cancer	20 mg in 1-2 divided doses. Max: 40 mg/day
L04. IMMUNOSUPPRESSIVE AGENTS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Azathioprine 50 mg Tablet	A	Medical	i) Prophylaxis of rejection in organ and tissue transplant ii) Auto-immune diseases iii) Rheumatoid arthritis	i) Adult: 1-5 mg/kg/day. Adjust dose according to clinical response and haematological tolerance. Dose may also be given via IV administration. ii) Adult: 1-3 mg/kg/day. Discontinue treatment if there is no improvement after 12 week. iii) Adult: Initially, 1 mg/kg/day given in 1-2 divided doses for 6-8 week, may increase by 0.5 mg/kg every 4 week until response or up to 2.5 mg/kg/day. Maintenance: Reduce dose gradually to achieve the lowest effective dose.
Ciclosporin 25 mg Capsule	A*	Nephrology	i) Patients in whom donor specific transplantation cannot be carried out and in young children to minimise side-effects of steroids ii) Follow-up cases of bone marrow transplant iii) Patients with severe rheumatoid arthritis not responding to other second line drugs iv) Patients with idiopathic nephrotic syndrome who are steroid toxic or poor response to cyclophosphamide v) Severe aplastic anemia, pure red cell aplasia vi) Cases of recalcitrant psoriasis and atopic eczema vii) Treatment of chronic ocular inflammatory disorders/uveitis	i & ii) Initially 12.5 - 15 mg/kg/day, beginning on the day before transplant. Maintenance approx 12.5 mg/kg/day for 3 - 6 months before being tapered off to zero by 1 year of transplantation iii) 3 mg/kg/day in 2 divided doses for first 6 weeks. May increase gradually to maximum 5 mg/kg. Treatment withdrawn if no response after 3 months iv) ADULT: 5 mg/kg/day in 2 divided doses. CHILD: 6 mg/kg/day in 2 divided doses. Patients with permitted levels of kidney failure, the starting dose must not more than 2.5 mg/kg/day v) 12 mg/kg/day vi) 2.5 mg/kg/day in 2 divided doses increasing if there is no improvement after 4 weeks by 0.5 - 1 mg/kg/month up to maximum 5 mg/kg/day vii) 5 mg/kg/day in 2 divided doses, may increase to 7 mg/kg/day in resistant cases. Maintenance: Less than 5 mg/kg/day especially during remission
Mycophenolate Mofetil 250 mg Capsule	A*	Nephrology	i) Prophylaxis of acute organ rejection in patients receiving allogenic renal, cardiac and hepatic transplant ii) Used with steroids for induction and maintenance of severe lupus nephritis	i) Renal transplant rejection: ADULT: 1 g twice daily. CHILD (3 months and older): 600 mg/m(2)/dose, twice daily; maximum daily dose, 2 g/10 mL. Cardiac transplant rejection: 1.5 g twice daily. Hepatic transplant rejection: 1.5 g twice daily ii) Induction phase: 2 - 3 g/day for up to 6 months. Maintenance phase: dose gradually tapers to 1 g/day
Mycophenolate Mofetil 500mg Tablet	A*	Nephrology	i) Prophylaxis of acute organ rejection in patients receiving allogenic renal, cardiac and hepatic transplant ii) Used with steroids for induction and maintenance of severe lupus nephritis	i) Renal transplant rejection: ADULT: 1 g twice daily. CHILD (3 months and older): 600 mg/m(2)/dose, twice daily; maximum daily dose, 2 g/10 mL. Cardiac transplant rejection: 1.5 g twice daily. Hepatic transplant rejection: 1.5 g twice daily ii) Induction phase: 2 - 3 g/day for up to 6 months. Maintenance phase: dose gradually tapers to 1 g/day

M. MUSCULO-SKELETAL SYSTEM				
M01. ANTIINFLAMMATORY AND ANTIRHEUMATIC PRODUCTS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Celecoxib 200 mg Capsule	A/KK	All	i) Osteoarthritis ii) Rheumatoid Arthritis iii) Acute pain iv) Ankylosing Spondylitis	i) ADULTS: 200 mg once daily. May increase to 200 mg bid, if necessary. CHILD not recommended ii) 100mg twice daily, increased if necessary to 200 mg 2 times daily; CHILD not recommended iii) 400mg as a single dose on first day followed by 200mg once daily on subsequent days iv) Initial, 200 mg once daily or 100 mg twice daily; if no effect after 6 weeks, may increase to max. 400 mg daily in 1-2 divided doses. If no response following 2 weeks of treatment with 400 mg/day, consider discontinuation and alternative treatment
Diclofenac 50mg Tablet	B	All	Pain and inflammation in rheumatic disease and of non-rheumatic origin	ADULTS: Initial dose of 150 mg daily. Mild or long term: 75 - 150 mg daily in 2 to 3 divided doses after food. Maximum: 200mg/day. CHILD more than 6 months : 1 - 3 mg/kg body weight daily in divided doses. Maximum: 3mg/kg/day (150mg/day).
Diclofenac Sodium 75mg/3ml Injection	A/KK	All	Pain and inflammation in rheumatic disease and of non-rheumatic origin	IM 75 mg once daily (2 times daily in severe cases) for not more than 2 days. Max 150mg/day. Not suitable for children.
Etoricoxib 90 mg Tablet	A/KK	All	i) Acute and chronic treatment of signs and symptoms of osteoarthritis (OA) and rheumatoid arthritis (RA) ii) Acute gouty arthritis iii) Acute pain	i) OA: 60 mg once daily. RA: 60mg once daily and may be increased to 90mg once daily if needed. Once the patient is stabilized, down-titration to 60mg once daily may be appropriate. ii & iii) Acute gouty arthritis and acute pain: 120 mg once daily (Given the exposure to COX-2 inhibitors, doctors are advised to use the lowest effective dose for the shortest possible duration of treatment)
Ibuprofen 200 mg Tablet	B	All	Pain and inflammation in rheumatic disease	Dosage: ADULT : 200 - 400 mg 3 times daily after food, maximum 3.2 g daily. CHILD : 30-50 mg/kg body weight daily in divided doses, maximum 2.4g daily. Lowest effective dose for the shortest possible duration.
Mefenamic Acid 250 mg Capsule	C	All	Mild to moderate pain	ADULT: 250 - 500 mg 3 times daily after meals.
Meloxicam 7.5mg Tablet	A/KK	All	Only for patients not responding to other NSAIDs in the treatment of: i) painful osteoarthritis ii) rheumatoid arthritis	i) initially 7.5 mg daily. May be increased to 15 mg daily ii) initially 15 mg daily. May be reduced to 7.5 mg daily. Maximum 15 mg daily. Child under 12 years not recommended
Naproxen 275 mg Tablet	A/KK	All	i) Rheumatic arthritis, osteoarthritis and ankylosing spondylitis ii) Acute gout iii) Muscular skeletal disorder, dysmenorrhoea	i) 0.5 - 1 g daily in 2 divided doses ii) 750 mg initially then 250 mg 8 hourly iii) 500 mg initially then 250 mg every 6 - 8 hour as required Max: 1g daily
Salicylazosulphapyridine (Sulfasalazine) 500 mg Tablet	A/KK	Medical	i) Treatment of inflammatory bowel disease of ulcerative colitis and Crohn's disease ii) Rheumatoid arthritis	i) ADULT, acute attack 1-2 g 4 times daily until remission occurs (if necessary corticosteroids may also be given), reducing to a maintenance dose of 500 mg 4 times daily, CHILD over 2 years, acute attack 40-60 mg/kg daily, maintenance dose 20-30 mg/kg daily ii) ADULT, initially, 0.5-1 g/day, increase weekly to maintenance dose of 2 g/day in 2 divided doses, maximum 3 g/day. CHILD over 6 years, juvenile rheumatoid arthritis: 30-50 mg/kg/day in 2 divided doses up to a maximum of 2 g/day
M02. TOPICAL PRODUCTS FOR JOINT AND MUSCULAR PAIN				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Diclofenac 1% Gel	A	Orthopaedic	i) Post-traumatic inflammation of the tendons, ligaments & joints. ii) Localised forms of soft tissue rheumatism and degenerative rheumatism	Apply 3 - 4 times daily and gently rubbed in
Ketoprofen 2.5% Gel	A/KK	Orthopaedic	Local treatment of osteoarticular & muscular painful disorders of rheumatic or traumatic origin: Contusions, distortions, muscle strains, stiff neck, lumbago.	Apply onto affected areas 2-4 times daily up to 10 days.
Methyl Salicylate 25% Ointment	C+	All	Relief of minor aches and pains of muscles and joints associated with simple backache, arthritis and rheumatic conditions.	Apply to the affected area, 3-4 times daily.

M03. MUSCLE RELAXANTS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Baclofen 10 mg Tablet	B	All	Spasticity of the skeletal muscle	ADULT: 5 mg 3 times daily. Max: 80 mg daily (20mg 4 times a day). CHILD: starting dose: 0.3mg/kg/day in divided dose, titrate up cautiously in 1 -2 weeks interval. Usual maintenance dose: 0.75 - 2 mg/kg daily (age more than 10 years, maximum: 2.5 mg/kg daily). The dose should not exceed 40 mg/day in children below 8 years of age, but a maximum dose of 60 mg/day may be given in children over 8 years of age. Dosing is individualised and according to product insert/protocol
Eperisone HCl 50 mg Tablet	A	Orthopaedic	Myotonic symptoms associated with cervical syndrome, periarthritis of shoulder and lumbago spastic paralysis	50 mg 3 times daily
Rocuronium Bromide 10 mg/ml Injection	A*	A&E & Paediatric	As an adjunct to general anaesthesia to facilitate endotracheal intubation, to provide skeletal muscle relaxation during surgery and to facilitate mechanical ventilation in adults, children and infants from one month of age.	Adult: Initial: 0.6mg/kg. Higher doses of 1 mg/kg may be used for intubation during rapid sequence induction of anaesthesia. Maintenance: 0.15mg/kg (may reduce to 0.075-0.1 mg/kg if inhalational anaesthesia is used) or by infusion at a rate of 0.3-0.6mg/kg/hr (0.3-0.4mg/kg/hr if inhalational anaesthesia is used). Doses should be based on ideal body weight for obese patients weighing >30% above the ideal body weight. Child: Infants and children >1 mth: Initially: 0.6mg/kg. Maintenance: 0.15mg/kg or by infusion at a rate of 0.3-0.6mg/kg/hr, maintenance doses may be required more frequently than in adult patients. Elderly/patients with hepatic and/or biliary tract disease and/or renal impairment: Initially: 0.6mg/kg. Maintenance: 0.075-0.1 mg/kg or by infusion at a rate of 0.3-0.4mg/kg/hr.
Suxamethonium 50mg/ml Injection	B	All	As an adjunct to general anaesthesia to facilitate endotracheal intubation, to provide skeletal muscle relaxation during surgery and to facilitate mechanical ventilation	Intravenous: Muscle relaxant in general anaesthesia Adult: As chloride: single dose of 0.3-1.1 mg/kg injected; supplementary doses of 50-100% of the initial dose may be given at 5-10 min intervals. Max dose (repeated IV injection or continuous infusion): 500 mg/hr Child: As chloride: <1 yr: 2 mg/kg; 1-12 yr: 1 mg/kg. Intramuscular: Muscle relaxant in general anaesthesia Adult: As chloride: 3-4 mg/kg. Max total dose: 150 mg Child: As chloride: <1 yr: Up to 4-5 mg/kg; ≥1 yr: Up to 4 mg/kg. Max dose: 150 mg.
M04. ANTIGOUT PREPARATIONS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Allopurinol 100 mg Tablet	A/KK	All	i) Frequent and disabling attacks of gouty arthritis (2 or more attacks/year). ii) Clinical or radiographic signs of erosive gouty arthritis. iii) The presence of tophaceous deposits. iv) Urate nephropathy. v) Urate nephrolithiasis. vi) Impending cytotoxic chemotherapy or radiotherapy for lymphoma or leukaemia	Initial dose: 50-100 mg daily. Maintenance: 300-900mg daily (depending on renal function).
Allopurinol 300 mg Tablet	A/KK	All	i) Frequent and disabling attacks of gouty arthritis (2 or more attacks/year). ii) Clinical or radiographic signs of erosive gouty arthritis. iii) The presence of tophaceous deposits. iv) Urate nephropathy. v) Urate nephrolithiasis. vi) Impending cytotoxic chemotherapy or radiotherapy for lymphoma or leukaemia	Initial dose: 50-100 mg daily. Maintenance: 300-900mg daily (depending on renal function).
Colchicine 0.5 mg Tablet	B	All	i) Acute gout and prophylaxis of recurrent gout. ii) Leucocytoclastic Vasculitis either cutaneous or systemic involvement, Behcet's syndrome, Urticarial vasculitis, Systemic sclerosis, Sweet's syndrome and severe recalcitrant aphthous stomatitis	i) Acute gout: Initial dose, 1 mg, then 0.5 mg after 1 hour. No further tablets should be taken for 12 hours. After 12 hours, treatment can resume if necessary with a maximum dose of 500 micrograms (1 tablet) every 8 hours until symptoms are relieved. The course of treatment should end when symptoms are relieved or when a total of 6 mg (12 tablets) has been taken. No more than 6 mg (12 tablets) should be taken as a course of treatment. After completion of a course, another course should not be started for at least 3 days (72 hours). Prophylaxis of recurrent gout: 0.5 mg bd. ii) 0.5 mg 1-3 times daily depends on disease and severity, up to a maximum of 3 mg/day
M05. DRUGS FOR TREATMENT OF BONE DISEASES				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Alendronate Sodium 70 mg Tablet	A/KK	Orthopaedic	Indicated for the treatment of osteoporosis in high-risk postmenopausal women	70 mg once weekly. Swallow the tablet whole with a full glass of plain water only on an empty stomach at least 30 minutes before breakfast (and any other oral medication); stand or sit upright for at least 30 minutes and do not lie down until after eating breakfast
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Mecobalamin 500 mcg Tablet	B	All	Peripheral neuropathies	1 tablet 3 times daily. The dosage should be adjusted according to age of patient and severity of symptoms
Prolase Tablet	B	All	Oedema and inflammation in conjunction with other physical or chemotherapeutic measures	2 tablet 4 times daily for the first day, then 1 tablet 4 times daily for at least 5 days.

N. NERVOUS SYSTEM				
N01. ANESTHETICS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Etomidate 20 mg/10 ml Injection	A*	A&E	Induction of general anaesthesia for haemodynamically unstable patients	Adult: 300 mcg/kg given slowly over 30-60 seconds into a large vein in the arm. Child: Up to 30% more than the standard adult dose. Elderly: 150-200 mcg/kg, subsequently adjusted according to effects.
Fentanyl Citrate 50 mcg/ml Injection	A	All	Short duration analgesia during pre-medication induction and maintenance of anaesthesia, and in the immediate post-operative period.	Dose should be individualized according to age, body weight, physical status, underlying pathological conditions and type of surgery and anaesthesia. ADULT: Premedication: IM 50 - 100 mcg, 30 - 60 mins prior to surgery. Adjunct to general anaesthesia: Induction IV 50 - 100mcg, repeat 2 - 3 mins intervals until desired effect is achieved. IV/IM 25 - 50mcg in elderly and poor risk patients. Maintenance: IV/IM 25 - 50mcg. Adjunct to regional anaesthesia: IM/slow IV 50 - 100mcg when additional analgesia is required. Post-operatively (recovery room): IM 50 - 100mcg for pain control, tachypnoea and emergency delirium. May be repeated in 1- 2 hours as needed. CHILD (2 - 12 years): Induction & maintenance: 2 - 3 mcg/kg.
Ketamine 10mg/ml Injection	B	All	Sole anaesthetic for short procedures or induction of anaesthesia in certain types of patients (e.g in shock states)	IV Initially, 1-4.5 mg/kg IV, a dose of 2 mg/kg produces anaesthesia for 5-10 mins. IM Initially, 6.5-13 mg/kg IM, a dose of 10 mg/kg produces anaesthesia for 12-25 mins.
Lignocaine (Lidocaine) 2% Jelly	B	All	Use for endotracheal tubes and instruments, painful procedures in the ear, nose and throat, burns, wounds, abrasions, lacerations; catheterisation of the male and female urethra and for symptomatic treatment of cystitis and urethritis	Apply to affected area 10 mins before catheterization.
Lignocaine (Lidocaine) 2% Intramuscular/ Subcutaneous Injection	B	All	For local or regional anaesthesia and nerve block. Not for IV use.	Local anaesthesia: ADULT Maximum: 100 mg; CHILD Maximum: 3 mg/kg
Propofol 10mg/ml (1%) Injection	A*	A&E	Induction & maintenance of general anaesthesia. Sedation of ventilated ICU patients	Adult: Induction: 20- 40 mg by injection or infusion every 10 sec. Usual dose: 1.5-2.5 mg/kg. Maintenance: 4-12 mg/kg/hr or intermittent bolus inj of 20-50 mg. Child: >8 yr: Induction dose of 2.5 mg/kg. Maintenance dose: 9-15 mg/kg/hr by IV infusion or intermittent bolus inj. Elderly: Including neurosurgical and debilitated patients: Infuse at a rate of 20 mg every 10 sec. Maintenance: 3-6 mg/kg/hr. Usual dose needed: 1-1.5 mg/kg. Duration of use : Can be administered for a maximum period of 7 days. Sedation: 0.3 - 4 mg/kg/hour up to 3 days
N02. ANALGESICS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Morphine HCl 10 mg/5ml Solution	B	All	For use in management of moderate to severe pain especially that associated with neoplastic disease	5-20 mg or more regularly every 4 hours as needed in terminal pain
Morphine Sulphate 10mg Prolonged Release Tablet	A	All	i) Prolonged relief of severe pain associated with neoplastic disease ii) As a second line treatment of chronic non-cancer pain when treatments with adjuvant analgesics and non-pharmacological approach failed (Initiated by Pain or Palliative Specialists only)	10 - 60 mg 12 hourly intervals, depend upon the severity of the pain. Children (more than 1 year of age) with severe cancer pain: 0.2 - 0.8mg/kg 12 hourly.
Morphine Sulphate 10 mg/ml Injection	B	All	i) For moderate to severe pain especially that associated with neoplastic disease ii) As an analgesic adjunct in general anaesthesia.	ADULT: 5 to 20 mg every 4 hours, intravenously (IV or IM), 2.5 to 15mg should be given by slow injection. CHILD: - Adjusted according to body weight, 0.1 – 0.2 mg /kg every 4 hours. No dose should exceed 15 mg - Analgesic Indication (i) subcutaneous, 100 mcg to 200 mcg (0.1 to 0.2 mg) per kg of body weight every four hours as needed, not to exceed 15mg per dose. Indication (ii) Intravenous, 50 to 100 mcg (0.05 mg to 0.1 mg) per kg of body weight, administered very slowly.
Paracetamol 125 mg Suppository	C+	All	Symptomatic relief of fever and post operative pain whom cannot tolerate oral preparations.	ADULT & CHILDREN more than 12 years old: 500mg - 1g every 4-6 hours CHILD 6 - 12 years : 250 - 500 mg; 1 - 5 years : 125 - 250 mg; 3 - 11 months : 80 mg inserted every 4 - 6 hours if necessary, maximum 4 doses in 24 hours. INFANTS under 3 months should not be given Paracetamol unless advised by doctor; a dose of 10 mg/kg (5 mg/kg if jaundiced) is suitable.
Paracetamol 250 mg/5 ml Syrup	C+	All	Mild to moderate pain and pyrexia	CHILD: 6 - 12 years: 250 - 500 mg per dose. Repeat every 4 - 6 hours when necessary. Maximum of 4 doses in 24 hours
Paracetamol 500 mg Tablet	C+	All	Mild to moderate pain and pyrexia	ADULT: 500 - 1000 mg every 4 - 6 hours, maximum of 4 g daily
Pethidine HCl 50 mg/ml Injection	B	All	For relief of moderate to severe pain (medical and surgical), pre-anaesthetic medication and obstetrical analgesia	ADULT: 0.5 - 2 mg/kg SC or IM every 3 - 4 hours if necessary. CHILD: by IM 0.5 - 2 mg/kg. Up to 1 year : 1- 2 mg/kg weight IM, 1 - 5 years : 12.5 - 25 mg IM, 6 - 12 years: 25 - 50 mg IM
Tramadol HCl 50 mg Capsule	A/KK	All	Moderate to severe acute or chronic pain (eg. Post-operative pain, chronic cancer pain and analgesia/pain relief for patients with impaired renal function)	ADULT: 50mg initially, can take another 50mg after 30 - 60 min if pain not relieved. Max 400 mg daily. CHILD: 1mg/kg/dose repeated every 6 hours (Max: 2mg/kg/dose and 100mg/dose)
Tramadol HCl 50 mg/ml Injection	A/KK	All	Moderate to severe acute or chronic pain (eg. Post-operative pain, chronic cancer pain and analgesia/pain relief for patients with impaired renal function)	ADULT: IV/IM/SC 50 - 100mg. (IV inj over 2-3 min or IV infusion). Initially 100 mg then 50 - 100 mg every 4 - 6 hours. . Max: 400 mg daily. CHILD (1 year and above): 1 - 2mg/kg/dose
N03. ANTIEPILEPTICS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Carbamazepine 200 mg CR Tablet	A	Medical	i) Epilepsy ii) Trigeminal Neuralgia iii) Idiopathic glossopharyngeal neuralgia iv) Acute mania and maintenance of bipolar affective disorder to prevent or attenuate recurrence	ADULT: Initial, 200 mg twice daily for the first week, may increase dosage by 200 mg/day at weekly intervals until optimal response is obtained. Maximum 1.6 g/day. CHILD: usual maximum dosage 1000 mg/day in children 12-15 years of age, 1200 mg/day in patients above 15 years of age
Carbamazepine 200 mg Tablet	B	All	i) Epilepsy ii) Trigeminal neuralgia	i) ADULT: 100 - 200 mg 1 - 3 times daily increased gradually to usual dose of 0.8 - 1.2 g daily in divided doses. CHILD: Up to 1 year: 100 - 200 mg daily 1 - 5 yrs: 200 - 400 mg daily 5 - 10 years: 400 - 600 mg daily 10 - 15 years: 0.6 - 1 g daily ii) The initial dosage of 200 to 400mg should be slowly raised daily until freedom from pain is achieved (normally at 200mg 3 to 4 times daily). The dosage should then be gradually reduced to the lowest possible maintenance level. In elderly patients, an initial dose of 100mg twice daily is recommended.
Clonazepam 2 mg Tablet	B	All	i) Epilepsy ii) Non-epileptic myoclonus	i) & ii) ADULT: Initial dose should not exceed 1.5mg/day divided into 3 doses, may be increased in increments of 0.5mg every 3 days until seizures are controlled. Maintenance dose: 3-6mg/day. Maximum: 20mg/day. CHILD up to 10 years: initial dose 0.01-0.03 mg/kg/day in 2-3 divided doses, increased by no more than 0.25-0.5mg every third day, maximum 0.2mg/kg/day. CHILD 10-16 years: initial dose 1-1.5mg/day in 2-3 divided dose, may be increased by 0.25-0.5mg every third day until individual maintenance dose of 3-6mg/day is reached.

Gabapentin 300 mg Capsule	A*, A/KK	Medical & Orthopaedic	PRESCRIBER CATEGORY A*: Add-on therapy for intractable partial epilepsy, refractory to standard anti-epileptic drugs. PRESCRIBER CATEGORY A/KK: Treatment of various types of neuropathic pain, both peripheral (which includes diabetic neuropathy, post-herpetic neuralgia, trigeminal neuralgia) in adult more than 18 years.	ADULT & CHILD > 12 yrs: 900-3600mg/day. Therapy may be initiated by administered 300mg TDS on day 1, or by titrating the dose as: 300mg once on day 1, 300mg BD on day 2, 300mg TDS on day 3. Thereafter, may be increased in 3 equally divided doses up to max 3600mg/day. CHILD 3-12 yr: Initially 10-15 mg/kg/day in 3 divided dose. Effective dose: CHILD 3 to less than 5 yrs: 40mg/kg/day in 3 divided doses, CHILD 5-12 yrs: 25-35mg/kg/day in 3 divided doses ii) ADULT: 900mg/day in 3 equally divided doses. Max 3600mg/day
Lamotrigine 50 mg Tablet	A	Medical	i) Adjunctive or monotherapy for partial seizures and generalised tonic-clonic seizures not satisfactorily controlled with other antiepileptic drugs ii) Prevention of mood episodes in adult 18 years and above with bipolar disorder, predominately by preventing depressive episodes	i) Up to 200 mg daily in single or divided dosage ii) 25- 200 mg daily
Levetiracetam 100 mg/ml Oral Solution	A*	Paediatric	As adjunctive therapy in the treatment of partial onset seizures with or without secondary generalization in adults and children from 4 years of age with epilepsy	CHILD: 4-11 years and adolescent (12-17 years) less than 50 kg: Initially 10 mg/kg twice daily, may be increased up to 30 mg/kg twice daily. Dose changes should not exceed increments or decrements of 10 mg/kg two times daily twice weekly
Levetiracetam 500 mg Tablet	A*	Medical	i) Monotherapy therapy in the treatment of partial onset seizures with or without secondary generalization in patients from age 16 years of age with newly diagnosed epilepsy ii) Adjunctive treatment in partial onset seizures with or without secondary generalization in adults and children from 4 years of age with epilepsy; juvenile myoclonic epilepsy and idiopathic generalized tonic clonic epilepsy from 12 years of age	i) Monotherapy ADULTS and ADOLESCENT (from 16 years): Starting dose: 250 mg twice daily, Increase dose to 500 mg twice daily after 2 week. Dose can be further increased by 250 mg twice daily every 2 week depending upon the clinical response. Max: 1500 mg twice daily. ii) ADULT more than 18 years and ADOLESCENT (12-17 years) more than or equal to 50 kg: Initially 500 mg twice daily may be increased up to 1500 mg twice daily. Dose changes can be made in 500 mg twice daily increments or decrements 2-4 weekly. CHILD (4-11 years) and ADOLESCENT (12-17 years) less than 50 kg : Initially 10 mg/kg twice daily, may be increased up to 30 mg/kg twice daily. Dose changes should not exceed increments or decrements of 10 mg/kg twice daily every 2 weeks. CHILD more than or equal to 50 kg: Adult dose
Phenobarbitone (Phenobarbital) 30mg Tablet	B	All	Epilepsy	ADULT: 60 - 180 mg daily on. CHILD: Up to 8 mg/kg daily
Phenobarbitone Sodium 200 mg/ml Injection	B	A&E & Paediatric	All forms of epilepsy except absence seizures.	ADULT: 10 mg/kg IV at a rate of not faster than 100 mg/minute. Initial maximum dose does not exceeding 1 gm. Daily maintenance of 1 - 4 mg/kg/day. CHILD: 3- 5mg per kg body weight as a single dose by intramuscular injection. Dosing is according to product insert.
Phenytoin Sodium 100 mg Capsule	B	All	Control of tonic-clonic (grand mal) and psychomotor seizures	ADULT Initial: 300mg daily in 3 equally divided doses Maintenance: 300-400 daily in 3-4 equally divided doses Max. dose: 600mg daily CHILD Initial: 5mg/kg/day in 2-3 equally divided doses Maintenance: 4-8mg/kg/day Max. dose: 300mg daily Dosing is according to product insert.
Phenytoin Sodium 250 mg/5ml Injection	B	All	i) Control of status epilepticus of the tonic-clonic (grand mal) type ii) Prevention and treatment of seizures occurring during or following neurosurgery.	i) ADULT Loading: 10-15mg/kg slow IV (max. 50mg per minute) Maintenance: 100mg orally or IV every 6-8 hours NEONATE & CHILD Loading: 15-20mg/kg IV slow IV (max. 1-3mg/kg/minute) ii) 100-200mg deep IM at approximately 4 hour intervals during surgery and continued postoperative. Dosing is individualised and according to product insert / protocol.
Sodium Valproate 200 mg Tablet	B	All	i. Epilepsy ii. Treatment and prevention of mania associated with bipolar disorders	i. Epilepsy: ADULT: Initially 600 mg/day in 2 - 3 divided doses, dose may be increased by 200 mg at 3-day intervals to max 2.5 g/day. Usual maintenance dose: 1-2 g/day (20-30 mg/kg/day). CHILD: - More than 20 kg. Initially 400 mg/day with spaced increases until control is achieved (usually 20-30 mg/kg/day), dose may be increased to 35 mg/kg/day. - Less than 20 kg 20 mg/kg/day, in severe cases the dose may be increased provided plasma concentration can be monitored. ii. Treatment and prevention of mania associated with bipolar disorders: ADULT: The recommended initial dose is 1000mg/day. The dose should be increased as rapidly as possible to achieve the lowest therapeutic dose, which produces the desired clinical effects. The recommended maintenance dosage for the treatment of bipolar disorder is between 1000mg and 2000mg daily. In exceptional cases, the dose may be increased to not more than 3000mg daily.
Sodium Valproate 200 mg/5ml Syrup	B	All	i) Treatment of generalized or partial epilepsy. ii) Treatment and prevention of mania associated with bipolar disorder	i. Epilepsy: ADULT: Initially 600 mg/day in 2 - 3 divided doses, dose may be increased by 200 mg at 3-day intervals to max 2.5 g/day. Usual maintenance dose: 1-2 g/day (20-30 mg/kg/day). CHILD: - More than 20 kg. Initially 400 mg/day with spaced increases until control is achieved (usually 20-30 mg/kg/day), dose may be increased to 35 mg/kg/day. - Less than 20 kg 20 mg/kg/day, in severe cases the dose may be increased provided plasma concentration can be monitored. ii. Treatment and prevention of mania associated with bipolar disorders: ADULT: The recommended initial dose is 1000mg/day. The dose should be increased as rapidly as possible to achieve the lowest therapeutic dose, which produces the desired clinical effects. The recommended maintenance dosage for the treatment of bipolar disorder is between 1000mg and 2000mg daily. In exceptional cases, the dose may be increased to not more than 3000mg daily.

N04. ANTI-PARKINSON DRUGS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Benzhexol 2 mg Tablet	B	All	i) Symptomatic treatment of paralysis agitans and of parkinsonism, arteriosclerotic, idiopathic, or post-encephalitic origin ii) Alleviate extrapyramidal syndrome induced by phenothiazine derivatives or reserpine iii) Spasmodic torticollis, facial spasms and other dyskinesia	i) & iii) Initial: 1-2mg daily Maintenance: Gradual increment to 6-10mg daily according to response ii) 5-15mg daily Dosing is individualised and according to product insert / protocol.
Levodopa 100 mg & Carbidopa 25 mg Tablet	B	Medical	Parkinson's disease	Patients not receiving Levodopa before, initially 100 - 125 mg 3 - 4 times daily adjusted according to response. Maintenance: 0.75 - 2 g in divided doses. In patients previously treated with Levodopa the dose should be about 20 - 25% of the dose previously being taken
Levodopa 200 mg, Benserazide 50 mg Tablet	B	Medical	Parkinson's Disease	Initial: 100/25 mg 1-2 times/day, increase every 3-4 days until therapeutic effect, optimal dosage: 400/100 mg to 800/200 mg/day divided into 4-6 doses. Dose: 200/50 mg used only when maintenance therapy is reached and not to exceed levodopa 1000-1200 mg/benserazide 250-300 mg per day
Procyclidine HCl 10 mg/2 ml Injection	B	All	i) All forms of Parkinson's disease (idiopathic paralysis agitans), post-encephalitis and arteriosclerosis ii) To control troublesome extrapyramidal symptoms induced by neuroleptic drugs including pseudo-parkinsonism, acute dystonic reactions and akathisia	i) Initial dose 2.5mg TDS, increasing by 2.5-5mg/day at intervals of 2 or 3 days until the optimum clinical response is achieved. Usual maintenance dose: 15-30mg/day, Max: 60mg/day ii) Initial dose 2.5mg TDS, increasing by 2.5mg daily until symptoms are relieved. Usual maintenance dose: 10-30mg/day. IV Emergency: 5-10 mg. IM Emergency: 5-10 mg as a single dose, may repeat after 20 mins if needed. Max: 20 mg/day.
N05. PSYCHOLEPTICS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Chlorpromazine HCl 100 mg Tablet	B	Psychiatry	i) Psychotic conditions ii) Anti-emetic	ADULT: Initial: 25-50mg two- three times daily Maintenance: 25-100mg two- three times daily CHILD: Not recommended Dosing is according to product insert / protocol.
Diazepam 10 mg/2 ml Injection	B	All	i) Status epilepticus ii) Skeletal muscle spasm iii) Anxiety disorders	i) ADULT: initial dose 10-20mg IV, in the following hours 20mg IM or by intravenous drip infusion as necessary. CHILD 2 to 5 years of age: slow IV 0.2 - 0.5mg every two to five minutes up to a maximum of 5mg. If necessary, dose can be repeated in two to four hours. CHILD 5 years and older: slow IV 1mg every two to five minutes up to a maximum of 10mg. If necessary, dose can be repeated in two to four hours. ii) ADULT: 10mg once or twice IV. CHILD 2 to 5 years of age: IM or IV, 1 to 2mg the dosage being repeated every three to four hours as needed. CHILD 5 years and older: IM or IV, 5 to 10mg, the dosage being repeated every three to four hours as needed. iii) ADULT: 10-20mg three times daily IM or IV until acute symptoms subside.
Diazepam 5 mg Rectal Solution	B	All	i) Status epilepticus ii) Skeletal muscle spasm	Status epilepticus - ADULT: 0.5 mg/kg repeated after 12 hours if necessary. CHILD (febrile convulsions, prolonged or recurrent): 0.5 mg/kg (maximum 10 mg), repeated if necessary. Not recommended for children below 2 years
Diazepam 5 mg Tablet	B	All	i) Muscle spasm of varied aetiology, including tetanus ii) Anxiety disorders	i) ADULT: 2-10 mg 3-4 times daily. CHILD 6 months and older: 0.12 - 0.8 mg/kg daily in divided doses, every 6-8 hours ii) ADULT: 2 mg 3 times daily, increased in severe anxiety to 15 - 30 mg daily in divided doses. ELDERLY (or debilitated) half adult dose. CHILD (night terrors): 1 - 5 mg at bedtime
Fluphenazine Decanoate 25 mg/ml Injection	B	All	Long term management of psychotic disorders	By deep IM: Test dose 12.5 mg (6.25 mg in ELDERLY), then after 4-7 days 12.5 mg-100 mg repeated at intervals of 14-35 days, adjusted according to response. CHILD not recommended
Haloperidol 5 mg/ml Injection	B	All	i) Management of acute psychotic disorders including schizophrenia, manic states, and drug-induced psychosis. ii) Management of aggressive and agitated patients, including patients with chronic brain syndrome or mental retardation.	ADULT: IM or IV, 2 mg - 10 mg then every 4 - 8 hours according to response to total maximum 18 mg daily. Use in child is not recommended
Midazolam 5 mg/ml Injection	A, A/KK	All	Prescriber Category A: Pre-operative sedation, induction of general anaesthesia, premedication and sedation in ICU and sedation for minor procedures Prescriber Category A/KK: For induction of intubation and sedation post-intubation	Prescriber Category A: Usual sedative range 2.5 - 7.5 mg (about 70 mcg/kg by IV injection over 30 seconds). Premedication by IM injection 70 - 100 mcg/kg 30-60 minutes before surgery; ELDERLY: 1 - 1.5 mg/kg. Induction: Induction by slow IV infusion 200 - 300 mcg/kg (ELDERLY 100 - 200 mcg/kg. CHILD over 7 years 150 - 200 mcg/kg); Maximum: 0.35mg/kg. Sedation in ICU 0.03 - 0.2 mg/kg/hour Prescriber Category A/KK: Induction: Induction by slow IV infusion 200 - 300 mcg/kg (ELDERLY 100 - 200 mcg/kg. CHILD over 7 years 150 - 200 mcg/kg); Maximum: 0.35mg/kg. Sedation: 0.03 - 0.2 mg/kg/hour
Midazolam 15 mg/3ml Injection	A, A/KK	All	Prescriber Category A: Pre-operative sedation, induction of general anaesthesia, premedication and sedation in ICU and sedation for minor procedures Prescriber Category A/KK: For induction of intubation and sedation post-intubation	Prescriber Category A: Usual sedative range 2.5 - 7.5 mg (about 70 mcg/kg by IV injection over 30 seconds). Premedication by IM injection 70 - 100 mcg/kg 30-60 minutes before surgery; ELDERLY: 1 - 1.5 mg/kg. Induction: Induction by slow IV infusion 200 - 300 mcg/kg (ELDERLY 100 - 200 mcg/kg. CHILD over 7 years 150 - 200 mcg/kg); Maximum: 0.35mg/kg. Sedation in ICU 0.03 - 0.2 mg/kg/hour Prescriber Category A/KK: Induction: Induction by slow IV infusion 200 - 300 mcg/kg (ELDERLY 100 - 200 mcg/kg. CHILD over 7 years 150 - 200 mcg/kg); Maximum: 0.35mg/kg. Sedation: 0.03 - 0.2 mg/kg/hour
Olanzapine 5 mg Tablet	B	Psychiatry	i) Acute and maintenance treatment of schizophrenia and other psychoses where positive and or negative symptoms are prominent ii) Short-term use for acute mania episodes associated with Bipolar 1 disorder iii) Prevention of recurrence of manic, mixed or depressive episodes in Bipolar I Disorder.	i) 5 - 10 mg once daily, increase to 10 mg once daily within 5 - 7 days, adjust by 5 - 10 mg/day at 1 week intervals, maximum 20 mg/day ii) 10 - 15 mg once daily, increase by 5 mg/day at intervals of not less than 24 hours. Maintenance 5 - 20 mg/day; maximum 20 mg/day iii) Starting dose is 10mg/day, daily dosage may subsequently be adjusted on the basis of individual clinical status within the range 5-20 mg/day
Olanzapine 10 mg Tablet	B	Psychiatry	i) Acute and maintenance treatment of schizophrenia and other psychoses where positive and or negative symptoms are prominent ii) Short-term use for acute mania episodes associated with Bipolar 1 disorder iii) Prevention of recurrence of manic, mixed or depressive episodes in Bipolar I Disorder.	i) 5 - 10 mg once daily, increase to 10 mg once daily within 5 - 7 days, adjust by 5 - 10 mg/day at 1 week intervals, maximum 20 mg/day ii) 10 - 15 mg once daily, increase by 5 mg/day at intervals of not less than 24 hours. Maintenance 5 - 20 mg/day; maximum 20 mg/day iii) Starting dose is 10mg/day, daily dosage may subsequently be adjusted on the basis of individual clinical status within the range 5-20 mg/day
Prochlorperazine Maleate 5mg Tablet	B	All	i) Severe nausea and vomiting ii) Vertigo/labyrinthine disorders	i) Nausea and vomiting Adult: As maleate or mesilate: 20 mg, further doses are given if needed. Recommended buccal dose: As maleate: 3-6 mg bid. ii) Vertigo Adult: As maleate or mesilate: 15-30 mg daily, given in divided doses. May reduce gradually to 5-10 mg daily. Recommended buccal dose: 3-6 mg bid. May be taken with or without food.
Prochlorperazine Mesylate 12.5mg/ml Injection	B	All	i) Severe nausea and vomiting ii) Vertigo/labyrinthine disorders	Deep IM injection, 12.5 mg repeated if necessary after 6 hours and then followed by an oral dose. Not recommended in children

Risperidone 1 mg Tablet	B	Psychiatry	i) Schizophrenia, including first episode psychosis, acute schizophrenic exacerbations, chronic schizophrenia and other psychotic conditions ii) Short-term symptomatic treatment (up to 6 weeks) of persistent aggression in conduct disorder in children from the age of 5 years and adolescents with subaverage intellectual functioning or mental retardation.	i) ADULT: Initial dose: 2 mg/day. Maintenance dose: 4 to 6 mg. Max: 16mg/day CHILD: Not recommended ELDERLY: Initial dose: 0.5 mg twice daily. Maintenance: 1 to 2 mg twice daily. ii) CHILD & ADOLESCENTS, 5-18 years ≥ 50 kg: Initial - 0.5 mg once daily Optimum dose: 1mg once daily < 50 kg: Initial - 0.25 mg once daily Optimum dose: 0.5mg once daily Dosing should be individualized according to product insert.
Risperidone 2 mg Tablet	B	Psychiatry	Schizophrenia	ADULT: Initial dose: 2 mg/day. Maintenance dose: 4 to 6 mg. Max: 16mg/day CHILD: Not recommended ELDERLY: Initial dose: 0.5 mg twice daily. Maintenance: 1 to 2 mg twice daily. Dosing should be individualized according to product insert.

N06. PSYCHOANALEPTICS

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Amitriptyline HCl 25 mg Tablet	B	All	i. Depression ii. Nocturnal enuresis where organic pathology has been excluded	i. Initial: 25mg 3 times a day in the evening. Increase gradually in the late evening or at bedtime if necessary up to a maximum of 150mg per day. Hospitalised patient: 100mg per day. Increase gradually to 200-300mg per day ii. CHILD 6 YEARS AND UNDER 10mg at bedtime. CHILD OVER 6 YEARS Initial: 10mg at bedtime. Increase gradually if necessary up to a maximum of 25mg at bedtime Not recommended for treatment of depression in children under 12 years of age. Dosing is individualised and according to product insert/ protocol.
Fluvoxamine 50 mg Tablet	B	Psychiatry	i) Depression ii) Obsessive-Compulsive Disorder (OCD)	i. Initial: 50 – 100 mg per day in the evening. Increase gradually if necessary up to a maximum of 300mg per day. Dose over 150mg per day given in 2 – 3 divided doses. Recommended dose to prevent recurrence: 100mg per day ii. ADULT Initial: 50mg per day for 3 – 4 days. Increase gradually if necessary up to a maximum of 300mg per day. Dose over 150mg per day given in 2 – 3 divided doses. CHILD (8 years and adolescents) Initial: 25mg per day, preferably at bedtime. Increase in 25mg increments every 4 – 7 days if necessary up to a maximum of 200mg per day. Dose over 50mg per day given in 2 divided doses. Dosing is individualised and according to product insert/ protocol. Should not be used in patients under 18 years old except for the treatment of OCD. If, based on clinical need, a decision to treat is nevertheless taken; the patient should be carefully monitored for appearance of suicidal symptoms.
Methylphenidate HCl 10 mg Tablet	A	All	Attention deficit hyperactivity disorder (ADHD)	CHILD over 6 years, initially 5 mg 1 - 2 times daily, increased if necessary at weekly intervals by 5 - 10 mg daily to maximum of 60 mg daily in divided doses; discontinue if no response after 1 month, also suspend periodically to assess child's condition (usually finally discontinued during or after puberty)
Sertraline HCl 50 mg Tablet	B	Psychiatry	i. Major depression ii. Obsessive-compulsive disorder (OCD) iii. Panic disorder iv. Social anxiety disorder (social phobia) v. Post-traumatic stress disorder	i. Initial: 50mg per day. Titration: 50mg increments at intervals of at least a week. Max: 200mg per day ii. Initial: 50mg per day. Titration: 50mg increments at intervals of at least a week. Max: 200mg per day. Therapeutic dose range: 50 – 200 mg per day iii, iv & v: Initial: 25mg per day. Increase to 50mg per day after 1 week. Titration: Adjust dose at intervals of at least a week. Max: 200mg per day Dosing is individualised and according to product insert/ protocol. Should not be used in patients under 18 years old except for the treatment of OCD. If, based on clinical need, a decision to treat is nevertheless taken; the patient should be carefully monitored for appearance of suicidal symptoms.

N07. OTHER NERVOUS SYSTEM DRUGS

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Bethahistine Dihydrochloride 24mg Tablet	A/KK	ENT	i) Meniere's Syndrome as defined by the following core symptoms: - Vertigo (with nausea/vomiting). - Hearing loss (Hardness of hearing). - Tinnitus (ringing in the ears) ii) Symptomatic treatment of vestibular vertigo	24-48mg in divided doses daily
Cinnarizine 25 mg Tablet	B	All	i) Vestibular disorders ii) Motion sickness	i) ADULT and CHILD > 12years: 25mg three times a day ii) 25mg 2 hours before travel and 12.5mg every 8 hours during journey CHILD 5-12 years: Half the adult dose Dosing is according to product insert.
Neostigmine Methylsulphate 2.5 mg/ml Injection	B	All	i) Symptomatic treatment of myasthenia gravis where oral therapy is impractical ii) Reversal of the effects of non-depolarizing neuromuscular blockade iii) The management of post-operative distension, paralytic ileus and urinary retention, where mechanical obstruction has been ruled	i) ADULT: 1 - 2.5 mg at suitable intervals by SC, IM or IV. Usual total daily dose 5 - 20 mg. CHILD: 0.1mg IM. Titrated in the range of 0.05mg - 0.25mg. NEONATE: 50 - 250 mcg every 4 hours ii) By IV injection over 1 minute, 50 - 70 mcg/kg (maximum 5 mg and 2.5mg for children) after or with atropine sulphate 0.6 - 1.2 mg iii) Adults: SC or IM 0.5 - 2.5mg. Children: SC or IM 0.125mg - 1mg
Pyridostigmine Bromide 60 mg Tablet	B	All	Myasthenia gravis	ADULT: 30 - 120 mg at suitable intervals throughout the day, total daily dose 0.3 - 1.2 g. CHILD up to 6 years initially 30 mg, 6 - 12 years initially 60 mg, usual total daily dose 30 - 360 mg

P. ANTIPARASITIC PRODUCTS, INSECTICIDES AND REPELLENTS

P01. ANTIPROTOZOALS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Artemether 20mg + Lumefantrine 120mg Tablet	B	All	Acute uncomplicated falciparum malaria	ADULT and CHILD over 12 years weighing over 35 kg : 4 tablets as a single dose at the time of initial diagnosis, again 4 tablets after 8 hours and then 4 tablets twice daily (morning and evening) on each of the following two days (total course comprises 24 tablets). INFANT and CHILD weighing 5 kg to less than 35 kg : A 6 dose regimen with 1 to 3 tablets per dose, depending on bodyweight
Artesunate 60mg injection	B	All	Treatment of severe malaria in adults and children.	2.4mg of artesunate/kg body weight, by intravenous (IV) or intramuscular (IM) injection, at 0, 12 and 24 hours, then once daily until oral treatment can be substituted. For adults and children with severe malaria or who are unable to tolerate oral medicines, artesunate 2.4 mg/kg body weight IV or IM given on admission (time = 0), then at 12 hrs and 24 hrs, then once a day for 5-7 days is the recommended treatment.
Hydroxychloroquine Sulphate 200 mg Tablet	A	Medical	i) SLE and mixed connective tissue disease for skin, joint and serosa ii) Second line therapy for acute rheumatoid arthritis	i) Initially 400 mg daily in divided dose. Maintenance : 200 - 400 mg daily ii) ADULT : 400 - 600 mg daily. Maintenance: 200 - 400 mg daily. CHILD : up to 6.5 mg/kg daily (maximum 400mg daily)
Metronidazole 200 mg Tablet	B	All	Anaerobic infection	i) Anaerobic bacterial infections Adult: Initially, 800 mg followed by 400 mg 8 hly for about 7 days. Other recommended doses: 500 mg 8 hly or 7.5 mg/kg 6 hly (max: 4 g in 24 hr). Child: 7.5 mg/kg 8 hly. Elderly: Use lower end of adult dose recommendations. Do not admin as a single dose. ii) Prophylaxis of postoperative anaerobic bacterial infections Adult: 400 mg by mouth 8 hly in the 24 hr prior to surgery followed postoperatively by IV or rectal admin until oral therapy is possible. Other sources recommend that oral doses be initiated only 2 hr prior to surgery and that number of doses for all admin routes be limited to a total of 4. Elderly: Dose reduction may be necessary. Tab: Should be taken with food.
Primaquine 7.5 mg base Tablet	B	All	i) Treatment of malaria ii) Prophylaxis together with a schizonticide such as chloroquine	0.5mg/kg/day up to 30mg daily
P02. ANTIHELMINTICS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Albendazole 200 mg Tablet	C+	All	i) Single or mixed infestations of intestinal parasites ii) Strongyloides infection	i) Child 12-24months: 200mg as a single dose ii) Adult & Child above 2 years: 400mg as a single dose for 3 consecutive days; Child 12 - 24months: 200mg as a single dose for 3 consecutive days
Albendazole 200 mg/5 ml Suspension	C+	All	i) Single or mixed infestations of intestinal parasites ii) Strongyloides infection	i) Child 12-24months: 200mg as a single dose ii) Adult & Child above 2 years: 400mg as a single dose for 3 consecutive days; Child 12 - 24months: 200mg as a single dose for 3 consecutive days
P03. ECTOPARASITICIDES, INCL. SCABICIDES, INSECTICIDES, AND REPELLENTS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Benzyl Benzoate 25 % Emulsion (Adult)	C+	All	Scabies for adult and children more than 12 years old.	After bath, apply over the whole body, neck down and leave on for 24 hours then wash off. Reapply for another 24 hours, the first repeat application should be within 5 days of the initial application, a third application may be required in some cases.
R. RESPIRATORY SYSTEM				
R01. NASAL PREPARATIONS				
Generic Name	Prescribing Category	Department/Specialty	Indications	Dosage
Budesonide 64mcg Nasal Spray	A/KK	ENT	Seasonal allergic, perennial rhinitis and nasal polyposis	ADULT and CHILD 6 years and older. Rhinitis : 2 spray into each nostril once daily in the morning or 1 spray into each nostril twice daily. Nasal polyps : 2 spray twice daily
Mometasone Furoate 50 mcg Aqueous Nasal Spray	A*	ENT	i) Allergic rhinitis. ii) For the treatment of nasal polyps in patients 18 years of age and older.	i) ALLERGIC RHINITIS: ADULT and CHILD, 12 years and above: 100 mcg/day (2 sprays) to each nostril once daily. Maximum 200 mcg (4 sprays) once daily. Reduce to 50 mcg (1 spray) once daily when control achieved. CHILD 3 - 11 years old: 50 mcg (1 spray) to each nostril once daily. ii) TREATMENT OF NASAL POLYPS: Two sprays (50 micrograms/spray) in each nostril twice daily (total daily dose of 400 mcg). Once symptoms are adequately controlled, dose reduction to two sprays in each nostril once daily (total daily dose 200 mcg) is recommended.
Oxymetazoline HCl 0.025% (Paediatric) Nasal Drops	A/KK	ENT/ Paediatric	Acute colds, paranasal sinusitis and otitis media	1 - 2 drops twice daily in each nostril for child more than 1 year
Oxymetazoline 0.025% Nasal Spray (Pead)	A	ENT	Acute colds, paranasal sinusitis and otitis media	2 - 3 sprays into each nostril twice daily for child more than 1 year
Oxymetazoline 0.05% Nasal Spray (Adult)	A	ENT	Acute colds, paranasal sinusitis and otitis media	2 - 3 sprays into each nostril twice daily, maximum 6 sprays per nostril/day
Triprolidine HCl 2.5 mg and Pseudoephedrine HCl 60 mg Tablet	B	All	Decongestion of the upper respiratory tract in common cold, hay fever, allergic and vasomotor rhinitis and aerottis	ADULT 2.5 mg every 4 - 6 hours; maximum dose 10 mg/day. CHILD (syrup) 6 - 12 years : 1.25 mg every 4 - 6 hours; maximum dose 5 mg/day 4 - 6 years : 0.938 mg every 4 - 6 hours; maximum dose 3.744 mg/day 2 - 4 years : 0.625 mg every 4 - 6 hours; maximum dose 2.5 mg/day

R02. THROAT PREPARATIONS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Chlorhexidine Gluconate 0.2 % Mouthwash	C	Dental	As a gargle	Rinse mouth with 10 ml for about 1 minute twice daily
R03. DRUGS FOR OBSTRUCTIVE AIRWAY DISEASES				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Aminophylline 25 mg / ml Injection	B	All	Reversible airways obstruction, acute severe bronchospasm	Adult: Loading dose: 6 mg/kg (ideal body weight) or 250-500 mg (25 mg/ml) by slow inj or infusion over 20-30 min. Maintenance infusion dose: 0.5 mg/kg/hr. Max rate: 25 mg/min. Children: 6 months and over (if not previously on theophylline): Loading dose: 6mg/kg. Maintenance dose: 6 mth-9 yr: 1 mg/kg/hr and 10-16 yr: 0.8 mg/kg/hr. Dosing is individualised and according to product insert/protocol.
Budesonide 1 mg/ 2 ml Nebulising Solution	B	All	Treatment of asthma in patients where use of a pressurized inhaler or dry powder formulation is unsatisfactory or inappropriate.	ADULT : Initially 1 - 2 mg twice daily. CHILD 3 months - 12 years of age : 500 mcg - 1 mg. Maintenance dose : half of the above doses
Budesonide 160 mcg and Formoterol 4.5 mcg Inhalation	A/KK	Medical	Category of prescriber A/KK: i) Regular treatment of asthma where use of a combination (inhaled corticosteroid and long-acting beta2-agonist) is appropriate: - Patients not adequately controlled with inhaled corticosteroids and "as needed" inhaled short-acting beta2-agonists. or - Patients already adequately controlled on both inhaled corticosteroids and long-acting beta2-agonists. ii) As a reliever treatment for mild asthma patients who do not adhere to regular inhaled corticosteroid Category of prescriber A*: iii) Treatment of COPD patients with a blood eosinophil count of 300 cells/microliter and more iv) Treatment of COPD patients with blood eosinophil count of 100 cells/microliter and more with history of repeated exacerbation despite regular treatment with long-acting bronchodilators.	i) Asthma Maintenance therapy: Adult ≥18 yr 160 mcg to 320 mcg bd. Some patients may require up to a max of 640 mcg bd. Adolescent 12-17 yr 160 mcg to 320 mcg bd. Childn 6-11 yr 160 mcg bd, <6 yr Not recommended. Maintenance & relief Adult and adolescent ≥12 yr 320 mcg/day either as 160 mcg bd or 320 mcg od either morning or evening. For some patients a maintenance dose of 320 mcg bd may be appropriate. Patients should take 160 mcg additional inhalation as needed in response to symptoms. If symptoms persist after a few minutes, an additional inhalation should be taken. Not more than 960 mcg should be taken on any single occasion. A total daily dose of more than 1280 mcg is not normally needed, however a total daily dose of up to 1920 mcg could be used for a limited period. Patients using more than 1280 mcg daily should seek medical advice, should be reassessed & their maintenance therapy reconsidered. ii) Asthma reliever-only therapy: 160 mcg as needed, but no more than 960 mcg to be taken on any single occasion. Children <12 yr: Not recommended iii & iv) COPD: Adult ≥18 yr 320 mcg bd.
Budesonide 200 mcg/dose Inhalation	B	All	Maintenance treatment of asthma as prophylactic therapy especially if not fully controlled by bronchodilators	ADULT: 200-1600 mcg daily in 2-4 divided doses. Maintenance with twice daily dosing. CHILD more than 7 years: 200-800 mcg, 2 - 7 years: 200-400 mcg. To be inhaled in 2-4 divided doses.
Fluticasone Propionate 125 mcg/dose Inhaler	B	Paediatric	Prophylactic treatment for asthma	ADULT and CHILD more than 16 years i) Mild asthma : 100 mcg - 250 mcg twice daily ii) Moderate asthma : 250 - 500 mcg twice daily iii) Severe asthma : 500 mcg - 1000 mcg twice daily. Alternatively, the starting dose of fluticasone dipropionate may be gauged at half the total daily dose of beclomethasone dipropionate or equivalent administered by inhalation.
Indacaterol Acetate/ Glycopyrronium Bromide/ Mometasone Furoate 150/50/160mcg Inhalation Powder Hard Capsules	A	Medical	As a maintenance treatment of asthma in adult patients not adequately controlled with a maintenance combination of a long-acting beta2-agonist and a high dose of an inhaled corticosteroid who experienced one or more asthma exacerbations in the previous year.	One capsule to be inhaled once daily.
Ipratropium Bromide 0.025 % Inhalation Soln (250 mcg/ml)	B	All	Maintenance treatment of bronchospasm associated with chronic obstructive pulmonary disease, including chronic bronchitis and emphysema. Used concomitantly with inhaled beta-agonists in the treatment of acute bronchospasm associated with chronic obstructive pulmonary disease including chronic bronchitis and asthma.	Maintenance treatment: i) Adult and adolescents over 12 years old: 500mcg per dose, 3 to 4 times daily. ii) Children 6 - 12 years old: 250mcg per dose, 3 to 4 times daily. iii) Children less than 6 years old: 100 - 250mcg per dose, 3 to 4 times daily. Acute attacks (in combination with beta-agonist): i) Adult and adolescents over 12 years old: 500mcg per dose, time interval between doses may be determined by the physician. ii) Children 6 - 12 years old: 250mcg per dose, time interval between doses may be determined by the physician. iii) Children less than 6 years old: 100 - 250mcg per dose, time interval between doses may be determined by the physician.
Ipratropium Bromide 0.5 mg and Salbutamol 2.5 mg per UDV	B	All	Management of reversible bronchospasm associated with obstructive airway diseases	Acute attacks : 1 unit dose vial. In severe cases not relieved by 1 unit dose vial, 2 unit dose vials may require. Maintenance: 1 unit dose vial 3 - 4 times daily
Ipratropium Bromide 20 mcg and Fenoterol 50 mcg/dose Inhaler	B	All	Management of symptoms in chronic obstructive airway disorders with reversible bronchospasm such as bronchial asthma and chronic bronchitis with or without emphysema	ADULT & CHILD more than 6 years: Acute asthma 2 puffs. Severe cases: if breathing has not noticeably improved after 5 mins, 2 further puffs may be taken. Intermittent and long-term treatment 1-2 puffs for each administration, up to max 8 puffs/day (average: 1-2 puffs three times daily)
Montelukast Sodium 4 mg Oral Granules	A*	Paediatric	Asthmatics, not controlled on high dose inhaled corticosteroids more than 1600 mcg/day and with co-morbid allergic disorders. Chronic treatment of asthma	12 months - 5 years: 1 packet of 4mg oral granules daily at bedtime
Montelukast Sodium 5 mg Tablet	A*	Paediatric	Asthmatics, not controlled on high dose inhaled corticosteroids more than 1600 mcg/day and with co-morbid allergic disorders. Chronic treatment of asthma	CHILD 6 - 14 years: One 5 mg chewable tablet daily at bedtime
Salbutamol 0.5mg/ml Injection	A	All	i. Asthma and other conditions associated with reversible airways obstruction ii. For prevention of uncomplicated premature labour	i. 500 mcg by SC/IM injection 4 hourly or 250 mcg by slow IV. If required, by IV infusion, initially 5 mcg/min adjusted according to response and heart rate, usually in the range 3 - 20 mcg/min ii. Infusions containing 5 mg in 500ml (10 mcg/ml) at the rate of 10 - 45 mcg/min increased at intervals of 10 minutes until evidence of patient response as shown by reduction of strength, frequency or duration of contractions; maintain rate for 1 hour after contractions have stopped, then gradually reduce by 50% every 6 hours
Salbutamol 0.5 % Inhalation Solution, 10 ml	B	All	Indicated for the relief of bronchospasm in patients with reversible obstructive airway disease and acute bronchospasm.	2.5 to 5mg (0.5ml - 1ml), repeat according to response and tolerability. Dosing is individualised and according to product insert/protocol.
Salbutamol 100 mcg/dose Inhalation, 200 doses	B	All	Asthma and other conditions associated with reversible airways obstruction	ADULT : 100 - 200 mcg up to 3 - 4 times daily. CHILD : 100 mcg increased to 200 mcg if necessary
Salbutamol 2 mg/5 ml Syrup	B	All	Asthma and other conditions associated with reversible airways obstruction	CHILD 2 - 6 years : 1 - 2 mg 3 - 4 times daily, 6 - 12 years : 2 mg 3 -4 times daily
Salmeterol 25 mcg and Fluticasone Propionate 125 mcg Inhalation	A*	Medical	Regular treatment of reversible obstructive airway diseases including asthma.	ADULT and CHILD more than 12 years : 1 - 2 puff twice daily. CHILD over 4 years : 1 puff twice daily
Salmeterol 50 mcg and Fluticasone Propionate 250 mcg Inhalation	A*, A/KK	Medical	Prescriber Category A*: i) Treatment of COPD patients with a blood eosinophil count of 300 cells/microliter and more ii) Treatment of COPD patients with blood eosinophil count of 100 cells/microliter and more with history of repeated exacerbation despite regular treatment with long-acting bronchodilators. Prescriber Category A/KK: - Regular treatment of reversible obstructive airways diseases including asthma.	ADULT and CHILD more than 12 years : 1 puff twice daily.

Terbutaline Sulphate 0.5 mg/ml Injection	B	All	Bronchial asthma, chronic bronchitis, emphysema and other lung diseases where bronchoconstriction is a complicating factor	SC, IM or slow IV : 250-500 mcg up to 4 times daily. CHILD 2 - 15 years 10mcg/kg to a maximum of 300 mcg. Continuous IV infusion, as a solution containing 3 - 5 mcg/ml, 1.5 - 5 mca/minute for 8 - 10 hours; reduce dose for children
Theophylline 250 mg Long Acting Tablet	B	All	Reversible airways obstruction and acute severe asthma	ADULT: 250 mg 2 times daily. CHILD under 12 years : Up to 10 mg/kg body weight 2 times daily
Tiotropium 2.5mcg/puff Solution for Inhalation	A/KK	Medical	i) Maintenance bronchodilator treatment to relieve symptoms of patients with chronic obstructive pulmonary disease (COPD). ii) As add-on maintenance bronchodilator treatment in adult patients (18 years and older) with asthma who are currently treated with the maintenance combination of inhaled corticosteroids (≥800µg budesonide/day or equivalent) and long-acting β2-agonist and who experienced one or more severe exacerbations in the previous year.	5 mcg (2 puff) once daily, at the same time of the day
Tiotropium 2.5mcg and Olodaterol 2.5mcg per Actuation, Inhalation	A/KK	Medical	As a maintenance bronchodilator treatment to relieve symptoms in adult patients with chronic obstructive pulmonary disease (COPD).	2 puffs once daily, at the same time of the day.

R05. COUGH AND COLD PREPARATIONS

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Bromhexine HCl 4mg/5ml Oral Solution	B	All	Secretolytic therapy in acute and chronic bronchopulmonary diseases associated with abnormal mucous secretion and impaired mucous transport	Adult: 8-16 mg three times daily. Children: By body weight: 0.3 mg/kg/day 8 hourly for 7 days, then 0.15 mg/kg/day 8 hourly; or Based on age: 6-12 years – 4mg three times daily; 2-6 years – 2mg three times daily; Less than 2 years – 1mg three times daily.
Bromhexine HCl 8 mg Tablet	C	All	Secretolytic therapy in acute and chronic bronchopulmonary diseases associated with abnormal mucous secretion and impaired mucous transport.	Adult: 8-16 mg three times daily. Children: By body weight: 0.3 mg/kg/day 8 hourly for 7 days, then 0.15 mg/kg/day 8 hourly; or Based on age: 6-12 years – 4 mg three times daily; 2-6 years – 2 mg three times daily

R06. ANTIHISTAMINES FOR SYSTEMIC USE

Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Chlorpheniramine Maleate 10 mg/ml Injection	B	All	Allergic conditions	10 - 20 mg IM or SC, repeated if required. Not to exceed 40 mg in 24 hours. 10 - 20 mg over 1 minute by slow IV
Chlorpheniramine Maleate 2 mg/5ml Syrup	C	All	Symptomatic treatment of allergic conditions responsive to antihistamine	CHILD 2 - 5 years : 1 mg every 4 - 6 hours (maximum 6 mg daily) 6 - 12 years : 2 mg every 4 - 6 hours (maximum 12 mg daily)
Chlorpheniramine Maleate 4 mg Tablet	C	All	Symptomatic treatment of allergic conditions responsive to antihistamine	ADULT : 4 mg every 4 - 6 hours. Maximum 24 mg daily. CHILD 2 - 5 years : 1 mg every 4 - 6 hours (maximum 6 mg daily) 6 - 12 years : 2 mg every 4 - 6 hours (maximum 12 mg daily)
Diphenhydramine HCl 14mg/5ml & Ammonium Chloride 135mg/5ml Expectorant	C	All	Cough	ADULT : 5 - 10 ml 2 - 3 times daily.
Diphenhydramine HCl 7mg/5ml & Ammonium Chloride 67.5mg/5ml Expectorant (Peads)	C	All	Cough	CHILD 6-12 years: 2.5 to 5 ml 2-3 times daily CHILD 2-5 years: 2.5 ml 2-3 times daily NOT to be used in children less than 2 years in age
Loratadine 1 mg/ml Syrup	A	ENT	Allergic rhinitis, chronic urticaria and other allergic dermatological disorders	ADULT and CHILD over 6 years 10 mg once daily. CHILD 2 - 6 years: 5 mg once daily
Loratadine 10 mg Tablet	B	All	Allergic rhinitis and allergic dermatoses	ADULT and CHILD over 6 years 10 mg once daily. CHILD 2 - 6 years: 5 mg once daily
Promethazine HCl 25 mg/ml Injection	B	All	i) Allergic conditions ii) Treatment and prevention of vomiting including: - motion sickness - drug induced nausea - prevention and control of nausea and vomiting associated with certain types of anaesthesia and surgery	i) Allergic Conditions Adult and adolescent dose: 25mg intramuscular or intravenous. May be repeated within 2 hours if required. Children 2 years and older: intramuscularly-0.125mg/kg body weight every 4 to 6 hours OR 0.5mg/kg bodyweight at bedtime as needed OR 6.25-12.5mg three times a day as needed OR 25mg at bedtime as needed. ii. Treatment and prevention of vomiting: - Motion Sickness Adult and adolescent dose: 25mg twice a day as needed. Children: 0.5mg/kg every 12 hours as needed OR 10 - 25mg twice a day as needed. - Anti Emetic Therapy Adult and adolescent dose: 25mg initially and then 10 -25mg every 4 - 6 hours as needed. Children: 0.25-0.5mg/kg every 4 to 6 hours as needed OR 10 - 25mg every 4 to 6 hours as needed. Dosing is individualised and according to product insert/protocol
Promethazine HCl 5 mg/5 ml Syrup	B	All	Allergic conditions	CHILD 2 - 5 years: 5 - 15 mg daily 5 - 10 years : 10 - 25 mg daily

S. SENSORY ORGANS				
S01. OPHTHALMOLOGICALS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Chloramphenicol 0.5% Eye Drops	C	All	Ophthalmic infections	Instill 1 drop of a 0.5% solution every 2 hr. Increase dosage interval upon improvement.
Chloramphenicol 1% Eye Ointment	C	All	Treatment of ocular infections involving the conjunctiva and/or cornea caused by chloramphenicol susceptible organisms	ADULT and CHILD : Apply to the conjunctiva, a thin strip (approximately 1 cm) of ointment every 3 hours or more frequently
Fluorescein 1 mg Ophthalmic Strip	B	All	Used in diagnostic examinations	Moisten tip with tear fluid from lower fornix, sterile water or ophthalmic solution and gently stroke across the conjunctiva
Ofloxacin 0.3% Otic Solution	A/KK	ENT	i. Acute otitis media with tympanostomy tubes ii. Chronic suppurative otitis media with perforated tympanic membranes and iii. Otitis externa	CHILD: 1 - 12 years: 5 drops twice daily for 10 days. ADULT and CHILD over 12 years: 6 - 10 drops twice daily and remain in the ear about 10 minutes
Proparacaine HCl 0.5% Ophthalmic Drop	B	A&E	Topical anaesthesia in ophthalmic procedures	Deep anaesthesia: 1 or 2 drops in the (eyes) every 5 to 10 minutes for 3 to 5 doses. For minor surgical procedures: instill 1 to 2 drops every 5 to 10 minutes for 1 to 3 doses. Tonometry and/or tonography procedure: 1 to 2 drops in each eye before procedure.
Sodium Chloride 0.9% Eye Drops	C	All	Irrigation of conjunctival sac	1 - 2 drops every 3 - 4 hours
S02. OTOLOGICALS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Chloramphenicol 5% w/v Ear Drops	C	All	Acute otitis media, otitis externa with perforation	Apply 2 - 3 drops into the ear 2 - 3 times daily. Not to be used for long term
Docusate Sodium 0.5% Ear Drops (Solu wax)	C	All	Occlusion or partial occlusion of the external auditory meatus by soft wax or wax plug	Tilt head & instill 5-10 drops into ears then remain in position for 4-5 min for 2 consecutive nights. Easily remove earwax by normal cleaning.
Sodium Bicarbonate 5% w/v Ear Drops	C	All	To soften the impacted ear wax	Apply 3 - 4 drops up to 4 times daily for 3-5 days
V. VARIOUS				
V03. ALL OTHER THERAPEUTIC PRODUCTS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Acetylcysteine 200mg/ml Inj	A*	All	Antidote for paracetamol poisoning	Diluted with dextrose 5% and infused IV. Initial, 150 mg/kg IV in 200 ml over 60 minutes, then 50 mg/kg IV in 500 ml over 4 hours, followed by 100 mg/kg IV in 1000 ml over 16 hours. Total dose: 300mg/kg in 20 hour
Calcium Polystyrene Sulphonate Powder	A*, A/KK	All	PRESCRIBER CATEGORY A*: Hyperkalemia resulting from acute or chronic renal failure PRESCRIBER CATEGORY A/KK: For asymptomatic mild hyperkalemia without ECG changes	ADULT: 15 – 30g daily in 2-3 divided doses. Each dose should be suspended in 30 – 50ml of water and administered orally at least 3 hours before or 3 hours after other oral medications. CHILD: 0.125-0.25g/kg orally or rectally 4 times per day (max: 10g/dose). NEONATE: 0.125-0.25g/kg rectally 4 times/day. Evacuate the resin 8-12 hours after the last dose with glycerine enema. (Oral route is CONTRAINDICATED in neonates). Dosing is individualised and according to product insert/protocol
Flumazenil 0.5mg/5ml Inj	B	All	i) Diagnosis and/or management of benzodiazepine overdose due to self-poisoning or accidental overdose ii) Reversal of sedation following anaesthesia with benzodiazepine	i) Initial, 0.2 mg IV over 30 seconds; if desired level of consciousness not obtained after an additional 30 seconds, give dose of 0.3 mg IV over 30 seconds; further doses of 0.5 mg IV over 30 seconds may be given at 1-minute intervals if needed to maximum total dose of 3 mg; patients with only partial response to 3 mg may require additional slow titration to a total dose of 5 mg, if no response 5 minutes after receiving total dose of 5 mg, overdose is unlikely to be benzodiazepine and further treatment with flumazenil will not help ii) 0.2 mg IV over 15 seconds; if desired level of consciousness is not obtained after waiting 45 seconds, a second dose of 0.2 mg IV may be given and repeated at 60-second intervals as needed (up to a maximum of 4 additional times) to a maximum total dose of 1 mg; most patients respond to doses of 0.6 to 1 mg; in the event of re-sedation, repeated doses may be given at 20-minute intervals if needed; for repeat treatment, no more than 1 mg (given as 0.5 mg/minute) should be given at any one time and no more than 3 mg should be given in any one hour
Fuller's Earth Powder	C	All	Adsorbent in pesticide poisoning	Adult: 100-150g every 2-4 hours. Child: 1-2g/kg. (100g of Fuller's Earth is mixed with 200ml water. Repeat until Fuller's Earth is seen in stool (normally between 4-6 hours)
Lanthanum Carbonate 1000 mg Chewable Tablet	A*	Nephrology	Phosphate binding agent for the treatment of hyperphosphataemia in dialysis patients with sustained hypercalcaemia of more than three months and secondary hyperparathyroidism	Initial: 750 to 1500 mg/day in divided doses with meals, then titrate in increments of 750 mg/day at intervals of 2 to 3 weeks. Maintenance: 1500-3000 mg/day in divided doses. Max: 3750 g/day
Leucovorin Calcium (Calcium Folate) 10mg/mL Injection	A	A&E	(i) Biochemical modulator for 5-Fluorouracil in the treatment of solid tumour; (ii) As rescue for high dose methotrexate; (iii) Megaloblastic anaemias due to deficiency of folic acid	i) 200mg/m ² by slow IV injection over a minimum 3 minutes, followed by 5-Fluorouracil or 20mg/m ² IV followed by 5-Fluorouracil. In both cases, treatment is repeated daily for 5 days; may repeat at 4-week intervals for 2 courses then 4- to 5-week intervals ii) 15 mg (approximately 10mg/m ²) every 6 hours for 10 doses, starting 24 hours after the beginning of the methotrexate infusion iii) Up to 1 mg daily. Dosing is individualised and according to product insert/protocol
Naloxone HCl 0.4 mg/ml (Adult) Injection	B	All	For the complete/partial reversal of narcotic depression including respiratory depression induced by opioids such as natural and synthetic narcotics. Diagnosis of suspected acute opioids overdosage	Initially 0.4 - 2 mg IV repeated at intervals of 2 - 3 minutes according to patient's needs
Pralidoxime 25 mg/ml Injection	B	All	Antidote in the treatment of organophosphorus insecticide poisoning and in the control of overdosage by anticholinergic drugs used in the treatment of myasthenia gravis	Adult: Used in combination with atropine. Admin atropine via IM/IV inj and repeat as needed until patient shows signs of atropine toxicity. Maintain atropinisation for at least 48 hr. As soon as the effects of atropine are observed, 1-2 g of pralidoxime (chloride, iodide or mesilate) may be given via IM/IV inj. Repeat dose after 1 hr, then every 8-12 hr, if necessary. In severe poisoning, continuous infusion of 200-500 mg/hr may be given, titrated according to response. Alternatively, pralidoxime chloride may be given at an initial dose of 30 mg/kg via IV infusion over 20 minutes or IV inj over 5 minutes, followed by IV infusion at 8 mg/kg/hr. Max: 12 g/24 hr. Child: As mesilate: 20-60 mg/kg. Renal impairment: Dose adjustment may be required.
Protamine Sulphate 10 mg/ml Injection	B	All	Heparin overdose and following cardiac or arterial surgery or dialysis procedures when required to neutralize the effects of heparin administered during extracorporeal circulation	5 ml slow IV injected over 10 minutes. If administered within 15 minutes of heparin dose, 1 mg will neutralise approximately 100 units of heparin. If longer time has elapsed, less protamine is required. Not more than 50 mg should be injected at any one time. The dose is dependent on the amount and type of heparin to be neutralised, its route of administration and the time elapsed since it was last given and blood coagulation studies.
Sevelamer 800mg Tablet	A*	Nephrology	Control of hyperphosphatemia in adult patients receiving haemodialysis and peritoneal dialysis.	Starting dose is one or two 800mg tablets three times per day with meals. Adjust by one tablet per meal in two weeks interval as needed to obtain serum phosphorus target (1.13 to 1.78mmol/L). Sevelamer carbonate 800mg tablet should be used in context of multiple therapeutic approach which include calcium supplement, 1, 25-hydroxy Vitamin D3 or one of its analogues to control the development of renal bone disease.

V04. DIAGNOSTIC AGENTS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Dextrose Powder	B	All	Use as a diagnostic agent for diabetes	75 g stat
Tuberculin PPD Injection	B	All	For routine Mantoux (tuberculin sensitivity) test	10 units is injected intradermally
V07. ALL OTHER NON-THERAPEUTIC PRODUCTS				
Generic Name	Prescribing Category	Department/ Specialty	Indications	Dosage
Hydroxyethyl Cellulose Jelly	B	All	For lubricating purpose	Apply sufficiently for lubricating purpose

LIST C & C+ MEDICATION

GENERIC NAME	MDC	CAT.	INDICATION
Acetylsalicylic Acid, Soluble 300 mg Tablet	N02BA01000T4001XX	C	Mild to moderate pain
Acriflavine 0.1% Lotion	D08AA03000L6001XX	C+	Infected skin, lesions, cuts, abrasions, wounds and burns.
Albendazole 200 mg Tablet	P02CA03000T1001XX	C+	i) Single or mixed infestations of intestinal parasites ii) Strongyloides infection
Albendazole 200 mg/5 ml Suspension	P02CA03000L8001XX	C+	i) Single or mixed infestations of intestinal parasites ii) Strongyloides infection
Alcohol 70% Solution	D08AX08000L9901XX	C+	Use as antiseptic and disinfectant
Aqueous Cream	D02AX00000G1001XX	C+	Dry skin
Ascorbic Acid 100 mg Tablet	A11GA01000T1002XX	C+	Vitamin C deficiency
BCG.Freeze-dried Vaccine Injection	J07AN01000P4001XX	C+	For the prevention of tuberculosis
Benzyl Benzoate 25 % Emulsion (Adult)	P03AX01000L2002XX	C+	Scabies for adult and children more than 12 years old
Bisacodyl 10 mg Suppository	A06AB02000S2002XX	C	i) Constipation ii) Bowel preparation for radiological procedures and surgery
Bisacodyl 5 mg Tablet	A06AB02000T1001XX	C	i) Constipation ii) Bowel preparation for radiological procedures and surgery
Bromhexine HCl 8 mg Tablet	R05CB02110T1001XX	C	Secretolytic therapy in acute and chronic bronchopulmonary diseases associated with abnormal mucous secretion and impaired mucous transport.
Calamine Cream	D04AX00000G1001XX	C+	Soothes and relieves nappy rashes, prickly heat, minor skin irritations, insect bites and sunburn, Pruritic skin conditions
Calamine Lotion	D04AX00000L8001XX	C+	Soothes and relieves nappy rashes, prickly heat, minor skin irritations, insect bites and sunburn, Pruritic skin conditions
Calcium Lactate 300mg Tablet	A12AA05125T1001XX	C	For prophylaxis of calcium deficiency and treatment of chronic hypocalcaemia
Charcoal, Activated 250 mg Tablet	A07BA01000T1001XX	C	i) Diarrhoea and food poisoning ii) Reduce absorption of drugs, plant, inorganic poison and chemicals in poisoning cases
Chloramphenicol 0.5% Eye Drops	S01AA01000D2001XX	C	Broad spectrum antibiotic in superficial eye infections
Chloramphenicol 1% Eye Ointment	S01AA01000G5101XX	C	Treatment of ocular infections involving the conjunctiva and/or cornea caused by chloramphenicol susceptible organisms
Chloramphenicol 5% w/v Ear Drops	S02AA01000D1001XX	C	Acute otitis media, otitis externa with perforation
Chlorhexidine Gluconate 0.2 % Mouthwash	R02AA05137M2001XX	C	As a gargle
Chlorhexidine Gluconate 2% in Alcohol 70%	D08AC52137L9902XX	C	Use as disinfectant in central venous catheter care bundle
Chlorhexidine Gluconate 4% Scrub	D08AC02137M9901XX	C+	Surgical hand scrub/disinfection, pre-op skin preparation
Chlorhexidine Gluconate 1% cream	D08AC02137G1001XX	C+	As a disinfectant cream. It can be used for disinfection or lubricating during gynaecological and obstetric procedures or childbirth.

Chlorhexidine Gluconate 5 % Solution	D08AC02137L9901XX	C+	i) Preoperative skin disinfection ii) Wounds or burns iii) Emergency disinfection of instruments
Chloroquine Phosphate 200 mg Tablet (150 mg Chloroquine base)	P01BA01162T1001XX	C	Treatment of malaria - acute attack
Chlorpheniramine Maleate 2 mg/5ml Syrup	R06AB04253L9001XX	C	Symptomatic treatment of allergic conditions responsive to antihistamine
Chlorpheniramine Maleate 4 mg Tablet	R06AB04253T1001XX	C	Symptomatic treatment of allergic conditions responsive to antihistamine
Sodium Lactate Compound (Hartmanns Solution), 500 ml	B05XA30125P6001XX	C	Replacement of extracellular losses of fluid and electrolytes, as an alkaliniser agent
Diphenhydramine HCl 14mg/5ml & Ammonium Chloride 135mg/5ml Expectorant	R06AA52110L2101XX	C	Cough
Diphenhydramine HCl 7mg/5ml & Ammonium Chloride 67.5mg/5ml Expectorant (Peads)	R06AA52110L2101XXX	C	Cough
Ferric Ammonium Citrate 800 mg/10 ml Paediatric Mixture	R06AA52110L9003XXX	C	Prevention and treatment of iron-deficiency anaemias
Ferrous Fumarate 200 mg Tablet	B03AA02138T1001XX	C+	Prevention and treatment of iron-deficiency anaemias
Folic Acid 5 mg Tablet	B03BB01000T1001XX	C+	i) For the prevention and treatment of folate deficiency states ii) For the prevention of neural tube defect in the foetus
Fuller's Earth Powder	V03AB00000F2101XX	C	Adsorbent in pesticide poisoning
Glycerin	A06AX01000L5001XX	C+	As a lubricant and osmotic dehydrating agent
Glycerin 25 % & Sodium Chloride 15 % Disposable Enema	A06AG20921G2001XX	C+	Constipation
Glyceryl Trinitrate 0.5 mg Tablet	C01DA02221T7001XX	C	Prophylaxis and treatment of angina and left ventricular failure
Hepatitis B Vaccine Injection 20 mcg: Adult	J07BC01000P4001XX	C+	Immunisation against infections caused by Hepatitis B virus
Hepatitis B Vaccine Injection: Paed-DNA	J07BC01000P4001XX	C+	Immunisation against infections caused by Hepatitis B virus
Hydrocortisone Sodium Succinate 100 mg Injection	H02AB09520P4001XX	C	Conditions responsive to systemic or local glucocorticoid injection therapy especially in emergencies
Hydrogen Peroxide 20 vol Solution	D08AX01241L9901XX	C	Skin disinfection, particularly cleansing and deodorising wounds and ulcers
Hyoscine N-Butylbromide 10 mg Tablet	A03BB01320T1001XX	C	Gastrointestinal tract and genito-urinary tract spasm, dyskinesia of the biliary system.
Lactulose 3.35 g/5 ml Liquid	A06AD11000L5001XX	C+	i) Constipation ii) Hepatic encephalopathy
Liquid Paraffin	A06AA01000L5001XX	C	Constipation
Magnesium Sulphate 50% Injection	B05XA05183P3001XX	C	i) Treatment and prophylaxis of acute hypomagnesaemia ii) Prevention and treatment of life-threatening seizures in the treatment of toxemias of pregnancy (pre-eclampsia and eclampsia)
Magnesium Trisilicate Mixture	A02AA10912L2101XX	C	Heartburn, dyspepsia
Magnesium Trisilicate Tablet	A02AA10912T1001XX	C	Heartburn, dyspepsia
Mefenamic Acid 250 mg Capsule	M01AG01000C1001XX	C	Mild to moderate pain
Methyl Salicylate 25% Ointment	M02AC00260G5001XX	C+	Relief of minor aches and pains of muscles and joints associated with simple backache, arthritis and rheumatic conditions.

Miconazole 2% Cream	D01AC02221G1001XX	C	i) Fungal infections ii) Antifungal agent that has been in various candida infections including vaginal candidiasis.
Multivitamin Syrup	A11BA00901L9001XX	C+	For prevention and treatment of vitamin deficiencies
Oral Rehydration Salt	A07CA00905F2101XX	C	Replacement of fluid and electrolytes loss in diarrhoea
Oxytocin 5 units & Ergometrine Maleate 0.5mg/ml Injection	G02AC01900P3001XX	C+	i) Prevention and treatment of post partum haemorrhage ii) Management of third stage of labour
Paracetamol 125 mg Suppository	N02BE01000S2002XX	C+	Symptomatic relief of fever and post operative pain whom cannot tolerate oral preparations.
Paracetamol 250 mg/5 ml Syrup	N02BE01000L8002XX	C+	Mild to moderate pain and pyrexia
Paracetamol 500 mg Tablet	N02BE01000T1001XX	C+	Mild to moderate pain and pyrexia
Paraffin, Yellow Soft	D02AC00000G5002XX	C	Xerosis and ichthyosis
Phenoxymethyl Penicillin 125 mg Tablet	J01CE02500T1001XX	C	i) Treatment or prophylaxis of infections caused by susceptible organisms ii) Prophylactic, rheumatic fever
Phenoxymethyl Penicillin 125 mg/5 ml Syrup	J01CE02500F2101XX	C	Treatment or prophylaxis of infections caused by susceptible organisms
Potassium Chloride 1 g/10 ml Mixture	A12BA01100L2101XX	C	Potassium depletion
Potassium Citrate 3g/10 ml & Citric Acid Mixture	A12BA02955L2101XX	C	For systemic or urine alkalinization
Potassium Permanganate 1:10,000 Solution	D08AX06362L9901XX	C+	Cleansing and deodorising suppurative eczematous reactions and wounds
Pyridoxine HCl 10 mg (Vitamin B6) Tablet	A11HA02110T1001XX	C+	i) Pyridoxine-dependent convulsions in infant ii) Sideroblastic anaemia iii) B6-deficient anaemia in adult iv) Prophylaxis to peripheral neuritis in isoniazid therapy v) Nausea and vomiting of pregnancy and irradiation sickness
Sodium Bicarbonate 5% w/v Ear Drops	S02DC00131D1001XX	C	To soften the impacted ear wax
Sodium Bicarbonate, Magnesium Carbonate Compound Mixture	A02AH00912L2101XX	C	Heartburn, for rapid relief of dyspepsia
Sodium Chloride 0.9% Eye Drops	S01XA03000D2001XX	C	Irrigation of conjunctival sac
Sodium Chloride 0.9% Injection, 500 ml	B05XA03100P6002XX	C+	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions
Sodium Chloride 0.9% with Dextrose 5% Injection, 500 ml	B05XA03904P6003XX	C+	For replenishing fluid and energy and for restoring or maintaining the concentration of sodium and chloride ions
Sodium Lactate Compound (Hartmanns Solution), 500 ml	B05XA30125L9901XX	C	Replacement of extracellular losses of fluid and electrolytes, as an alkaliniser agent
Tetanus Toxoid Injection	J07AM01000P3001XX	C+	Immunization against tetanus infection
Thymol Compound Gargle	A01AD11985M2001XX	C	For sore throat and minor mouth inflammation
Vitamin B Complex Tablet	A11EA00901T1001XX	C+	Prophylaxis and treatment of vitamin B deficiency
Vitamin K1 1mg/ml Injection	B02BA01000P3001XX	C+	Vitamin K deficiency in neonates
Water for Injection	V07AB00000P3001XX	C+	As a diluent and vehicle for the administration of medications
White Soft Paraffin (Vaseline)	D02AC00000G5001XX	C	Xerosis and ichthyosis
Zinc Oxide Cream	D02AB00000G1001XX	C+	Skin protective in various skin conditions such as nappy rash, eczema and problem skin

Zinc oxide, benzyl benzoate and balsam peru suppository	C05AX02931S2001XX	C	For relief of pruritus, burning and soreness in patients with haemorrhoids and perianal conditions
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