Pharmaceutical Management Agency

Section H Update for Hospital Pharmaceuticals

Effective 1 July 2016

Cumulative for April, May, June and July 2016





Contents

Summary of decisions effective 1 July 2016	3
Section H changes to Part II	8
Index	26

Summary of decisions EFFECTIVE 1 JULY 2016

- Aciclovir (Lovir) tab dispersible 200 mg, 400 mg and 800 mg price decrease and addition of HSS
- Amiloride hydrochloride (Apo-Amiloride) tab 5 mg price decrease
- Amoxicillin (Apo-Amoxi) cap 250 mg and 500 mg price decrease and addition of HSS
- Bortezomib (Velcade) inj 3.5 mg vial addition of HSS
- Bortezomib (Velcade) inj 1 mg vial to be delisted 1 September 2016
- Carmellose sodium with pectin and gelatine, paste and powder amended chemical name
- Cefaclor (Ranbaxy-Cefaclor) grans for oral liq 25 mg per ml addition of HSS
- Cefaclor (Ranbaxy-Cefaclor) cap 250 mg price decrease and addition of HSS
- Cilazapril with hydrochorothiazide (Apo-Cilazapril/Hydrochlorothiazide) tab
 5 mg with hydrochlorothiazide 12.5 mg price decrease and addition of HSS
- Clindamycin (Clindamycin ABM) cap 150 mg price decrease and addition of HSS
- Clindamycin (Dalacin C) inj 150 mg per ml, 4 ml ampoule price decrease and addition of HSS
- Clomiphene citrate (Mylan Clomiphen) tab 50 mg new listing
- Dexamethasone phosphate (Max Health) inj 4 mg per ml, 1 ml and 2 ml ampoules – extension of HSS
- Dihydrocodeine tartrate (DHC Continus) tab long-acting 60 mg price decrease and addition of HSS
- Dimercaptosuccinic acid (e.g. PCNZ, Optimus Healthcare, Chemet) cap 100 mg and 200 mg – amended example brands
- Dimethicone (healthE Dimethicone 5%) crm 5% tube, 100 g price decrease and addition of HSS
- Dimethicone (healthE Dimethicone 5%) crm 5% pump bottle, 500 ml price decrease and addition of HSS
- Dipyridamole (Pytazen SR) tab long-acting 150 mg addition of HSS
- Eptacog alfa [recombinant factor VIIA] (NovoSeven RT) inj 1 mg, 2 mg, 5 mg and 8 mg syringes – price increase
- Exemestane (Pfizer Exemestane) tab 25 mg new listing and addition of HSS
- Exemestane (Aromasin) tab 25 mg removal of HSS and to be delisted 1 January 2017

Summary of decisions - effective 1 July 2016 (continued)

- Fluconazole (Fluconazole-Claris) inj 2 mg per ml, 50 ml and 100 ml vial
 addition of HSS
- Glycopyrronium bromide (Max Health) inj 200 mcg per ml, 1 ml ampoule
 extension of HSS
- Itraconazole (Itrazole) cap100 mg price decrease and addition of HSS
- Lactulose (Laevolac) oral liq 10 g per 15 ml price decrease and addition of HSS
- Lamotrigine (Motrig) tab dispersible 25 mg, 50 mg and 100 mg new listing
- Ledipasvir with sofosbuvir (Harvoni) tab 90 mg with sofosbuvir 400 mg new listing
- Levomepromazine hydrochloride (Wockhardt) inj 25 mg per ml, 1 ml ampoule
 new listing and addition of HSS
- Levomepromazine inj 25 mg per ml, 1 ml ampoule presentation to be delisted 1 September 2016
- Loperamide hydrochloride (Diamide Relief) cap 2 mg price decrease and addition of HSS
- Loratadine (Lorifix) tab 10 mg price decrease and addition of HSS
- Methotrexate (Methotrexate Sandoz) inj prefilled syringe 7.5 mg, 10 mg, 15 mg, 20 mg, 25 mg and 30 mg – price decrease
- Metoprolol tartrate (Slow-Lopresor) tab long-acting 200 mg price increase
- Morphine sulphate (Arrow-Morphine LA) tab long-acting 10 mg, 30 mg, 60 mg and 100 mg – price decrease and addition of HSS
- Neostigmine metilsulfate with glycopyrronium bromide (Max Health) inj
 2.5 mg with glycopyrronium bromide 0.5 mg per ml, 1 ml ampoule
 extension of HSS
- Nivolumab (Opdivo) inj 10 mg per ml, 4 ml and 10 ml vials new listing
- Nortriptyline hydrochloride (Norpress) tab 10 mg and 25 mg price decrease and addition of HSS
- Omeprazole (Dr Reddy's Omeprazole) inj 40 mg ampoule with diluent price increase and addition of HSS
- Ondansetron (Ondansetron-Claris) inj 2 mg per ml, 2 ml ampoule new listing and addition of HSS
- Ondansetron (Ondansetron Kabi) inj 2 mg per ml, 4 ml ampoule new listing and addition of HSS
- Ondansetron (Ondanaccord) inj 2 mg per ml, 2 ml and 4 ml ampoules to be delisted 1 September 2016

Summary of decisions – effective 1 July 2016 (continued)

- Oxybutynin (Apo-Oxybutynin) tab 5 mg price decrease and addition of HSS
- Oxybutynin (Apo-Oxybutynin) oral liq 5 mg per 5 ml price increase and addition of HSS
- Oxycodone hydrochloride (BNM) tab controlled-release 5 mg, 10 mg, 20 mg, 40 mg and 80 mg – new listing and addition of HSS
- Oxycodone hydrochloride (Oxycontin) tab controlled-release 5 mg to be delisted 1 September 2016
- Oxycodone hydrochloride (Oxycodone Controlled Release Tablets (BNM)) tab controlled-release 10 mg, 20 mg, 40 mg and 80 mg – to be delisted 1 September 2016
- Paritaprevir, ritonavir and ombitasvir with dasabuvir (Viekira Pak) tab 75 mg with ritonavir 50 mg, and ombitasvir 12.5 mg (56), with dasabuvir tab 250 mg (56) new listing
- Paritaprevir, ritonavir and ombitasvir with dasabuvir and ribavirin (Viekira Pak-RBV) tab 75 mg with ritonavir 50 mg, and ombitasvir 12.5 mg (56), with dasabuvir tab 250 mg (56) and ribavirin tab 200 mg (168) new listing
- Phenoxymethylpenicillin [penicillin V] (AFT) grans for oral liq 125 mg per 5 ml and 250 mg per 5 ml – price decrease and addition of HSS
- Pramipexole hydrochloride (Ramipex) tab 0.25 mg and 1 mg addition of HSS
- Rituximab (Mabthera) inj 10 mg per ml, 10 ml and 50 ml vial amended restriction
- Ropinirole hydrochloride (Apo-Ropinirole) tab 0.25 mg price increase and addition of HSS
- Ropinirole hydrochloride (Apo-Ropinirole) tab 1 mg price decrease and addition of HSS
- Ropinirole hydrochloride (Apo-Ropinirole) tab 2 mg addition of HSS
- Ropinirole hydrochloride (Apo-Ropinirole) tab 5 mg price increase and addition of HSS
- Sertraline (Arrow-Sertraline) tab 50 mg and 100 mg price decrease and addition of HSS
- Sirolimus (Rapamune) tab 1 mg and 2 mg, and oral liq 1 mg per ml price decrease
- Sodium chloride (Baxter) inj 0.45%, 500 ml bag, 18 bag pack new listing and addition of HSS
- Sodium chloride (Baxter) inj 0.45%, 500 ml bag, 1 bag pack to be delisted 1 September 2016

Summary of decisions - effective 1 July 2016 (continued)

- Sodium chloride (Baxter) inj 0.9%, 50 ml bag, 60 bag pack new listing and addition of HSS
- Sodium chloride (Baxter) inj 0.9%, 50 ml bag, 1 bag pack to be delisted 1 September 2016
- Sodium chloride (Baxter) inj 0.9%, 100 ml bag, 48 bag pack new listing and addition of HSS
- Sodium chloride (Baxter) inj 0.9%, 100 ml bag, 1 bag pack to be delisted 1 September 2016
- Sodium chloride (Baxter) inj 0.9%, 250 ml bag, 24 bag pack new listing and addition of HSS
- Sodium chloride (Baxter) inj 0.9%, 250 ml bag, 1 bag pack to be delisted 1 September 2016
- Sodium chloride (Baxter) inj 0.9%, 500 ml bag, 18 bag pack new listing and addition of HSS
- Sodium chloride (Baxter and Freeflex) inj 0.9%, 500 ml bag, 1 bag pack
 to be delisted 1 September 2016
- Sodium chloride (Baxter) inj 0.9%, 1,000 ml bag, 12 bag pack new listing and addition of HSS
- Sodium chloride (Baxter and Freeflex) inj 0.9%, 1,000 ml bag, 1 bag pack
 to be delisted 1 September 2016
- Sodium chloride (Baxter) inj 3%, 1,000 ml bag, 12 bag pack new listing and addition of HSS
- Sodium chloride (Baxter) inj 3%, 1,000 ml bag, 1 bag pack to be delisted 1 September 2016
- Sodium hyaluronate [hyaluronic acid] (Healon GV) inj 14 mg per ml, 0.85 ml and 0.55 ml syringes – addition of HSS
- Sodium hyaluronate [hyaluronic acid] (Healon 5) inj 23 mg per ml, 0.6 ml syringe – new listing and addition of HSS
- Sodium hyaluronate [hyaluronic acid] (Healon) inj 10 mg per ml, 0.85 ml syringe new listing and addition of HSS
- Sodium hyaluronate [hyaluronic acid] (Provisc) inj 10 mg per ml, 0.85 ml syringe – to be delisted 1 September 2016
- Sodium hyaluronate [hyaluronic acid] with chondroitin sulphate (Duovisc) inj 30 mg per ml with chondroitin sulphate 40 mg per ml, 0.5 ml syringe and inj 10 mg sodium hyaluronate [hyaluronic acid] per ml, 0.55 ml syringe – addition of HSS

Summary of decisions – effective 1 July 2016 (continued)

- Sodium hyaluronate [hyaluronic acid] with chondroitin sulphate (Viscoat) inj 30 mg per ml with chondroitin sulphate 40 mg per ml, 0.75 ml syringe

 amended presentation, new listing and addition of HSS
- Sodium phenylbutyrate (Pheburane) grans 483 mg per g, 174 g new listing
- Tenoxicam (Tilcotil) tab 20 mg new listing and addition of HSS
- Tenoxicam (Reutenox) tab 20 mg to be delisted 1 September 2016
- Terazosin (Actavis) tab 1 mg price increase, addition of HSS and amended brand name
- Tetrabenazine (Motetis) tab 25 mg price decrease and addition of HSS
- Tetracosactide [tetracosactrin] inj 250 mcg per ml, 1 ml ampoule (Synacthen) and inj 1 mg per ml, 1 ml ampoule (Synacthen Depot) price increase
- Timolol (Timoptol XE) eye drops gel forming 0.25% and 0.5% addition of HSS
- Tiotropium bromide soln for inhalation 2.5 mcg per dose (Spiriva Respimat) and powder for inhalation 18 mcg per dose (Spiriva) price decrease
- Tranexamic acid (Cyklokapron) tab 500 mg price decrease and addition of HSS
- Urea (healthE Urea Cream) crm 10%, 100 g new listing and addition of HSS
- Verapamil hydrochloride (Isoptin) inj 2.5 mg per ml, 2 ml ampoule price increase
- Voriconazole (Vfend) powder for oral suspension 40 mg per ml amended presentation and price increase
- Water (Baxter) inj 1,000 ml bag, 12 bag pack new listing and addition of HSS
- Water (Baxter) inj 1,000 ml bag, 1 bag pack to be delisted 1 September 2016
- Zidovudine [AZT] (Retrovir) cap 100 mg and oral liq 10 mg per ml addition of HSS

Price (ex man. Excl. GST) \$

Brand or Generic Manufacturer

Section H changes to Part II

Effective 1 July 2016

ALIMENTARY TRACT AND METABOLISM

13	LOPERAMIDE HYDROCHLORIDE (4 price and addition of HSS) Cap 2 mg – 1% DV Sep-16 to 20197.05	400	Diamide Relief
15	GLYCOPYRRONIUM BROMIDE (extension of HSS) Inj 200 mcg per ml, 1 ml ampoule – 1% DV Jul-16 to 201917.14	10	Max Health
16	OMEPRAZOLE († price and addition of HSS) Inj 40 mg ampoule with diluent – 1% DV Sep-16 to 2019 33.98	5	Dr Reddy's Omeprazole
20	LACTULOSE (4 price and addition of HSS) Oral liq 10 g per 15 ml – 1% DV Sep-16 to 2019	500 ml	Laevolac
21	SODIUM PHENYLBUTYRATE (new listing) → Grans 483 mg per g	174 g	Pheburane

Initiation

Metabolic physician

Re-assessment required after 12 months

For the chronic management of a urea cycle disorder involving a deficiency of carbamylphosphate synthetase, ornithine transcarbamylase or argininosuccinate synthetase.

Continuation

Metabolic physician

Re-assessment required after 12 months

The treatment remains appropriate and the patient is benefiting from treatment.

23 CARMELLOSE SODIUM SODIUM CARBOXYMETHYLCELLULOSE WITH PECTIN AND GELATINE (amended chemical name)

Paste Powder

BLOOD AND BLOOD FORMING ORGANS

30	EPTACOG ALFA [RECOMBINANT FACTOR VIIA] († price)		
	→ Inj 1 mg syringe1,178.30	1	NovoSeven RT
	→ Inj 2 mg syringe2,356.60	1	NovoSeven RT
	→ Inj 5 mg syringe	1	NovoSeven RT
	→ Inj 8 mg syringe9,426.40	1	NovoSeven RT
30	TRANEXAMIC ACID (‡ price and addition of HSS) Tab 500 mg – 1% DV Sep-16 to 2019 20.67	100	Cyklokapron
34	DIPYRIDAMOLE (addition of HSS) Tab long-acting 150 mg – 1% DV Sep-16 to 2019 11.52	60	Pytazen SR

		Price (ex man. Excl. 6		Brand or Generic
_		\$	Per	Manufacturer
Cha	nges to Section H Part II – effective 1 July 201	6 (continued)		
37	SODIUM CHLORIDE (pack change and addition of HSS) Inj 0.45%, 500 ml bag – 1% DV Sep-16 to 2019 Inj 0.9%, 50 ml bag – 1% DV Sep-16 to 2019 Inj 0.9%, 100 ml bag – 1% DV Sep-16 to 2019 Inj 0.9%, 250 ml bag – 1% DV Sep-16 to 2019 Inj 0.9%, 500 ml bag – 1% DV Sep-16 to 2019 Inj 0.9%, 1,000 ml bag – 1% DV Sep-16 to 2019 Inj 3%, 1,000 ml bag – 1% DV Sep-16 to 2019 Note – Baxter sodium chloride inj 0.45%, inj 0.9% and ir Note – Freeflex sodium chloride inj 0.9% to be delisted 1			Baxter Baxter Baxter Baxter Baxter Baxter Baxter Baxter Baxter 1 September 2016.
38	WATER (pack change and addition of HSS) Inj, 1,000 ml bag – 1% DV Sep-16 to 2019 Note – Baxter water inj, single bags to be delisted 1 Sep		12	Baxter
CAR	DIOVASCULAR SYSTEM			
39	CILAZAPRIL WITH HYDROCHLOROTHIAZIDE (‡ price an Tab 5 mg with hydrochlorothiazide 12.5 mg — 1% DV Sep-16 to 2019	,	100	Apo-Cilazapril/ Hydrochlorothiazide
40	TERAZOSIN († price, addition of HSS and amended brar Tab 1 mg – 1% DV Sep-16 to 2019	,	28	Actavis Arrow
42	METOPROLOL TARTRATE († price) Tab long-acting 200 mg	23.40	28	Slow-Lopresor
44	VERAPAMIL HYDROCHLORIDE († price) Inj 2.5 mg per ml, 2 ml ampoule	25.00	5	Isoptin
45	AMILORIDE HYDROCHLORIDE (‡ price) Tab 5 mg	15.00	100	Apo-Amiloride
DER	MATOLOGICALS			
52	DIMETHICONE (‡ price and addition of HSS) Crm 5% tube – 1% DV Sep-16 to 2019	1.59	100 g	healthE Dimethicone 5%
	Crm 5% pump bottle – 1% DV Sep-16 to 2019	4.59	500 ml	healthE Dimethicone 5%
53	UREA (new listing and addition of HSS) Crm 10% – 1% DV Sep-16 to 2019	1.37	100 g	healthE Urea Cream
GEN	ITO-URINARY SYSTEM			
60	OXYBUTYNIN (addition of HSS) Tab 5 mg – 1% DV Sep-16 to 2019 (‡ price) Oral liq 5 mg per 5 ml – 1% DV Sep-16 to 2019 († pr		500 473 ml	Apo-Oxybutynin Apo-Oxybutynin

Price		Brand or
(ex man. Excl. G	ST)	Generic
\$	Per	Manufacturer

Changes to Section H Part II – effective 1 July 2016 (continued)

HORMONE PREPARATIONS

HUKI	WUNE PREPARATIONS		
62	DEXAMETHASONE PHOSPHATE (extension of HSS) Inj 4 mg per ml, 1 ml ampoule – 1% DV Jul-16 to 2019 14.19 Inj 4 mg per ml, 2 ml ampoule – 1% DV Jul-16 to 2019 12.59	10 5	Max Health Max Health
63	CLOMIPHENE CITRATE (new listing) Tab 50 mg	10	Mylan Clomiphen
64	TETRACOSACTIDE [TETRACOSACTRIN] († price) Inj 250 mcg per ml, 1 ml ampoule	1	Synacthen Synacthen Depot
INFE	CTIONS		
72	CEFACLOR (addition of HSS) Grans for oral liq 25 mg per ml – 1% DV Sep-16 to 20193.53	100 ml	Ranbaxy-Cefaclor
72	CEFACLOR (\$\psi\$ price and addition of HSS) Cap 250 mg - 1% DV Sep-16 to 201924.70	100	Ranbaxy-Cefaclor
74	AMOXICILLIN (4 price and addition of HSS) Cap 250 mg – 1% DV Sep-16 to 2019	500 500	Apo-Amoxi Apo-Amoxi
74	PHENOXYMETHYLPENICILLIN [PENICILLIN V] (\$\frac{1}{2}\$ price and addition of HSS) Grans for oral liq 125 mg per 5 ml - 1% DV Sep-16 to 20191.48 Grans for oral liq 250 mg per 5 ml - 1% DV Sep-16 to 20191.58	100 ml 100 ml	AFT AFT
76	CLINDAMYCIN (↓ price and addition of HSS) → Cap 150 mg – 1% DV Sep-16 to 20194.10 → Inj 150 mg per ml, 4 ml ampoule – 1% DV Sep-16 to 201965.00	16 10	Clindamycin ABM Dalacin C
78	FLUCONAZOLE (addition of HSS) → Inj 2 mg per ml, 50 ml vial – 1% DV Sep-16 to 2019	1 1	Fluconazole-Claris Fluconazole-Claris
78	ITRACONAZOLE (↓ price and addition of HSS) → Cap 100 mg – 1% DV Sep-16 to 20192.79	15	Itrazole
79	VORICONAZOLE (amended presentation and ↑ price) → Powder for oral suspension Oral liq 40 mg per ml	70 ml	Vfend
85	ZIDOVUDINE [AZT] (addition of HSS) → Cap 100 mg – 1% DV Sep-16 to 2019	100 200 ml	Retrovir Retrovir

	Pri (ex man. I	Excl. GST)	Brand or Generic Manufacturer
Cha	nges to Section H Part II – effective 1 July 2016 (continue	ed)	
90	LEDIPASVIR WITH SOFOSBUVIR (new listing) → Tab 90 mg with sofosbuvir 400 mg	nel (HepCTP). A	
90	PARITAPREVIR, RITONAVIR AND OMBITASVIR WITH DASABUVIR (r Tab 75 mg with ritonavir 50 mg, and ombitasvir 12.5 mg (56), with dasabuvir tab 250 mg (56)	00 1 ia PHARMAC's a	
90	PARITAPREVIR, RITONAVIR AND OMBITASVIR WITH DASABUVIR AI Tab 75 mg with ritonavir 50 mg, and ombitasvir 12.5 mg (56), with dasabuvir tab 250 mg (56) and ribavirin tab 200 mg (168)	00 1 ia PHARMAC's a	Viekira Pak-RBV approved direct distribution
103	ACICLOVIR (↓ price and addition of HSS) → Tab dispersible 200 mg – 1% DV Sep-16 to 2019	38 56	Lovir Lovir Lovir
MUS	CULOSKELETAL SYSTEM		
95	NEOSTIGMINE METILSULFATE WITH GLYCOPYRRONIUM BROMIDE Inj 2.5 mg with glycopyrronium bromide 0.5 mg per ml, 1 ml ampoule – 1% DV Jul-16 to 2019 20.	•	S) Max Health
NER	VOUS SYSTEM		
104	TENOXICAM (brand change) Tab 20 mg – 1% DV Sep-16 to 2019	95 100	Tilcotil
105	TETRABENAZINE (‡ price and addition of HSS) Tab 25 mg – 1% DV Sep-16 to 2019 91.	10 112	Motetis
106	PRAMIPEXOLE HYDROCHLORIDE (addition of HSS) Tab 0.25 mg – 1% DV Sep-16 to 2019		Ramipex Ramipex
106	ROPINIROLE HYDROCHLORIDE (addition of HSS) Tab 2 mg – 1% DV Sep-16 to 2019	72 100	Apo-Ropinirole

		Price (ex man. Excl. GS ⁻ \$	Γ) Per	Brand or Generic Manufacturer
Chan	ges to Section H Part II – effective 1 July 2016	(continued)		
106	ROPINIROLE HYDROCHLORIDE (4 price and addition of HS Tab 1 mg – 1% DV Sep-16 to 2019		100	Apo-Ropinirole
106	ROPINIROLE HYDROCHLORIDE († price and addition of HS Tab 0.25 mg – 1% DV Sep-16 to 2019 Tab 5 mg – 1% DV Sep-16 to 2019	2.78	100 100	Apo-Ropinirole Apo-Ropinirole
110	DIHYDROCODEINE TARTRATE (\$\partial \text{price} and addition of HSS Tab long-acting 60 mg - 1% DV Sep-16 to 2019	,	60	DHC Continus
111	MORPHINE SULPHATE (\$\p\$ price and addition of HSS) Tab long-acting 10 mg - 1% DV Sep-16 to 2019 Tab long-acting 30 mg - 1% DV Sep-16 to 2019 Tab long-acting 60 mg - 1% DV Sep-16 to 2019 Tab long-acting 100 mg - 1% DV Sep-16 to 2019	2.85 5.60	10 10 10 10	Arrow-Morphine LA Arrow-Morphine LA Arrow-Morphine LA Arrow-Morphine LA
112	OXYCODONE HYDROCHLORIDE (brand change) Tab controlled-release 5 mg - 1% DV Sep-16 to 2018 Tab controlled-release 10 mg - 1% DV Sep-16 to 2018 Tab controlled-release 20 mg - 1% DV Sep-16 to 2018 Tab controlled-release 40 mg - 1% DV Sep-16 to 2018 Tab controlled-release 80 mg - 1% DV Sep-16 to 2018 Note - Oxycontin tab controlled-release 5 mg to be delisted Note - Oxycodone Controlled Release Tablets (BNM) tab cobe delisted from 1 September 2016.	2.76 4.72 7.69 14.11 I from 1 Septembe		BNM BNM BNM BNM BNM g, 40 mg and 80 mg to
113	NORTRIPTYLINE HYDROCHLORIDE (‡ price and addition o Tab 10 mg – 1% DV Sep-16 to 2019 Tab 25 mg – 1% DV Sep-16 to 2019	3.22	100 180	Norpress Norpress
114	SERTRALINE (‡ price and addition of HSS) Tab 50 mg – 1% DV Sep-16 to 2019 Tab 100 mg – 1% DV Sep-16 to 2019		90 90	Arrow-Sertraline Arrow-Sertraline
117	LAMOTRIGINE (new listing) Tab dispersible 25 mg Tab dispersible 50 mg Tab dispersible 100 mg	24.73	56 56 56	Motrig Motrig Motrig
120	ONDANSETRON (brand change) Inj 2 mg per ml, 2 ml ampoule – 1% DV Sep-16 to 2019 Inj 2 mg per ml, 4 ml ampoule – 1% DV Sep-16 to 2019 Note – Ondanaccord inj 2 mg per ml, 2 ml and 4 ml ampou	2.20	5 5 1 September	Ondansetron-Claris Ondansetron Kabi 2016.
122	LEVOMEPROMAZINE HYDROCHLORIDE (new listing and ar Inj 25 mg per ml, 1 ml ampoule – 1% DV Sep-16 to 201 Note – levomepromazine inj 25 mg per ml, 1 ml ampoule to	9 47.89 [′]	10 1 September	Wockhardt 2016.

Price		Brand or
(ex man. Excl. 0	GST)	Generic
\$	Per	Manufacturer

Changes to Section H Part II – effective 1 July 2016 (continued)

ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS

134	METHOTREXATE (↓ price)		
	Inj 7.5 mg prefilled syringe14.61	1	Methotrexate Sandoz
	Inj 10 mg prefilled syringe14.66	1	Methotrexate Sandoz
	Inj 15 mg prefilled syringe14.77	1	Methotrexate Sandoz
	Inj 20 mg prefilled syringe14.88	1	Methotrexate Sandoz
	Inj 25 mg prefilled syringe14.99	1	Methotrexate Sandoz
	Inj 30 mg prefilled syringe15.09	1	Methotrexate Sandoz
134	BORTEZOMIB (addition of HSS)		
	→ Inj 3.5 mg vial – 1% DV Jul-16 to 2019	1	Velcade
145	EXEMESTANE (new listing and transfer of HSS) Tab 25 mg – 1% DV Jul-16 to 2017 14.50	30	Pfizer Exemestane
145	EXEMESTANE (delisting) Tab 25 mg – 1% DV Sep-14 to 2017 30/6/16	30	Aromasin
163	NIVOLUMAB (new listing) → Inj 10 mg per ml, 4 ml vial	1 1	Opdivo Opdivo
	Restricted Initiation		

Initiation

Medical oncologist

Re-assessment required after 4 months

All of the following:

- 1 Patient has metastatic or unresectable melanoma stage III or IV: and
- 2 Patient has measurable disease as defined by the presence of at least one CT or MRI measurable lesion; and
- 3 Nivolumab is to be used at a maximum dose of 3 mg/kg every 2 weeks for a maximum of 12 weeks (6 cycles); and
- 4 Baseline measurement of overall tumour burden is documented (see Note); and
- 5 Documentation confirming that the patient has been informed and acknowledges that the initial funded treatment period of nivolumab will not be continued beyond 12 weeks if their disease progresses during this time.

Continuation

Medical oncologist

Re-assessment required after 4 months

All of the following:

- 1 Any of the following:
 - 1.1 Patient's disease has had a complete response to treatment according to RECIST criteria (see Note); or
 - 1.2 Patient's disease has had a partial response to treatment according to RECIST criteria (see Note); or
 - 1.3 Patient has stable disease according to RECIST criteria (see Note); and
- 2 Response to treatment in target lesions has been determined by radiologic assessment (CT or MRI scan) following the most recent treatment period: and
- 3 No evidence of progressive disease according to RECIST criteria (see Note); and
- 4 The treatment remains clinically appropriate and the patient is benefitting from the treatment; and
- 5 Nivolumab will be used at a maximum dose of 3 mg/kg every 2 weeks for a maximum of 12 weeks (6 cycles).

continued...

Price (ex man. Excl. GST) \$ Pel Brand or Generic Manufacturer

Changes to Section H Part II – effective 1 July 2016 (continued)

Notes

Disease responses to be assessed according to the Response Evaluation Criteria in Solid Tumours (RECIST) version 1.1 (Eisenhauer EA, et al. Eur J Cancer 2009;45:228-47). Assessments of overall tumour burden and measurable disease to be undertaken on a minimum of one lesion and maximum of 5 target lesions (maximum two lesions per organ). Target lesions should be selected on the basis of their size (lesions with the longest diameter), be representative of all involved organs, and suitable for reproducible repeated measurements. Target lesion measurements should be assessed using CT or MRI imaging with the same method of assessment and the same technique used to characterise each identified and reported lesion at baseline and every 12 weeks. Response definitions as follows:

- Complete Response: Disappearance of all target lesions. Any pathological lymph nodes (whether target or non-target) must have reduction in short axis to <10 mm.
- Partial Response: At least a 30% decrease in the sum of diameters of target lesions, taking as reference the baseline sum diameters.
- Progressive Disease: At least a 20% increase in the sum of diameters of target lesions, taking as reference
 the smallest sum on study (this includes the baseline sum if that is the smallest on study). In addition to the
 relative increase of 20%, the sum must also demonstrate an absolute increase of at least 5 mm. (Note: the
 appearance of one or more new lesions is also considered progression).
- Stable Disease: Neither sufficient shrinkage to qualify for partial response nor sufficient increase to qualify for progressive disease.

164 RITUXIMAB (amended restriction – new criteria shown only)

→	Inj 10 mg per ml,	10 ml vial	1,075.50	2	Mabthera
_	Ini 10 ma ner ml	50 ml vial	2 688 30	1	Mahthera

Initiation – Steroid dependent nephrotic syndrome (SDNS) or frequently relapsing nephrotic syndrome (FRNS) Nephrologist

Limited to 4 weeks treatment

All of the following:

- 1. Patient is a child with SDNS* or FRNS*; and
- 2. Treatment with steroids for at least a period of 3 months has been ineffective or associated with evidence of steroid toxicity; and
- Treatment with ciclosporin for at least a period of 3 months has been ineffective and or discontinued due to unacceptable side effects; and
- Treatment with mycophenolate for at least a period of 3 months with no reduction in disease relapses;
 and
- The total rituximab dose used would not exceed the equivalent of 375 mg/ m² of body surface area per week for a total of 4 weeks.

Note: Indications marked with a * are Unapproved indications.

Continuation – Steroid dependent nephrotic syndrome (SDNS) or frequently relapsing nephrotic syndrome (FRNS)

Nephrologist

Limited to 4 weeks treatment

All of the following:

- 1. Patient who was previously treated with rituximab for nephrotic syndrome*; and
- Treatment with rituximab was previously successful and has demonstrated sustained response for >6 months, but the condition has relapsed and the patient now requires repeat treatment; and
- The total rituximab dose used would not exceed the equivalent of 375 mg/ m² of body surface area per week for a total of 4 weeks.

Note: Indications marked with a * are Unapproved indications.

continued...

Price		Brand or
(ex man. Excl. 6	GST)	Generic
\$	Per	Manufacturer

Changes to Section H Part II - effective 1 July 2016 (continued)

continued...

Initiation - Steroid resistant nephrotic syndrome (SRNS)

Nephrologist

Limited to 4 weeks treatment

All of the following:

- Patient is a child with SRNS* where treatment with steroids and ciclosporin for at least 3 months have been ineffective; and
- 2. Treatment with tacrolimus for at least 3 months has been ineffective; and
- 3. Genetic causes of nephrotic syndrome have been excluded; and
- The total rituximab dose used would not exceed the equivalent of 375 mg/ m2 of body surface area per week for a total of 4 weeks.

Note: Indications marked with a * are Unapproved indications.

Continuation - Steroid resistant nephrotic syndrome (SRNS)

Nephrologist

Limited to 4 weeks treatment

All of the following:

- 1. Patient who was previously treated with rituximab for nephrotic syndrome*; and
- Treatment with rituximab was previously successful and has demonstrated sustained response for greater than 6 months, but the condition has relapsed and the patient now requires repeat treatment; and
- The total rituximab dose used would not exceed the equivalent of 375 mg/ m² of body surface area per week for a total of 4 weeks.

Note: Indications marked with a * are Unapproved indications.

174	SIROLIMUS (↓ price) → Tab 1 mg	100 100 60 ml	Rapamune Rapamune Rapamune
RESP	IRATORY SYSTEM AND ALLERGIES		
177	LORATADINE (\$\psi\$ price and addition of HSS) Tab 10 mg - 1% DV Sep-16 to 2019	100	Lorafix
178	TIOTROPIUM BROMIDE (↓ price) Note: tiotropium treatment must not be used if the patient is also receiving glycopyrronium or umeclidinium. → Soln for inhalation 2.5 mcg per dose	treatment with 60 dose 30 dose	n subsidised inhaled Spiriva Respimat Spiriva
SENS	ORY ORGANS		
186	SODIUM HYALURONATE [HYALURONIC ACID] (addition of HSS) Inj 14 mg per ml, 0.85 ml syringe – 1% DV Sep-16 to 2019 50.00 Inj 14 mg per ml, 0.55 ml syringe – 1% DV Sep-16 to 2019 50.00	1 1	Healon GV Healon GV
186	SODIUM HYALURONATE [HYALURONIC ACID] (new listing) Inj 23 mg per ml, 0.6 ml syringe – 1% DV Sep-16 to 2019 60.00	1	Healon 5
186	SODIUM HYALURONATE [HYALURONIC ACID] (brand change) Inj 10 mg per ml, 0.85 ml syringe – 1% DV Sep-16 to 2019 28.50 Note – Provisc inj 10 mg per ml, 0.85 ml syringe to be delisted from 1 Sep	1 otember 2016.	Healon

Deina		Duand as
Price		Brand or
(ex man. Excl. G	ST)	Generic
\$	Per	Manufacturer

Changes to Section H Part II - effective 1 July 2016 (continued)

186	SODIUM HYALURONATE [HYALURONIC ACID] WITH CHONDROITIN SULP Inj 30 mg per ml with chondroitin sulphate 40 mg per ml, 0.5 ml syringe and inj 10 mg sodium hyaluronate [hyaluronic acid]	'HATE (additi	on of HSS)
	per ml, 0.55 ml syringe – 1% DV Sep-16 to 2019 74.00	1	Duovisc
186	SODIUM HYALURONATE [HYALURONIC ACID] WITH CHONDROITIN SULP (amended presentation description and new listing) Inj 30 mg per ml with chondroitin sulphate 40 mg per ml, 0.75 ml syringe – 1% DV Sep-16 to 2019	HATE 1	Viscoat
186	TIMOLOL (addition of HSS) Eye drops 0.25%, gel forming – 1% DV Sep-16 to 2019	2.5 ml 2.5 ml	Timoptol XE

VARIOUS

DIMERCAPTOSUCCINIC ACID (amended example brand)

Cap 100 mg

e.g. PCNZ, Optimus

Healthcare, Chemet

Pharmaceutical

Compounding NZ
e.g. PCNZ, Optimus

Healthcare, Chemet

Pharmaceutical

Compounding NZ
e.g. PCNZ, Optimus

Healthcare, Chemet

Pharmaceutical

Compounding NZ-

Price		Brand or
(ex man. Excl. 0	GST)	Generic
\$	Per	Manufacturer

Changes to Section H Part II – effective 1 June 2016

	ALIMENTARY	TRACT	AND	METABOLISM
--	------------	-------	-----	------------

13	ALUMINIUM HYDROXIDE WITH MAGNESIUM HYDROXIDE AND SII Oral liq 200 mg with magnesium hydroxide 200 mg	METHICON	IE (delisting)	
	and simethicone 20 mg per 5 ml	imethicone	oral liq 200	<i>g. Mylanta</i> mg with magnesium
16	COLLOIDAL BISMUTH SUBCITRATE Tab 120 mg1	14.51	50	Gastrodenol
16	BISMUTH TRIOXIDE (delisting) Tab 120 mg Note – De-Nol tab 120 mg to be delisted from 1 January 2017.	32.50	112	De-Nol
23	THYMOL GLYCERIN Compound, BPC – 1% DV Aug-16 to 2019	.9.15	500 ml	PSM
26	CALCITRIOL (4 price and addition of HSS) Cap 0.25 mcg – 1% DV Aug-16 to 2019 Cap 0.5 mcg – 1% DV Aug-16 to 2019 Note – Airflow calcitriol cap 0.25 mcg and 0.5 mcg to be delisted f	18.39	100 100 gust 2016.	Calcitriol-AFT Calcitriol-AFT
CARD	IOVASCULAR SYSTEM			
42	METOPROLOL SUCCINATE (HSS delayed) Tab long-acting 23.75 mg – 1% DV Nov-16 Jun-16 to 2018 Tab long-acting 47.5 mg – 1% DV Nov-16 Jun-16 to 2018 Tab long-acting 95 mg – 1% DV Nov-16 Jun-16 to 2018 Tab long-acting 190 mg – 1% DV Nov-16 Jun-16 to 2018 Note – Metoprolol – AFT CR tab long-acting 23.75 mg, 47.5 mg, 9 remains at 1 June 2016.	.3.48 .5.73 11.54	90 90 90 90 90 190 mg, 30 t	Metoprolol - AFT CR Metoprolol - AFT CR Metoprolol - AFT CR Metoprolol - AFT CR ablet pack, delisting
42	METOPROLOL TARTRATE Tab 50 mg – 1% DV Aug-16 to 2018 Tab 100 mg – 1% DV Aug-16 to 2018 Note – Lopresor tab 50 mg and 100 mg to be delisted from 1 Augu	. 6.09	100 60	Apo-Metoprolol Apo-Metoprolol
DERM	IATOLOGICALS			
53	CETOMACROGOL WITH GLYCEROL (‡ price and addition of HSS) Crm 90% with glycerol 10% – 1% DV Aug-16 to 2019	.2.82	500 ml	Pharmacy Health Sorbolene with Glycerin
		3.87	1,000 ml	Pharmacy Health Sorbolene with Glycerin
	Note - healthE crm 90% with glycerol 10%, 500 ml, 1 bottle to be	delisted fro	om 1 August	

Price		Brand or
(ex man. Excl. GST)		Generic
\$	Per	Manufacturer

Changes to Section H Part II - effective 1 June 2016 (continued)

GENITO-URINARY SYSTEM

59	PROGESTERONE (addition of HSS)			
	→ Can 100 mg - 1% DV Aug-16 to 2019	16.50	30	Utronestan

MUSCULOSKELETAL SYSTEM

102	ROCURONIUM BROMIDE (‡ price and addition of HSS)		
	Inj 10 mg per ml, 5 ml vial – 1% DV Aug-16 to 2019 25.95	10	DBL Rocuronium
			Bromide

NERVOUS SYSTEM

105	APOMORPHINE HYDROCHLORIDE (delisting) Inj 10 mg per ml, 2 ml ampoule	5 gust 2016.	Apomine
106	LISURIDE HYDROGEN MALEATE (delisting) Tab 200 mcg	30	Dopergin

ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS

137	OXALIPLATIN (HSS reinstated)		
	Inj 5 mg per ml, 10 ml vial – 1% DV Jun-16 to 201813.32	1	Oxaliccord
	Inj 5 mg per ml, 20 ml vial – 1% DV Jun-16 to 2018 16.00	1	Oxaliccord

151 SILTUXIMAB

→ Inj 100 mg vial – 1% DV Jun-16 to 2018	770.57	1	Sylvant
→ Inj 400 mg vial – 1% DV Jun-16 to 2018	3,082.33	1	Sylvant

Restricted

Initiation

Haematologist or rheumatologist

Re-assessment required after 6 months

All of the following:

- 1. Patient has severe HHV-8 negative idiopathic multicentric Castleman's Disease; and
- 2. Treatment with an adequate trial of corticosteroids has proven ineffective; and
- 3. Siltuximab is to be administered at doses no greater than 11 mg/kg every 3 weeks.

Continuation

Haematologist or rheumatologist

Re-assessment required after 12 months

The treatment remains appropriate and the patient has sustained improvement in inflammatory markers and functional status.

Price Brand or (ex man. Excl. GST) Generic \$ Per Manufacturer

Changes to Section H Part II – effective 1 June 2016 (continued)

RESPIRATORY SYSTEM AND ALLERGIES

178 TIOTROPIUM BROMIDE (amended restriction)

Note: tiotropium treatment must not be used if the patient is also receiving treatment with subsidised inhaled alvoopyrronium or umeclidinium.

→ Powder for inhalation 18 mcg per dose70.00 30 dose Spiriva

Restricted

Initiation

All of the following:

- 1 To be used for the long-term maintenance treatment of bronchospasm and dyspnoea associated with COPD; and
- 2 In addition to standard treatment, the patient has trialled a short acting bronchodilator dose of at least 40 μ g ipratropium q.i.d for one month; and
- 3 Either:

the patient's breathlessness according to the Medical Research Council (UK) dyspnoea scale is:

- $3.1\,$ Grade $3\,4\,$ (stops for breath after walking about 100 meters or after a few minutes on the level); or
- 3.2 Grade 4 5 (too breathless to leave the house, or breathless when dressing or undressing); and
- 4 Actual FEV, as a % of predicted, must be below 60%; and
- 5 Either:
 - 5.1 Patient is not a smoker (for reporting purposes only); or
 - 5.2 Patient is a smoker and has been offered smoking cessation counselling; and
- 6 The patient has been offered annual influenza immunization.

SENSORY ORGANS

Effective 1 May 2016

ALIMENTARY TRACT AND METABOLISM

20 GALSULFASE

→ Inj 1 mg per ml, 5 ml vial – 1% DV May-16 to 2018........2,234.00 1 Naglazyme

Restricted

Initiation

Metabolic physician

Re-assessment required after 12 months

Both:

- 1 The patient has diagnosis of mucopolysaccharidosis VI; and
- 2 Either:
 - 2.1 Diagnosis confirmed by demonstration of N-acetyl galactosamine-4-sulfatase (arylsulfatase B) deficiency confirmed by either an enzyme activity assay in leukocytes or skin fibroblasts; or
 - 2.2 Detection of two disease causing mutations and patient has a sibling who is known to have mucopolysaccharidosis VI.

Continuation

Metabolic physician

Re-assessment required after 12 months

All of the following:

continued...

Price (ex man. Excl. GST) \$ Per Brand or Generic Manufacturer

Changes to Section H Part II - effective 1 May 2016 (continued)

continued

- 1. The treatment remains appropriate for the patient and the patient is benefiting from treatment; and
- Patient has not had severe infusion-related adverse reactions which were not preventable by appropriate premedication and/or adjustment of infusion rates; and
- 3. Patient has not developed another life threatening or severe disease where the long term prognosis is unlikely to be influenced by Enzyme Replacement Therapy (ERT); and
- Patient has not developed another medical condition that might reasonably be expected to compromise a response to ERT.

CARDIOVASCULAR SYSTEM

40 PHENTOLAMINE MESYLATE (new presentation)

Inj 5 mg per ml, 1 ml ampoule

42 METOPROLOL SUCCINATE (1 price)

Tab long-acting 23.75 mg	0.80	30	Metoprolol - AFT CR
Tab long-acting 47.5 mg	1.16	30	Metoprolol - AFT CR
Tab long-acting 95 mg	1.91	30	Metoprolol - AFT CR
Tab long-acting 190 mg	3.85	30	Metoprolol - AFT CR

Note – Metoprolol – AFT CR tab long-acting, all strengths of the 30 tab pack size, to be delisted from 1 June 2016.

48 MILRINONE (new listing and addition of HSS)

Inj 1 mg per ml, 10 ml ampoule – **1% DV Jul-16 to 2018**300.30 10 **Milrinone Generic** Health

GENITO-URINARY SYSTEM

57 INTRA-UTERINE DEVICE (new listing)
IUD 35.5 mm length × 19.6 mm width.......31.60 1 Choice Load 375

HORMONE PREPARATIONS

61 CINACALCET (new listing)

Restricted

Initiation

Nephrologist or endocrinologist

Re-assessment required after 6 months

Either:

- 1 All of the following:
 - 1.1 The patient has been diagnosed with a parathyroid carcinoma (see Note); and
 - 1.2 The patient has persistent hypercalcaemia (serum calcium ≥3 mmol/L) despite previous first-line treatments including bisphosphonates and sodium thiosulfate; and
 - 1.3 The patient is symptomatic; or
- 2 All of the following:
 - 2.1 The patient has been diagnosed with calciphylaxis (calcific uraemic arteriolopathy); and
 - 2.2 The patient has symptomatic (e.g. painful skin ulcers) hypercalcaemia (serum calcium \geq 3 mmol/L); and
 - 2.3 The patient's condition has not responded to previous first-line treatments including bisphosphonates and sodium thiosulfate.

Continuation

Nephrologist or endocrinologist

continued...

Price (ex man. Excl. (GST)	Brand or Generic
(ex man. Excl. (\$	Per	Manufacturer

Changes to Section H Part II – effective 1 May 2016 (continued)

continued... Both:

- 1 The patient's serum calcium level has fallen to < 3mmol/L; and
- 2 The patient has experienced clinically significant symptom improvement.

Note: this does not include parathyroid adenomas unless these have become malignant.

INFECTIONS

71	GENTAMICIN SULPHATE (additional pack size) Inj 40 mg per ml, 2 ml ampoule – 1% DV Sep-15 to 201830.00	50	Pfizer
74	AMOXICILLIN WITH CLAVULANIC ACID (addition of HSS) Tab 500 mg with clavulanic acid 125 mg - 1% DV Aug-16 to 2017	20 n 1 August	Augmentin 2016.
93	PEGYLATED INTERFERON ALFA-2A (delisting) Inj 135 mcg prefilled syringe Inj 135 mcg prefilled syringe (4) with ribavirin tab 200 mg (112) Note – Pegylated interferon alfa-2a inj 135 mcg prefilled syringe, and inj 135 mribavirin tab 200 mg (112) to be delisted from 1 July 2016	ncg prefille	d syringe (4) with
NERV	OUS SYSTEM		
105	APOMORPHINE HYDROCHLORIDE (new listing) Inj 10 mg per ml, 2 ml ampoule119.00	5	Movapo
124	BUSPIRONE HYDROCHLORIDE (new listing and addition of HSS) Tab 5 mg – 1% DV Jul-16 to 2018	100 100 3.	Orion Orion
SENS	ORY ORGANS		
183	CHLORAMPHENICOL (4 price and addition of HSS) Eye oint 1% – 1% DV Jul-16 to 20192.48	4 g	Chlorsig
187	BIMATOPROST (new listing and addition of HSS) Eye drops 0.03% – 1% DV Jul-16 to 2018	3 ml	Bimatoprost Actavis
VARI	DUS		
190	DIMERCAPTOSUCCINIC ACID (addition of example brand) Cap 100 mg	(e.g. Pharmaceutical Compounding NZ
190	DIMERCAPTOSUCCINIC ACID (new presentation) Cap 200 mg	(e.g. Pharmaceutical Compounding NZ

		Price (ex man. Excl. G \$	ST) Per	Brand or Generic Manufacturer
Char	nges to Section H Part II – effective 1 May 201	6 (continued)		
191	ISOPROPYL ALCOHOL (delisting) Soln 70%, 500 ml	5.00 60.00	1 12	PSM PSM
	Note – PSM isopropyl alcohol soln 70%, 500 ml, 1 bottle			
SPE	CIAL FOODS			
206	FAT-MODIFIED FEED (new listing) Powder 12.9 g protein, 69.1 g carbohydrate and 12.9 g fat per 100 g, 400 g can	•		e.g. Monogen
210	HIGH FAT FORMULA (amended presentation description) Powder 14.4 g 15.25 g protein, 2.9 g 3 g carbohydrate and 69.2 g 73 g fat per 100 g, can	9	300 g	Ketocal 4:1 (Unflavoured) Ketocal 4:1 (Vanilla)
	•			
ALIN	IENTARY TRACT AND METABOLISM			
15	MISOPROSTOL (new listing and addition of HSS) Tab 200 mcg – 1% DV Jun-16 to 2019	41.50	120	Cytotec
16	OMEPRAZOLE († price) Inj 40 mg ampoule with diluent	33.65	5	Dr Reddy's Omeprazole
CAR	DIOVASCULAR SYSTEM			
41	DIGOXIN (new listing and addition of HSS) Tab 62.5 mcg – 1% DV Jun-16 to 2019 Tab 250 mcg – 1% DV Jun-16 to 2019		240 240	Lanoxin PG Lanoxin
42	METOPROLOL SUCCINATE Tab long-acting 190 mg – 1% DV Jun-16 to 2018 Note – Metoprolol – AFT CR tab long-acting 190 mg, 3		90 delisted fron	Metoprolol - AFT CR n 1 June 2016.
44	FUROSEMIDE [FRUSEMIDE] (4 price and addition of HSS Inj 10 mg per ml, 2 ml ampoule – 1% DV Jun-16 to 20		5	Frusemide-Claris
44	PERHEXILINE MALEATE (addition of HSS) Tab 100 mg – 1% DV Jun-16 to 2019	62.90	100	Pexsig

ISOSORBIDE MONONITRATE (addition of HSS)
Tab long-acting 40 mg – 1% DV Jun-16 to 2019......7.50

30

Ismo 40 Retard

47

		Price (ex man. Excl. G \$	ST) Per	Brand or Generic Manufacturer
Char	nges to Section H Part II – effective 1 April 201	6 (continued)		
GEN	ITO-URINARY SYSTEM			
59	DINOPROSTONE (amended presentation description) Vaginal gel 1 mg in 3 g 2.5 ml Vaginal gel 2 mg in 3 g 2.5 ml	52.65 64.60	1 1	Prostin E2 Prostin E2
HOR	MONE PREPARATIONS			
69	DESMOPRESSIN ACETATE (↓ price and addition of HSS) → Tab 100 mcg – 1% DV Jun-16 to 2019 → Tab 200 mcg – 1% DV Jun-16 to 2019		30 30	Minirin Minirin
INFE	CTIONS			
73	CLARITHROMYCIN → Grans for oral liq 50 mg per ml Note – Klacid grans for oral liq 25 mg per ml, 70 ml to be		50 ml ctober 2016.	Klacid
MUS	CULOSKELETAL SYSTEM			
95	LEFLUNOMIDE (delisting) Tab 100 mg Note – Arava tab 100 mg to be delisted from 1 April 2016		3	Arava
102	CLOSTRIDIUM BOTULINUM TYPE A TOXIN Inj 300 u vial	388.50	1	Dysport
NER	VOUS SYSTEM			
107	PROPOFOL (4 price addition of HSS) Inj 10 mg per ml, 20 ml vial – 10% DV Jun-16 to 2019	5.27	5	Provive MCT-LCT 1%
107	PROPOFOL (new listing) Inj 10 mg per ml, 50 ml vial – 10% DV Jun-16 to 2019 Inj 10 mg per ml, 100 ml vial – 10% DV Jun-16 to 201	24.50 9 49.00	10 10	Fresofol 1% MCT/LC Fresofol 1% MCT/LC
107	PROPOFOL (delisting) Inj 10 mg per ml, 20 ml ampoule Inj 10 mg per ml, 20 ml vial Inj 10 mg per ml, 50 ml syringe Inj 10 mg per ml, 50 ml vial	42.00 47.00	5 5 1 1	Fresofol 1% Diprivan Diprivan Fresofol 1% Provive MCT-LCT 1%
	Inj 10 mg per ml, 100 ml vial	25.00 7.60	1	Diprivan Fresofol 1%

Note – Fresofol 1% inj 10 mg per ml, 20 ml ampoule, 50 ml vial and 100 ml vial to be delisted from 1 June 2016. Note – Diprivan inj 10 mg per ml, 20 ml vial, 50 ml syringe, and 50 ml vial to be delisted from 1 June 2016. Note – Provive MCT-LCT 1% inj 10 mg per ml, 50 ml vial, 1 inj pack size and 100 ml vial, 1 inj pack size, to be delisted from 1 June 2016.

Provive MCT-LCT 1%

Price (ex man. Excl. GST) \$ Per Brand or Generic Manufacturer

Changes to Section H Part II – effective 1 April 2016 (continued)

108 BUPIVACAINE HYDROCHLORIDE WITH FENTANYL Inj 0.625 mg with fentanyl 2 mcg per ml, 200 ml bag

123 FLUPHENAZINE DECANOATE Ini 25 mg per ml. 2 ml ampoule

e.a. Modecate

ONCOLOGY AGENTS AND IMMUNOSUPPRESSANTS

137 OXALIPLATIN (HSS suspended)

Inj 5 mg per ml, 10 ml vial

Inj 5 mg per ml, 20 ml vial

Note – HSS for Oxaliccord inj 5 mg per ml, 10 ml and 20 ml vials has been suspended and will be reinstated from 1 June 2016 until 30 June 2018.

RESPIRATORY SYSTEM AND ALLERGIES

176 BEE VENOM (new listing)

→ Maintenance kit - 6 vials 120 mcg freeze dried venom, with diluent

176 PAPER WASP VENOM (new listing)

→ Treatment kit – 6 vials 120 mcg freeze dried venom, with diluent

176 YELLOW JACKET WASP VENOM (new listing)

→ Treatment kit - 6 vials 120 mcg freeze dried venom, with diluent

SENSORY ORGANS

188 POLYVINYL ALCOHOL (↓ price and addition of HSS)

Note - Liquifilm Tears eve drops 1.4% and Liquifilm Forte eve drops 3% to be delisted from 1 June 2016.

VARIOUS

192 IODISED OIL († price)

Inj 38% w/w (480 mg per ml), 10 ml ampoule191.00 1 Lipiodol Ultra Fluid

SPECIAL FOODS

205 AMINO ACID ORAL FEED (new listing)

205 AMINO ACID ORAL FEED (delisting)

→ Powder 11.5 g protein, 61.7 g carbohydrate

and 0.8 g fat per sachet4.50 80.4 g Vivonex TEN

Note – Vivonex TEN powder, 80.4 g pack size, to be delisted from 1 June 2016.

Price		Brand or
(ex man. Excl. GST)		Generic
\$	Per	Manufacturer

Changes to Section H Part II – effective 1 April 2016 (continued)

213 ENTERAL FEED 1 KCAL/ML

ENTERAL FEED T NOAL/IVIL			
→ Liquid 4 g protein, 13.6 g carbohydrate			
and 3.4 g fat per 100 ml, bottle	2.65	500 ml	Osmolite RTH
→ Liquid 4 g protein, 13.6 g carbohydrate			
and 3.4 g fat per 100 ml, can	1.24	250 ml	Osmolite
Note - Osmolite RTH 500 ml and Osmolite 250 ml to	o be delisted from 1 Jul	ne 2016.	

Index

Pharmaceuticals and brands

A		DBL Rocuronium Bromide	18
Aciclovir	11	De-Nol	17
Aluminium hydroxide with magnesium hydroxide		Desmopressin acetate	23
and simethicone		Dexamethasone phosphate	10
Amiloride hydrochloride	. 9	DHC Continus	12
Amino acid oral feed	24	Diamide Relief	8
Amoxicillin	10	Digoxin	22
Amoxicillin with clavulanic acid	21	Dihydrocodeine tartrate	12
Apo-Amiloride	. 9	Dimercaptosuccinic acid	21
Apo-Amoxi	10	Dimethicone	9
Apo-Cilazapril/Hydrochlorothiazide	. 9	Dinoprostone	23
Apo-Metoprolol	17	Diprivan	23
Apomine		Dipyridamole	8
Apomorphine hydrochloride 18	, 21	Dopergin	18
Apo-Oxybutynin	. 9	Dr Reddy's Omeprazole	
Apo-Ropinirole		Duovisc	
Arava		Dysport	23
Aromasin	13	E	
Arrow-Morphine LA	12	Enteral feed 1 kcal/ml	25
Arrow-Sertraline	12	Eptacog alfa	
Augmentin		Exemestane	
AZT		F	
В		Fat-modified feed	22
Bee venom	24	Fluconazole	10
Bimatoprost	21	Fluconazole-Claris	10
Bimatoprost Actavis		Fluphenazine decanoate	24
Bismuth trioxide		Fresofol 1%	
Bortezomib		Fresofol 1% MCT/LCT	
Bupivacaine hydrochloride with fentanyl		Frusemide	
Buspirone hydrochloride		Frusemide-Claris	
C		Furosemide	
Calcitriol	17	G	
Calcitriol-AFT		Galsulfase	19
Carmellose sodium with pectin and gelatine		Gastrodenol	
Cefaclor		Gentamicin sulphate	
Cetomacrogol with glycerol		Glycopyrronium bromide	
Chloramphenicol		Н	
Chlorsig		Harvoni	11
Choice Load 375		Healon	
Cilazapril with hydrochlorothiazide		Healon 5	15
Cinacalcet		Healon GV	
Clarithromycin		healthE Dimethicone 5%	
Clindamycin		healthE Urea Cream	
Clindamycin ABM		High fat formula	
Clomiphene citrate		Hyaluronic acid	
Clostridium botulinum type a toxin		I	
Colloidal bismuth subcitrate		Intra-uterine device	20
Cyklokapron		lodised oil	
Cytotec		Ismo 40 Retard	
D .		Isopropyl alcohol	
Dalacin C	10	Isoptin	
Daidoni O	10	ιοοραιι	3

Index

Pharmaceuticals and brands

Itraconazole	Isosorbide mononitrate	22	Ondansetron-Claris	. 1
Ketocal 4:1 (Unflavoured)			Ondansetron Kabi	. 1
Ketocal 4:1 (Unflavoured) 22 Osmolite RTH 25 Ketocal 4:1 (Vanilla) 22 Oxalicocrd 18, 24 Laculose 8 Oxybutynin 18, 24 Laevolac 8 Oxybutynin 9 Laevolac 8 P Coxybutynin 9 Lamotrigine 12 Paper wasp venom 24 Lanoxin PG 22 Paritaprevir, ritonavir and ombitasvir with 1 Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with 1 Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with 1 Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with 1 Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with 1 Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with 1 Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with 1 Ledipasvir with sofosbuvir 12 Patanol 11 Levimeromazine hydrochloride	Itrazole	10	Opdivo	. 1
Ketocal 4:1 (Vanilla) 22	K		Osmolite	. 2
Ketocal 4:1 (Vanilla) 22	Ketocal 4:1 (Unflavoured)	22	Osmolite RTH	. 2
Klacid 23	Ketocal 4:1 (Vanilla)	22	Oxaliccord 18	8, 2
Lactulose			Oxaliplatin 18	8, 2
Laevolac 8 P Lamotrigine 12 Paper wasp venom 24 Lanoxin PG 22 Paritaprevir, ritonavir and ombitasvir with Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with Lefuporamide 23 dasabuvir and ribavirin 11 Levomepromazine hydrochloride 12 Patanol 15 Lipiodol Ultra Fluid 24 Pegylated interferon alfa-2a 21 Lisuride hydrogen maleate 18 Pericillin V 10 Lopramide hydrochloride 8 Perhexiline maleate 22 Loratak 15 Pexsig 22 Loratadine 15 Pizer Exemestane 13 Lovir 11 Pharmacy Health Sorbolene with Glycerin 17 Mabthera 14 Phenoymethylpenicillin 16 Methoricovate 13 Phentolamine mesylate 26 Methoprolol - AFT CR 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Pramipexole hydrochloride	L		Oxybutynin	
Laevolac 8 P Lamotrigine 12 Paper wasp venom 24 Lanoxin PG 22 Paritaprevir, ritonavir and ombitasvir with Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with Lefuporamide 23 dasabuvir and ribavirin 11 Levomepromazine hydrochloride 12 Patanol 15 Lipiodol Ultra Fluid 24 Pegylated interferon alfa-2a 21 Lisuride hydrogen maleate 18 Pericillin V 10 Lopramide hydrochloride 8 Perhexiline maleate 22 Loratak 15 Pexsig 22 Loratadine 15 Pizer Exemestane 13 Lovir 11 Pharmacy Health Sorbolene with Glycerin 17 Mabthera 14 Phenoymethylpenicillin 16 Methoricovate 13 Phentolamine mesylate 26 Methoprolol - AFT CR 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Pramipexole hydrochloride	Lactulose	8	Oxycodone hydrochloride	. 1
Lamotrigine	Laevolac	8		
Lanoxin. PG 22 Paritaprevir, ritonavir and ombitasvir with dasabuvir 11 Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with dasabuvir and ribavirin 11 Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with dasabuvir and ribavirin 11 Levomepromazine hydrochloride 12 Patanol 15 Leporamide hydrogen maleate 18 Penicillin V 10 Lorafix 15 Perksiline maleate 22 Lorafix 16 Perksiline maleate 22 Lorafix 15 Perksiline maleate 22 Lorafix 15 Perksiline maleate 22 Lorafix 16 Phermacy Health Sorbolene with Glycerin 17 Morbit 11 Phenoxymethylpenicillin 16 <t< td=""><td></td><td></td><td>Paper wasp venom</td><td>. 2</td></t<>			Paper wasp venom	. 2
Lanoxin PG			Paritaprevir, ritonavir and ombitasvir with	
Ledipasvir with sofosbuvir 11 Paritaprevir, ritonavir and ombitasvir with dasabuvir and ribavirin 11 Lefunomide 23 Patanol 15 Levomepromazine hydrochloride 12 Petanol 15 Lipidodl Ultra Fluid 24 Pegylated interferon alfa-2a 21 Lisuride hydrogen maleate 18 Penicillin V 16 Lorafix 15 Perssig 22 Lorafix 15 Pessig 22 Lorafix 11 Pharmacy Health Sorbolene with Glycerin 17 Lovir 11 Phenoxymethylpenicillin 16 Lovir 11 Phenoxymethylpenicillin 16 Methoricexate 13 Phenoxymethylpenicillin 16 Methoricexate 17, 20, 22 <td< td=""><td></td><td></td><td></td><td>. 1</td></td<>				. 1
Leffunomide 23 dasabuvir and ribavirin 11 Levomepromazine hydrochloride 12 Patanol 15 Lipiodol Ultra Fluid 24 Pegylated interferon alfa-2a 21 Lisuride hydrogen maleate 18 Penicillin V 16 Loperamide hydrochloride 8 Perhexiline maleate 22 Lorafix 15 Pexsig 22 Loratadine 15 Pessig 22 Lovir 11 Pharmacy Health Sorbolene with Glycerin 17 Mabthera 14 Phenoxymethylpenicillin 16 Methorrexate 13 Phentolamine mesylate 22 Methorrolol - AFT GR 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Progesterone 18 Metoprolol tartrate 9, 17 Propofol 22 Metoprolol succinate 17, 20, 22 Prossin E2 23 Milrinone 20 Pro				
Levomepromazine hydrochloride 12 Patanol 15 Lipiodol Ultra Fluid 24 Pegylated interferon alfa-2a 21 Lisuride hydrogen maleate 18 Penicillin V 16 Loperamide hydrochloride 8 Perhexiline maleate 22 Lorafix 15 Pexsig 22 Loratadine 15 Pexsig 22 Lovir 11 Pharmacy Health Sorbolene with Glycerin 17 M Pheburane 8 Mabthera 14 Phenoxymethylpenicillin 16 Methotrexate 13 Phentolamine mesylate 20 Methoprolol - AFT CR 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol tartrate 9, 17 Progesterone 18 Metoprolol succinate 17, 20, 22 Promjectole hydrochloride 11 Milirinone 20 Prostin E2 23 Milirinone Generic Health 20 Provive MCT-LCT 1% <			·	. 1
Lipiodol Ultra Fluid				
Lisuride hydrogen maleate				
Loperamide hydrochloride 8 Perhexiline maleate 22 Lorafix 15 Pexsig 22 Loratadine 15 Pfizer Exemestane 13 Lovir 11 Pharmacy Health Sorbolene with Glycerin 17 M Pheburane 8 Methotrexate 13 Phentolamine mesylate 20 Methotrexate Sandoz 13 Phentolamine mesylate 20 Metoprolol - AFT CR 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Progesterone 18 Metoprolol tartrate 9, 17 Propofol 23 Milrinone 20 Prostin E2 23 Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Milrinone 20 Prostin E2 23 Milrinone 20 Prostin E2 23 Milrinone 20 Provive MCT-LCT 1% 23 Milrinone 20 Prostin E2 23 Milrinone 21 R				
Lorafix				
Loratadine 15 Pfizer Exemestane 13 Lovir 11 Pharmacy Health Sorbolene with Glycerin 17 M Pheburane 8 Mabthera 14 Phenoxymethylpenicillin 16 Methotrexate 13 Phentolamine mesylate 20 Metoprolol - AFT CR 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Progesterone 18 Metoprolol tartrate 9, 17 Propofol 23 Milirinone 20 Prostin E2 23 Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Misoprostol 22 R Modecate 24 Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Mottis 11 Rapamune 15 Movapo 21 Recrowinant factor VIIa 8 Movapo 21 Retrovir 10 Nylan Clomiphen 10	·			
Dovir			•	
Mabthera 14 Pheburane 8 Mabthera 14 Phenoxymethylpenicillin 10 Methotrexate 13 Phentolamine mesylate 20 Metoprolol - AFT CR 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Progesterone 18 Metoprolol tartrate 9, 17 Propofol 23 Milrinone 20 Prostin E2 23 Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Minirin 23 Pytazen SR 8 Misoprostol 22 R Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motrig 12 Recombinant factor VIIa 8 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18				
Mabthera 14 Phenoxymethylpenicillin 10 Methotrexate 13 Phentolamine mesylate 20 Metoprolol - AFT CR 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Progesterone 18 Metoprolol succinate 9, 17 Propofol 23 Milrinone 20 Prostin E2 23 Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Misoprostol 22 R Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11 Neostigmine metilsulfate with glycopyrronium bromide 18 Sensipar 20 Nortriptyline hydrochloride 12		11		
Methotrexate 13 Phentolamine mesylate 20 Methotrexate Sandoz 13 Polyvinyl alcohol 24 Metoprolol - AFT CR 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Progesterone 18 Metoprolol tartrate 9, 17 Propofol 23 Milrinone 20 Prostin E2 23 Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Misoprostol 22 R Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 Naglazyme 19 Ropinirole hydrochloride 11 Neostigmine metilsulfate with glycopyrronium bromide 18 Rocuronium bromide 11 Nortriptyline hydrochloride 12 Siltuximab 18 Nortr		1/		
Methotrexate Sandoz 13 Polyvinyl alcohol 24 Metoprolol - AFT CR 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Progesterone 18 Metoprolol tartrate 9, 17 Propofol 23 Milrinone 20 Prostin E2 23 Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Misoprostol 22 R Misoprostol 22 R Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 Neostigmine metilsulfate with glycopyrronium bromide 18 Rocuronium bromide 18 Neostigmine metilsulfate with glycopyrronium bromide 11 Sensipar 20 Nortriptyline hydrochloride 12 Siltuximab 18 NovoSeven RT				
Metoprolol - AFT CR. 17, 20, 22 Pramipexole hydrochloride 11 Metoprolol succinate 17, 20, 22 Progesterone 18 Metoprolol tartrate 9, 17 Propofol 23 Milrinone 20 Prostin E2 23 Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Minirin 23 Pytazen SR 8 Misoprostol 22 R 8 Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11 Neostigmine metilsulfate with glycopyrronium bromide 18 Ropinirole hydrochloride 11 Norpress 12 Siltuximab 12 Nortriptyline hydrochloride 12				
Metoprolol succinate 17, 20, 22 Progesterone 18 Metoprolol tartrate 9, 17 Propofol 23 Milrinone 20 Prostin E2 23 Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Minirin 23 Pytazen SR 8 Misoprostol 22 R Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motetis 11 Rapamune 15 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11 Neostigmine metilsulfate with glycopyrronium bromide 18 Sensipar 20 Nivolumab 13 Sertraline 12 Nortriptyline hydrochloride 12 Sitluximab 18			Praminevole hydrochloride	. ∠
Metoprolol tartrate 9, 17 Propofol 23 Milrinone 20 Prostin E2 23 Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Misoprostol 22 R Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motetis 11 Rapamune 15 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Neostigmine metilsulfate with glycopyrronium bromide 18 Ropinirole hydrochloride 11 Neorriptyline hydrochloride 11 Sensipar 20 Nortriptyline hydrochloride 12 Siltuximab 18 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Om			Progestoropo	. I
Milrinone 20 Prostin E2 23 Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Minirin 23 Pytazen SR 8 Misoprostol 22 R Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motetis 11 Rapamune 15 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11 Neostigmine metilsulfate with glycopyrronium bromide 18 Ropinirole hydrochloride 11 Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 Olopatadine 19 Sodium chloride 9			Proposol	. I
Milrinone Generic Health 20 Provive MCT-LCT 1% 23 Minirin 23 Pytazen SR 8 Misoprostol 22 R Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motetis 11 Rapamune 15 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11 Neostigmine metilsulfate with glycopyrronium bromide 11 Sensipar 20 Norpress 12 Siltuximab 12 Norpress 12 Siltuximab 12 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 Olopatadine 19 Sodium chloride 9 Olopatadine			Proofin E0	. 2
Minirin 23 Pytazen SR 8 Misoprostol 22 R Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motetis 11 Rapamune 15 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11, 12 Neostigmine metilsulfate with glycopyrronium bromide 1 Sensipar 20 Nivolumab 13 Sertraline 12 Nivolumab 13 Sertraline 12 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate with chondroitin sulphate 16				
Misoprostol 22 R Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motetis 11 Rapamune 15 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11, 12 Neostigmine metilsulfate with glycopyrronium bromide 11 Sensipar 20 Nivolumab 13 Sertraline 12 Nivolumab 13 Sertraline 12 Nortriptyline hydrochloride 12 Sirluximab 18 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16				
Modecate 24 Ramipex 11 Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motetis 11 Rapamune 15 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11, 12 Neostigmine metilsulfate with glycopyrronium bromide 5 5 Nivolumab 11 Sensipar 20 Nivolumab 13 Sertraline 12 Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16				
Morphine sulphate 12 Ranbaxy-Cefaclor 10 Motetis 11 Rapamune 15 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Neostigmine metilsulfate with glycopyrronium bromide 19 Ropinirole hydrochloride 11, 12 Neostigmine metilsulfate with glycopyrronium bromide 11 Sensipar 20 Nivolumab 13 Sertraline 12 Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16				4
Motetis 11 Rapamune 15 Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11, 12 Neostigmine metilsulfate with glycopyrronium bromide 5 5 Nivolumab 11 Sensipar 20 Nivolumab 13 Sertraline 20 Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16				
Motrig 12 Recombinant factor VIIa 8 Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11, 12 Neostigmine metilsulfate with glycopyrronium bromide 1 Sensipar 20 Nivolumab 13 Sertraline 20 Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16	·			
Movapo 21 Retrovir 10 Mylan Clomiphen 10 Rituximab 14 Naglazyme 19 Ropinirole hydrochloride 11, 12 Neostigmine metilsulfate with glycopyrronium bromide 11 Sensipar 20 Nivolumab 13 Sertraline 12 Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16				
Mylan Clomiphen 10 Rituximab 14 N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11, 12 Neostigmine metilsulfate with glycopyrronium bromide S S Divolumab 11 Sensipar 20 Nivolumab 13 Sertraline 12 Nortriptyline hydrochloride 12 Siltuximab 18 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16	ů .			
N Rocuronium bromide 18 Naglazyme 19 Ropinirole hydrochloride 11, 12 Neostigmine metilsulfate with glycopyrronium bromide 5 11 Sensipar 20 Nivolumab 13 Sertraline 12 Siltuximab 18 Norpress 12 Siltuximab 18 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 9 O Sodium chloride 9 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16	•			
Naglazyme 19 Ropinirole hydrochloride 11, 12 Neostigmine metilsulfate with glycopyrronium bromide 11 Sensipar 20 Nivolumab 13 Sertraline 12 Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16		10		
Neostigmine metilsulfate with glycopyrronium bromide \$ bromide 11 Sensipar 20 Nivolumab 13 Sertraline 12 Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 0 Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16				
bromide 11 Sensipar 20 Nivolumab 13 Sertraline 12 Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16		19		1, 1
Nivolumab 13 Sertraline 12 Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16			=	
Norpress 12 Siltuximab 18 Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 O Sodium chloride 9 Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16		• •		
Nortriptyline hydrochloride 12 Sirolimus 15 NovoSeven RT 8 Slow-Lopresor 9 0 Sodium chloride 9 0 Olopatadine 19 Sodium hyaluronate 15 0 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16				
NovoSeven RT8Slow-Lopresor90Sodium chloride9Olopatadine19Sodium hyaluronate15Omeprazole8, 22Sodium hyaluronate with chondroitin sulphate16				
OSodium chloride9Olopatadine19Sodium hyaluronate15Omeprazole8, 22Sodium hyaluronate with chondroitin sulphate16				
Olopatadine 19 Sodium hyaluronate 15 Omeprazole 8, 22 Sodium hyaluronate with chondroitin sulphate 16	NovoSeven RT	8		
Omeprazole	-			
	•			
Ondansetron				
	Ondansetron	12	Sodium phenylbutyrate	

Index

Pharmaceuticals and brands

Spiriva	15,	19
Spiriva Respimat	15,	19
Sylvant		18
Synacthen		10
Synacthen Depot		10
Т		
Tenoxicam		11
Terazosin		9
Tetrabenazine		11
Tetracosactide		10
Tetracosactrin		10
Thymol glycerin		17
Tilcotil		11
Timolol		16
Timoptol XE		16
Tiotropium bromide		
Tranexamic acid		8
U		
l Iroa		q

Utrogestan	18
V	
Velcade	13
Verapamil hydrochloride	. 0
Vfend	10
Viekira Pak	11
Viekira Pak-RBV	11
Viscoat	16
Vistil	24
Vistil Forte	24
Vivonex TEN	24
Voriconazole	10
W	
Water	. (
Υ	
Yellow jacket wasp venom	24
Z	
Zidovudine	10

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